

June 30, 2024



Mike DeWine, Governor Jon Husted, Lt. Governor Kara Wente, Director

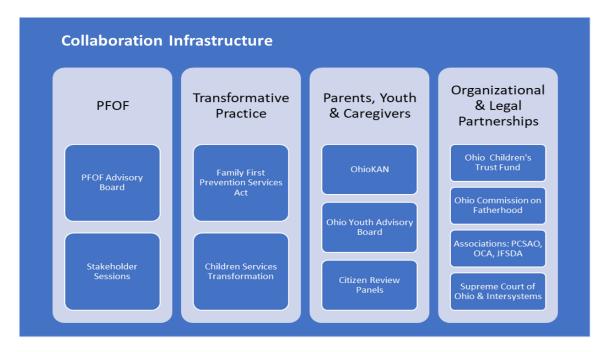
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#### I. Collaboration

# Ongoing Stakeholder Consultation, Collaboration and Engagement

To cultivate a sustainable mechanism for providing and receiving input from stakeholders, Ohio has focused on building upon the foundation of established partnerships when engaging in ongoing conversations and soliciting feedback in the development, implementation, and evaluation of the 2020-2024 Child and Family Services Plan. The following diagram captures the collaborative infrastructure that has evolved into strong partnerships.



#### Partners for Ohio's Families (PFOF)

The Ohio Department of Job and Family Services (ODJFS) established its long-standing commitment to transparency and collaboration in 2010 when Ohio was awarded a federally funded grant through the Midwest Child Welfare Implementation Center. Through this grant, Ohio worked with state and community partners to establish the Partners for Ohio's Families (PFOF) initiative.

The PFOF Advisory Board is a standing workgroup established to identify challenges, opportunities, and solutions related to children services delivery and public policy. The Board's membership represents public and private children services agencies as well as representatives from the Public Children Services Association of Ohio, the Ohio Children's Alliance, the Supreme Court of Ohio, Children and Families Section, Automated System Review Committee, adult(s) who previously experienced substitute care, and a family representative (biological, resource). As an original outcome of the initial PFOF initiative, this group has been able to achieve longevity due to its inclusive nature and consistent membership. The PFOF Advisory Board's work has focused on integrating the Child and Family Services Review (CFSR), Child and Family Services Plan (CFSP), Family First Prevention Services Act (FFPSA) goals and objectives and the recommendations of the Children Services Transformation Advisory Council.

#### Stakeholder Sessions

#### <u>Automated Systems Review Committee (ASRC)</u>

The Department continues to explore ways to improve the Children Services' automated systems within Ohio. Hearing concerns with information sharing, access, duplication of entry, and burdensome functionality within Ohio's Comprehensive Child Welfare Information System, Ohio created the Automated Systems Review Committee (ASRC) to address these concerns and reports out to the PFOF Advisory Board.

It was critical to have representation from all impacted areas of the user community on the ASRC which includes public children services agencies (PCSA), private network agencies, the Public Children Services Association of Ohio (PCSAO), the Ohio Children's Alliance (OCA), a person with lived experience, and system and policy representatives. This committee helped conduct a comprehensive review of Children Services' systems which identified five findings:

- Inefficiency & Repetition
- Time Consuming & Access Limitations
- Unclear Training and Resources
- Nonintuitive Interface
- Inconsistent Communications

Committee members continue to provide ongoing reviews and feedback on planned system enhancements. To date the committee has provided critical input on the following automated systems work:

- Drafting solutions for finding beds for children in custody.
- Ohio Certification for Agencies and Families (OCAF)
- Taking Early Action Matters (TEAM) Ohio.
- Ohio Adoption Grant Program (OAGP) Application Site and interface with Ohio SACWIS
- CAPS LMS dashboards
- ROM Cloud Migration
- Children Services Customer Care Center
- Human Center Form Redesign
- Changes to Medicaid eligibility determinations for children in custody or who receive an adoption subsidy or kinship assistance payment.
- Bridges Financial Redesign
- NIECE 2.0
- CANS IT System interface with Ohio SACWIS
- Placement Location Solution

### **Listening Sessions**

Listening sessions, instituted in 2022, are designed and held to gather feedback and suggestions from stakeholders to further inform policy and programming. Amended House Bill 33 of the 135<sup>th</sup> General Assembly was signed by Governor Mike DeWine on July 4, 2023, and included numerous statutory additions/revisions around alleged perpetrator notification, due process, and creating an

expungement policy. Over the course of the Summer and Fall of 2023, the department held listening sessions with PCSAs, those with lived experience including former foster youth, private child placing agencies (PCPA), and private non-custodial agencies (PNA) to gather feedback on alleged perpetrator notifications, report disposition appeal processes, expungement, and considerations to be made when developing/revising rules contained in the Ohio Administrative Code (OAC).

Amended House Bill 33 also made statute changes that allowed for the creation of a continuous certification process for agencies, foster homes, and adoptive homes. Over the Summer and Fall of 2023 listening sessions were held with PCSAs, PCPAs, and congregate care agencies to gather feedback on ways that continuous certification can streamline processes and reduce administrative burden. Additional sessions which focused on the foster and adoptive home homestudy and update process occurred in April 2024.

The Department has also been working on revising the Individual Child Care Agreement (ICCA). Listening sessions were held with foster parents in February 2023 and PCSAs in May, 2023 to gather information on the pain points of using the ICCA, ideas for improvement, and how to make it informative yet easier to keep updated.

#### Stakeholder Feedback on Rule Development

The department is currently completing the five-year rule review process for OAC Chapter 5101:2-36 Screening and Investigation rules. The department partnered with the PCSAO and numerous Ohio PCSAs to gather feedback and suggestions during bi-weekly meetings held from March 2023 through January 2024. Recommendations voted on by the PCSA workgroup members were accepted in the revised rules when there was not a compromise to child safety or in conflict with federal law or the Ohio Revised Code (ORC).

Rules impacted by continuous certification are currently going through the promulgation process. Listening sessions were held with stakeholder groups such as the PCSAO, OCA and the Ohio Youth Advisory Board (OYAB) to comment and make recommendations on proposed rules before going into the formal process.

#### **Transformative Practice**

#### Family First Prevention Services Act (FFPSA)

#### **Prevention Services**

Family First focuses on transforming children services. This work is aligned with and supports the priorities of Ohio's state partner agencies by contributing to Ohio's overarching goals for children and families, including a consistent framework and approach for Ohio's work in all areas of the state, a statewide practice model and vision for children and family services broadly, and equity in access to responsive prevention services.

Ohio has expanded Family First Prevention Services by leveraging funds to expand Multisystemic Therapy (MST) and Functional Family Therapy (FFT) teams, resulting in 14 new teams. Additionally, Ohio has grown capacity in Healthy Families America (HFA) and Parents as Teachers (PAT) adding 851 new slots.

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) awarded a contract to Case Western Reserve University (CWRU) Center for Innovative Practices at the Begun Center for Violence Prevention Research and Education, a part of the Jack, Joseph, and Morton Mandel School of Applied Social Sciences (CIP/Begun/MSASS), for the establishment of a new statewide Child and Adolescent Behavioral Health Center of Excellence (COE). Among the primary responsibilities of the COE is on building and sustaining a standardized assessment process, evaluating the effectiveness of services, and expanding service and care coordination capacity for children with complex behavioral health needs and their families. The COE also provides orientation, training, coaching, mentoring, and other functions/supports as needed to Ohio's statewide child caring provider network.

Additionally, the COE assumed primary responsibility for training and providing technical assistance for CANS assessors through the Qualified Individual requirements and for the purposes of determining eligibility for youth enrolled in the Ohio Department of Medicaid's OhioRISE, behavioral health managed care plan for multi-system youth. The COE is also a part of designing Ohio's Motivational Interviewing (MI) program and provides training, coaching, and fidelity monitoring of MI. In addition to Motivational Interviewing, Ohio plans to implement Triple P Online in Phase 2 of the Prevention Services Plan. The Department has worked closely with the Ohio Children's Trust Fund to leverage existing partnerships and infrastructure related to Triple P Online to be able to roll the program out with statewide capacity.

#### **Qualified Residential Treatment Programs**

Qualified Residential Treatment Program (QRTP) requirements went into effect on October 1, 2021. As of February 2024, there were 116 ODJFS certificate QRTPs and 30-OMHAS certified QRTPs, for a total of 146 in the state. Ninety percent of ODJFS beds are compliant and 100% of OMHAS beds are complaint, for a total of 95% QRTP compliant beds in the state. Ohio offered funding opportunities to assist residential providers become compliant with the new requirements and subsequently assisted with maintaining compliance. As of October 1, 2024, all residential providers must be QRTP compliant to maintain certification in Ohio.

Additionally, as of October 1, 2021, all children placed in QRTPs were required to receive an Ohio Children's Initiative Child and Adolescent Needs and Strengths (CANS) assessment confirming the placement and level of care is appropriate for the individual child. The CANS assessment is administered by a Qualified Individual trained and certified in the Ohio Children's Initiative Brief and Ohio Children's Initiative Comprehensive CANS. The assessment is completed in conjunction with the Family and Permanency Team for the child, which includes appropriate family members and professionals who are a resource to the child and family. Both the Qualified Individual and Family and Permanency Team consider the child's short and long-term mental health and behavioral health goals when determining the most effective and appropriate level of care in the least restrictive environment.

The Department has been working with the Ohio Department of Mental Health and Addiction Services and the Ohio Department of Medicaid in implementation of the CANS assessment. Information from each completed assessment for QRTP purposes is recorded in Ohio SACWIS. Ongoing training, certification, professional development and coaching for CANS assessors is available through the Child and Adolescent Behavioral Health Center of Excellence. Additionally, ongoing technical assistance related to QRTP, and CANS requirements is provided to PCSAs and private agencies.

#### **Children Services Transformation (CST)**

The Children Services Transformation Advisory Council was established in November 2019 by Governor DeWine to focus on improving outcomes for Ohio's children and families. The Governor was committed to re-envisioning Ohio's children services system, in partnership with Ohio's PCSAs, to ensure that every child who connects with it is afforded the same services and opportunities for lifelong success.

In November 2020 the council issued 37 recommendations that were divided under the following action areas: Prevention, Workforce, Practice, Kinship, Foster Care, Adoption, and Juvenile Justice. As of March 2024, 30 recommendations are fully implemented, and the remaining 7 recommendations are partially implemented. The Governor established the Department of Children and Youth (Ohio DCY) on July 4, 2023, to ensure all Ohio children have the opportunity to reach their full potential. The mission of DCY is to promote positive, lifelong outcomes for Ohio youth through early intervention, quality education, and family support programs.

A transitional report is anticipated to be complete by the end of 2024 which will provide a final update on the Children Services Transformation efforts as it gets incorporated into the daily work of the new department.

#### **Parents, Youth & Caregivers**

#### **Ohio Kinship and Adoption Navigator Program**

Ohio continues to partner with Kinnect as the vendor for the Ohio Kinship and Adoption Navigator Program (OhioKAN). The OhioKAN program was developed and implemented through input from stakeholder groups, consisting of kinship and adoptive families, professionals working with kinship and adoptive families, and others related to this work. OhioKAN continues to utilize Regional Advisory Councils (RACs) and the Statewide Advisory Council (SAC). These councils are charged with supporting implementation and evaluation, developing awareness, and building capacity for kinship and adoptive families in the community. Each council consists of a variety of stakeholders, which may include children services agencies, Area Agency on Aging, schools, and others. These councils are required to seek members with lived experience related to kinship or adoption.

OhioKAN partnered with ODJFS to implement the statewide Post Adoption Special Services Subsidy (PASSS). PASSS provides adoptive families with funding to cover needs related to mental health, developmental, or physical concerns. PASSS previously was administered through the counties, but

the Children Services Transformation Council recommended moving PASSS to the state to provide consistent and equitable administration of the program. To implement and enhance the program, a variety of stakeholders provided input, which included a focus group with adoptive parents, conversations with PCSAs, and a workgroup with the agency and OhioKAN staff. In the first year, counties submitting applications for PASSS increased from 58 to 69 out of 88.

OhioKAN, in partnership with ODJFS, also expanded services to include a Youth Navigator Network (YNN). Launched in October of 2022, the YNN was built on the same model of navigation as OhioKAN, but is specialized for young people, ages 14 – 21, who have a history of children services involvement. Development and implementation of YNN also utilized input from stakeholder groups, consisting of foster alumni, professionals working with youth, advocates, and others related to this work. YNN continues to receive program feedback through the Young Adult Advisory Council (YAAC).

Including the voice of people with lived experience aligns with OhioKAN's values and supports the Inclusion, Diversity, Equity, and Access (IDEA) principles. To further engage those voices, OhioKAN encourages people with lived experience to apply for any of the staff positions within the program.

#### **Ohio Youth Advisory Board (OYAB)**

Ohio continues to support inclusion of youth voice (i.e., the perspectives of those with lived experience in foster care) in the development of state and local children's services policies and programs. Through a grant with ACTIONOhio, the OYAB provides opportunities for youth in care to develop professional leadership and advocacy skills. Specific deliverables of this grant, require ACTIONOhio to:

- Assess and share information about the ongoing needs of current and former foster youth.
- Ensure youth perspectives are considered in the development of state-level policies and practices that affect children in care.
- Cultivate leadership skills and provide opportunities for youth to develop them.
- Support establishment of county-level youth advisory boards.
- Provide opportunities for youth to develop peer-to-peer networks.
- Help guide Ohio's implementation of the Family First Prevention Services Act by sharing the
  perspectives of those with lived experience in foster care for consideration.

OYAB members provide valuable representation at Ohio's PFOF monthly meetings, quarterly calls with agency leadership and provide youth perspective on projects including normalcy, tiered foster care, congregate care reform, enhancement of training on Independent Living services for foster parents and caseworkers, youth voice in permanency planning, maintaining sibling connections, the Bridges program, and expansion and integration of parent partner work in Ohio. The OYAB also provided key feedback across Ohio's state agencies, such as the Ohio Department of Education on Every Student Succeeds Act implementation and local school district foster care liaisons; the Ohio Department of Medicaid on OhioRISE; the Psychotropic Toolkit, and Medicaid services for emancipated young adults. Ohio provides financial support to the nine local youth advisory boards across the state.

#### **Citizen Review Panels (CRP)**

Ohio's Citizen Review Panels (CRPs) are geographically based, and each panel focuses on a specific topic of concentration. The panels are titled:

- Central Ohio Panel
- Northeast Ohio Panel
- Northwest Ohio Panel
- Southeast Ohio Panel
- Southwest Ohio Panel

The CRPs are charged with reviewing children services practices across Ohio and making recommendations applicable statewide rather than narrowed to their respective geographic location. Each panel provides perspectives from the stakeholder community on child services practices, policies to improve safety, permanency, and the immediate and long-term well-being of children. Panel members are volunteers and are not appointed or compensated for their work. They were strategically recruited to ensure the panels have equal representation among gender, race, age, and professional discipline. The CAPTA Plan Updates contained in this report details the following two objectives for the CRP program:

- Evaluate the impact of current child services procedures and practices on children and families in the community.
- Provide the information to the public for outreach.

# Organizational & Legal Partnerships

#### Ohio Children's Trust Fund

The Ohio Children's Trust Fund (OCTF) is Ohio's Community-Based Child Abuse Prevention (CBCAP) state lead agency. With the establishment of the Department of Children and Youth (DCY) on July 4, 2023 OCTF is now housed within the newly created DCY. DCY now coordinates programs from across five legacy state agencies, which includes children services and child abuse prevention.

As mentioned previously, in recent years across Ohio, multiple systems have recognized the importance of shifting to a primary prevention approach. This has been identified as a priority from Governor DeWine and has informed many state agency initiatives. Reaching families before they are in crisis and connecting them to care early on are key components of the new state agency in better serving Ohio families. This alignment also supports continued communication and collaboration between Ohio's CBCAP state lead agency and the state's children services agency. For example, the Executive Director of OCTF participated in planning meetings for the development of the 2020-2024 CFSP, where OCTF offered input into strategies to align primary, secondary, and tertiary prevention services across the continuum of care.

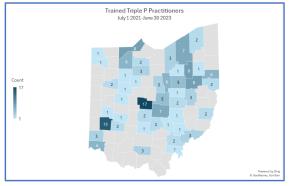
During the reporting periods, OCTF continued to partner with its children services counterparts during its IV-B Process and the Integration of Prevention Efforts within Ohio's *Child and Family Services Plan* (CFSP) goals. Each strategy included in the CFSP was designed to build upon existing strengths or to

address areas of practice needing improvement, with one of the ultimate goals of improving Ohio's safety, permanency, and well-being outcomes. OCTF worked with its children services partners to uniformly implement innovative and evidence-based or evidence-informed children services practices to improve safety, permanency and well-being outcomes for children and families.

Throughout the last FFY, OCTF collaborated with children services partners to plan for the expansion of the Positive Parenting Program (Triple P). As part of this discussion, Ohio strategized opportunities for leveraging prevention services funding across the continuum of prevention services to increase overall capacity for evidence-based and evidence-informed services for families.

By leveraging state resources and federal funding, Ohio was able to provide additional training in the Triple P model in FFY 2023, with a goal to help build capacity across the prevention continuum, as well as to serve parents and caregivers who were participating in Triple P programming throughout Ohio. Building off the trainings conducted in FFY 2022 through FFY 2023, OCTF hosted over 25 unique training opportunities, training providers in all eight regions in 230 training slots (see map below). Additionally, Ohio created a pilot program recruiting 7 county PCSAs last year (Fairfield, Knox, Logan, Licking, Summit, Wayne, and Van Wert), with the goal of piloting how the Triple P Online program will be operationalized as part of the Family First Prevention Services work. Beginning in FFY 2024, Ohio continued to recruit new PCSAs to participate in this pilot. Since the pilot launched, 62 families eligible for FFPSA prevention services have engaged in Triple P Online programming.

Through expansion of Triple P Online services, Ohio became involved with the *American Public Human Services Association Preventing Child Welfare Involvement through Economic and Concrete Supports* learning collaborative and received additional innovative funds to evaluate the added benefits of providing economic and concrete supports (families who engage in Triple P Online programming can receive up to \$500). Families engaged in both primary prevention services, as well as tertiary prevention services, may be eligible for additional concrete supports based on increased financial needs as determined by responses regarding economic hardships through the *Protective Factors Survey-2*<sup>nd</sup> *Edition Concrete Supports Subscale*.



Another example of the strong partnership between OCTF and Ohio's children services leads is related to the Family Success Network (FSN) pilot program, which began in three Northeast Ohio counties. OCTF was awarded one of nine federal Community Collaborations to Strengthen and Preserve Families grants, which is supporting this pilot and now has been expanded to additional counties throughout

Ohio. FSN includes the utilization of several evidence-based practices (EBPs), such as the Triple P Positive Parenting Program, Transition to Independence Process Model, and Motivational Interviewing, which are being utilized with families who do not meet Ohio's candidacy definition for Family First Prevention Services Act prevention services.

#### The Ohio Commission on Fatherhood

The Ohio Commission on Fatherhood reconvened the workgroup that developed the *Best Practice Guide* for Engaging Fathers: A Toolkit for Children Services Staff because a determination was made that the toolkit required additional updates to remain aligned with system changes. OCF continues to promote its use among children services workers. The toolkit brings an awareness of the important role fathers play in the lives of their children.

In addition to the Toolkit developed specifically for children services staff, the Commission continues to advocate for engaging fathers at the case plan development stage when children first become involved with Child Protective Services. To include fathers and other potential support people for the child, ODJFS,OFC staff requested input from the Commission on engaging fathers and fatherhood programs in policy development and in the development of a Concurrent Case Plan. Consistent conversations concerning specific steps taken during diligent search efforts for involved fathers and pursuing paternal kinship options will continue.

The Ohio Commission on Fatherhood collaborates on critical strategies that can be used by children services agencies and their staff to engage fathers in the lives of their children. Staff from the ODJFS/DCY training unit joined monthly Commission funded grantee meetings to learn more from fatherhood practitioners that engage fathers and families daily. The mission for the training unit is to hear from fatherhood participants regarding what fathers are saying about children services and engage fatherhood practitioners in recommendations focused on better training for children services workers.

Over the past year, the Ohio Commission on Fatherhood implemented the EPIC (Engaging Practices to Inspire Change) pilot project. This pilot project funds a Father Engagement Specialist (FES) from Passages Fatherhood program inside of the Cuyahoga County Children Services agency. The purpose of the pilot is to assist fathers to: establish and build healthy relationships with their child and parenting partner and help fathers build skills and develop readiness for the workforce.

The Commission regularly hosts public forums and other forms of outreach, including fatherhood/child support presentations and re-entry fairs in state prisons. The Ohio Commission on Fatherhood works closely with the Ohio Department of Rehabilitation and Correction and Passages Fatherhood program to implement Fatherhood and Motherhood Conferences inside the facilities. Children Services staff provide workshops during the conferences to ensure that incarcerated parents understand their rights and responsibilities. Governor DeWine recognized June as Responsible Fatherhood Month, and the Commission established mini grants for father/child events. They also participate in, Ohio Collaborative to Prevent Infant Mortality, Ohio Department of Rehabilitation and Correction's Family Engagement Advisory Council, the Governor's Taskforce on Eliminating Disparities in Infant Mortality, The Ohio State University's Statewide Family Engagement Advisory Council, Ohio Department of

Developmental Disabilities (DODD) Fatherhood Work Group, Ohio Fetal Alcohol Spectrum Disorders (FASD), Ohio Council to Advance Maternal Health (OH-CAMH), Ohio Domestic Violence Network (ODVN)/Ohio Men's Action Network (OHMAN), and the Federal Responsible Fatherhood Roundtable. The Commission is regularly invited by federal agencies and others states to present information on the Ohio Commission on Fatherhood, its funding, programming, and policy advocacy.

The Commission designated State Fiscal Year 2024 funding for regional grantee programs. These programs provide services to low-income fathers and families to include parenting classes, coparenting/healthy relationship skills and economic stability services (job readiness, employment, and job retention). The Commission's plans are to continue this strategy in SFY 2025. Additionally, the Commission is increasing its focus on serving fathers who are incarcerated, working with expectant and new fathers, and advocacy work for the fathers' physical and mental well-being.

The Commission also funds pilot projects. For example, the Dads2B program which is an early intervention strategy for expectant and new fathers with a focus on breastfeeding, ABC's of safe sleep, safe birth spacing, and smoking cessation. Other programs funded in SFY 24 are No Kidding Ohio, a teen pregnancy prevention and young parent workforce project for middle schools in urban, suburban, and rural Ohio, Fathers at the Education Table, which is a program focused on working with fathers, whose children are on IEP's (Individualized Education Plans) and 504 plans, as well as a legal aid pilot called the Parenthood Project, which assists fathers with navigating systems like child support and the court. The Commission also partners with the State of Ohio Collective to operate the Families Read Pilot program, which provides literacy support for middle school aged students and his/her father. Finally, the Commission funds Choices Leadership Energy Attitude Now (CLEAN) Way Pilot program, which provides financial and business education to justice involved fathers.

# Collaboration with State Courts, members of the legal and judicial community, Court Improvement Program

Ohio's strategic alignment of CFSP/APSR implementation with the annual *Children's Justice Act* (CJA) and *Court Improvement Program* (CIP) serves as a driver for ongoing ODJFS/Ohio DCY collaboration with federal initiatives, the legal and judicial community, and other system partners. . Court related strategies outlined in the CFSP/APSR are also outlined in or complementary to the annual CJA and CIP reports. The SCO's Subcommittee on Child Abuse, Neglect, and Dependency (CAND), which serves as both the CJA and CIP multidisciplinary task force, provides oversight of these strategies and recommendations.

#### **Supreme Court of Ohio**

#### **Quality Legal Representation**

#### **Training**

Ohio began partnering with the National Association of Counsel for Children (NACC) in 2020 to provide child welfare law training and resources to attorneys, GALs, and courts. Since the partnership began, Ohio child welfare attorneys have received the national Red Book training, Ohio specific child welfare

law training, and multidisciplinary legal representation training though the NACC. In 2022, NACC was approved to begin certifying Ohio attorneys as child welfare law specialists (CWLS).

In 2023, using feedback from surveys and a training participant focus group, NACC developed an updated Ohio specific child welfare attorney training. The virtual four series training was held in October 2023. It was designed for Ohio attorneys who represent children, parents, Juvenile or Family Court Staff, Children's Services Staff or any community professionals working in children services law. The training included practice tips, hypothetical case studies, and polls, grounded in Ohio law, to share knowledge, skills, and best practices aimed at promoting high quality representation in Ohio children services cases.

## **Multidisciplinary Legal Representation Pilot**

The pilot is in its third year of implementation. Over the last two years, the pilots have served over 250 families with 600 children. During the second year, pilots received a total of 225 referrals. Of those referrals, 133 resulted in enrollment. Reasons for referral included: truancy (19%), mental health needs (16%), substance use (15%), domestic violence (12%), and lack of housing (12%). Pilots also received a total of 91 referrals for a variety of other legal and non-legal reasons, including physical health concerns, medical neglect allegations, utility shutoff, custody and visitation matters, caregiver incarceration, and caregiver death. Pilots closed 104 client cases. Of these cases, 64% were closed after clients completed the program successfully and resolved their case. In 22% of cases, clients stopped responding. In three cases, pilot staff terminated services with clients for reasons other than the provided categories. In two of these cases, the pilot staff determined that they could not be of further assistance. The client in the third case was transferred to a different court-operated program. Other reasons for case closure (11%) include courts granting legal custody to a relative caregiver or the PCSA, families leaving the jurisdiction, and inability to avoid a formal court filing. Few clients experienced deeper penetration into the child welfare system due to abuse, neglect, or dependency (AND) allegations. Eight clients (4%) had subsequent AND referrals after enrollment in a pilot program, and six clients (3%) had allegations that were substantiated. Nine clients (5%) had children enter foster care after enrollment. Of the 145 pre-petition clients served in Year 2, 11 cases (8%) progressed to a formal filing in juvenile court. Of the 54 post-petition clients, 13 clients (24%) were reunified with one or more children after program enrollment.

#### **Court Engagement**

In November 2020, the Children Services Transformation (CST) Advisory Council's final report identified juvenile justice system collaboration and engagement as critical components for successful transformation of the children services system. To this end, Ohio developed a plan to identify best practices that support and promote these critical components. To support this work, a senior staff attorney was hired to work with the Children's Justice Act project manager. Beginning in February 2023, meetings were held with all 88 children services agencies to gain a better understanding about county specific legal representation and juvenile justice system engagement. Interview participants included PCSA Directors/administrators, supervisors, agency attorneys, prosecutors, judges, magistrates, and court administrators. Nineteen topic areas were discussed with each county. Based on feedback

collected, seven themes emerged: communication, funding legal needs, practice procedures, prevention, recruitment/retention, and training. Of the seven themes, training was identified as the highest need or concern.

#### Children's Justice Act

The ODJFS/DCY is designated as the Ohio Children's Justice Act (CJA) grantee. The Department has been very strategic in the alignment of CJA recommendations with various state and federal initiatives through the intentional coordination of activities that promote cross system collaboration. The Department's Chief of Staff serves as co-chair of the CJA Task Force and is a member of the Supreme Court of Ohio's (SCO) Advisory Committee on Children and Families. The statutorily required CJA taskforce also serves as the SCO Court Improvement Taskforce (CIP). Together, this Task Force is also known as the SCO's Subcommittee on Child Abuse, Neglect, and Dependency (CAND). The CAND provided oversight on two CFSR PIP strategies and thirteen action steps developed to ensure that children receive permanency in a timely manner. As in prior years, Ohio's CFSP included five strategies that are overseen by the Task Force. All CFSP strategies overseen by CAND have been incorporated within the CJA annual report and proposed activities.

### Diversity, Equity, and Inclusion (DEI)

#### **OFC DEI Subcommittee Work**

The ODJFS, Office of Families and Children remained committed to a focus on Diversity, Equity, and Inclusion (DEI) through continuation of the DEI Subcommittee. The Subcommittee was charged with creating, implementing, and monitoring an ongoing DEI Strategic Plan for the Office.

The Subcommittee's Strategic Plan focused on 3 goals:

- 1. **Our People**: Create an inclusive, culturally competent work environment comprised of a diverse workforce that is representative of the populations we serve.
- 2. **Our Policy**: Acknowledge and challenge implicit and institutional bias and barriers by ensuring that policies and procedures are equitable and inclusive.
- 3. **Our Public Service**: Utilize culturally competent practices and standards in service delivery and stakeholder engagement to ensure inclusion, equity, and accessibility.

In July of 2023, the Subcommittee released a Culture and Climate Assessment to compile baseline data and inform next steps in meeting internal DEI needs. The results indicated that staff support the discussions about the impact of DEI in their work and felt comfortable having these discussions. Staff felt that leadership supported internal discussions related to DEI and value the different talents, skills, and backgrounds of the people on their teams. However, staff acknowledged that they needed more support and education to actively advance DEI in their projects. Based on the results the DEI Subcommittee had planned to explore the creation of safe spaces to educate, promote allyship, and recruit staff.

In preparation for the transition from the ODJFS, Office of Families and Children to Ohio DCY, the subcommittee provided the following recommendations to continue the work in the new agency:

- Assess DEI efforts of each agency moving to Ohio DCY.
- Develop a DEI vision statement for DCY to unify the Department and create a sense of inclusion and belonging.
- Identify an executive leader to champion the DEI efforts and support the work.
- Establish a diverse and inclusive Ohio DCY committee to help identify, promote, and support,
   DEI efforts.
- Align all DEI efforts to help the state move toward the same goal.
- Provide DEI Leadership training as soon as possible following the transition.
- Continue with the administration of staff assessments based on the positive results of the OFC Culture and Climate assessment.

#### **OhioKAN work on DEI**

The Ohio Kinship and Adoption Navigator (OhioKAN) Program was developed in consultation with people with lived experience. Caregivers, parents, and adults raised in kinship and adopted homes were included in focus groups, Town Halls, and on the Implementation Team. Now that the program has been implemented, OhioKAN continues to intentionally include the voice of people with lived experience. OhioKAN includes a preference for people with lived experience in the Navigator job description.

OhioKAN prioritizes inclusion and access for marginalized people through their Inclusion, Diversity, Equity, and Access (IDEA) framework. This framework, developed in partnership with the Center for the Study of Social Policy (CSSP), identifies six IDEA principles and was used to review all procedures and guiding documents and develop training. OhioKAN seeks out diverse site partners to employ the navigators, such as Ethiopian Tewahedo Social Services; a social service agency working primarily with immigrants, and Spectrum of Findlay; an organization providing support and resources to the LGBTQ population. OhioKAN makes a concerted effort to reach underserved populations through advertising on targeted platforms such as Telemundo and radio stations with a higher black and brown audience. OhioKAN has a contract with Language Line for translation services, both for phone calls and documents, and access to an American Sign Language interpreter.

The effectiveness trial of OhioKAN was designed and executed with culturally responsive and equitable evaluation principles. For example, kinship caregivers and adoptive parents and service providers were actively engaged in co-defining outcomes, co-developing survey measures with strong reliability and validity, and interpreting interim and final results.

#### Ohio Child Welfare Training Program (OCWTP) Racial Equity Council

Spearheaded in 2020, OCWTP's Racial Equity Council (REC) continues to direct efforts to help Ohio address the racial disproportionality and disparity within the children services system. Racial equity and inclusion work lays the foundation for many of OCWTP's change efforts. This work has renewed energy focused on increasing diverse representation and developing practices to decrease oppressive outcomes. Since 2020, the REC has:

- Studied the demographics of the training pool to ensure greater diversity.
- Helped draft a new learning outline to help trainers incorporate diversity and racial equity concepts into training.
- Recruited trainers with specific expertise in racial equity and inclusive content.
- Offered expanded opportunities for trainers and staff, including a newly designed diversity training for trainers, to help them learn more about disproportionality and disparity as it relates to race.

All OCWTP standardized courses are developed with an intentional emphasis on cultural considerations and to ensure space is made in the classroom for appropriate discussions to unfold with participants. In 2023, OCWTP staff participated in a self-assessment to help identify future areas for skill advancement. As a result, REC offers professional development with expert-facilitated discussion on topics designed to support individual and system growth to empower action in reducing bias, inequity, and exclusion. Some topics included:

- Facilitating Challenging Conversations
- Creating and Supporting Accountability
- Recognizing and Responding to Microaggressions
- Looking at Policy/Procedures through a Race Equity and Inclusion (REI) Lens

In addition, OCWTP trainers participated in focus groups to identify development needs specific to their classrooms and course development. Trainers were offered professional development to better understand and address microaggressions.

Some high-level accomplishments of REC include:

- Monthly professional development topics to support active bias recognition and response.
- REC co-leads earned Certificates in Diversity, Equity, and Inclusion from Cornell University to support the sustainability of DEI/REI work within OCWTP.

The standardized curricula for OCWTP was completely overhauled. This effort included significant inclusion of new material on diversity and equity. All modules ensure REI issues are integrated with content wherever appropriate. In addition to the integration of REI concepts, each series included a dedicated diversity, equity, and inclusion module. A team of REI consultants reviewed all revised and newly developed modules to ensure standardized content appropriately addressed racial equity concerns as they were updated and revised.

# II. Update on Assessment of Performance, the Plan for Enacting the State's Vision and Progress to Improve Outcomes

#### A. Assessment of Performance

The Goals and Objectives established for the 2020-2024 Child and Family Services Plan (CFSP) were based on an assessment of performance of the seven Child and Family Services Review (CFSR) child and family outcomes and the seven CFSR systemic factors. Data sources used to conduct the assessment of performance included:

- Statewide Automated Child Welfare Information System (Ohio SACWIS) data
- CFSR Data Profiles
- NCANDS data
- AFCARS data
- Stakeholder feedback
- Child Protection Oversight and Evaluation (CPOE) data

#### **Safety Outcomes**

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

As shown in the table below, the Safety Outcome is comprised of two federal data indicators and one case-review measure. The table below depicts the relationship between and among the data measures, data sources, and the analytic method used.

Safety Outcome 1				
Federal Data Indicator Domain	Case-Review Domain			
(S1) Maltreatment in Care (AFCARS + NCANDS)	(Item 1) Timeliness of Initiating Investigations of			
Of all children in care during a 12-month period,	Reports of Child Maltreatment			
what is the rate of victimization per 100,000 days in	Determine whether responses to all accepted child			
foster care?	maltreatment reports received during the period			
<ul> <li>Risk Standardized Performance</li> </ul>	under review were initiated, and face-to-face			
<ul> <li>Observed Performance</li> </ul>	contact with the child(ren) made, within the time			
	frames established by agency policies or state			
(S2) Recurrence of Maltreatment (NCANDS)	statutes.			
Of all children who were victims of a substantiated	<ul> <li>Risk Standardized Performance</li> </ul>			
or indicated report of maltreatment during a 12-	<ul> <li>Observed Performance</li> </ul>			
month reporting period, what percent were victims				
of another substantiated or indicated report of				
maltreatment within 12 months of their initial				
report?				
<ul> <li>Risk Standardized Performance</li> </ul>				
<ul> <li>Observed Performance</li> </ul>				

Federal data indicators include: (1) Maltreatment in Care and (2) Recurrence of Maltreatment. Maltreatment in Care uses the AFCARS and NCANDS data sets. Recurrence of Maltreatment uses the NCANDS data set. Both indicators report their findings using two different and complimentary analytic methods. The <u>risk standardized</u> method is only valid for comparing Ohio's performance relative to other states or for comparing Ohio's risk standardized performance to prior risk standardized performance timeframes. The <u>observed performance</u> is only valid comparing Ohio specific performance, and not valid for comparing Ohio to the performance of other states.

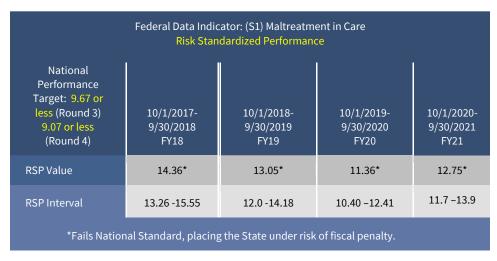
The data for the Case-Review Safety Item are obtained from CPOE Review Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment. The results are determined by sampling cases from each county's CPOE review and then pooling their results to yield statewide performance. These results reflect the Strengths and Areas Needing Improvement.

# Safety Outcome (S1) Maltreatment in Care

#### **Using Risk Standardized Performance**

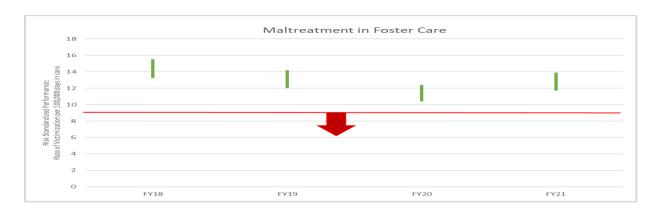
The 2020-2024 CFSP spanned CFSR Round 3 and CFSR Round 4. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators.

The Children's Bureau released the CFSR Round 4 Statewide Data Indicators (SWDIs) national performance values on June 8, 2022. Examination of Ohio's Risk Standardized Performance between FY18 and FY20 for Maltreatment in Care revealed that Ohio did not achieve the National Performance threshold for Round 3 (target = 9.67 or less) or for Round 4 (target 9.07 or less). Ohio's Risk Standardized Performance has been statistically worse than the National Performance for the last four observation periods.<sup>1</sup>



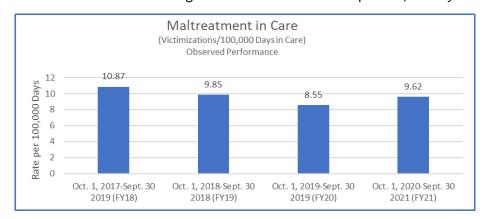
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<sup>&</sup>lt;sup>1</sup> Ohio Child and Family Service Review (CFSR 4) Data Profile, February 2023 and February 2024.

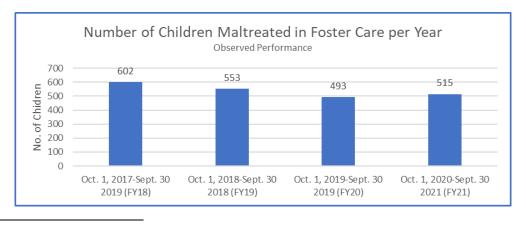


**Using Observed Performance** 

Examination of Ohio's Observed Performance over four observation periods show the rate of child victimizations while in foster care has ranged between 8.55 and 10.87 per 100,000 days in care.<sup>2</sup>

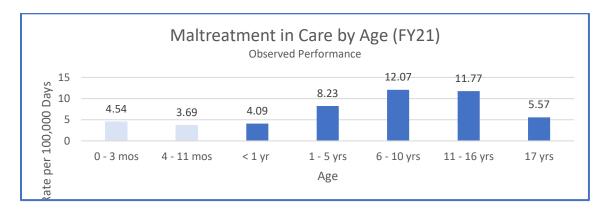


There were 515 victimizations identified during the last observation period. Over the last four years, there has been an average of 433 children victimized per year.

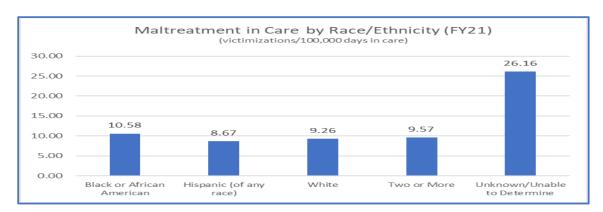


<sup>&</sup>lt;sup>2</sup> Child and Family Service Review (CFSR 4) Data Profile Context Data – Observed Performance on Safety Indicator Maltreatment in Care, February 2024.

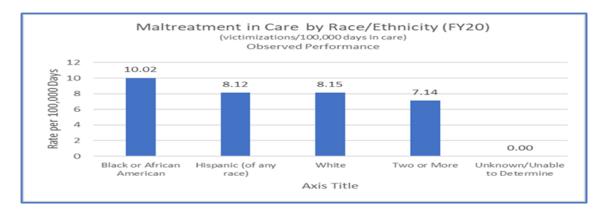
For the last observation period FY21, two age groups (6-10 years and 11-16 years) show the highest rates of maltreatment in care. The table below presents information on all age groupings.



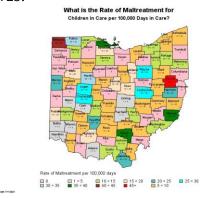
Looking at the FY21 data for race/ethnicity, there is an unusual spike in the unknown/unable to determine. Until this aberration is examined further it makes it difficult to interpret results. This aberration may be attributed to the AFCARS conversion. Until better race/ethnicity data are available, FY20 data will be used.

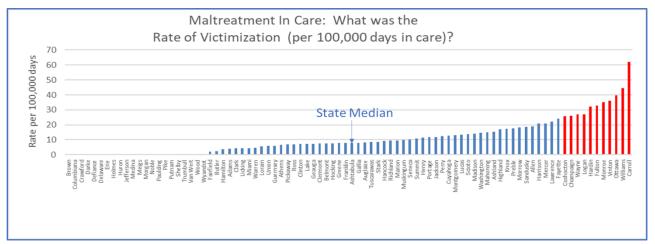


During FY20 there was a higher rate of victimization of Black/African American children when compared to White or Multi-Racial children as presented below.



The following county level map of Ohio shows a wide range in the rate of victimizations per 100,000 days in care. Ohio's observed rate is 9.62 and 37 counties have rates exceeding the state rate. Eleven counties have a higher rate than 25.





#### Maltreatment in Care: Findings at a Glance

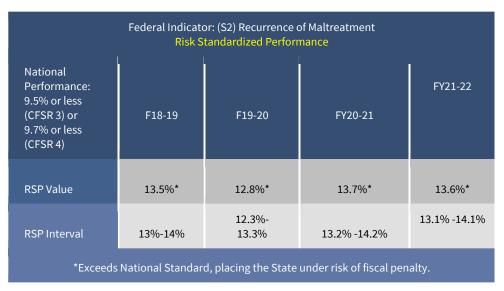
- Ohio's performance has failed to achieve the National Performance Standard on Maltreatment in Care.
- Over the last four years, a yearly average of 433 children have been maltreated in foster care in each year.
- Older youth tend to be victimized at a higher rate than younger.
- African Americans are more likely to be victims than other races.
- While the state median is 9.62, 11 counties have a victimization rate higher than 25.

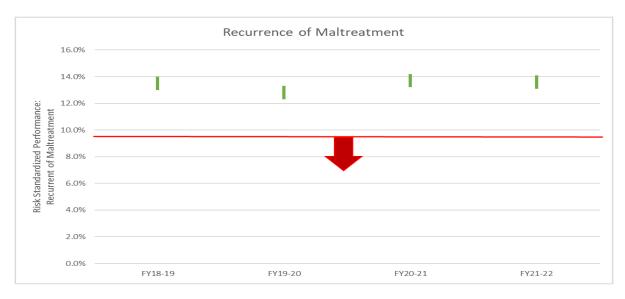
# Safety Outcome (S2) Recurrence of Maltreatment

#### **Using Risk Standardized Performance**

The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) national performance values on June 8, 2022. The Risk Standardized Performance

(RSP) for Recurrence of Maltreatment was set at 9.7% or below. During CFSR Round 3 the Risk Standardized Performance was set at 9.5% or less. The Risk Standardized Performance (RSP) scores between FY18-19 and FY20-21 revealed that Ohio did not achieve the National Performance threshold of either 9.5% or less (Round 3) or 9.7% or less (Round 4). As presented below, there was an increase in Recurrence of Maltreatment during the last observation period from the prior observation periods.<sup>3</sup> Ohio's Risk Standardized Performance was statistically worse than the national performance for all four observation periods.<sup>4</sup>



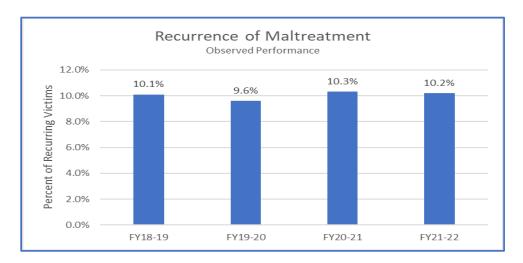


<sup>&</sup>lt;sup>3</sup> Ohio Child and Family Service Review (CFSR 4) Data Profile – Risk Standardized Performance on Safety Indicator Recurrence of Maltreatment, February 2023 and February 2024.

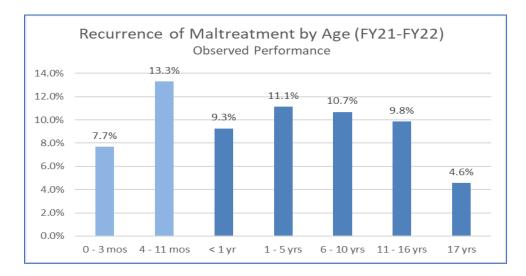
<sup>&</sup>lt;sup>4</sup> Ohio Child and Family Service Review (CFSR 4) Data Profile, February 2023 and February 2024.

# **Using Observed Performance**

The graph below presents data on Ohio's Observed Performance for Recurrence of Maltreatment over four observation periods.<sup>5</sup> Though the percentage of victims of Recurrence of Maltreatment continues to rise with 2,413 recurring victims identified in FY20-21, there were fewer victims in FY20-21 than in the two prior periods. This is because the overall number of victims of abuse or neglect decreased in the most. recent period.

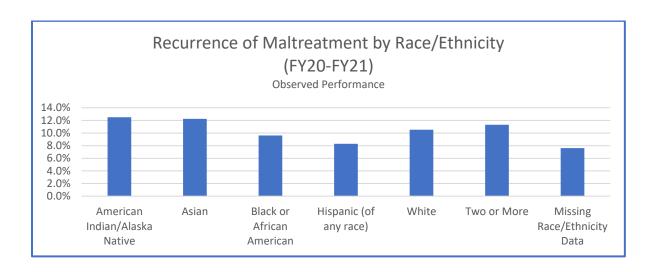


When the FY21-22 data are examined by age there was a higher percent of Recurrence of Maltreatment among children aged 4-11 months (13.3%) and-1-5 years old (11.1%). The following Table presents data for all age groupings.

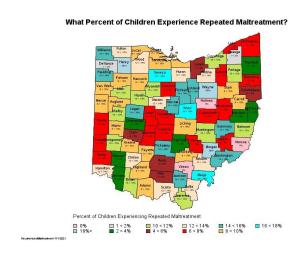


<sup>&</sup>lt;sup>5</sup>Ohio Child and Family Service Review (CFSR 4) Data Profile Context Data – Observed Performance on Safety Indicator Recurrence of Maltreatment, February 2024.

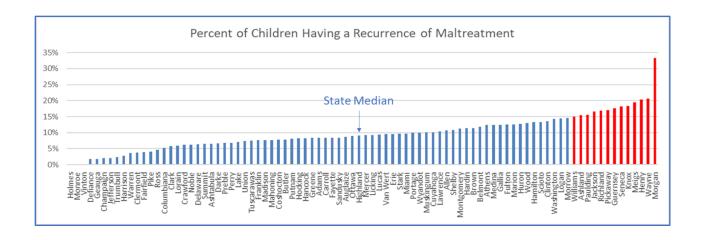
Additionally, during this observation period there is no substantial difference in rates of maltreatment by race. 9.7% of Black/African American children are re-abused, compared to 10.6% of White children, and 11.3% for children of two or more races.<sup>6</sup>



The following county level map of Ohio shows a wide range in the percent of children experiencing repeat maltreatment from 0% to greater than 18%. Ohio's observed performance is 10.2% and 32 counties have rate exceeding the State rate.



<sup>&</sup>lt;sup>6</sup> Child and Family Service Review (CFSR 4) Data Profile Context Data – Observed Performance on Safety Indicators Recurrence of Maltreatment, February 2023.



#### Recurrence of Maltreatment: Findings at a Glance

- The percent of children experiencing recurrence of maltreatment is higher than national standard.
- While 9.3% of maltreated children under 1 year experience a recurrence of maltreatment, most of those children are between the ages of 4 and 11 months.
- There is no appreciable differences by race in the recurrence of maltreatment.
- There is a large range (33.3%) in the proportion of children experiencing recurrence of maltreatment across the counties.
- 14 counties have a recurrence rate of less than 5%. 13 counties have a recurrence rate of greater than 15%. Over the past 5 years, in depth evaluation of records within Ohio SACWIS was conducted to determine the characteristics of the alleged perpetrators and the alleged child victims as well as the circumstances surrounding the abuse/neglect. This has guided the work in establishing 2025-2029 CFSP Goals, Objectives and Strategies.

#### Safety Item Measure

#### Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

#### **Examination of County CPOE Monitoring Results**

Data is integral in reporting statewide performance and evaluating changes within Ohio's children services system. ODJFS/OFC has developed reports which capture information for most of the performance measures monitored and these reports are important to the CPOE review process.

Public Children Services Agencies (PCSA) and Title IV-E courts are monitored by the department over a 24-month cycle through the Child Protection Oversight and Evaluation (CPOE) process. During the 2020-2024 CFSP, CPOE Stage 12 was being conducted. CPOE Stage 12 consisted of two Phases. Phase 1 (October 2020-September 2022) provided PCSAs and IV-E courts with an opportunity to improve performance prior to a more extensive casework evaluation. ODJFS/DCY collaborated with PCSAs and

Title IV-E Juvenile Courts to identify areas for performance improvement and cooperatively developed a Plan for Practice Advancement (PPA)-Phase 1. The agency/court PPAs were implemented and evaluated through a series of onsite visits (6), including case reviews/self-assessment/data evaluation. A comprehensive evaluation of casework practice then commenced during Phase 2 (January 2023-September 2024). CPOE Stage 12 Phase 2 assessed PCSA and Title IV-E performance regarding substantial conformity in predetermined areas of review. Phase 2 is the traditional CPOE review comprised of multiple case types using the Federal Child Family Services Review Tool (CFSR).

The following reports are discussed to gain an understanding of agency performance for Item 1 during the Entrance Conference:

- Initiation Contact Timely: CPS: Key Practice Indicators (ROM) (CFSR requirement)
- Investigations Completed Within Required Time CPS: Key Practice Indicators (ROM) (OAC requirement)

#### Phase 2 Results

Thus far, 806 cases have been reviewed for compliance with Item 1. There were 294 applicable cases identified for review. Of these, 239 cases (81.29%) were rated as a Strength and 55 cases were rated as an Area in Need of Improvement. Agencies continue to demonstrate significant improvement since CFSR Round 3, the CFSR Round 3 PIP, and Phase 1 of CPOE.

Agencies that identified Item 1 as an Area Needing Improvement included strategies in their PPA to address:

- Training
- Practice Enhancements
- Monitoring and Evaluation

Safety Outcome 1 was Substantially Achieved thus far during Phase 2 at 81.29%. This far exceeded the CFSR PIP and Phase 1 performance. While there was demonstrated improvement over time Ohio did not achieve the required federal compliance requirement of 95% to receive a rating of Substantially Achieved.

One strategy used during this 5-year period was to provide Children Services Best Practice Incentive funding to PCSAs for making marked improvements in achieving compliance with timely assessment/investigation measures. and visitation. The chart below provides a breakdown of the incentive amounts available and the measurement time frame:

#### **Children Services Best Practice Incentive Amounts and Timelines**

Achieving 95% Compliance Evaluation	Distributed evenly among all counties achieving		
Period: October 1, 2023-March 31, 2024	95%		
Timely Assessment/Investigations		\$1,025,000	
Composite Visitation Score		\$1,025,000	

Achieving 95% Compliance Evaluation Distributed evenly among all counties achieving			s achieving	
Period: April 1, 2024- September 30, 2024	95%			
Timely Assessment/Investigations		\$1,025,000		
Composite Visitation Score		\$1,025,000		
Achieving 95% Compliance Evaluation	Distributed evenly	Distributed evenly among all counties achieving		
Period: October 1, 2024- March 31, 2025		95%		
Timely Assessment/Investigations		\$1,025,000		
Composite Visitation Score		\$1,025,000		
Most Improved Evaluation Period:	Small	Medium	Large	
October 2023-March 2025				
Timely Assessment/Investigations				
1st	\$60,000	\$60,000	\$60,000	
Composite Visitation Score				
1st	\$60,000	\$60,000	\$60,000	
Bonus Incentive Evaluation Period:	Distributed evenly among all counties achieving			
October 2023-March2025	95% in both measures throughout all three			
	evaluation Periods			
Bonus Incentive Award	\$540,000			

# Safety Outcome 2: Children are safety maintained in their homes whenever possible and appropriate.

As shown in the table below, there are no Federal Data Indicators associated with Safety Outcome 2. However, there are 2 case review Items which make up the Safety Item Domain.

Safety Outcome 2				
Federal Data Indicator Domain	Case Review Domain			
None	(Item 2) Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care (CPOE)  Determine if concerted efforts were made to provide services to the family to prevent children's entry into foster care or re-entry after reunification.  Observed Performance			
	(Item 3) Risk assessment and management Determine if concerted efforts were made to assess and address the risk and safety concerns relating to the children in their own homes or while in foster care.  O Observed Performance			

#### Safety Item Measures

#### Item 2: Services to protect child in the home and prevent removal or re-entry into foster care

#### **Examination of County CPOE Monitoring Results**

During CPOE Stage 12 Phase 1 and Phase 2 the following county specific reports are discussed which helped to assess PCSA/IV-E court performance for Item 2:

- Agency Safety Plan Report (Ohio SACWIS)
- Agency Safety Plan Contacts Report (Ohio SACWIS)
- Case Reopening Report (Ohio SACWIS)
- Case Services Report (Ohio SACWIS)
- Child Custody Removal Reasons and Statistics (Ohio SACWIS)
- Family Assessment Risk Contributor Report (Ohio SACWIS)
- Report Conclusions Report (ROM)
- Maltreatment Allegations (CPS Count) (ROM)
- Child Safety Each Month of In-Home Services (In-Home Outcomes) (ROM)
- Maltreatment Reports During In-Home (In-home Outcomes) (ROM)
- Removal Reasons for Children Entering Foster Care (Foster Care: Key Practice Indicators) (ROM)

#### **Phase 2 Results**

Thus far, a total of 806 cases have been reviewed. There were 391 applicable cases identified for review for compliance with Item 2. Of the 391 applicable cases reviewed, 97.75% were rated as a Strength and 9 cases (2.25%) were rated as an Area Needing Improvement. Agencies and courts continue to demonstrate significant improvement since CFSR Round 3, the CFSR Round 3 PIP and Phase 1 of CPOE.

Based upon discussions and analysis of the data PCSAs/IV-E courts, in collaboration with ODJFS/DCY, developed a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Agencies/IV-E courts that identified Item 2 as an Area Needing Improvement included strategies in their PPA to address:

- Training
- Practice Enhancements
- Monitoring and Evaluation
- Collaboration

#### Item 3: Risk and Safety Assessment and Management

#### **Examination of County CPOE Monitoring Results**

During CPOE Stage 12, Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which assist in assessing performance for Item 3:

- Agency Safety Plan Report (Ohio SACWIS)
- Agency Safety Plan Contacts Report (Ohio SACWIS)
- Case Reopening Report (Ohio SACWIS)
- Case Services Report (Ohio SACWIS)
- Child Custody Removal Reasons and Statistics (Ohio SACWIS)
- Family Assessment Risk Contributor Report (Ohio SACWIS)
- Intake Assessment Lifecycle Report (Ohio SACWIS)
- SAR/Case Review Due Date Report (Ohio SACWIS)
- Child Protection Reports by Screening Decisions CPS: Counts (ROM)
- Report Conclusions /Findings (CPS: Counts) (ROM)
- Maltreatment Allegations (CPS Counts) (ROM)
- Investigations Completed Within Required Time (CPS: Key Practice Indicators) (ROM)
- Pending CPS Reports (CPS: Key Practice Indicators) (ROM)
- Child Safety Each Month of In-Home Services (In-Home Outcomes) (ROM)
- Maltreatment Reports During In-Home (In-home Outcomes) (ROM)

#### **Phase 2 Results**

Thus far, 801 cases were identified as applicable for review. Of the cases reviewed for Item 3, results indicated that 642 cases (80.15%) were rated as Strength and 159 cases (19.85%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs/IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice.

#### **Conclusions**

Thus far, counties/courts participating in CPOE Stage 12, Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 and the CFSR Round 3 PIP review. However, a great deal of work is still needed around Risk Assessment and Safety Management. Safety Outcome 2 thus far during Phase 2 was Substantially Achieved at 80.15%.

#### **Permanency Outcomes**

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

As shown in the table below, the Permanency Outcome is comprised of five Federal data indicators and three case-review item measure. The table provides definitions of the data indicators and the case-review items as well as depicts the relationship between and among the data measures, data sources, and the analytic method used.

Permanency Outcome 1					
Federal Data Indicator Domain	Case-Review Domain				
(P1) Permanency in 12 Months for Children	(Item 4) Stability of foster care placement				
Entering Foster Care (AFCARS):	Determine if the child in foster care is in a stable				
Of all children who enter foster care in a 12-month	placement and that any changes in placement that				
period, what percent discharged to permanency	occurred during the review period were in the best				
within 12 months of entering foster care?	interest of the child and consistent with achieving				
<ul> <li>Risk Standardized Performance</li> </ul>	the child's permanency goal(s).				
<ul> <li>Observed Performance</li> </ul>					
	(Item 5) Permanency goal of child				
(P2) Permanency in 12 Months for Children in	Determine whether appropriate permanency goals				
Foster Care 12 to 23 Months (AFCARS)	were established for the child in a timely manner.				
Of all children in foster care on the first day of a 12-					
month period who had been in foster care (in that	(Item 6) Achieving Reunification, Guardianship,				
episode) between 12 and 23 months, what percent	Adoption or Other Planned Permanent Living				
discharged from foster care to permanency within	Arrangement				
12 months of the first day of the 12-month period?	Determine whether concerted efforts were made				
<ul> <li>Risk Standardized Performance</li> </ul>	or are being made, to achieve reunification				
<ul> <li>Observed Performance</li> </ul>	guardianship, adoption, or other planned				
	permanent living arrangement.				
(P3) Permanency in 12 Months for Children in					
Foster Care 24 Months (AFCARS)					
Of all children in foster care on the first day of a 12-					
month period, who had been in foster care (in that					
episode) for 24 months or more, what percent					
discharged to permanency within 12 months of the					
first day of the 12-month period?					
Risk Standardized Performance					
<ul> <li>Observed Performance</li> </ul>					
(DA) Do ontry to Foster Care in 12 Months					
(P4) Re-entry to Foster Care in 12 Months (AFCARS)					
Of all children who discharged to permanency					
(excluding adoption) in a 12-month period, what					
percent reentered care within 12 months of exist?					
o Risk Standardized Performance					
Observed Performance					
5 Observed Ferrormanice					
(P5) Placement Stability (AFCARS)					
Of all children who enter foster care in a 12-month					

period, what is the rate of placement moves per

Risk Standardized Performance

o Observed Performance

1,000 days of foster care?

#### **Permanency Outcomes**

# (P1)Permanency in 12 Months for Children Entering Foster Care

#### **Using Risk Standardized Performance**

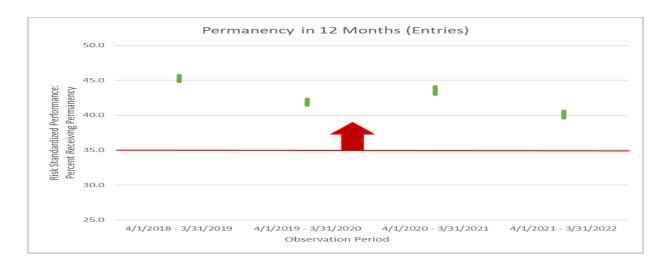
The 2020-2024 CFSP spanned the period of time that the CFSR Round 3 Data Profiles were in effect and then the CFSR Round 4 Data Profiles. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators. The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) National Performance values on June 8, 2022.

The Risk Standardized Performance (RSP) for Permanency in 12 months was set at 35.2% and above. CFSR Round 3 set the Risk Standardized Performance at 42.7% and above. Over the past four observation periods, Ohio's Risk Standardized Performance has exceeded the existing National Performance of 35.2% over four observation periods for Permanency in 12 Months for Children Entering Care as depicted in the table below.<sup>7</sup>

Federal Data Indicator: (P1) Permanency in 12 Months for Children Entering Care Risk Standardized Performance					
National Performance 35.2% or more (Round 4)	4/1/2018- 3/31/2019	4/1/2019- 3/31/2020	4/1/2020- 3/31/2021	4/1/2021- 3/31/2022	
RSP Value	45.7%	42.3%	44.1%	40.6%	
RSP Interval	44.8%- 46.6%	41.4%- 43.2%	43.1%- 45.2%	39.6%- 41.6%	

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<sup>&</sup>lt;sup>7</sup> Children's Bureau. *Ohio Child and Family Services Review (CFSR 4) Data Profile.* February 2024.



It should be noted that Ohio's Risk Standardized Performance has been statistically better than the National Performance for the Round 3 calculations and the Round 4 calculations.

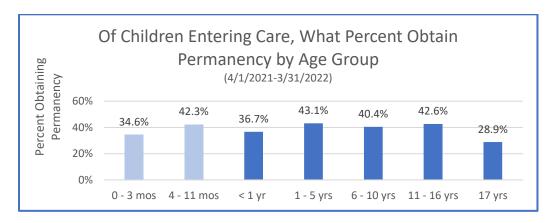
### **Using Observed Performance**

Examination of Ohio's Observed Performance over four observation periods revealed that in the last three observation periods there has been a decrease in the number of children/youth obtaining permanency within 12 months. However, due to a decrease in children entering foster care since 2020, there are over 2,078 fewer children in the population in the most recent period than there were two years ago.

Federal Data Indicator: (P1) Permanency in 12 Months For Children Entering Care Observed Performance					
	4/1/2018 -     4/1/2019 -     4/1/2020 -     4/1/2020 -       3/31/2019     3/31/2020     3/31/2021     3/31/2021				
Denominator	10,665	10,850	8,213	8,819	
Numerator	4,983	4,708	3,597	3,586	
Observed Performance	46.7%	43.4%	43.8%	40.7%	

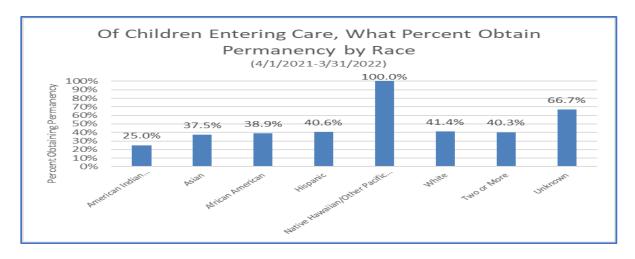
For the most recent Observation Period, only 36.7% of the children under 1 year of age obtained permanency within 1 year of entry. For children over 17 years, 28.9% obtain permanency before turning

18. Children between the ages of 1-5 years had the highest rates of achieving permanency in 12 months. (42.6%). The following graph includes all age groupings.



However, it should be noted that children who are part of a sibling group impacts achieving permanency and has to be examined as a grouping vs. solely by the age of the population under review at the county level of analysis.

When race/ethnicity patterns are examined in the last observation period it is noted that 38.9% of Black/African American children and 40.3% of children with two or more races obtained permanency in 12 months. More White children obtained permanency in 12 months (41.4%) while 40.6% of Hispanic children of any race obtained permanency in 12 months.



The following county level map of Ohio shows a wide range in the percent of children who entered their custody and then were able to obtain permanency in 12 months.



#### **Conclusions**

Through such programs as Kinnect to Family (formerly 30 Days to Family), Youth Centered Permanency Roundtables and Wendy's Wonderful Kids there has been a gradual improvement in achieving permanency for all age groups. As a result, for the upcoming five year plan these Strategies will continue to be used.

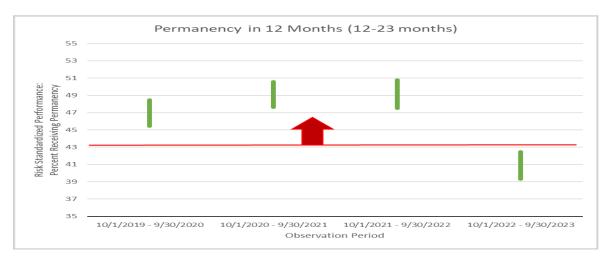
#### (P2) Permanency in 12 Months for Children in Foster Care 12 to 23 Months

#### **Using Risk Standardized Performance**

The 2020-2024 CFSP spanned the period of time that the CFSR Round 3 Data Profiles were in effect and then the CFSR Round 4 Data Profiles. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators. The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) National Performance values on June 8, 2022. The Risk Standardized Performance (RSP) for Permanency in 12 months (12-23 months) was set at 43.8% or higher. For the first time, Ohio's performance during the last

Observation Period (October 1,2022-September 30, 20223) was statistically worse that the National Performance. The following table contains Ohio's Risk Standardized Performance for this data indicator.8

Federal Data Indicator: (P2) Permanency in 12 Months For Children In Care Between 12 and 23 Months <b>Risk Standardized Performance</b>					
National Performance 43.8% or more (Round 4)	10/1/2019- 9/30/2020	10/1/2020- 9/30/2021	10/1/2021- 9/30/2022	10/1/2022- 9/30/2023	
RSP Value	47.0%	49.1%	49.2%	40.9%*	
RSP Interval	45.4%- 48.5%	47.6%- 50.6%	47.5%- 50.8%	39.3%- 42.5%	
*Fails National Standard, placing the State at risk of fiscal penalty.					



#### **Using Observed Performance**

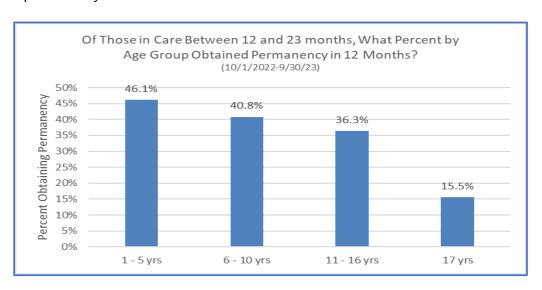
Examination of Ohio's Observed Performance over four observation periods revealed that in the last three years there has been a decrease in the number of children who have been in care between 12 and

<sup>&</sup>lt;sup>8</sup> Children's Bureau. *Ohio Child and Family Services Review (CFSR 4) Data Profile*. February 2023 and February 2024.

23 months who obtained permanency in 12 months. There has been fluctuations in the number of children in this population for the most recent observation periods when compared to the prior two observation periods.

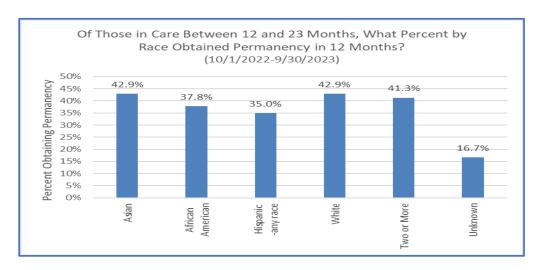
Federal Data Indicator: (P2) Permanency in 12 Months For Children In Care Between 12 and 23 Months Observed Performance				
	10/1/2019 9/30/2020	10/1/2020 9/30/2021	10/1/2021 9/30/2022	10/1/2022- 9/30/2023
Denominator	3,891	4,142	3,417	3,519
Numerator	1,820	2,040	1,686	1,431
Observed Performance	46.8%	49.3%	49.3%	40.7%

The follow Table presents information on the age of children in care between 12-23 months who obtained permanency in 12 months.

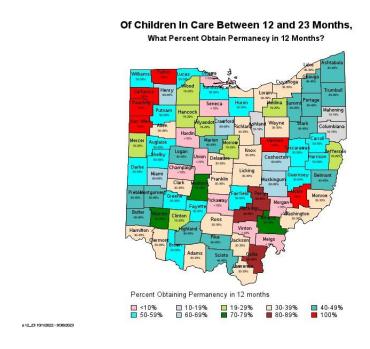


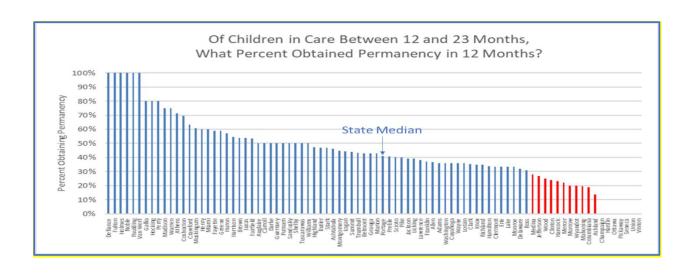
On face value, the older a child gets the less likely the child will achieve permanence. However, we would need to examine the presenting challenges of the child and family, the availability services to meet the needs of the child/youth and their family as well as the number of placement moves the child/youth has experienced.

When examining the race/ethnicity of children/youth in care between 12-23 months who obtained permanency in 12 months recent data indicates that White and Asian children/youth were more likely to achieve permanence than Black/African American children/youth, Hispanic children/youth, and children/youth or children of two or more identified races. The following Table presents these results for the last observation period.



The following county level map of Ohio shows a wide range in the percent of children who had been in agency custody between 12 and 23 months who were then able to obtain permanency in 12 months.





## Permanency in 12 Months for Children in Care Between 12 and 23 months: Findings at a Glance

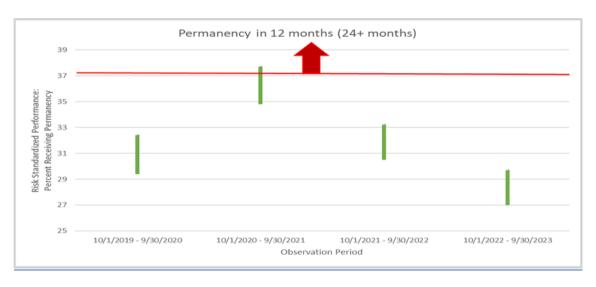
- While Ohio has a history of achieving the National Standard for this measure, in the last observation period (10/1/2022-9/30/2023), Ohio did not achieve the National Standard.
- The older children become, the less likely they will obtain permanency in less than 12 months.
- There are no statistically significant differences on permanency by race.
- 11 counties has a permanency rate of less than 30%.

## (P 3) Permanency in 12 Months for Children in Foster Care 24+ Months

### **Using Standardized Performance**

The 2020-2024 CFSP spanned the period of time that the CFSR Round 3 Data Profiles were in effect and then the CFSR Round 4 Data Profiles. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators. The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) national performance values on June 8, 2022. The Risk Standardized Performance (RSP) for Permanency in 12 months for Children in Foster Care 24 months + was set at 37.3%. or higher. For CFSR Round 3, the National Performance was set at 31.8 % and above. While the CFSR 3 Data Profile was in effect Ohio's performance was continuously fluctuating. In the last observation period, there was a decrease in the percent of children in care 24+ months who achieved permanency in 12 months. Ohio's Performance using the National Performance Standards for Round 4 is statistically worse than the National Performance in three of the four observation periods.

Federal Data Indicator: Permanency in 12 Months for Children in Care 24+ Months Risk Standardized Performance				
National Performance 43.8% or more (Round 4)  RSP Value	10/1/2019- 9/30/2020 30.8%*	10/1/2020- 9/30/2021 36.2%	10/1/2021- 9/30/2022 31.8%*	10/1/2022- 9/30/2023 28.3%*
RSP Interval *Fails National Sta	29.4%- 32.4%	34.8%- 37.7% g the State un	30.5%- 33.2% der risk of fisc	27.0%- 29.7%

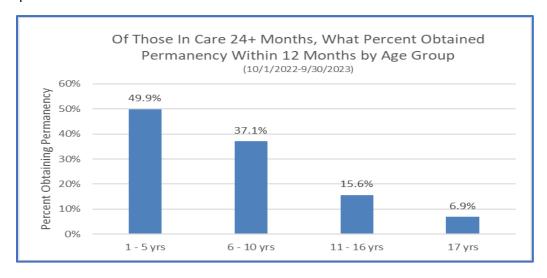


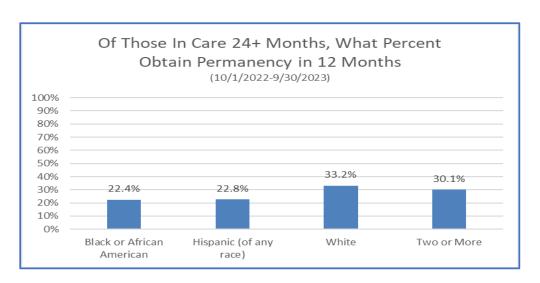
## **Using Observed Performance**

As evidenced below, when examining Ohio's Observed Performance over four observation periods there has been some fluctuations in performance. Further examination of the data is needed to determine why permanency has not been achieved for children falling into this category.

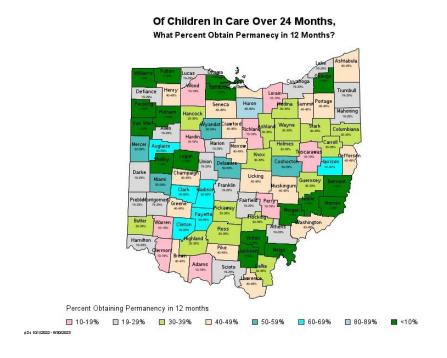
Federal Data Indicator: Permanency in 12 Months for Children in Care 24+ Months Observed Performance				
	10/1/2019- 9/30/2020	10/1/2020 9/30/2021	10/1/2021 9/30/2022	10/1/2022- 9/30/2023
Denominator	3,193	3,661	3,817	3,712
Numerator	991	1,373	1,244	1,061
Observed Performance	31.0%	37.5%	32.6%	28.6%

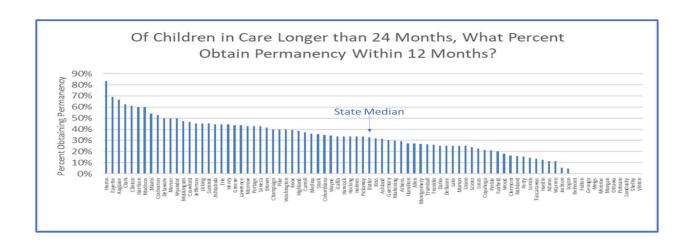
Similar to the age patterns in the previous measure, the older the children are the harder it is for them to obtain permanency within 12 months from the beginning of the observation period. African American children having a more difficult time obtaining permanency than other races. The following tables depict these results.





The following county level map of Ohio shows a wide range in the percent of children who were in care for 24 months or more and then were able to achieve permanency in 12 months.





## Permanency in 12 Months for Children in Care for 24+ Months: Findings at a Glance

- For three of the last four observation periods, Ohio has not achieved the National Standard.
- The older children become, the less likely they will obtain permanency in less than 12 months.
- White children are more likely obtain permanency in 12 months than African American children.
- 13 counties has a permanency rate of less than 20%.

#### **Conclusions**

On April 7, 2023, Governor Mike DeWine signed Executive Order 2023-09D to launch the Ohio Adoption Grant Program which provides three levels of one-time payments of \$10,000, \$15,000, or \$20,000 to parents adopting a child depending on the circumstances. Parents who have finalized an adoption since Jan. 1, 2023, can apply for the grant at AdoptionGrant.Ohio.gov.

There are other programs that Ohio has that also address this measure. These include Ohio Kinship & Adoption Navigator (OhioKAN) program, Wendy's Wonderful Kids, and Youth Centered Permanency Roundtables.

Additionally, Ohio issued a request for proposals and selected a vendor for the Adoption and Resource Home Recruitment and Assessment Program to recruit adoption and resource homes, assist agencies in finding homes for children needing placement, and address resource needs by creating a regional pool of certified Tier I and Tier II assessors to assist with licensing homes. The selected vendor for the recruitment effort, Ohio Children's Alliance, has launched a data driven recruitment campaign, focusing on recruitment of homes that are able to meet the greatest need such as homes for older youth, minority children, and sibling groups.

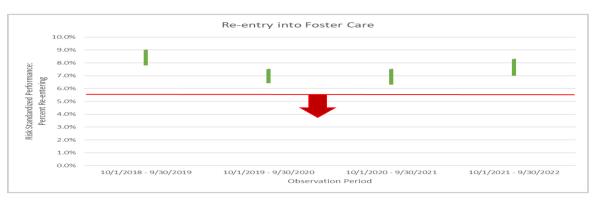
It is too early to see the significant impact from the Ohio Adoption Grant or the Adoption and Resource Home Recruitment and Assessment Program. ODJFS/DCY is hopeful that all of these programs will assist with meeting the needs of children in public children services agency custody.

## (P4) Re-Entry to Foster Care

## **Using Risk Standard Performance**

The 2020-2024 CFSP spanned the period of time that the CFSR Round 3 Data Profiles were in effect and then the CFSR Round 4 Data Profiles. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators. The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) National Performance values on June 8, 2022. The method for calculation this measure was modified in the CFSR 4 Data Profile. The Risk Standardized Performance (RSP) for Re-Entry to Foster Care was set at 5.6% or lower. The RSP for Round 3 was set at 8.1% or below. When examining Ohio's Risk-Standardized Performance over the past four observation periods there have been fluctuations in Ohio's Performance in achieving the National Performance Standard of 5.6% and below. This was also the case under the Round 3 National Performance Standards. Ohio's performance is statistically worse than the National Performance across all observation periods.

Federal Data Indicator: Re-Entry Into Foster Care Risk Standardized Performance				
National Performance 5.6% or lower Round 4)	10/1/2018- 9/30/2019	10/1/2019- 9/30/2020	10/1/2020- 9/30/2021	10/1/2021- 9/30/2022
RSP Value	8.4%*	6.9%*	6.9%*	7.6%*
RSP Interval	7.8%-9.0%	6.4%- 7.5%	6.3%-7.5%	7.0%-8.3%
*Fails <u>National</u> Standard, placing the State under risk of fiscal penalty.				

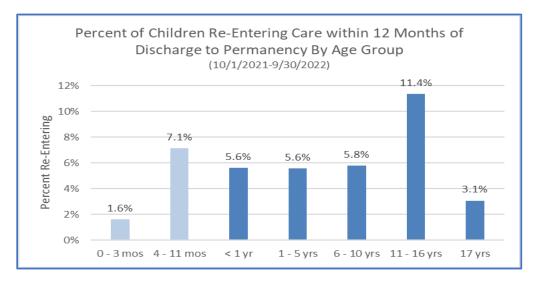


## **Using Observed Performance**

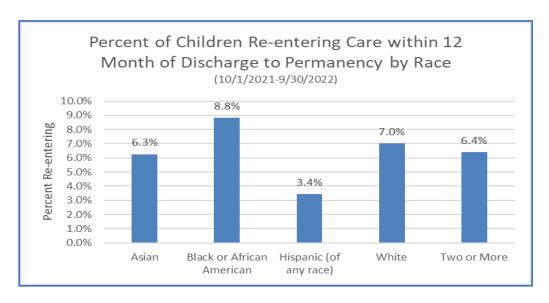
As seen below, Ohio's Observed Performance revealed that in the last four observation periods there was a decline in the number of children who re-entered care from the previous two observation periods.

Federal Data Indicator: Re-Entry Into Foster Care Observed Performance				
	10/1/2018 9/30/2019	10/1/2019 9/30/2020	10/1/2020 9/30/2021	10/1/2021- 9/30/2022
Denominato	8,227	7,715	7,475	6,540
Numerator	645	498	481	470
Observed Performance	7.8%	6.5%	6.4%	7.2%

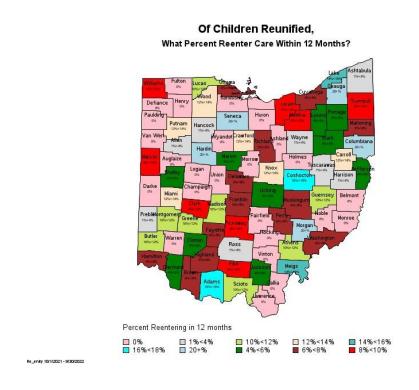
Looking at the data for the period of FY22 the following question was posed: *After obtaining permanency within 12 months, how likely are children to re-enter care?* It was found that across all age groups, 92.7% of the children do not return to care within 12-months. The figure below shows data from the federal Data Profile on the percentage of children re-entering foster care within 12-months of obtaining permanency by age grouping. The group with the highest re-entry rate, and consistent over several years, are those children between the ages of 11 and 16. Eleven percent (11.4%) of this age group have re-entered care, far surpassing other age groups.

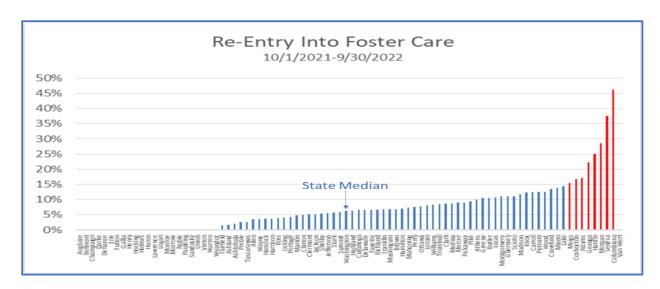


Of concern is that children identified as "African American" children re-enter care at a higher rate than White children.



The following county level map of Ohio shows a wide range in the percent of children who re-entering care within 12 months of discharge to permanency.





## Re-entry into Foster Care: Findings at a Glance

- Ohio did not achieve the National Standard in the last four observation periods.
- Children between the ages of 11 and 16 are far more likely to re-enter care than other age groups.
- African American children are more likely to re-enter care than other races.
- The state median is 6.3%. Eight counties exceed 15%.

## (P5) Placement Stability

## **Using Risk Standardized Performance**

The 2020-2024 CFSP spanned the period of time that the CFSR Round 3 Data Profiles were in effect and then the CFSR Round 4 Data Profiles. The CFSR Round 4 Data Profiles ushered in the newly established Risk Standardized Performance for all seven CFSR Data Indicators. The Children's Bureau released the Child and Family Services Review (CFSR) Round 4 Statewide Data Indicators (SWDIs) national performance values on June 8, 2022. The Risk Standardized Performance (RSP) for Placement Stability was set at 4.48 moves per 1,000 days of foster care or lower. During CFSR Round 3 the Risk Standardized Performance was set at 4.44 moves per 1,000 days of foster care or lower. As depicted below, over four observation periods Ohio's Risk Standardized Performance for placement stability continues to be statistically better than the National Performance established for Round 4 of 4.48 and below.<sup>9</sup>

<sup>&</sup>lt;sup>9</sup> Children's .0reau. *Ohio Child and Family Services Review (CFSR 4) Data Profile.* February 2023 and February 2024

	Federal Data Indicator: Placement Stability Risk Standardized Performance			
National Performance 4.48% or less (Round 4)	10/1/2019- 9/30/2020	10/1/2020- 9/30/2021	10/1/2021- 9/30/2022	10/1/2022- 9/30/2023
RSP Value	3.05	3.15	3.35	3.02
RSP Interval	2.96-3.15	3.06-3.25	3.25-3.44	2.93-3.11

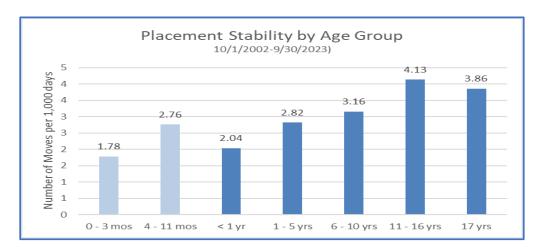


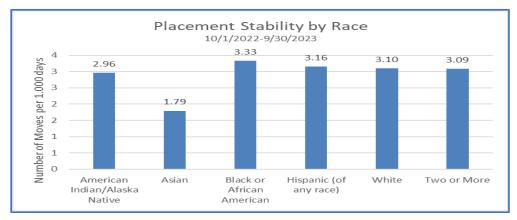
# **Using Observed Performance**

As evidenced below, Ohio's Observed Performance for Placement Stability over four observation periods revealed that Ohio is focusing on increasing placement stability in order to reduce the trauma children would experience in being placed in multiple settings during their stay in care.

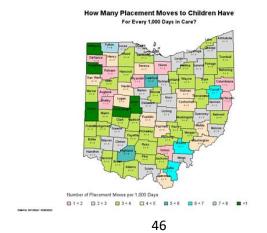
	Federal Data Indicator: Placement Stability Observed Performance			
	10/1/2019 9/30/2020	10/1/20200 9/30/2021	10/1/2021– 9/30/2022	10/1/2022- 9/30/2023
Denominator	1,562,815	1,371,504	1,348,016	1,384,726
Numerator	4,932	4,484	4,723	4,378
Observed Performance	3.16	3.27	3.50	3.16

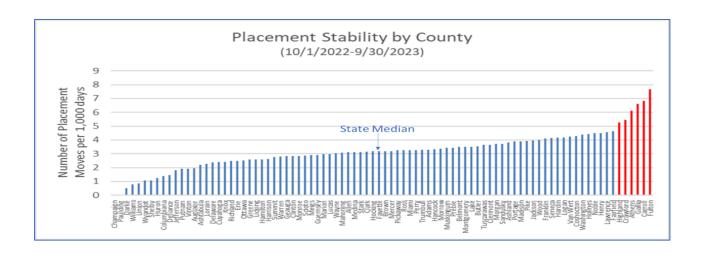
Further examination of the data revealed that the older the child is, the more moves the child is likely to have. There is an appreciable difference between African American and White children on the stability of placement. Extensive efforts to identify kin, placements that can meet the needs of the child/sibling group and are in the child's own community has resulted in increased placement stability.





The following county level map of Ohio reflects the emphasis placed on placement stability for children/youth to reduce unnecessary trauma.





## Placement Stability: Findings at a Glance

- Ohio has historically achieved the National Standard on this indicator.
- As children age, they tend to have more placement moves.
- The statewide median number of placement moves is 3.1 for every 1,000 days in care. Six counties exceed five moves.

## **Conclusions**

It has been found that the following county practices have resulted in achieved permanency for children and youth:

## **Caseworker and Family**

- Use of Family Team Meetings to develop family case plans and establish permanency goals.
- Expanding the frequency and duration of parent/child visits as case plan progress builds safety.
- Use of concurrent planning for substitute care cases not waiting to begin planning for more than one possible avenue to permanency.
- Reviewing and discussing the Family Case Plan or Family Services Plan with families during each visit.
- Establishing more frequent caseworker visits with parents.

## Caseworker, Family, and Youth

• Use of Permanency Roundtables and Youth-Centered Roundtables to identify permanency options and identify critical supports and connections for children/youth.

#### Caseworker, Child, and Family

• Planning overnight/extended visits between the parents and children in preparation for reunification.

#### **Caseworker and Provider**

• Frequent face-to-face and telephone contact with community service providers to assess family progress on case plan objectives.

 Working closely with service providers and families to ensure families are comfortable with reunification.

## Caseworker, Agency, Family and Provider

- Providing services to the family to support reunification and continuing to provide services following reunification to ensure re-entry does not occur.
- Engaging foster parents in providing additional support for parents and in aiding the child's transition from the foster home.

## **Agency and Caseworker**

- Certifying applicants as foster-to-adoptive placements.
- Conducting matching conferences upon receipt of permanent custody.

## **Agency and Recruiter**

• Conducting thorough case mining to identify possible placements and use of Kinnect to Family and Wendy's Wonderful Kids recruiters to conduct child-specific recruitment.

## **Caseworker, Provider, Caregiver**

• Effective coordination and communication with the placement provider, the service provider and prospective adoptive family.

## **Agency and Adoptive Family**

Providing needed post-adoption services to ensure the adoption does not disrupt.

#### Permanency Item Measures

## Item 4: Stability of foster care placement

#### **Examination of County CPOE Monitoring Results**

During CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 4:

- Agency Placement Cost Report (Ohio SACWIS)
- Children in Placement Report (Ohio SACWIS)
- Placement Leave Report (Ohio SACWIS)
- Placement Stability (Federal Indicators) (ROM)
- Re-Entry to Foster Care (Federal Indicators) (ROM)
- Placement Moves Rate per 1,000 Days of Care Maltreatment Allegations (Foster Care Outcomes)
   (ROM)

#### **Phase 2 Results**

Thus far, 466 cases were applicable for review for Item 4. Results indicated that 429 cases (92.06%) were rated as a Strength and 37 cases (7.94%) were rated as an Area Needing Improvement. Agencies and

courts continue to demonstrate significant improvement since CFSR Round 3, the CFSR Round 3 PIP and Phase 1 of CPOE.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Agencies and IV-E courts that identified Item 4 as an Area Needing Improvement included strategies in their PPA to address:

- Practice Enhancements
- Training
- Monitoring and Evaluation
- Collaboration

## Item 5: Permanency goal for child

## **Examination of County CPOE Monitoring Results**

During CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific report is discussed which helps to assess performance for Item 5:

• AFCARS Exception Report (Ohio SACWIS)

#### Phase 2 Results

Thus far, 466 cases were applicable for review for Item 5. Results indicated that 422 (90.56%) were rated as a Strength and 44 cases (9.44%) were rated as an Area Needing Improvement. Results from Phase 1 and Phase 2 are currently lower that the performance achieved during the CFSR PIP which was 91.43%. However, it should be noted that only 70 cases were applicable for review during the CFSR PIP. Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, developed a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Agencies that identified Item 5 as an Area Needing Improvement included strategies in their PPA to address:

- Practice Enhancements
- Collaboration

## Item 6: Achieving Reunification, Guardianship, Adoption or Other Planned Permanent Living Arrangement

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 6:

- Adoption Finalization Report (Ohio SACWIS)
- Children in Placement Report (Ohio SACWIS)

- Children Needing Permanency Report (Ohio SACWIS)
- MEPA Child Report (Ohio SACWIS)
- Permanency in 12 Months (Federal Indicator) (ROM)
- Permanency in 12-23 Months (Federal Indicator) (ROM)
- Permanency in 24+ Months (Federal Indicator) (ROM)
- Countdown to Permanency (Foster Care: Countdown to Outcomes) (ROM)
- Permanency in 12 Months of Entry (Foster Care Outcomes) (ROM)
- Permanency in 24 Months of Entry (Foster Care Outcomes (ROM)
- Permanency During Year for Children in Care for 12-23 Months (Foster Care Outcomes) (ROM)
- Permanency During Year for Children in Care for 24+ Months (Foster Care Outcomes) (ROM)
- Adopted in Less than 12 Months of TPR (Foster Care Outcomes (ROM)

#### **Phase 2 Results:**

Thus far, 465 cases were identified as applicable for review. Results indicated that 400 cases (86.02%) were rated as a Strength and 51 cases (12.66%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, developed a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Agencies and courts that identified Item 6 as an Area Needing Improvement included strategies in their PPA to address:

- Collaboration
- Timeliness
- Practice Enhancements
- Data Analysis

#### **Conclusions**

At this juncture, Ohio Substantially Achieved Permanency Outcome 1 at the 75.7% Level. Thus, Ohio is not in Substantial Conformity with this Outcome.

# Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

As shown in the Table below, Permanency Outcome 2 has no federal data indicators and five case review measures. The table below contains a description of the item measure and depicts the relationship between and among the data measures, data sources, and the analytic method used. Compliance with Permanency Outcome 2 is determined through a review of information contained in the case record.

Permanency Outcome 2	
Federal Data Indicator Domain Case-Review Domain	
None	(Item 7) Placement with Siblings (CPOE)

	Permanency Outcome 2
Federal Data Indicator Domain	Case-Review Domain
	Determine if concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.
	(Item 8) Visiting with Parents and Siblings in Foster Care (CPOE)
	Determine if concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.
	(Item 9) Preserving Connections (CPOE)  Determine if concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, language, extended family, tribe, school, and friends.
	(Item 10) Relative Placement (CPOE)  Determine if concerted efforts were made to place the child with relatives when appropriate.
	(Item 11) Relationship of Child in Care With Parents (CPOE)
	Determine whether concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

## Permanency Item Measures

## Item 7: Placement with Siblings

## **Examination of County CPOE Monitoring Results**

During CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 7:

- Placement Roster Report (Ohio SACWIS)
- Siblings Placed Together (Foster Care; Key Practice Indicators) (ROM)

## **Phase 2 Results**

Thus far, during Phase 2 206 cases were identified as applicable for review. Results indicated that 197 cases (95.63%) were rated as a Strength and nine cases (4.37%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 7 as an Area Needing Improvement included strategies in their PPA to address Practice Enhancements.

Thus far, counties/courts participating in Phase 1 and Phase 2 slightly higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

## Item 8: Visiting with Parents and Siblings in Foster Care

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts discussions occur around providing children/youth and their parents and siblings in foster care with the opportunity to frequently visit.

#### **Phase 2 Results**

Thus far, during Phase 2 375 cases were identified as applicable for review. Results indicated that 342 cases (91.2%) were rated as a Strength and 33 cases (8.8%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 8 as an Area Needing Improvement included strategies in their PPA to address Practice Enhancements.

## **Conclusions**

Thus far, counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

#### **Item 9: Preserving Connections**

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts discussions occur around preserving connections for children/youth in foster care.

#### **Phase 2 Results**

Thus far, during Phase 2 456 cases were identified as applicable for review. Results indicated that 447 cases (98.03%) were rated as a Strength and nine cases (1.97%) were rated as an Area Needing Improvement.

Based upon these discussions counties that identified Item 9 as an Area Needing Improvement included strategies that focused on:

- Practice Enhancements
- Training
- Monitoring and Evaluation

#### **Conclusions**

Thus far, counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

The following Search and Engagement strategies have been used throughout the state to identify connections to be maintained for the child/youth:

## Caseworker, Family, Child/Youth

- Asked family members and child/youth during Family Team Meetings and Home Visits.
- Completed Eco Maps.

## Agency, Family, Child/Youth

- Asked family/youth during Youth Centered Permanency Roundtables.
- Engaged a Kinect to Family worker to search for family members.
- Engaged in case mining.

#### Item 10: Relative Placement

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 10:

- Initial Placements with Relatives (Foster Care: Key Practice Indicators) (ROM)
- Placement Type (Foster Care Key Practice Indicators) (ROM)

## **Phase 2 Results**

Thus far, during Phase 2 359 cases were identified as applicable for review. Results indicated that 331 cases (92.2%) were rated as a Strength and 28 cases (7.8%) were rated as an Area Needing Improvement.

Based upon discussions PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA's) to address changes that will need to occur to improve services and

outcomes in response to areas of children services practice identified. Counties that identified Item 10 as an Area Needing Improvement included strategies that focused on:

- Practice Enhancements
- Training
- Monitoring and Evaluation

#### **Conclusions**

Thus far, counties/courts participating in Phase 1 and Phase 2 achieved a slightly lower degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

## Item 11: Relationship of Child in care with Parents

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts discussions occurred with PCSAs and IV-E Courts on the intent of Item 11. Challenges experienced by caseworkers and parents occurred when children were not placed in the communities from which they were removed. Parents had difficulty attending school functions and medical appointments; especially when they did not have their own transportation.

#### **Phase 2 Results**

Thus far, during Phase 2 352 cases were identified as applicable for review. Results indicated that 318 cases (90.34%) were rated as a Strength and 34 cases (9.66%) were rated as an Area Needing Improvement. Agencies and courts continue to demonstrate significant improvement since CFSR Round 3, the CFSR Round 3 PIP and Phase 1 of CPOE.

Based upon discussions PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA's) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 11 as an Area Needing Improvement included strategies that focused on:

- Practice Enhancements
- Training
- Monitoring and Evaluation

#### **Conclusions**

At this juncture, Ohio Substantially Achieved Permanency Outcome 2 at the 93.89% Compliance Level. Thus far, counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

## **Well-Being Outcomes**

There are no data indicators that are associated with these three Well-Being Outcomes. Case review data is used to assess performance on: Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs; Well-Being Outcome 2: Children receive appropriate services to meet their educational needs; and Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.

## Well-Being Item Measures

There are no Datal Indicators for Well-Being Outcome 1. There are four Well-Being item measures for Well-Being Outcome 1 and the criteria for evaluation of each item is presented in the Table below.

Well-Being Outcome 1		
Federal Data Indicator Domain	Case-Review Domain	
None	(Item 12) Needs and Services of Child, Parents. and Foster Parents (CPOE)  Determine if concerted efforts were made to assess the needs of children, parents, and substitute caregivers or pre-adoptive parents at entry into foster care or on an ongoing basis 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 appropriate services.	
	(Item 13) Child and Family Involvement in Case Planning (CPOE)  Determine if concerted efforts were made to involve parents and children in the case planning process on an ongoing basis.	
	(Item 14) Caseworker Visits With Child (CPOE)  Determine whether the frequency and quality of visits between caseworkers and the child in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals.	
	(Item 15) Caseworker Visits With Parents (CPOE)  Determine whether the frequency and quality of visits between caseworkers and the mothers and fathers of the children are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals.	

#### Item 12: Needs and services of child, parents, and substitute caregivers or pre-adoptive parents

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 12:

- Agency Independent Living Report (Ohio SACWIS)
- Identified Father Report (Ohio SACWIS)

#### **Phase 2 Results**

Thus far, during Phase 2 794 cases were identified as applicable for review. Results indicated that 660 cases (83,12%) were rated as a Strength and 134 cases (16.88%) were rated as an Area Needing Improvement.

Based upon discussions PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA's) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Fifty-five agencies/courts that identified Item 12 as an Area Needing Improvement included strategies which focused on:

- Practice Enhancements
- Monitoring and Evaluation

Counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

Item 13: Child and family involvement in case planning

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 and Phase 2 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 13:

- Family Team Meeting Statistical Report (Ohio SACWIS)
- Identified Father Report (Ohio SACWIS)

#### **Phase 2 Results**

Thus far, during Phase 2 765 cases were identified as applicable for review. Results indicated that 699 cases (91.37%) were rated as a Strength and 66 cases (8.63%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 13 as an Area Needing Improvement included strategies in their PPA to address:

• Practice Enhancements

- Training
- Monitoring and Evaluation

Thus far, counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

#### Item 14: Caseworker visits with child

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts, the following county specific reports are discussed which help to assess performance for Item 14:

- Comprehensive Visitation Report (Ohio SACWIS)
- Months Worker-Child Visits Made (ROM)
- Months with Visit In-Home (ROM)
- Worker-Child Visitation Pending/Completed (Foster Care: Caseworker Visits) (ROM)
- Monthly Visits Made with Involved Children (State Involved: Caseworker Visits) (ROM)

#### **Phase 2 Results**

Thus far, during Phase 2 798 cases were identified as applicable for review. Results indicated that 717 cases (89.85%) were rated as a Strength and 81 cases (10.15%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 14 as an Area Needing Improvement included strategies in their PPA to address:

- Time Management
- Practice Enhancements
- Training and Coaching
- Monitoring and Evaluation

Counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

A noted barrier was a high/moderate turnover of caseworkers and supervisors. Agencies continue to face additional challenges in recruiting and hiring staff. Thus, visits may have been late or did not occur due to workforce problems. With a turnover in staff there may be delays in arranging for needed services (new worker may not be familiar with a child's service needs).

#### Item 15: Caseworker visits with parents

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts, the following county specific report is discussed which helps to assess performance for Item 15:

• Comprehensive Visitation Report (Ohio SACWIS)

#### **Phase 2 Results**

Thus far, during Phase 2 685 cases were identified as applicable for review. Results indicated that 567 cases (82.77%) were rated as a Strength and 118 cases (17.23%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 15 as an Area Needing Improvement included strategies in their PPA to address:

- Time Management
- Practice Enhancements
- Training and Coaching
- Monitoring and Evaluation

Counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

## **Conclusions**

At this juncture, the ratings for Well-Being Outcome 1 (Items 12 to Item 15) indicate that Ohio was in Substantial Compliance at the 80.71% Level therefore is Not in Substantial Conformity with Well-Being Outcome 1. Ohio needs to make significant improvements in all items under review to achieve of Substantial Conformity Rating of 90% or more.

The following primary causual themes that emerged from exploration of concerns related to Well-Being Outcome 1 were:

- Lack of clarity regarding policies concerning the parties to be assessed, contacted, and
  engaged in case planning. Case reviews found that in several cases not all the key parties were
  being assessed, contacted, and/or engaged in case planning. Focus groups and PIP Committee
  members suggested that this may be due to caseworkers not being clear about who they are
  expected to assess, engage in case planning, and contact.
- Lack of caseworker efficacy in working effectively with some families. Survey findings indicated that some caseworkers find it difficult to engage with parents and children around particular issues or topics. In addition, caseworkers and supervisors also noted that a

considerable barrier to effectiveness in working with families is that many families have severe/complex problems. Although content training is provided in areas such as substance abuse and domestic violence, training to address caseworkers' self-efficacy may not be available. Additionally, services to address the complex needs of families and children are not always available or sufficient.

- Challenges balancing high caseloads with other priorities (e.g., Ohio SACWIS data entry demands) that can result in emotional exhaustion and burnout. Concerns pertaining to assessment, engagement in case planning, and the quality of caseworker contacts may be attributed to the lack of time caseworkers have to work effectively with their families because they have too many cases and too many demands on them from the agency and the families, both of which often result in emotional exhaustion or burnout.
- Lack of clarity regarding quality expectations for caseworker contacts with children and parents and how to report quality-related discussions in the contact logs. Caseworkers may not be clear about what constitutes a quality contact with a parent or child and/or how to appropriately record the quality aspects of their contacts in the contact log for the case.
- Lack of family willingness to engage in services. A major barrier to working effectively with families is that families are not willing to engage in the services needed to address safety and risk concerns.

# Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.

Item 16 is reviewed to assess compliance with Well-Being Outcome 2. The following table presents information on the evaluation criteria used to determine the level of performance with this item.

Well-Being Outcome 2	
Federal Data Indicator Domain	Case Review Domain
None	(Item 16) Educational Needs of the Child (CPOE)
	Determine if concerted efforts were made to assess children's educational needs at the initial contact with the child and whether identified needs were appropriately addressed in case planning and case management activities.

Item 16: Educational needs of the child

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts a discussion occurred on the assessment of children's educational needs and addressing needed educational services.

#### **Phase 2 Results**

Thus far 452 cases were applicable for review. Of these, 422 cases were rated as a Strength (93.36%) and 30 cases (6.64%) were rated as an Area Needing Improvement.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 16 as an Area Needing Improvement included strategies in their PPA to address:

- Practice Enhancements
- Training
- Time Management
- Monitoring and Evaluation

Counties/courts participating in Phase 1 and Phase 2 achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12. However, this still falls below the expected rate of performance set by the federal government of a 95%. Strength rating to be found in Substantial Conformity.

# Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

Compliance is based upon a case review of two items: Item 17: Physical Health of Child and Item 18: Mental/Behavioral Health of Child. The follow table provides information on how each item is evaluated.

Well-Being Outcome 3	
Federal Data Indicator Domain	Case Review Domain
None	(Item 17) Physical Health of Child (CPOE) Assess whether the agency addressed the physical health needs of the child, including dental health needs.
	(Item 18) Mental/behavioral Health of the Child (CPOE) Assess whether the agency addressed the mental/ behavioral health needs of the child.

Item 17: Physical health of child

#### **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts the following agency specific data reports were reviewed:

- AFCARS Exception Report (Ohio SACWIS)
- Medication Detail Report (Ohio SACWIS)

#### **Phase 2 Results**

Thus far 547 cases were applicable for review. Of these, 456 cases were rated as a Strength (83.36%) and 91 cases (16.64%) were rated as an Area Needing Improvement. Thus far, counties/courts participating in the CQI PPA case review achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 17 as an Area Needing Improvement included strategies in their PPA to address:

- Time Management
- Practice Enhancements
- Training
- Monitoring and Evaluation

The following effective practices were identified:

#### **Caseworker and Child**

- Children in substitute care were receiving regular health screenings, dental and vision examinations, immunizations, and follow-up treatment.
- Youth participated in services to address the health issues identified through assessments.

#### **Caseworker and Provider**

Frequent contacts were made with medical providers and documented.

## Caseworker, Family, Child/Youth

• When the physical health needs of the children were a factor in agency involvement with the family, health care needs were assessed and services provided.

#### Item 18: Mental/behavioral health of the child

## **Examination of County CPOE Monitoring Results**

During initial CPOE Stage 12 Phase 1 reviews with PCSAs and IV-E Courts the following agency specific data reports were reviewed:

- AFCARS Exception Report (Ohio SACWIS)
- Medication Detail Report (Ohio SACWIS)

## **Phase 2 Results**

Thus far 432 cases were applicable for review. Of these, 386 cases were rated as a Strength (89.35%) and 46 cases (10.65%) were rated as an Area Needing Improvement. Counties/courts participating in both Phase 1 and Phase 2 thus far achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. It should be noted that there were significantly more cases being reviewed during CPOE Stage 12.

Based upon discussions and analysis of the data PCSAs and IV-E Courts, in collaboration with ODJFS/DCY, develop a *Plan for Practice Advancement* (PPA) to address changes that will need to occur to improve services and outcomes in response to areas of children services practice identified. Counties that identified Item 18 as an Area Needing Improvement included strategies in their PPA to address:

- Assessment
- Collaboration
- Practice Enhancements
- Monitoring and Evaluation

At this juncture the ratings for Well-being Outcome 3 (Item 17 and Item 18) are as follows: 82.33% Substantially Achieved and Not in Substantial Conformity. Ohio needs to make significant improvements in both items under review.

## **Systemic Factors**

## 1. Statewide Information System

## **Assessment of Performance**

*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?

Item 19 Statewide Information System was rated as a Strength in the Ohio 2017 CFSR Final Report based on information from the statewide assessment and stakeholder interviews regarding Ohio SACWIS. Ohio's Comprehensive Child Welfare Information System (CCWIS) continues to be able to identify the status, demographics, location, and goals for the placement of all children in foster care. Ohio's CCWIS has 11 automated functions which include: administration, adoption case management, assessment/ investigation case management, certification management, community reporting and notification portal, financial management, intake, ongoing case management, provider management, training management, young adult case management. These modules support the children services work from an intake report through the post adoption services and subsidies. In FFY2023, a combined total of over 3,000 enhancements or defect fixes were completed to improve or create functionality across all modules.

ODJFS/DCY has consistently funded significant CCWIS initiatives to support the children services programs and agencies such as:

- Taking Early Action Matters (TEAM) Ohio which is a mandated reporter portal for submitting referrals of child maltreatment,
- Tiered Foster Care,
- Ohio Adoption Grant Program (OAGP) Application Site,
- Ohio Certification for Agencies and Families which will be Ohio's new automated function for all certification activities streamlining the process and allowing families to contribute,

- Data dashboards and online reports, and
- Regular system improvements.

Data confirm that the system reflects children in foster care and this key information can be found in Appendix A. This positive finding is the result of persistent efforts to discover and resolve issues. Data are continually pulled and reviewed which identified data discrepancies. Scorecards are created to flag issues within the CCWIS data which assists in providing technical assistance to agencies.

During the current FFY, Ohio will be improving how data is captured for children in custody to ensure Title IV-E agencies can document where a child is at all times. Ohio will also be adding functionality to improve the matching process for children in custody. This will help agencies find foster or adoptive homes or congregate care beds more easily by sending notifications out to all providers automatically. The initiatives listed above will help ensure Ohio has automated functions that effectively and efficiently support all areas of children services work which will ultimately improve Ohio's data for the children being served.

#### **Conclusions**

The CCWIS data can be easily pulled for analyze and review. This assisted in assessing progress in achieving Goals 1, 2, 3, 4 of the 2020-2024 CFSP and in identifying areas that policy changes needed to occur, further technical assistance needed, and enhancements to functionality for the children services application that needed to occur.

## 2. Case Review System

#### **Assessment of Performance**

The Ohio 2017 CFSR Round 3 Final Report presented the findings of five items related to the Systemic Factor - Case Review System. The following three Items were rated as a "Strength": Item 20: Written Case Plan, Item 21: Periodic Review, and Item 23: Termination of Parental Rights. Two Items rated as "Areas Needing Improvement" were Item 22: Permanency Hearings and Item 24: Notice of Hearings and Reviews to Caregivers.

**Item 20 Written Case Plans:** 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?

Ohio SACWIS can produce a report on-demand showing the percentage of case plans completed within the required timeframe. Agencies/IV-E courts obtain this information by running the *Initial Case Plan Timeliness Report*. Below are examples of how this report is used:

- Administrators compare data from the *Initial Case Plan Timeliness Report* to measure improvement on a month-to-month basis with respect to Initial Case Plan timeliness.
- Agencies have established a baseline for timely completion of case plans and established an improvement goal. Progress in achieving the goal is determined by running the Ohio SACWIS Initial Case Plan Timeliness Report.

- Staff are provided with a copy of the Ohio SACWIS *Initial Case Plan Timeliness Report* monthly to assure that initial case plans are being developed and implemented in a timely manner.
- The Ohio SACWIS Family Team Meeting Statistical Report is reviewed monthly to ensure that family team meetings are being scheduled and held timely to develop case plans and complete updates to case plans.

## **Examination of CPOE Monitoring Results: Child and Family Involvement in Case Planning**

The Phase 2 CPOE case record review commenced in January 2023 and will conclude in September 2024. During the case review portion thus far, 708 cases have been reviewed. Item 13: Child and Family Involvement in Case Planning was rated as a Strength in 91.56% of the applicable cases. The following effective practices were identified:

- Caseworkers developed Case Plans with families during Family Team Meetings or Family Conferences.
- Case Plans were frequently amended to reflect changes as they occurred.
- Agencies invited parents with known addresses to Semiannual Administrative Reviews (SAR) by sending letters to them as well as providing verbal notifications during contacts with parents.
- Mothers, stepfathers, custodial fathers were invited to take part in case planning, Family Team Meetings, and Semiannual Administrative Reviews.
- When family members are unable to come to the agency for a Case Review or SAR, the agency conducted the review at the family's home.
- Discussed case plan progress during monthly home visits.

**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?

Ohio requires case reviews to occur no less than ninety days and at the six-month semiannual administrative review (SAR) or periodic court hearings. Ohio SACWIS generates reports and reminders.

Agencies/IV-E courts can assess their own performance on-demand by running the *Case Review/SAR Due Date Report in Ohio SACWIS*. Below are examples of how counties use this report:

- Administrators compare data from the *SAR/Case Review Due Date Report* to measure improvement on a month-to-month basis with respect to timely SAR/Case Reviews.
- Agencies have established a baseline for timely completion of Case Reviews/SARs and established an improvement goal. Progress in achieving the goal is determined by running the Ohio SACWIS Case Review/SAR Due Date Report.
- Staff are provided the Ohio SACWIS Case Review/SAR Due Date Report monthly. Ongoing supervisors develop a spreadsheet to track trigger dates, case plan due dates, and Case Review/SAR due dates for each unit. Information is then discussed during supervisory meetings.

#### **Examination of CPOE Self-Assessment Tool: Case Reviews and SARs**

Prior to the start of the CPOE Stage 12, Phase 2 case review PCSAs and Title IV-E courts are required to complete a Self-Assessment Tool. One of the statements they are asked to respond to and rank the statement from Strongly Agree, Agree, Disagree and Strongly Disagree was the following: " Case Reviews and SARs are routinely conducted in timely manner as required by rule and address safety." Of the 56 Self-Assessments received thus far 79% ranked this statement as Strongly Agree or Agree. Due to workforce issues (turnover in staff), can't back fill positions) or family members not keeping their appointments, at times, Case Reviews and SARs were not conducted timely.

**Item 22 Permanency Hearing:** How well is the case <u>review system functioning</u> statewide to ensure that, for each child, a <u>permanency hearing</u> 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?

To improve performance on Item 22, several strategies were used:

- (1) Conduct an evaluation of results from the Agency Self-Assessment
- (2) Research conducted by the SCO
- (3) Implement SCO best practice tools
- (4) Implement the Ohio Specific Child Welfare Attorney Training
- (5) Conduct the Multidisciplinary Legal Representation Pilot
- (6) Hold PCSA/Court Engagement Meetings

Each strategy is described below.

## (1) Evaluation of results from the Agency Self-Assessment

The Agency Self-Assessment is completed at the beginning of the CPOE Case Review Cycle. From the agency's perspective, it details caseload size, staff experience, turnover rates, safety/permanency/well-being outcomes, information systems, quality assurance, staff training, supervision/staff development, service array, and agency responses to the community.

One of the questions from the Agency Self-Assessment which tangentially addresses **Item 22** is the following:

"Describe any barriers the agency has faced regarding achieving permanency for children in care."

The following was noted in responses from 56 agencies who have completed their CPOE Stage 2, Phase 2 Self-Assessment prior to their scheduled case review:

Many barriers are related to court delays. These include GALs not seeing families, failure of legal
counsel to file motions timely, multiple continuances due to attorneys or GAL's not showing up
for hearings, parties not being present; needing to re-file cases.

Many barriers were related to the limited services in the county, inability to access timely and
effective services; recruiting relatives and skilled foster homes; inability to engage with the
family. Many counties noted that parental substance abuse issues are intense and take longer
than 12 months to resolve.

## **Supreme Court of Ohio Activities**

To address findings of Round 3 of the CFSR the Supreme Court of Ohio (SCO) engaged in the following activities:

## **Quality Hearing Project**

#### **Process Evaluation**

After receiving the results of Round 3 of the Child and Family Services Review (CFSR), a root cause analysis identified court delays as one of the root causes to preventing children from achieving permanency in a timely manner. To further assess the root causes and to guide the development of court strategies for the Performance Improvement Plan (PIP), the SCO contracted with researchers to assess child welfare hearing quality in shelter care, annual reviews, and permanency hearings and the link between quality and outcomes. To conduct the assessment, Ohio administrative data was reviewed and recorded hearings from 22 counties were observed. The assessment noted several recommendations for improvement including, but not limited to parent and youth engagement in the court process, quality legal representation, reasonable efforts, notice to caregivers, and permanency planning training. Based on the findings, a quality hearing toolkit was developed as a resource for judges to use to identify opportunities to enhance court practice in child abuse and neglect court hearings. The toolkit includes a Court Report Template that enables the agency to provide summary information to the courts prior to hearings. After dissemination of the toolkit, a process evaluation was conducted via survey to assess awareness and use of the toolkit. Findings from 43% of the respondents who were judges or magistrates, suggest that a large percentage of child welfare professionals are familiar with the toolkit and 69% of respondents indicated that they made changes to practice because of the toolkit. Major changes included enhanced efforts to engage parents, youth, and caregivers in the process and enhanced inquiry/discussion at the hearings of the topics in the Toolkit. Recommendations include:

- Consider opportunities to enhance dissemination strategies.
- Consider opportunities to work with the agency to co-create trainings that help align agency
  practice with the Toolkit recommendations so that agency workers are prepared for court and
  understand expectations at hearings.
- Consider if a shorter checklist could be created that highlights key points from the Toolkit.
- Consider hosting refresher trainings for new staff.
- Consider pulling together a focus group of court professionals to discuss the Court Report usage.

## **Quality Legal Representation**

#### **National Association of Counsel for Children**

Ohio began partnering with the National Association of Counsel for Children (NACC) in 2020 to provide child welfare law training and resources to attorneys, GALs, and courts. Since the partnership began, Ohio child welfare attorneys have received the national Red Book training, Ohio specific child welfare law training, and multidisciplinary legal representation training though the NACC. In 2022, NACC was approved to begin certifying Ohio attorneys as child welfare law specialists (CWLS).

In 2023, using feedback from surveys and a training participant focus group, NACC developed an updated Ohio specific child welfare attorney training. The virtual four series training was held in October 2023. It was designed for Ohio attorneys who represent children, parents, Juvenile or Family Court Staff, Children's Services Staff or any community professionals working in children services law. The training included practice tips, hypothetical case studies, and polls, grounded in Ohio law, to share knowledge, skills, and best practices aimed at promoting high quality representation in Ohio children services cases. Session descriptions are below:

Session 1: This is Unreasonable! Exploring the Law, Intent, & Advocacy Opportunities Behind the Reasonable Efforts Requirement

Wednesday, October 4, 2023, 3-4:30 PM ET

- When is the agency required (or not) to make reasonable efforts? What makes an effort reasonable or active? When are these findings required, and when should attorneys object?
- This webinar will serve as an in-depth exploration of relevant federal and Ohio law, regulations, cases, and agency policies that address the reasonable and active efforts mandates. The presenter will discuss the what, when, why, and how of reasonable and active efforts in Ohio. Participants will leave with concrete practice tips to weave the law into case planning and inand out-of-court advocacy to ensure that parents and children receive the services and resources needed to maintain family integrity, safely exit the system, and achieve permanency.

Session 2: No Foster Child Left Behind: Educational Advocacy for Dependency Attorneys

Wednesday, October 11, 2023, 3-4:30 PM ET

- What educational rights are available to children and parents involved in dependency cases? How can attorneys for parents, children, and the agency enforce those rights?
- This webinar will address the relevant federal and Ohio laws that confer educational rights on parents and children, including laws regarding education decision-making, school stability, and special education. Attendees will learn practical strategies they can incorporate into their advocacy to promote positive educational outcomes for children and youth.

Session 3: For the Record... Evidence and Preserving the Record

Wednesday, October 18, 2023, 3-4:30 PM ET

- How should attorneys adequately preserve their record throughout a dependency case? Why is record preservation important? What issues should attorneys routinely object to and when?
- This webinar will cover the importance of record preservation at all stages of a dependency
  case, including how and when attorneys should make arguments and objections to adequately
  preserve the record. The presenter will highlight key areas of Ohio evidentiary law, including
  hearsay and experts, and common evidentiary issues that arise in child welfare cases.

Session 4: Child Witness Issues: To Call or Not to Call... That is the Question Wednesday, October 25, 2023, 3-4:30 PM ET

- How young is too young to testify? Is testifying in court harmful or empowering for a child? Should attorneys object to a child testifying in chambers or through deposition? How would you even cross examine a child and should you?
- This webinar will attempt to answer these questions by exploring Ohio law and best practices regarding child testimony issues. The presenter will discuss issues to consider in calling a child as a witness (or preventing that child from testifying), including competency, hearsay, and emotional harm. The webinar will also cover testimonial accommodations, preparing the child for testifying, and how to appropriately structure a direct and/or cross examination of the child. Participants will leave this session with concrete tips and strategies to incorporate into their trial practice when facing child witness issues.

## **Multidisciplinary Legal Representation Pilot**

As the pilot project begins its third year of implementation, the research team is finalizing the second-year evaluation report. For this evaluation, the research team conducted site visits at each pilot site and focus groups and interviews with 58 pilot staff, judges, public children services agency staff, and community partners. Additional information was gathered from aggregate program and expenditure data, as well as program materials and reports submitted by pilot programs. The research team also observed technical assistance sessions and attended an all-pilot convening. Data was analyzed using a framework approach to identify themes and patterns. The report focuses on pilots' strategies for effective internal collaboration, client engagement, community engagement, and government partner collaboration.

Over the last two years, the pilots have served over 250 families with 600 children. During the second year, pilots received a total of 225 referrals. Of those referrals, 133 resulted in enrollment. Reasons for referral: truancy (19%), mental health needs (16%), substance use (15%), domestic violence (12%), and lack of housing (12%). Pilots also received a total of 91 referrals for a variety of other legal and non-legal reasons, including physical health concerns, medical neglect allegations, utility shutoff, custody and visitation matters, caregiver incarceration, and caregiver death. Pilots closed 104 client cases. Of these cases, 64% were closed after clients completed the program successfully and resolved their case. In 22% of cases, clients stopped responding. In three cases, pilot staff terminated services with clients for reasons other than the provided categories. In two of these cases, the pilot staff determined that they could not be of further assistance. The client in the third case was transferred to a different court-operated program. Other reasons for case closure (11%) include courts granting legal custody to a relative caregiver or the PCSA, families leaving the jurisdiction, and inability to avoid a formal court filing. Few clients experienced deeper penetration into the child welfare system due to abuse, neglect,

or dependency (AND) allegations. Eight clients (4%) had subsequent AND referrals after enrollment in a pilot program, and six clients (3%) had allegations that were substantiated. Nine clients (5%) had children enter foster care after enrollment. Of the 145 pre-petition clients served in Year 2, 11 cases (8%) progressed to a formal filing in juvenile court. Of the 54 post-petition clients, 13 clients (24%) were reunified with one or more children after program enrollment.

## **Specialized Attorney Training**

Ohio CASA provided free specialized training to 170 Attorneys at the Annual Celebrate Kids! Conference. The conference was held in September with over 650 attendees.

## **New Attorney Onboarding Toolkit**

The <u>New Attorney Onboarding Toolkit</u> was published in May 2023. It was created to provide juvenile courts with practical suggestions for recruiting and retaining a competent, committed pool of attorneys. The appendix includes several newly developed resources for attorneys practicing child protection law. Courts can print the appendix as a packet for new attorneys or can post as a PDF to the court's webpage. By providing attorneys with information about local case plan services, typical case timelines, and background information about child protection cases, courts will increase the number of competent qualified attorneys.

#### Guardian Ad Litem (GAL) Toolkit

The <u>GAL toolkit</u> was published in July 2023. The toolkit was developed to assist courts to implement the new rule requirements and identify best practices for recruiting, retaining, and increasing the accountability for GALs. These best practices are aimed at improving GAL performance, leading to better outcomes for Ohio's children and families.

## **Court Engagement**

In November 2020, the Children Services Transformation (CST) Advisory Council's final report identified juvenile justice system collaboration and engagement as critical components for successful transformation of the children services system. To this end, Ohio developed a plan to identify best practices that support and promote these critical components. To support this work, a senior staff attorney was hired to work with the children's justice project manager. Beginning in February 2023, meetings were held with all 88 children services agencies to gain a better understanding about county specific legal representation and juvenile justice system engagement Interview participants included PCSA Directors/administrators, supervisors, agency attorneys, prosecutors, judges, magistrates, and court administrators. Nineteen topic areas were discussed with each county. Based on the feedback collected, seven themes emerged: communication, funding legal needs, practice procedures, prevention, recruitment/retention, and training. Of the seven themes, training was identified as the highest need or concern.

*Item 23 Termination of Parental Rights:* How well is the case review system functioning to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

During Round 3, **Item 23** was rated as a Strength based upon the statewide assessment and stakeholder interviews. Termination of parental rights (TPR) petitions are filed timely in most cases reviewed. Issues

in some counties center on inconsistent documentation of compelling reasons and the application of TPR requirements to cases.

A question on the Agency Self-Assessment asks if the agency proceeds with TPR when children are in care for 12 out of the most recent 22 months. Of the 56 agencies completing the survey between January 2023- March 2024 88% agreed or strongly agreed with the question.

**Item 24 Notification:** How well is the case review system functioning to ensure that foster parents, preadoptive parents, and relative caregivers of children in foster care are <u>notified</u> of, and have a right to be heard in, any review or hearing held with respect to the child?"

CFSR Round 3 found this item to be an Area Needing Improvement.

Ohio values the need to inform foster parents, pre-adoptive parents, and relative caregivers of children in foster care that they have the right to be heard in reviews or hearings. Caseworkers typically inform these individuals of court hearing as they meet with them and discuss pertinent issues. More formal notification methods, through the Postal Service, occur in many counties. According to the CPOE Stage 12, Phase 2 Agency Self-Assessment data for the period of January 2023-March 2024, 45% of the agencies stated that the PCSA and the court send notices to the families; 45% indicated the PCSA sent notices out; and the remaining 10% of the PCSAs stated that only the court sends out notifications. During CPOE Case Reviews, notification is a standard topic for TAS staff and agency discussions.

While foster parents, pre-adoptive parents, and relative caregivers are in the hearings, they may speak and give testimony on their experiences. This is confirmed by SCO's research which found that during hearings the parent/grandparent/caregiver, children, caseworker, and attorney freely discussed the agency's reasonable efforts and had in-depth discussions regarding the barriers to achieve permanency with the judges/magistrates. Their contributions enhance the development of workable solutions in court orders.

As the PCSA/Court Engagement Meetings have been taking place, a main discussion topic is the need to notify and involve foster parents, pre-adoptive parents, and relative caregivers of court hearings.

Ohio's value to ensure foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of and have the right to be heard is exhibited in two frequently distributed documents, and is in Administrative Code Rule: <u>Foster Youth Bill of Rights</u> and Resource Family Bill of Rights.

Both rules stipulate the need for hearing notifications and involvement.

#### **Conclusions**

The identified strategies within the CFSP and CFSR, PIP have resulted in increased involvement in review hearings by-families, foster parents, pre-adoptive parents, and relative caregivers of children in foster care. Insufficient court data and/or a lack of court data collection systems are an ongoing barrier to a quantitative analysis. As a result, this will continue to be assessed qualitatively through interviews and case reviews.

# 3. Quality Assurance System

#### **Assessment of Current Performance**

*Item 25 Quality Assurance System* was found to be in Substantial Conformity in the final CFSR Round 3 Report. It was noted:

- Ohio's Quality Assurance System is functioning statewide.
- Ohio uses data to evaluate programs and services and ensures adjustments are made to practice and policy when needed.
- The state provides information and data, including statewide and county results from Child Protection Oversight and Evaluation reviews to agencies and stakeholders.

Ohio continues to apply CQI principles to its Quality Assurance process to ensure it remains robust and evolving. Ohio is busy preparing for the upcoming CFSR Round 4 scheduled for 2025 and anticipates the review cycle will continue to inform Ohio's local review process. As an example of an evolving process, Ohio has already transitioned to utilizing the CFSR Round 4 Review Tool.

## **Quality Assurance**

The Child Protection Oversight and Evaluation (CPOE) quality assurance system provides a continuous cycle for assessment and improvement of performance. CPOE is designed to improve services and outcomes for Ohio's families and children through a coordinated review between the PCSAs, Title IV-E Courts, and ODJFS and is currently conducted over a twenty-four-month cycle. CPOE includes regular data collection, analysis and verification, and continuous feedback to PCSAs/Title IV-E Courts. The CPOE process includes a Self-Assessment conducted by agencies and title IV-E courts, reviews of statewide and county specific data, and case reviews. The examination of robust data from multiple lenses provides a solid foundation for each Continuous Quality Improvement cycle.

Ohio is currently conducting its 12th round of CPOE, which is divided into two distinct phases. Phase 1 of the CPOE quality assurance process is comprised of an ongoing and continual set of activities, beginning with a PCSA or Court Self-Assessment. The Self-Assessment provides an opportunity for the PCSA or Court to gather and analyze qualitative and quantitative data and information to evaluate their children services programs and practice, and to identify strengths and opportunities for improvement. The PCSA or Court are encouraged to provide accurate ratings and thoughtful responses to the questions, while commenting on best practices the agency/court has implemented or challenges the PCSA or Court is currently experiencing. The self-assessment allows for nuanced local contextual information to be captured and included in improvement planning. The completed Self-Assessment is utilized to generate discussion during both Phase 1 and Phase 2 entrance conferences.

Data is integral in reporting statewide performance and evaluating changes within Ohio's children services system. Ohio continues to find new ways to incorporate data more effectively into the CPOE process. The CPOE team has created a standardized summary format including graphic displays of data and analysis. ODJFS/DCY has developed reports which capture information for most of the performance measures monitored and these reports are important to the CPOE review process. During CPOE Stage 12 Phase 1 & 2 the following reports are reviewed during the entrance conference, when

working in collaboration with the agency/court in developing a Plan for Practice Advancement (PPA), and during PPA Implementation reviews.

**Screening**: Intake Details & Statistics Report

Safety: Initiation Contact Timely: CPS: Key Practice Indicators (ROM) (CFSR

requirement)

Investigations Completed Within Required Time CPS: Key Practice Indicators

(ROM) (OAC requirement)

Family Assessment Override Report (Filtered for Discretionary Overrides)

(SACWIS)

Safe from Maltreatment Recurrence for 6 months (ROM)

Comprehensive Addiction and Recovery Act (CARA) Administrative Report

(SACWIS)

#### **Federal Indicators**

(Federal) Recurrence of Maltreatment (ROM) (Federal) Maltreatment in Foster Care (ROM)

#### **Permanency: Federal Indicators**

(Federal) Permanency in 12 Months (ROM)

(Federal) Permanency in 12 Months for Children in Foster Care 12-23 Months

(ROM)

(Federal) Permanency in 12 Months for Children in Foster Care 24+ Months

(ROM)

(Federal) Placement Stability (ROM) (Federal) Re-Entry to Foster Care (ROM)

**Foster Care:** Initial Placement with Relatives (ROM)

Placement Type (ROM)

Siblings Placed Together (ROM)

Matching Conference and Adoption Activities Due (SACWIS)

**Well-being**: Comprehensive Visitation Report (SACWIS) (State Standard)

Identified Father Report (Ongoing) (SACWIS)

Based upon the Self-Assessment discussions and review and analysis of the data a PPA is developed. When developing the PPA, the PCSA or Court and assigned TAS determine which areas of practice are to be included in the PPA. Priority is given to any areas directly impacting child safety.

The PPA includes a holistic approach to addressing identified practice areas and any identified interrelatedness in the practice areas contributing to the PPA. In planning activities to be included in the PPA, the PCSA or Court consider the underlying or systemic issues and address them by utilizing strategies such as the following:

- PCSA or Court development needs, including professional development/training needs.
- Clinical supervision activities.
- Policies and Procedures.
- Development of PCSA or Court workgroups.
- Internal agency case reviews.
- Cross-county partnerships.
- Resources available through the Regional Training Center (coaching, GAP sessions, training);
- Resources available through the OFC Regional Technical Assistance Team.; and
- On-site and/or remote (virtual) Technical Assistance by assigned TAS to focus on identified areas needing improvement.

During Phase 2, a case record review is conducted using the CFSR Instrument. Based upon results of the review, a new PPA is developed collaboratively with the agency/court and the TAS. The PPA is reviewed at regular intervals to assess performance.

Following commencement of CPOE Stage 12 counties/courts were asked for feedback on the new CPOE Stage 12 process. Listed below is a summary of feedback received:

- Majority of PCSAs/IV-E Courts like the new process and are highly invested in making practice improvements.
- They like the data review at the Phase 1 Entrance Conference and the use of the data to assist in creating PPAs.
- This process has assisted agencies that do not have CQI/QA staff to complete internal planning.
- Support and assistance the TASs provide during the PPA process. was helpful.
- PPA case reviews (at the 9-month and 18-month PPA implementation points) of only four cases is not representative of the agency's practice/improvements being made as a result of the PPA.
- A couple of counties have been resistant to the PPA process.

During the 2020-2024 CFSP Ohio's CPOE Quality Improvement System provides regular feedback on effectiveness of practices and information which guides technical assistance, training, policy, and potential Ohio SACWIS changes. For example, Ohio is reviewing current rules related to concurrent planning requirements, concurrent plan content, and the review of concurrent plans. This review process demonstrates effective collaboration through Ohio's Quality Improvement System in identifying and examining a need for change, generating solutions to affect change, and implementing recommended changes comprehensively.

#### **DCY Overall Continuous Quality Improvement Efforts**

## **Department of Children and Youth**

The Department of Children and Youth is dedicated to program and outcome evaluation. The newly created agency includes a Division of Research and Evaluation. This division will be responsible for measuring outcomes, and we are excited to see the many ways this will impact our ability to examine CQI outcome data and shape improvement efforts.

#### **Prevention Services**

Specific to work with Prevention Services, the Ohio CQI team will be reviewing data collected to examine issues and develop strategies around practice and implementation. There are two "buckets" that have been identified for CQI review. These buckets involve review of evidence-based practice services (EBPs) and analysis of related data and casework practice specific to Prevention Services.

Bucket one involves review of data shared on the currently utilized EBPs. The Center of Excellence is responsible for monitoring, evaluation, and data analysis of Multisystemic Therapy (MST) and Family Functional Therapy (FFT). The Ohio Department of Health is responsible for monitoring, evaluation, and data analysis of Healthy Families America (HFA) and Parents as Teachers (PAT). The Public Children Services Association of Ohio, in collaboration with The Ohio State University, is responsible for monitoring, evaluation, and data analysis of Ohio START. Data collected from these Prevention Services partners will be shared with the CQI team for internal review and analysis. Data collection is currently underway.

Bucket two involves examination of casework practices as it relates to the implementation of Prevention Services. This is the primary focus for the CQI team as it relates to Prevention Services overarching goals which are to prevent Prevention Service candidates from entering agency custody and increase access to prevention services for Prevention Service candidates and their families and pregnant teens. The CQI team will be looking at Prevention Services cases to conduct qualitative and quantitative analysis to include areas such as:

- Case category types and category changes
- Prevention Services Candidacy determination
- Prevention Services Plan and associated EBP case services
- Monitoring utilization and capacity of EBP services
- Contact requirements on Prevention Services type cases
- Recurrence of Reports and Recurrence of Maltreatment
- Re-entry into Care

The CQI team will analyze qualitative and quantitative data collected applying the CQI process. Through this review, feedback and recommendations will be provided on what is going well and adjustments to consider.

#### **Child Fatality & Near Fatality Reviews**

The Department of Children and Youth has joined the National Partnership for Child Safety. Data sharing agreements are currently in process to allow Ohio's review data to be incorporated into the partnership's larger data pool and to utilize the RedCAP system for data collection. Ohio is excited at the potential of this project and the opportunity to learn from a larger data set.

Departmental staff utilize the Safe Systems Improvement Tool to study child fatalities and has established a protocol for which cases will be reviewed. The updated process was designed in 2023 and implemented in January 2024. Implementation is being supported by the experts at the National

Partnership for Child Safety. Ohio plans to coordinate a group of representatives from county agencies to form a committee that will assist in evaluating aggregate data and formulating program and policy recommendations.

#### **Conclusions**

Ohio has a well-functioning QA System that is informed by Continuous Quality Improvement results. As noted throughout the report, Ohio has a strong history of engaging in CQI with its stakeholders, agency partners, and associations to improve safety, permanency and well-being outcomes for children and families. Ohio will continue to apply CQI principles to small- and large-scale projects in an ongoing effort to continuously review systemic change and implementation efforts.

# 4. Staff and Provider Training

# **Assessment of Current Performance**

In the CFSR Round 3 Final Report this Systemic Factor was found in substantial conformity since two of the three items in this Systemic Factor were rated as a "Strength." One item was rated as an "Area Needing Improvement".

**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 Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions? (Strength)

**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? (Area Needing Improvement)

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 (that care for children receiving foster care or adoption assistance under Title IV-E) that addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children? (Strength)

#### Part I: Overview

# Statewide Coordination of the Ohio Child Welfare Training Program (OCWTP)

The Ohio Child Welfare Training Program (OCWTP) is a partnership of four organizations: the Ohio Department of Children and Youth (DCY), (formerly the Ohio Department of Job and Family Services), a network of eight regional training centers, the Public Children's Services Association of Ohio (PCSAO), and Ohio's University Consortium for Child and Adult Services (OUCCAS).

- Eight Regional Training Centers (RTCs), run by county public children services agencies, address the staff training needs of their region's constituent counties by handling the scheduling, registration, and administration of child protection-related training within their regions.
- PCSAO is a membership-driven organization of Ohio's children services agencies. It represents
  the interests of those agencies via legislative advocacy in addition to being a founding partner
  of OCWTP. PCSAO also coordinates Ohio START (Sobriety, Treatment and Reducing Trauma),
  an evidence-informed children services-led intervention model that help public children
  services agencies (PCSAs) bring together caseworkers, behavioral health providers, and family
  peer mentors into teams dedicated to helping families struggling with co-occurring-child
  maltreatment and substance use disorder.
- Ohio's University Consortium for Child and Adult Services (OUCCAS) has been the statewide coordinator for OCWTP since December 4, 2019. OUCCAS is a team of professionals from three Ohio public universities: the School of Social Work and the Department of Psychology at the University of Cincinnati, the Department of Social Work at Ohio University, and the School of Social Work at the University of Akron. Kellana Hindert and Associates, LLC has an OUCCAS subaward for evaluation research.

# **Transformation in System Operations**

FY 2024 was the second consecutive year of transformation in OCWTP operations.

- OCWTP partners continue to find new ways to exploit the Child and Adult Protective Services Learning Management System (CAPS LMS). The transition from the old system began in November 2022. Over the past year, it has led to improved analytics and curriculum.
- OCWTP was implementing a new system of assessing competencies, integrated within CAPS LMS, before learning that the vendor, Cornerstone on Demand, is rolling out a new approach to competency assessment and tracking. Ohio has long required that each member of the three training populations assessors, caseworkers, and supervisors complete an Individual Training Needs Assessment (ITNA) every two years (caregiver training needs are identified through a different process.) The ITNA is reviewed by their supervisors and generates an Individual Development Plan (IDP). Those assessments were paused in FY 2023 and only recently resumed.

# **Overhaul of Standardized Training**

In 2021, OCWTP started to re-imagine Caseworker and Supervisor Core (initial training for child protection caseworkers and supervisors), Assessor Series, and Pre-Service (initial training for foster caregivers). This was a strategic response to the field's evolving needs, designed to enhance the training's effectiveness and efficiency that involved the following components: A blend of learning methods, a focus on critical learning outcomes, and a collaborative development process represent a significant step forward in preparing Ohio's child protection professionals and caregivers to meet today's and tomorrow's challenges.

## **Enhanced Learning Experiences**

- <u>Blended Learning Approach</u>: The redesigned series combines self-directed learning with instructor-led courses, allowing learners to absorb foundational knowledge at their own pace before engaging in skill-building activities. For example, for new caseworkers, this facilitates a deeper understanding and application of critical practice areas, such as engagement and interviewing, assessing safety, family case planning, and Ohio SACWIS.
- <u>Targeted Learning Activities:</u> Being flooded with information over a multi-day period can be overwhelming, and learners need help retaining information when presented in this way. Because these training series provide learners with a solid foundation of knowledge and skills, they needed to align with what the research says about how people in the workforce learn by offering shorter, more specific courses on topics critical to their jobs.
- <u>Focus on Critical Outcomes:</u> Each course was developed to ensure learners gain essential knowledge and skills in vital areas, including working with families impacted by substance use, mental health, and intimate partner violence; race, equity, and inclusion; and trauma-informed care.

# **Development and Collaboration**

- <u>Efficient and Modernized Training:</u> Recognizing the crucial role of a competent staff and resource families in the safety, permanency, and well-being of Ohio's families, OCWTP's initial training series for each population has been reimagined to be efficient, leveraging modern learning methodologies to support professional development from day one.
- Comprehensive Development Process: Courses were developed through a comprehensive nine-step process to ensure they are relevant and effective. Information was gathered from various sources, including learner evaluations, environmental scans, literature reviews, CFSR and CPOE reviews, Citizen Review Panel Reports, and curricula and discussions with several other states to inform the development of the series. Feedback was also obtained from caseworkers, supervisors, assessors, and caregivers through surveys and focus groups. They reported that increased relevance, flexibility, and support to skill must be critical components of the redesign.
- <u>Collaborative Effort:</u> The creation of the new series involved collaboration with various stakeholders, including practitioners from the field, subject matter experts, race equity and inclusion reviewers, and individuals with lived experience, to inform its content and approach, ensuring it meets the real-world needs of the learners.

# Cost-Efficiency and Accessibility

• <u>Cost-Effective Training:</u> By emphasizing instructor-led courses only when necessary for learning outcomes and developing each course to be offered in-person or virtual, the revised series reduces the need for travel, making it a more accessible and cost-effective solution for agencies.

• <u>Flexibility and Availability:</u> The flexibility offered by self-directed courses allows agencies to customize onboarding and orientation processes, while the continuous availability of resources in the CAPS LMS ensures that learners can access important information whenever needed.

# **Impact and Effectiveness**

- <u>Building Competence and Confidence:</u> The revised series aims to equip Ohio's child protection
  professionals and caregivers with the knowledge and skills needed to be competent and
  confident in their roles, directly contributing to the safety and well-being of the families they
  serve.
- <u>Continuous Professional Development:</u> The redesign reflects DCY's and OCWTP's commitment to continuous learning and adaptation that is both innovative and reflective of best practices in child protection.

# Changes in Reporting Compared to Last Year

The ongoing transformation of OCWTP has resulted in some improved reporting, while other reporting has become more complicated.

- This report includes more session assessment results. Last year's report presented data only on caseworker core.
- Training metrics now capture the proportion of trainees from each training population. As
  expected, some courses, such as those in the caseworker core sequence, are rarely taken by
  trainees who are not new caseworkers. However, other courses attract audiences that might
  include a mixture of caregivers and staff, for example.

The major complication is that FY 2024 was a year in which there was overlap between old and new versions of some curricula. For example, sometimes the new curriculum includes self-directed components, whereas the old one does not. And, sometimes, the modules of a curriculum are organized differently.

This report also uses some changed definitions of metrics. For example, in the past, we reported people enrolled in sessions, but this year, the focus has shifted toward people who complete sessions. This important change was possible because we can now track the fall-off from people who register for sessions to the number who are still enrolled at the time of the session to the number who complete the sessions. For the average session in FY 2024, these three numbers were:

- 22.6 registrations (i.e., were on the roster for the session at some point before the session was held)
- 16.5 enrollments on the day of the session (i.e., they were on the roster at the time the session started, having neither withdrawn nor been disenrolled for a cause such as failure to have met prerequisites)
- 12.8 completions (i.e., attended and completed the session successfully (i.e., were not called away for an emergency or unable to finish an online session because of technology issues)

(These numbers show how challenging it is for the regional training centers to host sessions for a professional workforce that sometimes must reschedule or cancel sessions due to work demands, such as being called to testify in court.)

# **Overview of Training Statistics**

OCWTP offered 3,790 instructor-led training sessions in SFY 2024 (nearly the same as the 3,764 reported last year). Total completions were 49,458. The average session involved 3.9 hours of instruction. Online sessions represented 49.5% of the total. Sessions were scheduled for the convenience of the target trainees; nearly all sessions aimed at staff were during business hours, whereas nearly all sessions for caregivers were offered evenings and weekends.

Self-directed online learning offered by OCWTP and documented in CAPS LMS was completed by 29,121 trainees during the first eight months of FY 2024. The average online session lasted 47 minutes. Because the number of self-directed learning opportunities created by OCWTP has increased substantially in the past year, this report provides more detail on these learning opportunities than was reported last year.

As has been true for several years, learners also have access to training from trusted partners such:

- Ohio PCSA Motivational Engagement Strategies and Actions (MESA)
- Ohio Department of Mental Health and Addiction Services
- Ohio START (Sobriety, Treatment and Reducing Trauma)
- Kinnect
- Center for Adoption Support and Education (CASE)
- National Indian Child Welfare Association
- Foster Parent College

# **Part II: Initial Staff Training**

#### Overview

The State of Ohio mandates initial training for the following staff:

- New public child protection caseworkers
- New public child protection supervisors
- Assessors for foster care and adoption services (this function will not be addressed in this summary)

This section describes mandated initial training for each population.

On January 15, 2024, new training rules for new caseworkers and supervisors went into effect. Since the old and the new rules were active during the 2020-2024 CFSP timeframe, they are outlined below. The chart indicates what OCWTP offers to fulfill the requirement.

Population	ORC Requirement	OCWTP Offering	
	<b>Old:</b> New caseworkers complete 102 hours of Core training within the first year of employment.		
New Caseworkers ORC 5101:2-33-55	<b>New:</b> New caseworkers complete the Caseworker Core Series during the first year of continuous employment as a caseworker.	Caseworker Core	
	<b>New:</b> The PCSA director or designee may waive any caseworker core course requirements by completing and signing an OCWTP core waiver form.		
New Supervisors	<b>Old:</b> New supervisors complete a minimum of 60 hours of Core training in the first year of employment as a supervisor and complete an additional 12 hours of Core in the second year.	Supervisor	
ORC 5101:2-33-56	<b>New:</b> New supervisors complete the Supervisor Core Series during their first year of continuous employment as a supervisor.		

Between July 1, 2019 – June 30, 2024, Caseworker and Supervisor Core underwent multiple revisions. The OCWTP prides itself on being an agile training program that consistently meets the needs of the workforce.

Early in the five-year period of the CFSP, several of the Core courses were updated to address legislative, rule, and practice changes around CAPM, Ohio SACWIS, Differential Response, Family First Prevention Services Act (FFPSA), Normalcy, and the Comprehensive Addiction and Recovery Act. Also, in 2020, the entire Caseworker and Supervisor Core Series were modified to be suitable for virtual delivery.

In 2021, under the Ohio's University Consortium for Child and Adult Services (OUCCAS) began a major overhaul of the two Series noted above. Core 2.0 is adaptable, relevant, and provides a learner-centered approach, which are all crucial factors for effective training. The development process, which included inputs from evaluations, reviews, reports, curriculum, and discussions with other states, suggests a comprehensive approach to gathering insights and best practices, leading to a stronger and well-rounded training program. It addresses the feedback from learners by increasing relevance, suggesting that the content is more aligned with current needs and challenges faced in the field. Breaking the training into modules and offering self-directed courses (SDC) and instructor-led training (ILT) allows learners to choose how they engage with the material, catering to different learning styles and preferences.

In July 2023, Caseworker and Supervisor Core 2.0 launched, and beginning September 1, 2023 all new caseworkers and supervisors began their initial training in the new series (FCL #094). For distinction, the old series will be called Caseworker and Supervisor Core 1.0, and the revised series is known as Caseworker and Supervisor Core 2.0. The OCWTP's Regional Training Centers will continue to offer the Caseworker and Supervisor Core 1.0 Series until August 31, 2024, to ensure all new

caseworkers and supervisors hired *before* September 1, 2023, can complete their initial training mandate.

# **Caseworkers**

# **FY 2024 Data**

Key Metrics for Instructor-Led Components of Caseworker Core 1.0 and 2.0			
ILT Sessions Held	351		
Total Completions	4,746		
Mean Completions/Session	13.5		
Credits/Session	8.5		
Total Learning Hours	41,334		
Total Cost	\$304,135		
Cost/Learning Hour	\$7.36		
% Online	43.3		

Key Metrics for Self-Directed Components of Caseworker Core 2.0				
Total Completions 15,775				
Credited Learning Hours	14,714			

# **Caseworker Core 1.0**

The Caseworker Core 1.0 series has eight instructor-led courses totaling 72 training hours. The number of sessions and caseworkers who attended each Caseworker Core 1.0 course over the 5-year period appears in the Table below.

Course	Total Attendance	Attendance by FY
Module 1: Family-Centered Approach to Child Protective Services	2,615 (FY 2015-2019: 2,939)	FY 2020: 640 FY 2021: 643 (49 sessions) FY 2022: 521 (47 sessions) FY 2023: 577 (47 sessions) FY 2024: 234 (14 sessions)
Module 2: Engaging Families in Family-Centered Child Protective Services	2,887 (FY 2015-2019: 2,913)	FY 2020: 566 FY 2021: 653 (56 sessions) FY 2022: 861 (70 sessions) FY 2023: 554 (48 sessions) FY 2024: 253 (15 sessions)
Module 3: Legal Aspects of Family- Centered Child Protective Services	2,711 (FY 2015-2019: 3,065)	FY 2020: 511 FY 2021: 615 (52 sessions) FY 2022: 651 (50 sessions) FY 2023: 615 (49 sessions) FY 2024: 319 (19 sessions)

Course	Total Attendance	Attendance by FY
	2,648	FY 2020: 555
Module 4: Assessment and Safety		FY 2021: 703 (55 sessions)
Planning in Family-Centered Child	(FY 2015-2019:	FY 2022: 612 (48 sessions)
Protective Services	2,943)	FY2023: 567 (50 sessions)
		FY 2024: 211 (12 sessions)
		FY 2020: 535
Module 5: Gathering Facts in	2,814	FY 2021: 607 (48 sessions)
Family-Centered Child Protective	(FY 2015-2019:	FY 2022: 849 (74 sessions)
Services	2,831)	FY 2023: 607 (50 sessions)
		FY 2024: 216 (12 sessions)
		FY 2020: 454
Module 6: Service Planning and	3,006 (FY 2015-2019: 2,773)	FY 2021: 816 (71 sessions)
Provision in Family-Centered Child		FY 2022: 591 (48 sessions)
Protective Services		FY 2023: 579 (51 sessions)
		FY 2024: 566 (35 sessions) *
		FY 2020: 527
Module 7: Child Development:	2,987	FY 2021: 1029 (78 sessions)
Implications for Family-Centered	(FY 2015-20199:	FY 2022: 564 (43 sessions)
Child Protective Services	2,792)	FY 2023: 560 (47 sessions)
		FY 2024: 307 (18 sessions)
		FY 2020: 338
Module 8: Separation, Placement,	2,576	FY 2021: 806 (64 sessions)
and Reunification in Family- Centered Child Protective Services	(FY 2015-2019:	FY 2022: 620 (43 sessions)
	2,591)	FY 2023: 558 (45 sessions)
		FY 2024: 254 (17 sessions)

\*Module 6: Service Planning and Delivery in Family-Centered Child Protective Services is offered to learners completing Caseworker Core 1.0 and 2.0.

There was a slight fluctuation with the Caseworker Core 1.0 attendance during FY20-23. This could be attributed to COVID-19 and the disruption that it caused throughout the field. Despite the disruptions, the program maintained a relatively steady level of attendance within this 4-year period and the previous 5-year period. This indicates the critical importance and sustained demand for the initial

training of new caseworkers. In FY 2024, attendance decreased due to the anticipated and actual transition toward the Caseworker Core 2.0 Series.

The Caseworker Core 1.0 Series included five optional learning labs, following Modules 2, 4, 5, and 6, for in-depth practice applying the training content. Attendance for the learning labs during the 5-year period appears in the Table below.

Course	Total Attendance	Attendance by FY
		FY 2020: 433
		FY 2021: 438 (50 sessions)
Module 2 (Engagement	1,366	FY 2022: 168 (20 sessions)
Skills)	(FY 2015-2019: 2,520)	FY 2023: 213 (28 sessions)
		FY 2024: 114 (11 sessions)
		FY 2020: 434
Module 4 (Assessing Safety	2 920	FY 2021: 836 (93 sessions)
and Risk)	2,820 (FY 2015-2019: 2,344)	FY 2022: 872 (95 sessions)
und Kisky		FY 2023: 528 (42 sessions)
		FY 2024: 150 (14 sessions)
	1,573	FY 2020: 430
		FY 2021: 469 (48 sessions)
Module 5 (Gathering Facts)	(FY 2015-2019: 2,438)	FY 2022: 201 (17 sessions)
	(1 1 2013 2013. 2, 130)	FY 2023: 369 (48 sessions)
		FY 2024: 103 (9 sessions)
		FY 2020: 319
Module 6 (Service Planning)	4 004	FY 2021: 529 (55 sessions)
	1,891	FY 2022: 412 (49 sessions)
	(FY 2015-2019: 2,023)	FY 2023: 455 (50 sessions)
		FY 2024: 176 (19 sessions)

Following the pandemic, attendance for the optional learning labs steadily decreased, apart from the learning lab for Caseworker Core Module 4. The training program recognizes the importance of application, practice, and feedback as essential to developing the critical skills needed to conduct quality casework. For this reason, the learning objectives covered in the learning labs have been folded into the Caseworker Core 2.0 Series.

#### Caseworker Core 2.0

The Caseworker Core 2.0 series has 38 self-directed courses and 13 instructor-led courses. The content of Caseworker Core 2.0 is structured into five blocks. The blocks are natural groupings of topics that allow for a focused exploration of knowledge and skill-building opportunities in a particular area and include:

- Foundation
- Assuring Child Safety
- Promoting Behavior Change to Prevent Future Maltreatment
- Promoting Permanency and Enhancing Well-Being
- Courtroom Preparation and Testimony

The number of staff who completed each self-directed (SD) and instructor-led training (ILT) in the Caseworker Core 2.0 series from its launch (September 1, 2023) to April 8, 2024, appears in the Table below. The tables also have the average score from the course evaluation questions, "The content was relevant to my role." and "I think I will be able to apply what I learned." Learners rated items on a 5-point rating scale (1=strongly disagree to 5=strongly agree).

#### The Foundation Block

This block provides foundational information that is carried forward into the remaining blocks. It includes an introduction to child protection in Ohio, ethical practice and professionalism, legislation and rules, effects of child maltreatment on development, engagement and interviewing strategies, documentation, collaboration and teaming, effective home visits, and critical thinking. Key areas of practice are highlighted throughout.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Caseworker Core Series Overview	SD	525	4.62	4.56
Child Protective Services' Goals: Safety, Permanency, and Well-Being	SD	540	4.6	4.6
Life of a Case	SD	588	4.69	4.71
Overview of CAPM (Comprehensive Assessment and Planning Model)	SD	512	4.64	4.65
Overview of Differential Response	SD	475	4.65	4.65
<b>Ethical Practice in Child Protection</b>	SD	567	4.69	4.7
Key Concepts of Diversity, Equity, and Inclusion	SD	559	4.72	4.67
Overview of Ohio Revised Code and Ohio Administrative Code	SD	545	4.63	4.59
Legislation Guiding Practice	SD	469	4.6	4.58
Introduction to Child Development	SD	461	4.7	4.72
The Impact of Trauma on the Child and Family	SD	547	4.71	4.7
<b>Documentation Basics</b>	SD	508	4.65	4.58
Collaboration and Teaming	ILT	464	4.59	4.6
Introduction to Engagement	SD	494	4.57	4.55
Introduction to Interviewing	SD	438	4.57	4.59

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Engagement and Interviewing Skills Practice	ILT	507	4.69	4.73
Interviewing Children	ILT	450	4.54	4.56
Seven Steps of Critical Thinking	SD	534	4.53	4.55
Key Practice Area: Mental Health	SD	378	4.62	4.56
Key Practice Area: Intimate Partner Violence	SD	378	4.53	4.54
Key Practice Area: Substance Use	SD	429	4.59	4.62
Planning Home Visits	SD	413	4.44	4.52
Conducting Home Visits	SD	363	4.54	4.48
Documenting and Debriefing Home Visits	SD	301	4.57	4.61
Parental Rights and Caseworker Responsibilities	SD	528	4.61	4.64
Skillful Use of Protective Authority	SD	467	4.68	4.68

# The Assuring Child Safety Block

Assuring child safety is one of the most important things caseworkers do. This block focuses on identifying child maltreatment, screening, assessment of safety, and safety planning, delivery, and monitoring.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Determining if Abuse or Neglect Occurred	ILT	457	4.71	4.72
Overview of Ohio's Screening Practices	SD	416	4.75	4.77
Case Pathway Assignment	SD	395	4.48	4.49
Fundamentals of Assessing Safety	SD	444	4.7	4.75
Documenting the Initial Assessment of Safety in Ohio SACWIS	SD	415	4.35	4.35
Quality Assessments of Safety: Is Immediate Intervention Necessary to Assure Child Safety?	ILT	428	4.78	4.65
Fundamentals of Fact Gathering	SD	479	4.61	4.61
Fact Gathering Skills Practice	ILT	501	4.6	4.47
Safety Planning: Determining How to Control Safety Threats	SD	487	4.46	4.5

Course	Modality	Completions		Apply What I Learned
Assuring Child Safety within Key Practice Areas	ILT	389	4.7	4.76

# The Promoting Behavior Change to Prevent Future Maltreatment Block

To prevent future maltreatment, caseworkers must work with families to achieve desired behavior change and keep children safe. This block provides information about the assessment of risk, service planning and delivery, and monitoring.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Assessing Risk of Future Harm	ILT	403	4.71	4.64
CW Core 1.0/2.0 Module 6: Service Planning and Delivery in Family- Centered Child Protective Services*	ILT	566	4.51	4.58

<sup>\*</sup> CW Core 1.0/2.0 Module 6: Service Planning and Delivery in Family-Centered Child Protective Services, is offered to learners completing Caseworker Core 1.0 and 2.0.

# The Promoting Permanency and Enhancing Well-Being Block

Permanency and well-being are other important goals that drive practice. This block includes information about permanency, separation, concurrent planning, independent living and transitional youth, and case closure.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Principles of Concurrent Planning	SD	302	4.53	4.53
Permanency	SD	509	4.57	4.57
Placement Options	SD	369	4.58	4.58
Adoption Process and Tasks	SD	271	4.5	4.6
Working Towards Successful Reunification: Strengthening the Relationship Between Primary and Resource Families	ILT	360	4.67	4.61
Impact of Separation on the Child and Family	SD	500	4.65	4.69
Managing the Effects of Separation	ILT	355	4.64	4.55
Independent Living and Youth Transitioning Out of Care	SD	291	4.51	4.52

Course	Modality	Completions		Apply What I Learned
Preparing For and Completing Case Closures	ILT	328	4.51	4.59

## The Courtroom Preparation and Testimony Block

There are courses about rules, laws, and legislation in other blocks. This block is specific to what happens leading up to court and in the courtroom. This block covers courtroom basics, preparing for court, and courtroom testimony.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Courtroom Basics	SD	415	4.48	4.5
Effective Courtroom Testimony	SD	383	4.54	4.53
Overview of Caseworker Responsibilities When Preparing for Court	SD	349	4.65	4.62
Courtroom Testimony Skills Practice	ILT	360	4.47	4.36

Between September 1, 2023, and April 9, 2024, 46 caseworkers completed the Caseworker Core 2.0 Series.

## **Supporting Children's Bureau Priorities**

Caseworker Core 2.0 supports the priorities of the Children's Bureau by focusing on several key areas: preventing children from entering foster care, supporting kinship caregivers, ensuring youth exit care with comprehensive support, and investing in the child protection workforce. Here's how it aligns with and supports these priorities:

#### Preventing Children from Coming into Foster Care

Caseworker Core 2.0 emphasizes the importance of collaboration among children, families, service providers, and other stakeholders. This collective effort helps develop strategies to prevent children from entering foster care. For example, in the course *Collaboration and Teaming*, caseworkers learn about teaming so all parties can convene to brainstorm preventative measures and support systems, thereby reducing the need for foster care placements.

Caseworker Core 2.0 integrates content on trauma, intimate partner violence, substance use, and mental health issues, allowing caseworkers to gain deeper insights into the dynamics that affect child safety and family stability. This knowledge is crucial for effectively assessing risks and connecting families with appropriate services.

#### **Supporting Kinship Caregivers**

The series includes courses such as *Working Towards Successful Reunification* and *Principles of Concurrent Planning*, which stress the significance of family search and engagement. This includes a focus on involving fathers and paternal relatives, enhancing the chances that kinship caregivers can be given custody as a permanency option. This approach not only supports kinship caregivers but also establishes a network of familial support for children, whether they remain in care or transition out.

## Ensuring Youth Leave Care with Strengthened Relationships, Holistic Support, and Opportunities

The course *Independent Living and Youth Transitioning Out of Care* provides caseworkers with comprehensive information on supporting older youth transitioning out of care. It focuses on developing interdependent and independent living skills, connecting youth to essential services, and building supportive relationships that continue beyond care.

Caseworker Core 2.0 also highlights the development of life skills and the importance of multidisciplinary team collaboration to ensure that youth have a supportive team as they transition out of care. These efforts are aimed at strengthening the youth's network and readiness for independent living.

#### <u>Investing in the Child Protection Workforce</u>

An increased number of self-directed courses and just-in-time learning resources allow for flexible learning opportunities that caseworkers can access as needed, which is critical for timely and informed responses in dynamic case scenarios.

The OCWTP is also piloting the use of a Transfer of Learning (TOL) coach for people with responsibilities for developing staff or overseeing staff development (e.g., supervisors, administrators, agency training staff). The TOL coach can provide guidance on how to use OCWTP's TOL tools and resources and help identify knowledge gaps.

#### <u>Addressing Disparities and Advancing Equity</u>

All Caseworker Core 2.0 courses were reviewed by an REI expert. Their feedback was incorporated into the course. The series also integrates cultural considerations in every course. It teaches caseworkers to identify and mitigate biases, which is vital for equitable practice.

Caseworker Core 2.0 enhances the skills and competencies of caseworkers and aligns closely with the Children's Bureau's priorities by building a preventative, responsive, and equitable child protection system. The OCWTP's comprehensive training and resources ensure that caseworkers are well-equipped to support children and families effectively, aiming for better outcomes in safety, permanency, and well-being. This strategic alignment with the Bureau's priorities through training reinforces agencies' overall resilience and capability to meet complex needs and adapt to new challenges.

#### **Delivery**

Trainer recruitment, approval, and development are key components of the OCWTP's success in facilitating quality learning experiences. OUCCAS, the State Training Coordinator, ensures instructor-led course trainers are content experts equipped to deliver standardized material.

Trainers of standardized courses go through a rigorous approval process. First, the expertise of prospective trainers is assessed to determine if they meet the minimum qualifications to facilitate a particular course. This is done by the prospective trainer completing and submitting a Verification of Trainer Qualification (VTQ) form, which asks about their experience and knowledge related to the course they wish to train. An OUCCAS content specialist reviews the VTQ, determining whether the applicant is suited to proceed in the approval process, which may include a necessary follow-up discussion. If it's determined that the prospective trainer meets the minimum qualifications, they are invited to a Training on Content (TOC). During the TOC, OUCCAS staff review the curriculum, training strategies, and other workshop details and further assess the prospective trainer's expertise. Then, following the TOC, OUCCAS may ask the prospective trainer to:

- Observe the workshop being facilitated by an experienced trainer.
- Co-train with another trainer.
- Train solo with an observation by OUCCAS staff (OUCCAS staff use a course-specific form to conduct trainer observations).
- Train solo.

Approval is granted when the trainer and OUCCAS content specialist agree that the trainer can and is ready to independently facilitate the workshop.

For Caseworker Core 2.0 instructor-led courses, 149 VTQs were reviewed between May 2023 – April 2024 by OUCCAS staff, and 96 were accepted (64%). During that same time, 49 Caseworker Core 2.0 instructor-led courses were observed.

## **Caseworker Initial Training Compliance**

Effective April 1, 2016, PCSAs must maintain staff education and in-service training records through DCY's learning management system (LMS). With the previous LMS, OCWTP pulled compliance through custom reports. In November 2022, DCY launched a new LMS called CAPS LMS. Aggregate reports on staff compliance rates across the state cannot be run from CAPS LMS at this point since hire dates were staggered, and the LMS does not currently have the necessary data field to capture this data. In September 2023, the OCWTP launched new Core curricula for caseworkers and supervisors. DCY continues to refine the details that will accurately track compliance with the new curricula within the new LMS.

#### **Case Assignment During Core Training**

Ohio is a state-supervised, county-administered children services system. There is no mandate regarding when cases can be assigned to new caseworkers. Most counties assign a limited number of cases before new caseworkers complete Caseworker Core 2.0. A survey of county policies indicates:

- A small number of counties do not assign cases while the worker is taking core training.
- Many more counties typically wait to assign cases until after 90 days to allow time for mentoring and shadowing experienced caseworkers.
- When cases are assigned, most counties indicated the number of cases is restricted until after core or after a set time period.
- Counties that do assign cases during core do so for several reasons:
  - Cases are used for training purposes, often alongside mentors or county training staff.
     The start of case assignment and the number of cases are based on milestones reached, observations, and the experience and skill level of the new caseworker.
  - A high rate of staff turnover and difficulty hiring replacements was noted by several counties as to why they assign a limited number of cases before core training is completed.

#### **Initial Training Caseworker Evaluation Data**

Every trainee who completes an ILT is asked to complete a session evaluation. The evaluation is identical for all ILT sessions. Trainees are asked to check one or more of the following reasons why they registered for the session:

- To make me better at my job.
- I enjoyed previous training with the instructor.
- I needed training hours.
- I was interested in the topic.
- I was told to take this training.
- The instructor recommended it to me.
- The training recommended to me.
- It satisfied a requirement.

Trainees are also asked to rate 21 aspects of the training on a 5-point rating scale (1=strongly disagree to 5=strongly agree). Analysis revealed that these 21 items could be reduced to four-factor scores by averaging the constituent items. The four factors are:

- Instructor (e.g., "The instructor was knowledgeable")
- Content (e.g., "The content was relevant to my role")
- Logistics (e.g., "The learning was available at a convenient time")
- Diversity (e.g., "Training addressed diversity issues")

Trainees also had the opportunity to explain what they thought was the best thing about the training and what most needed improvement. Partners, including trainers, RTC staff, and OUCCAS content developers, routinely review this qualitative data.

Analysis of the Caseworker Core ILT session evaluations from the first half of SFY 2024 revealed:

- The response rate was 50.1%.
- Because Caseworker Core is required of new workers, and because many RTCs schedule new workers as cohorts, it's not surprising that most learners reported they took the sessions

- because it satisfied a requirement (39.6%), to be better at the job (30.3%), or because they were told to (18.5%).
- Mean factor scores ranged from a low of 4.57 (diversity) to a high of 4.70 (instruction). The latter
  number can be interpreted in this simple way: supposing nobody used scores of 1, 2, or 3, the
  result would mean that 70% of respondents said: "strongly agree" and 30% said, "agree" (all
  the questions were worded so that strongly agree is the positive response).

<u>Content Relevance</u>: Most courses were rated above 4.5 for relevance, indicating that the content was well-aligned with caseworker needs.

<u>Application of Learning:</u> Ratings generally matched or exceeded relevance scores, showing that caseworkers could apply what they learned effectively in their roles.

<u>Conclusions</u>: Caseworker Core 2.0 has been pivotal in bolstering the competencies of child protection caseworkers through this comprehensive new series. The high content relevance and practical application ratings across most courses underscore the program's success in enhancing professional practice. The structured feedback from learners provides critical insights that affirm the series' impact on improving caseworker efficacy and readiness in various operational and procedural aspects of child protection.

#### Title IV-E Juvenile Court Staff

There are 16 counties in Ohio that have Title IV-E courts. These courts have been authorized to provide services to unruly or delinquent youth to reduce the likelihood of out-of-home placement as a result of child protection-related concerns. Title IV-E court staff are required to adhere to Ohio child protection rules as it pertains to assessment of safety and risk, safety planning, and service planning. To comply with these rules, Title IV-E court staff must understand fundamental child protection principles and have knowledge and skill in using CAPM and Ohio SACWIS. Title IV-E Juvenile Court Staff attend the OCWTP's Caseworker Core as a way to gain the knowledge and skills needed to do their work.

During this five-year period, the following activities were completed to support the learning needs of this population:

- Development of a Supplemental Trainer Resource to help them support the Title IV-E court staff attending their workshops. The guide includes:
  - o An overview of juvenile court
  - o Tasks the Title IV-E staff perform
  - Common juvenile justice terminology and vocabulary
  - o Tips for helping Title IV-E workers relate content to their role
  - o Tips for engaging Title IV-E worker
- Curated tool of Ohio SACWIS resources for Title IV-E staff that includes:
  - Just-In-Time Videos and PDFs specific for Title IV-E staff functions
  - Tips and resources for using Ohio SACWIS
- Created a curriculum in the CAPS LMS with the recommended Caseworker Core 2.0 courses for Title IV-E juvenile court staff.

# **Supervisors**

#### FY 2024 Data

1 2027 Data				
Key Metrics for (Required) Instructor-Led Components of Supervisor Core 1.0 and 2.0				
ILT Sessions Held	105			
Total Completions	1,013			
Mean Completions/Session	9.6			
Credits/Session	6.6			
Total Learning Hours	6,827			
Total Cost	\$80,297			
Cost/Learning Hour	11.78			
% Online	61.0			

Key Metrics for Self-Directed Components of Supervisor Core 2.0				
Total Completions 1,527				
Credited Learning Hours	1,063			

# **Supervisor Core 1.0**

Supervisor Core 1.0 is 72 hours of training, covered in six modules. There is one optional 6-hour Learning Lab.

The number of sessions and supervisors who attended each Supervisor Core 1.0 course over the 5-year period appears in the Table below.

# **Number of Sessions**

Course	FY19	FY20	FY21	FY22	FY23	FY24
SC1: Supervising Casework Practice	11	8	11	14	10	4
SC2: Leadership in Child Welfare	11	7	7	15	10	2
SC3: Leading Change and Managing Conflict	10	6	10	13	10	3
SC4: Assessing and Evaluating Individual Staff Performance	10	5	11	12	11	4
SC5: Professional Development of Staff	11	5	10	11	10	1
SC6: Building a Highly Effective Unit	7	6	10	10	11	4

Course	FY19	FY20	FY21	FY22	FY23	FY24
Learning Lab: Promoting Critical Thinking in Casework Practice	4	2	1	2	0	0

#### **Number of Learners**

Course	FY19	FY20	FY21	FY22	FY23	FY24
SC1: Supervising Casework Practice	123	71	100	115	105	45
SC2: Leadership in Child Welfare	111	66	75	123	104	24
SC3: Leading Change and Managing Conflict	114	35	95	101	118	37
SC4: Assessing and Evaluating Individual Staff Performance	105	59	108	105	102	51
SC5: Professional Development of Staff	118	59	99	130	124	6
SC6: Building a Highly Effective Unit	78	73	78	94	99	52
Learning Lab: Promoting Critical Thinking in Casework Practice	20	7	5	10	0	0

Due to COVID-19, all in-person Supervisor Core sessions were suspended for three months in 2020. Scheduling and attendance increased to normal levels in FY 2021 and significantly reduced in FY 2024 with the rollout of Supervisor Core 2.0.

## Supervisor Core 2.0

The Supervisor Core 2.0 series has 24 self-directed courses and 14 instructor-led courses. The content of Supervisor Core 2.0 is structured into two blocks.

- Foundation
- Child Protection

The number of supervisors who completed each SD and ILT in the Supervisor Core 2.0 series from its launch (September 1, 2023) to April 8, 2024, appears in the Table below. The tables also have the average score from the course evaluation questions, "The content was relevant to my role." and "I think I will be able to apply what I learned." Learners rated items on a 5-point rating scale (1=strongly disagree to 5=strongly agree).

#### **The Foundation Block**

This block addresses the fundamental information and skills needed to be an effective supervisor and leader. Within this block, supervisors learn how to provide quality administrative, educational, and supportive supervision, lead a diverse team, and practice with a trauma-informed lens.

Course	Modality	Completions	Content Relevance Rating	Apply What I Learned
Supervisor Core 2.0 Series Overview	SD	79	4.46	4.32
Transition to Supervision: Crossing the Divide	SD	72	4.68	4.68
The Supervisor's Critical Role	SD	85	4.66	4.65
The Supervisor as a Leader	SD	73	4.55	4.75
Power and Influence	SD	58	4.8	4.8
Mission, Vision, and Values	SD	58	4.23	4.19
Supervisor Self-Care	ILT	140	4.33	4.19
Trauma-Informed Supervision	ILT	70	4.58	4.63
Time and Workload Management	SD	98	4.69	4.71
Understanding Feelings Toward Change	SD	74	4.37	4.35
Supervision Strategies for Leading Change	ILT	31	4.8	4.8
Teaming for Success	SD	61	4.46	4.54
Understanding Conflict	SD	68	4.75	4.67
The Power of Collaboration	SD	99	4.5	4.56
Supervision Strategies for Managing Conflict	ILT	25	5	5
Adopting a Coaching Mindset	SD	79	4.81	4.7
Introduction to Learning	SD	70	4.54	4.49
The Learning Partnership	SD	68	4.71	4.71
Enhancing Confidence, Competence, and Motivation to Build Skills	SD	76	4.48	4.59
Staff Development: The Coaching Mindset in Action	ILT	43	4.46	4.54
Data-Informed Supervision	SD	74	4.68	4.74
Choosing the "Right" Words	SD	103	4.51	4.58
Setting Performance Expectations to Achieve the Agency Mission	SD	49	4.7	4.57
<b>Documenting Performance</b>	SD	52	4.7	4.74
Progressive Discipline	SD	57	4.3	4.35
Staff and Workplace Safety	SD	45	4.6	4.63
Assessing and Evaluating Staff Performance	ILT	36	5	4.75
Race, Equity, and Inclusion in Supervision	ILT	74	4.9	4.83

#### The Child Protection Block

This block dives deep into areas of child protection supervision. These courses apply a supervisory lens to the knowledge and skills your staff are learning in Caseworker Core.

Course	Modality	Completions		Apply What I Learned
Managing for Outcomes: Using SACWIS Data to Improve Performance	ILT	56	4.27	4.53
The Seven Steps of Critical Thinking*	SD	587	4.53	4.55
The Supervisor's Role in Assessing Safety	SD	81	4.52	4.57
Supervision Strategies to Promote Thorough Assessments of Safety	ILT	45	4.64	4.55
Examining the Supervisor's Role and Impact of Screening within the Agency	ILT	22	4.33	4.42
Why Kinship?	SD	63	4.41	4.45
Supervising Work with Kin	ILT	18	4.86	5
<b>Assuring Effective Court Testimony</b>	ILT	16	4.25	4.5
Supervising Separation and Placement Decisions	ILT	10	5	5
Case Consultation and Critical Thinking**	ILT	0	0	0

<sup>\*</sup>The Seven Steps of Critical Thinking self-directed course is also part of Caseworker Core 2.0.

# **Supporting Children's Bureau Priorities**

Supervisor Core 2.0 aligns closely with the Children's Bureau's five priority goals. Here's how Supervisor Core 2.0 supports these priorities:

#### Prevent Children from Coming into Foster Care

Supervisor Core 2.0 includes specialized content that equips supervisors with the knowledge needed to ensure caseworkers use fundamental child protection practices effectively. This includes critical thinking in decision-making processes related to child safety assessments, early intervention strategies, family preservation efforts, and the utilization of community resources. With trained supervisors ensuring that these practices are applied correctly, the likelihood of unnecessary foster care placements decreases, thereby preventing children from coming into foster care.

<sup>\*\*</sup>Between April 16, 2024, and June 30, 2024, there are 4 sessions of Case Consultation and Critical Thinking scheduled with 38 learners enrolled.

#### **Support Kinship Caregivers**

The series provides supervisors with in-depth knowledge of kinship placement policies and caregiver support services. Supervisors learn how to effectively oversee casework involving kinship care, which includes fostering effective communication with kinship families and ensuring that kinship placements are supported. This training helps strengthen the placements and ensures that children living with kinship caregivers have stable and positive outcomes.

#### Ensure Youth Leave Care with Strengthened Relationships, Holistic Support, and Opportunities

Supervisor Core 2.0 trains supervisors in key areas such as leadership, trauma-informed practice, and cultural competence. By developing these skills, supervisors can better manage their teams to support youth in foster care, ensuring they leave the system with strengthened relationships and holistic support. This includes overseeing the implementation of programs that prepare youth for independent living, connecting them with educational and job opportunities, and ensuring they have robust support systems in place.

## Invest in the Child Protection Workforce

The series is tailored to develop fundamental supervisory skills that are crucial for leading effective and resilient child protection teams. This training focuses on enhancing leadership and team management capabilities, trauma-informed practices, and cultural competence. Investing in supervisors strengthens the child protection workforce, leading to improved outcomes for children and families served by the system.

# Addressing Disparities and Advancing Equity

Supervisor Core 2.0 addresses disparities and advances equity in child protection practice through comprehensive training modules on racial equity, inclusion, trauma-informed practice, implicit bias, data-informed managing, and community engagement. These courses are designed to equip supervisors with the understanding necessary to identify and mitigate disparities within the child protection system. By educating supervisors on these critical areas, they can lead their teams with an equity-focused approach, ensuring that the needs and backgrounds of all families are respected and adequately met.

Supervisor Core 2.0 strategically enhances the skills of supervisors, which is crucial for effectively leading child protection teams and supporting the Children's Bureau's priorities. The series ensures that supervisors are well-prepared to prevent unnecessary foster care entries, support kinship caregivers, assist youth in their transition out of care, and lead a competent, equitable workforce. This holistic approach improves individual child and family outcomes and strengthens the overall system.

## Delivery

The trainer approval process for the standardized instructor-led courses in Supervisor Core 2.0 is the same process as summarized under Caseworker Core 2.0. For Supervisor Core 2.0 instructor-led courses, 174 VTQs were reviewed between May 2023 - April 2024 by OUCCAS staff, and 152 were accepted (87%). During that same time period, 29 Supervisor Core 2.0 instructor-led courses were observed.

#### **Supervisor Initial Training Compliance**

Effective April 1, 2016, PCSAs must maintain staff education and in-service training records through the learning management system (LMS). With the previous LMS, OCWTP pulled compliance through custom reports. In November 2022, a new LMS was launched which is called CAPS LMS. Aggregate reports on staff compliance rates across the state cannot be run from CAPS LMS at this point since hire dates were staggered, and the LMS does not currently have the necessary data field to capture this data. In September 2023, the OCWTP launched new Core curricula for caseworkers and supervisors. DCY continues to refine the details that will accurately track compliance with the new curricula within the new LMS.

#### **Initial Training Evaluation Data**

Analysis of the Supervisor Core ILT session evaluations from the first half of SFY 2024 revealed:

- The response rate was 35.0%.
- Reasons learners reported taking Supervisor Core were that it satisfied a requirement (53.1%), to be better at the job (26.6%), or because they were told to (10.9%).
- Mean factor scores ranged from a low of 4.08 (diversity) to a high of 4.43 (instruction) on a scale from 1 to 5, where five is the most favorable response.

<u>Relevance and Application:</u> The majority of the courses were rated highly on content relevance and potential for application (most scores were above 4.5). This indicates that supervisors deemed the courses as applicable in their daily supervisory roles.

<u>Critical Skills Development:</u> The courses successfully covered key areas such as critical thinking, data-informed decision-making, and performance management, which are essential for supervisory efficacy in child protection.

<u>Conclusions</u> Supervisor Core 2.0 has proven to be a valuable resource for supervisors in child protection services, providing them with the necessary skills and knowledge to enhance their leadership capabilities and effectively oversee casework practice. The high scores in both content relevance and application potential across various courses highlight the program's success in meeting the learning needs of supervisors and its impact on improving child protection practices.

#### Initial Staff Training Challenges, Responses, and Strengths

The work of the OCWTP between July 1, 2019, and June 30, 2024, showcases an ability to be dynamic, innovative, and adaptive when addressing the initial training needs of caseworkers and supervisors. Amid the challenges brought on by the pandemic and workforce crisis, the program demonstrated remarkable strengths, adeptly navigated obstacles, and implemented responsive strategies to ensure the effectiveness of its workforce training programs.

Evidence of this adaptability, partnership, and continued strive toward excellence is outlined below.

CHALLENCES	DESDONSES	STDENCTUS
CHALLENGES	RESPONSES	STRENGTHS  Communication by the OCWTD
In Core 2.0, some ILTs require prerequisites. This was a new requirement for learners. Some learners did not complete the prerequisite courses before attending the ILTs.	Guidance was given to the OCWTP partners and learners that the prerequisites must be completed before attending the ILTs, or they would be unable to attend the ILT session. The program also emphasized the importance of having the content to build on and practice in the ILTs. RTCs tracked prerequisite completion, prompted the learners to complete the self-directed courses before the ILT, and did not allow them to attend the ILT if the prerequisites were incomplete.	Communication by the OCWTP to learners was consistent and frequent. PCSAs are adapting to these new expectations.
There are a higher number of courses in Core 2.0 as compared to Core 1.0.	OCWTP staff presented in numerous meetings leading up to and after the rollout to show the new structure of the series, including the blended delivery and the times of each course. The OCWTP initiated Core Huddle meetings and Implementation meetings, were invited to several regional and liaison meetings, and held watch parties to communicate this information. OUCCAS also created a resource for Core 2.0 FAQs.	The program was responsive to needs by providing a variety of ways to show and explain the new structure, as well as showcasing other vital information and providing answers to several questions.
The ILTs require learners to have a device to participate in activities using Poll Everywhere and Padlet. These platforms also require the internet to use. Historically, not all RTCs would share their Wi-Fi information with the learners.	RTCs have iPads and tablets that they loan to learners if they do not come to the session with a device. Also, RTCs tested the bandwidth of their training locations to ensure the learners were able to access Wi-Fi to use devices	RTCs were proactive in ensuring their training locations had enough bandwidth and devices to meet the learners' needs.

CHALLENGES	RESPONSES	STRENGTHS
	without using the learners' data.	
Some learners were not given headsets or a private learning space to take virtual ILTs. This caused issues with interruptions from agency staff, limited the learners' ability to contribute verbally, and hindered some activities when multiple learners were in the same room on separate devices.	As part of OUCCAS' presentations to PCSAs, in liaison meetings, and to other OCWTP partners, reminders of best practices in the virtual learning environment were provided. The OCWTP provided counties with suggestions on how to best prepare a learner for virtual ILTs, which included having the necessary equipment and space to maximize the learning experience. In sessions when learners were without a headset or private space, the trainers and producers changed the group assignments so those working in the same space were in the same group.	Collaboration was evidenced by showing how we all play a role in the learning experience and how our expertise in learning science drove suggestions and best practices to provide the best virtual experience. The trainers and producers were able to change the way groups were set up to minimize the stress and distractions learners may have experienced if they were put into different groups.
Having enough skilled trainers approved at the time of rollout. Several new trainers applied and were accepted to begin the approval process for ILTs.	OUCCAS held multiple TOCs for each ILT in the months leading up to the rollout date to get trainers approved. Pilot sessions were also held, and some were used as an opportunity for new trainers to observe or co-train, which are steps in their approval process. After the rollout, OUCCAS has continued to pair new and seasoned trainers to develop them and get them through the approval steps. OUCCAS has offered technical assistance to trainers to ensure they are confident to move forward.	OUCCAS is able to provide assistance and support in one-on-one contacts as well as in groups. We were flexible in our schedules to hold TOCs and debrief meetings throughout the day, evenings, and weekends. The program was thoughtful when pairing trainers to enhance their development.

CHALLENGES	RESPONSES	STRENGTHS
CHALLENGES  Producers have a more involved role in the Core 2.0 ILTs. The program determined that preparing producers on the standardized course materials or their roles and tasks in the ILT virtual sessions was critical.	OUCCAS held several TOTs for producers of standardized courses to orient them to training materials, where to locate them, and their roles, tasks, and expectations while producing a standardized course. A survey was completed by the attendees of these TOTs, and the feedback is being used to create more resources for producers. A video was created to capture the content presented in the TOT so producers can go back and get the information again. We also began to track the producers who completed the TOT, and when OUCCAS staff were able to observe the	STRENGTHS  The program was responsive by providing several TOTs, creating a video, and providing other resources and support to bring the producers up to speed. Feedback was valued and used to create more resources and better our practice.
Trainers were new to Poll Everywhere and Padlet. They weren't sure how to use these platforms.	producers in a virtual standardized ILT and demonstrated their ability to fulfill their tasks.  OUCCCAS held several TOT sessions for both platforms and offered one-on-one technical assistance and practice opportunities.	The program recognizes the importance of trainers' competence and confidence in the technology used in the classroom. A variety of efforts are taken to ensure trainers use the technology seamlessly in the classroom.
With so many new courses, it was important to familiarize the OCWTP partners with the content and activities in each course to fully promote them or to offer them as a match to a need from a PCSA.	OUCCAS offers deep dives of each ILT, giving each course a high-level run-through. Highlights of the content, key takeaways, the details of the skills practice opportunities, and the encouragement of TOL are covered.	Having the content developers work so closely in partnership with those who implement the series helps everyone within the OCWTP to be familiar with the content and the course's intended outcomes.

Overall, the OCWTP demonstrated a robust response to the challenges of training child protection professionals, marked by a strong emphasis on innovation, flexibility, and quality improvement. These efforts reflect a deep commitment to ensuring that caseworkers and supervisors are well-equipped to meet the evolving demands of their roles.

# **Part III: Ongoing Staff Development**

#### Overview

The order of topics in this section is as follows:

- Need assessment
- Ongoing learning requirements for caseworkers and supervisors
- Training offered by OCWTP
- Training offered by partner organizations
- Compliance with ongoing training requirements
- Coaching

#### **Need Assessment**

The OCWTP adopted a new competency model in 2022 for child protective services caseworkers, supervisors, assessors, and resource families.

The new model consists of ten competencies universal to all populations, each of which contains 5-10 behavioral indicators specific to each training population. These behavioral indicators are observable and measurable practices that individuals employ when demonstrating a specific competency. They are used to help the individual and supervisor more accurately assess the individual's development needs within a competency. They are also used by the OCWTP to develop learning interventions and target the recruitment of trainers and coaches.

View the full model of competencies and behavioral indicators here: <a href="https://ohiocaps.org/wp-content/uploads/2023/07/OCWTP-Competencies-for-Web.pdf">https://ohiocaps.org/wp-content/uploads/2023/07/OCWTP-Competencies-for-Web.pdf</a>.

In 2023, the OCWTP associated its new competencies with the 300+ learning objects in its learning catalog and began using the competencies to assess systemic needs and develop new learning interventions to address identified needs. Also, in 2023, the OCWTP developed and piloted new Individual Training Needs Assessment (ITNA) and Individual Development Plan (IDP) processes for caseworkers and supervisors. The previous ITNA process was conducted outside of the OCWTP's previous learning management system, E-Track. The resulting high-priority needs were then manually transferred by Regional Training Center (RTC) staff into IDPs in E-Track. The OCWTP's new Child and Adult Protective Services Learning Management System (CAPS LMS), launched in December 2022, included functionality to integrate the ITNA and IDP processes within the LMS.

The new LMS-integrated ITNA/IDP process was rolled out to caseworkers and supervisors statewide in January 2024. Every two years, CPS caseworkers and supervisors will now complete an individual needs assessment of their ten competencies within the CAPS LMS in conjunction with their supervisors.

Assessment of each competency involves rating their knowledge and skill level on the behavioral indicators associated with that competency. The average of their and their supervisor's ratings determines their overall score for that competency. The ITNA also includes answering a short set of open-ended questions about their development needs in key practice areas. Upon completion, they review recommended development actions (instructor-led training, self-directed courses, videos, materials, coaching) tailored to their assessment results and select those they wish to add to their development plan in CAPS LMS. As they complete learning interventions in CAPS LMS, that progress is automatically captured in their development plan.

Only a small percentage of staff assigned the new ITNA in January 2024 have completed it (8% of the caseworkers and 3.35% of the supervisors.) This aligns with expectations, given the task's due date of December 30, 2024. Due to the limited response size, drawing conclusions regarding statewide prioritized needs is impossible. In subsequent years, we expect to have much higher respondent pools and broader aggregate data.

In addition to analyzing individual training needs data, OUCCAS and the eight RTCs also consider systemic needs data from the following sources:

- Key informant discussions with agency directors and supervisors
- Feedback from post-training-participant surveys
- CPOE exit interviews
- Emerging state and national trends

# Summary of Caseworker and Supervisor Needs Assessments and Development Plans (FY 2020 to 2023)

Between FY 2020-2023, child protection caseworkers identified several learning needs via the previous ITNA process as top priorities for their professional development.

- Drug and Paraphernalia Identification: Consistently high priority across all years, focusing on the ability to recognize various drugs and their effects, which is crucial in safeguarding children from drug-exposed environments.
- Stress and Health Management: There is a strong emphasis on caseworkers maintaining their mental and physical health, indicating the stressful nature of child protection work, which can lead to burnout and secondary trauma.
- Disorder Identification and Management:
  - o Developmental Disorders: Autism, Asperger's, and PDD have been recurrent themes, reflecting the need for specialized knowledge in handling these conditions.
  - Mood Disorders and PTSD: These are common in children under care; hence, caseworkers need to be adept at managing these issues to provide proper support and interventions.
- Operational Effectiveness: Skills in managing multiple priorities and developing effective work plans are increasingly highlighted, suggesting a need for efficiency in caseworkers' workflows to cope with their demanding roles.
- Specialized Child Protection Concerns: Human trafficking and sexual abuse identification have been noted as key areas needing development.

These themes underscore child protection work's multifaceted and challenging nature, requiring caseworkers to continually adapt and enhance their skills across a broad spectrum of competencies. The data reflects a shift towards not only addressing external challenges (such as drug abuse and disorders in children) but also internal challenges (such as stress management and operational effectiveness), which are vital for maintaining the well-being and efficacy of caseworkers in their roles.

Between FY 2020-2023, the identified training needs for supervisors in child protection services have focused on enhancing interpersonal skills, improving performance management, and fostering professional development within their teams. These needs have consistently emphasized the importance of a strengths-based approach and the effective resolution of performance issues.

- Engagement and Performance Management: Consistent emphasis on using strengths-based strategies and performance improvement plans to address and resolve performance issues.
- *Progressive Disciplinary Actions*: Importance placed on progressive disciplinary actions as motivators rather than punitive measures.
- Professional and Personal Development: Focus on empowering staff through creative and innovative practices and the continuous professional development of staff. Supervisors are expected to be adaptive in their styles to suit individual employee needs and developmental stages.
- Overcoming Barriers: A recurring theme is supervisors' need to assist staff in identifying and overcoming barriers that prevent them from mastering necessary skills, whether these are organizational, environmental, or personal.
- Strategic and Supportive Supervision: Strategies cover the administrative and educational aspects and the supportive nature of supervision that helps staff reach their potential. Creating and maintaining a work environment that promotes optimal performance and adopts evidence-based practices is important.
- Handling Challenging Behaviors and Conflicts: Identifying factors contributing to challenging behaviors and designing appropriate strategies to address these, which includes understanding and managing resistance and conflicts arising from differences in perspective or communication styles.

Overall, supervisor ITNA data highlights a desire for more empathetic and adaptive supervision practices that focus on developing staff potential through supportive, creative, and flexible supervisory strategies. These needs reflect a broader move towards a more dynamic and responsive leadership style in child protection services, aiming to improve both staff performance and child and family outcomes.

#### **Caregiver Needs Assessments and Development Plans**

Ohio Administrative Code rule 5101:2-5-33 requires recommending agencies to develop and implement a written needs assessment and continuing training plan for each foster caregiver affiliated with that agency. DCY felt it would be redundant to have caregivers also complete an ITNA and IDP in CAPS LMS. The OCWTP has developed an optional online needs assessment survey for agencies and foster caregivers to complete every two years. The optional online needs assessment helps caregivers identify

key skill areas in which they need development. The survey takes approximately 10 minutes to complete. Results are emailed to the foster caregiver, their agency worker, and the regional training center that serves their agency. Caregivers in their first two years of certification are advised to select 2-3 topics to address after they complete their Resource Readiness training requirements. Third year and beyond caregivers are advised to select up to 10 topics to address.

Survey data indicate the following topics as priority training needs for caregivers:

- Adoption
- Behavioral Health
- Child Development
- Attachment/Relationship Building
- Discipline
- Trauma

## **Challenges and Responses**

In the fall of 2023, as the OCWTP was getting ready to release its new ITNA/IDP process, it learned that Cornerstone Learning on Demand (the platform on which the CAPS LMS is based) would be sunsetting its competency functionality over the next two years and replacing it with combined capabilities and skills functionality. OCWTP expects to begin testing the new functionality in the fall of 2024. Until then, we will continue with the existing processes. Cornerstone has suggested that there will be a way to migrate legacy competency data into the new capabilities and skills module.

## **Ongoing Learning Requirements**

**Caseworkers:** After completing the Caseworker Core series in their first year, PCSA caseworkers must attend 36 hours of ongoing training each year thereafter. They must also complete an approved domestic violence training and an approved human trafficking course within the first two years of employment.

**Supervisors:** After completing the Supervisor Core series, supervisors must attend 30 hours of ongoing training each year, including an approved domestic violence training and an approved human trafficking course if not completed already as a caseworker.

Both caseworkers and supervisors can meet ongoing training requirements through relevant training provided by OCWTP, DCY, accredited colleges or universities, seminars, or conferences. Regardless of the training provider, any training that counts toward ongoing training requirements is recorded in the LMS.

#### **Training Offered by OCWTP**

#### **Standardized Training for Staff**

The following series of training were designed for caseworkers and supervisors:

Subject (high level)	Sessions	Completions	Mean Credits	Total Learning Hours
САРМ	19	173	5.5	949
Sexual Abuse Intervention Series	16	115	9.4	1,014
SOAR (Trafficking)	27	405	5.5	2,227
Safe & Together (Domestic Violence)	29	246	11.0	2,711
Virtual Reality	9	72	4.2	299
Youth-Centered Permanency Roundtables	3	54	5.5	297

# **Trainer-Developed Learnings**

Following are the instructor-developed training opportunities in which more than half of the session participants were staff and which, across scheduled sessions, at least 50 staff completed the training.

	Mean % That Were		Staff
	Credits	Staff	Completions
Culture and Diversity	4.1	76.2	695
Ethics	3.2	75.4	503
Mental Health	4.2	60.3	491
Trauma	4.9	65.9	482
Substance Use	5.3	77.1	460
Safety	4.1	80.0	443
Domestic Violence	7.4	74.3	410
Treatment Interventions	4.7	59.9	298
Self-Care Self-Care	4.2	68.4	297
Stress	5.0	66.9	248
Maltreatment	6.3	74.3	245
Services	5.4	81.1	239
Conflict Management	3.7	58.2	230
Communication	4.2	69.9	227
Legal Aspects	5.2	83.3	223
Engagement	4.3	74.5	183
Law Enforcement	8.5	85.2	164
Supervision	3.3	74.2	131
Interviewing	7.7	88.3	128
Poverty	5.3	79.3	111
Resilience/Post-Traumatic Growth	4.6	65.3	104
Prevention	4.6	54.2	82
Discipline	5.3	55.3	78
Assessment	4.9	69.3	75

	Mean Credits	% That Were Staff	Staff Completions
Professional Development	3.7	69.0	70
Environmental Factors	3.9	86.8	69
Investigation	12.6	93.2	67
Family Search and Engagement	5.5	81.9	65
Hoarding	5.5	77.1	62

### **Aligning Training Attended with Training Needs**

To analyze whether the training attended by caseworkers and supervisors aligns with their identified high-priority needs, the OCWTP compared the learning need themes (outlined in the previous section) with the subject areas of completed training sessions. Due to our limited data for FY24, below is a comparative analysis based on the themes extracted from the competency needs for FY 2020 to FY 2023.

#### **Caseworker Learning Needs Themes:**

- Drug and Substance Abuse
  - Related Training Topics: Substance Use, Safety
  - Training Data: Substance Use training had the highest mean credits (5.3) and a
    participation rate of 77.1%, which shows a strong alignment with the need for drug
    abuse identification skills.
- Mental and Developmental Health Disorders
  - Related Training Topics: Mental Health, Trauma, Domestic Violence, Treatment Interventions
  - Training Data:
    - Mental Health: 60.3% staff completion, aligning with needs for handling mood and developmental disorders.
    - Trauma: 65.9% staff completion, reflecting training in PTSD and trauma-related competencies.
- Stress and Self-care
  - Related Training Topics: Self-Care, Stress
  - o Training Data:
    - Self-Care: 68.4% staff completion, somewhat aligns with the need for managing personal stress.
    - Stress: 66.9% staff completion, directly aligns with the need for strategies to manage work-related stress.
- Human Trafficking and Sexual Abuse Identification
  - o Related Training Topics: Safety, Law Enforcement, Investigation
  - Training Data:
    - Investigation: 93.2% of staff completion highlights training in detailed investigative competencies, which likely include abuse identification.

- Seven hundred and sixty-six completions of the standardized courses related to sexual abuse intervention, domestic violence, and trafficking.
- Professional and Personal Efficacy
  - o Related Training Topics: Professional Development, Communication, Engagement
  - Training Data:
    - Communication: 69.9% staff completion, aligns with needs for effective communication strategies.
    - Engagement: 74.5% staff completion, aligns with the need for effective client engagement techniques.

## **Supervisor Learning Needs Themes:**

- Performance Management and Improvement
  - o Related Training Topics: Supervision, Conflict Management, Discipline
  - Training Data:
    - Supervision: 74.2% staff completion, directly aligns with supervisory competencies needs.
    - Conflict Management: 58.2% staff completion aligns with managing challenging behaviors and conflicts.
- Professional Development Facilitation
  - o Related Training Topics: Professional Development, Coaching, Leadership
  - Training Data: Professional Development: 69.0% staff completion aligns with the need for developing staff capabilities on the job.
- Strategic and Supportive Supervision
  - o Related Training Topics: Supervision, Engagement, Communication
  - Training Data: Supervision: 74.2% staff completion, directly aligns with needs for administrative and supportive supervisory strategies.
- Handling Resistance and Conflict
  - o Related Training Topics: Conflict Management, Legal Aspects
  - Training Data: Conflict Management: 58.2% staff completion, aligns with understanding and managing resistance and behavioral challenges.

Both caseworkers and supervisors attended training sessions that highly aligned with their identified competency needs, such as substance abuse, mental health, stress management, and supervisory strategies.

While there is a good alignment in many areas, enhancing participation in key areas such as conflict management, professional development, and specific abuse identification tactics (like human trafficking) could further improve competencies aligned with identified needs.

### **Training Offered by Partner Organizations**

DCY partners with several organizations to develop and provide specialized training content needed by staff. Following is a summary of training offered between July 1, 2023 and March 31, 2024.

#### **Kinnect**

Kinnect is an Ohio-based nonprofit dedicated to ensuring permanent families for all children in the shortest time possible and connecting those families with individualized support to meet their unique needs.

The following trainings were provided for Kinnect to Family, an intense family search and engagement program. Kinnect to Family provides tools, resources, and engagement with the goal of family reunification through kinship care. The program is currently implemented in 30 Ohio counties, and with current expansion efforts underway, the program will have 36+ Ohio counties by the end of the calendar year. These trainings were provided and offered in Kinnect-to-Family implemented counties, as well as offered statewide for counties considering the model for the period of July 2023 through March 2024. Training topics include intense family search and engagement techniques and strategies, social media usage as an engagement tool, genogram training, policy and procedures related to kinship, and building healthy relationships and connections to enhance permanency. Kinnect to Family training a total of 836 attendees for the reporting period. The Training Offered by Kinnect to Family include:

Training Session	Date	Attendees
KTF Model Training	7/20/2023	12
Fairfield County Stakeholder	8/14/2023	24
Cuyahoga County Stakeholder	8/22/2023	8
SW Regional Learning Community	9/7/2023	12
NE Regional Learning Community	9/7/2023	14
Cuyahoga County Stakeholder	9/8/2024	20
NW Regional Learning Community	9/12/2023	13
SEEK	9/12/2023	20
Pike/Perry County Stakeholder	9/26/2023	9
SEEK	9/26/2023	10
SE Regional Learning Community	9/28/2023	20
SEEK	10/5/2023	17
SEEK	10/12/2023	11
KTF Model Training	10/19/2023	5
SEEK	11/7/2023	8
Joint Learning Community	12/5/2023	50
Perry County Stakeholder	12/13/2023	12
Genogram Training	12/20/2023	15
KinFirst Courtrooms Convening	1/11/2024	57
KTF Model Training	1/23-1/25/24	10
Perry County Stakeholder	1/24/2024	16
SEEK	1/24/2024	10
Hamilton County Stakeholders	2/13/2024	18
Family Finding Overview	2/13/2024	17
Site Liaison Training	2/15/2024	7
Wyandot County Stakeholder	2/15/2024	9

Training Session	Date	Attendees
Hamilton County Stakeholders	2/15/2024	10
Hamilton County Stakeholders AM	2/20/2024	50
Hamilton County Stakeholders PM	2/20/2024	38
Henry County Stakeholder	2/20/2024	9
Hamilton County Stakeholders	2/22/2024	19
Portage County Stakeholder	3/1/2024	6
NW Regional Learning Community	3/5/2024	18
SW Regional Learning Community	3/7/2024	24
NE Regional Learning Community	3/12/2024	8
SE Regional Learning Community	3/14/2024	17
FSE Introduction	3/15/2024	150
Marion County Stakeholder	3/18/2024	13
Cuyahoga County Stakeholder	3/21/2024	50

### **Building a Better Future (BABF) Training**

Building a Better Future is a three-day workshop designed to familiarize those attending with a greater understanding of the children's services process. It is designed to provide participants with tools and skills to assist parents involved with children's services to move through the system more successfully. This course is not intended as a counseling program or as a replacement for other services.

The workshop's goal is to engage participants in recognizing their individual and family strengths and to support them in recognizing the individual and family strengths of the families and children they will be assisting. Ultimately, *Building a Better Future* should help everyone who serves families and children to work with parents more effectively and with an increased understanding of how all aspects of the support continuum can work together.

Building a Better Future will always have two co-facilitators: A Parent Partner and a Children Services professional. The is a statewide initiative sponsored by DCY and available in OCWTP. This training is scheduled by the DCY Peer Parent Program Project Manager. This training is available only when a new Parent Partner is onboarding with Partnering with Ohio Parents (POP).

This training offers 13.75 training hours/CEUs. The primary audience for BABF is:

- Parent Partners or Parent Partners in Training
- Adult Foster Care Alumni
- Intake and Ongoing Caseworkers, Supervisors, and Administrators from Children Services
- Resource Parents (Foster and Kinship)
- Court Personnel (CASA, GALS, Family Attorneys, Judges, Magistrates, Family Drug Court)
- Community Partners and agencies that serve families and children

Two BABF trainings were held July 1, 2023-March 31, 2024 to an audience of 10 PCSA staff and 11 non-CPS audience members.

Ohio held its first annual TOT on March 6-7, 2024. An annual TOT is a required part of the training in maintaining as part of fidelity. Over the course of two days, the training team reviewed the three-day curriculum for updates, discussed training completed to date (lessons learned, tips, changes, etc.), discussed the trainer application process, and practiced the delivery of content.

There are six Children Services professionals and five Parent Partners in the training pool.

To maintain fidelity to the training and the Partnering with Ohio Parents (POP) program, questions developed by the Iowa Parent Partner Approach purveyors are used to evaluate the training. The BABF training requires that participants complete an evaluation on Day 1, Day 2, and Day 3 of the training.

### **Center for Adoption Support and Education (CASE)**

Only a single person completed the online national Adoption Competency Mental Health Training Initiative for Child Welfare Professional s available online.

### **National Indian Child Welfare Association (NICWA)**

Information about this course may be found at https://www.nicwa.org/. A total of 96 learners have completed the course since July 1, 2000. This year, 38 learners completed the course.

#### **Ohio START**

Ohio START (Sobriety, Treatment and Reducing Trauma) is an evidence-informed children services-led intervention model that helps public children services agencies (PCSAs) bring together caseworkers, behavioral health providers, and family peer mentors into teams dedicated to helping families struggling with co-occurring child maltreatment and substance use disorder.

The Ohio program is an adaptation of the national Sobriety, Treatment and Recovery Teams (START) Model, an evidence-informed child welfare-led intervention for families that has been shown, when implemented with fidelity, to improve outcomes for both parents and children affected by child maltreatment and parental substance use disorders.

Following is a list of trainings offered in the nine months ending March 31, 2024, with the numbers of PCSA staff noted in parentheses:

- Death by a Thousand Cuts: Lessons in Microaggressions (3 hours, 8 staff)
- Drug Testing in Child Welfare (5.5 hours, 14 staff)
- Family Team Meetings (5.5 hours, 27 staff)
- Family Toolkit: Genograms, ecomaps, and more! (2.75 hours, 9 staff)
- Fentanyl (2.75 hours, 23 staff)
- Foundations 2 (hiring and supervising family peer mentors; 5.5 hours, 31 staff)
- Foundations 3 (provider strategies that support behavioral health treatment and child welfare outcomes (5.5 hours,
- Foundations 4 (START child welfare practices; 5.5 hours, 35 staff)

- Introduction to Motivational Interviewing (6.0 hours, 25 staff)
- Introduction to START for New Staff (2 hours, 23 staff)
- The Language of Recovery (2.75 hours, 8 staff)
- Motivational Interviewing: Practical Application Practice (1.5 hours 4 staff)
- Nurturing Parenting (18 hours, 8 staff)
- Nurturing Parenting Refresher (18 hours, 8 staff)
- Promoting Successful Futures by Providing Trauma-Informed Care (2.75 hours, 4 staff\_
- Screening and Intervention of Substance Use Disorders (5.5 hours, 52 staff)
- So Done! Polyvagal Strategies When It Just Won't End (2.75 hours, 3 staff)
- Substance Use Disorder 101 (3 hours, 11 staff)
- Supervisor Professional Learning Community (1 hour, 40 staff)
- The Role the Family Plays in Human Trafficking: The Good, the Bad and the Ugly (2.75 hours, 10 staff)
- Trauma & Resilience: Identifying children, parents, and families at risk (5.5 hours, 22 staff)
- Trauma and Addiction: Fire and Ice (5.5 hours, 12 staff)
- Trauma-Informed Family Engagement: Understanding the impact of implicit bias and structural racism (5.5 hours, 5 staff)
- Trauma-Informed Resiliency-Oriented Supervision (3 hours, 17 staff)
- Youth Suicidality: Safety Planning and Lethal Means Counseling (3 hours, 13 staff)

### **Compliance with Ongoing Training Requirements**

Effective April 1, 2016, PCSAs must maintain staff education and in-service training records through DCY's learning management system (LMS). With the previous LMS, OCWTP pulled compliance through custom reports. In November 2022, DCY launched a new LMS called CAPS LMS. Aggregate reports on staff compliance rates across the state cannot be run from CAPS LMS at this point since hire dates were staggered, and the LMS does not currently have the necessary data field to capture this data. DCY continues to refine the details to accurately track compliance with the new curricula within the new LMS.

## **Coaching**

OCWTP offers coaching to caseworkers, supervisors, resource families, executive directors, and administrators to help develop priority skills identified during state, county, and individual needs assessments. Coaching is not mandatory, nor is it ever part of a progressive discipline plan. RTCs assess requests for coaching to determine the best way to meet the need. Once a request is approved, the RTC matches the individual with a coach certified in the requested skill set.

Coaching is skills-based, time-limited, and connected directly to a defined competency. Coaches develop a coaching plan with the individual and that person's supervisor. The plan includes:

- Focus of the coaching (skill areas and competencies).
- Desired practice behaviors for the individual and the supervisor in supporting the individual during coaching.
- Action steps for achieving desired skills or competencies.

OUCCAS screens and interviews coaches, after which new coaches attend training focusing on roles and responsibilities and addressing and practicing key coaching skills.

Coaching is assessed at multiple points in the process. Check-in evaluations are completed when coaching is in progress. After coaching concludes, both the individual and supervisor offer assessments. This data is used to assess individual progress. However, due to the lack of automation, the data is not aggregated to evaluate overall program effectiveness.

- 732 coaching sessions totaling 927 hours took place in the first nine months of SFY 2024, with the average session being about 75 minutes.
- Seven sessions were with Assessors, whereas 625 sessions (85%) were with staff, which included caseworkers, supervisors, and executives.
- One hundred sessions were held with caregivers.

### **Conclusions About Ongoing Training**

OCWTP's new competency model is now in line with competency models used throughout universities and other training programs. The program awaits the results of our new ITNA process. It is anticipated the need for training that goes beyond enhancing knowledge to training that strengthens application and skill. In collaboration with ODJFS/DCY, the State Training Coordinator has deliverables to curate or develop tools and resources to promote skill development and mastery for all training populations in the next biennium.

As a mature training system, OCWTP is adept at offering an array of training that addresses state aggregate training needs through standardized training and trainer-developed training. We continue to strategize how to maintain a quality learning catalog that:

- Meets priority training needs for new and seasoned staff and foster caregivers
- Includes mandated training for each population
- Provides an opportunity to "re-fresh" on topics previously trained
- Includes training that helps learners apply new knowledge and strengthen skills

As more training is offered virtually, OCWTP developed resources and guidance to help learners adapt to this new delivery in a manner that enhances learning. A brochure includes a virtual learning checklist for preparing the environment, equipment, and personal attributes to enhance virtual learning. Learners are also linked to a short <u>Virtual Learning Orientation</u> self-directed course.

Training offered by OCWTP and ODJFS/DCY partners is essential to Ohio's child protection workforce. Two of the programs, OhioStart and Motivational Interviewing, provide training that allows PCSAs to draw down Title IVE-E reimbursement for eligible families working with a trained children services staff.

ODJFS/DCY prioritized expanded and improved coaching for SY2024. The system's coaching capacity will expand dramatically over the next biennium. The goal was for each RTC to hire a full-time coach for caregivers in SFY 2024, and most RTCs have now onboarded their coaches. ODJFS/DCY is considering adding full-time staff coaches in SFY 2025.

## **Part IV: Resource Family Training**

#### Overview

The Ohio Revised Code mandates that prospective foster and adoptive families complete precertification training requirements. Certified kin and non-kin foster caregivers have ongoing training requirements that must be met to keep certification. Approved adoptive parents do not have any ongoing training requirements. Foster and adoptive families can register for instructor-led courses and launch self-directed courses through CAPS LMS.

### **Preservice**

#### **Content**

The Preservice curriculum consists of the following five themes and 15 courses:

- 1. System and Agency: Orientation (self-directed, one hour)
- 2. System and Agency: Caregiver Role and Responsibilities (self-directed, 1.25 hours)
- 3. System and Agency: The Basics of Placement (instructor-led, 2.25 hours)
- 4. Trauma: Trauma Overview (instructor-led, 1.5 hours)
- 5. Trauma: The Impact of Trauma on the Children in Care (instructor-led, 1.5 hours)
- 6. Connections and Permanency: Permanency (instructor-led, one hour)
- 7. Connections and Permanency: Maintaining Children's Connections (instructor-led, 1.5 hours)
- 8. Connections and Permanency: Partnering with the Primary Family (instructor-led, 1.5 hours)
- 9. Nurturing and Protective Environment: Child Development (instructor-led, 2 hours)
- 10. Nurturing and Protective Environment: Adolescent Development (instructor-led, one hour)
- 11. Nurturing and Protective Environment: Effects of Caregiving (instructor-led, 2 hours)
- 12. Nurturing and Protective Environment: Diversity Foundations (instructor-led, 1.5 hours)
- 13. Nurturing and Protective Environment: Discipline Foundations (instructor-led, 2 hours)
- 14. Health: Medication Management (self-directed, 0.5 hours)
- 15. Health: Adult, Child, and Baby First Aid/CPR/AED (instructor-led, 3.25 hours)

## **Preservice Overarching Learning Objectives**

- Describe your role in supporting the child protection goals of safety, permanency, and wellbeing for children in your home.
- Describe your role on the child protection team.
- Explain the need to take a trauma-informed approach to caregiving.
- Explain how your respect for the child and the family's diversity impacts placement stability and achievement of child protection goals.
- Accurately self-assess if caregiving or adoption is the right choice for your family.

Tools and resources were developed to support implementation, including a Preservice job aid for the CAPS LMS, an overview course for assessors, and a syllabus that contains the course descriptions,

learning objectives, agendas, and required topics addressed. Additionally, a trainer guide and PowerPoint slide deck were developed to help agencies ensure they address all relevant agency-specific policies and procedures with prospective families. The curriculum was translated into Spanish, and transcripts of the self-directed courses are available to families without access to technology.

#### **Content Revisions**

In April 2020, OCWTP launched a virtual Preservice training series, utilizing Foster Parent College, so families were not delayed in the certification process during the COVID-19 pandemic.

In FY 2022, Preservice was revised to comply with Ohio's adoption of the FFPSA Model Licensing Standards, the new Foster Youth Bill of Rights, and the Resource Family Bill of Rights. As in-person training resumed, the Regional Training Centers offered both virtual and in-person options for Preservice training.

In January 2023, Ohio House Bill 8 was fully implemented, reducing the required number of Preservice hours from 36 to 24. The OCWTP was prepared and launched a new, compliant Preservice that same month. This curriculum was developed with data from a scoping review, focus group feedback, and input from a curriculum advisory group. It was piloted through June 2023 and assessed using a CQI approach. Findings from the pilot are currently being incorporated into the Preservice curriculum.

#### Learners

Learners are families from the community who are considering becoming certified foster families or approved adoptive families. Families can access the curriculum through CAPS LMS.

Key Metrics for Instructor-Led (ILT) Required Components (Projected Total SFY 2024)			
ILT Sessions Held	1,210		
Total Completions	18,376		
Mean Completions/Session	15.2		
Credits/Session	1.7		
Total Learning Hours	31,787		
Total Cost	\$238.481		
Cost/Learning Hour	\$7.50		
% Online	61.6%		

Key Metrics for Online Self-Directed (SD) Components		
	SD Training for Credit	
Total Completions	3,751	
Credited Learning Hours	3,432	

#### **Session Evaluations**

Analysis of the Preservice ILT session evaluations from the first half of SFY 2024 revealed:

- The response rate was 71.5%
- Reasons learners reported taking Preservice because it satisfied a requirement (38.9%), to be better at being a foster caregiver (36.5%), or because they needed training hours (9.7%).
- Mean factor scores ranged from a low of 4.59 (diversity) to a high of 4.69 (instruction) on a scale from 1 to 5, where five is the most favorable response.

#### **Delivery**

Preservice trainers must be approved by OUCCAS. This requires an application, resume, interview, references, and skill demonstration. Potential preservice trainers are screened for expertise and experience working with foster and kinship caregivers and adoptive parents. Lived experience as a foster parent or foster care alumni is preferred. After the initial screening, trainers go through the OCWTP trainer approval process. They also completed a verification of trainer qualifications (VTQ) for the series. The VTQs are reviewed, and follow-up questions are asked if needed. Trainers who wish to train virtually go through the virtual trainer approval process. Some trainers may be asked to observe sessions or co-train. Trainers are observed for skill assessment and adherence to standardized content.

Self-directed courses were developed in collaboration with instructional designers using Articulate Rise and Storyline. These courses are accessed through the CAPS LMS.

## Compliance

Compliance is tracked by the recommending agency, which must verify training requirements are met before submitting the recommendation for certification or approving the family for adoption. Agency tracking compliance is monitored by ODJFS/DCY licensing specialists.

#### **Challenges and Responses**

Preservice learners did not have accounts in the previous LMS, making management and evaluation challenging. They are provisioned accounts in CAPS LMS and can manage their own training, which includes registration, evaluation completion, and launching self-directed courses. RTCs can manage the session data within CAPS LMS.

At the start of the pandemic, virtual training for potential foster care and adoptive families was relatively new to Ohio. To help address questions and concerns, a training liaison section was created on the website to support county agency training coordinators.

The virtual and in-person 36-hour Preservice curricula did not align, making it difficult for participants to move between the two series. The current Preservice can be offered either virtually or in person. Content is the same, so learners can go between the two formats.

Preservice was written so that the courses could be offered in any order, maximizing scheduling flexibility and providing the opportunity to pair shorter courses together.

#### **Conclusions**

Preservice learners now have accounts in the new CAPS LMS, allowing them to self-manage their training activities, such as registration, evaluation, and accessing self-directed courses, while RTCs manage session data. To improve flexibility and continuity in learning, the Preservice curriculum has been standardized across virtual and in-person formats, enabling participants to switch between formats without discrepancies in content.

# **Ongoing Training and Support**

#### Learners

Newly certified kin and non-kin foster caregivers must complete training in 11 topics within their first two years of certification. These required topics are collectively known as Resource Readiness. Thereafter, they must complete a specified number of training hours in identified areas of need every two years. Family foster homes must complete 30 hours and specialized foster homes must complete 45 hours.

Certified caregivers and adoptive parents can access instructor-led and self-directed training through the CAPS LMS.

#### Content

**Resource Readiness:** In January 2023, OCWTP implemented the Resource Readiness training series to meet the requirements of phase two of Ohio HB8. Certified caregivers must complete training in 11 topics within their first two years of certification. These topics include:

- Prevention, Recognition, and Management of Communicable Diseases
- Community Health and Social Services Available to Children and Their Foster Families
- Substance Abuse
- Educational Advocacy
- Cultural and Diversity Issues
- Family Safety
- Trauma and Its Impact on Children and the Family, Promoting Attachment
- Caring for Children Who Have Been Sexually Abused
- Managing Placement Transitions
- Mental Health, Self-Regulation, and Self-Care
- Legal and Ethical Issues for Caregivers

OCWTP offers a menu of self-directed and instructor-led courses within each of the 11 topics, allowing learners to select courses relevant to the needs of the children in their care. Courses were incorporated from the National Training and Development Curriculum, OCWTP standardized courses, and trainer-developed courses. We continue to add options under each topic.

Key Metrics for Instructor-Led (ILT) Resource Readiness Components		
ILT Sessions Held	215	
Total Completions	2,695	
Mean Completions/Session	12.5	
Credits/Session	1.8	
Total Learning Hours	5,082	
Total Cost	\$42,688	
Cost/Learning Hour	\$8.40	
% Online	60.9%	

Key Metrics for Online Self-Directed (SD) Components		
	SD Training for Credit	
Total Completions	2,337	
Credited Learning Hours	2,741	

**Learner-Driven Pathways:** A learning pathway is a framework that allows the learner to choose their learning goals, move towards learning objectives, track progress made, and be recognized along the way. Learners are empowered to choose learning based on identified needs and progressively build their knowledge and skills.

The first learner pathway, a life skills pathway, was launched in June 2023. The Life Skills Pathway was created in collaboration with ACTION Ohio and the Overcoming Hurdles in Ohio Youth Advisory Board (OHIO OYAB) to ensure youth voice in the planning and implementation. The youth selected the essential elements, vetted the courses, and designed the badges.

This pathway is geared towards resource families that are caring for older youth (14+). There are ten essential elements of the life skills pathway:

- Assessments
- Budgeting
- Education
- Health
- Housing
- Mentoring
- Planning
- Relationships
- Vital records
- Workforce

Courses in the pathway may address one or more of these elements. Learners can earn badges in CAPS LMS for attending training and completing skill-building activities with the youth. Two additional

learner-driven pathways are planned for development. One on supporting specific populations in care and one on sexual abuse.

Key Metrics for Life Skills Pathway Instructor-Led (ILT) Required Components				
ILT Sessions Held Total Completions	30 344			
Mean Completions/Session	11.5			
Credits/Session	2.8			
Total Learning Hours	966			
Total Cost	\$10,138			
Cost/Learning Hour	\$10.50			
% Online	73.3			

Key Metrics for Online Self-Directed (SD) Components		
	SD Training for Credit	
Total Completions	12	
Credited Learning Hours	12	

Caring for Children with Higher Needs: As Ohio redesigns its treatment foster care program and more public agencies recruit treatment-level families, the OCWTP is building its menu of courses to support the training needs of families providing care to children with higher needs. This work began in FY 2023. A significant exploration of available courses and Subject Matter Experts (SMEs) was conducted, resulting in a menu of options.

Courses selected for offering include:

- Youth Mental Health First Aid: A blended course that introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations.
- It's My Turn: A self-directed course for caregivers providing care to youth with disabilities transitioning to interdependent living.
- NAMI Basics: a self-directed course that helps caregivers understand mental health conditions, diagnosis, and treatment. The course prepares caregivers to be better advocates.

Identification and vetting of courses continued, and OUCCAS continued to participate in the Tiered Foster Care (TFC) Pilot workgroup until it dissolved when the pilot was complete.

A new TFC pilot has begun, so training needs will be reassessed, and new training will be identified.

#### **Trainer-Developed Learnings**

Following are the instructor-developed training opportunities in which more than half of the session participants were caregivers and which, across scheduled sessions, at least 50 caregivers completed the training.

Course	Mean Credits	% Staff	Caregiver Completions
Child Development	3.4	50.2	251
Behavioral Health	4.3	50.6	196
Physical Health	3.4	61.1	153
Well-Being	4.3	59.1	147
Crisis Intervention	3.9	56.4	124
Foster Care	4.1	58.0	86
Placement	3.8	50.8	81

#### Collaboration

OCWTP partners with Foster Parent College to offer virtual, asynchronous training to certified foster caregivers. Between July 1, 2023, and April 5, 2024, 2,309 self-directed learnings were completed through Foster Parent College for 6,484 training hours.

HTH Safety Solutions helps OCWTP in providing self-directed CPR/First Aid training (Red Cross) for certified caregivers. In-person CPR/First Aid courses are also available.

#### Compliance

Agency staff monitor the training compliance of their foster caregivers and document completion as part of the recommendation for recertification. ODJFS/DCY licensing staff monitor agency compliance.

#### **Challenges and Responses**

Caregiver individual training needs assessments are completed with the recommending agencies using a variety of processes and forms making it difficult to aggregate the data and determine statewide or regional training needs. Ohio is reviewing the ITNA rule and exploring ways to support a more standardized collection of the data.

OCWTP will continue to seek the input of diverse perspectives when developing training and tools for caregivers. Those with lived experience, such as foster and kinship caregivers, adoptive parents, primary parents, and foster care alumni, are valuable in helping to make the training applicable and practical.

As more virtual instructor-led and self-directed courses are implemented, some agency staff are worried caregivers are isolating themselves and not using training as an opportunity to expand their network. Caregivers enjoy the convenience of completing training at home, as it fits into their busy schedules. OCWTP continues to work to find a balance between virtual and in-person training.

#### **Conclusions**

OCWTP values the inclusion of diverse perspectives in training development, particularly from individuals with lived experience, such as foster and kinship caregivers and foster care alumni. Ohio addresses challenges in aggregating caregiver training data due to diverse ITNA data collection methods across recommending agencies. As the shift towards virtual training raises concerns about caregiver isolation, OCWTP is striving to balance the convenience of online training with the networking benefits of in-person sessions.

## Part V: Racial Disproportionality in Children Services

# **OCWTP's Racial Equity Council**

Spearheaded in 2020, our Racial Equity Council (REC) continues to direct efforts to help Ohio address the racial disproportionality and disparity within our child welfare system. Our racial equity and inclusion work lays the foundation for many of our change efforts. Our work has renewed energy focused on increasing diverse representation and developing practices to decrease oppressive outcomes. Since 2020, the REC has:

- Studied the demographics of our training pool to ensure greater diversity.
- Helped draft a new learning outline to help trainers incorporate diversity and racial equity concepts into training.
- Recruited trainers with specific expertise in racial equity and inclusive content.
- Offered expanded opportunities for trainers and staff, including a newly designed diversity training for trainers, to help them learn more about disproportionality and disparity as it relates to race.

All OCWTP standardized courses are developed with an intentional emphasis on cultural considerations and to ensure space is made in the classroom for appropriate discussions to unfold with participants. In 2023, OCWTP staff participated in a self-assessment to help identify future areas for skill advancement. As a result, REC offers professional development with expert-facilitated discussion on topics designed to support individual and system growth to empower action in reducing bias, inequity, and exclusion. Some topics included:

- Facilitating Challenging Conversations
- Creating and Supporting Accountability
- Recognizing and Responding to Microaggressions
- Looking at Policy/Procedures through a Race Equity and Inclusion (REI) Lens

In addition, OCWTP trainers participated in focus groups to identify development needs specific to their classrooms and course development. Trainers were offered professional development to better understand and address microaggressions.

Some high-level accomplishments of REC include:

- Monthly professional development topics to support active bias recognition and response.
- REC co-leads earned Certificates in Diversity, Equity, and Inclusion from Cornell University to support the sustainability of DEI/REI work within OCWTP.

#### Content

OUCCAS has completed an overhaul of standardized curricula. This effort includes significant new material on diversity and equity. All modules ensure REI issues are integrated with content wherever appropriate. In addition to the integration of REI concepts, each series includes a dedicated diversity, equity, and inclusion module:

**Caseworker Core 2.0** includes a self-directed *Key Concepts of Diversity, Equity, and Inclusion* module that can also be used in other foundation modules.

### Learning Objectives:

- Recognize the influence of culture and diversity in interactions with children and families
- List three things caregivers or staff should know about the impact of disproportionality and disparity in the child protection system
- Find the definitions of key terms to ensure a shared language is used when working to address diversity and equity issues related to child protection
- Describe how intersectionality can cause challenges to children or adults
- Identify strategies to mitigate the influence of implicit bias when making decisions
- Discuss how personal beliefs, values, norms, and world view can influence case dynamics and outcomes for children, youth, and families
- Summarize guidelines for integrating cultural humility into practice

Supervisor Core 2.0 includes a new instructor-led Race, Equity, and Inclusion in Supervision course.

### Learning Objectives:

- Identify gaps in cultural knowledge and areas of personal bias
- Discuss how modeling self-reflection about bias and disproportionality advances culturally responsive practice that promotes fair and equitable treatment of those served
- Identify strategies to create an open and safe environment for exploring and discussing issues
  of culture and diversity
- Discuss strategies that promote fair and equitable treatment of all team members
- Describe communication strategies that help bridge differences
- Commit to practicing at least two supervisory behaviors that help staff build skills of inclusive decision-making

**Preservice for Resource and Adoptive Families** includes the course *Diversity Foundations*.

### **Learning Objectives**

- Describe humility and competence as they relate to diversity
- Discuss issues of disproportionality and disparity within the child protection system
- Describe how implicit bias can impact how you interact with others
- Identify strategies to provide an inclusive and equitable home

Resource Readiness is a series of courses addressing mandated topics for newly certified caregivers. To address the topic of culture and diversity issues, learners can select to complete one of the following courses: Cultural Humility, Parenting in Racially and Culturally Diverse Families, Sexual Development and Identity, and Creating Safe and Welcoming Environments for LGBTQ+ Children and Youth in Foster Care.

#### **REI Review of Standardized Curricula**

A team of REI consultants reviewed all revised and newly developed modules to ensure standardized content appropriately addresses racial equity concerns as they are updated and revised. To date, they have examined 92 learning objects assessing content as well as designs to determine if modules:

- Represent multiple cultures and ethnicities in non-stereotypical and culturally affirming ways
- Purposefully and intentionally use language as a tool to advance racial equity and inclusion
- Have content absent of coded language that disguises racial stereotypes such as urban or inner city, reverse racism, or PC
- Discuss (with examples or cases) how to approach culturally related dilemmas culturally responsively
- Include materials designed with diverse and inclusive language, scenarios, and photos
- Consciously provide a safe environment, invite all individuals' perspectives to be included, all
  voices to be heard, and all people to fully participate

#### The reviews helped staff:

- Consider diverse perspectives, experiences, and backgrounds.
- Determine if the learning objectives were culturally responsive and sensitive to diverse learners.
- Identify and address potential biases in the learning objectives.
- Reflect on the material and objectives to understand the perspective of diverse groups.
- Strengthen the context around data to make it clear when systemic or historical racism was impacting the data.
- Diversify scenarios, exploring "what if" the characters in the scenarios were of a different race.

Review panelists also provided valuable REI resources to deepen understanding of topics such as:

- Culturally Responsive Child Welfare Practice
- Child Recruitment
- Rias
- Systemic Racism and Disproportionality in Child Welfare
- Transracial Placements
- Racial Trauma
- Culture as A Developmental Asset
- Culturally Responsive Data/Assessment Collection

# **Child Care Institutions/Group Home Staff Training**

#### Overview

The State of Ohio mandates initial and ongoing training for staff who work in Child Care Institutions/Group Homes. Staff receive their training in-house or from an outside provider (sometimes it may be through OCWTP or another outside venue). If they get trained outside of their agency/residential facility the training shall include a transfer of learning component prior to or following the training. The transfer of learning component may include a pretest, a posttest, or a discussion following the training.

### **Training Pre-Requisites and On-going Certification Requirements**

The residential facility shall ensure that all childcare staff hired possess:

- Current American Red Cross, American Heart Association, or equivalent First Aid and Cardiopulmonary Resuscitation (CPR) certification at the time of hire or within six months following the date of hire. Childcare staff of a group home or children's residential center shall be certified in the type applicable to the age and size of the children to be served in the facility. Childcare staff of a residential parenting facility and a children's crisis care facility shall be certified in infant, adult, and child CPR. The first aid and CPR certifications shall always be maintained current unless the employee meets one of the following exceptions:
  - o Extended leave.
  - o Separation of employment for less than one year.
  - o Extended illness.
  - o Critical emergencies.
  - Cancellation of training classes.

A childcare staff person is not permitted to work with children without another childcare staff who is current on all First Aid and CPR training and who is present at all times. If a childcare staff person's First Aid and CPR certification has been expired for more than 90 days, the staff member shall not be permitted to work in the facility without the required certification. There shall be at least one staff person with First Aid and CPR certification on duty at all times in a living unit.

As a result of the COVID-19 pandemic, CPR and First Aid training could be completed online without certification. However, Certification must be completed within 90 days after the emergency ends. If staff CPR and First Aid certification is due to expire, then training may be completed online without certification during this time. Certification would need to be completed within 90 days after the emergency ends.

FCASPL 382 (Requirements Impacted by Ending State of Emergency and Updated COVID-19 Guidance) was then issued on January 21, 2022, instructing agencies that:

 CPR and First Aid training for childcare staff may no longer be completed online without certification.

- Certification for existing employees who had online training was required to be completed as of September 16, 2021, ninety days after the end of the State of Emergency.
- CPR and First Aid training must also be completed prior to working alone with children effective September 16, 2021, ninety days after the end of the State of Emergency.

Since January 1, 2022, agencies have been assessed according to OAC and no longer to FCASPL 382 language.

#### **Initial Training**

During the first 12-months of employment, staff who work in Child Care Institutions/Group Homes must complete a minimum of 52-hours of training according to the following schedule:

- Participate in a minimum of 20-hours of orientation within the first 30-days after the date of hire.
- Take an additional 32-hours of training during the first year of employment.

#### Content

Training must address the following topics:

- Familiarization of the employee with emergency and safety procedures of the residential facility. Principles and practices of childcare.
- Administrative structure, procedures, and overall program goals of the residential facility.
- Trauma informed approach implemented by the agency if the individual does not have a current "Level 2 Trauma Informed" or "Level 3 Trauma Competent" certificate.
- Appropriate techniques of behavior management.
- Techniques and methodologies of crisis management including acceptable physical restraint or acceptable alternatives to restraint if restraint is prohibited.
- Familiarization of the employee with the discipline policy strictions outlined in OAC, the discipline and behavior intervention policy required by OAC, and any additional requirements the agency may have.
- Procedures for reporting suspected child abuse or neglect.
- Emergency medical plan of the residential facility.
- Universal precautions.
- Chapter 5101:2-9 of the Administrative Code as applicable to the functions of the agency.
- Implementation of the Community Engagement Plan.
- Procedures for responding to incidents involving a child at the facility and neighbors or the police.
- Reasonable and prudent parent standard.

If a childcare staff person will be providing care for a youth at least 14 years of age, the person shall be prepared adequately with the appropriate knowledge and skills to understand and address the issues confronting adolescents preparing for independent living and provide such services as are needed and

appropriate. To the extent possible, such services shall be coordinated with the life skill services required to be provided.

FCASPL 394 (*Rule and Practice Relaxations for Public and Private Certified and Approved Agencies*) was then issued on August 22, 2022, which permitted agencies:

• to temporarily reduce the required number of residential staff training hours before being left alone with children. ODJFS/DCY reduced the number of hours from 40 (20 orientation and 20 additional hours) to 20 hours of orientation training (plus CPR and First Aid) before being left alone with children.

The new employee would need to complete the additional 20 hours of training within their first year of employment. FCASPL 394 relaxations are in effect from September 1, 2022, through August 31, 2023, unless otherwise determined by ODJFS/DCY.

## **Annual Training**

Childcare staff are required to receive at least 24-hours of annual training.

## Content

Training should relate to agency policy, procedure, trauma-informed care, rules, and the population that the agency serves. The training shall include documentation of the transfer of learning components. If a residential facility has a policy prohibiting the use of physical restraint, the facility shall complete annual training for all childcare staff in acceptable alternatives to restraint. If a residential facility has a policy allowing the use of physical restraint, the facility shall complete annual training in acceptable methods of restraint for the childcare staff. Physical restraint may be used by childcare staff only:

- For self-protection.
- For protection of the child from imminent harm.
- To protect another person from the child.

Physical restraint of a child shall only be utilized by a childcare staff person who has received specific training and annual review in acceptable methods of restraint. Documentation of such training shall be contained in the employee's personnel record. If the facility revises any policy pertaining to children or childcare staff, the childcare staff shall receive training on the policy within third days of the revision.

#### **Compliance**

During visit reviews and recertification reviews, ODJFS/DCY Licensing Specialists monitor compliance with training requirements for staff in ODJFS/DCY licensed facilities.

# 5. Service Array and Resource Development

### **Assessment of Performance**

## **Item 29: Array of Services**

As highlighted in Ohio's 2020-2024 Child and Family Service Plan, service array was an area needing improvement. This included many identified service gaps such as parenting education, substance abuse diagnostics and treatment and services, behavioral health assessment and treatment, prevention services, services to kinship providers, college supports for foster youth beyond the Education and Training Voucher program, and the availability of wraparound services. While service array is likely to require additional focus in the future, Ohio has had many successes in this area in partnership with local public and private agencies, and state agencies such as the Ohio departments of Medicaid and Mental Health and Addiction Services. This report highlights several of the previously identified service gaps and the efforts to expand service availability across Ohio, as well as feedback from public children services agencies on the current landscape of service array.

#### **Prevention Services**

Ohio engaged in a stakeholder-driven planning process for Ohio's Prevention Services array. This included the Leadership Advisory Council and multiple workgroups. The Prevention Services Planning workgroup completed data analysis, selected services, and began initial planning for the title IV-E Prevention Services Plan submission. The Prevention Services Implementation workgroup prepared Ohio to launch Family First Prevention Services on April 1, 2021. Stakeholder engagement has continued to drive Family First Prevention Services ongoing planning and implementation.

The Prevention Services Planning workgroup selected Multi-Systemic Therapy, Functional Family Therapy, Ohio Sobriety, Treatment and Reducing Trauma (START), Healthy Families America, and Parents as Teachers as the evidence-based practice services Ohio included in the *title IV-E Prevention Services Plan*. Ohio's Plan was submitted in November 2020 and approved in December 2021. Ohio has submitted an amendment to add Motivational Interviewing and Triple P Online.

# **Qualified Residential Treatment Program (QRTP)**

Ohio fully implemented the Qualified Residential Treatment Program (QRTP) requirements on October 1, 2021. In preparation for implementation, Ohio created a QRTP Planning subcommittee and a QRTP Implementation subcommittee to determine how Ohio would roll out the QRTP requirements by the deadline. These groups, with executive leadership from sister state agencies, determined the level of care assessment used, the timeline for implementing QRTP in Ohio, the qualified individual waiver, and continually provided feedback on the planning process. The Ohio Department of Job and Family Services and the Ohio Department of Children and Youth provided training to both public children services agencies and private residential agencies on the requirements for title IV-E reimbursement and

QRTP compliance. Ohio continues to implement QRTP and make improvements to agency policies and system functionality as feedback is received from stakeholders.

#### **Substance Use Disorder Services**

Ohio has dedicated extensive services and supports to address gaps in services and the increasing challenges of the substance use disorder crisis. This includes, but is not limited to:

## Ohio Sobriety, Treatment and Reducing Trauma (START)

The Ohio Sobriety, Treatment and Reducing Trauma (START) program is a children-services-led initiative that has been shown, when implemented with fidelity, to improve outcomes for both parents and children affected by child maltreatment and parental substance use disorders. Since the model was brought to Ohio in 2017 by the Attorney General's Office, Ohio START has been implemented and administered by the Public Children Services Association of Ohio (PCSAO). PCSAO is a membership-driven association of Ohio's county Public Children Services Agencies that advocates for sound public policy, promotes program excellence, and builds public value for safe children, stable families, and supportive communities.

In May 2022, Ohio START was rated by the federal Prevention Services Clearinghouse as a supported evidence-based service. This makes the service eligible for draw down of Title IV-E funding at the current federal financial participation (FFP) rate of 50% for administration and 50% for service provision. Ohio START currently operates in 53 Ohio counties with three additional counties working on pre-implementation. In May 2024, an application will be released for counties to apply and join Ohio START as part of cohort 7. With four counties expressing interest, it is expected Ohio START will be operational in up to 60 counties by December 31, 2024. This is an expansion of over 20 counties since 2020. To date, four Ohio counties have achieved model certification from Children and Family Futures (CFF), as well as the state of Ohio. Additional counties will be initiating along with undergoing certification throughout 2024.

## **Substance Abuse Grants**

Governor DeWine announced in April 2024 the availability of \$4 million in substance abuse grants over the next two years as part of the Ohio Deflection and Pre-Arrest Diversion Grant Program, administered by the Office of Criminal Justice Services (OCJS). The grants will allow local communities challenged by high overdose rates to develop, expand, or enhance substance use deflection and pre-arrest diversion programs, to identify, treat, and support those impacted by the use and misuse of opioids, stimulants, and other substances.

Eligible applicants can use grant funds to support law enforcement and other first responder deflection and pre-arrest diversion programs in varying ways, including but not limited to:

- funding deflection and pre-arrest diversion program staff;
- embedding licensed social workers and certified peer supporters into deflection and pre-arrest diversion programs;

- legal review of policies and procedures;
- purchasing naloxone and fentanyl test strips for first responders' use and distribution;
- supporting the use of data for real-time and comprehensive planning and response to overdoses and emerging drug trends;
- supporting drug take-back programs as part of an array of outreach services;
- supporting specialized services for underserved and/or high-risk populations;
- transportation programs and other basic needs or services that serve grant objectives; and
- providing recovery support services, including peer recovery.

### Maternal Opiate Medical Support (MOMS)

In 2013, the Ohio Department of Medicaid, in collaboration with the Office of Health Transformation and the Ohio Department of Mental Health and Addiction Services, launched a Maternal Opiate Medical Support (MOMS) pilot project with four behavioral health providers. The project aimed to improve maternal and fetal health outcomes, enhance family stability, and reduce the costs associated with neonatal abstinence syndrome. Since its inception, the project expanded to serve approximately 300 women annually across 13 facilities throughout Ohio.

The MOMS project is a team-based delivery model that emphasizes care coordination and wraparound services, engaging pregnant women in a combination of medication-assisted treatment and case management. The project's \$2.6 million budget covers not only clinical services, but also recovery support and non-clinical services such as housing vouchers, transportation, and childcare. The care team is typically led by a MOMS care coordinator who facilitates communication between the client and all program partners, including obstetrician-gynecologists, behavioral health providers, Medication Assisted Treatment (MAT) providers, social service workers, insurer case managers, and other service providers involved in supporting the client's recovery.

To ensure the best possible outcomes for the infant, MOMS programs strive to obtain referrals as early in a woman's pregnancy as possible. To achieve this, MOMS programs closely collaborate with the court system, Ohio's Sobriety, Treatment, and Reducing Trauma (START) program, and members of the public children services agency. As a result of these efforts, MOMS programs obtain prepartum referrals in 78% of cases. After an infant is delivered, MOMS programs work closely with public children services agencies to establish Plans of Safe Care for the infants and collaborate with Early Intervention programs to support the family's well-being and development.

### MOMS Plus/ Maternal Infant Dyad

MOMS Plus is led by the Ohio Perinatal Quality Collaborative (OPQC) as a statewide consortium of perinatal clinicians, hospitals, state agencies and parent partners. MOMS Plus aims, through the use of improvement science, to reduce preterm births and equitably improve maternal and birth outcomes across Ohio. Maternity care practices tested strategies to best identify pregnant women with Opioid Use Disorder (OUD), provide optimal obstetric care, ensure compassionate and coordinated care with medication assisted treatment (MAT) and behavioral health (BH) providers during pregnancy, and plan for the transition of the mother/infant to care postpartum. This project ended in 2020 with several hospitals implementing universal screening (with a validated tool) of pregnant patients for substance use.

The MOMS+ project ended in 2020 and in 2022-2023, with Ohio Department of Medicaid funding and support, OPQC led the Maternal Infant Dyad Project with seven pilot sites to identify best practices for the care of the mother with OUD and her infant in the postpartum period. Through this work, OPQC identified the importance of developing a personalized care plan for the dyad which includes the following components: 1) personalized MAT and behavioral health plans, with engagement of the patient voice regarding the plan; 2) ensuring that the infant care plan includes ongoing engagement in early intervention; and 3) ensuring naloxone patient education.

## **Kinship Services**

### Kinship Guardianship Assistance Program (KGAP)

Since 2020, Ohio has implemented two programs that are designed to provide financial support to kinship caregivers: Ohio's Kinship Support Program (KSP) and the Kinship Guardianship Assistance Program (KGAP). Input and feedback from the Public Children Services Association of Ohio, the Ohio Children's Alliance, and the Ohio Grandparent Kinship Coalition was incorporated as these programs were developed and implemented. KSP was created to provide time-limited financial support to kinship caregivers who take placement of children who are in the temporary or permanent custody of a public children services agency. Caregivers may receive up to six months of KSP payments as long as they maintain placement of the child during that time and the child remains in the custody of the public children services agency. Kinship caregivers continue to have access to Ohio Works First (OWF) child only benefits once the time limited KSP incentive payments are exhausted.

The federal and state KGAP programs were developed to provide ongoing financial support to kinship caregivers who become licensed foster caregivers to their kin child, and then work with the public children services agency to obtain permanent legal custody of the child. KGAP payments are provided to these caregivers until the child turns 18, or until the child turns 21, if the child meets special needs criteria outlined for KGAP.

Ohio's young adults aged 18 to 21 previously in foster care and placed in the legal custody of a kinship caregiver at age 16 or 17, are supported by Kinship Guardianship Assistance Program Connections to 21 (KGAP C21). Young adults transition from the Federal KGAP to the KGAP C21 program at the age of 18 with no gap in benefits received, providing eligibility requirements focused on furthering young adult education and employment continue to be met. Qualifying young adults receive monthly financial support, Medicaid coverage, and community resource referrals to aid in their transition to self-sufficiency and independence. KGAP C21 currently serves two young adults, with eight additional identified for receipt of program support by the end of 2024. KGAP C21 program growth is estimated to reach twenty-five to thirty young adults and their kinship caregivers by the end of 2025.

### Ohio Kinship and Adoption Navigator Program (OhioKAN)

The ODJFS/DCY continues to partner with Kinnect as the vendor for the Ohio Kinship and Adoption Navigator Program (OhioKAN). The OhioKAN program was developed and implemented through input from stakeholder groups, consisting of kinship and adoptive families, professionals working with kinship and adoptive families, and others related to this work. OhioKAN continues to utilize Regional Advisory Councils (RACs) and the Statewide Advisory Council (SAC). These councils are charged with

supporting implementation and evaluation, developing awareness, and building capacity for kinship and adoptive families in the community. Each council consists of a variety of stakeholders, which may include public children services agencies, Area Agencies on Aging, schools, and others. These councils are required to seek members with lived experience related to kinship or adoption.

In July of 2022, OhioKAN partnered with ODJFS/DCY to implement the statewide Post Adoption Special Services Subsidy (PASSS). PASSS provides adoptive families with funding to cover needs related to mental health, developmental, or physical concerns. PASSS previously was administered through the counties, but the Children Services Transformation Advisory Council recommended moving PASSS to the state to provide consistent and equitable administration of the program. The program is now a partnership between OhioKAN and ODJFS/DCY, in which OhioKAN provides families with support and guidance to complete an application. ODJFS/DCY staff review applications for approval and initiate the subsidy payments. To implement and enhance the program, a variety of stakeholders provided input. Those stakeholders included a focus group with adoptive parents, conversations with public children services agencies, and a workgroup with ODJFS/DCY and OhioKAN staff. In the first year, counties submitting applications increased from 58 to 69 out of 88.

OhioKAN, in partnership with ODJFS/DCY, also expanded services to include a Youth Navigator Network (YNN). The Youth Navigator Network was launched in October of 2022 with 3 navigators. This program is built on the same model of navigation as OhioKAN, but is specialized for young people, ages 14-21, who have a history of children services involvement. Development and implementation of YNN also utilized input from stakeholder groups, consisting of foster alumni, professionals working with youth, advocates, and others related to this work. YNN continues to receive program feedback through the Young Adult Advisory Council (YAAC).

Including the voice of people with lived experience aligns with OhioKAN's values and supports the Inclusion, Diversity, Equity, and Access (IDEA) principles. To further engage those voices, OhioKAN encourages people with lived experience to apply for any of the positions within the program. As of March 2024, twenty-seven percent of the OhioKAN staff have lived experience. Thirty three percent of YNN staff and an average of thirty five percent of each Regional Council have lived experience related to the program.

### **Parent Education**

To address the needs of families related to parent education and support outside of the children services system, Ohio utilizes its Ohio Children's Trust Fund (OCTF) - housed within the Ohio Department of Children and Youth as the mechanism to fund and support evidence-based and evidence informed primary and secondary child abuse and neglect prevention programs. For nearly a decade, OCTF has administered a majority of these programs through its eight regional prevention councils. Each regional prevention council is comprised of county prevention specialists, and directed by a regional prevention coordinator, who make decisions regarding which parent education and support program should be implemented within the region's respective counties. Membership on the regional prevention councils includes county prevention specialists with expertise in child welfare, addiction, mental health, developmental disabilities, education, juvenile justice, medicine, and child abuse and child neglect prevention. Parents and faith-based organizations are also encouraged to serve as

regional council members. At present, three regional prevention councils have parent representatives engaged in the work of their councils. This approach in a community-led model ensures that stakeholders throughout Ohio are included in the development and implementation of prevention programs.

Furthermore, in recognition of the expenses associated with delivering evidence-based child abuse and neglect prevention programming, OCTF provides extensive training and technical assistance, which includes sponsoring child abuse and child neglect prevention program trainings in various evidence-based models. Since 2020, OCTF has built capacity for over 270 providers who were trained in child abuse and neglect prevention programs. These trainings provided professionals the opportunity to share with one another the challenges and successes they experienced in planning and implementing their programming, building rich collaborative provider networks statewide. OCTF provided multiple state and county agencies with the opportunity to send their practitioners to trainings to help ensure the maximum number of professionals could be trained to provide services and build provider capacity throughout Ohio. Several training opportunities offered are listed below:

- Parent Café Train-the-Trainer Training and Technical Assistance (18 total participants)
- Parent Café Coordinator Trainings (93 total participants)
- Triple P (Positive Parenting Program) (163 total participants)

In addition to robust training opportunities to expand service capacity, OCTF and ODJFS/DCY, also recognized that some families would prefer to access parent education and support programs in a confidential and private manner, thus preferring an online program. Since May 2022, Ohio has been supporting the Triple P Online program, which allows any Ohio parent or caregiver free access to the Triple P program. This evidence-based program is available to any interested family for 12 months, and helps parents navigate both the everyday challenges of parenting, as well as supporting parents who may have children displaying some disruptive behaviors. Families with young children up to teenagers are able to participate in this program, reaching nearly 21,000 parents and caregivers since the program launched.

#### **Behavioral Health**

### Next Generation of Medicaid Managed Care

The Ohio Department of Medicaid (ODM) launched its Next Generation of Managed Care in 2022. The Next Generation of Managed Care features 7 general managed care plans and one specialized managed care plan, the OhioRISE Plan, for children and youth with complex behavioral health needs. All Next Generation Managed Care Entities are required to work collectively to improve population health aims, create more opportunities for value-based purchasing, and offer additional person-centered supports to Ohio Medicaid's covered children and families. The specialized OhioRISE Plan offers intensive behavioral health services and flexible supports, including care coordination that incorporates High-Fidelity Wraparound principles and practices, to address unique challenges faced by children with multi-system needs. As of March 21, 2024, over 31,000 children and youth were enrolled in OhioRISE.

#### sychiatric Residential Treatment Facility (PRTF)

Ohio launched its first in-state Psychiatric Residential Treatment Facility (PRTF) in November 2023. PRTFs offer an inpatient level, intensive multi-disciplinary residential treatment provided in a non-acute setting for youth with complex needs. A PRTF delivers individualized services to youth to stabilize behaviors in as short as possible timeframe and helps youth and their family or other caregivers to develop the knowledge and skills needed to safely manage their needs in the community. Ohio's addition of this level of treatment to its continuum of care affords youth the ability to receive this level of treatment closer to their home and family. Ten million dollars in capital funds and \$8 million in American Rescue Plan Act (ARPA) start-up funds have been set aside for providers to launch additional PRTF services and enhance the PRTF workforce. Two PRTFs are currently serving children in Ohio (Belmont Pines and The Buckeye Ranch) and several other facilities are working toward providing PRTF services in the next three years.

## **Multi-System Youth Initiative**

In October 2019, Governor DeWine's Child-Serving Cabinet launched the Multi-System Youth (MSY) Custody Relinquishment Prevention Program. This program aims to reduce the number of children entering public children services agency custody solely to access treatment for behavioral health and developmental needs. The Program is staffed by representatives from children services, mental health and addiction services, juvenile justice, developmental disabilities, education, and Medicaid, and it is administered through the Department of Medicaid. A multi-agency team meets weekly to review cases, provide technical assistance to local partners, and grant funding for individualized services and supports.

As of February 29, 2024, the MSY Program authorized over \$83 million to provide needed services and supports to 1,526 children from all of Ohio's 88 counties. In addition, the team has provided technical assistance to help local teams navigate care for 151 children with complex needs.

### Behavioral Health Juvenile Justice (BHJJ)

The Behavioral Health Juvenile Justice (BHJJ) initiative is a cohort of evidence-based programs designed to identity and divert justice-involved youth with mental health and substance abuse disorders into community-based treatment. BHJJ is to support local communities to transform the local systems' ability to identify, assess, evaluate, and treat multi-need, multi-system youth and their families and to develop services determined by research to be most effective in addressing the assessed needs of multi-system youth and families.

Funding for BHJJ is provided by the Ohio Departments of Youth Services and Mental Health and Addiction Services with administrative oversight provided by the Department of Youth Services. The initiative currently supports 10 local programs serving 15 counties. Local project partners, at a minimum, include the Mental Health and Drug Alcohol Board, juvenile court and a behavioral health provider. Since 2006, the initiative has served over 5,000 youth.

### Mobile Response and Stabilization Services (MRSS)

Mobile Response and Stabilization Services (MRSS) is a rapid mobile response and stabilization service for young people who are experiencing significant behavioral or emotional distress and their families. MRSS has expanded from a 13-county pilot to now 38 counties and has served 9,888 MRSS youth/families from February of 2019 to January of 2023. A request for information (RFI) was issued to determine provider needs for expanding to additional counties and with the goal of state wideness. On April 10-2024, Governor DeWine announced in Ohio's State of the State address the plan to take MRSS service expansion to all 88 counties.

#### 988

The 988 National Suicide and Mental Health Crisis Lifeline launched in Ohio on July 16, 2022, with support from the Ohio Department of Mental Health and Addiction Services and RecoveryOhio. Ohioans can call, text, or chat 988 for support. Ohio convened a board and diverse stakeholder planning group consisting of Ohioans with lived experience, veterans, multi-cultural, and other special population groups to prepare for this transition. This is part of Ohio's larger commitment to providing qualified, person-centered crisis supports in communities. To this end, Ohio also increased the number of approved call centers from 12 to 19.

### In 2023, 988 included:

- 9,115 average number of monthly 988 calls from Ohio area codes, including veteran and Spanish-speaking calls routed to specialized national call centers.
- 1% average percentage of calls rolled over to a national back-up call center.
- 25 seconds average speed to answer rate in Ohio, compared to 34 seconds nationally.
- 2,610 average number of texts received per month from Ohio area codes.
- 1,680 average number of chats received per month from Ohio area codes.
- 13,405 average number of 988 contacts per month.
- 162,800 total 988 contacts (calls, chats, and texts) in 2023.

#### **Education**

### Ohio College Opportunity Grant

The Ohio Department of Higher Education administers the Ohio College Opportunity Grant (OCOG) program, which provides grant money to Ohio residents who demonstrate the highest levels of financial need (as determined by the results of the Free Application For Federal Student Aid (FAFSA)) who are enrolled at Ohio public colleges or universities, Ohio private, non-profit colleges or universities, and Ohio private, for-profit institutions.

Ohio residents in an associate degree, first bachelor's degree, or nurse diploma program at an eligible Ohio or Pennsylvania institution with an EFC (Expected Family Contribution) of \$3,750 or less <u>and</u> a maximum household income of \$96,000 are eligible.

Ohio statute maintains that for otherwise OCOG eligible students, eligible foster youth can have their living expenses added to their tuition/general fees to determine their OCOG eligibility. Qualified foster

youth should receive a letter from the Ohio Education and Training Voucher (ETV) Program that lists their ETV award. The living expenses to consider are the full amount contained in each student's institutional cost of attendance. If housing costs and living expenses are not included on the student's billing statement, documentation of how the student's charges were calculated or how the average cost was arrived at must be kept.

#### Ohio Reach

Ohio Reach was a passion project founded by committed advocates in 2007. The project was initially managed by the Public Children Services Association of Ohio before transitioning to a state program in 2019. Today Ohio Reach is administered by the Ohio Children's Alliance through a partnership with the Ohio Department of Higher Education.

Ohio Reach is a network of professionals, advocates, and students across the State of Ohio determined to support former foster youth on their higher education journey. Resources are provided to institutions of higher education, child welfare agencies, and foster care alumni enrolled in higher education to support their academic success.

The Ohio Reach scholarship is a \$1,000 renewable award given each semester. Students who receive the scholarship may renew it for up to two semesters per year, for up to four years. Awards can be used to cover tuition and fees, room and board, or books and supplies. In the event these things are covered, students may use funds for other costs associated with schooling. Award winners will be given information on tax responsibilities at time of award.

### Eligibility

- Applicant must have been in the custody of a public children service agency for at least one day
  after the age of 13. The applicant can have exited the system via reunification, adoption, kinship
  care, or emancipation.
- Applicant must be enrolled either part-time or full-time pursuing a certificate, Associates degree, or Bachelor's degree at an accredited higher education institution in the state of Ohio.
- High school students must have accepted an offer from a post-secondary institution in the state of Ohio.

### The School-based Center of Excellence (SBCOE) for Prevention and Early Intervention

Miami University, in partnership with the Ohio Departments of Mental Health and Addiction Services and Education, have transformed the Center for School-Based Mental Health Program into the School-based Center of Excellence for Prevention and Early Intervention (SBCOE). The SBCOE will act as a hub to house a host of current and ongoing school-based mental health initiatives, statewide projects, and multi-year projects.

The SBCOE will oversee several plans and projects including:

• The Ohio School Wellness Initiative which recently completed a 21-month plan to establish best practice standards for student assistance programs and staff wellness frameworks.

- Supporting a workforce development program to address the shortage of K-12 mental health providers by providing training and support for aspiring and existing professionals.
- Facilitating key collaborative partnerships among educational institutions, professional organizations, and businesses that have a vested interest in the well-being of families, children, students, and schools across communities.
- Identifying additional areas that need further positive behavioral interventions and supports including new anti-bullying lessons and campaigns, and more.
- Establishing more services for students who may need extra support, as well as for those with previously diagnosed mental health or substance use issues who may need intensive individualized services.
- Conducting ongoing research and evaluation to identify the supports students receive, the range services being offered, and the effectiveness of related outcomes.

### Early Childhood Education

The ODJFS/DCY partnered with the Ohio Departments of Education and Workforce, Health, Mental Health and Addiction Services, Medicaid, and Developmental Disabilities to secure a \$48 million grant over the next three years for early childhood care and education.

To this end, the grant will:

- Increase access and family engagement in early childhood care and education.
- Expand childcare for those with special needs, English language learners, and those experiencing homelessness.
- Create long-term and sustainable local, state, and federal funding for early childhood education programs.
- Expand marketing and outreach to increase family awareness of their potential eligibility and access to childcare options.
- Prepare early childhood care and education professionals with culturally appropriate trauma training, credentialing, and parent supports.
- Make sure family members and other caretakers are key partners in grant activities, policy development, and new initiatives.

# Ongoing Efforts to Assess the Service Array in Ohio

While Ohio maintained a commitment to expand and improve service availability across counties, there is also a commitment to engage in ongoing efforts to assess the service array in Ohio's state supervised, county administered system. The first effort included the Child Protection Oversight and Evaluation (CPOE) Stage 12, Phase 2 PCSA Self-Assessments. Secondly, interviews were conducted with public children services agencies regarding their experiences with OhioRISE. As part of the interview agencies were asked what services are needed most for the families they serve, including youth in foster care.

The CPOE Stage 12, Phase 2 case record reviews commenced in January 2023 and will conclude in September 2024. Prior to the on-site case record review public children services agencies complete a *PCSA Self-Assessment*. One of the areas that agencies are asked to address is the Child and Family

Service Plan Systemic Factor: *Service Array and Resource Development* where they are asked to respond to the following statements and rank their response on a scale from Strongly Agree, Agree, Disagree and Strongly Disagree. As of April 1, 2024, 57% of the public children services agencies completed a Self-Assessment prior to the start of their CPOE Stage 12, Phase 2 case record review. Findings thus far are presented in the Table below.

Service Array and Resource Development	Strongly	Agree	Disagree	Strongly Disagree
Supportive services to prevent placement, promote reunification, and teach life skills are accessible by either the agency or within the community.	6	34	9	1
Supportive services in the community are usually effective in meeting client needs and promoting achievement of case plan goals.	3	28	17	2
Providers are responsive to the needs of the family and provide regular reports to PCSA staff.	5	30	13	2
Individualized services are provided to families and children.	7	32	11	0

PCSAs were also requested to describe any services gaps or barriers to services. For both urban and rural counties it was noted that affordable housing and transportation to services was a major problem. For rural counties, transportation is critical since there are limited mental health or substance abuse providers in their communities. When mental health or substance abuse services may be available in the community there are long waiting lists due, in part, to staff turnover. Domestic Violence services as well as in-home services such as intensive home-based treatment (IHBT) were not available.

The ODJFS/DCY also began conducting interviews with Ohio's public children services agencies in August of 2023 regarding their experiences with OhioRISE. As a part of this process agencies were asked which services were most needed for the children and families they service in their community. Thirty counties have identified the below as the most needed services:

- IHBT (24)
- MRSS (16)
- Respite (14)
- Mental health services and providers (13)
- MST (11)
- Parenting (8)
- Substance abuse services (5)
- PRTF (5)
- Placements for youth (5)
- Services for children who have developmental delays (4)
- Transportation (3)
- More therapist to complete psychological assessments (3)
- Juvenile Justice diversion programs (2)

- Evidence based programs (1)
- Independent Living Services (1)
- Homemaker services (1)
- Play therapy (1)
- Housing services (1)
- OBGYN services (1)
- Mentoring programs (1)
- Recreational and prosocial services (1)

## **Item 30: Individualizing Services**

Ohio implements a multi-faceted approach to support family-driven assessment and case planning processes throughout the state. The driving components include statewide policy, a comprehensive assessment and case planning model that is utilized by Public Children Services Agencies in all 88 counties, and a robust comprehensive child welfare information system (CCWIS). This includes assessment and planning for all families across the child welfare continuum including:

- Assessment/investigations,
- Voluntary and ongoing services,
- Independent living services for youth 14 and older in foster care,
- Adoption or kinship services,
- Treatment planning for youth in treatment foster homes, residential or psychiatric residential treatment levels of care, and
- Bridges, Ohio's extended foster care program, for young adults who are 18 to 21 who emancipated from PCSA custody.

The ODJFS/DCY has also invested considerable efforts in developing effective cross-system collaborations to enhance the state's service array as indicated earlier in this report. Furthermore, the state has implemented several strategies to promote and support individualized service planning and delivery to meet each family's unique needs. Several of these programs with a focus on individualized services include:

### Wraparound Ohio System of Care Project ECHO for Youth Involved with Multiple Systems (SoC ECHO)

Through partnership of the Ohio Department of Medicaid, the Ohio Department of Mental Health and Addiction Services, and the Ohio Department of Developmental Disabilities, the SoC ECHO supports youth with complex needs through youth case presentation to a team consisting of experts in psychology, trauma, psychiatry, pediatrics, parent peer support, education advocacy, speech and language pathology. This provides participants the opportunity to present a complex case and receive written recommendations, develop skills to manage needs in their own community, and receive case-based learning on topics of special interest. Recommendations are compiled and provided to the case presenters.

#### Ohio Department of Developmental Disabilities (DODD) Technical Assistance (TA)

The Youth Technical Assistance is coordinated by the DODD Cross-System Behavioral Health team and supports families and youth eligible for county board of developmental disability services in their home and community in need of additional support. Providing individual recommendations to keep the youth at their home, the TA team include Regional Liaisons, nurses, and mental health clinicians with the goals of preventing custody relinquishment and increase preventive planning.

#### Multi-Disciplinary Comprehensive Assessment Team (MCAT)

Through partnership between The Ohio Center for Autism & Low Incidence (OCALI) and the Ohio Department of Developmental Disabilities (DODD), the Multi-Disciplinary Comprehensive Assessment Team (MCAT) was launched in 2022. With the intention of maintaining Ohio youth in their own homes and communities through early intervention, the MCAT allows local teams to present to a clinical team of experts a youth with these specific needs and in challenging situations. The clinical team, comprised of a psychologist, psychiatrist, primary care physician, occupational therapist, speech and language pathologist, trauma experts, and autism experts, provides written recommendations, strategies, and interventions to help the youth, family, and local team. After a youth is presented to the MCAT, the family is provided a Regional Coach who will assist the family to carry out the MCAT recommendations.

## Ohio's Interagency Work Group on Autism (IWGA)

The Ohio Interagency Work Group on Autism (IWGA) is a multi-agency collaboration to support persons with autism spectrum disorder. Under the leadership of the Ohio Department of Developmental Disabilities, the IWGA is comprised of representation from Ohio Departments of Education and Workforce, Mental Health and Addiction Services, Medicaid, Health, and Job and Family Services along with Ohio Center for Autism and Low Incidence, and Opportunities for Ohioans with Disabilities. The purpose of the group is to review state policies, learn from current research and data, and share opportunities to better communicate and coordinate autism policy. In Ohio's IWGA State Fiscal Year 2022 Annual Report, the IWGA identified 8 areas of focus and work and noted accomplishments of each. Highlights include:

- Culturally relevant outreach to include Ohio's Act Early Initiative who partnered with community health care workers to conduct outreach in Latinx communities.
- Ohio Department of Education and Workforce Office for Exceptional Children led a cross-agency initiative to support Ohio professionals to receive training in implicit bias and cultural and linguistic diversity to name a couple.
- To reach areas of Ohio that are "service deserts" or areas of disparity or disproportionality, Ohio Center for Autism and Low Incidence offered training in the use to TELE-ASD-PEDS which is designed for use by providers and families during a telehealth assessment for autism.
- To support educators by providing training in culturally relevant trainings and instruction.

### Mental Illness/Intellectual Disabilities Coordinating Center of Excellence (MI/ID CCOE)

The Ohio Departments of Mental Health and Addiction Services and Developmental Disabilities have collaborated to support service providers who are serving Ohioans with dual diagnosis. The Mental Illness/Intellectual Disabilities Coordinating Center of Excellence (MI/ID CCOE) creates access to expert assessments and recommendations, trains and educates professionals and paraprofessionals to address needs of persons with dual diagnosis, supports both fields to coordinate services and work together, and assists communities with building their knowledge and resources. Additional projects under the MI/ID continuum of care include:

- Ohio's Telepsychiatry Project for Intellectual Disability: Reaching remote access areas throughout Ohio to provide access to psychiatric services.
- Second Opinion Psychiatric Assessment: Psychiatric consultation for teams working with individuals with complex needs including addressing diagnostic dilemmas and formulation of treatment plans.

Trauma-Informed Care (TIC): The Ohio Departments of Mental Health and Addiction Services and Developmental Disabilities have been expanding TIC across the state with consultation from the National Center for Trauma-Informed Care (NCTIC)/SAMHSA and Ohio Center for Innovative Practices (CIP) and support from the Ohio Hospital Association, Ohio Council, Public Children Services Agency Association, and others.

#### Tiered Foster Care (TFC)

The Tiered Foster Care (TFC) Initiative began in late 2021 to better meet the variety of needs of children entering the custody of public children services agencies and Title IV-E agencies, including those who may be stepping down from congregate care or entering foster care with higher levels of need. The TFC system in Ohio aims to better align children's characteristics and unique needs with caregivers' skills and abilities, with consistent training, supports, and payment for caregivers and placement agencies. It is also necessary to increase the foster home capacity in Ohio including those homes that accept youth with higher levels of need which led to the creation of the Adoption and Resource Home Recruitment Program.

A pilot process was created for TFC with a structure that provided for the testing of the tools, procedures and policies developed while also allowing for ongoing evaluation of child and caregiver needs. The pilot was designed to provide the opportunity to gain more information on needed foster parent training, services and supports, while also working to create additional placement capacity. In 2022, the Ohio Department of Job and Family Services and the contracted vendor for the campaign developed and disseminated a statewide foster parent survey of all current and former foster parents in the last 5 years. Two thousand three hundred ten (2,310) people responded to provide their experiences getting started in foster parenting, challenges, training, and needed supports. The information from the survey was included in the Foster Care In Focus Report: Insights from Former and Current Ohio Caregivers. This report among other insights provided suggestions to bolster retention in foster care systems which included providing respite care, improving training, and communicating

appreciation for foster caregivers. This feedback is being used to help guide the work to create additional support, services and training needed by foster parents in Ohio. The creation of advanced foster parent training is currently underway. This project has been designed to allow for the creation of web based advanced foster parent training which can be accessed as needed by any foster, adoptive or kinship caregiver in Ohio. Work is underway to create additional supports statewide to foster parents regardless of agency affiliation. Supports which have been identified thus far include improved respite availability, access to mental health interventions such as mobile response and stabilization services (MRSS) and telehealth, foster parent mentors and parent café's.

Work is also underway to further improve the recruitment and support of treatment level foster families in Ohio who are certified by public children services agencies to meet the unique needs of children in a family like setting. A treatment foster home pilot modeled off work currently being completed by public children services agencies in Northwest Ohio has been designed. This pilot will focus on the recruitment and support of new treatment level foster homes by partnerships of public children services agencies created in different regions of the state with a focus on one-on-one support, on-call 24/7 casework, counseling for crisis response, training, and marketing.

### **OhioRISE**

As mentioned previously, OhioRISE is a specialized managed care program that provides behavioral health services to children involved in multiple state systems who have complex behavioral health needs. It includes a child and family-centric delivery system which recognizes the need to specialize services and support for this unique group of children and families. OhioRISE began on July 1, 2022, and is currently serving over 31,000 youth many of which have complex challenges and multi-system involvement. OhioRISE includes three tier levels of service. Tiers two and three include moderate and intensive levels of care coordination operationalized under the principles of High-Fidelity Wraparound model delivered by a Care Management Entity agency. Care coordination activities include:

- Convene Child and Family Team (CFT).
- Develop the OhioRISE Child and Family Centered Care Plan.
- Develop the OhioRISE Crisis and Safety Plan, if needed.
- Facilitate referrals, linkages, connections to needed supports.
- Provide ongoing support and facilitation of the team.

OhioRISE features a multi-agency governance to improve cross-system outcomes and prevent custody relinquishment of youth to public children services agencies. The OhioRISE Managed Care Organization contract requires reviewing reports on quality-of-care elements for youth satisfaction with services, providers, and quality of life improvement measures gathered directly from members of the OhioRISE Plan. Additionally, the OhioRISE MCO established a Member and Family Advisory Council that must serve in an advisory capacity to ODM and other child-serving agencies. The Member and Family Advisory Council is responsible for developing policies and procedures for the inclusion of family voice that demonstrate, at least quarterly, accommodation for youth and young adults.

### Family-Centered Services and Supports (FCSS)

The Ohio Family and Children First (OFCF) Cabinet's Family-Centered Services and Supports (FCSS) project reflects the state's cross-system commitment to implementing a coordinated continuum of services and supports for families and their children, ages 0-21 with multi-system needs. This initiative is jointly funded by the Departments of Job and Family Services, Mental Health and Addiction Services, Youth Services, and Developmental Disabilities. These dollars are appropriated to local Family and Children First Councils (FCFCs) to provide non-clinical, family-centered services and supports. Utilization of these funds requires that specific needs be identified on an individualized service coordination plan which must be jointly developed with the family.

FCSS funding is designed to meet the unique needs of children and families identified on the county FCFC individualized family service coordination plan (IFSCP) developed through the service coordination process, and/or to support the FCFC service coordination process. Service coordination is provided by FCFCs, and many counties are also providing High-Fidelity Wraparound to coordinate service needs for those with higher intensity needs.

The total number of children served during State Fiscal Year 2023 (July 1, 2022, through June 30, 2023) was 2,554. The 14 through 18-year-old age group is the largest age group of youth being served through FCFC Service Coordination (40%) with FCSS funds. The age range of 10 through 13 was the second highest (29%) and the age range of 4 through 9 was the third highest (24%). Three percent of youth were served in the 0 through 3 age range and 2% of youth served in the 19 through 21-year-old age range.

The FCFCs report the primary identified child's service or support needs at the point of intake. The top three categories of needs identified for years, including the current review, have consistently been Mental Health, Job and Family Services, and Developmental Disability.

The total number of various types of services/supports provided with FCSS funds during this time period was 23,367. Service coordination accounted for 52% of all types of services provided and was the most frequently reported individual type of service/support for which FCSS funds were used. All families must be enrolled in FCFC Service Coordination to access FCSS funding; However, some counties have access to other funding sources to support the operational costs of service coordination/High-Fidelity Wraparound such as Multi-System Youth state funding. A key component of the FCSS funding program is keeping children in their home and community whenever feasible. Data showed that of the 511 children whose case closed during SFY23, 89% of children served were able to be maintained in their community living with either a parent(s), relative(s), legal guardian or independent living arrangement after they turned 18.

### <u>Children Services Placement Workgroup – Data Review</u>

The Ohio Department of Children and Youth is dedicated to working towards an array of solutions to existing placement concerns for public children services agencies. The department established and led the Children Services Placement Workgroup whose goal is to create solutions to this need, one of which includes a comprehensive data review of children and youth currently placed in congregate care

settings for 2-5 years. This data review is not only designed to better understand the magnitude of the need for this level of care, but also, to identify the characteristics of children and youth needing placement. This data review will include collaborating with public children services agencies (and other strategic local and state partners in an attempt to begin to transition youth from congregate care to lower levels of care (whenever safe and appropriate). The hope is that with the goal of congregate care utilization occurring at the right time and at the right dose for children and youth, congregate care beds will become available for those children and youth that need treatment stays. It is important to note that this is only one effort to assist with the placement concerns and will need to be done in conjunction with a full array of additional solutions.

#### Whole Child Advisory Group

In late-2019, the Ohio Department of Job and Family Services became a partner to the Ohio Department of Education and Workforce *Each Child, Our Future* Strategic Plan in the area of whole child supports as a member of the Whole Child Advisory Group. The whole child strategy promotes collaboration with parents, caregivers, and community partners to help schools meet the needs of the whole child.



The charge of the Whole Child Advisory Group was to develop a whole school, whole community, and whole child framework that promoted the value of a whole school, whole community, and whole child approach. In addition, the Advisory Group was to react to and inform appropriate guidance, models and examples from Ohio districts to guide the adoption and implementation of the whole child framework at the local, regional and state levels. This included the sharing of processes, funding, capacity-building and a collaborative partnership approach.

In late 2020 the Whole Child Framework was released by the Ohio Department of Education and Workforce at the recommendation of the Whole Child Advisory Group. Crafted over a 10-month period by Ohio educators, counselors and content experts in mental and behavioral health, family engagement, social-emotional learning, nutrition and services for vulnerable youth, the framework provides a blueprint to address the needs most central to a child's holistic development. Whole-Child-Framework.pdf (ohio.gov)

Likewise, Ohio's Whole Child Framework also places the whole child at the center, with considerations for districts, supports and partnerships surrounding the child through a comprehensive approach. A whole child approach broadens district and school focus beyond academics to include meeting students social emotional, physical and safety needs. The Whole Child Framework provides a blueprint to meet these whole child needs which are foundational to a child's intellectual and social development and necessary for students to fully engage in learning and school. Together, schools, families and community partners can provide the conditions essential for children to learn, thrive and achieve their greatest potential. In addition to supporting the needs of each child, Ohio's Whole Child Framework supports the integration of student voices in the decisions schools and districts make. Throughout implementation of the framework, districts and schools are encouraged to welcome "a range of student opinions in decisions about academic content, discipline, school culture, free time, the physical space of the school, and family partnerships."



One of the corresponding guidance documents for the Whole Child Framework was the Whole Child Start Up Guide for School Leaders that provides guidance to school leaders on how to implement the Whole Child Framework through continuous improvement process.

After the Whole Child Framework was released, the next component was the creation of Ohio's Whole Child Network. The Ohio Department of Education and Workforce created a diverse network of educators, school personnel, child and family serving organizations, and families who support children from early childhood to grade 12 and represent Ohio's diverse communities. Ohio's Whole Child Network is a virtual platform where districts, schools, community partners and families can learn from each other, share successes and best practices, and support each other in ensuring each child is healthy, safe, engaged, supported and challenged. Together, the network will inspire Ohio schools and communities to create supportive and caring environments for children to learn, thrive and achieve their greatest potential.

Participants in the Whole Child Network include district and school administrators, early childhood through grade 12 teachers and paraprofessionals, school student support staff that includes counselors, social workers, psychologists, food service, transportation, and safety personnel, representatives from

state and local agencies serving children and families, families and caregivers of students, and participants from all different schools and communities including culturally and economically diverse schools and communities.

Over the next five years, the Ohio Department of Education and Workforce will continue to provide resources and guidance to further support the Whole Child Framework. Each school year the Whole Child Advisory Group meets to continue to guide, promote, and support the implementation of Ohio's Whole Child Framework throughout Ohio. Each Advisory Group meeting provides innovative ideas being implemented in schools and districts around Ohio. These are collected on the Ohio Department of Education and Workforce website so all schools have access to these resources.

When students are healthy, feel safe, are supported through strong systems and relationships, are challenged and experience success and are engaged in learning that is relevant and meaningful, they are more likely to enjoy learning, develop positive social skills and achieve greater success. The Ohio Department of Education and Workforce maintains a list of Whole Child Approach resources in the areas of Healthy, Safe, Engaged, Supported, and Challenged for educators to easily access.

#### **Conclusions**

Ohio has implemented a multi-faceted approach to support family-driven assessment and case planning processes throughout the state. The driving components include statewide policy, a comprehensive assessment and case planning model that is utilized in all 88 counties, and a robust Ohio SACWIS application. Ohio has also invested considerable efforts in developing effective cross-system collaborations to enhance the state's service array. Furthermore, the state has implemented several strategies to promote and support individualized service planning and delivery to meet each family's unique needs.

# 6. Agency Responsiveness to the Community

#### **Assessment of Performance**

There are two item measures which make up the Systemic Factor *Agency Responsiveness to the Community.* These include **Item 31:** *State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR* and **Item 32:** *Coordination of CFSP Services with other Federal Programs.* During Round 3 of the CFSR this Systemic Factor was found in Substantial Conformity since both items were rated as a Strength.

Item 31 State Engagement and Consultation with Stakeholders: How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (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?

ODJFS/DCY has continued to make deliberate efforts to maintain inclusivity and responsiveness to its community throughout the strategic planning, implementation, and evaluation of various efforts. In all phases, the agency strives to connect the work of the CFSP/APSR and CFSR when assessing agency strengths, areas needing improvement and engaging in meaningful change with our partners and stakeholders.

## **Statewide Information System**

ODJFS/DCY has many partners from public and private agencies, Title IV- E courts, foster care advocates (including former foster youth), and a cross-section of children services system users across all bureaus. Feedback from these partners is obtained through many venues, including:

#### <u>Automated Systems Review Committee and Functionality Review Meetings</u>

The Automated Systems Review Committee provides ongoing systems review and feedback on planned changes. The members:

- provide a high-level review of feedback and recommendations from the Functionality Review Meetings. Contribute feedback and guidance for final recommendations and implementation.
- review barriers to functionality improvements and implementation.
- identify opportunities for user education, training, and engagement.
- leverage respective connections, expertise, and resources to support the work.

## Webinars/Live Events

The CCWIS team routinely provides webinar overviews on project priorities and system functionality.

#### **PCSAO Directors' Meetings**

Agency directors provide feedback on system functionality and user needs.

## Title-E Juvenile Court Roundtable

The CCWIS team, at times, will participate in these meetings to announce future enhancements, answer functionality questions, and gather information on desired modifications.

# PFOF Advisory Group

The CCWIS team provides systems updates and facilitates discussion around systems improvements and modifications.

## **Ohio's Comprehensive Child Welfare Information System (CCWIS)**

Ohio's CCWIS supports over 9,000 active users. Ohio is continuously updating and enhancing the system to ensure pain points are addressed, user's needs are met, and the system is functioning efficiently. Ohio continues to assess and explore areas where system modifications are needed. Upcoming enhancements will include:

- Taking Early Action Matters (TEAM) Ohio.
- Ohio Certification for Agencies and Families (OCAF).
- Child Match functionality to improve placement matching for children in custody.
- Updating Placement functionality to ensure the location of children in custody can be documented.
- Updating Qualified Residential Treatment Program functionality to better align with the updated federal guidance.
- Redesign the Bridges financial functionality.
- System updates from the results of the Children Services Transformation recommendations.
- Provision of training, visual aids, and technical assistance to users regarding new and updated Ohio SACWIS functionality.

Ohio's CCWIS currently supports the following automated functions to ensure Ohio's Title IV-E and private agencies have the functionality to support children services activities:

- Administration
- Adoption Case Management
- Assessment/Investigation Case Management
- Certification Management
- Community Reporting and Notification Portal
- Financial Management
- Intake
- Ongoing Case Management
- Provider Management
- Training Management
- Young Adult Case Management

#### **Practice Efforts**

## **Independent Living and Transition Age Youth**

As noted in the Collaboration section of the APSR, Ohio continues to support inclusion of youth voice (i.e., the perspectives of those with lived experience in foster care) in the development of state and local children's services policies and programs. Through a grant with ACTIONOhio, the OYAB provides opportunities for youth in care to develop professional leadership and advocacy skills.

OYAB members provide valuable representation at Ohio's Partners For Ohio's Family Advisory Board meetings, quarterly calls with agency leadership and provide youth prospective on projects including normalcy, tiered foster care and congregate care reform, enhancement of training of Independent Living services for foster parents and caseworkers, youth voice in permanency planning, maintaining sibling connections, the Bridges program, and to expand and integrate parent partner work in Ohio. The OYAB has also provided key feedback across Ohio's state agencies, such as the Ohio Department of Education on Every Student Succeeds Act implementation and local school district foster care liaisons; the Ohio Department of Medicaid on OhioRISE; the Psychotropic Toolkit, and Medicaid services for emancipated young adults. Additionally, Ohio provides financial support to the nine local youth advisory boards across the state.

## **Comprehensive Addiction and Recovery Act (CARA Implementation)**

Ohio's Practice and Policy Academy (PPA) which focuses on the implementation of CARA and Plans of Safe Care (PoSC) has continued to provide structured support and guidance across Ohio. The department continues its partnership with the PPA State Team whose continued mission is to ensure Ohio remains committed to the development, implementation, and monitoring of PoSCs. The PPA State team in partnership with the department includes members from the following:

- Ohio Department of Mental Health and Addiction Services
- Governor's Office
- Ohio Supreme Court
- Ohio Department of Disabilities
- Ohio Department of Health
- Ohio Department of Medicaid
- Ohio Hospital Association
- Ohio Perinatal Quality Collaborative
- Medical Hospitals (delivering hospitals)
- Ohio counties who have consistent CARA/PoSC practices

The departments' CAPTA funds for CARA continue to focus on the long-term goal of community PoSC Coordinators for Ohio. The long-term goal of the PPA and is to establish these community-based CARA/PoSC Coordinator positions which will serve infants, children and families impacted by substance use disorders (SUD). Federal requirements require universal and consistent practices which follow the intent of CARA, these positions will ensure Ohio is meeting these guidelines and expectation.

#### **Affiliations with Partner Associations**

#### **Statewide Affiliations**

As described throughout this report, ODJFS/DCY continues to support and cultivate strong collaboration with several statewide associations that represent the voice of public and private agencies, young adults, and families. ODJFS/DCY has established partnerships with the Public Children Services

Association of Ohio, the Ohio Job and Family Services Directors' Association, and the Ohio Children's Alliance all of whom continue to be active partners and have shared innovations that have had significant positive impact on our constituency. ODJFS/DCY regularly attends association meetings, providing periodic updates to these organizations on CFSP implementation activities as well as the CFSR. In addition, the Ohio Children's Alliance, Public Children Services Association of Ohio, Ohio Job and Family Services Directors' Association, Ohio's County Commissioner Association, Ohio's Youth Advisory Board, and the Ohio Family Care Association participate on several different stakeholder leadership bodies alongside ODJFS/DCY, including the Partners for Ohio's Families Advisory Board and several of the programmatic collaborations noted above.

#### **Partnership with Casey Family Programs**

Casey Family Programs has been a strong partner with Ohio on several important children services initiatives, including Differential Response, the Ohio Intimate Partner Violence Collaborative, Peer Parent Partners, Family First Prevention Services Act, and Permanency Roundtables. Casey has consistently provided support, networking, and clinical expertise to Ohio's Parent Partner movement.

With support from Casey Family Programs, ODJFS/DCY partnered with a major metropolitan public children services agency and their managed care partners to develop and implement a parent partner pilot program modeled after the Iowa Parent Partner Approach (IPPA). Ohio was awarded a five-year grant through The National Quality Improvement Center for Family Centered Reunification (QIC-R). The QIC-R is supports Ohio's efforts to adapt the IPPA model under a pilot with three public children services agencies. Funding through this grant supports program development, implementation, and evaluation needs. Additionally, Ohio is partnering with Children and Families of Iowa for technical assistance and training around implementation of their IPPA model.

#### **Collaboration with Tribes**

Although there are no federally recognized tribes located within Ohio, ODJFS/DCY continues its work to develop partnerships with tribal representatives within the state. The Native American Indian Center of Central Ohio (NAICCO), a 501(c)(3) non-profit dedicated to improving the lives of American Indian and Alaskan Native (AI/AN) people throughout Ohio, has proven to be a helpful resource to Ohio when working with counties on issues impacting families with tribal heritage in the state.

*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 Child and Family Services Plan (CFSP) are coordinated with services or benefits of other federal or federally assisted programs serving the same population

#### **Coordination of CFSP Services with other Federal Programs**

Ohio works closely with other state agencies and local PCSAs to ensure that the state's services under the CFSP are coordinated with services and benefits of other federally assisted programs serving the same population. These include, but are not limited to: Medicaid, Medicare, federally and state-supported behavioral health services, the Social Services Block Grant (Title XX), Title 1 (education funding), the Individuals with Disabilities Education Program (IDEA), state and federally-supported child care programs (e.g., Step Up to Quality, Head Start), juvenile justice initiatives, Court Improvement Projects, Child Abuse Prevention and Treatment Act programming, the federally-funded Personal Responsibility and Education Program, specialized programming for those with developmental disabilities, the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Workforce Innovation and Opportunity Act, Educational Training Vouchers, the Chafee Foster Care Independence Act, and multiple grants funded by the Substance Abuse and Mental Health Services Administration (SAMHSA).

## 7. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

#### **Assessment of Performance**

This Systemic Factor includes four item measures. The Round 3 CFSR Final Report indicated Ohio was in substantial conformity because only two of the four items were rated as a "Strength". These were: *Item 33 Standards Applied Equally* and *Item 35 Diligent Recruitment of Foster and Adoptive Homes.* 

The following items were rated as "Areas Needing Improvement: Item 34 Requirements for Criminal Background Checks and Item 36 State Use of Cross Jurisdictional Resources for Permanent Placements.

Item 33 Standards Applied Equally: Adoptive Parent Licensing, Recruitment, and Retention Item 33: 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 child care institutions receiving title IV-B or IV-E funds

All licensing standards continue to be applied equally. ODJFS/DCY takes several approaches in ensuring licensing standards are applied equally and consistently. The licensing team has a bi-weekly standing appointment with policy writing partners in which Q&A is discussed and a decision is rendered. Once done, the Q&A is recorded on a tracking spreadsheet for all licensing specialists to use in their monitoring. The same Q&A is also shared and discussed during monthly bureau team meetings. In addition, licensing specialists coordinate and participate in team inspections, promoting consistency across colleagues. Finally, licensing managers accompany their team in the field to ensure licensing standards are applied equally, consistently, and according to regulatory requirements.

To allow providers to voice concerns of any inequality in applying licensing standards, providers may contact the licensing manager, licensing bureau chief, or the help desk to register their concerns.

**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?

Federal requirements under 45 CFR § 1356.30(f) require documentation that the agency it certifies have conducted criminal records checks for public and private agency childcare staff and foster and/or adoptive parents and applicants.

Section 2151.86 of the Ohio Revised Code (ORC) has required any entity that employs persons to be responsible for a child's care in out-of-home care to conduct criminal records checks for public and private agency childcare staff prior to hire. Ohio Administrative Code 5101:2-5-09, 5101:2-5-09.1 and 5101:2-48-09 of the OAC identify the frequency and manner by which criminal records checks are to be conducted. All criminal records checks must be conducted using section 2151.86 of the ORC as the reason fingerprinted.

Ohio implemented an electronic submission of criminal background checks using the KOFAX system on January 5, 2017, for all agencies. An initial phase in was conducted over several months, and agencies continue to submit the criminal background checks quarterly for compliance review by licensing staff. Licensing Specialists continue to monitor these quarterly submissions which include new hires since the previous quarterly submission.

In the time period since Ohio implemented electronic submission of all criminal checks for public and private agency childcare staff, and foster and/or adoptive parents and applicants, 81,736 criminal checks have been submitted through April 1,2024. The number of criminal checks processed during this time was 69,563 and 91% were found compliant. Of those, 8,583 were submitted between May 1, 2023-May 1, 2023, and 6,982 criminal checks processed were compliant. Criminal checks identified as non-compliant were cited and the agencies affiliated with the individuals with the non-compliant criminal checks were either issued Technical Assistance or required to complete a Corrective Action Plan. Seventy percent of those reviewed between May 1,2021-May 1,2022 have been found to be compliant, while others are still being processed.

The Ohio Certification and Licensing Monitoring system (OCALM) provides a complaint workflow which allows licensing staff to incorporate all citations for criminal record check requirements found to be noncompliant with state and federal rules. The OCALM system allows the licensing team to run reports specific to the number and type of citations related to criminal record check requirements on a quarterly basis. Reports can be utilized to identify trends in noncompliance.

**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?

Multiple strategies have been used to recruit and retain foster and adoptive homes. These include:

Foster Care and Adoption Website

- Kinship Support Program
- Kinship Guardianship Assistance Program
- Kinship Licensing Incentive Program
- Recruitment and Retention of Foster Caregivers Funding
- Resource and Adoptive-Parent Marketing and Recruitment Campaign
- May National Foster Month and November National Adoption Month

#### **Foster Care and Adoption Website**

Ohio regularly augments its longstanding Foster Care and Adoption website site, https://fosterandadopt.jfs.ohio.gov. Recent additions include a series of news articles related to the foster care, adoption, and kinship care, many of these articles share personal stories from adoptive and foster families in Ohio to encourage potential families to take that first step to become caregivers. The website is currently under review to enhance user experience with a goal of increasing recruitment efforts. The statewide adoption photo-listing, accessible https://fosterandadopt.jfs.ohio.gov/adoption/ adoption-photolist, is a component of the Foster Care and Adoption Website. Sixty-one counties have requested access to the Adoption Photo-listing website. Along with the Foster Care and Adoption Website several platforms are used to provide fast helpful information about foster care, adoption, and kinship care. These platforms include billboards, Facebook pages, Facebook ads, and Google ads to share information about foster care, adoption, and kinship care.

#### **Kinship Support Program**

Ohio has expanded its support to kinship caregivers with several programs designed to maintain stability for children placed with and in the custody of kin. The governor signed into law Amended SB 310 which established the Kinship Support Program (KSP). The program is a financial program administered by ODJFS/DCY and funded through state general revenue funds. The child must be in agency custody and placed in a kinship placement to receive funds. These payments to the kinship caregiver continue for six months.

#### **Kinship Guardianship Assistance Program**

On January 1, 2023, Ohio established the Kinship Guardianship Assistance Program (KGAP). KGAP assists kinship caregivers financially to promote placement stability upon receiving legal custody of the child. This assistance lasts as long as custody remains with the kinship caregiver.

#### **Kinship Licensing Incentive Program**

To increase the number of kinship families becoming licensed foster homes, Ohio initiated the Kinship Licensing Incentive Program (KLIP). The KLIP program supplies funding to PCSAs to offset the costs of licensing kinship caregivers and allows for the waiver of preservice and ongoing training for the certification of kinship caregivers. This program has allowed nearly 200 kinship families to become certified foster parents.

### **Recruitment and Retention of Foster Caregivers**

Amended Substitute House Bill 100 included an allocation of \$5 million in each SFY22 and SFY23 to support statewide efforts for Recruitment and Retention of Foster Caregivers. Activities completed through this grant resulted in 116 new foster homes, 236 homestudies that were pending, and an estimated 302 home retained.

## **Resource and Adoptive-Parent Marketing and Recruitment Campaign**

It is necessary to increase the foster and adoptive home capacity in Ohio including those homes that accept youth with higher levels of need which led to the creation of the Adoption and Resource Home Recruitment Program also known as the It *Takes Heart Campaign*. The *It Takes Heart Campaign* is a statewide data driven marketing campaign which includes both digital and print ads. This program additionally provides educational opportunities for both private and public child placing agencies to assist them in leveraging the statewide campaign in the local recruitment of families.

The *It Takes Heart* campaign, began the work to recruit adoptive, resource families by creating focus groups of foster care alumni, foster parents, and foster care and adoption agency representatives to shed light on their unique perspectives and needs. In 2022, ODJFS and the contracted vendor for the campaign developed and disseminated a statewide foster parent survey of all current and former foster parents in the last 5 years. 2,310 people responded to provide their experiences getting started in foster parenting, challenges, training, and needed supports. The information from the survey was produced into the Foster Care In Focus Report: *Insights from Former and Current Ohio Caregivers*. This feedback is being used to guide campaign strategy for *It Takes Heart*.

The *It Takes Heart* Campaign has seen steady growth in both the number of visitors to the DCY website and an increase in the number of visitors taking the first step to become an adoption or resource caregiver by submitting inquiries indicating their interest in being contacted. During calendar year 2023, Ohio had the highest number of newly certified homes in one year since 2019.

#### Marketing and Recruitment

ing and rectartment	
Visitors to the It Takes Heart Website	
January-December 2022:	232,003
January-December 2023:	317,820
Inquiry Form Submission (online only)	
January – March 2022	501
January – March 2023	746
January- March 2024	969

Currently, the *It Takes Heart* Campaign produces advertising on an ever-expanding list of digital outlets, including Google, Microsoft, Facebook, streaming, and iHeart Radio. In addition to digital ads, the campaign utilizes strategic traditional advertising placements including billboards, TV and Radio ads for National Foster Care Month 2023, Shopping mall ads, and shopping cart ads. These ads have yielded 52,650,186 impressions over the life of the campaign. The recruitment program is additionally focused on ensuring agencies around Ohio are able to benefit from what has been learned and created

for the campaign. This work included the creation of a strategy session series which is available for public and private foster care and adoption agencies to learn best practices for various recruitment activities. To date, 195 unique staff from Ohio public and private agencies have attended these sessions. Campaign strategy packets specific to different regions in Ohio have been created to provide information for public and private agencies to use when recruiting foster and adoptive parents, including child welfare data and target market strategies for recruitment.

Additional work is underway to improve the recruitment and support of treatment level foster families in Ohio who are certified by Public Children Service Agencies (PCSA). A treatment foster home pilot modeled off work currently being completed by PCSAs in Northwest Ohio has been designed. This pilot will focus on the recruitment and support of new treatment level foster homes by partnerships of PCSAs created in different regions of the state.

#### May National Foster Month and November National Adoption Month

Ohio has declared May National Foster Month and November National Adoption Month. During these months, attention is drawn to the need for foster parent and adoptive parents by providing information throughout the month to the community. Throughout Ohio, communities celebrate fostering and adopting in their own unique ways, which include celebration picnics, award luncheons, tickets to amusement parks and movie theatres.

*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?

On October 11, 2023, a training for Ohio's Medicaid OhioRise staff was held. This training presented a general overview of Intestate Compact on the Placement of Children (ICPC), a review of the pertinent articles/regulations, and the general ICPC process so that OhioRise staff can more effectively assist families facilitate direct out of state residential placements. Attendees were able to ask questions and discuss scenarios.

On January 25, 2024, the first of four quarterly trainings scheduled for 2024 for all Ohio counties was held via Microsoft Teams. This training presented a general overview of ICPC, a review of the articles/regulations, and the general ICPC process. The presentation also included information on entering ICPC information in Ohio SACWIS, including the date field for recording compliance with the Safe and Timely Act. Information regarding NEICE processes was also shared. Attendees were able to ask questions and discuss scenarios.

The online Ohio SACWIS Knowledge Base has the following resources available to support ICPC workers:

 ICPC Requirements Checklists for Adoption, Foster/Relative/Parent, and Residential placement requests. These were provided by OFC's Deputy Compact Administrator in the Substitute Care Policy section and list the required documentation for each type of ICPC request.

- Completing an Outgoing ICPC Request via NEICE article with step-by-step instructions.
- Completing an Incoming ICPC Request from NEICE article with step-by-step instructions
- Ohio SACWIS ICPC-NEICE Tips document.

The Ohio Automated Systems Help Desk and DCY's Deputy Compact Administrator/subject matter expert continue to provide ongoing technical assistance to county ICPC workers as questions or concerns arise.

#### **Homestudies from another State**

During SFY 2023, there were 748 requests for home studies received from another state to facilitate a permanent placement. Of those, 238 (31.82%) home studies were completed within 60 days or less. Additionally, 153 of the 748 records were terminated prior to 60 days, without completion of the home study, indicating that the sending state may have withdrawn the request. Of the 748 requests for home studies received from another state to facilitate a permanent placement, a total of 201 children were placed. Of the 201 children placed, 78 (38.81%) home studies were completed within 60 days or less.

When compared to the prior reporting period there was an increase in the number of home studies completed within 60 days or less.

#### **Conclusions**

A variety of strategies have been employed to recruit and retain foster and adoptive caregivers and to provide the necessary and support needed to caregivers. Feedback from multiple sources has directed the strategies selected. Additionally, various methods are being used to facilitate approval of prospective foster and adoptive applicants who meet state and federal requirements. Ohio is the only State that provides training to Assessors, a requirement contained in the ORC.

# B. Plan for Enacting the State's Vision 10

#### Vision of OFC

Ohio's children, youth and vulnerable adults have a safe and permanent family that nurtures and promotes their overall well-being.

#### **Mission of OFC**

Through partnership with public and private agencies, we support the delivery of services to improve outcomes that promote safety and well-being.

#### **Prevention Vision**

An integrated system of care where families and children thrive.

The above Vision statement of the ODJFS, Office of Families and Children, contained in the 2020-2024 CFSP, aligned with Ohio's Governor's commitment to create an Ohio that works for all Ohio families, especially those most in need by investing in:

- Evidence-based home visiting programs;
- Early Intervention Programs;
- Improving the quality of Ohio's publicly funded child care system; and
- Children services agencies by investing in county support, care coordination of Ohio's highest need children, foster care and family recruitment and engagement, statewide Kinship Navigator Program and Ohio's Bridges program.

This vision statement reflects the long-standing philosophy of OFC, who we serve, and our goal when working with and providing services to Ohio's families. The mission statement articulates how this vision is to be met: through partnership with public and private agencies and by the delivery of services.

The Prevention Vision, established following the passage of the Family First Prevention Services Act, was developed based upon the collective thinking of an assembled group of partners which included leadership from Public Children Services Agencies, Residential Treatment Facility representatives, Mental Health and Alcohol and Drug service providers, Managed Care providers, foster parents, Family and Children Firs members, Ohio's CASA/GAL Association, the Supreme Court of Oh as well as other service providers and family members. Casey Family Programs facilitated the sessions. It was clear to everyone that Ohio wanted to build an integrated system of care where families and children thrive. Further discussion defined "system" as the child welfare system, comprised of each entity, public and

 $<sup>^{10}</sup>$  We are transitioning to DCY and will outline the new agency's vision in the upcoming  $^{2025-2029}$  CFSP.

private, that provide services to Ohio's children and families. This includes the state and local court, education, and physical, mental and behavioral health systems and providers.

Enacting these visions required continued collaboration and planning with stakeholders as Ohio continued to chart a course toward prevention of child abuse and neglect and transforming the child welfare system in Ohio. During the 5 year period many challenges and barriers arose- from COVID-19 to workforce issues to available of services to addressing the needs of children, youth and families. However, it guided our thinking on what "true system transformation" might look like for Ohio, what strengths we can continue to build upon as a state, and what barriers need to be tackled to be successful in achieving transformation.

# C. Implementation and Program Supports

Ohio has a longstanding partnership with the National Implementation Research Network (NIRN), a testament to its commitment to leveraging the best practices in implementation science. This historical collaboration has been instrumental in Ohio's ongoing efforts to identify and enhance the key drivers of implementation quality. The state's comprehensive approach includes robust training, coaching, performance assessment, and data systems to support decision-making, all aimed at equipping child protective services staff with the necessary skills and knowledge. The interventions within the CFSP were carefully selected with this critical framework in mind, and the required implementation supports are seamlessly integrated throughout the Plan.

### **Training and Technical Assistance**

Summarize the state's training and technical assistance provided to counties and other local or regional entities that operate state programs and its impact on the achievement of 2020-2024 CFSP goals and objectives. (45CFR 1357.1(a)(5)).

Prior to the establishment of the Training and Development Unit in 2021 policy staff and/or technical assistance specialists provided training and technical assistance to public and private child serving agencies and IV-E courts on an array of topics including, but not limited to: assessment and case planning, Motivational Interviewing, OhioKAN, new Adoption Photo Listing, revised Case Plan, Case Review, and Semi-annual Administrative Review (SAR) tools.

The Training and Development Team included six positions, providing training and assistance to child protection service staff in practice. The team is comprised of five developers and one supervisor with over one hundred and twenty years of experience in child protective services. Subject matter expertise covers many aspects of child protection, including substitute care, adoption, foster care licensing, placement, kinship assessment, intake, ongoing supervision, policy, and the Interstate Compact on the Placement of Children (ICPC), to name a few. The Training and Development team within DCY continues to:

 Work collaboratively across the office to develop and deliver policy and practice training and guidance for child protective services staff.

- Partner with the policy areas, Ohio Statewide Automated Child Welfare System (Ohio SACWIS), technical assistance specialists (TAS), the state training coordinator (Ohio's University Consortium for Child and Adult Services (OUCCAS) for the Ohio Child Welfare Training Program (OCWTP), and regional training centers (RTCs) to provide a comprehensive support system to internal and external stakeholders.
- Engage in a review process for all content developed to ensure accuracy and presentation and maximize learning transfer.

The Training and Development Team delivers focused support, guidance, and skill development to assist counties with identified professional development skill building. This continued effort occurs by partnering with counties to assess needs using data reports and coordinated meetings. The team also works to coordinate training, support the application of policy to practice, evaluate outcomes, and contribute to policy development. Rules and regulations are routinely reviewed and updated, and the training team interprets, trains, and assists agencies with practical implementation. This level of support continues to assist counties to become more consistent and improve outcomes for children and families.

In November 2022, the office implemented the Child and Adult Protective Services Learning Management System (CAPS LMS). All training previously posted on the Training and Development webpage has been migrated to CAPS LMS. County partners are eligible to receive ongoing training hours delivered by the Training and Development team. These training hours assist with the thirty hours of ongoing training/coaching requirement for Caseworkers and Supervisors.

The training team continues to provide Comprehensive Assessment Planning Model (CAPM) support to Ohio's eighty-eight counties in their practice. The team also works to develop and deliver CAPM support to Ohio's child protective service supervisors through the Supervisor Summits. OUCCAS has created a new Caseworker Core 2.0 series and embedded the CAPM concepts. The training team collaborates with the RTCs, TASs, and DCY Policy to gauge interest and provide regional discussion around training topics; this allows for interaction around the training content and concepts. By the end of the SFY, the training team will have access to software to build interactive content, ensuring the transfer of learning and professional skill development.

## **Child and Adult Protective Services Learning Management System (CAPS LMS)**

The CAPS LMS continues to interface with Ohio SACWIS, eliminating duplicative work processes, improving data integrity, and streamlining auditing and reporting functions. The system also automatically tracks users' progress toward meeting ongoing training requirements. This system will allow Ohio DCY to offer the latest learning development technologies as laws and regulations evolve.

The Training and Development Team administers the CAPS LMS and assists when requested regarding the system. The Children Services Operations Support (CSOS) team is actively working on the project and plans to transition all help desk-related tasks to that team. Several job aids help users utilize the system to its full extent.

All training materials developed and delivered by the Training and Development Team are now easily accessible in CAPS LMS. This includes materials for targeted or statewide users, ensuring everyone has the resources they need for professional development. CAPS LMS rolled out across the State of Ohio PCSA staff on November 30, 2022.

## **PCSA New Caseworker and Supervisor Onboarding Curriculum**

Public Children Service Agencies (PCSAs), the Public Children Services Association of Ohio (PCSAO), and one of the Children Services Transformation (CST) recommendations identified the need for a consistent, statewide onboarding program for new caseworkers and supervisors. The training team migrated these on-demand onboarding curricula for new PCSA caseworkers and supervisors to the CAPS LMS. The training team is responsible for conducting ongoing content reviews to ensure the curricula remain current with practice advancement and respond to county questions. The onboarding training does not replace the requirement for caseworkers and supervisors to attend the Core curriculum, and counties will not be required to implement the onboarding training; however, it is an available resource to supplement each PCSA's training process. PCSA Onboarding provides users with a high-level overview of foundational concepts and requirements through a virtual platform with interactive guizzes and assessments.

### **ODJFS/DCY PCSA Training Liaison Round Table**

The training team has organized and conducted the ODJFS/DCY PCSA Training Liaison Round Table to assist county training staff in exchanging resources and ideas regarding staff onboarding, development, and retention. These gatherings offer essential support for onboarding and networking opportunities to help retain the workforce. Additionally, the members use a Teams channel to share files and engage in interactive dialogue.

#### **Training & Technical Assistance 2020-2024 CFSP**

The responsibility of the training team is to create and deliver training programs that will assist counties in preparing for new and revised regulations beforehand. The training topics that have been developed and made available over the last five years to help Ohio achieve its CFSR and CFSP Goals and Objectives are outlined in **Appendix B** of this report.

#### **Automated Systems**

The Comprehensive Child Welfare Information System (CCWIS) team continues its commitment to provide training and technical assistance to users of our systems at all levels, through utilization of a variety of delivery methods, and frequently in collaboration with staff from other areas such as Policy, Licensing Specialists, the Training Unit, and Technical Assistance Specialists. Ohio's CCWIS user community is made up of PCSAs, Title IV-E Courts, Private Agencies, and contracted program staff.

As new functionality is introduced, informal and formal help and training opportunities are created by the team. In the past year, most of the help and training offerings that have been provided virtually

through the use of Microsoft Teams meetings and live events that were led by the CCWIS team or the Training unit. Help and training content is available to users on-demand and is available in the form of in-depth Knowledge Base Articles (KB), quick guide documents, training videos, and system-based Online Help. The Children Services Customer Support Team also provides daily support by responding to impromptu calls, emails, and online chats received from the CCWIS user community as well as leading Intensive Technical Assistance virtual sessions with users, on an as needed basis.

## Training & Technical Assistance 2020-2024 CFSP

A list of training and support that have been created, led, and made available by the CCWIS team over the 5 years assisting Ohio in achievement of CFSR PIP Goals and CFSP Goals and Objectives can be found in **Appendix B** of this document.

## **Technical Assistance and Capacity Building Needs**

Describe the technical assistance and capacity building efforts that the state received in FY2020-2024 in support of the CFSP/APSR and/or CFSR/CFSR PIP goals and objectives. Describe how capacity building services from partnering organizations or consultants assisted in achieving the identified goals and objectives. (45 CFR 1357.16(a)(5).)

During the 2020-2024 CFSP, Ohio worked with the Capacity Building Center for Courts. Listed below are the activities which occurred:

- The Capacity Building Center for Courts conducted the initial and follow-up hearing quality evaluation. Additionally, the Center assisted in the evaluation of the NACC trainings for attorneys, judges, magistrates, etc. The evaluation of the first and second NACC Ohio specific training sessions is complete. Two key findings were:
  - Self-reported practices were not statistically different between pre and post surveys.
  - Parent and child attorneys/advocates reported an increase in understanding child welfare law and best practices post the trainings.

NACC developed an updated Ohio specific child welfare attorney training. The virtual four series training was held in October 2022. It was designed for Ohio attorneys who represent children, parents, Juvenile or Family Court Staff, Children's Services Staff or any community professionals working in children services law. The training included practice tips, hypothetical case studies, and polls, grounded in Ohio law, to share knowledge, skills, and best practices aimed at promoting high quality representation in Ohio children services cases. (Assists in achieving: Goal 4, Strategy 2 and Strategy 3- CFSR, PIP and Goal 2, Objective 6, Objective 7- 2020-2024 CFSP)

#### Research, Evaluation, Management Information System

Summarize any evaluation and research activities with which the state agency was involved or participated in and how they supported the goals and objectives sin the plan. (See 45 CFR 1357.16(a)(5).)

Ohio engaged in several activities related to research and evaluation that supported the CFSP Goals and Objectives. These include, but are not limited to, the following:

- Ohio participated in a QIC-WD grant. The QIC-WD published the impact of Ohio's evaluation and can be viewed at: Ohio Key Findings. The Coach Ohio intervention requires a high degree of fidelity to be effective, which was an observation made by comparing Ohio and another implementation site's efforts at implementing the Resilience Alliance materials. An implementation manual was created in 2023 for all counties who may wish to pursue implementation, and this resource has been provided statewide. (Assists in achieving: Goal 1, Objective 1, Strategy 1 2020-2024 CFSP)
- Ohio was awarded a five-year grant through The National Quality Improvement Center for Family Centered Reunification (QIC-R). in the Fall of 2021. The QIC-R is supporting Ohio's efforts to adapt the Iowa Peer Parent Approach (IPPA) model under a pilot with three public children services agencies. Funding through this grant supports program development, implementation, and evaluation needs. (Assists in achieving Goal 2, Objective 7- 2020-2024 CFSP).
- The Capacity Building Center for Courts did the initial and follow-up hearing quality evaluation.
   Additionally, the Center is assisting in the evaluation of the NACC trainings for attorneys, judges,
   magistrates, etc. The evaluation of the first and second NACC Ohio specific training sessions is
   complete. Two key findings were:
  - o Self-reported practices were **not** statistically different between pre and post surveys.
  - o Parent and child attorneys/advocates reported an **i**ncrease in understanding child welfare law and best practices post the trainings.
- OhioKAN was designed in partnership with researchers at Kaye Implementation and Evaluation (KI&E). The program was designed and implemented to meet the rigors of a cluster randomized trial. To meet this rigorous evaluation type, OhioKAN identified a way to compare a minimal intervention group with the full OhioKAN intervention group. Based on the ten region model OhioKAN had developed, KI&E reviewed census and child welfare data in each region and determined that each region had a comparable match allowing OhioKAN to have 5 minimal intervention control regions and 5 intervention regions. These regions became cohorts and allowed the program to prepare for an Effectiveness Evaluation.

Once the program design was solidified, OhioKAN began implementation and was launched in October 2020. KI&E completed an Implementation Evaluations initially to determine the readiness of OhioKAN, answering questions such as: Was the program reaching the intended population and was it being implemented with fidelity? As a part of the Implementation Evaluation, a Readiness Evaluation was completed in September 2020. This evaluation showed that the program had areas needing improvement prior to starting the Effectiveness Evaluation. In December 2020, using the Readiness Evaluation data, the program identified indicators of readiness to inform the start of the rigorous effectiveness trial for the OhioKAN program. Using these indicators, the Effectiveness Evaluation was able to begin enrolling participants in in February 2022.

In November 2023, KI&E published the Effectiveness Evaluation three-month outcomes results. These results indicated that caregivers in the intervention group experienced statistically significant effects when compared to caregivers in the control group. Currently, KI&E is working on publishing the six-month outcome results which continue to show favorable effects. KI&E is continuing to collect and analyze data on families at twelve months and is looking at additional data collection opportunities to measure sustainability of program effects. (Assists in achieving Goal 3, Objective 1, Strategy 4 – 2020-2024 CFSP)

- Conducted statistical analysis to determine the role of Overrides in Family Assessments.
   (Assists in achieving: Goal 4, Objective 2 2020-2024 CFSP)
- Replicated CFSR Data Profile to expand the ability to interpret county differences. (Assists in evaluating CFSR Data Profiles 2020-2024 CFSP)
- Designed and implemented a methodology to evaluate the accuracy of psychotropic and opioid medications being recorded in Ohio SACWIS that were prescribed to the foster care population. The methodology requires ODJFS/DCY to send identifying information on children in foster care in a given month to Medicaid. In response, Medicaid returns all pharmacy claims dispensed on those children for that month. The analysis involves electronically comparing the medications dispensed with the information recorded in Ohio SACWIS to verify that the medications dispensed (Medicaid) aligns with the medications the child has been prescribed in Ohio SACWIS.

Reports were provided to counties and best practice strategies were discussed. The reports provided analyses on the percent of children with correctly recorded prescriptions; summary data on the number of children prescribed each medication; and detail level prescription information for each child. Contextual data was included in the report.

Agencies found these reports insightful to gauge the needs of foster youth and have requested ODJFS/DCY continue releasing them to assist their efforts in understanding this unique and important population. (Assists in improving the Well-Being of Children and Youth)

A team of 16 consisting of representatives from ODJFS/DCY's licensing staff, foster parents, and public and private agency staff examined multiple models of supporting birth parents and foster parents by reviewing the literature and speaking to six states about their best practices. The team then settled on adopting the "All About Me" method to strengthen the relationships between birth and foster families. Using this method, the birth family, foster family, and caseworker meet within 72 hours from the time the child is placed to discuss the needs of the child, only. For instance, the conversation centers on the food preferences, sleep habits, education needs, maintaining friendships, hobbies, etc. The conversation is not to learn about the underlying reasons (e.g., parental drug addiction, domestic violence) that triggered placement. Currently, a "Care Guide" is being written for agency staff, training activities are being shaped, and rules are being developed. A decision on when to implement the rule has not been determined. (Assists in addressing Children's Services Transformation Recommendation: Strengthen relationships between birth families and foster parent).

- Planning efforts for CFSR Round 4 have begun and discussions are occurring on options for the
  state to explore when determining whether the state will conduct its own review and how each
  option would be managed. A spreadsheet tool was developed to drive discussions on various
  methodologies for conducting the review, taking into consideration the time demands on staff
  in conducting the review and how to engage counties. Methods to select counties and deciding
  the sample size to best reflect public children services agency performance is also being
  discussed. (Assists in Planning for CFSR Round 4)
- Ohio has made available two analyses to agencies to assist them in their planning efforts on prevention services. One analysis is a cluster analysis based on data extracted from the Safety Assessments and Risk Assessments. These cluster analyses, one from the Safety Assessment and one from the Risk Assessments, are designed to show the distinct groups of issues families have which pose risks to children. With an agency understanding these clusters, they can connect the appropriate array of services for each cluster to support the families. A second product provided to agencies was an event history analysis. This analysis showed the length of time children, by age group, are in custody. Counties were guided to examine this analysis and determine when, in a child's custody history, they were most likely to not exit care, and then determine which services could be provided at that point to reunify children. (Assists in Planning for Prevention Services)
- ODJFS/DCY has a Comprehensive Child Welfare Information System (CCWIS) compliant data quality plan (DQP). This data quality plan provides strategies to ensure the CCWIS standards are met for completeness, timeliness, and accuracy. Ohio SACWIS provides data quality checks to assist users in understanding the importance of data elements. The CCWIS team is committed to supporting quality data entry and ensuring completeness of information contained in the system. The team continues to work towards collecting data uniformly across the new CCWIS and the reporting system using CCWIS data. The plan includes strategies for ensuring confidentiality requirements are met, reviews are conducted at least biennially, and data is secured across systems. Through data analysis for work related to new Ohio SACWIS builds, existing reports, federal reporting, data requests, ETL processes, communication with our agency partners, or other data analysis, the CCWIS data and reporting team uncovers data anomalies. Additionally, the team receives Customer Support team tickets indicating data anomalies. When data quality issues are identified, the team performs analysis on the data and may then create a scorecard in Informatica. This scorecard indicates the number of records that have the data anomaly out of the total number of records. Once the scorecard is created, the team determines the quality requirement for accuracy, timeliness, and completeness as required by the CCWIS program. The CCWIS data and reporting team meets monthly to review all new and existing data quality issues. (Assists in achieving all Goals and Objectives in the 2020-2024 CFSP)

## **Summary:**

Ohio continues to build capacity for collaboration to provide enhanced levels of support and technical assistance. Continued relationship building through initiatives such as CAPMIS Infusion and the County

Staff Training Liaison Round Table assist in expanding a culture of collaboration with county agencies. It also creates an open dialogue where individuals from counties feel comfortable reaching out for support or technical assistance from the State. Those who facilitate initiatives, conduct research and evaluation, provide training, coaching, systems support, and technical assistance continue to expand on ways to work together to provide a cohesive message of best practice.

# **D. Progress Made to Improve Outcomes**

# Goal 1: Strengthen Ohio's child welfare workforce with work-related knowledge and skills needed to carry out their duties. (Workforce Development)

Impact: Safety, Permanency, Well-Being, Systemic Factor- Training

**Measures of Progress:** Training Effectiveness Survey, Turnover rate in sample of counties; Quality Improvement Center for Workforce Development (QIC-WD) Resilience Alliance Model and training results (Utilizing the turnover rate formula established by QIC-WD, Survey, etc.)

**Progress Measures Update:** The QIC-WD published the impact of Ohio's evaluation and can be viewed at: Ohio Key Findings. The Coach Ohio intervention requires a high degree of fidelity to be effective, which was an observation made by comparing Ohio and another implementation site's efforts at implementing the Resilience Alliance materials. An implementation manual was created in 2023 for all counties who may wish to pursue implementation, and this resource has been provided statewide. ODJFS/DCY is available to provide technical assistance to any county pursuing implementation. Workforce remains a concern and high priority for Ohio counties. Unfortunately, the workforce pressures such as limited resources and staff time can make it difficult to implement a robust intervention like Coach Ohio.

**Rationale**: Staff recruitment and retention are widespread challenges in Ohio, as well as across the nation for many children services agencies. The reality of the increasing number of children needing public children services with the corresponding lack of qualified staff to provide these services, results in resources being directed to replace staff rather than the provision of services, impacting the overall functioning of the children services system. In the root cause analysis identified earlier also suggested that caseworker effectiveness was an underlying issue for safety and so improving the skill level of the workforce is intended to address practice outcomes. Ohio was selected as a project site for the QIC-WD project to research, synthesize data and generate effective strategies to improve workforce outcomes. Ohio wants to utilize the knowledge and strategies from all eight sites participating in the project to strengthen Ohio's children services workforce. In addition, Ohio is working on securing a new contract for Caseworker, Supervisor and Foster Parent Training that better supports development of a workforce and resource homes with the skills and knowledge needed to carry out their specific duties.

## **Objective 1: Coach Ohio**<sup>11</sup>

Strategy 1: Implement Resilience Alliance in Summit, Montgomery, Hamilton, Champaign, Wayne and Knox Counties, the experimental counties in Ohio's Quality Improvement Center for Workforce Development (QIC-WD) grant.

**Benchmark 1:** Conduct 24 weekly Resilience Alliance sessions in the six experimental counties.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Supervisors from the six identified counties were trained in the Atlantic Child Welfare Implementation Center Coaching Model. Supervisors will implement coaching into their supervision sessions, with a specific focus on worker resilience.

Timeframe: Years 1-3 (Completed)

Benchmark 3: The Coach Ohio intervention will be formally evaluated by the QIC-WD evaluation team.

Timeframe: Years 1-3 (Completed)

Benchmark 4: Based upon effectiveness of Coach Ohio, begin implementing in other counties and

monitor turnover rates in those counties.

Timeframe: Years 4-5 (Completed)

## Final Progress Report:

Ohio's Intervention, Coach Ohio: Promoting Resilience and Optimism, paired the Resilience Alliance (RA) strategy with the Atlantic Coast Child Welfare Implementation Center (ACCWIC) Coaching model. Overall, Ohio's intervention was successfully implemented, but members of the Workforce Implementation Team (WIT) felt that supervisors could use additional support in providing supportive supervision and effective coaching. Given the remaining time in the study, the WIT coordinated some additional training around supportive supervision. The additional training was intended to supplement the original coaching training that agencies attended, and these trainings were the primary focus of Ohio's intervention between June 2020 and October 2020. Anita Barbee facilitated the virtual gathering with breakout groups and informative research to stimulate the group's thinking.

An evaluation of the intervention was conducted by Anita Barbee and the key findings are available at: Ohio Key Findings. ODJFS/DCY worked with the QIC-WD to develop a program implementation manual in 2023. The manual is available to all of Ohio's 88 counties; however, the intervention may not be a good fit for all counties. While the intervention showed some benefits to workforce, they require significant investments. Budgetary restrictions are a barrier to broad implementation as well; however, ODJFS/DCY is available to provide Technical Assistance to any counties wishing to pursue implementation. At this time ODJFS/DCY has not received any requests for assistance.

<sup>&</sup>lt;sup>11</sup> This Objective is identified in Goal 2, Strategy 2 of Ohio's CFSR, PIP.

# Objective 2: Revise the delivery of training to workforce (new contract for core and ongoing training)

Strategy 1: Maximize the funding of child welfare at the local level by enhancing their ability to utilize available federal funding and match with local dollars.

**Benchmark 1:** Work with the Office of Fiscal and Monitoring Services (OFMS) to create a statewide child welfare fiscal training program that marries subject matter experts within the OFC with fiscal reporting requirements.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Gather fiscal and program subject matter expert list, work with OFMS to create training topics for agency directors, as well as general fiscal info, and in-depth fiscal training. Clustering information by subject matter (e.g., Random Moment Sample (RMS), Administration and Training claiming, IV-E Foster Care Maintenance FCM), adoption funding programs, etc.).

Timeframe: Year 1 (Completed)

**Benchmark 3:** Create on demand resources, training, webinars, Knowledge Base Articles (KB), guides,

etc.

**Timeframe:** Years 1-2 (Completed)

**Benchmark 4:** Cluster trainings specific to the audience, organized by topics, such as new staff, directors, fiscal officers, etc. (RMS, Administration, and training claiming, FCM, adoption funding programs, etc.)

Timeframe: Years 2-5 (Completed)

#### Final Progress Report:

All benchmarks were achieved. The Office of Families and Children and the Office of Fiscal and Monitoring partnered to establish the Children Services/County Finance Training Program. Launched on September 5, 2019, the program was intended to broaden the knowledge base across program and fiscal and provide agencies with information that would help them maximize the use of the various funding streams available to them.

Initially training sessions were provided in-person; however, during and after COVID-19, training was provided primarily on-line or through self-instructional learning. During the 5-year period the following training was available:

- Introduction to Children Services Funding
- Introduction to the Random Moment Time Study
- Rules Process Overview
- Understanding Child Welfare Policy 1: Introduction to the Federal Child Welfare Policy Manual
- Understanding Child Welfare Policy 2: State of Ohio Laws A Brief Tour of Program Policy in the Ohio Revised Code and ODJFS E-manuals
- Introduction to the Title IV-E State Plan
- Supporting Youth During the Pandemic -Chafee Stimulus
- Title IV-E Master Contract Training
- Determining IV-E Eligibility

- Title XX funding, Chafee and Independent Living and other children service funding sources such as IV-B, SCPA, TANF and Medicaid
- Family First Prevention Services Rules/Reimbursement with Ohio SACWIS
- Qualified Residential Treatment Program Rules/Reimbursement with Ohio SACWIS

The Title IV-E Policy Section completed 40 training opportunities during 2023. These training sessions included four opportunities specifically for new workers, 16 sessions held regionally or dedicated to specific counties, three sessions on the new federal review instrument, four sessions including the QRTP requirements, two sessions focused on adoption assistance eligibility requirements, as well as sessions specific to AFDC relatedness, contracting, state hearings and mediation, training geared toward our IV-E juvenile courts, and a session for new directors dedicated to revenue maximization.

Fiscal also completed 42 meetings and trainings for local partners. These opportunities included the creation of individualized fiscal training plans for new local Directors and fiscal staff, cost allocation processes including FTEs, random moment time studies, cost pools, and how Ohio SACWIS data factors into claiming, sessions on Ohio Administrative Code fiscal rules and federal Uniform Guidance, 2 CFR 200 rules, best practices on the expending of federal and state budgets, and training tailored to new Directors on costs, Cost Allocation, Basic Information on Funding, Post Allocated Adjustments, Sharable Funding, Re-Distributions, Inter County Transfers, and the County Finance Information Systems reports.

#### Feedback Loops:

Many of county partners have expressed their appreciation for having in-person and online training modules available to their staff at any time. Additionally, it was noted that in-person training met their specific county needs.

# Strategy 2: Revise Ohio's Child Welfare Training Program to strengthen Ohio's child welfare workforce.

**Benchmark 1**: Prepare and issue a Request for Proposal (RFP) for the Ohio Child Welfare Training Program based upon the recent training system assessment to address the needs of the workforce and foster parents.

**Timeframe:** Years 1-2 (Completed)

**Benchmark 2:** Score and identify differences and strengths between vendors. Select a vendor to partner with, finalize negotiations and award the contract.

Timeframe: Year 2 (Completed)

**Benchmark 3:** Create Training Plan in collaboration with the selected vendor and the new deliverables for Years 3-5.

Timeframe: Year 3 (Completed)

**Benchmark 4:** Begin statewide training, monitor effectiveness of training and transfer of learning, and how trainees are viewing the quality and applicability of the training.

Timeframe: Years 3-5 (*Completed*)

#### **Final Progress Report:**

All benchmarks were achieved. During this 5-year period significant changes occurred in the Ohio Child Welfare Training Program (OCWTP) including:

- OCWTP contract was awarded to the University of Cincinnati (UC) to a program entitled, Ohio's
   University Consortium for Child and Adult Services (OUCCAS). In December 2020, the contract for
   the existing OCWTP vendor, Institute for Human Services (IHS) terminated. ODJFS and UC acted
   swiftly to transition the OCWTP in under 30 days with little to no service interruption for the end
   user(s). ODJFS and OUCCAS worked together on developing a new approach to deliverable
   work within the OCWTP.
- Major revisions and/or development of several mandated training modules including Caseworker and Supervisor Core; training modules for Assessors, preservice for prospective caregivers, and a new training pathway for resource families to assist them prepare youth in foster care for independent learning.
- Environmental scans resulting in reports that outline strengths of current curricula, identified current gaps, and needs, and provided insight to, not only revisions, but, in some circumstances, a new vision of how curricula would be designed and implemented to better match best practice in learning science.
- Training metrics to explore training efficiency (i.e., cost per learner hour). An example of learned information, efficiency for assessor training was poor in some parts of the state so a plan is being implemented to offer virtual assessor training statewide.
- The launch of a new Learning Management System in November 2022 that offered a better evaluation toolkit, including the capability of assessing learning at Kirkpatrick Level II.
- Significant web-based trainings in response to the restrictions imposed during COVID-19 and the significant losses in the workforce.

Starting in 2021, the Ohio Child Welfare Training Program (OCWTP) began to re-imagine Caseworker and Supervisor Core (initial training for child protection caseworkers and supervisors), Assessor Series, and Pre-Service (initial training for foster caregivers). Although courses were available earlier, new caseworkers and supervisors had to officially take the new Core 2.0 series on June 1, 2023. The new Preservice for caregivers was launched in January 2023. Assessor courses are complete, and the series will be piloted in May 2024.

The new designs for each series incorporate:

- <u>Blended Learning Approach</u>: Each redesigned series combines self-directed learning with instructor-led courses, allowing learners to absorb foundational knowledge at their own pace before engaging in skill-building activities. As an example, for new caseworkers, this facilitates a deeper understanding and application of critical practice areas, such as engagement and interviewing, assessing safety, family case planning, and the use of Ohio SACWIS.
- Targeted Learning Activities: Being flooded with information over a multi-day period can be overwhelming, and learners need help retaining information when presented in this way. Because these training series provide learners with a solid foundation of knowledge and skills, they needed to align with what the research says about how people in the workforce learn by offering shorter, more specific courses on topics critical to their jobs.
- <u>Focus on Critical Outcomes</u>: Each course was developed to ensure learners gain essential knowledge and skills in vital areas, including working with families impacted by substance use,

mental health, and intimate partner violence; race, equity, and inclusion; and trauma-informed care.

- Revisions Completed and/or Training Launched
- 24-Hour Preservice for Prospective Caregivers: Completed and being implemented statewide.
- Resource Readiness for Caregivers: This requirement became a rule on January 1,2023.
   Currently, there are 35 courses active in CAPS LMS: 8 self-directed and 27 instructor-led courses.
   Two self-directed courses are in production. OCWTP has also offered a rotating monthly education series in partnership with the Ohio Coalition for the Education of Children with Disabilities (OCECD).
- Caseworker Core 2.0: On June 30, 2023, 16 instructor-led courses and 42 self-directed courses were launched.
- **Supervisor Core 2.0:** On June 30, 2023, 15 instructor-led courses and 24 self-directed courses were launched.
- **Sexual Abuse Intervention Series Revisions:** Revisions to two old courses were finalized in April 2024. The revision makes up a foundation block of 9 courses that are sequenced, of which 6 are self-directed courses (4.8 hours) and 3 are instructor-led courses (14.75 hours). Learners have been able to take the self-directed courses over the past year and will be able to take the entire sequence in May 2024.
- **Tiered Foster Care:** Three external courses are now active in CAPS LMS on priority topics for TFC caregivers. Four *Youth Mental Health First Aid* sessions, a blended course with self-directed and classroom components, have been hosted for TFC caregivers and staff. Two additional external self-directed courses are also available for these caregivers. Two additional caregiver pathways for learning are currently being developed focused on supporting caregivers caring for higherneed children and youth.
- Assessor Redesign: All courses in the redesigned Assessor Series were finalized in March 2024.
   The series includes 34 required courses which are sequenced, of which 18 are self-directed courses and 16 are instructor-led courses. The series will be piloted in May 2024.
- Life Skills Pathway: Eleven (11) courses are approved and available for scheduling, and three (3) outlines are in process. A total of sixteen (16) Instructor-Led sessions have taken place since the June 2023 launch.

**Note:** Courses and activities within the pathway are designed to help resource families gain the necessary knowledge and skills to assist youth skill development, promoting a successful transition to interdependence. When the resource family has completed a pathway course, the adult and youth in their home can work together on skill-building activities based on knowledge and skills from that specific course.

A Training Implementation Work Group comprised of Regional Training Centers (RTCs), ODJFS/DCY, and Ohio's University Consortium for Child and Adult Services (OUCCAS) staff worked collaboratively to ensure the implementation of all revised series.

#### Feedback Loops:

Feedback remains an integral part of OUCCAS's curriculum development and revision. Three groups of reviewers with diverse lenses participate in reviews – a panel of Race Equity and Inclusion (REI) consultants, Curriculum Advisory Groups (CAG), and Youth with Lived Experience.

Internal stakeholders and external stakeholders (representatives from the state's regional training centers, Public Children Services Association of Ohio, and OCWTP steering committee members) receive regular updates through various means, including status reports, progress updates at regularly scheduled meetings, and participation in work teams and advisory committees.

Strategy 3: Establish and provide a common foundation for effective assessment and service delivery through intensive CAPMIS training and coaching (assessment of safety, assessment of strengths and needs, safety planning and case planning) in support of CFSR PIP strategies.

**Benchmark 1:** Develop a tailored plan to provide training, coaching, and consultation to the participating CFSR county administrators, supervisors, and caseworkers on the Assessing Safety, Safety Planning, Assessing Strengths and Needs, Case Planning.

Timeframe: Years 1-2 (Completed)

**Benchmark 2:** Ongoing trainer recruitment, approval, observation, and development for standardized caseworker and CAPMIS trainings. Recruit, approve and certify 5 new CAPMIS Trainer/Coaches for approval by September 1, 2019, and an additional 5 by December 1, 2019.

**Timeframe:** Year 1 (*Completed*)

### Final Progress Report:

Both benchmarks were achieved. The child protection policy team met individually with each of the 15 CFSR counties to determine their county needs to improve the assessment of safety and risk, CAPMIS Infusion and to plan for CAPMIS training. The CPS unit worked with a lead in each county to schedule the CAPMIS series of four (4) trainings with all staff. The CPS policy team then provided the CAPMIS series to agency administrators (senior leaders, supervisors and, in smaller agencies, lead workers) and OCWTP CAPMIS mastery level trainers followed with training the remaining staff. In order to provide counties with a training setting that matched their staffing and pandemic needs safely, the CPS policy staff worked with OCWTP to modify the CAPMIS series to occur virtually via Zoom with a live CAPMIS mastery level trainer.

The vendor for the Ohio Child Welfare Training Program was able to approve new trainers with expertise in CAPMIS during the first year of the Plan.

#### Feedback Loops:

ODJFS/DCY leaders and the CFSR counties met to discuss the CFSR needs and progress on achieving Ohio's PIP goals and benchmarks. CPS policy staff also met with an appointed lead within each PCSA to support any training needs or modifications. PCSA staff were asked to complete training surveys with each session. Counties participate in quarterly CAPMIS Infusion sessions. The CAPMIS Infusion sessions are gatherings of the Assessment and Planning experts from each county. The purpose of these

meetings was to develop a cohort of experts to address challenging practice concerns and develop effective methods of teaching assessment and planning to caseworkers in each agency.

#### Strategy 4: Advance substance abuse training resources through OCWTP.

**Benchmark 1:** Coordinate with Ohio START grants from Cures and Victims of Crimes Act to integrate 10 Ohio START courses into regular OCWTP training offerings to make this training available to all counties through the RTCs and to provide sustainability of these training modules after the grants have been completed.

**Timeframe:** Year 1 ((Completed)

**Benchmark 2:** Ongoing trainer recruitment, approval, observation, and development for standardized caseworker and CAPMIS trainings. Recruit, approve and certify 5 new CAPMIS Trainer/Coaches for approval by September 1, 2019, and an additional 5 by December 1, 2019.

**Timeframe**: Years 1-3 (*Completed*)

### Final Progress Report:

Both benchmarks were achieved. In partnership with the Public Children Services Association of Ohio, the OCWTP provided support to the Ohio START program by administering the training program needed to implement Ohio START. This included provision of training and technical assistance. As a result, Ohio START trainings were integrated into regular OCWTP training offerings. Trainings included the following:

- Child Trauma Screening
- Drug Screening as a Clinical Tool
- Engagement Skills, from Theory to Practice
- Family Team Meetings
- Motivational Interviewing
- Screening and Intervention for Substance Use Disorders (UNCOPE)
- Supporting a Recovery Lifestyle
- Trauma and Addiction: Fire and Ice

Additional Ohio START trainings were developed as Ohio START has continued to expand to include additional counties over the 5 Year period.

- The OCWTP has revised Ohio's core training for new caseworkers to highlight three key practice areas prevalent in child protection cases: substance use, mental health, and intimate partner violence (IPV). Each key practice area has a self-directed, foundational course that provides an overview of the issues and best practices for caseworkers working in any of the three areas. As new caseworkers continue through the series, the key practice areas are reinforced during instructor-led training, allowing them to practice key skills when working with these cases. This means that when learning about case planning, new caseworkers will practice developing case plans specifically related to Substance use.
- When substance use is identified as a learning need, the OCWTP works to approve and prepare subject matter experts from the area of substance abuse to train in the OCWTP system. Trainers

- represent both the treatment and prevention systems. A content area most recently identified was related to Fetal Alcohol Spectrum Disorder.
- The learning catalog in CAPS LMS currently has 43 courses related to substance use and relapse.

# Objective 3: Learn from QIC-WD projects on recruitment and retention of staff strategies.

Strategy 1: OFC staff will participate in knowledge sharing opportunities with staff from other QIC-WD sites and utilize lessons from the QIC-WD site evaluations and implement strategy(ies) in interested counties.

Benchmark 1: OFC's Site Implementation Manager (SIM) will participate in monthly virtual meetings with the SIMs from the other QIC-WD sites.

**Timeframe:** Years 1-2 (Completed)

Benchmark 2: OFC's SIM, data coordinator, and one county representative will attend annual QIC-WD

all site meetings.

**Timeframe:** Years 1-3 (Completed)

Benchmark 3: OFC staff will review the evaluation reports from all QIC-WD sites. If evidence was found to support the strategies implemented at a site, OFC will share results with agencies and together determine whether the strategy may be appropriate for implementation in Ohio.

**Timeframe:** Years 3-5 (Completed)

Benchmark 4: OFC will begin planning for implementation by assessing needs of interested agencies, selecting sites, and facilitate the training of staff on the selected strategy.

Timeframe: Years 3-5 (Completed)

**Benchmark 5:** OFC will begin implementation of the selected interventions and determine agencies'

ability to ensure the sustainability of the interventions prior to implementing.

**Timeframe:** Years 4-5 (Completed)

#### Final Progress Report:

All benchmarks were completed. Preliminary implications and findings regarding the intervention were shared with all QIC-WD projects sites in August 2022 at the final QIC-WD all sites meeting in Washington DC. All key findings of the QIC-WD program were released and can be accessed at: https://www.gicwd.org/workforce-interventions.

The findings from the other QIC-WD implementation sites were reviewed by the Workforce Committee. The results and links to the key findings were shared with all 88 Ohio counties in a statewide call as well as through written communication. There were no program findings that warranted statewide implementation efforts given the different needs and resource limitations of Ohio's 88 counties. The research and Technical Assistance remains available to all counties wishing to explore implementation. Objective 4: Continue to develop in non-CFSR counties a cohort of expert practitioners to partner in ongoing solution focused efforts of skill building and continuous quality improvement of engagement, assessment, and service delivery. (PIP)

### Strategy 1: OFC will expand the cohort of experts to include non-CFSR counties.

**Benchmark 1:** Expectations for cohort participants will be shared with the remaining counties.

**Timeframe:** Years 3—5 (Completed)

**Benchmark 2:** Expansion counties will identify candidates to participate in the cohort and procedures

for adding new members to the cohort. **Timeframe:** Years 3—5 (Completed)

**Benchmark 3:** OFC will hold quarterly ongoing meetings (statewide, regional, virtual) with the cohort(s)

to assist with the building of assessment and engagement skills.

**Timeframe:** Years 2—5 (Completed)

#### **Final Progress Report:**

All benchmarks were completed. Due to COVID-19, the CAPM Infusion group (cohort group) met virtually starting in July 2020. The July meeting introduced and reviewed the revised *Case Plan Guidance* tool as well as the *Safety Plan Guidance* tool, which was created jointly with CPS Policy and TAS staff. Throughout 2021, the group provided input on their assessment and planning training. The group also served as a forum where CPS Policy could obtain feedback on the revision of the Safety Assessment Tool. The cohort identified the need for continued discussion around identifying progress in applying CAPM skills among CPS caseworkers in the CFSR Counties.

The CAPM Infusion group transitioned to the Supervisor Summits to reinvigorate and grow its membership. The Summits address the need to grow the CAPM Infusion Group and revitalize the work done within that group. The Supervisor Summits allow the training team to continue the critical work around building supports and supportive networks around the CAPM concepts. This cohort of supervisors met four times per year, virtually in the winter and in person for the Spring, Summer, and Fall sessions. The Summits provide an opportunity for Supervisors from the counties in five regions of Ohio to have a real-time dialogue around topics of interest, engage in professional skill building, and enhance the knowledge around CAPM concepts for Supervisors to bolster workforce retention.

Marketing of the Summits occurred through emails sent via CAPS LMS to target populations and through a partnership with the RTCs to share the flyer, which outlined the Summit dates and times and provided an overview of topics for the upcoming Summit. Attendees were encouraged to provide topics of interest for future Summits to ensure the discussions focus on timely areas of interest from their perspective. Attendees receive training hours for attending this four-hour workshop. It is common for Technical Assistance Specialists (TAS) and members of the Statewide Training Coordinators Content Development teams attend to ensure consistent messaging.

The community previously outlined for implementation within CAPS LMS continues to be in the evaluation process. The premise is that the community will allow for information and document sharing and the cohort's ability to post comments and get feedback from office experts and other cohort

members. With this community, supervisors across the state will have access to the information without attending the Summits, thereby making it a learning-rich environment for the cohort. The following Table presents information on activities which occurred during the last year of the 2020-2024 CFSP.

Region	Delivery Method	Date	Number Attended
Southwest: Clark County			
CPS	In-person	April 4, 2023	12
Northeast: NEORTC	In-person	April 6, 2023	29
Central: The State Library of			
Ohio	In-person	April 11, 2023	28
Northwest: Wood County			
JFS	In-person	April 13, 2023	37
Central: The State Library of			
Ohio	In-person	June 29, 2023	15
Southeast: Washington			
County	In-person	July 11, 2023	11
Northwest: Wood County			11
JFS	In-person	August 3, 2023	
Northeast: NEORTC	In-person	July 20, 2023	32
Southwest: Clark County			
CPS	In-person	July 27, 2023	10
Statewide	Virtual	January 30, 2024	55
Statewide	Virtual	February 1, 2024	25

## **ODJFS/DCY PCSA Training Liaison Round Table**

The training team organized and conducted the ODJFS/DCY PCSA Training Liaison Round Table to assist county training staff in exchanging resources and ideas regarding staff onboarding, development, and retention. These gatherings offer essential support for onboarding and networking opportunities to help retain the workforce. Additionally, the members use a Teams channel to share files and engage in interactive dialogue.

Region	<b>Delivery Method</b>	Date	Attendees	Number of Attendee's
			Directors, Supervisors,	
		January 23,	Training Liaisons from	
Statewide	Virtual	2023	PCSAs, RTC staff	43
			Directors, Supervisors,	
			Training Liaisons from	
Statewide	Virtual	April 10, 2023	PCSAs, RTC staff	31
			Directors, Supervisors,	
			Training Liaisons from	
Statewide	Virtual	July 10, 2023	PCSAs, RTC staff	35

Region	<b>Delivery Method</b>	Date	Attendees	Number of Attendee's
			Directors, Supervisors,	
		October 16,	Training Liaisons from	
Statewide	Virtual	2023	PCSAs, RTC staff	47
			Directors, Supervisors,	
			Training Liaisons from	
Statewide	Virtual	January 8, 2024	PCSAs, RTC staff	44

Strategy 2: Provide access to a clinician to assist caseworkers and managers with guidance on addressing multiple issues in family dynamics leading to resolution.

Benchmark 1: Predicated upon the success of this initiative in Ohio's PIP, OFC will work with interested counties to secure expert clinicians to provide consultation on domestic violence, substance abuse, mental health, and other specialized topics.

Timeframe: Years 3-5

Benchmark 2: Once the clinicians are established, clinicians will regularly meet with caseworkers/supervisors to conduct clinical consultation and conduct group coaching.

Timeframe: Years 3-5 (Deleted in Year 3)

# Goal 2: Ensure children are placed in the most appropriate and family-like setting.

Impact: Permanency Outcomes 1 and 2

**Measures of Progress**: Item 10, permanency indicators, comparative data of kinship care to foster care. Reduction of children in foster homes, congregate care and children aging out of foster care without permanency. Increase in use of kinship caregivers.

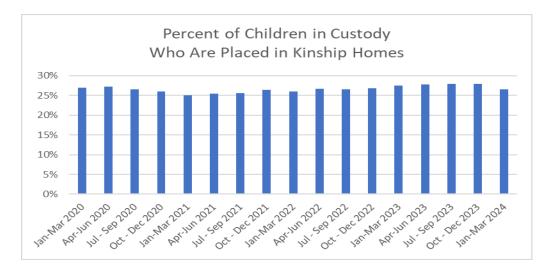
#### **Progress Measures Update:**

<u>CFSR PIP, Item 10</u>: As of the writing of this report, CPOE Stage 12, Phase 2 results thus far indicate that there were 359 applicable cases reviewed for Item 10. Of these, 331 cases were rated as a Strength (92.2%).

Counties/courts participating in the CPOE Stage 12, Phase 2 case review achieved a higher degree of performance for this item than what was achieved during the CFSR Round 3 PIP review. Supervisors/Caseworkers have used Kinnect to Family (formerly 30 Days to Family) to assist in finding families and connections to achieve permanency (Goal 2, Objective 1, Strategy 1).

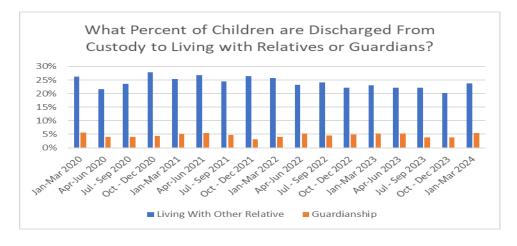
Additionally, some PCSA Ongoing supervisors generate a Relative Placement Report to establish a baseline number of relative placements. This same report is generated quarterly to determine relative placement data to determine improvement (ROM: Foster Care: Key Practice Indicators > Initial Placements with Relatives)

The following figure shows the quarterly percentage of children in custody who are living with their relatives. Quarterly, over 25% of the children in custody are placed with their relatives.



Permanency Indicators: In the February 2024, the Child and Family Services Review (CFSR) Data Profile showed Ohio's Risk-Standardized Performance during the last observation period for Permanency in 12 months (entries) was statistically better than the National Performance (40.6%). For Permanency in 12 months (12-23 months), Permanency in 12 months (24+ months), and Re-entry to foster care Ohio's Risk Standardized Performance was statistically worse than the National Performance. Looking at the Permanency Outcome-Placement Stability revealed that Ohio exceeded the National Performance Standard and did better than the National Performance, achieving a Risk Standardized Performance of 3.02. Work needs to occur to improve performance on Permanency in 12 Months (12-23 months), Permanency in 12 months (24+ months), and Re-entry to foster care.

The following figure shows for children who are discharged from care, the percent who are discharged to their relatives or guardians. The percentage who are discharged to relatives fluctuates slightly with a range of 20% to 28%. The percent of children discharged to guardians is more stable, ranging from 4%-6%.



**Rationale:** Ideally, children should remain in their home with their family of origin if there are no safety concerns and family members are willing to participate in services. However, that goal is sometimes not possible. Research indicates that children's well-being is best served in a safe, stable family environment. Access to their school, community, friends, teams, etc. provides critical support for the child's mental and behavioral health as well and can be best achieved by keeping the children with family. Federal law requires children to be placed in the least restrictive and most family-like setting available. Title IV-E of the Social Security Act requires that states "consider giving preference to an adult relative over a nonrelated caregiver when determining placement for a child, provided that the relative caregiver meets all relevant State child protection standards." For those children who cannot be reunified due to safety and well-being issues, timely permanency is a priority. The availability of legal representation is not always conducive to achieving case outcomes timely, thus educating on least restrictive settings, stable placements, timeliness of hearings and permanency for the child as it relates to the child's and family's specific circumstances is critical.

## **Objective 1: Increase use of kinship care.**

### Strategy 1: Expand the 30 Days to Family Program (PIP)<sup>12</sup>

**Benchmark 1:** Evaluate Ohio's pilot results with a comprehensive study.

Timeframe: Years 1-2 (Completed)

**Benchmark 2:** Expand the capacity in counties currently utilizing the program to increase impact on child permanency. Capacity will be determined following confirmation of new state budget.

**Timeframe:** Years 1-2 (Completed)

Benchmark 3: Implement 30 Days to Family Program in additional counties. Capacity will be

determined following confirmation of new state budget.

Timeframe: Years 2-5 (Completed)

#### Final Progress Report:

All benchmarks were completed. In October 2021, the 30 Days to Family Ohio Program was transformed to Kinnect to Family. This enhanced model reflects model application and programming to support services beyond initial placement in implementation counties. To broaden the scope of their programs and serve more children service expansion occurred using four pathways:

- Diversion- to prevent children from entering foster care.
- Initial Custody to reducing the length of time spent in foster care.
- Ongoing Custody to reduce time spent in foster care and decrease children entering permanent custody of a children services agency.
- Permanent Custody to increase familial connections for children and establish timely permanency.

<sup>&</sup>lt;sup>12</sup> This Strategy is contained under Goal 3, Strategy 1, Option 1 of the CFSR, PIP.

Throughout the 5-year period Kinnect to Family has expanded its services to additional counties. The Kinnect to Family program has implemented and now serves families in the following 30 counties: Allen, Belmont, Brown, Champaign, Clark, Clinton, Cuyahoga, Fairfield, Franklin, Gallia, Hamilton, Hancock, Highland, Jackson, Lorain, Lucas, Marion, Meigs, Montgomery, Perry, Pike, Portage, Sandusky, Stark, Summit, Tuscarawas, Union, Wayne, Williams, Wood. SFY24/25 program expansion efforts will add an additional cohort of counties so that there will be 36+ active Kinnect to Family counties by June 30, 2025.

Current service numbers, as of February 2024, for the Kinnect to Family program include:

- Children served: 2,710 full model
- Placement with kin rate: 61%
- Average case length: 46 days
- Children served with at least on backup caregiver: 56%
- On average, over 100 connections are identified for every child
- Assessment scores (well-being) rose from initial case open to 30 days after conclusion by an average of 26%

A 2023 Evaluation Plan was concluded. A summary of results included:

- Children served by Kinnect to Family were 2.42 times more likely to be placed with kin than children in a comparison group.
- During time in an out-of-home episode children served by Kinnect to Family spent a significantly larger percentage of their time with kin, relative to the comparison group.
- Children served by Kinnect to Family had an increased likelihood of achieving custody as permanency and decreased likelihood of adoption than children in the comparison group.

Additional outreach and expansion efforts included Kinnect initiating and providing SEEK (Search, Engage, Explore, Kinnect) trainings which started in January 2022 and continue into 2024. These trainings are statewide-regionally approached training for PCSA staff available in-person, or remote in either full day or 3-hour sessions. Post-training survey results reflected the following:

Over 90% of attendees stated that SEEK training significantly increased their:

- Knowledge in areas of family finding tools and resources.
- Meaningful engagement strategies to uncover family supports.
- Solutions to barriers for connecting children with their kin.

Preparation of new SEEK curriculums, outlines, learning objectives, and session summaries is ongoing.

Below is a listing of recruitment activities Kinnect completed during the last year of the 2020-2024 CFSP:

- Discussed the Kinnect to Family model at the annual PCSAO's Exec's meeting.
- Presented on Kinnect to Family through the ODJFS updates.
- Held informational meetings for those PCSAs that expressed interest.

- Communicated directly with agencies that had expressed interest in the model, including holding exploration meetings with those counties.
- Sent several communications to PCSA Directors.
- Partnered with Integrated Services for connection referrals to SE county contacts.
- Presented at Ohio START Summit, PCSAO Annual Conference, Ohio CASA Conference, Appalachian Coalition Symposium, Kempe, Child Welfare League of America Conference, UC Davis California Kin-Culture Convening, and Colorado Statewide Family Engagement Summit.
- Hosted quarterly regional and statewide Learning Communities.
- Provided Stakeholder Training Sessions to PCSA staff, individual county judicial teams, and community/provider professionals.
- Established "Fidelity Friday" which is an email that goes out to county partners with reminders of how to meet the full fidelity of the program model.
- "Ted Talk Tuesday" is a Coaching call with sites to invite feedback and discussion.

Kinnect has been striving to implement Diversity, Equity & Inclusion (DEI) practices within their trainings, organization, work, and partnerships. Examples of their efforts to incorporate DEI include revising policies, documents, and trainings with the support of the Center for the Study of Social Policy to ensure they align with DEI principles. Specific efforts include using Dare to Lead to engage staff and develop operational tools. Staff participate in onboarding trainings focused on deepening understanding of systemic inequities in child welfare throughout their tenure at Kinnect. Kinnect is dedicated to ongoing efforts as this is an evolving process with new practices being explored.

Additional efforts include the establishment of a Judicial Peer Network Group (Kin-First Courtrooms). This Group goal was to establish a network across counties and their judicial partners and develop a multicomponent approach to impacting judicial influences on kinship work and placement with kinship caregivers. An initial convening occurred in January 2023 with a second annual KinFirst courtroom in January 2024. Developed components include: a resource library, learning opportunities (trainings), and mentoring.

Encouraging Kinnect to Family enhanced model results along with continued program efforts will lead to continued Kinnect to Family program expansion and ensuring Ohio continues to be a leader in child welfare policies and practices.

#### Feedback Loops:

Kinnect has ongoing standing coaching and technical assistance feedback loops with Kinnect to Family Specialists. Kinnect to Family also operates with a Statewide Advisory Council which includes Kinnect staff, ODJFS/DCY and PCSAs. Their purpose is to enhance Kinnect to Family implementation and develop broader Kin First Ohio work. Kinnect is also utilizing supports from Casey Family Programs and CSSP to assist with future planning of expanded eligibility. These processes will be ongoing.

## Objective 2: Remove barriers to licensing relatives as foster family homes.

Strategy 1: Revise Ohio's foster care licensing standards to relieve licensure barriers for relative caregivers and all foster care applicants.

**Benchmark 1:** Review federal foster care licensing model standards.

Timeframe: Year 1 (Completed)

Benchmark 2: Alignment of Ohio's licensing standards with most federal foster care licensing

standards.

Timeframe: Years 1-2 (Completed)

Benchmark 3: Increase agency training on the availability of non-safety waivers for relatives applying

for licensure.

Timeframe: Years 1-2 (Completed)

Benchmark 4: Release procedure letter to share waiver types and instructions on how to submit

requests for waivers.

**Timeframe:** Years 1-2 (Completed)

## Final Progress Report:

All benchmarks were achieved. The following table contains information on rules which were amended and went into effect on June 15, 2020 to reflect Ohio's alignment of licensing standards with the federal model standards.

Rule Number	Title of Rule
5101:2-5-09	Personnel and Prohibited Convictions for Employment
5101:2-5-09.1	Criminal Records Check Required for Certain Prospective Employees and Certified
	Foster Caregivers
5101:2-5-18	Waivers and Variances
5101:2-5-20	Initial Application and Completion of the Foster Care Homestudy
5101:2-5-24	Foster Home Recertifications
5101:2-5-32	Occupancy Limitations and Accessibility
5101:2-5-33	Foster Caregiver Preplacement and Continuing Training
5101:2-7-02	General Requirements for Foster Caregivers and Applicants
5101:2-7-10	Care of a Foster Child Under Age Two
5101:2-7-12	Site and Safety Requirements for a Foster Home
5101:2-7-15	Transportation

#### Feedback Loops:

Public and private agency assessors, Ohio Child Welfare Training Program staff, foster and adoptive parents, and ODJFS staff from foster care licensing and policy participated in a workgroup to review the federal foster care licensing model standards. Recommendations made by these stakeholders resulted in acceptance of the recommendations by the Family First Leadership Council. Throughout the process different stakeholders were involved in reviewing and assisting in implementation of the rules.

## Objective 3: Improve use of assessments in guiding placement decisions.

Strategy 1: Work in collaboration with state and local partners to expand options for family-based treatment foster care that are more appropriately aligned with the various needs and challenges of children requiring placement.

**Benchmark 1:** Research best practices and other states foster care "levels" including the HUB model of foster care and the Care Portal system.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Partner in convening stakeholders to develop a draft plan that will work in conjunction with Ohio's FFPSA implementation plan to ensure appropriate levels of care and options for all children in need of placement.

Timeframe: Years 1-3 (Completed)

#### Final Progress Report:

The two benchmarks were achieved. Research on best practices and foster care levels of care was completed in conjunction with the PCSAO in 2019 by a group of stakeholders assembled by the PCSAO and the Office of Children Services Transformation. Research included a review of tiered treatment foster care practices in the following states: California, Colorado, Kentucky, Michigan, Minnesota, Pennsylvania, Tennessee, Texas. Virginia, Wisconsin, and West Virginia. Biweekly internal meetings were held throughout 2021 to plan for tiered treatment foster care. The internal workgroup was divided into three workgroups to work on the implementation of the tiers. There was an agency readiness workgroup, a policy and practice workgroup, and a recruitment and retention workgroup. The agency readiness workgroup issued a survey to all foster care agency directors requesting information about their ability to provide increased and ongoing supports and services to their foster caregivers. The policy workgroup developed a base document leveling out the tiers in terms of child characteristics and caregiver supports. This document served as the foundation of the policy and programmatic work. The recruitment and retention workgroup focused on research related to successful recruitment campaigns and in related retention strategies. In June 2021, the internal tiered foster care workgroup reviewed the results of the agency readiness survey. The survey included responses from 61 PCSAs and 42 private agencies. The survey results provided detailed information from agencies on what they provide to their current treatment foster families around in-home therapeutic supports, peer to peer supports and respite services. The results provided the framework to begin collaboration with external stakeholders.

# Strategy 2: Level of Care Assessment Tool to ensure children's needs are identified and they are placed in appropriate settings.

**Benchmark 1:** Convene a group to review level of care tools and assessments and select tool(s) for statewide use.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Develop and implement a statewide rollout plan for new level of care tool and/or

assessment.

**Timeframe:** Years 2-4 (*Completed*)

**Benchmark 3:** Monitor and evaluate effectiveness.

Timeframe: Years 2-5 (Completed)

## Final Progress Report:

All benchmarks were completed. The Ohio Children's Initiative Child and Adolescent Needs and Strengths Tool (CANS) is the chosen cross-system tool utilized in Ohio and identified as the tool to be used when assessing a child or youth's placement needs. A wide variety of providers in Ohio are now using this tool for informing care planning and decision-making for children and adolescents with behavioral health needs including children being placed into Qualified Residential Treatment Programs (QRTP). Using the same assessment tool will allow collaboration across child serving systems in Ohio. Information from each completed CANS assessment for foster care will be recorded in the CANS IT system and in the future will be viewable in Ohio State Automated Child Welfare Information System (Ohio SACWIS) making the results accessible to team members and continuing to promote cross system collaboration.

The work began by creating the foundational structure needed to support the use of the CANS. It continues to be necessary to work on enhancing training and support services to better meet the variety of challenging needs of children entering the custody of PCSAs and Title IV-E agencies including those who may be stepping down from congregate care or entering foster care with higher levels of need. The Tiered Foster Care (TFC) initiative in Ohio aims to better align children's characteristics and unique needs with caregivers' skills and abilities, with consistent training, supports, and payment for caregivers and placement agencies. In October 2021, two stakeholder workgroups were created and began meeting. Members of these workgroups represent foster youth, caregivers, PCSAs, and private agencies. The workgroups reviewed and strengthened the rules, tools, and policies for TFC implementation.

It was also necessary to increase the foster home capacity in Ohio including those homes that accept youth with higher levels of need. This led to the creation of a statewide marketing and recruitment program. The Adoption and Resource Home Recruitment Program is a statewide data driven marketing campaign which includes both digital and print ads. This program provides educational opportunities for both private and public child placing agencies to assist them in leveraging the statewide campaign in the local recruitment of families.

The ODJFS/DCY is working with the John Praed Foundation to assist in development of a CANS Decision Support Model (DSM) for foster care in Ohio. A draft version of the CANS DSM for foster care aged youth 6 and older was provided in September of 2022. A draft version of the CANS DSM for foster care youth aged 0-5 was provided in February 2023. The two DSMs created for foster care in Ohio are currently being tested and their incorporation into a standardized placement process is being evaluated.

The second phase of this work involved a small-scale pilot process created for TFC with a structure that provided for testing the tools and developing procedures and policies while also allowing for ongoing evaluation of child and caregiver needs. The pilot provided the ability to gain information on possible system and budgetary impacts while identifying supports, services, and training needs of caregivers. The small-scale pilot began in September of 2022 and concluded youth enrollment in November of

2023. The small-scale pilot included youth in the custody of three major metro PCSAs and placed with one of six recommending agencies. A cohort of 120 youth across the ages 13-18 was created to evaluate the impact of the TFC structure and process on child outcomes and agency systems.

The current phase of the TFC initiative, phase three, began in late 2023 and will serve to broaden this evaluation and feedback opportunities from PCSAs across the state. This phase includes an upcoming random sample evaluation which will involve a selection of children ages 0-18 from a broader range of PCSAs. This larger scale evaluation will incorporate the use of both versions of the CANS DSM created for foster care. This phase will also include a treatment foster home pilot modeled off work currently being completed by PCSAs in Northwest Ohio that is focused on the recruitment and support of new treatment level foster homes.

The three TFC initiative periods will be used to compile data to ensure the structure that has been created meets the needs of children and youth in Ohio. The random sample evaluation period will be followed by an evaluation and adjustment period prior to the identification of a plan for statewide roll out of the TFC process.

A new pilot began in May of 2024 that was created by a team of PCSAs in the Northwest region of Ohio. This Northwest team created a regional partnership between four counties which has focused on recruiting and supporting treatment foster homes willing to accept and support higher acuity children with additional one-on-one support, on-call 24/7 casework, counseling for crisis response, training, and marketing. This pilot utilizes a level of care tool which is specific to each region and will allow a comparison of tools with broadened feedback opportunities.

During the third phase of the TFC initiative, we are continuing to test and evaluate the CANS DSMs developed for foster care. DCY is monitoring for child outcomes by evaluating patterns in placement, including placement stability and placement length of stay. Additionally, resource caregiver and youth experience were incorporated using surveys conducted and evaluated for the small-scale pilot cohort youth.

## Feedback Loops:

Critical to addressing this strategy was to involve representatives from ODJFS/DCCY, the Ohio Department of Medicaid, the Ohio Department of Mental Health and Addiction Services, the Ohio Department of Youth Services, and the Ohio Department of Developmental Disabilities, in addition to public and private agency representatives. These representatives had extensive knowledge about Level of Care Assessment Tools and would be impacted by the decision regarding the Level of Care Tool(s) that would be selected.

**Objective 4: Improve quality of congregate care.** 

Strategy 1: Evaluate current congregate care programs to determine right-sizing of congregate care.

**Benchmark 1:** Evaluate QRTP readiness survey data and identify opportunities to target agencies (by level of readiness) and identify needs to address FFPSA requirements.

**Timeframe:** Years 1-2 (*Completed*)

**Benchmark 2:** Evaluate existing group home models, level of care assessment tools and trauma informed care models, clinical and nursing staff coverage agreements, family engagement efforts, discharge planning and aftercare supports and update OAC definitions.

Timeframe: Year 1 (Completed)

#### Final Progress Report:

Both Benchmarks were achieved. The QRTP subcommittee developed an Agency Level of Readiness Survey which was designed to identify a residential agency's readiness with the following five QRTP requirements: (1) accreditation; (2) treatment model; (3) clinical and nursing staff; (4) family engagement and outreach; and (5) aftercare planning. Agencies/licensing staff rated each requirement as either ready, somewhat ready, or not ready.

The survey was completed for all certified ODJFS and Ohio Department of Mental Health and Addiction Services (OhioMHAS) child-serving residential agencies. Results of the survey provided data related to the percentage of agencies meeting specific QRTP requirements and identified the needs of others. Survey results were used to assist ODJFS in focusing on readiness activities to support agency compliance with QRTP requirements.

# Strategy 2: Assess congregate care workforce and development needs for Trauma Informed Care, and treatment model(s).

**Benchmark 1:** Analyze data on survey results collected in early 2019.

Timeframe: Year 1 (Completed)

Benchmark 2: Provide guidance and technical assistance on training requirements and obtaining

training.

**Timeframe:** Years 1-5 (*Completed*)

#### Final Progress Report:

Both benchmarks were achieved. As part of Ohio's compliance with the Family First Prevention Services Act, Ohio began phasing in the following Qualified Residential Treatment Programs (QRTP) requirements for all child-serving residential facilities on October 1, 2020.

- QRTPs must have a trauma-informed treatment model designed to address the needs and clinical needs as appropriate, of children with serious emotional or behavioral disorders or disturbances and can implement the necessary treatment identified in the child's assessment.
- QRTPs shall have a trauma-informed approach in which all employees, volunteers, interns, and independent contractors within a QRTP must be trained in that trauma-informed approach.

To date, there are 142 certified QRTPs. ODJFS/DCY continues to work in collaboration with representatives from the Ohio Department of Mental Health and Addiction Services (OhioMHAS) and

members of the Statewide Trauma Informed Collaborative (Collaborative) to enhance and expand trauma practices and training opportunities for staff working within Ohio's approximately 250 child-serving congregate care sites. The Collaborative met quarterly during this timeframe to review submitted applications to add established evidence-based trauma treatment models to the statewide list. Over this reporting period, twenty-eight models are on the approved list. Most models appear on the National Child Traumatic Stress Network (NCTSN) Treatment Intervention list of California Evidence-Based Clearinghouse for Child Welfare.

ODJFS/DCY has implemented a voluntary proactive monitoring process to assist QRTPs in fully implementing trauma treatment models and trauma-informed approaches within the organizations. The on-site or virtual proactive monitoring process is designed to support and assist in effective implementation of trauma treatment models and informed approaches leading to improved outcomes for children, youth, families, and staff. The proactive process is not to determine compliance with QRTP requirements, rather to provide support and ongoing technical assistance. QRTPs are encouraged to participate in the proactive monitoring process to enhance a trauma-informed approach in responding to children, youth, and family needs. In addition, communications are sent to each QRTP with accreditation expiration reminders to support them in their efforts to maintain accreditation requirements.

In response to the 2019 Children Services Transformation Recommendation, "Develop trauma-informed training for all involved in the system, including resource families, caseworkers, agency staff, courts, service providers, mandated reporters (such as teachers and counselors), kinship caregivers, and parents", ODJFS/DCY added a dedicated tile to the public facing ODJFS webpage focused on inviting users to the "Trauma-Informed Care" site. (Trauma Informed Care | Job and Family Services (ohio.gov). In this site, users learn about the CST Recommendation and are afforded several resources, including those on trauma and resilience, the Ohio Trauma-Informed Care Certificate, and trainings across all disciplines focused on trauma informed care. The website resource is linked to the: Center of Disease Control, Ohio Mental Health and Addiction Services, Ohio Department of Developmental Disabilities, Ohio Department of Education, Substance Abuse and Mental Health Service Administration, The National Child Traumatic Stress Network, The California Evidence-Based Clearinghouse for Child Welfare, Academy on Violence & Abuse, PACEs Connection, ACEs Too High, and HOPE: Health Outcomes From Positive Experiences.

A Trauma Training Directory was created as one resource for QRTPs, children services and other stakeholder groups to use to meet the training requirements for trauma treatment models and trauma-informed approaches and other professional training requirements across multiple professional disciplines. The training directory currently supports 80 online virtual trainings (most trainings are free), identifies core competencies identified in each training, most offer CEUs, and the development of a "transfer of learning" resource to assist trainees in applying the knowledge, skills, and attitudes learned in training and the degree to which the new learning is maintained over time.

In December 2020, ODJFS' Offices of Family Assistance and Families and Children, in partnership with the Ohio Department of Mental Health and Addiction Services (OhioMHAS) and the Ohio Child Care Resource and Referral Association (OCCRRA) implemented an Ohio Trauma-Informed Care Certificate

program. This certificate program is designed to be a professional development tool to move staff from being trauma aware to trauma competent. The certificate demonstrates knowledge and development in trauma competencies adopted by the Family First Leadership Advisory Committee. The certificate is valid for a period of two years. Individuals can renew their current level certificate or apply for a higher-level certificate through their OCCRRA, Ohio Professional Registry (OPR) account. The renewal process can begin 90 days prior to a TIC certificate expiration. Persons who already have a TIC certificate will receive an email notification from OCCRRA about renewing the certificate approximately 90 days prior to the expiration date of the current certificate. Certificates renewed at the same level will be valid for a period of two years. On average, 2,000, initial or renewal certificates are issued monthly including 500 trauma aware, 1,000 trauma informed, and 500 trauma competent certificates through this training program. Each of the eLearning trainings have been crossed walked against trauma competencies adopted by the Family First Leadership Advisory Committee.

During this review period, ODJFS/DCY launched "QRTP Infosheets". The thirteen published to date include: Foundations of a Trauma-Informed Approach; Trauma Treatment; Trauma Screening and Assessment; A Culturally Responsive Trauma-Informed Approach; Trauma and Individuals with Intellectual/ Developmental Disabilities; Family Trauma; Trauma and Adolescent Substance Use Disorder; Trauma and Children and Youth Mental Health; Trauma Competent Care Collaboratives; Intergenerational Trauma; Preventing ACEs and Trauma; TIC Environments; Being Good to Ourselves; Parenting Children of Trauma; Parenting Past Trauma, and Trauma-Informed Supervision. The Infosheets have been repurposed and are now the "Trauma Informed Care Series" going out to a much broader audience than congregate care facilities/QRTPs. QRTP Infosheets are stored on the public facing website and the Ohio Certification and Licensing Management (OCALM) community user page and the new Trauma Informed Care Series are published through DCY Tuesday Times webpage.

## Feedback Loops:

To appropriately represent all populations, ODJFS/DCY partnered with representatives from: Public Children Service Agencies; Private Child Serving Agencies; Children's Residential Centers; Ohio Mental Health and Addiction Services; Ohio Department of Developmental Disabilities; and the Ohio Department of Medicaid. Foster parents, kinship parents; and adults with lived experience as youth and parents involved with the child welfare system also participated on the workgroups.

## Objective 5: Timely background checks for all personnel/staff working in congregate care.

Strategy 1: Continue requiring agencies to submit criminal records checks on a quarterly basis to licensing specialists for monitoring and corrective action.

**Benchmark 1:** Quarterly submissions will continue to be due on the last business day of the quarter. **Timeframe:** Years 1-5 (*Completed*)

#### Final Progress Report:

Since 1993, section 2151.86 of the Ohio Revised Code (ORC) has required any entity that employs persons to be responsible for a child's care in out-of-home care to conduct criminal records checks for public and private agency childcare staff prior to hire. Ohio Administrative Code rules 5101:2-5-09, 5101:2-5-09.1 and 5101:2-48-09 identify the frequency and manner in which criminal records checks are to be conducted. All criminal records checks must be conducted using section 2151.86 of the ORC as the reason for fingerprinted.

ODJFS implemented an electronic submission of criminal background checks using the KOFAX system on January 5, 2017, for all agencies. An initial phase in was conducted over several months, and agencies continue to submit criminal background checks quarterly for compliance review by Licensing Staff. Licensing Specialists continue to monitor these quarterly submissions. In October 2022, ODJFS established a foster care licensing unit of five specialists and one manager to review, process and monitor quarterly submitted criminal background checks.

In the period since ODJFS/DCY implemented electronic submission of all criminal checks for public and private agency childcare staff, and foster and/or adoptive parents and applicants, 81,736 criminal checks have been submitted through April 1, 2024. The number of criminal checks processed during this time was 69,563 and 91% were found compliant. Of those, 8,583 were submitted between May 1, 2023-May 1, 2023, and 6,982 criminal checks processed were compliant. Criminal checks identified as non-compliant were cited and the agencies affiliated with the individuals with the non-compliant criminal checks were either issued Technical Assistance or required to complete a Corrective Action Plan.

#### Feedback Loops:

ODJFS proposed language in the 2024-2025 state biennium budget to establish statutory authority for ODJFS to directly receive BCI/FBI background check results for the purpose of determining eligibility, expediting approvals of background checks, and supporting agencies in more timely hiring opportunities and monitoring prior to hire. However, this proposal was not approved within the 2024-2025 state biennium budget. As a result, ODJFS/DCY is currently designing a new licensing and monitoring system for providers to submit their BCI/FBI results, expediting: (1) submissions to ODJFS/DCY and (2) assessment for compliance.

Strategy 2: Develop a reporting mechanism within the Ohio Certification and Licensing Monitoring system (OCALM) to measure progress with criminal record check requirements.

**Benchmark 1:** The BFCL will generate a report once per quarter to identify trends in compliance with criminal record check requirements. Licensing specialists will provide technical assistance to agencies on an individual and collective basis to identify most frequent noncompliance areas.

**Timeframe:** Years 1-5 (Completed)

## Final Progress Report:

This benchmark has been achieved. The Ohio Certification and Licensing Monitoring system (OCALM) provides a complaint workflow which allows licensing staff to incorporate all citations for criminal record check requirements found to be noncompliant with state and federal rules. The OCALM system allows the BFCL to run reports specific to the number and type of citations related to criminal record check requirements on a quarterly basis. Reports can be utilized to identify trends in noncompliance.

In addition, ODJFS/DCY is developing a new system, Ohio Certification for Agencies and Families (OCAF), to provide more timely submission, assessment, and available data for background check monitoring.

Under the creation of the DCY, the newly created Division of Regulatory Compliance Bureau of Quality Assurance will have the capacity to work directly with systems and data reporting to provide more detailed reporting and collaborate with Licensing Staff and agencies to discuss trends and provide feedback.

Strategy 3: ODJFS will seek changes to the Ohio Revised Code and Ohio Administrative Code to reflect new criminal record check requirements for agency employees and administrators. ODJFS will seek changes to:

**Benchmark 1:** Require a search or report, or request for a search, of certain prospective child welfare officers and administrators in the Uniform Statewide Automated Child Welfare Information System (SACWIS), the System for Award Management, the Findings for Recovery, and the U.S. Department of Justice National Sex Offender website. (*Completed Year 1*)

**Benchmark 2:** Require a search of prospective foster and adoptive parents and all persons 18 years old or older residing with the prospective foster and adoptive parents, to be conducted in the National Sex Offender database.

**Timeframe:** Years 1-2\* (Completed Year 1)

**Benchmark 3:** Requires a search of prospective staff of institutions or associations to be conducted in the National Sex Offender database and Ohio SACWIS.

Timeframe: Years 1-2\* (Completed Year 1)

**Benchmark 4:** Grants the Director of ODJFS authority to adopt rules to implement and execute the

background check expansion.

Timeframe: Years 1-2\* (Completed Year 1)

#### Final Progress Report:

House Bill 166 of the 133rd General Assembly enacted the following changes to Sec. 5103.037 and Sec. 5103.0310 of the Ohio Revised Code to comply with the provisions of PL 115-123, the Family First Prevention Services Act (FFPSA).

#### Feedback Loops:

ODJFS worked with the Office of Legal and Acquisition Services and the Office of Legislation to ensure Ohio was in compliance with the new requirements regarding background checks as a result of changes to the Social Security Act, as amended by Public Law 115-123.

Objective 6: Improve quality of legal representation in abuse, neglect, and dependency cases.

Strategy 1: Provide the claiming mechanism for these costs to county directors and fiscal staff as well as the Title IV-E Juvenile Courts.

**Benchmark 1:** Develop fiscal procedures for claiming for PCSAs and Title IV-E Juvenile Courts.

**Timeframe:** Years 1-2 (*Completed*)

Benchmark 2: Conduct statewide webinar and provide technical assistance to support proper

claiming.

Timeframe: Years 1-2) (Completed)

#### Final Progress Report:

Both benchmarks were achieved. The ODJFS, Office of Families and Children worked with the ODJFS, Office of Fiscal and Monitoring Services to create coding for the PCSAs and Title IV-E Juvenile Courts to claim Title IV-E expenses for legal representation. This has been designed to differentiate between legal representation costs for children in out of home care as well as those at imminent risk of removal. Agencies were able to claim for these expenses as of July 1, 2020.

A webinar was presented on August 11, 2020, to provide detailed information on the types of activities that can be claimed as well as how to record expenditure and activities pertaining to legal representation.

#### Feedback Loops:

County agencies have expressed their appreciation about the opportunity to receive reimbursement for these expenses.

Strategy 2: In collaboration with the Supreme Court of Ohio's Court Improvement Project, pilot parent and child representation programs to implement best practices for attorneys representing parties in cases.<sup>13</sup>

**Benchmark 1:** Identify an established practice model with data supporting the model's effectiveness towards achieving permanency.

Timeframe: Year 1-2 (Completed)

**Benchmark 2:** Identify court, clinics, or agencies that will participate in pilot and begin training on

model.

Timeframe: Years 1-2 (Completed)

**Benchmark 3:** Begin implementation of the model in cases and provide technical assistance to the sites and develop evaluation protocol.

Timeframe: Years 2-3 (Completed)

**Benchmark 4:** Continue implementation while beginning to evaluate pilot's effectiveness and explore sustainability to increase pilot participation and eventual rollout.

Timeframe: Years 3-5 (Completed)

**Benchmark 5:** In cooperation with Sub-committee on Child Abuse, Neglect and Dependency (CAND), identify strategies to increase scale of pilot, if effective.

**Timeframe:** Years 4-5 (Completed)

**Benchmark 6:** Accountability to the sub-committee on CAND as established by their protocol.

**Timeframe:** Years 1-5 (Completed)

# Final Progress Report:

All benchmarks were achieved. The established practice model chosen by the Supreme Court of Ohio, in collaboration with ODJFS, was the Cornerstone Model from The Center for Family Representation. The Cornerstone Model is an interdisciplinary approach to working with families where an attorney is paired with a social worker. The model supports family reunification by devoting intensive advocacy during a case in four areas: placement, services, family conferences, and parental visitation. The legal basis for Cornerstone is reasonable efforts, state dependency statutes, and state regulations.

In May of 2021, the Supreme Court of Ohio released a competitive request for proposals for multidisciplinary and pre-petition legal representation pilots. Pilot Grant Awards were awarded to the following Juvenile Courts/Public Defenders Offices:

- Summit County Juvenile Court
- Wayne County Juvenile Court
- Cuyahoga Public Defenders Office
- Clark County Juvenile Court
- Stark County Juvenile Court
- Erie Public Defenders Office

The pilot just began its third year of implementation. Over the last two years, the pilots have served over 250 families with 600 children. During the second year, pilots received a total of 225 referrals. Of

<sup>&</sup>lt;sup>13</sup> This Strategy is contained under Goal 4, Strategy 2, Option 3 of the CFSR, PIP.

those referrals, 133 resulted in enrollment. Reasons for referral included: truancy (19%), mental health needs (16%), substance use (15%), domestic violence (12%), and lack of housing (12%). Pilots also received a total of 91 referrals for a variety of other legal and non-legal reasons, including physical health concerns, medical neglect allegations, utility shutoff, custody and visitation matters, caregiver incarceration, and caregiver death. Pilots closed 104 client cases. Of these cases, 64% were closed after clients completed the program successfully and resolved their case. In 22% of cases, clients stopped responding. In three cases, pilot staff terminated services with clients for reasons other than the provided categories. In two of these cases, the pilot staff determined that they could not be of further assistance. The client in the third case was transferred to a different court-operated program. Other reasons for case closure (11%) include courts granting legal custody to a relative caregiver or the PCSA, families leaving the jurisdiction, and inability to avoid a formal court filing. Few clients experienced deeper penetration into the child welfare system due to abuse, neglect, or dependency (AND) allegations. Eight clients (4%) had subsequent abuse, neglect, dependency (AND) referrals after enrollment in a pilot program, and six clients (3%) had allegations that were substantiated. Nine clients (5%) had children enter foster care after enrollment. Of the 145 pre-petition clients served in Year 2, 11 cases (8%) progressed to a formal filing in juvenile court. Of the 54 post-petition clients, 13 clients (24%) were reunified with one or more children after program enrollment.

The scale of the pilot has not been increased since 2021. ODJFS/DCY has identified the Title IV-E Legal Representation Reimbursement as a potential source of funds to enhance and expand the pilot. Ohio expects to begin drawing down funds in July 2024. The Child Abuse Neglect and Dependency (CAND) sub-committee will continue to meet quarterly to review pilot progress. The committee agreed with the decision not to expand beyond the existing six pilot sites, but to consider leveraging Title IV-E funds if they become available.

#### Objective 7: Provision of timely legal permanency for families and children.

# Strategy 1: Review current statutes and practices to identify if Supreme Court time standards may be reduced.

**Benchmark 1:** Convene child welfare system (PCSAs, courts, stakeholders) to share values, data, and drivers of outcomes that courts and child welfare agencies can use to make informed decisions, manage operations, monitor performance, and make systemic changes to improve outcomes for children and families.

**Timeframe:** Years 1-5 (*Completed*)

Benchmark 2: Recommendations put forth to the Supreme Court of Ohio, based upon the review.

**Timeframe:** Years 1-3 (*Completed*)

#### Final Progress Report:

Both benchmarks were achieved. During the five-year period a variety of methods were employed to conduct reviews of current statutes and practices to identify if Supreme Court time standards may be reduced. These included the following:

- As a first step, held bi-weekly meetings with SCO data analysts, Children's Justice Act (CJA) and Court Improvement Program C(IP) staff to review existing data and sources.
- Distributed a survey to courts and PCSAs to request feedback and recommendations regarding the effectiveness of the permanency docket quarterly report.
- Dr. Summers conducted three rounds of the quality hearing study with select Juvenile Courts.
- The Supreme Court of Ohio CIP hosted the <u>Summit on Children</u>. The Summit was an
  interdisciplinary training where county-based teams were convened to learn about national
  best practices and develop a customized action plan for enhancing their local practices to
  improve outcomes for Ohio's children and families.

During the final year of the 2020-2024 CFSP, a Policy Workgroup was convened to review select Ohio Administrative Code (OAC) rules contained in Chapter 36 of the OAC. In addition to reviewing rules, the workgroup reviewed statutes and policy, provided comments or suggestions electronically, and then had an open discussion about the rule and any changes needed. The workgroup consisted of 55 professionals from PCSAO, PCSAs from all over the state in various size counties and various levels of representation from workers, supervisors to directors, state policy staff, SACWIS staff, and a DCY attorney. There were 55 total members (25 internal members, 30 external members) and 18 Chapter 36 workgroup meetings were held from March 27, 2023, to January 29, 2024. A follow-up meeting with PCSAO was held on March 22, 2024.

The categories of rules reviewed included: Intake and screening, Lead agency, Intra Familial CAN, Specialized Cases, Stranger Danger, Deserted Child- Safe Have, Disabled Infant, Third Party, Dependency, Family in Need of Services, Extension Waiving, Cross-Referral, PSA, Alternative Response, Safety Assessment, Safety Plan, Family Assessment. Two areas had specific decisions made by DCY policy after consulting with legal and leadership and input from the workgroup. These included: Prevention Referrals and Child Fatalities.

## **Prevention Referrals**

- Language was added to OAC 5101:2-36-01 to advise of the PCSA's ability to refer screened-out intakes to an agency providing prevention services.
- <u>Family, Children and Adult Services Manual Procedure Letter 412</u> was published on September 29, 2023 to provide information and guidance on the statutory changes included in HB 33. The department is working on additional guidance or clarity needed relating to questions received from counties specific to the contract piece under the prevention referrals section.

#### **Child Fatalities**

- Making changes to the Child Fatality Review Process and joined the National Partnership for Child Safety (NPCS), to improve efforts in child safety and prevent child maltreatment fatalities.
- A new tool is being used to review child fatalities which is specifically designed for use in reviewing fatalities or serious incidents.

With the addition of a senior staff attorney, there was availability for the policy team to request a legal review from an attorney. During this year, the policy team requested legal reviews on the following

issues: jurisdiction between PCSAs and courts, Comprehensive Addiction and Recovery Act (CARA), and pre-screening collateral contacts. These legal reviews were then used to navigate various requests from PCSAs or stakeholders regarding what is within the law or not aligned with current statute or federal guidance.

# Strategy 2: Develop a system to appoint council to advocate for parents and/or children prior to a formal filing in court.

**Benchmark 1:** Collaborate with the Supreme Court of Ohio, Ohio Public Defenders, Ohio Legal Aid, and Ohio universities with Law Schools, CASA, and other stake holders to identify system to appoint representation prior to the formal filing in court.

Timeframe: Years 1-2 (Completed)

**Benchmark 2:** Identify an established practice model with data supporting the model's effectiveness towards resolving family concerns leading to placement.

Timeframe: Year 2 (Completed)

Benchmark 3: Begin implementation of the model in cases and provide technical assistance to the

sites.

Timeframe: Years 3-4 (Completed)

**Benchmark 4:** Continue implementation while beginning to evaluate pilot's effectiveness (*Completed*)

Timeframe: Years 4-5 (Completed)

**Benchmark 5:** Identify strategies to increase scale of pilot, if effective.

Timeframe: Years 4-5 (Completed)

#### Final Progress Report:

Refer to updates under Objective 6.

# Strategy 3: Provide the claiming mechanism for these costs to county directors and fiscal staff as well as the Title IV-E Juvenile Courts.

**Benchmark 1:** Develop fiscal procedures for claiming for PCSAs and Title IV-E Juvenile Courts.

**Timeframe:** Years 1-2 (Completed)

**Benchmark 2:** Conduct statewide webinar and provide technical assistance to support proper claiming.

Timeframe: Years 1-2 (Completed)

## Final Progress Report:

Both benchmarks were achieved. The ODJFS, Office of Families and Children worked with the ODJFS, Office of Fiscal and Monitoring Services to create coding for the PCSAs and Title IV-E Juvenile Courts to claim Title IV-E expenses for legal representation. This has been designed to differentiate between legal representation costs for children in out of home care as well as those at imminent risk of removal. Agencies were able to claim for these expenses as of July 1, 2020.

A webinar was presented on August 11, 2020, to provide information on the types of activities that can be claimed as well as how to record expenditure and activities pertaining to legal representation.

## Feedback Loops:

Strategies and benchmarks identified under Objective 7 were developed and were being implemented based upon CQI principles.

# Goal 3: Reduce the need for foster care for children at risk of removal/ prevention of foster care.

Impact: Safety 1, Well-Being 1

Measures of Progress: Entry rate

**Progress Measures Update:** Ohio's Child and Family Services Review (CFSR 3) Data Profile Context Data Report on *Population, Entries, and Entry Rates per 1,000* prepared by the Children's Bureau in February 2024 indicated there has been a decrease in entries into care in FY23 from the prior 4 years. During FY23 there were 7,740 entries (3.07 entry rate per 1,000). During the prior fiscal year there were 8,355 entries (3.30 entry rate per 1,000).

When examining Item <u>2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care</u> during the CFSR PIP case reviews agencies had made concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after a reunification in 82.61% of the applicable cases reviewed. This exceeded the CFSR Improved Goal.

During CPOE Stage 12, Phase 2 there were 400 applicable cases reviewed for Item 2. Of these, 391 cases were rated as a Strength at the 97.75% of compliance. As a result of these findings there is additional credence to the Objectives, Strategies, and Benchmarks established under Goal 3.

**Rationale**: Studies have shown that the longer a child remains in foster care profoundly effects future outcomes for them and the next generation as well. Placing children in out-of-home care is a traumatic event, and for many, even more traumatic than the event that led to their removal. Many children currently in foster care, may not have come into care if services and supports were available to their families, prior to a crisis. Other children who leave foster care return to care because of subsequent abuse and/or neglect. Foster care can be prevented by providing appropriate supports and evidence-based services to families; evidence-based services can expedite their leaving foster care sooner and appropriate supports can keep them safely with their families, so they do not return to foster care. If a child should need to be removed from their family, the next best placement would be with an extended family member or family friend (kin placement) who can provide a safe and stable home environment. To accomplish this goal, we need to prevent abuse and neglect; have the least restrictive placement available if removal is necessary and encourage and work with parents, including non-custodial

parents, relatives, and family friends to support the child. In addition, evidence-based preventive and ongoing services are needed to reduce the risk of abuse or re-abuse.

## **Objective 1: Identify Children at risk of foster care**

Strategy 1: QIC-CCCT pilot in three counties to develop multi-system approach to ensure safety of infants under one year of age and compliance with CARA requirements.

**Benchmark 1:** The QIC sites will enter data, including but not limited to demographic, CARA, scores from three standardized assessment tools, and child protection data.

Timeframe: Years 1-5 (Completed Year 3)

**Benchmark 2:** Data will be tracked and analyzed for the pilot to determine effectiveness.

Timeframe: Years 1-5 (Completed Year 3)

**Benchmark 3:** Disseminate the findings/best practices statewide via regional forums.

Timeframe: Years 1-5 (Completed Year 3)

#### Final Progress Report:

All benchmarks were achieved. The National Quality Improvement Center for Collaborative Community Court Teams (QIC-CCCT) selected three demonstration sites in Ohio (Trumbull, Fairfield, Coshocton) to assist in designing, implementing, and testing new and innovative approaches that "meet the requirements of the Comprehensive Addiction and Recovery Act (CARA) amendments to the Child Abuse Prevention and Treatment Act (CAPTA) and that better meet the needs of infants and families." All three pilot counties collected and entered data per the requirements of the QIC grant.

Cross-site lessons learned included the following:

- Implementing prenatal PoSC is an effective strategy to inform children services system's response to notifications of infants with prenatal substance exposure and help prevent removals of infants. Prenatal PoSC also serve to empower families to advocate for their own needs both before and after birth.
- Building coordinated service systems between health care, children services, and SUD treatment for pregnant and parenting women requires building trust at the systems and family level
- Building strong relationships among systems partners can foster community-wide shifts in both culture and practice, break down silos between systems, and reduce stigma for families affected by SUDs.
- State agencies can support local implementation sites by identifying state-level resources, disseminating successful program strategies, and planning for expansion to other counties.
- Opportunities for statewide expansion are more likely when coordinating with related parallel initiatives and aligning with local, state, and federal priorities (e.g., the Family First Prevention and Services Act priority on prevention; 2016 CARA amendments to CAPTA).

At the conclusion of the project, plans for regional dissemination were canceled due to the COVID-19 pandemic. Instead, outcomes and lessons learned as well as resources were shared in webinars, webbased learning, and online.

#### Feedback Loops:

Evaluation findings and lessons learned from demonstration sites will provide the field and local courts across the country with information on the most effective multi-system strategies and approaches to improve the way in which parents and caregivers and their children are served.

#### Strategy 2: Develop Statewide Title IV-E Prevention Service Plan.

**Benchmark 1:** Define candidates for foster care and eligibility criteria and claiming reimbursement criteria and billing through Ohio SACWIS.

Timeframe: Years 1-2 (Completed)

**Benchmark 2:** Develop Child's prevention plan.

Timeframe: Years 1-3 (Completed)

Benchmark 3: Define process for ongoing monitoring of safety while children and families are receiving

prevention services.

Timeframe: Years 1-2 (Completed)

### Final Progress Report:

The above benchmarks were achieved. The Title IV-E policy area created OAC rules for Family First Prevention Services (FFPS) candidacy as well as traditional foster care candidacy. These rules covered administration, eligibility for FFPS, activities required to receive IV-E reimbursement, and traditional IV-E candidacy. Additionally, the policy and Ohio SACWIS areas worked on mechanisms to accurately document FFPS and traditional candidates in the system, and to capture eligibility, evidence-based services available that are included in the IV-E Prevention Plan, payment, and reimbursement.

To ensure vast representation in the planning work for FFPSA the Prevention Services Subcommittee was created. It was comprised of representatives from across Ohio's public and community-based agencies, including but not limited to: ODJFS; county Public Children Service Agencies; the Public Children Services Association of Ohio; the Ohio Children's Trust Fund; the Department of Youth Services; the Ohio Department of Mental Health and Addiction Services; the Ohio Department of Health; the Ohio Department of Medicaid; private foster care providers; former foster youth; kinship providers; foster parents; and community-based mental health agencies. To assist in the conversations around prevention services, the department partnered with the Center for the Study of Social Policy.

Ohio's five-year Title IV-E Prevention Services Plan was found to be in compliance with applicable federal statutory and regulatory requirements by the Administration for Children and Families on December 3, 2021. Approval of the Prevention Services Plan allowed Ohio to begin claiming IV-E reimbursement for the approved prevention services back to October 1, 2021. Both approvals are major steps forward in Ohio's implementation of the Family First Prevention Services Act (FFPSA).

### Strategy 3: Provide kinship supports through the statewide Kinship Navigator program.

Benchmark 1: Work with the vendor Kinnect on researching and planning for the Kin Navigator

Program.

**Timeframe: Year 1 (Completed)** 

Benchmark 2: Plan for implementation and sustainability of statewide rollout.

Timeframe: Years 2 and 3 (Completed)

**Benchmark 3:** Implementation of program based on funding allocations.

**Timeframe:** Years 2-5 (Completed)

#### Final Progress Report:

All benchmarks were achieved. Ohio has allocated \$8.5 million for the OhioKAN program. OhioKAN is also supported using the Title IV-B Kinship Navigator funds. Funds were used to support all aspects of the program, including implementation, staff training, services to family, and evaluation. To implement the OhioKAN program statewide, the state was divided into ten (10) regions. This allows families the opportunity to speak with a navigator in or near their community. Each region has a Regional Director, Regional Coordinator, and coach who are employed by Kinnect. Kinnect contracted with community providers in each region to employ the navigators. Kinnect provides training for the navigators on the program model, customer service, trauma informed services, and inclusion and equity. The coaches ensure the navigators provide services with fidelity through ongoing coaching sessions, Learning Collaboratives, and case reviews. All documentation is collected in a module that has been created in Ohio SACWIS. This allows web-based access for documentation and can be shared with all staff across the state in real time. The system also allows for reports to be generated for Continuous Quality Improvement and can provide needed data for the evaluation of the program.

In February 2021, each region began to host Regional Advisory Councils. The purpose of the councils is to support the successful implementation and evaluation of OhioKAN in the region. Regional council members will help identify existing programs and services that support kinship and adoptive families, how these may be enhanced, and recommend solutions to address any gaps in service provision. Regional Advisory Council membership is to be representative of the local area. Membership must include individuals with lived experience as kinship caregivers, adoptive parents, or individuals who have lived in kinship or adoptive families. Council members may represent such groups as Area Offices on Aging, faith community leaders, housing programs, health care providers, schools, local nonprofits, and local children services agencies. On average thirty-five percent of each RAC membership and twenty-five percent of the Statewide Advisory Council (SAC) have lived experience related to the program.

In calendar year 2023, OhioKAN managed over 6,000 calls. Of those calls, 3,400 were screened in to receive services. During this reporting period, OhioKAN's 3-month outcomes report was completed and published. The model was submitted to the Title IV-E Clearinghouse and was recently selected for review.

## Feedback Loops:

OhioKAN has been undergoing a statewide cluster randomized trial to test the effectiveness of the OhioKAN model. The effectiveness trial was designed and executed with culturally responsive and equitable evaluation principles. For example, kinship caregivers and adoptive parents and service providers were actively engaged in co-defining outcomes, co-developing survey measures with strong reliability and validity, and interpreting results. Three-month outcomes indicated caregivers in the intervention group experienced statistically significant effects when compared to caregivers in the control group:

- (1) Satisfaction Greater satisfaction with OhioKAN services.
- (2) **Adult Well-being: Parenting Practices** Higher levels of resourcefulness to meet their children's needs.
- (3) Access to Services Higher perceived accessibility of community resources.

The longitudinal study is ongoing and additional follow-up data collection points will continue to be added to the report listed below as results become available. <u>OSF | Type 1 hybrid cluster randomized trial (CRT) of the Ohio Kinship and Adoption Navigator (OhioKAN) program</u>

OhioKAN also has a rigorous CQI Plan. This plan includes feedback loops between OhioKAN state level leadership, regional leadership, and direct service staff. This feedback loop includes Coaching Sessions, Learning Collaboratives, CQI Process Team, and the CQI Steering Committee. Feedback can flow between each group to inform the topics for discussion. Coaching sessions are held between coaches and navigators. During these sessions, discussion of individual performance, fidelity, strengths, and challenges occur. Feedback from coaches and navigators can be passed up to the Learning Collaboratives. Learning Collaboratives include navigators, coaches, and regional leadership. The Learning Collaboratives allow for a deeper dive into practice, challenges, and improvement strategies. These ideas are shared with the CQI Process Team, which is made up of regional leadership, coaches, and the Program Manager. The Process Team reviews regional data to identify strengths and areas for improvement. Based upon their review, they share recommendations on program improvement strategies and concerns with the CQI Steering Committee. The CQI Steering Committee is comprised of statewide leaders. The Steering Committee will review information from the Process Team and other CQI reports to determine strategies for improvement and monitor implementation.

Objective 2: Determine and develop the prevention service array to fit the at-risk of foster care population needs.

Strategy 1: Identify prevention services that align with the needs of children and families at-risk of foster care and a sustainable fiscal plan for implementation.

**Benchmark 1:** Stakeholder engagement in planning Ohio's Prevention Services Array by establishing cross-systems workgroups.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Identification of evidence-based programming that are aligned with FFPSA in the areas of In-Home Parent Skill-Based Programming, Mental Health Prevention and Treatment, and Substance Abuse Prevention.

Timeframe: Year 1 (Completed)

**Benchmark 3:** Inclusion of necessary non-FFPSA EBPs or other promising interventions that meet the needs of Ohio's Children and Families.

Timeframe: Years 1 -2 (Completed)

**Benchmark 4:** Cross-system fiscal planning to support the prevention services array.

Timeframe: Years 1-2 (Completed)

Benchmark 5: Development a plan for ensuring ongoing model fidelity of approved evidence-based

prevention services.

Timeframe: Years 1-2 (Completed)

# **Final Progress Report**

Throughout 2020-2024, Ohio has made significant progress in achieving the benchmarks established to address Objective 2 Strategy 1. A summary of progress is presented below.

Ohio engaged in a stakeholder driven planning process for Ohio's Prevention Services array. This included the Leadership Advisory Council and multiple workgroups. The Prevention Services Planning workgroup completed data analysis, selected services, and began initial planning for the Title IV-E Prevention Services Plan submission. The Prevention Services Implementation workgroup prepared Ohio to launch Family First Prevention Services on April 1, 2021. Stakeholder engagement has continued to drive Family First Prevention Services ongoing planning and implementation.

The Prevention Services Planning workgroup selected Multi-Systemic Therapy, Functional Family Therapy, Ohio START, Healthy Families America, and Parents as Teachers as the evidence-based practice services Ohio included in the *Title IV-E Prevention Services Plan*. Ohio's plan was submitted in November 2020 and approved in December 2021. Ohio has submitted an amendment to add Motivational Interviewing and Triple P Online.

ODJFS/DCY continues to partner with the Ohio Children's Trust Fund (OCTF) and county public children's services agencies to include necessary non-FFPSA EBPs to meet the needs of children and families. OCTF offers services to families who are not involved in the children services system and PCSAs offer a variety of services to families they serve that are not currently rated on the Title IV-E Clearinghouse. Ohio continues to monitor the Clearinghouse for newly rated services that would be a good fit for inclusion in the *Title IV-E Prevention Services Plan*.

Additionally, ODJFS/DCY continues to partner with sister state agencies, PCSAO, and the Child and Adolescent Behavioral Health Center of Excellence (COE) at Case Western Reserve University on all financial components of the prevention services array.

#### **Sister Agencies**

- The Ohio Department of Medicaid funds MST and FFT for all Medicaid OhioRISE covered youth.
   For youth not enrolled in OhioRISE, the COE and their vendor issues payment for services provided.
- The Ohio Department of Health administers HFA and PAT. For Prevention Services candidates
  receiving HFA or PAT in a state-funded slot, ODH invoices ODJFS/DCY. ODJFS/DCY then draws
  down the reimbursement and issues it back to ODH.

#### **PCSAO**

• The department has partnered with PCSAO to administer the Ohio START program. Payment for Ohio START is issued through Ohio SACWIS, RMS hits, and PCSAO invoicing.

The COE monitors fidelity for MST and FFT. PCSAO monitors fidelity for Ohio START. Ohio START is also evaluated by the Ohio State University. ODH monitors fidelity for HFA and PAT. DCY works with these agencies to ensure only programs meeting model fidelity are included in reimbursement.

## Feedback Loops:

Ohio wanted to ensure vast representation in the planning and implementation of FFPSA. The Prevention Services Planning workgroup was created and is comprised of representatives from across Ohio's public and community-based agencies, including but not limited to: ODJFS/DCY; county Public Children Service Agencies; the Public Children Services Association of Ohio; the Ohio Children's Trust Fund; the Department of Youth Services; the Ohio Department of Mental Health and Addiction Services; the Ohio Department of Health; the Ohio Department of Medicaid; private foster care providers; former foster youth; kinship providers; foster parents; and community-based mental health agencies. The Prevention Services Implementation workgroup included similar stakeholders. As those groups wrapped up, Ohio utilized the Partners for Ohio's Families (PFOF) group as the established feedback loop for Prevention Services. Additional input was received from leadership of sister state agencies and stakeholders as needed.

Strategy 2: Develop state plan to identify and address gaps in services by region and cooperatively work with the Department of Medicaid and Managed Care entities to fill service gaps for eligible children and families.

**Benchmark 1:** Identify gaps in services to children ages 0-3, and their parents and implement services in every region to address gaps.

Timeframe: Years 1-5 (Completed)

#### Final Progress Report:

The benchmark was achieved. Following approval of Ohio's Title IV-E Prevention Plan in December 2021, research and planning began for Phase 2 services. In early December 2021, three Prevention Services meetings were held. These meetings provided an opportunity for OFC to level set with counties on the Prevention Services planning process and garner feedback on Phase 2 services. ODJFS shared needs data with the groups, similar to what was analyzed during the initial planning process. The goal

was to match the needs of families and children being serving to evidence based programs identified on the Title IV-E Prevention Services Clearinghouse. Additionally, the goal was to look at where there may be existing capacity for these services that can be leveraged.

The meetings provided an opportunity for group discussion around needs and services. Many counties had specific services in mind, while others shared areas where they saw gaps in their community's service array. After the meetings, the team compiled all the information shared and began sifting through programs to make final service recommendations. Parenting programs were the most requested and discussed service category. Many counties expressed a need for additional parenting programs. They wanted programs that were flexible, designed for the children services population, and served all ages.

After analyzing the feedback from the groups, looking at rated programs on the Title IV-E Prevention Services Clearinghouse, and identifying programs with existing infrastructure and capacity, Ohio identified Motivational Interviewing and Triple P Online as the two services that will be included in Phase 2 of our Prevention Services implementation. Ohio then began planning for the implementation of Motivational Interviewing and Triple P Online. Motivational Interviewing will be a caseworker driven service, with trainings provided to public children service agency (PCSA) staff, to assist in their ongoing work with families with in-home cases.

Triple P Online is currently being piloted with seven PCSAs using Family First Transition Act funding. The goal of this pilot is to garner support for the program from PCSAs, learn from their implementation to identify best practices prior to statewide rollout, and to evaluate the effectiveness of the program within the tertiary prevention population.

Even with the work to expand the service array, we wanted to maintain our focus and momentum for Phase 1 services and continue our capacity building efforts for MST, FFT, Ohio START, HFA, and PAT. With the current focus on mental health services through OhioRISE and other ODM and OMHAS initiatives, ODJFS wanted to focus on parenting programs in Phase 2. ODJFS/OFC will look to include additional mental health services in future phases of Prevention Services. Work is being done to increase the number of counties implementing Prevention Services and to expand capacity across the state, so we are looking at programs where we may be able to leverage existing infrastructure.

In addition to this work, ODJFS/DCY has been partnering with the Ohio Children's Trust Fund (OCTF) in the prevention services space. OCTF was awarded one of the nine federal Community Collaborations Strengthen and Preserve Families grants. The OCTF is specifically working on this goal and subsequent benchmarks through a three-county pilot area in Northeast Ohio, to provide community-based child maltreatment prevention services via the Family Success Network to families prior to becoming involved in the children services system. It is the Trust Fund's plan to develop a model that can be replicated in other communities throughout Ohio with an outcome of reducing the need for foster care. Through this grant, the Trust Fund is working with partners pertaining to establishing data sharing agreements that would track whether families involved in OCTF programs are able to remain outside of public children services involvement and/or the foster care system.

Additionally, this pilot project includes the utilization of several EBPs, such as Triple P Positive Parenting Program, Transition to Independence Practice Model, and Motivational Interviewing, that are

being utilized with families who do not meet Ohio's candidacy definition for Family First Prevention Services. To ensure ongoing model fidelity to both the specific EBPs provided to families, as well as the model in general, the OCTF has developed a program manual to be utilized by other providers for replication purposes.

Throughout the last FFY the ODJFS/DCY has closely collaborated with the OCTF to plan for the expansion of the Triple P in Ohio. With the addition of CBCAP American Rescue Plan Act (ARPA) funds in FFY 2021, the OCTF Board recently approved the expansion of the Family Success Network to two additional sites throughout Ohio. After collaborative discussions, it was decided that additional prevention services GRF funding will be directed to the OCTF to support two additional expansion sites, for a total of four expansion sites across Ohio. Work on this expansion began in early 2022. This expansion effort will allow the OCTF to continue supporting other EBPs and promising interventions to meet the needs of Ohio's children and families and to reduce the need for foster care for children at risk of removal. With additional sites onboarded to this model, the OCTF will be able to better assess the efficacy of the program manual and better monitor ongoing fidelity to the model through multiple sites.

**Benchmark 2:** Identify gaps in services needed for high needs children placed in out of state congregate care facilities and implement services to meet the needs of these children in Ohio.

**Timeframe:** Years 1-5 (Completed)

#### **Final Progress Report:**

During this five-year period, Ohio continued to pursue a multi-prong approach to identify and address gaps in services needed for high needs children placed in out of state congregate care facilities and implement services to meet the needs of these children in Ohio. These included the: (1) Multi-System Youth Initiative, (2) Next Generation of Ohio Medicaid Initiative, (3) Psychiatric Residential Treatment Facility, (4) Tiered Foster Care, (5) Mobile Response and Stabilization Services, and (6) Data Review for foster youth remaining in congregate care two to five years. While this work will require ongoing support to achieve the established goals, the benchmark is determined as achieved.

#### Multi-System Youth Initiative

In October 2019, Governor DeWine's Child-Serving Cabinet launched the Multi-System Youth Custody Relinquishment Prevention Program. This program aims to reduce the number of children entering custody solely to access treatment for behavioral health and developmental needs. The Program is staffed by representatives from children services, mental health and addiction services, juvenile justice, developmental disabilities, education, and Medicaid, and it is administered through the Department of Medicaid. A multi-agency team meets weekly to review cases, provide technical assistance to local partners, and grant funding for individualized services and supports.

As of February 29, 2024, the MSY Program authorized over \$83 million to provide needed services and supports to 1,526 children from all of Ohio's 88 counties. In addition, the MSY team helped local teams navigate care for 151 children with complex needs for whom MSY applications for technical assistance were submitted to the MSY program.

### Next Generation of Medicaid Managed Care

The Ohio Department of Medicaid (ODM) launched its Next Generation of Managed Care in 2022. The Next Generation of Managed Care features 7 general managed care plans and one specialized managed care plan, the OhioRISE Plan, for children and youth with complex behavioral health needs. All Next Generation Managed Care Entities are required to work collectively to improve population health aims, create more opportunities for value-based purchasing, and offer additional person-centered supports to Ohio Medicaid's covered children and families. The specialized OhioRISE Plan offers intensive behavioral health services and flexible supports to address unique challenges faced by children with multi-system needs. As of March 21, 2024, over 31,000 children and youth were enrolled in OhioRISE.

## Psychiatric Residential Treatment Facility (PRTF)

Ohio launched its first in-state PRTF in November 2023. PRTFs offer an inpatient level, intensive multi-disciplinary residential treatment provided in a non-acute setting for youth with complex needs. A PRTF delivers individualized services to youth to stabilize behaviors in as short as possible timeframe and help youth and their family or other caregivers to develop the knowledge and skills needed to safely manage their needs in the community. Ohio's addition of this level of treatment to its continuum of care affords youth the ability to receive this level of treatment closer to their home and family. \$10 million in capital funds and \$8 million in American Rescue Plan Act (ARPA) start-up funds have been set aside for providers to launch additional PRTF services and enhance the PRTF workforce. Two PRTFs are currently serving children in Ohio (Belmont Pines and The Buckeye Ranch) and several other facilities are working toward providing PRTF services in the next three years.

## Mobile Response and Stabilization Services (MRSS)

Ohio expanded MRSS from the 13-county pilot to now 38 counties. MRSS is a rapid mobile response and stabilization service for young people who are experiencing significant behavioral or emotional distress and their families. A request for information (RFI) was issued to determine provider needs for expanding to additional counties and with the goal of statewide implementation. From February of 2019 to December of 2023, 9,888 MRSS youth/families have been served.

#### Tiered Foster Care (TFC)

Ohio is implementing phase three of the TFC initiative. Phase three focuses on continued stakeholder engagement and research, a random sample evaluation pilot, implementation of a children services' treatment foster home pilot (TFH), and development of additional foster parent supports. As TFC further explores stakeholder engagement and research, this work continues to focus efforts on research to standardize maintenance and administrative rates and update to the Title IV-E cost report. This work is geared towards stabilizing rates and reimbursement for public and private agencies for placement services across Ohio.

The random sample pilot continues to expand on information garnered during the initial TFC pilot and includes a random sample evaluation of 300 children in custody to collect data and feedback for the purpose of evaluating and monitoring the Ohio Child and Adolescent Needs and Strengths Assessment Decision Support Model (CANS DSM), payment rates and tools. This will allow for a deeper evaluation of the CANS DSM created for foster care in Ohio to identify the child-specific level of need (LON) and

ensure payment rates adequately align and support the LON to further build on the TFC System within Ohio. The evaluation will also help build statewide and region-specific estimated budgetary impacts with the goal of providing support to agencies in adequately preparing for implementation and expected operational process changes.

The TFH pilot for interested PCSAs focuses on recruiting and supporting treatment foster homes willing to support higher acuity children with additional one-on-one support, on-call 24/7 casework and counseling for crisis response, training, and marketing. This pilot is modeled after the Northwest Treatment Foster Care Partnership between Sandusky, Seneca, Wyandot, and Ottawa counties and is projected to expand to at least 5 regional partnerships of up to three PCSAs.

Additional foster parent support includes supporting the expansion of MRSS services across Ohio, and release of a request for proposal to develop training curricula to enhance and build upon Ohio's current infrastructure of resource parent training. The contract will focus on the creation of new online self-directed trauma-informed, online on demand advanced training curricula to support resource (foster) caregivers, preparing them to care for children/youth with high acuity needs resulting in fewer placement disruptions and increased placement stability in family settings.

## Data Review for Youth in Congregate Care

Ohio Department of Children and Youth Director, Kara Wente, developed and continues to lead a Children Services Placement Workgroup dedicated to working towards an array of solutions to existing placement concerns. The workgroup members have identified that one of the short-term solutions to Ohio's placement concerns is a data review of children and youth in congregate care settings for two to five years. This data review will serve to better understand the magnitude of the need for congregate level of care, but also, the characteristics of the children and youth needing placement. This data review will include collaborating with PCSAs and other strategic local and state partners to begin to transition youth from congregate care to lower levels of care when safe and appropriate. The hope is that with the goal of congregate care utilization occurring at the right time and at the right dose for children and youth, congregate care beds will become available for those children and youth that need treatment stays.

Work began in November 2023, with information being gathered on over 250 foster youth who had been in congregate care two to five years to include:

- Relative and non-relative kin contacted for potential placement and result of that contact.
- A brief synopsis of the discharge plan and any challenges/opportunities for transitioning from congregate care.
- Whether the PCSA has achieved transition of the child or youth.

For the youth who remain in congregate care, a state care team will be assembled, to include, but not be limited to, the PCSA, the residential or group home facility, OhioRISE Care Management Entity representative, Aetna representative, Managed Care Organization representative, and the Ohio Departments of Children and Youth, Developmental Disabilities, Mental Health and Addiction Services, Medicaid and Youth Services as well as the local Family and Children First Council, as appropriate. The state care team will continue to work with each PCSA's list until a resolution has been achieved for each

child or youth. The data and lessons learned though this initiative will inform next steps for ongoing review processes.

Objective 3: Enhance the well-being of Ohio's children by providing opportunities for fathers to become better parents, partners, and providers.

Strategy 1: Engage the Ohio Fatherhood Commission and explore programs and initiatives that are working and replicate in other areas.

**Benchmark 1:** Identify available resources and programs and share best practices and programs with agencies and courts.

Timeframe: Year 1 (Completed)

**Benchmark 2:** Explore strengths-based attitudes and relationship-based practices to aid in the use of

father engagement strategies. **Timeframe:** Years 1-5 (Completed)

#### Final Progress Report:

Ongoing efforts are being made to enhance the workforce's skills to engage fathers, which is crucial for the well-being of children. The Training and Development Team has collaborated with the Fatherhood Commission's Grantee monthly meetings to understand the progress and achievements at the community level, which is used to develop training content. The training team ensures that all training content includes relevant information and best practices for engaging fathers. The Fatherhood Commission has established a workgroup comprising training team members to revise the Fatherhood Engagement toolkit. The training provided aims to provide information on engaging fathers and includes the following:

Topic	Sessions	Dates	
Safety Planning Basics	Logan County Training	January 24, 2023	
Facilitating the Case Review	Muskingum County Training	April 18, 2023	
Screening and Intake Processes	Jackson County Symposium	November 28, 2023	

OCWTP maintains content on best practices for engaging fathers. The following are sessions completed where the engagement of fathers is stressed:

Event	Title	Sessions Held	Credits	Completions/ Session	% Online
CPS-BIV-AA1-02- XXX-S-000205	Services for Birth Parents (Assessor-Tier 1) (Content 3 Hours, Scheduling Varies)	22	3	13.6	63.6
CPS-BIV-AA2-01- XXX-S-000210	Achieving Permanency through Interagency Collaboration (Assessor-	17	4	11.4	70.6

Event	Title	Sessions	Credits	Completions/	%
	T: 2) (C	Held		Session	Online
	Tier 2) (Content 4 Hours,				
	Scheduling Varies)				
	CW Core Module 1: Family-				
CDC DIV CWC 01	Centered Approach to				
CPS-BIV-CWC-01-	Child	19 11	11	15.5	42.1
XXX-S-000182	Protective Services				
	(Content 11 Hours,				
	Scheduling Varies) CW Core Module 2:				
CDC DIV CWC 02	Engaging Families in				52.6
CPS-BIV-CWC-02- XXX-S-000186	Family-Centered Child Protective Services	19	5.5	15.0	
VVV-2-000199	(Content 5.5 Hours,				
	Scheduling Varies)				
	CW Core Module 3: Legal				
	Aspects of Family-				
CPS-BIV-CWC-03-	Centered Child Protective	22	11	15.3	50.0
XXX-S-000188	Services (Content 11	22	11	13.3	30.0
	Hours, Scheduling Varies)				
	CW Core Module 6: Service				
	Planning and Delivery in				
CPS-BIV-CWC-06-	Family-Centered Child				
XXX-S-000199	Protective Services	42	16.5	13.8	40.5
7.5.0.0	(Content 16.5 Hours,				
	Scheduling Varies)				
	Working Towards				
	Successful Reunification:				
	Strengthening the				
CPS-BIV-CWC-XX-	Relationship Between	28	5.5	12.2	32.1
XXX-S-000754	Primary and Resource				
	Families (Content				
	5.5, Scheduling Varies)				
CPS-BIV-PRT-01- XXX-S-000224	Achieving Permanency				
	through Roundtables				
	(YCPRT Values) (Content	2	5.5	18.0	100.0
	5.5 Hours, Scheduling				
	Varies)				
	Youth-Centered	1	5.5	18.0	100.0
CPS-BIV-PRT-02-	Permanency Roundtables				
XXX-S-000225	Skill Training (Content 5.5				
	Hours, Scheduling Varies)				

Event	Title	Sessions Held	Credits	Completions/ Session	% Online
CPS-BIV-SUC-XX- LAB-S-000761	Managing for Outcomes: Using Ohio SACWIS Data to Improve Unit Performance (Content 3.5 Hours, Scheduling Varies)	5	3.5	9.0	80.0
CPS-BIV-SUC-XX- XXX-S-000442	Supervising Work with Kin (Content 4.5 Hours, Scheduling Varies)	5	4.5	8.0	20.0
CPS-ILT-XXX-XX- XXX-N-000065	Fathers, Inequity, and Ethics in Child Welfare (Content 3 Hours, Scheduling Varies)	8	3	7.8	.0
CPS-ILT-XXX-XX- XXX-N-000086	Working with Birth Parents: Making it Positive for Everyone (Content 2.75 Hours, Scheduling Varies)	3	2.75	6.0	.0
CPS-ILT-XXX-XX- XXX-N-000554	The Importance of Working with Primary Families (Content 2.75 Hours; Scheduling Varies)	1	2.75	12.6	.0

## **Goal 4: Reduce recurrence of maltreatment.**

Impact: Safety Outcome 2

Measures of Progress: Recurrence of Maltreatment remains the same and has gotten slightly worse.

#### **Progress Measures Update:**

<u>Recurrence of Maltreatment</u>- In FY19-20 the Observed Performance in Ohio revealed there was a decrease in the recurrence of maltreatment from the prior Observation Period and the Observed Performance was at 9.6%. For FY20-21 there was an increase in recurrence to 10.3%. For FY 21-22 the Observed Performance was 10.2%. The Risk Standardized Performance for FY21-22, the last reported observation period, was 13.6% which is statistically worse than the National Performance Standard.

The State CQI Committee, continues to further examine recurrence data to identify potential factors which lead to recurrence. The CQI data subcommittee has begun an aggregate analysis of traits of children who experienced recurrence of maltreatment to attempt to identify patterns and assess possible interventions. This work is still in its early stages.

ODJFS/DCY staff and PCSAs can utilize the newly created *Ohio Department of Job and Family Services Children Services Dashboard* to access the state/county report entitled *Recurrence of Maltreatment: Percent Child Experiences Recurrence* to determine performance regularly. Additionally, ROM reports on

recurrence of maltreatment and maltreatment in foster care are used by ODJFS/DCY/PCSAs to drill through to the case(s) to identify potential factors which lead to recurrence. During Child Protection Oversight and Evaluation (CPOE) monitoring and technical assistance visits the technical assistance specialist discussed outcomes data with agency staff to explore what is "behind the numbers." The agency is encouraged to review the report on an ongoing basis to assess their performance on this measure. This report serves as the foundation to developing strategies to improve performance. One agency, in their CPOE Stage 12 Plan for Practice Advancement (PPA), indicated that Recurrence of Maltreatment was of concern and their Performance Management Unit will run reports on Recurrence and utilize the reports to conduct reviews of recurrence on specified cases. Results from reviews may identify a need for the modification of agency policies. Progress will be measured through decrease maltreatment recurrence.

As ODJFS explored issues related to effective safety and risk assessment in the context of the CFSR PIP, it became more apparent that while multiple agencies may struggle with developing effective risk and safety assessments and with recurrence of maltreatment, the causes and solutions to the problem need to be tailored to the individual agency. A team staff members reviewed extensive quantitative and qualitative data related to recurrence of maltreatment, re-reports of maltreatment, case re-openings, and over-rides of the preliminary matrix recommended decision on the family assessment for the fifteen CFSR counties. Five CFSR counties were identified as having specific struggles in at least two of the four areas, Athens, Allen, Wood, Lucas, and Logan Counties. The team met individually with each of the five counties to explain trends that were found during the data exploration. For example, one county tended to experience recurrence of maltreatment while a case was open but the severity of the issues on the case was not discovered until the second or third report was received. Another county was significantly more likely than similarly sized counties to complete investigations very quickly and transferred very few cases for ongoing services. One county had already developed a plan to address various issues occurring at their agency, including the ones discussed at the meeting. After the team met with the counties, each county reconvened internally to discuss strategies that might address their issue. One county is now staffing higher risk cases with an administrator before closing them and another county is engaging in further data analysis to identify additional trends. The five identified counties continue to work to improve recurrence of maltreatment using the strategies that they have identified. Athens, Allen, Wood, and Logan counties are all showing some improvement in their recurrence of maltreatment performance since the beginning of 2021 when the intervention was implemented. Lucas' rate has not improved but their performance on this measure was less concerning than that of some of the other counties.

**Rationale**: One of the primary responsibilities of a children services system is to keep children safe and for those children that have experienced maltreatment, the interventions should prevent future harm and reduce the need for future interventions of the children services system. One way to reduce the recurrence of maltreatment, is for the children services system to understand the recurrence patterns, trends over time on a local as well as a statewide scale.

Objective 1: Distribute and present on screening guidelines to ensure appropriate recognition and categorization of maltreatment.

Strategy 1: Implement screening guidelines by providing statewide meeting or webinars to county agencies and juvenile courts to highlight purpose of changes to, and how to use the screening guidelines.

**Benchmark 1:** Distribute guidelines to county agencies and juvenile courts and make available through forms central or on OFC website.

Timeframe: Year 3 (Completed)

Benchmark 2: Schedule regional meetings statewide to discuss screening guidelines and importance

of appropriate recognition and categorization of maltreatment.

Timeframe: Year 4 (Completed)

#### Final Progress Report:

Both benchmarks were achieved. The *Ohio Child Protective Services Screening Guidelines* were revised and reformatted to provide children services professionals with enhanced screening guidance and examples along with a streamlined flow within the document, supporting the decision-making process. References to Ohio Administrative Code (OAC) and Ohio Revised Code (ORC) were made in the beginning of each section/sub-section of the categories to assist with decision making. In addition, considerations for each category were provided to promote critical thinking during the intake and screening processes.

ODJFS issued a communication to all 88 PCSA's and Juvenile Courts on September 7, 2022, informing them that the screening guidelines were available online for immediate use at <a href="https://jfs.ohio.gov/ocf/CPS-ScreeningGuidelines.stm">https://jfs.ohio.gov/ocf/CPS-ScreeningGuidelines.stm</a> along with a self-directed webinar which can be viewed at: <a href="https://jfs.ohio.gov/ocf/CPS-ScreeningGuidelines.stm">Watch 'ScreeningGuidelines Companion Webinar' | Microsoft Stream (Classic)</a> Additionally, PCSA's were able to order physical copies which were distributed in December 2022.

Policy and Practice Application Support (PaPAS) sessions were developed and held in October and November 2022 to provide further support to agencies to gain clarity, understanding, and guidance on the revised screening guidelines. Three sessions were held with 300 participants from 48 agencies.

#### Feedback Loops:

During the development of the screening guidelines, a workgroup was formed to address screening and pathway assignment practices. The workgroup included staff from: fifteen PCSAs representing all Ohio County population sizes (small, small-medium, medium, large, metro and major-metro); OFC policy; Child Protection Oversight and Evaluation (CPOE) Technical Assistance; Foster Care Licensing; Ohio SACWIS; and the Institute for Human Services (IHS)/Ohio Child Welfare Training Program (OCWTP). PCSA representation included both line staff and management. In total there were 25 workgroup members. ODJFS Legal staff also participated in workgroup meetings to provide consultation with statute related to the screening categorization and pathway assignment practices. One of the final recommendations included in the November 2020 report of the Children Services Transformation (CST)

Advisory The Ohio Governor's Human Trafficking Task Force and the Ohio Chapter of the American Academy of Pediatrics provided additional guidance and criteria to include in the Screening Guidelines.

Objective 2: Implement continuous monitoring, validation and reporting of recurrence (monthly to quarterly).

Strategy 1: Provide counties with monthly reports to review and validate the accuracy of the information.

**Benchmark 1:** Information is accurately recorded in Ohio SACWIS for allegation referrals including the estimated date of the maltreatment.

**Timeframe:** Years 1-5 (Completed)

#### **Final Progress Report:**

This benchmark was achieved. Counties continue to utilize ROM reports to ensure that data on incident dates is accurately entered. Staff also continue their manual review of these data and request that corrections be made when errors are found. As data entries continue to be problem despite technical assistance and training on the issue being provided, the team is exploring whether Ohio SACWIS can be enhanced to attempt to prevent data entry errors.

Strategy 2: CQI Advisory Team review quarterly reports and make recommendations as appropriate.

**Benchmark 1:** Data review of recurrence of maltreatment and maltreatment in foster care reports are added as a standing agenda item to CQI meetings, including a discussion of trends and systemic issues identified as potential contributors.

**Timeframe:** Years 1-5 (Completed)

#### Final Progress Report:

The CQI advisory team was restructured several years ago. The work on reviewing data related to recurrence of maltreatment and maltreatment in foster care continues. This is an area that is explored extensively with technical assistance specialists (TAS) as part of the Child Protection Oversight and Evaluation (CPOE) process. TASs were provided with guidance on areas to review related to these subjects, such as:

- Did the case close between intakes? If so, what was the actuarial risk assessment recommendation and
- was it overridden by the workers?
- What was the time between the two intakes? Were the allegations the same/similar?
- Is recurrence recurring amongst sibling groups?
- Is recurrence more likely to occur for a specific age group or specific races?
- What risk contributors were identified for families experiencing recurrence on the family assessment?
- Were there prior reports on the children before the initial report was received?

• Has the family had prior open cases? This allows them to delve into the root causes of recurrence of maltreatment in their counties.

State staff continue to review maltreatment in foster care records annually to identify any data entry errors that need corrected. Staff have also looked trends for maltreatment in foster care and have identified that youth in congregate have higher rates of being maltreated. As Ohio plans for its next Child and Family Services Plan, this is an area that will be targeted.

Strategy 3: Analyze repeat maltreatment cases and determine opportunities to improve performance.

**Benchmark 1:** Evaluate effective use of safety and risk assessment tools to evaluate and screen cases for risk and safety throughout the life of the case.

**Timeframe:** Years 1-5 (Completed)

#### Final Progress Report:

This benchmark was achieved. As stated in the previous item, TAS staff continue to focus on recurrence of maltreatment and maltreatment in foster care during CPOE reviews. By reviewing the cases using the above criteria, TAS staff are able to identify deficits related to assessment of risk and safety and discuss potential interventions to assist with the county agency.

Benchmark 2: Evaluate any effect the updated case plan may affect the risk factors associated with recurrence of maltreatment.

Timeframe: Years 2-5 (Deleted Year 2)

**Benchmark 3:** Evaluate the effect of implementation of EBPs on recurrence of maltreatment.

**Timeframe:** Years 4-5 (Completed)

#### Final Progress Report:

The updated data profiles from the Children's Bureau dated February 2024 were received on April 9, 2024. Ohio's Risk Standardized Performance for all reported observation periods (FY19-20 – FY21-22) was statistically worse than the national performance. Ohio has not been able to identify what is driving the lack of improvement at this time. A Goal in the 2025-2029 CFSP will address both Safety Outcomes-Maltreatment in Care and Recurrence of Maltreatment.

#### Feedback Loops:

To develop further understanding of factors impacting Recurrence of Maltreatment and Maltreatment in Care, state and county data analysts and children services practitioners have teamed up to review recurrence data on a regular basis to identify traits of children who experienced Recurrence of Maltreatment and attempt to identify possible interventions to reduce recurrence. Information obtained from discussions which occur during CPOE visits continues to be shared. As a result, new hypotheses may emerge.

# **III. QUALITY ASSURANCE SYSTEM**

## **Child Protection Oversight Evaluation (CPOE)**

CPOE is the process through which Ohio can measure PCSA practice and provide Technical Assistance/Quality Assurance. Subsequently, the PPA process is where Ohio can expand on the previously measured practice and implement objectives aimed at continuously improving practice.

Innovative Continuous Quality Improvement efforts were applied throughout the 5 year period to Ohio Quality Assurance processes. The five year rule review of OAC 5101:2-33-02 and the conclusion of CPOE 12 Phase 2 provide the perfect opportunity to make systemic improvements to the CPOE process. Stakeholder input began in April 2023 when Technical Assistance Specialists facilitated six listening sessions to obtain input from counties throughout Ohio on recommendations for improvements. Meetings have continued with the Public Children Services Association of Ohio who formed a sub-group to provide direct input on the CPOE process and rule revisions. The goal of improvements is to provide a robust system that will provide useful and practical improvements to the children services system across all 88 counties in Ohio.

**Feedback Loops:** Agency Self-Assessments remained a critical piece of the CPOE process. Triangulating the need for improvement planning utilizing data, case reviews, and a county's own assessment of practice is a solid foundation for the CQI cycle. The Self-Assessment identified agency priorities and provided local insights to make improvement efforts more effective.

Each county's Plan for Practice Advancement was reviewed routinely once it was implemented. These plans were the roadmaps for improvement in each county's CPOE cycle. Plan for Practice Advancement Reviews are a systemic process for ensuring progress on improvement goals and provide an opportunity to examine the effectiveness of identified strategies. These reviews are critical feedback loops in the statewide CQI process.

#### **Best Practice Incentives**

Ohio continues to implement a program commonly referred to as *Best Practice Incentives*. On July 3, 2023, Governor DeWine signed Amended Substitute House Bill Number 33 (HB 33) of the 135th General Assembly. Within the Bill, the state appropriated funding for strengthening best practices to help achieve better outcomes for children, youth, and families. The Department of Children and Youth will continue the *Best Practice Incentive* Program; utilizing \$5 million per State Fiscal Year (SFY) to incentivize best practice measures. A portion of SFY 2024 funds will be utilized to award the final *Best Practice Incentive* measures outlined in *Families and Children Letter (FCL) #016*.

The Best Practice Incentives Funds will continue to focus on two measures fundamental to the Children Services mission:

- Timely Assessments/Investigations
- A composite visitation score of all required face-to-face visits with children and parents.

The aim is to incentivize agencies making marked improvements in achieving compliance with visitation and timely assessment/investigation measures. Advancements in these areas are critical to the state's success in making transformative change for families served by the child protection system.

ODJFS/DCY sends counties a monthly report that identifies every county's performance for both measures. County children services agencies can achieve incentives for **Most Improved** and for **Achieving 95% Compliance.** There will be a Bonus Incentive awarded at the end of the final cycle. This bonus funding will be awarded to counties achieving 95% compliance in both Timely Assessments/Investigations and Composite Visitation Score throughout all three evaluation periods.

# **Ohio Accelerated Safety Analysis Protocol**

Ohio's Accelerated Safety Analysis Protocol (ASAP) has transitioned to a completely county administered model, which allows all 88 counties to access risk data and to implement the ASAP protocol at the local level. The Mindshare ICARE Decision Support Portal (Mindshare) is utilized by the Ohio Accelerated Safety Analysis Protocol Program. Mindshare connects to the Ohio SACWIS database tables and utilizes Ohio SACWIS data to flag children who meet the following criteria:

- Children under three who are the alleged child victim (ACV) or child subject of report (CSR) of a new report who have been the ACV or CSR on two or more prior reports, regardless of screening decision.
- Children ages three to five who are the ACV or CSR of a new report who have been the ACV or CSR on three or more prior reports, regardless of screening decision.
- Infants under 12 months who were the ACV or CSR on a substance abuse related intake received in the first 30 days of life and then the ACV or CSR on a subsequent intake received in the first 12 months of life.
- Children who are the ACV or CSR on a new report who are siblings of a child who was the substantiated or indicated victim on a child fatality or near fatality intake.
- Children who are the ACV or CSR on a present pending near fatality intake or a past substantiated or indicated near fatality intake.

PCSAs that are not participating in the Ohio ASAP program will allow those agencies to access the application to easily identify cases that meet the identified high-risk criteria. Those PCSAs will then be able to utilize the information to provide additional oversight, attention, and guidance on cases to ensure safety issues are fully addressed.

Describe the state's current case review instrument and the extent to which the state is using the data collected through federal Onsite Review Instrument (OSRI), and made available in OMS reports or data extracts, as part of the state's ongoing QA/CQI process.

Ohio has been using the Federal On-Site Review Instrument (OSRI) as part of the state's ongoing QA/CQI process through multiple CPOE reviews. Ohio transitioned to utilizing the updated CFSR Round 4 tool for its CPOE Stage 12, Phase 2 case reviews. Ohio is anticipating CFSR Round 4 reviews will commence

in October 2025 and has already indicated the State will participate in a state-led review. Utilizing the CFSR Round 4 tool currently during CPOE Stage 12 allows PCSAs to become familiar with it and to understand federal expectations for achieving safety, permanency, and well-being outcomes. Many counties had staff review cases alongside the assigned Technical Assistance Specialists and they have benefited from -utilizing the tool as well. The use of this tool is believed to have a capacity building impact in and of itself as professionals learn to examine cases with this specific lens.

The numerous reports available in the Online Monitoring System (OMS) has allowed the state to easily analyze and review both CPOE and CFSR case review data. This analysis would not have been possible without the OMS and the support provided by the federal Children Bureau.

Provide an update to move towards or sustain the ability to conduct a State Case Review Process for CFSR Purposes for future rounds of CFSRs and ongoing CQI/QA processes. (Appendix A of Technical Bulletin 12 for more information.)

**Sustain:** Ohio continues to utilize the Federal On-Site Review Instrument (OSRI) for CPOE and utilized it for the CFSR Round 3 state-led review. ODJFS continued the successful training plan initially applied to the CFSR Round 3 case reviews to the CFSR PIP reviews. ODJFS/DCY will continue use of the OSRI through future rounds of CPOE, as the ability to compare data over cycles and years is invaluable to assessing improvement and areas of practice needing attention. Ohio continues to possess the resources to conduct a state-led review in CFSR Round 4 and has submitted a letter of intent to the Children's Bureau.

# **IV. Final Update on Service Descriptions**

## **Child and Family Services Continuum**

Ohio's publicly funded children services continuum includes robust programming to support the following essential functions: (1) Child Abuse and Neglect Prevention; (2) Child Maltreatment Assessment and Intervention; (3) Child Placement and Family Reunification; (4) Permanency for Children; and (5) Preparation and Support of Youth Transitioning from Care. Ohio's CFSP, PIP, and FFPSA efforts have been aligned to develop the coordinated, cross-system approach needed to improve targeted child outcomes.

## 1. Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)

Title IV-B, subpart I funds support development and expansion of a coordinated child and family services program that utilizes community-based agencies and ensures all children are raised in safe, loving families. Programs and services are designed to:

- Protect and promote the welfare of all children;
- Prevent the neglect, abuse, or exploitation of children;
- Support at-risk families through services which allow children, where appropriate, to remain safely with their families or return to their families in a timely manner;
- Promote the safety, permanence, and well-being of children in foster care and adoptive families; and
- Provide training, professional development and support to ensure a well-qualified child welfare workforce.

ODJFS/DCY issues the federal Title IV-B, subpart 1 allocation to public children services agencies (PCSA) for expenditures incurred in the delivery of children services to ensure that all children are raised in safe, loving families. ODJFS/DCY issues Title IV-B funding in two separate allocations; one for direct services and one for administrative costs.

The methodology used to distribute available funds to counties statewide is as follows:

- 40% is distributed equally among all PCSAs; and
- 60% is distributed based upon each county's population of children less than one hundred per cent of the federal poverty level as compared statewide in the same category, utilizing the most recent available calendar year data from the United States bureau of census figures.

Expenditures are reimbursed with 75% federal Title IV-B, subpart 1 funds. The county must use eligible state funding or provide local funds at a 25% match rate for the nonfederal share.

In addition, ODJFS/DCY utilizes Title IV-B, subpart I funds to support the Ohio Child Welfare Training program, Regional Training Centers, and the University Partnership Program and to reimburse both public and private agencies for their efforts in training foster and adoptive parents.

## 2. Services for Children Adopted from Other Countries

To ensure the safety of children adopted abroad, agencies must conform to standards governed by ODJFS/DCY through the Ohio Administrative Code (OAC) and Ohio Revised Code (ORC) as well as the Hague Convention. Every public children service agency (PCSA), private child placing agency (PCPA) and private non-custodial agency (PNA) approved or certified by ODJFS/DCY involved in processing international adoptions is to adhere to all state and federal requirements pertaining to adoption. PCSA, PCPAs and PNAs undergo oversight and monitoring by ODJFS/DCY to include reviews of case records, policies, and procedures to ensure compliance with the ORC, the OAC and their own agency policies.

Ohio provides inter-country adoption services through training, homestudy, in-home services (e.g., Reactive Attachment Disorder therapy, counseling, therapeutic supports, behavioral intervention supports to assist families with parenting strategies, attachment, and bonding supports) and post-adoption services. These services are referred by local and State entities.

Ohio has a Foster and Adoption Website called It *Takes Heart Ohio* with resources for adoptive families including service providers in their communities. In addition to this resource, the Ohio Kinship and Adoption Navigator (OhioKAN) program assists kinship and post adoptive families navigate resources available to them in their communities. There are ten regions within Ohio, each having navigators to assist families, as well as coaches and coordinators.

Children in Ohio which were adopted from other countries may also be eligible to receive the Post Adoption Special Services Subsidy (PASSS). This subsidy provides for the reasonable costs of allowable services to address the child's physical, emotional, or developmental disability. Additional resources available to Ohio adoptive families who may have youth with complex behavioral health and multisystem needs may be eligible for assistance with Ohio Resilience through Integrated Systems and Excellence (OhioRISE), Ohio Family and Children First Council (FCFC), and Multi-System Youth State Program (MSY).

Finally, families who reside in Ohio and adopt a child from another country are also eligible for the Ohio Adoption Grant Program. This is a one-time payment available to eligible adoptive parents who finalized an adoption on or after January 1, 2023. The grant funding assists adoptive families to offset the cost of adoption as well as seek additional funding for services.

## 3. Services for Children Under the Age of Five

Ohio has implemented a number of cross-system programs to reduce the length of time children under the age of five are in foster care without a permanent family as well as address the developmental needs of vulnerable children under the age of 5 who are in foster care or being served in-home. Some of these programs include the following:

• <u>Preschool Development Grant-Birth to Five</u> - The Ohio Department of Job and Family Services partnered with the Ohio Departments of Education, Health, Mental Health and Addiction

- Services, Medicaid, and Developmental Disabilities to secure a \$48 million Preschool Development Grant-Birth to Five from the U.S. Department of Health and Human Services, Administration for Children and Families for early childhood care and education.
- <u>Infant and Early Childhood Mental Health Consultation</u> Designed to improve social and emotional wellness for young children (infants-six years old) who are at risk for abuse or neglect, and/or who demonstrate poor social skills or delayed emotional development.
- <u>OPQC Maternal-Infant Dyad Project</u> Designed to build on the MOMS+ Project to optimize post-partum support through the first 12 months for the dyad, the mother with OUD and her baby.
- Maternal Opiate Medical Support (MOMS) Program and MOMS + (Plus) The goal of the Maternal Opiate Medical Supports (MOMS 1.0) collaborative, was to improve maternal and fetal health outcomes, improve family stability, and reduce costs of Neonatal Abstinence Syndrome (NAS) to Ohio's Medicaid program by providing treatment to pregnant mothers with opiate issues during and after pregnancy through a Maternity Care Home (MCH) model of care.
- <u>Help Me Grow</u>- Established as Ohio's evidenced-based parent support program that encourages early prenatal and well-baby care, as well as parenting education to promote the comprehensive health and development of children.
- <u>Head Start</u> provides services to eligible children and families in the areas of early learning, health, and family well-being, while engaging parents and guardians as partners,
- <u>Ohio Early Intervention</u> -A statewide system that provides coordinated services to parents of infants and toddlers with disabilities or developmental delays.

## 4. MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

#### **Family Preservation**

Family Preservation funds support a wide variety of programs designed to help children remain safely in their own homes or to safely return to their families if they have been removed. Family Preservation Services are provided throughout the life of the case (i.e., during the assessment/investigation process, during the safety planning process, when an order of protective supervision is issued by the court, or at any time a case is open for services).

Programs and services provided include:

- Placement prevention services (e.g., intensive family preservation programs designed to help children at risk of foster care placement remain safely with their families);
- Programs designed to improve parenting (e.g., increase knowledge of child development and appropriate discipline techniques, enhance personal coping mechanisms, develop budgeting skills, and increase knowledge of health and nutrition);
- Infant Safe Haven programs;
- Alternative Response services to prevent removal of children into foster care;
- Respite care of children to provide temporary relief for parents and other caregivers (including foster parents); and
- Aftercare services following family reunification to promote stability.

These dollars are also used to support counties' efforts to preserve families in crisis. ODJFS/DCY issues the Emergency Services Assistance Allocation (ESAA) as two separate allocations to reimburse PCSAs for direct and administrative costs associated with providing emergency support to children and families. ODJFS/DCY communicates the grant availability and liquidation period for these allocations through the county finance information system (CFIS). Funds must be expended by the grant availability period and reported no later than the end of the liquidation period. Expenditures more than the allocation amount are the responsibility of the county agency. The methodology used to distribute available funds is as follows:

- ODJFS/DCY allocates 40% of the statewide allocation equally among all PCSAs; and
- ODJFS/DCY allocates 60% of the statewide allocation is based on each county's population of children less than one hundred per cent of the federal poverty level as compared statewide in the same category, utilizing the most recent available calendar year data from the U.S. bureau of census figures.

ODJFS/DCY reimburses the PCSAs for allowable direct and administrative ESAA preservation expenditures with seventy-five per cent Title IV-B, subpart 2 funds. The PCSA shall use eligible state funding or provide local funds at a twenty-five per cent match rate for the nonfederal share.

#### Family Support

The Family First Prevention Services Act (FFPSA), enacted on February 9, 2018, modified the definitions of "Family Support Services" when applied to utilization of Title IV-B, subpart 2 funds. "Family support services" for the purposes of utilizing Title IV-B, "subpart 2" means community based services to promote the safety and well-being of children and families, which are designed to increase the strength and stability of families (including adoptive, foster, and kinship families), to support and retain foster families so they can provide quality family based settings for children in foster care, to increase parents' confidence and competence in their parenting abilities, to afford children a safe, stable and supportive family environment, to strengthen parental relationships and promote healthy marriages, and otherwise to enhance child development, including through mentoring."

The Ohio Family and Children First (OFCF) Cabinet's Family-Centered Services and Supports (FCSS) program reflects the state's cross-system commitment to implementing a coordinated continuum of services and supports for families and their children, ages 0-21 with multi-system needs. This initiative is jointly funded by the ODJFS/DCY with Title IV-B dollars) and state funds from the Ohio Departments of Mental Health and Addiction Services, Youth Services, and Developmental Disabilities. These dollars are appropriated to local Family and Children First Councils (FCFCs) to provide non-clinical, family-centered services and supports. Utilization of these funds requires that specific needs be identified on an individualized service coordination plan which must be jointly developed with the family. To read more about the purpose and criteria established for use of these funds, go to: Family Centered Services and Supports (FCSS) Funding | Ohio Family & Children First

In SFY23, OFCF rolled out a new statewide automated case management system that provided OFCF and FCFCs the opportunity to look at previously gathered data and identify ways to expand available data. Due to this, OFCF updated the data provided in this year's APSR.

State Fiscal Year 2023 data (July 1, 2022 – June 30, 2023) is found below: Total Number and Ages of Children Served by Age:

Ages of Children	0 – 3	4 – 9	10 - 13	14 – 18	19 - 21	Not Reported	Total
	91	622	746	1,031	62	2	2,554

## Service/Support Needs by Category Identified at Intake

FCFCs document the identified child's service or support needs at the point of intake and throughout involvement with the youth and family. To be eligible for multidisciplinary Service Coordination through the FCFC, a child must have two or more identified needs. In order of frequency, the presenting needs and/or systems engaged were as follows:

• Mental Health: 63%

Job and Family Services:33%Developmental Disabilities: 27%

Special Education: 26%Children Services: 22%Juvenile Justice: 18%

• Primary Care Physician: 26%

Health Department: 1%Help Me Grow/Early Intervention: 1%

Post-adoption Supports 2%

#### **Services Provided**

FCSS funded services and supports were provided to children and their families across 12 different categories. In total, there were 23,367 reported services and supports provided. Service coordination accounted for 52% of all types of services provided and was the most frequently reported individual type of service/support for which FCSS funds were used. Listed below are the services and supports provided:

Service Coordination: 12,210Social/Recreational: 2,410

Respite Care: 2,132Mentoring: 1,509

Parent Advocacy: 1,277Transportation: 935

• Non-clinical in-home supports: 916

• Structured Activities: 748

Safety/Adaptive: 629

• Other: 518

Parent Education: 68Parent Support: 15

A key component of the FCSS funding program is keeping children in their home and community whenever feasible. Data showed that of the 511 children whose case closed during SFY23, 89% of children served were able to maintain in their community living with either a parent(s), relative(s), legal guardian, or independent living arrangement after they turned 18.

#### Family Reunification

The Family First Prevention Services Act (FFPSA), enacted on February 9, 2018, modified the definitions of "Family Reunification Services (formerly time-limited Family Reunification Services)" when applied to utilization of Title IV-B, subpart 2 funds. As a result of these changes, public children services agencies and other entities using IV-B, Subpart 2 funds shall be able to claim allowable expenditures for the following services and activities:

"Family Reunification Services" for the purposes of utilizing Title IV-B, "subpart 2" means the services and activities listed in this definition that are provided to a child who is removed from his home and placed in a foster home or a residential facility or a child who has been returned home and to the parent, guardian or custodian of such a child, in order to facilitate the reunification of the child safely and appropriately within a timely fashion, but only during the fifteen month period that begins on the date the child returns home.

Family Reunification Services include:

- Individual, group, and family counseling.
- Inpatient, residential, or outpatient substance abuse treatment services.
- Mental health services.
- Assistance to address domestic violence.
- Services designed to provide temporary child-care and therapeutic services for families, including crisis care facilities.
- Peer-to-peer mentoring and support groups for parents and primary caregivers.
- Services and activities designed to facilitate access to and visitation of children by parents and siblings, and transportation to or from any of the services or activities described above.

Prior to the enactment of FFPSA, time-limited family reunification services were provided to a child and his or her caregivers to facilitate a safe and timely return home following placement in a substitute care setting. Use of these funds was restricted to the 15-month period that begins on the date that the child is considered to have entered foster care. These services may now be provided for 15 months after a child exits foster care. These time-Limited Family Reunification Services include:

- Individual, group, and family counseling.
- Inpatient, residential, or outpatient substance abuse treatment services.
- Assistance to address domestic violence.

- Services designed to provide temporary childcare and therapeutic services for families, including crisis nurseries.
- Programs designed to provide follow up care to families to whom a child has been returned after a foster care placement.
- Transportation to or from any of the services and activities described above.

ODJFS/DCY issues the Emergency Services Assistance Allocations (ESAA) for Family Reunification funded under federal Title IV-B, subpart 2 to PCSAs for the purpose of reunification of the family unit in crisis. The ESAA for Family Reunification allocation reimburses PCSAs for the direct and administrative costs of providing emergency support services for children and/or families to facilitate safe and timely family reunification. ODJFS/DCY communicates the grant availability and liquidation period for these allocations through the CFIS. Funds must be expended within the grant availability period and reported no later than the end of the liquidation period. Expenditures more than the allocation amount are the responsibility of the county agency.

The methodology used to distribute available funds is as follows:

- 40% of statewide funding is distributed equally among all PCSAs; and
- 60% of statewide funding is distributed to PCSAs based on each county's population of children less than one hundred per cent of the federal poverty level as compared statewide in the same category, utilizing the most recent available calendar year data from the U.S. bureau of census figures.

Expenditures are reimbursed with 75% federal Title IV-B, subpart 2 funds. ODJFS/DCY allocates State General Revenue Funds at a 25% match rate for the nonfederal share.

#### Adoption Promotion and Support

Ohio offers a program known as Post Adoption Special Services Subsidy (PASSS). PASSS is available to all adoptive families (i.e., international, private attorney, public or private agency) in Ohio, except for stepparent adoptions. PASSS provides funding to families for the reasonable costs of allowable services to address the child's physical, emotional, or developmental disability. The child's qualifying condition may have existed before the adoption petition was filed or developed after the adoption petition was finalized if attributed to factors in the child's pre-adoption or biological family's background or medical history.

The amount of PASSS funding is negotiated after adoption finalization. Limitations include eligibility criteria and availability of state funding. PASSS is a payment source of last resort to be utilized when other sources have been exhausted or are not available to meet the needs of the child. The PASSS program provides assistance when the amount of funding needed exceeds the adoptive family's private resources. PASSS is capped at \$10,000 per fiscal year; however, families may request an additional \$5,000 per child, per fiscal year under extraordinary circumstances. Applications for assistance are assessed by a review committee. PASSS funding requests can be approved in whole or in part, based on the needs of the child and the circumstances of the adoptive family.

PASSS is funded 75% through Title IV-B, Part II and 25% through Ohio's General Revenue Fund (GRF). Adoptive families continue to secure last resort funds for services to address their child's special needs. The special needs approved for PASSS included, but was not limited to the following:

- Acute EEG
- Medical Equipment
- Mental health Counseling
- Neurofeedback
- Occupational Therapy
- Physical Therapy
- Psychiatric Counseling
- Psychological Counseling
- Reactive Attachment Therapy
- Residential Treatment
- Respite Medical Surgical
- Respite Mental Health
- Speech Therapy
- Substance Abuse Counseling
- Therapeutic Foster Care

Adoptive parents who receive PASSS funds must pay at least five percent of the total cost of all services provided to the child. This co-payment may be waived if the gross income of the child's adoptive family is less than two hundred percent of the federal poverty guideline. If the gross income of the child's adoptive family is at or above two hundred per cent of the federal poverty guideline, the state may lower the co-pay percentage of the total cost or waive it. If the service amount is higher than the approved amount, the adoptive parent is responsible for the co-pay percentage amount and the overage cost of the service. The determination of the Federal Poverty Guidelines for family size is based upon information published in the Federal Register, Vol. 87, No. 12, January 21, 2022, pp. 3315 - 3316.

Each of the four service categories of: family preservation, community-based family support, time-limited family reunification, and adoption promotion and support had a minimum of twenty percent of the total funds allocated to provide services as outlined within the category. The amount allocated to each service category is outlined in CFS-101, Part 2.

All categories are designed to assist families and children either through county allocation or statewide programing. Percentages allocated to each category are based on historical spending patterns for various services. As such, the services provided, and spending patterns change over time depending on local needs and priorities. Adjustments are made to each category to effectively respond to the needs of the community agencies and families we serve.

## 5. Populations at Greatest Risk of Maltreatment

The aforementioned IV-B services are intended to assist families with children most at risk of maltreatment. The IV-B Part 1 allocation is aimed at preventing child abuse and promoting the well-

being of children in each community. The Emergency Services Assistance Allocations for Family Preservation and Family Reunification activities are designed to provide targeted services to prevent a child's removal from the home. The Family Support Services are a coordinated continuum of services specifically focused on children with multi-system needs. The Post Adoption Special services Subsidy provides services to address the child's physical, emotional, or developmental disability to keep adoptive families intact.

## 6. Kinship Navigator Funding

The Ohio Kinship and Adoption Navigator Program (OhioKAN) launched in October 2020 and continues to work with families across the state to provide information and referral services, support in accessing services and benefits, hard goods, training, and outreach to kinship and adoptive families. OhioKAN is regionally based, with navigators located in local agencies across OhioKAN's ten regions. OhioKAN currently works with 20 partner sites which employee 39 navigators (as of April 2024). The statewide program continues to be implemented by a vendor, Kinnect.

In this reporting period, OhioKAN experienced a significant accomplishment. Kaye Implementation and Evaluation (KI&E), the vendor evaluating OhioKAN, completed enrollment in the effectiveness evaluation, which was from February 2022 – February 2023. The evaluation sample consisted of 1,728 and was representative of all families served by OhioKAN. The findings at three-months showed that caregivers in the intervention group experienced statistically significant effects when compared to caregivers in the control group in:

- (1) **Satisfaction** Greater satisfaction with OhioKAN services;
- (2) **Adult Well-being: Parenting Practices** Higher levels of resourcefulness to meet their children's needs; and
- (3) **Access to Services** Higher perceived accessibility of community resources.

Based on this evidence, OhioKAN was submitted to the Title IV-E Clearinghouse in December 2023, and was selected for review in March 2024.

With the promising evaluation results at 3 months, Kinnect, in collaboration with ODJFS/DCY is in the process of expanding the full intervention across the state. It is expected that all 10 regions will be providing the full intervention by July 2024.

OhioKAN continues to develop a statewide process to provide training for caregivers and mental health practitioners. Currently, OhioKAN offers two asynchronous trauma trainings through Trauma Free World and a Benefits Training for caregivers. OhioKAN is actively working to increase the number of learning opportunities. OhioKAN is working to gain insight on what topics and training modality through data collected and feedback from people with lived experiences. Additionally, OhioKAN has become a Training for Adoption Competency (TAC) site and is scheduling the fourth cohort of training for mental health clinicians to better understand and address the needs of kinship and adoptive families.

Kinship Caregivers are made aware of OhioKAN in several ways. OhioKAN utilizes social media, internet

search ads, billboards, and radio ads to directly inform families of our services and how to contact the program. OhioKAN also provides brochures to partners and presents and tables at conferences related to their work. OhioKAN also collaborates with the community through the ten Regional Advisory Councils and their members, presentations to local agencies and at conferences, and direct outreach in the community. The impact of outreach is evident through the year over year increases in the numbers of eligible families served. In calendar year 2021, navigators worked with 1,651 eligible families. In calendar year 2022, this significantly increased to 3,174 eligible families. And in calendar year 2023, there continued to be a slight increase up to 3,400 families served.

## 7. Monthly Caseworker Visit Formula Grants

ODJFS issued Title IV-B, subpart 2 funding to PCSAs to assist in meeting federal performance standards related to caseworker visits with children in substitute care. Caseworker visits funding was issued in two separate allocations; one for direct services and one for administrative costs.

The following methodology was used to distribute available funds:

• allocates the caseworker visits allocation based on the number of unduplicated children in substitute care by county divided by the total number of unduplicated children in substitute care in Ohio, based on the previous calendar year (CY).

The PCSA is reimbursed for allowable direct and administrative caseworker expenditures with seventy-five per cent Title IV-B subpart 2 funds. The PCSA could use eligible state funding or provide local funds at twenty-five per cent match rate for the nonfederal share.

The PCSA could claim allowable expenditures for providing direct caseworker services as described in OAC rule <u>5101:2-42-65</u>. A PCSA may claim reimbursement of administrative costs for caseworker visits through the social services random moment sample (SSRMS) reconciliation/certification of funds (COF) process.

## 8. Adoption and Legal Guardianship Incentive Payments

Adoption and Legal Guardianship Incentive payments received since FFY2020 have been used to expand the Wendy's Wonderful Kids program administered by the Dave Thomas Foundation, to provide trauma informed training throughout the state, the enhance interbranch work being performed alongside the Ohio Supreme Court and to grow the Youth Centered Permanency Roundtable initiative.

#### 9. Adoption Savings

The total adoption savings reinvestment amount for FFY2015 - FFY2023 is \$82,293,335. Of this amount, \$71,474,561 has been expended for FFY2015-FFY2022. Through the experienced savings, Ohio has been able to support many initiatives including the Wendy's Wonderful Kids Program Expansion providing additional adoption recruiters for older children and those most difficult to adopt, the Kinship Supports

Program that provides time limited payments to kinship caregivers while they are in the process of becoming licensed providers, the Ohio Kinship and Adoption Navigator Program which provides navigation services to kin caregivers and adoptive families, the Multi-Systems Youth Program which provides services for congregate care, aftercare supports, and wrap around services for youth, the Foster Parent Recruitment and Retention Program which provides funding at the local level for agencies to use toward recruiting and retaining family foster homes, the Best Practice initiative which provides funding at the local level to support agency best practices, and services for families, post-adoption.

## 10. Family First Transition Act Transition Grants

The Transition Act funding has been used across four areas: (1) Prevention Services; (2) Service Expansion and Evaluation; (3) QRTP; and (4) changes in Ohio SACWIS. Families with children at imminent risk of removal from the home into foster care serve to benefit from the provision of evidence-based prevention services.

Below is more detailed information about use of this funding.

Funding helped expand statewide Prevention Services through the Child and Adolescent Behavioral Health Center of Excellence (COE). The role of the COE is to assist the State in their system transformation efforts by providing the orientation, training, coaching, mentoring and other functions/supports needed by the provider network to build and sustain capacity in delivering evidence-based practices within a system of care framework. The COE works with ODJFS/DCY and the Ohio Departments of Medicaid, Youth Services, Developmental Disabilities, and Mental Health and Addiction Services to support the addition and/or expansion, implementation, sustainability, and/or monitoring and evaluation of the following services/processes, including expansion of access through use of telehealth:

- High Fidelity Wraparound
- Functional Family Therapy
- Multi-Systemic Therapy
- Mobile Response and Stabilization Service
- Child and Adolescent Needs and Strengths Assessment

The Transition Act funding has been used toward the QRTP provisions to:

- Provide funding to residential partners to assist them in meeting the QRTP requirements.
- Provide trauma informed training to state and county stakeholders.
- Pilot a tiered foster care rate system aimed at reducing congregate care days by increasing the number of skilled foster parents prepared to care for higher needs children.

The Transition Act funding has also been used toward enhancements in automated systems to support all facets of FFPSA implementation.

#### 11. Family First Transition Act Funding Certainty Grants

The Funding Certainty Grant was received in August 2021. Each former waiver county's proportionate share of loss was calculated to determine their share of the grant and these amounts were disbursed soon after received. ODJFS set up new expenditure coding to capture how these funds are used based

upon the allowable uses (i.e., IV-B allowable activities, former waiver activities, and FFPSA planning and implementation activities). The funds have been used toward family preservation and reunification activities, and continuing with Family Team Meetings and providing services and supports to facilitate and maintain kinship and adoptive placements. Support services for adoptive parents and kin caregivers have also been provided, as well as support services to prepare children for kin or adoptive placements (e.g., peer mentoring, counseling, and assessments of a child's interest in adoption). Funds have also been used to support children and families not eligible under Title IV-E. Were these funds not available to assist with placement and administrative costs for non-IV-E eligible children, the former demonstration counties would resort to local funding to support these costs.

#### 12. Chafee and ETV

During the pandemic, ODJFS allocated a total of \$13,203,746 out to our county agencies as well as the extended foster care to 21 program (BRIDGES). The funds were used to:

- Prevent children from aging out of foster care and becoming homeless.
- Provide unrestricted one-time or monthly direct financial assistance to youth/young adults to assist them in meeting their needs during the pandemic.
- Provide targeted payments and supports to allow youth/young adults to remain at home during
  the COVID-19 pandemic and public health emergency, when needed to ensure their health and
  well-being. Individuals requiring such assistance may include youth with medical conditions,
  pregnant or parenting youth, and youth who need to quarantine due to exposure to COVID-19.
- Assist youth in meeting living expenses, including rent, groceries, grocery or meal delivery, and utilities. Such assistance may include helping youth pay back payments and fees and/or paying for expenses for youth/young adults who need to stay home for extended periods of time.
- Purchase cell phones, tablets, laptops, internet service, cell phone plans or other technological tools for young people.
- Provide respite care services and additional support for parenting or pregnant youth.
- Help pay salaries of agency staff who administer and oversee emergency assistance for youth, including fiscal staff responsible for generating and issuing payments paid for the Chafee program.
- Partner with national and state organizations to assist young adults, including for activities relating to locating youth, outreach, and marketing.
- Hire youth/ young adults with lived experience in child welfare to provide navigation services to fellow youth/young adults.
- Provide navigation services to help connect youth to services and support them as they apply for or engage in those services.
- Employ youth/young adults, at the agency level and/or as part of contractor staff, to provide outreach and support to fellow youth and young adults. This could include paid internships for youth/young adults to help prepare them to re-enter the job market.
- Assist youth in paying medical expenses, including COVID testing and treatment, if these expenses are not already covered by other health insurance or Medicaid.
- Purchase or reimburse youth for personal protective equipment (PPE), including cloth masks.

- Provide services and support to combat young peoples' social isolation during the pandemic.
   This could include sending gift boxes, cooking kits, puzzles, art and hobby supplies, or other interactive items to connect youth/young adults.
- Provide outreach and offer any needed assistance to youth who experienced foster care after attaining age 14 and were subsequently reunified and to youth who exited foster care to adoption or guardianship after attaining age 16.

In addition to conducting a required public awareness campaign about the option for youth to re-enter foster care, use of social media and other strategies were used to perform outreach to youth, young adults, and other community providers to make them aware of expanded Chafee funding and available supports.

ODJFS also amended an existing contract with the vendor who administered the Education and Training Voucher program and added \$1,919,149 that was used for expenses youth incurred that was not associated with the cost of school attendance of the youth/young adult. While states have reported some success in working with post-secondary institutions to include additional items in the cost of attendance specific to individual needs of youth, there are other expenses related to attending post-secondary institutions that may not be covered in the cost of attendance. Examples of these expenses include but are not limited to laptops or other technology necessary for virtual education; earbuds/earphones; desks, chairs and other items needed to create a learning space; supplies such as printer paper and ink; and tools for internet access (such as broadband internet access, cell phone data cards, routers and WIFI extenders).

In addition to regular Chafee and ETV funds, the department also received additional reallocated federal funds for both programs. This assisted Ohio in serving additional youth with vital independent living and education services.

Chafee and ETV services and programs support some of Ohio's most vulnerable citizens. Chafee funding is allocated to Ohio's 88 PCSAs where the agencies are responsible for providing independent living and transition age youth services to young adults ages 14-21 that are currently in foster care or have left foster any time after turning age 18. These services include but are not limited to:

- Academic support,
- Post-secondary educational support,
- Career preparation,
- Employment programs or vocational training,
- Budget and financial management,
- Housing, education, and home management,
- Health education and risk prevention,
- Mentoring,
- Supervised independent living,
- Room and board financial assistance (young adults ages 18-21)
- Education financial assistance, and
- Other financial assistance, including payments made or provided by the county agency to help the youth live independently.

Once a young person emancipates from foster care, they are eligible to receive post emancipation services from their local PCSA or they may be eligible for Ohio's extended title IV-E foster care program, Bridges. Ohio refers to post emancipation services provided by PCSAs as Young Adult Services. The PCSAs can use their federal Chafee allocation to support the provision of Young Adult Services.

Ohio equally prioritizes independent living services to youth in foster care and post emancipation services to those young adults that have emancipated. Emancipated young adults have two program options for post emancipation services with Young Adults Services and Bridges. The department diligently works with PCSA's that provide Young Adult Services to ensure they have the support and training needed to effectively serve the older population.

A new program was implemented to help support youth in foster care and emancipated young adults. The *Youth Navigator Program* provides neutral assessments and connections to resources available to current and former youth in foster care. The *Youth Navigator Program* will also assist eligible young adults to connect with Ohio's Education and Training Vouchers (ETV), Medicaid, Bridges and Young Adult Services through the local PCSA and other valuable local resources.

OCY continues to promote and train PCSAs and Bridges providers on a process where a young adult that is currently enrolled in the Bridges program can also request additional services that may not be offered by the Bridges program from their local PCSA. The department's Independent Living and Bridges teams worked together with the Ohio SACWIS team and the Fiscal Operations team to create a streamlined process for PCSA's and Bridges providers to concurrently provide supports when needed to young adults enrolled in the Bridges program. Previous training and technical assistance on this process is stored on the Ohio SACWIS Knowledge Base for reference.

Ohio continued to explore the option of extending eligibility for Chafee services provided to young adults who have emancipated from care to 23 years of age by increasing the age young adults are eligible for Young Adult Services. Given that no additional federal funds would support this expansion, Ohio analyzed the number of eligible young adults and fiscal data and determined Ohio could not require the 88 PCSAs to take on an unfunded mandate.

Ohio looked at program coordination and determined the newly implemented Youth Navigator Network had the infrastructure to expand services to young adults up to age twenty-three including offering Flex Funds to emancipated young adults ages twenty-one and twenty-two for one-time service needs. Service needs identified included, but was not limited to housing application fees, security deposits, work uniforms/tools and school expenses.

In addition to the above-mentioned services delivery updates, Ohio reviewed the current fiscal management process and found the current process lacked detail and there were gaps in reporting functionality. Ohio opted to clone an existing reporting tool and create the Ohio Independent Living Reporting Tool (OILRT). The OILRT was initially rolled out on in October of 2022 as a voluntary tool that PCSAs could use in addition to the current reporting requirements through the County Finance Information System (CFIS). In 2023, phase two of the OILRT offered five different reporting features. The OILRT remains voluntary for the PCSAs to utilize, however, it does provide the needed infrastructure for the Youth Navigator Network to track Flex Funds, shortening the timeline to implement Flex Funds. To

date, there are 40 PCSAs that have requested access to OILRT and over eleven hundred service records have been created. The OILRT links funding to specific services and recipients giving the PCSA more detailed on demand data on their spending.

The Ohio ETV program has also undergone significant updates. In 2023 Ohio released a request for grant application for the Ohio ETV program which resulted in a new partnership with Foster Success Education Services (FSES). FSES took over the operation of Ohio's ETV program in July 2023 offering participants a more modern approach to services and fiscal support. Foster Success is recognized as a leader in the higher education field after ten years of managing the ETV program in Indiana. Foster Success utilizes a coaching model that is designed to promote real-time collaborative engagement and empowering solutions for participants – including a robust automated care package program.

## Service Category Percentages and Rationale

Each of the four service categories of: family preservation, community-based family support, time-limited family reunification, and adoption promotion and support had a minimum of twenty percent of the total funds allocated to provide services as outlined within the category. The amount allocated to each service category is outlined in CFS-101, Part 2.

All categories are designed to assist families and children either through county allocation or statewide programing. Percentages allocated to each category are based on historical spending patterns for various services. As such, the services provided, and spending patterns change over time depending on local needs and priorities. Adjustments are made to each category to effectively respond to the needs of the community agencies and families we serve.

## V. CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

Ohio does not have any federally recognized Indian tribes. ODJFS/DCY maintains compliance with the Indian Child Welfare Act (ICWA). During Child Protection Oversight and Evaluation (CPOE) case reviews the Child and Family Services On-site Review Instrument is used to monitor agency compliance with ICWA (Item 9: Preserving Connections).

Ohio SACWIS functionality allows public children services agency staff to enter ICWA-related information in the person record and generate the Tribal Inquiry and Notification Letter. Ohio SACWIS also has a Federally Recognized Tribes Report. Information on tribal affiliation is recorded on the ICWA Detail Screen from the Person Demographics tab. At any time more information becomes available, the screen can be edited to add the additional information. The Tribal Inquiry and Notification Letter is generated to notify and/or request information from a specific tribe or the Bureau of Indian Affairs regarding the tribal affiliation of an individual.

The following Ohio Administrative Code Rules were updated during the previous year:

 OAC 5101:2-53-04 entitled Indian Child Welfare Act (ICWA) Notice Requirements and OAC 5101:2-53-06 entitled Emergency Removal and Involuntary Custody of Indian Children were revised to update the mailing address for the Midwest Regional Office of the Bureau of Indian Affairs.

ODJFS/DCY will seek to continue to improve ICWA compliance through:

- Continued policy guidance updated as needed.
- Revision of Administrative Code rules, as needed.
- Provision of ongoing and case-specific technical assistance.
- Provision of education and training on ICWA through the Ohio Child Welfare Training Program (OCWTP).
  - OCWTP provides PCSA staff with access to the National Indian Child Welfare Association's (NICWA) online training course on ICWA.
  - OCWTP also includes ICWA education in Caseworker Core 2.0 training as well as Assessor training series courses "Family and Child Assessment" and "Diversity Competency in Permanency Planning".

In addition, ODJFS/DCY will share promising practices and educational resources gathered through its participation in the State Indian Child Welfare Managers Workgroup, which meets virtually on a monthly basis.

## **VI. CAPTA State Plan Requirements and Updates**

#### Introduction

The Ohio Department of Job and Family Services is the single state agency that administers the Basic State Grant issued under CAPTA. Most social services programs under the department's purview are county administered with the department providing direction to local agencies through administrative rules and program guidance. With the establishment of the new Department of Children and Youth (DCY) on July 5, 2023, the administration of the Basic State Grant will transfer to DCY effective July 1, 2024.

Grant funds are primarily used to support program development and implementation. This is done directly by the policy and program staff at ODJFS, often in collaboration with public and private agency partners or other stakeholders, or indirectly through funding contracts to community-based agencies or other organizations. The objectives and activities included in this plan are coordinated with and support the activities outlined in Ohio's Child and Family Services Plan required under title IV-B of the Social Security Act.

Grant funds are used to provide training, policy guidance, and technical assistance to child protective services (CPS) caseworkers and supervisors on all programming outlined in this plan, including the Comprehensive Assessment and Planning Model (CAPM) and Differential Response (DR). Several publications, developed and reproduced with grant funds, are used to support training for mandated reporters and the public on reporting child abuse and neglect. Those publications are made available to anyone free of charge.

## **Changes to State Law**

Ohio has not enacted any statutory changes that would affect CAPTA program eligibility since the last update, however, Governor Mike DeWine signed the budget for Fiscal Year 2024-2025 into law on July 5, 2023. Contained within the budget bill, a new state agency was established, the Department of Children and Youth (DCY). DCY combines programs from six different state agencies, including programs from the Ohio Department of Job and Family Services.

## Significant Changes to the Previously Approved CAPTA Plan

#### **Comprehensive Addiction and Recovery Act (CARA)/Plans of Safe Care (PoSC)**

Ohio's Practice and Policy Academy (PPA), which focuses on the implementation of CARA and PoSC, has provided structured support and guidance across Ohio. The department continues its partnership with the PPA State Team whose mission is to ensure Ohio remains committed to the development, implementation, and monitoring of PoSCs. The PPA State team includes members from the following entities:

- Ohio Department of Mental Health and Addiction
- Governor's Office
- Ohio Supreme Court
- Ohio Department of Disabilities

- Ohio Department of Health
- Ohio Department of Medicaid
- Ohio Hospital Association
- Ohio Perinatal Quality Collaborative
- Medical Hospitals (delivering hospitals)
- Ohio Child Welfare counties who have consistent CARA/PoSC practices

The departments' CAPTA funds for CARA will continue to focus on the long-term goal of establishing community based PoSC Coordinators for Ohio. Community-based CARA/PoSC Coordinators will serve infants, children and families impacted by substance use disorders (SUD). These positions will ensure Ohio is in compliance with federal guidelines and expectations governing universal and consistent practices which follow the intent of CARA.

The positive work of the Quality Improvement Center for Collaborative Community Court Teams (QIC—CCCT) and the Practice and Policy Academy (PPA), which has focused on families impacted by SUDs, has shown this practice approach of using care coordinators, improves the care and coordination in wrapping families with supportive services regardless of whether a public children services agency is involved.

Over the next year, the PPA will focus on a major metro county, Hamilton County, and the hiring of a PoSC Coordination position. Hamilton County was selected due to the vast number of delivering hospitals and community agencies which serve infants, children, and families impacted by SUDs. The Ohio Department of Mental Health and Addiction Services released a Request for Application (RFA) for the purpose of soliciting applications from qualified non-profit organizations or governmental entities to provide coordinated care among families struggling with opioid and/or stimulant use disorders(s), who are or could be involved in PoSC with public serving child welfare agencies. The responsibility of this coordinator position will include activities such as enhancing community collaboration with medical providers and early childhood service providers to provide quicker connections and improve access to all local services for children and families (including prenatal care) and for the development of PoSC.

Applications must be submitted in April of 2024, and will be reviewed to select an agency. The selected agency will need to hire one or more individuals to coordinate PoSC among constituent organizations (e.g., hospital, departments of health, and behavior health organizations). The duties and responsibilities of the PoSC Coordinator will include:

- Creating a core team of community providers who work with families and infants impacted by SUD or substance misuse.
- Coordinating cross system trainings and technical assistance for all core team members and service providers who work with families and infants impacted by SUD or substance misuse meeting CARA requirements.
- Researching practices across systems who work with families and infants impacted by SUD or substance misuse.
- Developing training and marketing materials for implementing POSC.

- Developing a Memorandum of Understanding to share information across service providers.
- Establishing relationships with medical staff at all delivering hospitals in Hamilton County.
- Developing a process of communication with the delivering hospitals and the coordinator.
- Developing a contact and referral process for hospital staff to Hamilton County Department of Job and Family Services.
- Establishing a collaborative relationship with Hamilton County Department of Job and Family Services.
- Developing a process of communication between children services and the coordinator.
- Developing a standardized referral process for referrals for families who meet the requirements of CARA (both for screened in and screened out referrals).
- Developing a standardized referral process for all county mandated reporters for families who meet the requirements of CARA that includes all coordinating service providers.
- Enhancing community collaboration with medical providers and service providers to provide quicker connections and improve access to all local services for infants, children, and families (including pre-natal services) and for the development of a POSC.
- Developing high level service coordination that includes:
  - o Collaborating with local treatment agencies and hospitals prior to a child's birth.
  - Addressing the health and well-being of all family members who reside in the home who are impacted by SUD or substance misuse with a standardized service plan including all service providers.
  - Incorporating peer recovery supports if available.
- Developing a service continuum available to clients/ families and establish protocols that allow entry into services regardless of protective service involvement.
- Developing data collection, monitoring, and reporting practices for quarterly reports to be shared across systems.

## Awardees may use the funding for the following items:

- Salary of existing or newly hired part-time/full-time staff focusing on CARA community collaboration.
- Development of contracts with community providers who work with the CARA population.
- Development of contracts with community providers who are focused on community collaboration/community resource mapping for projects specific to the CARA population.
- Development and/or distribution of a standardized county PoSC template or county PoSC release of information.
- Educational materials regarding CARA for families and community service providers.
- Educational/information materials regarding substance abuse services for families and community service providers.
- Training materials and costs related to CARA.
- Travel reimbursement related to trainings of CARA.
- Cross-systems training, and development related to CARA.
- Equipment used to assist in CARA related items above.
- Other related activities.

## **CAPTA Update**

ODJFS/DCY will continue to use grant funds to support existing programming and develop new programs and projects designed to enhance Ohio's CPS system. Specifically, Basic Grant funds will be allocated to support the following CAPTA objectives:

- Objective 1: Improving the intake, assessment, screening, and investigation of reports of child abuse and neglect.
- Objective 2: Improving case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families.
- Objective 3: Enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response.
- Objective 5:Developing, strengthening, and facilitating training including:
  - o Training regarding evidence-based strategies, including the use of differential response, to promote collaboration with the families.
  - o Training regarding the legal duties of agency/court personnel and law enforcement.
  - o Personal safety training for caseworkers; and
  - o Training in early childhood, child, and adolescent development.
- Objective 6: Developing and implementing procedures for collaboration among child protective services, domestic violence services, and other agencies in:
  - Investigations, interventions, and the delivery of services and treatment provided to children and families, including the use of differential response, where appropriate; and
  - The provision of services that assist children exposed to domestic violence, and that also support the caregiving role of their non-abusing parents.
- Objective 7: Developing and delivering information to improve public education relating to the
  roles and responsibilities of the child protection system including the use of differential
  response and the nature and basis for reporting suspected incidents of child abuse and neglect.
- Objective 8:Supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs:
  - o To provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response; and
  - To address the health needs, including mental health needs, of children identified as victims of child abuse or neglect, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports.
- Objective 9: Improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers.

# Objective 1: Improving the intake, assessment, screening, and investigation of reports of child abuse and neglect.

#### **Intake and Screening**

The *Ohio Child Protective Screening Guidelines* were revised and issued in September 2022. The Screening Guidelines were developed by the department in collaboration with Ohio's PCSAs, The Human Trafficking Task Force, Ohio's Chapter of the American Academy of Pediatrics, and the Institute for Human Services. The revisions included information on the Comprehensive Addiction and Recovery Act (CARA) and updated examples of referrals to screen in and screen out.

#### **Trafficking**

Sex trafficking is included in the definition of an abused child in the Ohio Revised Code (ORC) Section 2151.031 - Abused child defined. The Ohio Child Protective Screening Guidelines include guidance and ORC references for all relevant trafficking in persons and compelling prostitution statutes, consideration to refer all allegations of human trafficking to law enforcement and the local Children's Advocacy Center (CAC). A recommendation will be submitted for the next biennial budget cycle (SFY 2026-2027) to broaden the definition of child abuse and neglect within ORC to include other forms of trafficking.

#### **Taking Early Action Matters Ohio**

The department has developed Taking Early Action Matters Ohio (TEAM Ohio), an online portal for mandated reporters to submit non-emergent referrals of suspected child abuse, neglect, and/or dependency. TEAM Ohio was developed based on the Screening Guidelines, a review of other jurisdictions' reporting portals, and input from public children services agencies and mandated reporters. It is currently being piloted with volunteering public children services agencies and the community agencies they select. Pilot counties are informing real-time updates to TEAM Ohio before statewide implementation. The department has received positive feedback on TEAM Ohio, with mandated reporters sharing that it is user-friendly, easier to fit online reporting into their day rather than reporting via phone call, and in some instances quicker to report concerns via the portal. Public children services agencies share that the quality of information received via TEAM Ohio is typically comparable to information received via a phone call.

#### Screening, Assessment, and Investigation Rules

The department is currently completing the five-year rule review process for Ohio Administrative Code (OAC) Chapter 5101:2-36 Screening and Investigation rules. The department partnered with the Public Children Services Association of Ohio and numerous public children services agencies to obtain feedback and suggestions on the rules during bi-weekly meetings held from March 2023 through January 2024. Recommendations voted on by PCSA workgroup members were accepted to be included in the revised rules when possible. Recommendations conflicting with the Ohio Revised Code or federal requirements could not be accepted, but this rationale was explained to workgroup members. Updates included clarifying and consolidating all information related to determining the lead PCSA "jurisdiction," allowing PCSAs to refer screened out intakes for community prevention services, informing alleged perpetrators of the PCSA's appeal process when they are informed of the disposition and right to appeal, and updating multiple assessment/investigation timeframes. The department, in collaboration with the Public Children Services Association of Ohio, presented an

overview of the proposed rule revisions to PCSAs in March 2024. An overview of the main changes occurred prior to the formal rule review and filing process.

Technical assistance teams were included in the workgroup and can assist PCSAs with support and implementation of the revisions to the OAC Chapter 5101:2-36 Screening and Investigation rules.

# Objective 2: Improving case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families.

#### Comprehensive Assessment and Planning Model (CAPM) Tools Update

The Family Case Plan, Case Review, and Semiannual Administrative Review (SAR) tools were redesigned and released into Ohio's CCWIS on January 17, 2020. In December 2022, Family Case Plan and SAR functionality was updated to support Concurrent Planning by adding requirements within the Family Case Plan to allow documentation of concurrent planning when a child enters the temporary custody of a PCSA/PCPA. The SAR functionality includes a review of services and family search and engagement efforts being completed to support concurrent planning. Updates to the system will continue to occur as rules are developed or revised.

The Safety Assessment tool was revised and implemented into Ohio's CCWIS in April 2022. Revisions to the Family Assessment tool have concluded and are awaiting prioritization for implementation into Ohio's CCWIS. The goal is to streamline Ohio's protective services assessment of safety and risk, reduce the time to complete assessments by eliminating unnecessary duplication of entry, while maintaining the imperative information gathered to comprehensively assess and inform case direction. The Family Case Plan and review tools are revised accordingly based on the impacts to the system resulting from the revised assessment tools.

#### **Rule Revisions**

Over the course of 2023, the department considered multiple recommendations from PCSAs to determine practice requirements that could be removed from the Ohio Administrative Code to reduce organizational red tape and improve casework efficiency. As recommendations were received, the department closely reviewed each suggestion to ensure child safety was not impacted while cross-referencing federal requirements and the Ohio Revised Code. To allow time for the department to revise the corresponding Ohio Administrative Code rules, a Procedure Letter was issued outlining all approved recommendations with guidance on practice implementation and documentation. The following summarizes the changes to case management requirements:

- Requirement to complete the Reunification Assessment was removed.
  - Revisions to the CAPM tool set continue with enhancements to the case planning, review, and assessment tools implemented to identify and document reunification efforts.
- Case Review completion requirements extended to be completed once every 180 days instead of every 90 days and in conjunction with the Semi-Annual Administrative Review (SAR).

- The department will explore best practice options to monitor and review Family Case Plans on a regular basis without the need to complete the case review tool every 90 days.
- Independent Living (IL) 90-day readiness review to be completed every 180 days in coordination with the SAR.
- Requirement for a caseworker to complete weekly contact with a substitute caregiver in a treatment foster care placement was removed.
  - Face-to-face contact with the substitute caregiver and child should occur twice monthly.

Additionally, the following OAC Family Case Plan rules were amended to support concurrent planning effective January 1, 2023:

Ohio Administrative Code Rule	Title
5101: 2-38-04	PCPA requirements for completing the semiannual administrative review.
5101:2-38-05	PCSA Family Case Plan for Children in Custody or under Protective Supervision.
5101:2-38-07	PCPA Family Case Plan for Children in Custody or under Court- Ordered Protective Supervision.
5101: 2-3-10	PCSA requirements for completing the semiannual administrative review.

The amendments promote the implementation of concurrent planning and the requirements to begin concurrent planning once the PCSA/PCPA receives temporary custody. Revisions also addressed the goal of improving caseworker engagement with parents, children, and relative/kin by addressing concurrent planning at the onset of temporary custody.

## **Ohio's Citizen Review Panel**

The department continues to maintain their contract with The Ohio State University's College of Social Work, who has overseen the administrative duties of Ohio's Citizen Review Panels (CRP) since January of 2016. The five CRP panels continue to be based on their geographical location and are titled:

- Central Ohio Panel
- Northeast Ohio Panel
- Northwest Ohio Panel
- Southeast Ohio Panel
- Southeast Ohio Panel

OSU provides administrative support to the CRPs and the OSU team provides the following services to the CRPs:

- Membership recruitment
- Tracking/maintenance of panel membership

- Training new CRP members
- Maintenance of online training site
- Assisting with agenda creation for bimonthly meetings
- Partnering with new chairpersons to run the meetings
- Facilitating communication between CRPs and the department/PCSAs
- Providing support to panels in obtaining data from the department
- Assisting panels in gathering data from other sources
- Data analysis

The CRPs are charged with conducting a yearly review of child welfare practices across Ohio and making recommendations applicable statewide rather than narrowed to their respective geographic location. Each panel provides perspectives from the stakeholder community on children services practices, policies to improve safety, permanency, and the immediate and long-term well-being of children. Panel members are volunteers and are not appointed or compensated for their work. They were strategically recruited to ensure panels have equal representation among gender, race, age, and professional discipline. CAPTA details the following two objectives for the CRP program:

- Evaluate the impact of current child services procedures and practices on children and families in the community.
- Provide the information to the public for outreach.

The annual CRP report was distributed in August 2023 to Ohio's PCSAs, IV-E Courts, Public Children Services Association of Ohio, Ohio Job and Family Services Director's Association, Ohio Children's Alliance, and Ohio's University Consortium of Child and Adult Services for Ohio's Child Welfare Training Program. The ODJFS Response report was distributed in December 2023.

The CRPs held their Annual Strategic Planning Meeting in May of 2023. During the meeting CRP panels reviewed the previous years' work and discussed the plan and topics for the next year. For the current evaluation year, 2023-2024 the panels selected the following topics for evaluation:

- The <u>Central Panel</u> is focusing on the retention of resource families.
- The <u>Northeast Panel</u> is continuing their topic from last year by evaluating what services are most helpful at the time of reunification and case closure to ensure family stability.
- The <u>Northwest Panel</u> is focusing on understanding how Ohio Supports the well-being of youth involved in Ohio's child welfare system.
- The <u>Southeast Panel</u> is focusing on the recruitment of resource families. Specifically, a review will be conducted of the amount of money spent on recruitment, the strategies utilized in spending this money, and its ultimate successes of licensing more resource families.
- The <u>Southwest Panel</u> is building on last year's topic which focused on investigating the educational needs for youth moving in and out of residential facilities. Due to last year's evaluation outcomes showing a lack of communication between schools and child welfare resulting in poor outcomes for educational success, which can be linked to Every Student Succeeds Act (ESSA) of 2016, the panel will conduct a document review of this guidance and make suggestions for updates and specificity to ensure it can be utilized effectively.

Attached is the 2022-2023 Annual Citizen Review Panel Report and the ODJFS Response to the 2022-2023 Annual Citizen Review Panel Report.

Objective 3: Enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response.

#### **Best Practice Incentives**

On July 3, 2023, Governor DeWine signed Amended Substitute House Bill Number 33 (HB 33) of the 135th General Assembly. Within the Bill, the state appropriated funding for strengthening best practices to help achieve better outcomes for children, youth, and families. The department has continued the Best Practice Incentive Program; utilizing \$5 million per State Fiscal Year (SFY) to incentivize best practice measures. A portion of SFY 2024 funds will be utilized to award the current Best Practice Incentive measures outlined in Families and Children Letter #016: Best Practice Incentive. The aim is to incentivize agencies making marked improvements in achieving compliance with visitation and timely assessment/investigation measures.

The two Children Services Best Practice Incentive Program categories are: *Most Improved* and those *Achieving 95% Compliance*. There will be a Bonus Incentive awarded at the end of the final cycle. This bonus funding will be awarded to counties achieving 95% compliance in both Timely Assessments/Investigations and Composite Visitation Score throughout all three evaluation periods.

Every six months, incentive dollars will be provided to counties achieving 95% compliance in either of the two prioritized measures. Incentive funding in this category will be evenly distributed to all counties achieving 95%.

A breakdown of the incentive amounts available and the measurement timeframes are located in the Families and Children Letter #133: Best Practice Incentives.

## **Differential Response**

Ohio continues to support activities to sustain Differential Response practice model fidelity across the public children services agency system.

Data reports to track overall county performance on fidelity measures can be obtained through an Ohio SACWIS query. The following information shows how many reports are being categorically assigned to the Alternative Response and Traditional Response Pathways:

From April 1, 2023, to March 31, 2024, Ohio screened in 69,049 reports of Child Abuse and Neglect:

- 32,558 were assigned to the Alternative Response (AR) Pathway (47%)
- 36,491 were assigned to the Traditional Response Pathway (53%)

The department continues to encourage supervisors to use The *Supervisory Coaching Toolkit* to help them assess and provide feedback to workers on skills found in Ohio's CCWIS documentation. The case

review tool allows supervisors and caseworkers to achieve fidelity to the Differential Response model and promotes improvement in clinical competency and case documentation practice.

Efforts to integrate CAPM Differential Response and Ohio's CCWIS content in Caseworker Core have ensured training curricula address new caseworkers' specific learning needs to conduct assessments and family case plans consistent with Ohio's practice model. Select CAPM and Caseworker Core modules are available in the virtual learning environment. Ohio secured a new vendor to improve Caseworker Core training and to promote new and innovative ways of learning.

## Comprehensive Assessment and Planning Model (CAPM) Tools Update

Based upon recommendations contained in the CAMPIS evaluation completed by the University of Cincinnati, planning, development, and activities continue for revision of existing CAPMIS tools for finalization to CAPM. The goal is to streamline Ohio's protective services assessment of safety and risk, reduce the time to complete assessments by eliminating unnecessary duplication of entry, while maintaining the imperative information gathered to comprehensively assess and inform case direction.

The department has partnered with Ohio's Consortium for Child and Adult Services (OUCCAS) to assist in providing further recommendations in the transition of CAPMIS to CAPM. OUCCAS is responsible for advising the department on the scale items in the safety and risk assessments. In addition, OUCCAS provides ongoing qualitative review of the existing CAPM tool set. An augmented CQI team collects qualitative and quantitative data through observations, key informant interviews, focus groups, and surveys regarding the safety assessment and family assessment instruments and corresponding field guides and how caseworkers and supervisors are trained in their use.

#### **Assessment Tools**

Beginning in June 2020, the Child Protective Services (CPS) policy team partnered with various department staff, county partners, and stakeholders to begin revisions to the assessment tools and accompanying field guides.

The CPS policy team collaborated with the Governor's Human Trafficking Task Force to include universal human trafficking assessments and further guidance to the revised safety and family assessment tools. This will ensure that children service agency caseworkers are better positioned to identify human trafficking.

#### Safety Assessment

The Safety Assessment tool was revised to include the CAPMIS evaluation recommendations, suggestions from internal staff, county partners, stakeholders, and the previous Microburst on Rule Review and Program Hearing (MORRPH) sessions held regarding the OAC assessment rules. The goal of the Safety Assessment tool is to promote critical thinking about assessment and case decision making.

Ohio SACWIS and CPS policy staff collaborated to enhance the Ohio SACWIS functionality in response to the revisions. The Safety Assessment has been enhanced by restructuring it to differentiate between possible safety threats, indicators of child vulnerabilities along with the presence or absence of adult protective capacities. Within the Safety Assessment, activity logs as well as historical intake and

assessment information display to assist with accurate documentation, review of gathered information, appropriate safety responses, and supervisory oversight. The new Safety Assessment structure has also been updated in other case areas to promote consistency across the life of a case. Ohio's CCWIS functionality of the Safety Assessment was released in April 2022.

#### Safety Plan

The Safety Plan form was revised and went into effect in April 2023. The changes which were made were a result of recommendations received from county partners. The Safety Plan form was updated to align with Ohio's CCWIS functionality. Sections on the form were added to include safety plan type and the ability to capture name, date, and time of verbal authorization provided by a custodial parent, legal guardian, legal custodian, or responsible person not physically present to sign the form.

#### **Actuarial Risk Assessment**

The Child Protective Services policy team proposed revisions to Ohio's current actuarial risk assessment (ARA) so that it would be more predictive of future maltreatment and better inform service teams of appropriate case direction.

Prior to revising the ARA, Ohio's CCWIS staff and CPS policy staff partnered to enhance the ARA within the system. The ARA is available as a standalone tool, prior to completing a Family Assessment. Ohio's CCWIS users can link an ARA when creating a new Family Assessment, prepopulating intake information, child participants, and risk scores. This information can be updated for accuracy during the assessment/investigation.

#### Family Assessment

Beginning in October 2021, revisions to the Family Assessment tool commenced between CPS policy staff, various internal staff, county partners, and stakeholders. In addition, recommendations, and suggestions from the CAPMIS evaluation and previous Microburst on Rule Review and Program Hearing sessions were considered in the development. A revised Family Assessment tool has been drafted and awaiting inclusion into Ohio's CCWIS. Once implemented, qualitative analysis will be conducted on safety and risk factors to determine and better inform revisions needed for the ARA.

The goal of the Family Assessment tool is to promote and enhance critical thinking skills, case decision making, appropriate service provision for families, and to provide guidance within the field guide on how to engage family members to gather information to comprehensively assess for safety and risk. Furthermore, resources will be readily available for specific case scenarios within Ohio's CCWIS or the field guide along with streamlining information across tools and other work items within the system to reduce duplication of entry.

## **Objective 4: Developing, strengthening, and facilitating training.**

## **Caseworker and Supervisor Core**

Caseworker and Supervisor Core 2.0 lay a strong foundation for (1) assessing safety and safety planning, (2) assessing strengths and needs, and (3) service planning.

In FY23-24, Caseworker and Supervisor Core were revised. The table below outlines the completions and impact of self-directed (SD) and instructor-led training (ILT) related to CAPM and Ohio SACWIS practice in each series in FY24. The tables also have the average score from the course evaluation questions, "The content was relevant to my role." and "I think I will be able to apply what I learned." Learners rated items on a 5-point rating scale (1=strongly disagree to 5=strongly agree).

#### **Caseworker Core 1.0**

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Module 4: Assessment and Safety Planning	ILT	243	12	4.48	4.49
Module 4 SACWIS Learning Lab 1: Assessing Safety and Controlling Safety Threats	ILT	165	14	4.59	4.53
Module 4 SACWIS Learning Lab 2: Assessing Family Strengths, Needs, and Risk of Future Harm	ILT	157	13	4.64	4.51
Module 5: Gathering Facts in Family- Centered Child Protective Services	ILT	258	13	4.45	4.52
Module 5 Learning Lab: Assessment Skills for Gathering Facts	ILT	126	9	4.62	4.67
Module 6: Service Planning and Delivery*	ILT	566	36	4.51	4.58
Module 6 SACWIS Learning Lab: Service Planning and Delivery	ILT	161	19	4.52	4.66

<sup>\*</sup>Module 6: Service Planning and Delivery is offered to learners completing Caseworker Core 1.0 and 2.0.

In Caseworker Core 1.0, attendance in the learning labs was optional. When it was redesigned, the application and practice needed to support skill development were incorporated into the series and are no longer optional.

## **Caseworker Core 2.0**

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Overview of CAPM	SD	512	N/A	4.64	4.65
Introduction to Engagement	SD	494	N/A	4.57	4.55
Introduction to Interviewing	SD	438	N/A	4.57	4.59
Engagement and Interviewing Skills Practice	ILT	507	35	4.69	4.73
Interviewing Children	ILT	450	34	4.54	4.56
Seven Steps of Critical Thinking	SD	534	N/A	4.53	4.55
Planning Home Visits	SD	413	N/A	4.44	4.52
Conducting Home Visits	SD	363	N/A	4.54	4.48
Documenting and Debriefing Home Visits	SD	301	N/A	4.57	4.61
Parental Rights and Caseworker Responsibilities	SD	528	N/A	4.61	4.64
Skillful Use of Protective Authority	SD	467	N/A	4.68	4.68
Determining if Abuse or Neglect Occurred	ILT	457	30	4.71	4.72

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Overview of Ohio's Screening Practices	SD	416	N/A	4.75	4.77
Case Pathway Assignment	SD	395	N/A	4.48	4.49
Fundamentals of Assessing Safety	SD	444	N/A	4.7	4.75
Documenting the Initial Assessment of Safety in Ohio SACWIS	SD	415	N/A	4.35	4.35
Quality Assessments of Safety: Is Immediate Intervention Necessary to Assure Child Safety?	ILT	428	32	4.78	4.65
Fundamentals of Fact Gathering	SD	479	N/A	4.61	4.61
Fact Gathering Skills Practice	ILT	501	29	4.6	4.47
Safety Planning: Determining How to Control Safety Threats	SD	487	N/A	4.46	4.5
Assuring Child Safety within Key Practice Areas	ILT	389	25	4.7	4.76
Assessing Risk of Future Harm	ILT	403	28	4.71	4.64
Module 6: Service Planning and Delivery *	ILT	566	36	4.51	4.58

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Principles of Concurrent Planning	SD	302	N/A	4.53	4.53

<sup>\*</sup>Module 6: Service Planning and Delivery is offered to learners completing Caseworker Core 1.0 and 2.0.

Caseworker Core 1.0 was entirely made up of ILT's. The training was broken up into smaller, more specific, and targeted courses in the redesign. This allows the learner to focus on a particular skill without a flood of additional information. The shorter courses also allow learners to revisit and take them again as needed.

The Content Relevance Rating reflects how relevant learners found the course content:

- Caseworker Core 1.0: Content relevance ratings were high, averaging around 4.55, with individual courses ranging from 4.45 to 4.64.
- Caseworker Core 2.0: Ratings were slightly higher on average than 1.0, with more courses rated above 4.60 and the highest being 4.75 ('Overview of Ohio's Screening Practices').

The Apply What I Learned rating indicates the perceived practical applicability of the course content:

- Caseworker Core 1.0: Like content relevance, applicability ratings were strong, averaging around 4.57, showing that participants felt they could effectively use what they learned.
- Caseworker Core 2.0: Applicability ratings were also robust, with many courses showing improvements over 1.0 versions, such as 'Determining if Abuse or Neglect Occurred' at 4.72 and 'Assuring Child Safety within Key Practice Areas' at 4.76.

Caseworker Core 1.0 was highly rated, demonstrating that the original series set a strong foundation for learners. Both the relevance and applicability ratings are generally higher in Caseworker Core 2.0, suggesting that the redesign successfully addressed learner needs and industry standards in learning and development.

#### **Supervisor Core 2.0**

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Managing for Outcomes: Using SACWIS Data to Improve Performance	ILT	56	5	4.27	4.53

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
The Seven Steps of Critical Thinking*	SD	587	N/A	4.53	4.55
The Supervisor's Role in Assessing Safety	SD	81	N/A	4.52	4.57
Supervision Strategies to Promote Thorough Assessments of Safety	ILT	45	4	4.64	4.55
Supervising Separation and Placement Decisions	ILT	10	4	5	5

<sup>\*</sup>The Seven Steps of Critical Thinking self-directed course is also part of Caseworker Core 2.0.

## Content Relevance and Utility:

- Courses with specific focus areas (e.g., Supervising Separation and Placement Decisions) not only showed high relevance but also scored perfectly on applicability, which suggests targeted, high-stakes training is extremely effective.
- The more data-focused course (Managing for Outcomes) had the least content relevance, which may indicate a need to revise the training material to better meet the supervisors' needs.

## Effectiveness of Training Modalities:

- ILT courses, especially those with fewer completions, had very high relevance and applicability scores, indicating that intensive, instructor-led sessions are beneficial for complex and critical training needs.
- The SD course showed that flexible, self-directed learning could effectively convey important supervisory concepts and was well-received in applicability and relevance.

## **Ongoing Training Needs**

In addition to Caseworker and Supervisor Core, the OCWTP offers a variety of learning opportunities to address knowledge and skill gaps in assessing safety, safety planning, and service planning.

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
CAPM Assessing Safety	ILT	45	6	4.61	4.61
CAPM Safety Planning	ILT	48	5	4.74	4.7
CAPM Strengths and Needs Risk Assessment	ILT	43	5	4.89	4.89

Attendance of the CAPM training is down from previous years. The program suspects this is because the concepts have been better integrated into Caseworker and Supervisor Core, and staff have likely taken this training in previous years.

## **Transfer of Learning Support**

In FY24, OUCCAS began developing additional transfer of learning (TOL) resources based on fundamental concepts covered in Caseworker Core 2.0. These TOL supports will support caseworkers as they continue to practice skills learned in the classroom and apply them in the field. While this work will eventually span several practice areas, this fiscal year's primary focus is on the safety assessment. Currently, under development are over 30 micro-videos describing different aspects of the assessment of safety, checklists to be used by supervisors and agency trainers to review documentation and observe practice in the field, and expert interviews targeted towards administrators, supervisors, and caseworkers that reinforce the importance of quality assessments. Additionally, OUCCAS and the OCWTP are piloting the use of a TOL Coach. This TOL coach will support administrators, supervisors, and agency training staff as they learn how to provide TOL effectively and efficiently to staff. This "coaching the coach" model will help agencies implement good TOL practices, further supporting the development of casework staff.

#### FY20-24 Conclusions

The activities completed under Objective 4 highlighted extensive efforts across Ohio to enhance the competencies of PCSA staff through coordinated training initiatives focusing on the CAPM framework and Ohio SACWIS. The training strategies involved a mix of instructor-led training (ILT), self-directed (SD) courses, and real-time coaching to address various competency areas such as safety assessment, case planning, and documentation practices.

The statewide coordination through the OCWTP has been pivotal in encouraging the standardization of the implementation of CAPM while tailoring the delivery of courses based on regional needs. This approach has allowed for flexibility and local relevancy in training delivery.

#### **Enhancement of Professional Skills and Practices**

- Safety Assessments and Planning: Training on CAPM and Ohio SACWIS led to a more structured and thorough approach to assessing safety and creating safety plans, which are crucial in child protection cases. Caseworkers developed robust skills in identifying safety threats and effectively planning interventions.
- Documentation and Case Management: Emphasis on accurate and detailed documentation practices improved the quality of case documentation. The ability to gather facts and create comprehensive service plans was significantly enhanced, leading to more tailored and effective interventions for families.
- Virtual Learning Adaptations: The transition to online and virtual reality-enhanced training ensured continuous learning during COVID-19, demonstrating adaptability and resilience in training delivery. Self-directed courses and micro-videos particularly helped maintain the training efficacy, allowing caseworkers to revisit concepts as needed dynamically.
- Real-World Implementations: Learning Labs and GAP sessions provided caseworkers with hands-on practice scenarios, bridging the gap between theoretical knowledge and practical application. The integration of updated CAPM tools into courses enabled caseworkers to apply new skills directly to their casework, enhancing overall case outcomes.

## Feedback and Continuous Improvement

- High Relevance and Applicability Ratings: Learner feedback consistently highlighted the relevance and direct applicability of the training content, with ratings frequently above 4.5/5.0. This feedback strongly indicates the effectiveness of the training in enhancing caseworker and supervisor capabilities and readiness to apply learned skills in their daily roles.
- Curriculum Updates and Trainer Development: Continuous curriculum revisions ensured that
  training materials remained up to date with current laws, policies, and best practices.
  OUCCAS's trainer approval process and development program, including the Training of
  Trainers (TOT), were crucial for maintaining high-quality delivery and adapting to new training
  needs and methodologies.

The strategic focus on developing, strengthening, and facilitating training from FY20 to FY24 has positively impacted the capabilities of PCSA staff in Ohio. The adaptability shown by the OCWTP ensured that training efficacy was maintained despite external challenges such as the COVID-19 pandemic.

Moreover, the OCWTP's ongoing feedback mechanisms and continuous improvement workflow indicate a sustainable and responsive training system that can adapt to changing needs and continue to provide high-value learning experiences for Ohio's child protection professionals. The long-term impacts of this are expected to be seen in more consistent, safe, and effective child protection practices statewide.

The shift to virtual training platforms has not only overcome the logistical challenges posed by the pandemic but also improved the reach of training programs, ensuring that no geographic area is left behind.

Standardization and Quality Assurance: The continuous updates to the training curriculum and the rigorous trainer approval processes have helped standardize the quality of training across all regions, ensuring that all PCSA staff have access to quality training.

Overall, the developments under Objective 4 have significantly strengthened the training infrastructure of Ohio's child protective services workforce, resulting in well-trained staff capable of handling the complexities of child protection cases with greater proficiency and care.

## **Quality Legal Representation**

Ohio CAPTA State Grant funds were combined with Federal Children's Justice Act Funds to improve legal preparation and representation including provisions for the appointment of an individual appointed to represent a child in judicial proceedings through a contract with the Ohio Court Appointed Special Advocates (CASA). Funding is used to recruit, screen and train volunteers from local communities to help juvenile courts keep children safe and determine the child's best interest. In 2023, the combined funding sponsored 650 CASA volunteers and 170 attorneys to attend the Ohio CASAs 2023 Celebrate Kids Conference.

In addition to the above activities, the department engaged in the following initiatives to help improve the quality of legal representation in Ohio:

#### 1. NACC Child Welfare Attorney Training

Ohio continued to partner with the National Association of Counsel for Children (NACC) for training and resources that promote high quality legal representation. Based on feedback from surveys and a training participant focus group, NACC developed an updated Ohio specific child welfare attorney training. The virtual four series training was held in October 2023. It was designed for Ohio attorneys who represent children, parents, Juvenile or Family Court Staff, Children's Services Staff or any community professionals working in children services law. The training included practice tips, hypothetical case studies, and polls, grounded in Ohio law, to share knowledge, skills, and best practices aimed at promoting high quality representation in Ohio children services cases. Additionally in 2023, NACC provide an Ohio Pre-petition webinar, access to the 2022 Ohio specific child welfare training and scholarships were given to Ohio practitioners to attend NACC's Summer or Fall Red Book training course.

#### 2. Multidisciplinary Legal Representation Pilot

The legal representation pilot project has entered its 3rd year of implementation. The project evaluator, Action Research, is finalizing the second-year evaluation report. Preliminary results indicate:

- Pilots have served over 250 families with 600 children over the last two years.
- During the second year, pilots received a total of 225 referrals. Of those referrals, 133 resulted in enrollment in the pilot program.
- Pilots also closed 104 cases. Of these cases, 64% were closed after clients completed the
  program successfully and resolved their case. In 22% of cases, clients stopped responding.
  Other reasons for case closure (11%) include courts granting legal custody to a relative
  caregiver or the PCSA, families leaving the jurisdiction, and inability to avoid a formal court
  filing.

 Of the 145 pre-petition clients served in Year 2, only 8% progressed to a formal filing in juvenile court. Of the 54 post-petition clients, 24% were reunified with one or more children after program enrollment.

Ohio's Multi-Disciplinary Legal Representation Pilot Program Convening was held on November 14 and November 15, 2023 at the Supreme Court of Ohio. Participants from all six pilot sites attended.

## 3. Specialized Attorney Training

Ohio CASA provided free specialized training to 170 Attorneys at the Annual Celebrate Kids! Conference. The conference was held in September 2023 with over 650 attendees. The attorneys who came from across the state of Ohio received continuing legal education relevant to child welfare and advocating for the best interest of children.

## 4. New Attorney Onboarding Toolkit

The New Attorney Onboarding Toolkit was published in May 2023. It was created to provide juvenile courts with practical suggestions for recruiting and retaining a competent, committed pool of attorneys. The Toolkit Appendix includes several newly developed resources for attorneys practicing child protection law. Courts can print the Appendix as a packet for new attorneys or can post it as a PDF to the court's webpage. By providing attorneys with information about local case plan services, typical case timelines, and background information about child protection cases, courts will increase the number of competent qualified attorneys.

## 5. Guardian Ad Litem (GAL) Toolkit

The <u>GAL toolkit</u> was published in July 2023. The toolkit was developed to assist courts in implementing the new rule requirements and identify best practices for recruiting, retaining, and increasing the accountability for GALs. These best practices are aimed at improving GAL performance, leading to better outcomes for Ohio's children and families.

#### 6. Court Engagement and Legal Representation

- Met with all 88 children services agencies as well as several courts and county prosecutors to discuss court engagement and county legal representation structures.
- Based on the feedback collected, seven themes have emerged:
  - Communication-child welfare law focused updates on new programs, rules, case law, legal listserv
  - 2. Funding- IV-E reimbursement options
  - 3. Legal needs- Jurisdiction, legal advice vs. information, resources
  - 4. Practice procedures- best practices, barriers, court outreach
  - 5. Prevention- OhioRISE, mental health services, pre-petition,
  - 6. Recruitment/retention- bonuses, scholarships, UPP for attorneys
  - 7. Training-CORE for new attorneys, mock Trials, courtroom protocol
- Of the seven themes, training was identified as the highest need or concern. This need is consistent with the priority need identified by the Children Services Transformation (CST) PCSA Legal Representation Structures Workgroup.

#### 7. Ohio Summit on Children

The <u>Summit on Children</u>, held in March 2023 at the Ohio State University, was an interdisciplinary training where county-based teams learned about national best practices and developed a customized action plan for enhancing their local practices to improve outcomes for Ohio's children and families. Featured plenary speakers included Dr. William Bell, Casey Family Programs, Jessica Chandler, Los Angeles Department of Children & Family Services, and Chief Justice Darlene Byrne, Third Court of Appeals, Texas. The theme of the Summit was:

Together, we lift Ohio families and build stronger communities.

Coming TOGETHER is a beginning.

Keeping TOGETHER is progress.

Working TOGETHER is success.

The event was attended by 326 participants representing 51 counties.

#### 8. CASA

Through the support of 2023 CAPTA funding, Ohio's CASA programing:

- Had a network of almost 2600 volunteers.
- Represented an average of 5,578 children in court each month.
- Was accessible to approximately 75% of Ohio's juvenile judges.
- Grew to 47 programs serving 60 counties.
- Increased the percent of volunteers who are male, a recruitment goal.
- Ohio CASA averaged six on-site visits to county programs per month.

## **Training**

During this time frame, Ohio CASA's training program returned to in-person training. Programs reported lingering after-effects of COVID as seen in the loss of older volunteers and the reluctance of individuals to engage in the highly interactive requirements of a CASA volunteer. As the year progressed and communities became accustomed to returning to group activities, growth again accelerated.

Ensuring that Ohio's CASA volunteers are adequately trained and prepared for their work with children and meeting statutory guardian ad litem training requirements is an important function of Ohio CASA. Ohio CASA and The Supreme Court of Ohio's Judicial College are the two entities statutorily approved to provide the training required to meet the training requirements set forth for attorney and volunteer guardians ad litem in the Rules of Superintendence for the Courts of Ohio (Sup.R.48). Ohio CASA also is an Established Sponsor of continuing legal education through the Supreme Court of Ohio.

## In 2023, CAPTA supported:

- 1,702 hours of required pre-service training. Pre-service is the required training established for
  program certification by the National CASA/GAL Association. CAPTA-supported training is
  complemented by local court-specific policy and procedural training supported by the court of
  appointment.
- 840 hours of locally provided in-service training (excludes Ohio CASA 2023 Conference). Topics can be grouped into 12 general categories (examples given but not inclusive):
  - 1. *Skills*: (e.g., report writing, procedural hearings; legal training; assessing risk; best practices; "dos and don'ts"; responding to child victims; casework with children 0-5;

- testifying; preparing for court; interviewing children; building rapport; understanding case plans)
- 2. Court Processes and Requirements
- 3. Understanding and Responding to Trauma
- 4. *Self-Care and Safety*: (e.g., situational awareness; secondary trauma; boundary training; active shooter training; de-escalation techniques
- 5. Working with and Advocating for Special Populations: (e.g., Special Education and IEPS; LGBTQI+; Fetal Alcohol Syndrome; Darkness to Light; Mental Health and Medication; Teen Dating Violence; human trafficking; adoption training; rural populations; kinship caregivers; developmental disabilities; victims of domestic violence; emancipated youth; Bridges Out of Poverty; poverty simulations; internet crimes)
- 6. *Mental Health*: (e.g., Mental Health and Medication; psychotropic medications; attachment disorders; Youth Mental Health First Aid)
- 7. *Addiction; Substance Misuse*: (e.g., Street Smart; local drug/treatment/recovery courts; medical marijuana control program; Substance Abuse Disorders 101; substance abuse trends and advocacy; Opiates, regional perspectives)
- 8. Community Collaboratives, Resources and Partners
- 9. *Programs:* (e.g., Ohio KAN; Youth/Family Ombudsman; Child Advocacy Centers; Ohio RISE; Family and Children First; Ohio Means Jobs; Help Me Grow; Educational Service Centers; Family Violence Centers)
- 10. Understanding Children Services; Building Relationships
- 11. Diversity, Equity, and Inclusion; Cultural Competence
- 12. CASA Conversations: (e.g., Facilitated group volunteer discussions. Topics include specialty programs; case reviews; mentorship; problem solving; current practices)
- Online Training: Ohio CASA continued to add to its library of online training opportunities. All sessions were approved for Sup.R.48 hours, continuing legal education and continuing professional education (social work) hours. Between January 1,2023 and December 31, 2023, individuals had 2,063 course completions. Courses range from one to three hours. Volunteers report these videos as a valuable resource to assist in skill-development and finding the right approach when working with the children they represent.
- Presentations to Ohio's law schools regarding the role of CASA volunteers and the need for legal representation in child welfare cases.
- The Director of Training:
  - Leading Pre-Service Trainings for newly developing programs and programs with new directors.
  - Participating in three-day Training of State Trainers sponsored by a coalition of state-level CASA Training Directors. Topics included curriculum design; strategies to build confidence in program trainers; demonstration of flex training platforms that combine in-person and remote sessions with oversight and individual exercises; and strategies for working with rural counties and their volunteers.

#### **Technical Assistance**

Ohio CASA staff hosted:

- Online technical assistance sessions on topics such as Annual Report Templates, PowerPoint 101, etc.
- Diversity and Inclusion training in-county and online. Topics included Cultural Competence, Building Resiliency, Building DEI Leadership
- Four quarterly Technical Assistance Meetings for program directors and targeted staff. Agenda items included:
  - Program updates/Ohio CASA updates
  - Legislative updates
  - o Data Entry; essential data elements
  - State Program Partners: Resources to Understand
  - Guest speakers
  - o Programs' biggest challenges
  - Standards
  - o Peer Problem Solving
- Ohio CASA staff worked with CASA programs to hold 12 regional technical assistance meetings hosted by a local program.
- Ohio CASA staff began holding conversations about data integrity with CASA program directors and representatives from the two data platforms utilized by local CASA programs. Programs were notified of steps that Ohio CASA would be taking to begin data cleanup and narrow entry options.
- Ohio CASA's Executive Director actively participates in the national network of state CASA
  program directors. This group has been very engaged in exploring the future of states' CASA
  programming quality assurance efforts and how this affects organizations.

#### **Recruitment and Public Awareness**

Ohio CASA welcomed its new Director of Communications, Haley Nelson Peña at the end of July. See <a href="https://ohiocasa.org/new-ohio-casa-director-of-communications/">https://ohiocasa.org/new-ohio-casa-director-of-communications/</a>.

As county programs saw significant reductions in federal Victims of Crime dollars, a primary source of local program funding, Ohio CASA moved to absorb portions of programs' shared activities through 2023 CAPTA dollars.

Ohio CASA staff were able to supplement local programs' recruitment outreach, public awareness, and forward-facing systems. Ongoing activities included:

- On-site assistance CASA programs across the state which included help with outreach campaigns, design of program websites and improvement of website usability, social marketing and various design and effectiveness question.
- Development of targeted recruitment campaigns.
- In-person coordination of press coverage of local CASA events, including Ross County.
- Increased social medial posts on multiple Ohio CASA platforms.
- Creation of Facebook ads for programs.
- Weekly creation and distribution of social media graphics and templates for local program adaptation.

- Facilitation of local news stories.
- Development of promotional materials and videos for local programs.
- Coordination of state-wide events and campaigns (e.g., Giving Tuesday, Savannah Bananas Baseball).

Objective 5: Developing and implementing procedures for collaboration among child protective services, domestic violence services, and other agencies.

## **Safe & Together Update**

Ohio has provided The Safe & Together™ CORE training since 2010. This training comprehensively introduces domestic violence using a perpetrator pattern-based, child-centered, and survivor strengths approach. The training is developed for child protective services. It goes beyond a primer on domestic violence to teach practical skills and tools rooted in child protective assessments, interviews, documentation, and case planning.

Prior to July 1, 2022, Safe & Together was managed via a contract with the Family and Youth Law Center through Capital University's Law School. At the end of that contract, ODJFS transferred the management of the training to Ohio's University Consortium for Child and Adult Services, the current State Coordinator for the Ohio Child Welfare Training Program. The OCWTP is responsible for providing the following three Safe & Together Modules to public child protection caseworkers and supervisors:

- Safe & Together: Domestic Violence-Informed Assessments and Interviews
- Safe & Together: Domestic Violence-Informed Documentation and Case Planning
- Domestic Violence-Informed Supervisory Practice

Funding was also provided to replace an Ohio Safe & Together trainer in the case of attrition of Ohio's current six certified trainers.

With this transition, Ohio no longer facilitates:

- The Ohio Intimate Partner Violence (IPV) Collaborative (a multi-faceted initiative aimed at building IPV response competency within child protective services agencies).
- Training for community partners.
- Quarterly meetings between Ohio Safe & Together trainers and staff at the Safe & Together Institute.
- Specialized domestic violence training on substance abuse, mental health, and other intersecting problems facilitated through the Safe & Together Institute.

Between July 1, 2023, and projected to June 31, 2024, a total of 2,711 learning hours of Safe& Together training was completed.

Course	Modality	Completions	Sessions	Content Relevance Rating	Apply What I Learned
Safe and Together: Domestic Violence- Informed Assessments and Interviews	ILT	189	18	4.5	4.53
Safe and Together: Domestic Violence- Informed Documentation and Case Planning	ILT	46	7	4.6	4.6
Domestic Violence- Informed Supervisory Practice: Safe and Together Days 1 and 2	ILT	12	4	3	5

The OCWTP has provided training on domestic violence for over thirty years. All new caseworkers are required to take mandated domestic violence training within their first two years. In addition to the mandated training, the OCWTP offers a range of ongoing domestic violence modules. Between July 1, 2023, and projected to June 31, 2024, a total of 410 staff completed specialized, instructor-led domestic violence courses.

#### 2023-2024 Milestones

Case Planning Content Addressed in Safe and Together Second Module: The Safe & Together Foundation Course is divided into two modules that are each two days long. Days one and two focus on the dynamics of domestic violence and address Ohio's mandate that new caseworkers receive domestic violence training that covers required concepts. As a result, this training had more attendees. The second module (days three and four) focuses on skill-building and specifically addresses case planning. This module addresses safety and case planning issues related to children, perpetrators, and survivors of domestic violence. In addition to outlining concrete strategies and meaningful tools for case planning, a case planning grid is shared, and learners are given a chance to apply what they learned using one of their own cases. Unfortunately, this module was not as well attended as the first.

To address this issue, the OCWTP approached and received permission from the Safe & Together Institute to rename the two modules (new titles noted above.). The days 3 and 4 of the training were renamed "Safe & Together: Domestic Violence-Informed Case Planning and Documentation. This will

make it clear that case planning is a key focus of the content and will facilitate more targeted outreach for the topic. In the new CAPS LMS, learners searching by subject or topic will pull up this module when searching for training related to "case planning." This change was implemented in August 2023.

Intimate Partner Violence (IPV) Fully Integrated in New Core Training for Caseworkers: The OCWTP revised Ohio's core training for new caseworkers to highlight three key practice areas prevalent in child protection cases: substance use, mental health, and intimate partner violence (IPV). Each key practice area has a self-directed, foundational course that provides an overview of the issues and best practices for caseworkers when working in any of the three areas. As new caseworkers continue through the series, the key practice areas are reinforced during instructor-led training, allowing them to practice key skills when working with these cases. This means that when learning about case planning, new caseworkers will practice developing case plans specifically related to IPV.

# Objective 6: Developing and delivering information to improve public education relating to the roles and responsibilities of the child protection system.

The following reference manuals continue to be available, and copies are distributed when CPS program staff provide mandated reporter training, nurses training, and teachers in-service training. Additionally, copies are provided to Ohioans upon request and encouraged to be used as a desk reference. The manuals help the target audience to understand: the difference between an injured child and an abused child; how to interact with a child who is suspected to be abused or neglected; and how to report concerns of a maltreated child to a PCSA. Also included is information on Ohio's child protection system.

- The Child Abuse and Neglect A Reference for Medical Professionals
- The Child Abuse and Neglect A Reference for the Community
- The Child Abuse and Neglect A Reference for Educational Professionals

## **Trafficking**

The department has added and hired a position dedicated to human trafficking. The anti-human trafficking program specialist will be working on improving child welfare's capacity to identify and service victims of human trafficking and increase access to benefits for foreign national victims of human trafficking. These goals will be accomplished through education, training, and assisting with policy development and implementation.

## CARA

The department has continued to focus on educating and training Ohio's counties and their community partners on federal legislation regarding CARA and PoSC. These education and training programs created in partnership with the PPA focus specifically on each county's specific needs. Establishing a consistent and structured process to ensure families impacted by SUD have a PoSC in place at the time of the impacted infants discharge from the hospital after delivery and following delivery is the goal.

Training specific to each system and their individual needs is presented throughout the year. Collaboration between the multi-systems has been stressed in education and training for the following: medical partners, behavioral health organizations, mental health providers, substance abuse treatment

agencies and community providers who serve infants and families impacted by substance abuse, particularly newborn infants.

The department continues to utilize the two-tiered education and training process with each community. An initial training occurs with PCSA staff to identify CARA criteria and identify the strengths and barriers within the community which impact working with infants, children, and families to ensure a structured process is in place to support the development and monitoring of PoSC. For the second phase, local community stakeholders attend the training to better understand CARA responsibilities across systems and address processes and responsibilities for CARA to better execute at the local level.

Additional training and support is available to counties at any time and these requests have always been met by department staff. Education continues with the focus on collaboration between the medical community and children services and the creation of a Core PoSC Team. The department continues to present CARA during in person trainings, at conferences, web-based/virtual trainings, listening sessions, conference calls and through information sharing via the internet. Enhancement of developmental resources, services, and educational materials to support this goal will continue.

The department, in partnership with the Ohio Practice and Policy Academy, released the *Plan of Safe Care Toolkit* and the *Ohio Healthy Families Handbook*. The toolkit provides foundational information on CARA, statewide programs available to support substance exposed and substance affected infants and their families, best practice for Plans of Safe Care, and outlines the steps to developing a collaborative core team. The Ohio Healthy Families Handbook includes trainings and educational materials surrounding CARA/PoSC. These trainings and educational materials are available to community providers as well as families.

In 2022 the Practice and Policy Academy partnered with the Governor Mike DeWine's office and created several pages devoted to CARA/PoSC on their official website, Bold Beginning! With the creation of the Department of Children and Youth, the Bold Beginning! Website and all CARA/PoSC information has been transitioned to the new department's website.

The department continues to distribute educational brochures on the Comprehensive Addiction and Recovery Act (CARA) and Plans of Safe Care (PoSC) across the state of Ohio. These brochures are also available on the Department of Children and Youth website to download and print. Both brochures, one identified for community providers and the other for expectant mothers and their families are available. The brochures are available in three languages, English, Spanish and Somali. The department can have them translated in additional languages if necessary. The brochures have been distributed to all Ohio PCSAs, delivering hospitals, and collateral agencies who work with infants and impacted families. The brochures are available for additional mailings at any time requested.

#### **Fatherhood Commission**

CPS policy and the Ohio Fatherhood Commission collaborated to provide males in Ohio with information about the Putative Father Registry. To educate the public ODJFS created a brochure on Ohio's Putative Father Registry. Over 20,000 brochures were distributed to the Ohio Fatherhood Commission's seven grantees and three pilot locations, all of Ohio's birthing hospitals, and PCSAs. The

Ohio Department of Rehabilitation and Corrections was provided with a PDF version of the brochure, per request, to include in their reception materials for inmates. The brochure identifies who is a putative father and outlines the purpose of the Putative Father Registry database. The brochure provides information on how to register with the PFR database and how to request a search of the registry. This brochure is available in both English and Spanish. The brochures are available for additional mailings or translations upon request through JFS forms central.

For the second year, CPS policy was invited to Grafton Correctional Facility to participate in a day long workshop at the request of the Ohio Fatherhood Commission to provide support and education to incarcerated adults. The goal of this workshop was to improve communication with incarcerated adults and their respective PCSA. The department provided a resource document identifying all 88 Ohio counties with contact information and guidance on how to prepare prior to communicating with children services. Incarcerated adults were also able to ask individual questions and gain feedback and direction to assist them in developing next steps. Another workshop at Grafton Correctional Facility is planned for Fall 2024 along with a similar workshop at a women's prelease center in Cleveland, Ohio on the same content. The goal of this workshop will be to provide information on how to contact, inquire and engage with county children services agencies. Additionally, the Ohio Department of Youth Services has requested the department to provide information to incarcerated youth on working with PCSAs while incarcerated.

#### **Memorandum of Understanding**

Following recent legislation, Ohio counties are implementing new requirements to further standardize their county memorandums of understanding (MOUs) to address child abuse and neglect. The CPS policy team created a Model MOU and instructions to complete this document, which are optional resources for counties. The MOU is required to be signed by the County Department of Job and Family Services/Public Children Services Agency, law enforcement entities, juvenile court, the county prosecutor, local animal cruelty reporting agencies, and the children's advocacy center (if applicable). The Model MOU is a fillable document containing all legally required information, such as the county's system of receiving reports of child abuse and/or neglect, roles, and responsibilities for handling emergency cases of child abuse and/or neglect and dependency, and standards and procedures to be used in handling and coordinating investigations of reported cases of child abuse and/or neglect. Previously, PCSAs drafted their MOUs individually and did not have the option of using a standardized template. Additional resources, including a recorded training and slide deck developed in 2023, remains available through the Child and Adult Protective Services Learning Management System. Counties are also encouraged to reach out to their Technical Assistance Specialists for any additional questions and feedback. The CPS policy team has already updated the Model MOU and its instructions based on initial feedback from counties.

As of December 31, 2023, counties are responsible for having their MOUs approved by their County Board of Commissioners and submitted for approval to the department. Once approved, each county is to post their MOU to their public website for public awareness. A list of county MOU compliance can be found on the Ohio Department of Job and Family Services website. Moving forward, counties will continue to submit their MOUs for approval through their County Board of Commissioners and the Ohio Department of Children and Youth every two years.

Objective 7: Supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs.

#### **Department of Children and Youth**

Governor Mike DeWine signed the budget for Fiscal Year 2024-2025 into law on July 5, 2023. Contained within the budget bill, a new state agency was established, the Department of Children and Youth (DCY). DCY combines programs from six different state agencies, including programs from the Ohio Department of Job and Family Services.

The programs under the direction of DCY are proposed to include, but not be limited to:

- **Identification**: Children Services, Home Visiting, Ohio Children's Trust Fund, Maternal and Infant Vitality Programming
- **Early Education**: Early Intervention, Publicly Funded Child Care, Early Childhood Education, Preschool Special Education, Licensing, Dolly Parton's Imagination Library
- **Support**: Ohio Fatherhood Commission, Ohio Family Children First Council, Healthy Beginnings at Home, Early Childhood Mental Health Consultation, Strong Families, Safe Communities

The Ohio Department of Children and Youth's mission is to promote positive, lifelong outcomes for Ohio youth through early intervention, quality education, and family support programs.

#### <u>Goals</u>

- Reduce Infant Mortality. Help more children thrive and reach their first birthday.
- Reduce Learning Gaps. Ensure continuation of care across the spectrum of ages, stages, and services to help children and youth achieve.
- Reduce Involvement with Child Welfare. Help provide families with resources and support needed proactively before a crisis within the family occurs.

#### **Principles**

The goals will be achieved through:

- Transparency
- Accountability
- Focus & Prioritization
- Maintaining Local Structure (strong network of local providers and partners)

#### Pillars

These essential components support DCY's mission and goals. They are the strength behind the department.

- **Continuum of Care** Providing the level of support children and youth need, where and when they need it.
- **Workforce** Attracting and maintaining quality, competent professionals working on behalf of children to match needs across the state.
- **Service Coordination** Working together to support the well-being and future success of all children.

#### **CARA/PoSC Collaboration**

The department has continued to collaborate with many partners in Ohio to ensure federal legislation surrounding CARA/PoSC is followed.

CARA language and the requirements surrounding PoSC were added into Ohio Administrative Code, Chapter 36 Screening & Investigation rules. These rules have been revised and are currently going through the rule filing process and expected to be effectuated the end of Summer 2024. They have been updated to include current and more concise language regarding the requirements of CARA/PoSC. During the past year the department held bi-weekly Chapter 36 workgroup meetings which included numerous county child welfare office representatives, Public Child Services Association of Ohio, state legal representatives and other community partners who expressed an interest in partnering with the department. This partnership has helped streamline the rule review process and will ensure timely finalization of this rule package.

The department continues to partner with the PPA which includes representatives from the Ohio Department of Mental Health and Addiction, the Governor's office, Ohio Supreme Court, Ohio Department of Disabilities, Ohio Department of Health, Ohio Department of Medicaid, Ohio Hospital Association, Ohio Perinatal Quality Collaborative, medical hospital, and representatives from county child welfare offices. This partnership has allowed Ohio to integrate CARA/PoSC practices consistently across Ohio. This work will continue as CARA is a national federal requirement which impacts multisystems across the state.

Objective 8: Improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers.

## **Fellowship Pilot Project**

The department implemented a Fellowship Pilot Project to recruit and train potential child protective service professionals. The project is designed to respond to the challenges of recruitment and retention of children services professionals in Ohio. Turnover is accelerating, wages are rising, and competition from outside employers is causing a workforce crisis. Traditional recruitment techniques and programs are not adequately meeting the needs of Ohio's public children services agencies. Additionally, the length of time needed to train and onboard new staff puts additional pressures on the system.

The fellowship project employs a full-time coordinator that is responsible for recruiting, hiring, onboarding, training, and tracking student progress for participating PCSA's. The project coordinator actively engages with local colleges and universities sharing information about this innovative student learning opportunity. Prospective students are encouraged to apply for a fellowship student position. Students are interviewed and complete a shadowing experience before being accepted into the project. Support from Workforce Innovation Opportunity Act (WIOA) funds allows for fellowship students to enroll as paid students working up to 20 hours per week. The project's initial goal was to onboard up to 20 students in the first year. The program has a rolling admission based on student timelines. As of March 2024, 20 students have completed the program and an additional 12 are currently participating in the program. Furthermore, there are over 20 additional students being interviewed to participate in the program. Capacity has been expanded to serve up to 30 students at a time. Also, the number of

counties participating in the program has expanded from 13 to 19 counties. The project has additionally added a second coordinator. One coordinator handles the students and placement sites, and the other handles networking and recruitment.

Fellowship students are provided individualized learning plans. These plans are guided by children service training requirements, provided by the Ohio Child Welfare Training Program and additional agency training to prepare students for hire in any Ohio PCSA upon graduation. Training opportunities include:

- 120 hours of required Caseworker CORE
- 12 hours of required Domestic Violence Training
- 1 hour of required Human Trafficking Training
- ODJFS Caseworker Onboarding
- Self-care and Secondary Trauma
- Trauma Informed Training

The required children services training is reinforced by work related shadowing opportunities. Fellowship students may be paired with mentors when engaging with children and families to support application of their learning. Additional learning exercises are provided to students to integrate what has been learned and support transfer of learning. Examples of supplemental learning exercises are reviewing Ohio Administrative Code, completion a case contact form after an encounter in the field, and completion of self-assessments exploring individual strengths and areas for development as prospective children services professionals.

The fellowship project ensures the following for all students and participating PCSA's:

- Provides training and onboarding to eligible college students in their last year of undergraduate study in a Social Science field of study.
- Engages college students and develops a path to careers in child protective services (CPS) through development of a fellowship program within the CPS space.
- Creates an opportunity of earlier training and mentoring of incoming talent to a broader array of candidates utilizing the studies/fields related to social sciences and childhood development.

#### Student participants in the program will:

- Receive work experience in the field as well as required caseworker training.
- Function as part-time employees and provide a needed labor force to participating PCSAs.
- Gain meaningful work experience in Children Services.
- Assess their interest in this field.
- Develop a support network.
- Have employment opportunities immediately post-graduation.

## Participating PCSAs will:

Have additional labor, in times of a labor shortage.

- Workforce assistance with supervision of visits, front desk registration, phone screening, support visits to clients, document processing.
- Recruitment of employees with required state trainings completed.
- Hire employees with work experience and expectations of child protective services work.

The following list provides information on universities/colleges the Fellowship Pilot Project Coordinator has been in contact with:

- Ashland University
- Bowling Green State University
- Bluffton University
- Defiance College
- University of Findlay
- University of Toledo
- Lourdes University
- University of Dayton
- Wright State University
- Wright State University Lake Campus
- Cedarville University
- University of Cincinnati
- Shawnee State University
- The Ohio State University
- The Ohio State University at Marion
- The Ohio State University at Lima
- The Ohio State University at Mansfield
- The Ohio State University at Newark
- Ohio University
- Miami University
- Capital University
- Heidelberg University
- Ohio Northern University
- University of Rio Grande
- Tiffin University
- Urbana University

The related degrees students participating in the Project or expressing interest in participating in the Project include:

- Criminal Justice
- Forensic Investigation
- Forensic Psychology
- Homeland Security
- Human Development
- Human Development and Family Science

- Psychology
- Social Work
- Sociology

## **Budget**

CAPTA Funds	SFY 2021	SFY 2022	SFY 2023	SFY 2024
CRP	\$ 293,000.00	\$ 292,288.00	\$ 292,288.00	\$292,288.00
CSSP	\$ 26,470.50	\$ 49,998.39	\$ 50,000.00	
DAS	\$ 300,000.00			
CASA GAL	\$ 204,576.62	\$ 609,701.64	\$ 703,014.00	\$ 703,014.00
Children's Alliance	\$ 57,284.24	\$ 12,083.83	\$ 10,500.00	
OSU	\$ 126,080.50	\$ 292,288.00	\$ 272,894.00	
Communities of Support/CARA		\$ 507,734.13	\$ 1,420,000.00	
ChiByDesign		\$ 306,667.00		
Global Orphan Project		\$ 57,992.31	\$ 300,000.00	
Mandated Reporter			\$ 4,838,786.02	\$ 1,226,448.74
Portal and Licenses			3 4,030,700.02	\$ 1,220,446.74
Workforce Fellowship			\$ 227,184.00	
Grant				
Screening Guidelines Materials			\$ 30,700.00	
Youth Advisory Board			\$ 10,500.00	
•			\$ 10,500.00	
Tiered Foster Care			\$ 750,000.00	
Implementation				\$ 47E 000 00
YCPRT	4	4		\$ 475,000.00
Total	\$1,007,411.86	\$ 2,128,753.30	\$ 8,905,866.02	\$ 2,696,750.74

**CAPTA Coordinator:** Denielle Rittinger

## **Address:**

Ohio Department of Children & Youth 246 N. High Street Columbus, Ohio 3215

 $\textbf{Email:} \ \underline{\textbf{Denielle.Ell-Rittinger@childrenandyouth.ohio.gov}}$ 

Website Location: None

## **American Rescue Plan Act Funding**

Ohio continues planning discussions for the use of funds received from the American Rescue Planning Act (ARPA). Activities and funding will support programming in improving risk and safety assessment tools, implementation of CARA Communities of Support, implementation of multidisciplinary teams, screening, family search and engagement, updating systems, enhancing, and supporting interagency collaboration. Discussions have identified the following initiatives which can be supported by ARPA funds.

- CST-Tiered Caseworker Career Pathway
- CST- Consistent Screening Decision
- CST- Reducing Organizational Red Tape

In Federal Fiscal Year (FFY) 2023, the Ohio Children's Trust Fund (OCTF) utilized the Community Based Child Abuse Prevention supplemental funding provided through the American Rescue Plan Act (ARPA) to bolster prevention funding at the local level, enhance funding for current initiatives, and develop and implement new initiatives to support families and prevent child abuse and neglect. Emphasis on diversity, equity, and inclusion, as well as addressing, as able, poverty's impact on families, was also integrated into this approach and informed by the OCTF's current strategic plan. Upon the second year of implementation of the ARPA fund activities, OCTF was successful in implementing several different projects utilizing these funds.

As previously mentioned, historical OCTF funding could only support a portion of the breadth of services needed throughout the state, and with this investment of supplemental CBCAP funding, the Trust Fund has been actively working to bolster and expand current initiatives, as well as invest in timely, new initiatives to further strengthen families.

During FFY 2023, the OCTF funded pre-petition legal representation services, concrete supports for families engaged in prevention programs, Tripe P Online Program and Statewide Expansion, innovative prevention projects at the regional level, child advocacy primary prevention projects, as well as expansion of the Family Success Network. For pre-petition legal representation services, the OCTF collaborated with Ohio's Court Improvement Project and Children's Justice Act program to provide legal services for families identified as at-risk of having their children removed by the county public children services agency in Cuyahoga and Erie Counties. The OCTF also offered Ohio's 8 Regional Child Abuse and Neglect Prevention Councils and other grantees providing child abuse prevention services with an opportunity to provide concrete supports to families receiving child abuse prevention services across the state. These same regions also worked with their grants partners to provide families with innovative prevention programs which may not be supported on a program clearinghouse but have demonstrated promising outcomes and benefits for families. OCTF also continued to provide the Triple P Online Program at no cost to all families across Ohio, as well as supporting ongoing professional capacity building in the Triple P model. Finally, the OCTF utilized ARPA funds to support child advocacy centers in implementing primary prevention programs, as well as expanded OCTF's Family Success Network for four additional sites.

In looking towards FFY 2024, OCTF will streamline its use of ARPA funds for prevention services by focusing exclusively on the continued implementation of the Family Success Network, capacity building for Triple P Positive Parenting Program, and the provision of economic and concrete supports for families engaged in regional prevention programs.

## **VII. Statistical and Supporting Information**

## a. CAPTA Annual State Data Report Items:

#### **Child Protective Service Workforce**

• Intake or reports filed in the previous year: 462

Screening of such reports: 851
Assessment of such reports: 2708
Investigation of such reports: 2708

Data on the education, qualifications and training of personnel and demographic information of personnel (section 106(d) (10) (A-C))

Ohio has statutorily mandated educational requirements for child protective services casework staff hired after October 2000. Pursuant to Section 5153.112 - Ohio Revised Code | Ohio Laws, caseworkers must possess a bachelor's degree in human services-related studies at the time of hire; have a bachelor's degree in any field and been employed for at least two years in a human services occupation; have an associate degree in human services-related studies; or have been employed for at least five years in a human services-related occupation. Individuals hired without a bachelor's degree in human services-related studies are required to obtain a job-related bachelor's degree within five years of the date of hire. Requirements for advancement are county defined.

Training requirements for caseworkers are outlined in <u>Section 5153.122 - Ohio Revised Code | Ohio Laws</u> and <u>Rule 5101:2-33-55 - Ohio Administrative Code | Ohio Laws</u>. Caseworkers are required to complete core training within the first year of employment and 36 hours of training each year thereafter. Caseworkers are also required to complete domestic violence and human trafficking trainings within the first two years of employment.

Training requirements for supervisors are outlined in Section 5153.123 - Ohio Revised Code | Ohio Laws and Rule 5101:2-33-56 - Ohio Administrative Code | Ohio Laws. Supervisors are required to complete supervisory core training within the first year of continuous employment as a PCSA supervisor. After the first year of continuous employment, supervisors are required to complete 30 hours of training annually in areas relevant to the supervisor's assigned duties. Supervisors are also required to complete domestic violence and human trafficking trainings within the first two years of becoming a supervisor.

Training records for individual CPS personnel are maintained by the county agency through the Child and Adult Protective Services (CAPS) Learning Management System (LMS) that will manage access to learning content. Although this system has the capability of tracking the education, training and demographic

information for county agency staff participating in training, the fields for collecting this information are not required.

Some education and demographic information on the statewide CPS workforce have been entered into individual person records created in Ohio CCWIS. However, this is not mandatory information for a person record, and is not included for all caseworker person records entered by each agency. The following tables reflect the available socio-demographic and educational level data of protective services caseworkers that is accessible from the system:

RACE	# EMPLOYEES
Multi race	7
Asian	0
African American	121
Other Pacific Islander	0
White	490
Undetermined	103
Unknown	102
Null	2200
Total	3024

AGE	# EMPLOYEES
20-30 Years	218
31-40 Years	193
41-50 Years	126
51-60 Years	68
61 Years & Over	12
Missing Data	2407
Total	3024

GENDER	# EMPLOYEES
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Male	249
Female	1656
Unknown/Null Data	1119
Total	3024

The average caseload for child protective services workers responsible for intake, screening, assessment, and investigation of reports (section 106(d)(7)(B))

Caseload and workload requirements are defined by each county, and not tracked at the state level. For this reporting year, Ohio again used Ohio CCWIS data to report workload data. When compiling this information, it was noted that personnel data fields are not mandatory, and are frequently left blank. In addition, counties use different nomenclature to identify work units. Some counties use generic categories (e.g., Intake, Assessment, Ongoing) and others use county specific categories (e.g., Unit A, West Section, FAS 1).

As recorded in Ohio CCWIS (taking into consideration the inconsistencies with data recording noted above), the average caseload for an Intake Worker (screening, assessment/investigation) as of September 30, 2023, was 8.29 cases.

The average number and the maximum number of cases per worker and supervisor (section 106(d)(10)(D))

As a state-supervised, county-administered CPS system, staffing and workload policies are established by local agencies.

The number of children referred to child protective services under policies and procedures established to address the needs of infants born with and affected by illegal substance abuse, withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder (section 106(d) (15)

There are data fields in Ohio's CCWIS that capture information on children alleged at the time of the referral, to be affected by illegal substance abuse, withdrawal symptoms, or Fetal Alcohol Spectrum Disorder (FASD). This reporting information continues to improve and transform as we learn more about this population and how to treat the families and children. Ohio's enhancements to Ohio SACWIS have been deemed federally compliant with the Comprehensive Addiction and Recovery Act (CARA) of 2016. Changes were made to Ohio's SACWIS system in October of 2016, which required users to answer a series of CARA related questions and flagged those cases for tracking purposes at the intake level and reassessed throughout the continuum of the case. Enhancements to data retrieval have occurred each year since improving Ohio's ability to identify and serve this vulnerable population.

The number of children alleged to be impacted by FASD, illegal substance abuse or withdrawal symptoms upon referral for FFY 2023 was 8,490. Of those referrals 2,099 were screened in and assigned

to Ohio's traditional pathway. There were 3,604 referrals screened in and assigned to Ohio's alternative response pathway. 2,700 referrals were screened out.

Of the 8,490 substance related referrals; 7,642 were identified as CARA infants.

The number of children under the age of three involved in a substantiated case of child abuse or neglect that were eligible to be referred to agencies providing early intervention services under part C of the Individuals with Disabilities Education Act (IDEA), and the number of these children referred to these early intervention services (section 106(d) (16))

Ohio identifies children eligible for referral to early intervention services under part C of the Individuals with Disabilities Education Act in Ohio CCWIS based on age and child abuse or neglect report disposition. Ohio SACWIS generates an "action item" for every case where the identified child victim in a substantiated child abuse or neglect report was under the age of three (3).

In FFY 2023, 4,444 children under age three (3) who had a substantiated child/abuse/neglect report were eligible to receive services under Help Me Grow.

#### **Juvenile Justice Transfers**

Ohio's juvenile offender cases are processed through the local juvenile court system. Based upon the alleged crime committed, a decision is made to either handle the case in the adult criminal justice system or through the juvenile court. The transfer of youth into the adult system is determined by either a judicial waiver, statutory exclusion, or through a prosecutorial waiver.

The department does not track juvenile offenders who may be tried in the adult court system. However, data is collected in Ohio CCWIS on the number of youth who are discharged from local PCSAs into a commitment/custodial status with the Ohio Department of Youth Services (DYS). This would follow adjudication on a delinquent offense, which requires a secure correctional setting.

In FFY 2023, 33 children exited from PCSA custody to commitment to the DYS. This reflects the total of legal custody status terminations recorded with a reason of 'Custody to DYS'. This does not include the number of children that are committed to DYS that are not in the legal custody status of a PCSA or not in the children services population.

## **Education and Training Vouchers**

Ohio	Total ETVs Awarded	Number of
		New ETVs
Number: 2022-2024 School Year	342	146
(July 1, 2022 to June 30 2023)		
Final: 2023-2024 School Year	215	59
(July 1, 2023 to June 30, 2024)		

<sup>\*</sup>In some cases, this might be an estimated number since the APSR is due on June 30, the last day of the school year.

## **Inter-Country Adoptions**

In Federal Fiscal Year 2022, 605 of the children in foster care for at least one day were reported as previously adopted. Only seven of the children have a birth country listed that is not the United States. It should be noted, however, that of the remaining children, 345 do not have their birth country listed. The primary removal reasons for the children with previous adoptions were:

Removal Reason from Adoptive Placement	Frequency
Abandonment	4
Alcohol Abuse of child	0
Alcohol Abuse of Parent	5
Caretaker's Inability to Cope	25
Child's Behavior Problems	131
Custody Relinquishment – Treatment	2
Death of Parent(s)	5
Delinquency	46
Dependency	218
Drug Abuse of Parent	7
Emotional Maltreatment/Mental Injury	5
Incarceration of Parents(s)/Guardian/Custodian	2
Inadequate Housing	0
Intimate Partner Violence	0
Neglect	57
Physical Abuse	42
Relinquishment	17

Removal Reason from Adoptive Placement	Frequency
Sexual Abuse	22
Sibling Removal	0
Unruly Status offender	14
Child's Disability	2
Custody Relinquishment- Mental Health Treatment	1

The current permanency goal (or last goal if the case is now closed) for those same children was:

Permanency Goal	Frequency
Adoption	180
Independent Living/Emancipation	46
Maintain in own home	65
Legal custody to Relative/Kinship	22
PPLA	32
Return Child to Parent	169
No goal listed (likely short term placements)	91

The age of the child when the previous adoption finalized:

Age of Child	Frequency
0	33
1-3	181
4-6	153
7-9	115
10-12	90
13-15	30
16	3

## **APPENDICES**

**Appendix A** Information Systems Assessment of Current Performance in Improving

Outcomes or Systemic Factors

**Appendix B** Training and Technical Assistance: 2020-2024 CFSP

**Appendix C** Citizen Review Panel Annual Report

**Appendix D** Response to Citizen Review Panel Annual Report