MISSISSIPPI DEPARTMENT OF CHILD PROTECTION SERVICES

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ANNUAL PROGRESS and SERVICES REPORT

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Governor, State of Mississippi
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I. Organizational Structure

Executive Summary

The mission of MDCPS is to *protect children, support families, and encourage lasting family connections*. This mission is driven by a vision that Mississippi's children will grow up in strong families, safe from harm and supported through partnerships that promote family stability and permanency.

State Agency Administering the Programs

The Mississippi Department of Child Protection Services (MDCPS) is Mississippi's lead child welfare agency, responsible for administering programs under Title IV-B and Title IV-E of the Social Security Act. Mississippi law assigns MDCPS responsibility for "[t]he programs and services [formerly] provided by the Office of Family and Children's Services of the Department of Human Services."[1] This statutory authority includes primary responsibility for protective services for children, foster care, adoption, interstate compact, and licensure.[2]

MDCPS is led by a commissioner who is appointed by the Governor, and who exercises complete and exclusive operational control of the Department's functions, except where she and the Executive Director of The Mississippi Department of Human Services (MDHS) agree to share administrative support services.[3]Currently, pursuant to a memorandum of understanding between the two agencies, MDHS provides administrative support services for MDCPS in the following areas: accounts payable, accounts receivable, purchasing, travel reimbursement, employee benefit coordination, subgrant monitoring and audit, cost allocation, property management, and network and hardware information technology services. MDCPS maintains sole responsibility for its programmatic functions. MDHS will no longer provide support to MDCPS effective July 1, 2023. In 2023, the Mississippi legislature acted to fully separate MDCPS from the Mississippi Department of Human Services and enacted legislation to authorize MDCPS with responsibility for child welfare services. See H.B. No. 1149.

MDCPS's executive leadership team includes a Commissioner, Principal Deputy Commissioner/Chief of Staff, Deputy Commissioner of Well-Being, Permanency, & Safety, Deputy Commissioner of Administration, Chief Legal Counsel, Inspector General, Deputy Administrator of Human Capital, Deputy Commissioner of Clinical Supports, Director of

[1] *Id.*
[2] Miss. Code Ann. 43-1-51.
[3] Miss. Code Ann. 43-26-1.

External Affairs, and Chief Information Officer. Andrea A. Sanders serves as commissioner. A chart of the agency's structure is located under Attachment A.

PREDOMINANT AREAS OF MDCPS

Commissioner: The MDCPS Commissioner leads the almost 1,600-member state child welfare agency in its mission to protect Mississippi's most vulnerable children. As a member of the State of Mississippi Governor's Cabinet, the Commissioner acts as a liaison with both legislative and governmental partners and stakeholders to align agency initiatives with state-wide human service efforts. The Commissioner coordinates agency efforts to build both public and private partnerships and strengthen community resources for children and families of Mississippi.

The Commissioner leads the agency's Executive Leadership Team in working diligently to identify and address challenges in the child welfare system and striving to reach better safety, permanency, and well-being outcomes for children and families.

Principal Deputy Commissioner/Chief of Staff: The MDCPS Principal Deputy Commissioner (Chief of Staff) reports directly to the Commissioner, monitoring and coordinating the efforts of the Executive Leadership Team to ensure that agency unit initiatives and efforts are aligned with the overall mission of protecting Mississippi's children.

The Chief of Staff internally supports the Commissioner's efforts to build both public and private partnerships and strengthen community resources for children and families of Mississippi. The Chief of Staff assists the agency and unit leaders in strategic planning and collaborative challenge resolution to maximize the efficiency and effectiveness of the agency. The Chief of Staff focuses on building processes and administering programs to help move the agency to a higher level of service for those children and families served by MDCPS.

Deputy Commissioner of Clinical Supports: The Deputy Commissioner of Clinical Support reports directly to the Chief of Staff and leads MDCPS' efforts related to areas of training, Centralized Intake, foster care licensure, congregate care licensure, and support related to the establishment and maintenance of the private provider network as well as a statewide Director of Centralized Intake and Assessment.

Clinical Support Operations: The Director of Operations for Clinical Support works directly with the Deputy Commissioner of Clinical Support to assist in the logistics and operational activities for all Clinical Support services. This includes execution of project management, special projects and research of new programs and initiatives to improve efficiency, effectiveness, and productivity in clinical support operations. The primary goal is ensuring enhancement of clinical support processes, overall compliance with agency and

federal mandates while improving service delivery and progress toward the goals and mission of the agency.

Centralized Intake and Assessment: The Director of Centralized Intake and Assessment is an additional area of Service Area supervision that reports directly to the Deputy Commissioner of Clinical Support. This office and the staff associated with its efforts oversees and manages operations of the Mississippi Centralized Intake and Assessment Center and staff dedicated to implementing these responsibilities at the intake and reporting level.

The center is centralized at the state office and has the responsibility of receiving, screening, and entering all communications of child abuse and neglect into the automated child welfare information system for secondary review and screening and assignment utilizing an established Structured Decision-Making model. Staff working at the intake center also have the responsibility for initial notifications to the Human Trafficking Task Force for intakes regarding such allegations.

The Office of Clinical Support also manages the Education Services Unit which provides guidance and support to ensure the educational needs of children in foster care are addressed timely and appropriately. The Director of Permanency Support Services leads MDCPS' Independent Living (IL) program. Additionally, there is a division director that manages MDCPS' efforts regarding state and federal compliance for Victims of Trafficking.

Director of Training: The Office of Training is directly overseen by the Deputy Commissioner of Clinical Support and is responsible for the development and delivery of both Pre-Service Training and In-Service Training for all onboarding and current staff located in offices and facilities across the state related to all facets of MDCPS' day-to-day practice. The applied Professional Development curriculum also includes targeted Supervisor Training, Leader Development Training, as well as the deployment of Practice Model Coaches, where needed and available.

Office of Training responsibilities also include tracking and monitoring compliance with all training requirements, new training program development, producing training reports, and managing training contracts with outside agencies. This office is also responsible for the initial and ongoing Foster Parent Training for all MDCPS prospective and active Foster and Adoptive Parents.

The Director of Foster Care Recruiting reports directly to the Deputy Commissioner of Clinical Support and is responsible for the development and management of Foster Care Recruiting.

The Director of Congregate Care Licensure oversees MDCPS' efforts to license qualified residential facilities and manages any changes in such licensures. Licensure staff also conduct annual compliance-based reviews of each licensed facility and ensure that all facilities maintain high-quality standards to ensure the safety of the children and youth served in those settings.

The Director of Interstate Compact on the Placement of Children (ICPC) has the primary purpose of ensuring that children placed out-of-state are placed with caregivers who are safe, suitable, and able to meet the child's needs in alignment with ICPC policy. The ICPC unit requires an assessment of these factors before a child is placed out of state.

Wendy's Wonderful Kids® - Staff from the Office of Clinical Support serve as technical assistance and support for efforts of the Wendy's Wonderful Kids® program. Through Wendy's Wonderful Kids®, MDCPS administers funding and programming to adoption agencies to engage recruiters dedicated to finding adoptive homes for children in foster care in Mississippi and across the U.S.

Continuum of Care Coordination – This office manages the private provider contracting network's efforts through a system of service delivery and acts as a liaison between the private provider network and MDCPS in matters concerning day-to-day contractor service delivery requirements and expectations.

Deputy Commissioner of Well-being, Permanency, & Safety: The Deputy Commissioner of Child Well-Being, Permanency, and Safety reports directly to the Chief of Staff and provides leadership to MDCPS' frontline and programmatic personnel through an Assistant Deputy Commissioner (ADC) for each of the seven designated Service Areas of the state.

ADCs of Child Well-Being and Permanency Service Areas report directly to the Deputy Commissioner for Child Well-Being, Permanency, and Safety and oversee and support the day-to-day functions of their respective geographic Service Areas. Each Service Area has responsibility for the following Well-Being and Permanency disciplines:

- In-Home Services;
- Foster Care;
- Resource Development;
- Permanency Support Services; and,
- Permanency Specialists (Guardianship and Adoption).

ADC for Policy and Practice Supports Service Areas reports directly to the Deputy Commissioner for Child Well-Being, Permanency, and Safety. Policy and Practice ADC has primary responsibility for managing Therapeutic and Prevention Services. This includes

prevention services subgrants and contracts and coordinating the delivery of services to children and families served by MDCPS through various community-based programs.

Permanency Support Services leads MDCPS' state office support units for both termination of parental rights and adoption, and a specialized staff of adoption caseworkers across MDCPS' seven (7) Service Areas.

Policy and Practice Supports ADC also has responsibility for assisting frontline staff with the coordination and tracking of medical services for children in custody and locating placement for children with therapeutic needs. This may include the occasional coordination of interpreter services, who assist frontline staff serving children or families needing services in a language other than English.

The **Foster Care Licensure** staff licenses foster homes (relative and non-relative). These licensure workers have responsibility for licensing new MDCPS foster homes within prescribed time frames, performing periodic checks of existing MDCPS foster homes, renewing expiring foster home licenses, and assisting frontline staff with identifying available placements for children who enter custody.

ADCs for Child Safety Service Areas report directly to the Deputy Commissioner for Child Well-Being and are assigned to one or more of the seven (7) geographic Service Areas. These ADCs have the primary responsibility for managing all of MDCPS' various types of investigations. Child Safety ADCs are assigned at least one Investigations Director assigned to each of the seven Service Areas. It is the Investigations Director's role to deploy and direct staff dedicated to conducting investigations in their assigned Service Area in carrying out the following tasks:

- Child Protective Services (CPS) Intake Investigations;
- Investigations regarding Maltreatment in Care; and,
- Human Trafficking Investigations.

Refugee and Immigration Administration: Individuals outside the United States seeking admission as a refugee under Section 207 of the INA are processed through the U.S. Refugee Admissions Program (USRAP), which is managed by the Department of State in cooperation with the Department of Homeland Security (DHS) and Department of Health and Human Services (HHS). Those admitted as refugees are eligible for U.S. government-funded resettlement assistance.

Deputy Commissioner of Finance and Administration: The Deputy Commissioner of Finance and Administration reports directly to the Chief of Staff and has responsibility for all general

accounting related MDCPS functions, finance, procurement, administrative services, revenue maximization, and eligibility determinations.

Chief Financial Officer (CFO): The CFO reports directly to the Deputy Commissioner of Finance and Administration and is responsible for tracking cash flow and financial planning of the accounting department, including responsibility for the accounting professionals who perform operational functions. The following disciplines are overseen directly through the office of the CFO:

- **Cost Allocation** staff are responsible for the identification of allowable expenditures and ensuring the utilization of federal funding is maximized. This office also confirms that all allocation of costs are accurately determined and directed to the correct benefiting program(s). In order to ensure these allocations are consistent and uniform throughout the agency, case manager and supervisor salaries, along with related direct and indirect administrative costs, are allocated to funding grants using a Random Moment Sampling (RMS) process.

- **Budget and Grants Management:** This office is responsible for controlling the availability of funds and cash management for expenditure by the agency. Grants management activities and subgrant claims activities are also conducted by this office.

  Budget and Grants Management is also responsible for the financial management of externally sponsored programs, including the preparation and submission of related financial reports and invoices, cash collections, expenditure compliance review, cost transfers, and program closeout.

- **General Accounting:** includes all past, present, and future fiscal activities to include Accounts Payable, Accounts Receivable, Payroll, and Travel.

  Accounts Payable is responsible for working with various divisions to ensure that suppliers, service providers, and various other entities receive payments due to them. Accounts Receivable is responsible for the process of ensuring that customers pay for services or products received from the agency.

  Payroll staff are responsible for ensuring all MDCPS employees are paid correctly for hours worked in a timely manner and all taxes, insurance premiums, and other deductions are taken deducted from employees' checks according to state and federal rules and regulations. Travel staff are responsible for ensuring all MDCPS employees are reimbursed for travel expenses that they may have accrued while providing services on behalf of MDCPS.

- **County Funds Management:** County funds aid clerical and management staff with the financial aspects of foster care and the responsibilities that go along with providing financial sustainability, such as record keeping, and financial transactions within an individual county while ensuring that a transparent system of financial control adheres to all generally accepted rules of accounting.

- **Chief Procurement Officer (CPO)** also reports directly to the agency CFO. This office is responsible for buying, purchasing, renting, leasing, or otherwise procuring any commodities, equipment, services, or construction. It also includes all functions related to contract procurement, and subgrant procurement, as well as the obtaining of any commodities, equipment, services, or construction, including a description of requirements, selection, and solicitation of sources, preparation and award of contract, and all phases of contract administration.

- **Office of Eligibility:** The Director of Eligibility reports directly to the CFO and is responsible for oversight of the determination of appropriate funding sources to be utilized for children and youth entering MDCPS custody. Eligibility also re-determines annual eligibility for those who have been previously determined to be IV-E eligible. Eligibility staff also make Medicaid eligibility determinations for children and youth in MDCPS custody.

Administrative Services: The Director of Administration supervises staff and provides support to the following MDCPS Divisions: property, fleet management, state office and county office facilities management, emergency management, constituent services, the oversight of administrative assistants (Call Center and Executive), mailroom and supplies, and procurement of vendor quotes for all State Office purchases to be made within state purchasing guidelines.

This office oversees the establishment and monitoring of county relationships and leasing, supervision of agency property, performing asset audits annually in all agency facilities, inputting of new orders received in MAGIC to ensure each asset is tagged with a unique identifier, and managing all other property processing dispositions.

The **Director of Facilities** manages staff involved in conducting facility inspections to ensure safety and functionality, assists state and county offices with acquiring new property (IT and Furniture), works with county officials to ensure maintenance issues are addressed in a timely manner, removal of dispositioned property, transporting of dispositioned property to Office of Surplus Property.

Fleet Management and Emergency Management is responsible for, but not limited to, the management of state office and county office safety and evacuation plans, AED defibrillator inspections, ADA personal emergency evacuation plans, monthly fire and safety equipment inspections, up-keep and maintenance to agency vehicles, process and management of fleet reservations, processing of Fuelman receipts for vehicle usage.

Deputy Commissioner-Office of General Counsel: MDCPS's General Counsel reports directly to the Commissioner and serves as chief legal officer and is responsible for the Office of Legal Counsel. General Counsel handles all legal matters affecting MDCPS' operations and works with programmatic areas and senior leadership to develop agency policy and implement policy initiatives. General Counsel also coordinates with the Office of the Attorney General and outside counsel on litigation matters.

The Office of General Counsel is supported by the Deputy Commissioner/General Counsel, as well as multiple staff attorneys and other Legal support staff. The principal functions of General Counsel are detailed below:

Administrative Hearings: Administrative Hearings conducts all MDCPS administrative agency hearings, including but not limited to employment matters, Foster Parent grievances, central registry appeals, and licensure appeals. Administrative Hearings also drafts recommendations and manages all aspects of administrative hearings.

State Director of Termination of Parental Rights (TPR)-Adoption-KinGap: The State Director of TPR/Adoption/KinGap oversees the termination of parental rights suits, adoption cases, and related placement matters for MDCPS statewide. The State Director of TPR/Adoption/KinGap also coordinates with the legal team and agency employees regarding these matters.

Privacy and Civil Rights: Privacy and Civil Rights addresses issues regarding the privacy rights of children in custody and provides guidance with respect to civil rights issues raised related to MDCPS custody of children, as well as with respect to employee issues in these areas. Privacy and Civil Rights also coordinates with the MDCPS legal team regarding these claims and lawsuits and with outside legal counsel.

Policy Initiatives-Service Improvements reviews current policy for areas of improvement, drafts amendments, drafts new policy, assists with implementing policy, and works with MDCPS's Human Resources and Well-Being Areas to suggest and implement improvements. Legal authority with regard to all state plans and policy-practice alignment are also maintained through this office.

General Legal Support: General Legal Support provides legal representation and authority to all Service Areas of the state. General Legal Support also offers guidance to MDCPS employees, prepares MDCPS employees for court appearances, oversees and handles litigation other than TPRs and Adoptions, and coordinates with outside counsel. Legal language for all MDCPS contracts, Memorandums of Understanding, etc. is reviewed and approved by General Legal Support as well.

Director of Human Capital: The Director of Human Capital reports directly to the Chief of Staff and leads efforts to meet the needs of all MDCPS staff at every stage of their employment experience. The Director of Human Capital oversees both the Office of Human Resources as well as the Office of Workforce Development and Well-Being.

Human Resources: The Director of Human Resources is responsible for coordinating employee benefits and resources such as the agency's employee assistance program, the state agency health insurance and multiple supplemental benefit programs. Human Resources staff provide orientation for new employees, coordination with partner entities for employee support such as the Public Employees Retirement System and MS Deferred Compensation Program and employment verification services.

Human Resource Staff develop and maintain human resources policies and procedures for the agency as well as developing training for staff on human resource-related activities. Human Resources Staff are located throughout the state to provide support and assistance with all human resource functions.

Within Human Resources, the Fingerprint and Background Unit is responsible for conducting and processing background checks for the hiring of potential employees, interns, and volunteers in coordination with Core Processing staff. This unit also provides fingerprinting and background checks for Foster Parents and foster home household members licensed through MDCPS and through contracted providers. The Fingerprint and Background unit maintains the Mississippi Central Registry and processes requests for background checks from other child welfare partners statewide.

Human Resources **Core Processing** staff carry out all daily Human Resources transactions, to include hiring, separation, lateral transfers, etc., in compliance with State Personnel Board requirements. This office also processes transactions that may arise from measures deemed necessary through Internal Affairs investigations or other compulsory outcomes stemming from additional investigational sources.

Embedded in the Office of Human Resources, **Human Resources Compliance** is responsible for coordinating MDCPS's Family Medical Leave Act, Worker's Compensation and Americans

with Disabilities Act benefits and rights. Compliance staff are also responsible for time-keeping processes, maintaining and monitoring the agency's flex schedule options, and review and documentation of disciplinary actions.

Workforce Development and Well-Being: The Director of Workforce Well-Being is responsible for coordinating recruitment and retention activities to stabilize the workforce and create a positive work culture. Workforce Well-Being staff are responsible for MDCPS's participation in job fairs and interaction with the state's universities and colleges as well as the centralized hiring process of MDCPS.

Workforce Well-Being staff promote healthy, positive employee relations by supporting morale and a positive work culture by coordinating employee recognition events and awards, conducting employee engagement assessments, providing conflict resolution assistance and bereavement support to employees.

Executive Director of External Affairs: The Director of External Affairs reports directly to the Commissioner and directs the agency's Legislative agenda, collaborates with community stakeholders, and advocates on behalf of the agency. The Director of External Affairs serves as the agency spokesperson when the Commissioner is unavailable and functions as the Public Relations Team Lead. The entire team works to create informational messaging to stakeholders including agency employees, families the agency serves, judicial and government officials, and the general public.

The office of the Director of External Affairs oversees efforts around communications, social media, Constituent Services, and Legislative Affairs. Those offices are defined below:

Communications: The Director of Communications coordinates internal communications by creating content for newsletters, coordinates with the Information Technology (IT) department to keep the MDCPS website current and serves as an agency liaison with the MACWIS development team. This office is also responsible for website content management and internal communications through regular newsletters and digital mediums.

Social Media: This office is operated by the Director of Public Relations and Marketing who is responsible for maintaining a database of media contacts and digital media for MDCPS employees. This office also creates an annual calendar of content based on weekly analysis of social media analytics. This individual also creates and manages content for social media focusing on external facing messaging, cultivates media relationships and serves as the official photographer and videographer for the agency. This office also handles graphic design for collateral materials including business cards, posters, invitations for events, and other special

projects as needed. This manager helps coordinate special events for the Adoption Unit and Motivational Mavericks, an employee recognition project.

Constituent Services: The Director of Constituent Services responds to external constituents and stakeholders regarding issues and questions with agency policy and procedures. This Manager refers constituents to appropriate staff members for information and updates on individual cases. This Manager works with an administrative assistant who keeps accurate records of calls and other contacts that arrive in the Constituent Services Office. Constituent Services staff also respond to constituent issues regarding agency policy, frontline services, and various questions from interested community stakeholders.

Legislative Affairs: The Director of Legislative Affairs collaborates with the Commissioner, agency Deputies, and the Office of Legal Counsel to create a Legislative agenda and budget request for the annual Legislative session. This office serves as a liaison with legislative representatives and senators to draft laws benefiting the agency and, by extension, Mississippi's families with children. The Legislative Affairs Director attends committee meetings/hearings and cultivates relationships to build consensus on preferred legislation.

Chief Information Officer: The Chief Information Officer reports directly to the Chief of Staff and oversees all operations of the Information Technology (IT) Department. This includes managing IT staff and system support functions including planning and implementation of new systems, managing technical assistance, selecting, and procuring required technologies, directing IT projects, monitoring cybersecurity and compliance, Data Governance, and setting the technical direction for MDCPS.

IT also manages and implements Application Development Services, Application Support Services, IT Project Management Services, End User Support Services, Network Support Services, Information Security and Compliance Services, and Technical Asset Management Services.

IT also features dedicated support and developmental units for both the Mississippi Automated Child Welfare Information System (MACWIS) and the Comprehensive Child Welfare Information Systems (CCWIS). The IT Department also has the responsibility of developing, implementing, securing, and supporting all hardware, software, and applications utilized by MDCPS.

Information Security Department: This department defends the agency against the latest cyber threats. The head of this department serves as the agency's Chief Information Security Officer (CISO). Staff performs regular penetration testing of the MDCPS network. Staff are responsible for the development of a vulnerability management program and an incident response plan.

CISO leads regular tabletop exercises involving cross-functional teams, including other division-level directors and staff, for incident preparedness. Staff have the responsibility of educating all MDCPS employees about cyber threats and cyber hygiene by developing and managing the agency's security awareness program. The department has the responsibility of advising other departments on information security best practices. Department staff advise and make recommendations on the acquisition of information security products and tools. Department staff collaborates with the Data Management Department on data privacy issues. It also develops partnerships with industry, state, and federal stakeholders for intelligence exchange. The department is responsible for the retention of cybersecurity knowledge and expertise. This includes the development of a team of cybersecurity analysts in the department, as well as developing the aggregate level of cybersecurity knowledge within the MIS division.

IT Audit and Policy Department: This department develops IT internal controls and monitors for compliance. Staff reviews IT operations and assesses them for risk. Staff develops IT policy and ensures policy aligns with industry best practices. Department head works closely with the CIO on IT governance strategy. Staff develop risk-adjusted IT governance policy frameworks to achieve business outcomes while maintaining compliant use of IT resources. Staff develops IT principles, policies, standards, procedures, and guidelines for use in risk-adjusted governance frameworks. Provides a comprehensive view of the risk landscape to identify the right IT governance policies at the right time and provides effective oversight and assurance to the agency on the use of IT assets and resources. Department staff actively contribute to business continuity planning and reviews plans for risk. Department staff also actively contribute to disaster recovery planning and reviews plan for risk. Risk mitigation plans and strategies are developed for identified risks.

IT Procurement and Property Department: This department handles the procurement of products and services from ITS EPLs. It also manages the renewal process for IT hardware maintenance and software support, procurement of items from negotiated and competitive bid contracts, and the routine procurement of supplies. Department staff handle ITS planned purchases for procurements that exceed EPL thresholds but do not exceed $1M, as well as any sole source technology procurements. This department will manage the MIS procurement card usage and required reporting for usage. Department staff collaborate with stakeholders on the development and administration of RFPs, and conduct procurement functions and reporting in MAGIC. Staff hold DFA certifications such as Certified Mississippi Procurement Agent and Certified Mississippi Fleet Manager. Department staff manage the intake and disposal of IT assets, as well as the transfer and delivery of IT assets. Staff collaborates with MDCPS Property staff during property audits.

The Network Services Department: This department is responsible for supporting network infrastructure, mission-critical systems, and end users. The director of this department

collaborates with other division level directors and staff to ensure the agency's technical needs are effectively met. The director manages highly technical teams and technical tasks. This director works closely with the CIO and may brief executive staff on technical issues facing the agency. Network Services is composed of the following three branches:

The Enterprise Applications and Operations Department: This department is composed of the Application Development and Support Branch, Quality Assurance Branch, Project Management Office, and Data Management Team. The director of this department collaborates with other division level directors and staff to ensure that applications are designed and performed in a manner that meets agency objectives. The Enterprise Applications and Operations director works closely with the CIO and may brief executive staff on matters involving the agency's mission-critical applications. This director also works with leadership across the agency on high priority technical projects and data management issues. This Department oversees the building, maintenance, enhancement, support, and delivery of agency applications. It also manages the data used by enterprise applications, and the data produced by enterprise applications.

Enterprise Architecture and Planning Department: This department seeks to guide the agency through transformation and optimization initiatives. A main objective is to facilitate alignment between agency objectives and IT. Staff members evaluate technologies and assess applicability within the agency. They identify organizational requirements for the resources, structures, and cultural changes necessary to support agility and adaptability. Staff helps the enterprise find the right balance between risk and agility. A major duty is to understand disruptive technical forces and the agency's objectives that are susceptible to digital transformation in order to effectively guide technical investment decisions. Staff scan emerging technologies and the business ecosystem for major disruptive technology and non-technology trends that affect the agency. Staff members provide perspective on the readiness of the organization to change and innovate and support the formation of strategy. They track and apply innovative technologies, anchoring them in the business and operating model to assess their potential, and use agile and lean approaches to evolve and manage innovation. Staff also lead analysis of the IT environment to detect critical deficiencies and recommend solutions for improvement.

Inspector General: The Office of Inspector General reports directly to the Chief of Staff and serves as a critical check and balance for timely and appropriate service delivery in all areas of MDCPS operations. The Office of Inspector General oversees Continuous Quality Improvement, Internal Affairs Investigations, Internal Audits, Contract and Subgrant Monitoring, and Reporting.

Continuous Quality Improvement (CQI): The Director of CQI manages a staff of quality assurance reviewers across MDCPS's seven Service Delivery Areas delivering various forms of Technical Assistance in several disciplines within MDCPS. CQI staff perform periodic

and ongoing case reviews that include Foster Care Review which fulfills the 6-month administrative review requirement for children who remain in foster care and Regional Reviews utilizing the federal onsite monitoring system. They are also responsible for initiating, conducting, and offering findings for Child Fatality Reviews and Safety Reviews supporting Maltreatment In Care investigations and review screened-out Maltreatment In Care reports to ensure adequate screenings were conducted. These reviewers are supervised by case review supervisors. Programmatic CQI is also conducted by this office in the form of annual quality assurance contract reviews on congregate care facilities to assess their compliance in service delivery and pursuant to their contracts and scopes of services.

Internal Affairs Investigations: This unit investigates complaints or offenses committed by MDCPS employees and/or contractors. This unit also participates in MDCPS' efforts regarding state and federal compliance for Victims of Trafficking.

Internal Audits: This unit assists MDCPS in accomplishing its objectives by evaluating and improving the effectiveness of the organizations' governance, risk management, and internal controls.

Contract and Subgrant Monitoring: This unit ensures funds awarded to sub-grantees are used for the intended purpose of the award, safeguards public monies to the greatest extent possible, and provides guidance to sub-grantees in establishing and maintaining sound business accounting procedures.

Reporting: The Reporting Unit within the Office of Inspector General has responsibility for overseeing the development, validation, and submission of reports to external partners, which includes, but is not limited to, all federal reporting submitted to the Children's Bureau including federally required reports on the Title IV-B Child and Family Services Plan (CFSP), Annual Progress and Services Report (APSR), Adoption and Foster Care Analysis and Reporting System (AFCARS), National Child Abuse and Neglect Data System (NCANDS), CFSR-PIP, caseworker contacts, Olivia Y. Compliance Reporting, agency plans, etc. In addition, this unit is responsible for facilitating meetings with the Children's Bureau and collecting appropriate data regarding active missing runaways and fatalities.

PHILOSOPY OF THE STATE

The Mississippi Department of Child Protection Services believes Mississippi's children should grow up in strong families, safe from harm and supported through partnerships that promote family stability and permanency. The philosophy of the agency is to provide for the safety and wellbeing of children first in their own homes if possible and in cases where it is not safe or practical for the child to remain, the agency will work with community connections,

law enforcement, service providers, other state agencies, and the courts to move each child toward the appropriate placement and permanency in a timely manner.

PRIORITIES for CREATING an EQUITABLE CHILD WELFARE SYSTEM

MDCPS is dedicated to making sustainable efforts to advance racial equity and reduce identified disparities in our state's child welfare system. In accordance with program instructions from CB, MDCPS is devoted to address racial equity through the four priority pillars: Prevent Children from Coming into Foster Care, Support Kinship Caregivers, Ensure Youth Leave Care with Strengthened Relationships, Holistic Supports, and Opportunities, and Invest in the Child Welfare Workforce. Below are the intended advances that MDCPS has made during the current program year and is striving towards in the future program year.

Prevent Children from Coming into Foster Care

Mississippi's statutory structure places the authority of removal with the youth court judge, whether that officer is a dedicated youth court judge, a referee, or a chancellor. When an investigation is concluding, or when an investigation indicates that removal may be necessary, MDCPS's frontline staff staffs the case with the judge (or the judge's intake unit), and that court makes the determination. The county prosecutor then carries through shelter, adjudication, and disposition. MDCPS is not represented during those proceedings because the statutes do not identify MDCPS as a party, and the court's perspective on MDCPS's role in the proceedings varies from county.

Dorcas is a program within the Baptist Children's Village that collaborates and partners with MDCPS, as well as other agencies within the State. The Dorcas Program provides support services to families who have been identified by MDCPS as having the need. Services are provided in the home, face-to-face visits, referrals as needed and other support services based on the family's need. Ongoing activities include home visits, referrals, parenting, and transportation. The Provider has conducted training to its staff for work with the Dorcas Program as well as participated in continued training for staff of that agency.

Dorcas Providers has presented the Bright Course Family Skills Curriculum, Trust Based Relational Intervention "TBRI" Training (attended by one MDCPS staff) which included an Intro/Overview of TBRI, Connecting Principles, Empowering Principles, and Correcting Principles. The Institute for The Advancement of Family Support Professionals Modules focuses on Family Goals which is more about the process, Personal Safety for Home Visitors, Home Visiting 102, Home Visitor Skills and Strategies, and Child Development Age 0-3.

Support Kinship Caregivers

MDCPS understands and values the role that kinship caregivers play in raising children throughout our state. Because of this, MDCPS is seeking to make honest and intentional

investments in the support that our kinship caregivers are given. MDCPS has a newly formed partnership with Catholic Charities to address kinship services. Statistics presented by Catholic Charities, Inc. of Jackson stated that 90.3% of participating families who have discharged from the program reported an increase in family stability by an average of 31%. To make a long-term investment for kinship caregivers, MDCPS is working for systemic and equitable changes through policy change for kinship caregivers through working with other state agencies and legislators to implement a subsidized guardianship program. This program provides caregivers with information, referrals, and links to needed legal assistance and services. The agency is aligning its efforts after hearing client testimonies where families are having to choose what types of services to seek because they could be discontinued or there can be a reduction in the assistance provided.

Ensure Youth Leave Care with Strengthened Relationships, Holistic Supports, and Opportunities

MDCPS has the distinct privilege of being able to get firsthand data to assess the perspectives of youth who are currently engaging in the foster care system. While aggregate statewide trends (discussed below in Section III) show a high rate overall of children discharged to permanency within 12 months among those entering care, the data nonetheless indicate potential target populations for whom timely permanency needs improvement as well as for children in care between 12 and 23 months for whom exits to permanency have been consistently below the national goal. MDCPS therefore intends to gain deeper insights into the child welfare system experiences of children who either leave foster care in a timely way or remain in care for longer periods of time. Through the Mississippi Youth Advisory Council, the agency has plans to perform data collection and hear how the agency is doing or what can be done to address racial equity if there are differences in experiences and outcomes for different racial and ethnic groups. This topic will be addressed with youth ages 14-21 participating in the Independent Living Program. In conjunction with basic demographic data collection, and to ensure youth leave foster care better than when they entered, the MDCPS's YTSS division will begin focus groups to determine where gaps in service and data collections lie. Some of the questions that will be posed to staff in efforts to begin focus groups with youth and other invested entities include:

- Who is our current target population?
- Do we have trusting relationships with program participants? And if not, how can we remedy this?
- What kind of data collection and feedback can we track with limited resources?
- How do we define success?
- Will our success contribute to equitable change?

MDCPS's YTSS is also actively engaging with First Place for Youth and Mississippi Youth Voice which works with former youth that have gone through foster care and have experienced

challenges. These organizations highlight both the good and unfortunate things that foster care youth have experienced and allow the youth to come together to discuss their experiences and share how it either remains a challenge or how they overcame those challenges. Through this collaboration, MDCPS's goal is to gain information from former foster care and gauge their experiences and help enhance the experiences for current youth in foster care.

To ensure that youth leave foster care better than when they entered, MDCPS has implemented "whiteboard meetings" with facility providers to strengthen continuum of care for children. From these meetings, one level of care to the next is addressed and how the agency improves processes to make sure that equitable standards and processes are being met. Most of the meetings are not child specific, however, certain children will come to a compromise, and the intention is to meet the needs of all children discussed in these meetings, but also respect the child's own autonomy.

Another distinct way MDCPS seeks to ensure that youth leave foster care better than when they entered is by supporting youth in having normative experiences while in care. MDCPS aims to ensure that youth in the agency's care can enjoy the experiences of all youth. As such, the agency makes every effort to have our youth feel actively engaged in the communities and school. MDCPS hosted a graduation for the graduating class of foster youth to acknowledge their accomplishments.

Invest in the Child Welfare Workforce

MDCPS realizes that one of the biggest and most important investments in the effort to create and prioritize an equitable child welfare system in Mississippi begins with a diverse workforce. MDCPS is steadily moving forward with the realization that training and the hiring process are the key to developing an equitable welfare workforce. From a training perspective, everything that is embedded throughout the pre-service training specifically includes diversity. In the last three years there has been an agency wide release of courses centered around equity and diversity.

MDCPS continues to develop its workforce through the centralized hiring process. The agency has incorporated the Plan for Centralized Hiring to address and eliminate hiring bias. The centralized hiring platform is designed to complete virtual interviews specifically when hiring staff across the state. The training specifically addresses topics on not creating a bias based on what you may see in the camera.

Beyond hiring, the agency has developed intentional and strategic employee recruitment methods aimed at creating a racially diverse workforce. MDCPS expanded recruiting efforts to related degree fields particularly in psychology and criminal justice. The agency expanded recruiting efforts to the schools of psychology and criminal justice to include some smaller

schools of social work. The agency made strategic efforts to reach out to smaller Historically Black Colleges and Universities (HBCU's) across the state such as Rust College, Tougaloo College, and Alcorn State University.

The peer-to-peer support groups pilot program was conducted in five (5) areas of the state during August – October 2021: Region 2W, Region 4N, Region 7E, Hinds County, and Lee County. MDCPS's Workforce Wellbeing Director was the sole facilitator. The confidential and voluntary sessions were open to Specialists from all three major divisions (adoption, frontline, and licensure). The peer-to-peer support groups pilot program concluded December 2021.

Based on the personal interaction with staff, feedback from the Specialist and the declining attendance in the pilot program, MDCPS learned that the MDCPS workplace culture was insufficiently prepared for peer-to-peer group meetings. Some anecdotal reports and observations indicate that Specialists may have lacked confidence in the confidentiality of the groups. Additionally, Specialists may have viewed the group as a poor use of their limited time or Specialists were not seeing sufficient changes in their areas of concerns quickly enough to warrant attendance. As a result, MDCPS leadership made the decision to suspend further implementation of the peer-to-peer support groups and focus on alternate activities to improve the work environment until the workforce is ready to participate in higher level group work.

The following projects (new and enhanced) and areas of focus were implemented to improve the workplace environment. The list is not all inclusive, and is not limited to all MDCPS projects and areas of focus:

<u>Senior Leadership Team</u>

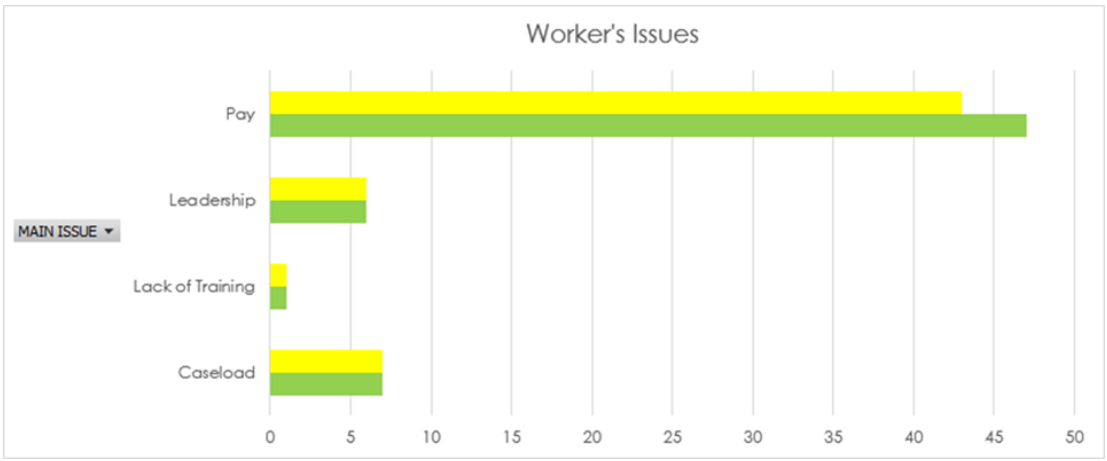
- The Commissioner's Leadership Institute began as a virtual, bi-weekly interactive meeting for agency supervisors. The new format is a monthly meeting (every 3rd Wednesday) with the Commissioner and other MDCPS leadership. The meeting is for one hour, and topics include updates on staffing, agency reorganization, current legislation, upcoming projects, etc. that will impact the agency and staff. Effective leadership skills and building team cohesion remain a priority for these meetings. Topics are responsive to staff feedback and requests.
- MDCPS team members and state office employees were granted approval to attend the Veteran's Day Program on November 10, 2022. The National Guard Association of Mississippi, the Mississippi War Veterans Memorial Commission, Two Mississippi Museums, Daughters of the American Revolution, and Mississippi Veterans Affairs joined together and presented this program to honor current and retired Service members. MDCPS service members and staff appreciated the opportunity to attend and show support for living and deceased veterans that unselfishly volunteered to make sacrifices for our freedom.

Communications

- MDCPS Communications Director works closely with MDCPS leadership, Workforce Wellbeing and Workforce Development to distribute internal communications. The frequency, consistency and quality of internal communications has increased and allows for expansion of recruitment efforts through social media and marketing.
- The new MDCPS website provides improved public and stakeholder interaction as well as offering an interactive employee portal to MDCPS staff.

Workforce Wellbeing (WWB)

- Workforce Wellbeing has a dedicated section, *Employee Connection*, for providing wellness information, supportive content and creating connections with team members.
- The Employee Assistance Program (EAP) provides each MDCPS employee with local in-person or tele-behavioral health assessment, short term counseling services (up to 10 sessions, per issue, per employee/family member, per year), referral services, educational materials, and community resource referrals to supplement EAP counseling. The agency's current provider is ComPsych. The EAP program offers MDCPS employees confidential assistance for issues including, but not limited to stress, burn-out, trauma exposure, secondary trauma or compassion fatigue, work/life balance, marital/family problems, substance or process disorders, addictions, anxiety, depression, grief, etc. Registration is required for MDCPS team members to access the online resources.
- Workforce Wellbeing (WWB) expanded the Service Pin and Certificate program to include recognition of 1 and 5 years of service with the agency.
- Workforce Wellbeing incorporated guidance from the Annie E. Casey Foundation to create individual assessment tools that were administered with existing staff to monitor employee engagement. The results will be utilized to determine areas of focus to increase employee retention.
  - Sixty-one (61) assessments and one-on-one interviews were conducted.
  - The data collected was shared with the Senior Leadership Team to determine employee engagement and next steps.
  - The results are shown in the chart below.



The result trends were identified from general interviews. The assessment is open-ended questions designed to allow the staff to provide as much information as possible. The structure of the assessment consisted of a mixture of questions: a) general questions about working in the agency; b) current supervisor and leadership team; c) human resources, pay, and benefits, and d) promotion potential within the agency. The assessments were compiled and, according to responses, grouped into four categories: Pay, Leadership, Lack of Training, and Caseload.

Motivational Mavericks

- The Motivational Mavericks committee coordinated several activities during the year to create and build morale and team cohesion. Attendance and participation in events have steadily increased and staff are more comfortable providing feedback regarding upcoming events and processes that impact agency goals.
- A Lemonade Stand was created for the Mavericks' Morale Kick-off on July 20, 2022. The event allowed state office staff to meet and hear about the Mavericks goals and plans for building morale and team cohesion. The Mavericks explained that their purpose is to help ensure all employees feel valued through creative expressions of appreciation, building a sense of team, respect, and hope.
- Tailgate Extravaganza was September 14, 2022. Food trucks were available for lunch purchases and staff were encouraged to wear their favorite team attire, jerseys, or colors. Each unit/division was encouraged to decorate a table representing their college alma mater. Prizes for best table and multiple giveaways inspired a collaborative atmosphere.
- The sale of agency polo shirts took place in April 2023. The shirts allow MDCPS staff to demonstrate their representation of the agency and provide a sense of unity. MDCPS staff are encouraged to wear the shirts on Friday (blue jeans are allowed) and during MDCPS events.

MDCPS will continue to actively listen to the feedback and concerns expressed by staff and develop strategies and activities to address the needs of the workforce. MDCPS believes that

by meeting our employees where they are and providing employees with a supportive and encouraging workplace environment, employee retention will increase, the workforce will stabilize and engagement with children and families will improve.

II. Collaboration

ONGOING COLLABORATIVE EFFORTS

To carry out its mission, MDCPS collaborates with stakeholders and those with lived experience on both an ongoing and as-needed basis. MDCPS seeks input from external partners through on-going forums. Stakeholders, including courts and judicial partners, youth and families, tribes, and a variety of service providers, creates opportunities for the child welfare system to work collectively to assess performance, develop theories of change and implement improvement strategies. This collaboration occurs through a variety of commissions, committees, joint trainings, focus groups, and agreements. These collaborative efforts are integrated throughout the APSR narrative. The agency fulfills our collaboration efforts through strategic planning, training, establishing working committees and creating avenues that foster community buy-in and feedback. Community providers assist in collaboration with the agency and community stakeholders. This engagement is vital in building a trustworthy relationship with community partners. It also ends the negative stigma of child welfare agencies. Additionally, it shows the connection of collaboration and resources available from both MDCPS and other community stakeholders. These transformative efforts are all a part of the integrated and collaborative work the agency does to increase the number of community and family voices to help carry out our mission. Examples of current partners and other stakeholders include:

Collaboration with Parents

Through the Community Based Child Abuse Prevention (CBCAP) grant, MDCPS has partnered with various community-based service providers throughout the state. These providers include Southern Christian Services for Children and Youth, Starkville Oktibbeha Consolidated School District, Baptist Children's Village Dorcas In-Home Family Support Program, Canopy Children's Solutions and Youth Villages.

Project CARE continues to serve children and families through community-based services. Services are geared towards preventing child abuse and neglect and by increasing the protective factors. Services are available for families through a 2- tiered program focusing on parental education and support services. Parenting Classes both onsite and virtual continues for the subgrantee. Concrete support, respite care, support groups/classes, case management services, the utilization of the Family Resource Center and outreach activities continues through the subgrantee. Various community events will continue throughout the reporting period.

Project CARE continued community-based programs including Parenting Classes. Classes facilitated in person and online via ZOOM.

All parent engagement classes continued throughout the reporting year. Class topic discussions included Parent Engagement Active Parenting-The Importance of Bonding with your Child, Parent Engagement- Active Parenting- Brain Building in our Children, Parent Engagement Active Parenting-Discipline Methods. We discuss Respite Care for families of young children while they pursue job prep/work, go to doctor visits, care for the sick, and participate in parenting classes. The participants discuss Support Group and classes including, autism support participants, childbirth and breastfeeding, and basic computer classes. Project CARE also began serving teen parents along with their parent and support system through zoom for teens not in school and their parents and support system to be able to participate in Active Parenting classes. We engage at-risk communities by bringing Active Parenting classes into the community. Project CARE partners with 1st United Methodist church's Laundry Love Ladies of Starkville to provide services to the Brookville Garden community, a government subsidized apartment complex with a high occurrence of at-risk residents. Active Parenting classes are taught in the neighborhood. Patrons continued to visit the Resource Center throughout the reporting period. Provided parenting classes at the Discovery Center which allow parents the opportunity to gain parenting skills, knowledge, and wisdom, even from other parents' experiences. We provided classes that lead to the overall wellbeing of the family such as the Cooking Matters: Healthy Cooking Class series being offered. This is a six week, two-hour per week class where families learn to cook healthy meals for their families. Participants physically participate in meal preparation here at the Discovery Center and receive ingredients to prepare that meal at home for their family, which gives them actual meal preparation experience.

Each program offers pre/post surveys for all participants. The feedback is collected and analyzed with program managers to improve services from various perspectives. This includes the topics that are discussed, the length of time for services, challenges/barriers that prevented the family from following through the program and other suggestions for improvement. Families are evaluated and individually coached to ensure a plan is put in place to address all needs, but also ways to strengthen their abilities of stability. With families of various ethnicities, this helps the family to be acknowledged and their voice to be heard knowing the community provider is there to assist.

Additionally, should there be any issues with the family and the family has or is involved with MDCPS, the provider will contact program staff, and efforts are made to safely address and resolve the issue. Family engagement, satisfaction, and equity are heavily observed through all programs.

Providers maintain consistent communication and follow-up with families. The webinars and online classes/podcasts were added as some parents were not able to physically come to the center. Accommodations were made for such purposes. Social media was developed for the providers for outreach purposes and ways for parents to be in the know of events/classes. Family engagement activities and volunteer services have been a tremendous success and advantage to the providers, as it allows the parents and caregivers to feel valued and included.

Ongoing activities include increasing community awareness of the protective factors to reduce the incidence of child abuse and neglect. We continue providing parenting classes and community-based services.

Baptist Children's Village: Dorcas In-Home Family Support System

Dorcas is a Support Services Program based through Baptist Children's Village and is an intensive in-home services program. The Dorcas Program continues to provide services to families who need support service to maintain their family. The program served 12 families with 28 children and 17 adults from October 1, 2022, through December 31, 2022.

The First Baptist Church Greenville continued collaboration with Washington County's needs, which connected their benevolence ministry with several Dorcas families. Community meeting at First Baptist Greenville was held regarding a Mobile Crisis Pregnancy Center. Additional meetings were held at Emmanuel Baptist Church in Greenville, First Baptist of Cleveland and both of churches provided resources to families. The program collaborated with Pastor Huddleston at Beds for Kids to get beds for four Dorcas families.

The wait list for families to receive services are no longer an issue as the providers initiate a care coordination or triage of services prior to intake of those families who will be on the wait list past 30 days as well as routing referrals to another intensive in-home service, and Intercept which is a part of the Prevention Plan.

MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

Youth Villages continues to provide intensive in-home services through the in-CIRCLE Family Support Services Program. From October 1, 2022, through December 31, 2022, there have been 50 families, with 66 children and 113 adults served through the program. 13 referrals were for Family Reunification (FR) with 36 children and 17 adults. 37 referrals with 77 children and 49 adults were served by Family Preservation Services (FP).

Youth Villages

Weekly Supervisor Meetings are held in-person and virtual (video conferencing) to discuss needs for program improvement, census, and staff development. Weekly consultations with staff, supervisor, and consultant help identify treatment needs for each family and development of staff

skills. Quarterly Boosters meetings are held in person and provided to all staff, supervisors, and clinical consultants to teach skills in dealing with targeted clinical areas. Staff and supervisors seek to improve their ability to work with various types of kids and families by providing Defensive Driving, Knowledge and Survey, Annual Flu Training, Community Based Program Safety Guidelines, and COVID-19 Vaccinations Training. Youth Villages collaborates regularly with all court systems, community agencies such as MDCPS, Food banks, Boys and Girls Clubs, MAPP Teams, School systems, local and regional agencies, etc.

General Funding

Canopy continues to provide intensive in-home services through the in-CIRCLE Family Support Services Program. State General Funds from October 1, 2022, through December 31, 2022, were allocated for this Provider. The Program has served 134 families with 302 children and 192 adults. 49 referrals were for Family Reunification (FR) with 103 children and 72 adults, and 85 referrals with 199 children and 120 adults were served by Family Preservation services.

Intercept

Intercept is an intensive in-home services program geared toward reducing out of home placements and accelerating permanency. Intercept is a statewide Evidence Based Program that began in October 2022, that offers services to families who have been identified as those with abuse/neglect and/or behavioral issues which would cause removal. The program is intensive and can last up to six months based on the need. Services are available to the family 24 hours.

In-CIRCLE is offered through Canopy and Youth Villages and provides intensive in-home services to families whose children were at risk of removal and/or to reunite these children with their families by conducting home visits, providing therapy, concrete needs, referrals, etc. During the program year, the program provided intensive in-home services providing families with the support that they need. These services included home visits, therapy, parenting skills, alcohol and drug assessment, concrete needs, referrals, etc.

Southern Christian Services for Children and Youth (SCSCY) promotes efforts to support and prevent child maltreatment through parenting classes, support groups Parent Café's, and case management services. SCSCY case management services include Concrete Support, Counseling, and Donated Items. Parent Strong Prevention Services collaborated with MDCPS Infant Safe Sleep Initiative Prevention Program helps educate mothers who have babies (infants to six months) on sleep safety. This initiative is to help prevent child fatalities because of unsafe sleep environments and conditions. Staff educated mothers with Parent and Pregnant Women Program at Harbor House and mothers at Born Free Residential Treatment Facility. Mothers were provided informational bags provided by MDCPS which includes the following items (safe sleep onesie, baby wipe case, reusable bandage case and a safe sleep educational pamphlet). Additionally, SCSCY educated the community about child abuse and neglect and the impact of trauma on

development through public speaking events, media campaigns, and informal information sessions. All Support groups focused on educating parents about the research informed Five Protective Factors that helps increase family strengths, enhance child development, and reduce likelihood of child abuse and neglect.

Victims of Human Trafficking Collaboration

The Mississippi Human Trafficking Council (MHTC) is a council chaired by representatives from the U.S. Attorney's Office, Mississippi Bureau of Investigation, and Mississippi Department of Public Safety. The MHTC is expanding outreach and awareness efforts by establishing Community Anti-Trafficking Engagement Teams (CAETs) statewide to utilize the unique resources and individuals within each community who are willing to be engaged in Anti-Human Trafficking work. MDCPS continues to serve as a key partner with MHTC. The agency has also continued to participate in monthly Human Trafficking Committee Meetings: Victim's Service and Training Committee and the Main Human Trafficking Council meetings. The focus for each group is to review the next steps on the logical model and its progress in response to human trafficking.

The Board of Trustees of Mississippi Institutions of Higher Learning (IHL) approved a proposal from The University of Southern Mississippi (USM) School of Social Work to form a Center for Human Trafficking Research and Training (CHRT) - the first center of its kind in the state. The proposal addresses the training requirements of Mississippi House Bill's 1559 and 571, and the Justice for Victims of Trafficking Act (JVTA) (P.L. 114-22)/Preventing Sex Trafficking and Strengthening Families Act of 2014. MDCPS has partnered with members of the Human Trafficking Council and The University of Southern Mississippi School of Social Work to create a Human Trafficking curriculum for employees of the Mississippi Department of Child Protection Services (MDCPS). CHRT is an interdisciplinary collaboration of researchers, trafficking survivors and students who participate in the collection, analysis, and evaluation of human trafficking data from Mississippi's state and local agencies. By helping streamline data collection and management, their efforts help prevent the spread of misinformation and inaccurate data. Their findings seek to inform evidence-based education and trainings for agency personnel with a goal of accelerating the development of Mississippi's anti-human trafficking efforts.

Attorney General Lynn Fitch announced that nearly $2.5 million from the Victims of Human Trafficking and Commercial Sexual Exploitation Fund will be distributed to nine organizations that help human trafficking. MDCPS is partnered with three of the organizations to provide related services for youth in the agency's care:

Canopy Children's Solutions received $128,197. This agency is Mississippi's largest non-profit provider of mental and behavioral health, social services, and educational solutions for children. Canopy will utilize this grant to provide evidence-based clinical services to youth throughout the

state of Mississippi through four of their current solutions. Clinicians will be trained and certified in traumatic skills studies. Additionally, a group of clinicians will be trained in Eye Movement Desensitization and Reprocessing therapy (EMDR). These trainings will equip Canopy staff with the ability to service youth ages 6-18 who are victims of sex trafficking and labor trafficking in 4 different levels of care.

Southern Christian Services received $650,000 and will create Mississippi's first safe home exclusively for adolescent survivors of human trafficking. This safe home will allow young survivors to receive specialized and evidenced-based therapeutic services in an undisclosed location for up to two years.

Sunnybrook Children's Home received $27,800 and will collaborate with Southern Christian Services and Mississippians Against Human Trafficking in creating Mississippi's only Safe Home for adolescent survivors of human trafficking.

Mississippi Conference on Children and Families 2023 (formerly Joint Planning)

MDCPS hosted the 2023 Mississippi Conference on Children and Families (MCCF is *formerly Joint Planning*) on April 19, 2023, from 9:00 am - 3:30 pm. The MCCF is an annual event hosted by MDCPS in coordination with the Children's Bureau, Administration for Children and Families, United States Department of Health and Human Services. For this year's MCCF, a diverse group of stakeholders (CB personnel, MDCPS leadership and staff, judges, court support staff, various service providers, and community organizations) convened to discuss pressing and emerging issues in our child welfare system, particularly those related to Mississippi's federally required five-year plan, the Child and Family Services Plan (CFSP).

The theme, *Through the Eyes of a Child*, moved participants: in-person and virtual, through MDCPS' journey to enhance prevention efforts, achieve timely permanency, and improve children's experience in foster care with fresh eyes. Participants were exposed to the authenticity and vulnerability of Mississippi's child welfare agency that has the profound, yet, fulfilling responsibility of protecting the well-being of children and families in our state. The format involved whole-group presentations by the agency's Senior Leadership Team, Children's Bureau, and lived experience narratives from Kinship Foster Care families. The objectives of the MCCF were to provide participants (100 in-person and 296 virtual) with the agency's pathways to prevention, permanency, and care. The presenters and participants discussed the State's child welfare services, including analysis of the service needs of children and their families, the selection of unmet service needs that will be addressed in plans for program improvement, and the goals and objectives to enhance the capability of the State in providing child welfare services. Highlights of the conference are provided below.

The panel discussion on *PATHWAYS Mississippi: CCWIS Implementation* was led by MDCPS staff, PATHWAYS Director, and a RedMane Project Director. The discussion focused on various system features: web portal access for providers, map features, online/offline functionality, virtual meetings, and more. MDCPS team members began collaborating with Subject Matter Experts (SME) and RedMane in January 2023. The implementation involves mitigation of current MACWIS data into the Pathways system to comply with federal CCWIS regulations. Pathways encompasses the use of innovative technologies to automate the collection of high-quality case management data to promote its analysis, distribution, and use by MDCPS staff, supervisors, and leadership. The panel provided a 'go live' timeframe of May 2024.

The goal of the Kinship Navigator program is to increase the safety, permanency, and well-being of children. It is a strengths-based response to the increasing need to keep children out of the foster care system and placed in permanent homes and enhance the stability of their lives. Statistics presented by Catholic Charities, Inc. of Jackson stated that 90.3% of participating families who have discharged from the program reported an increase in family stability by an average of 31%. Efforts by the Kinship Navigator to promote permanency include placing siblings together who enter care at around the same time to reduce child trauma and placing children removed within 50 miles of their original home. Catholic Charities, Inc. reported that 77% of children in care for less than 12 months experience two or fewer placements.

The program continuously provides caregivers with information, referrals, and links to needed legal assistance and services. This advocacy and support have resulted in 70% of participating caregivers in the State initiating the process for permanency. The number of guardianships received with the assistance of the program is eighty-eight (88) and sixteen (16) adoptions have been received. MDCPS appreciates the support provided by Catholic Charities, Inc. of Jackson to maximize the caregivers' ability to provide safety and stability and, when needed, permanency for the children of Mississippi placed in their home.

Mississippi's Governor, Tate Reeves, attended the Conference and presented information on a series of pro-mom and pro-life legislation that was signed earlier that day. The legislation strengthens Mississippi's adoption system, increases support for pregnancy resource centers, establishes a foster parents bill of rights, creates a task force focused on improving adoption and foster care systems, improves the Department of Child Protection Services, and gives the agency the largest budget in its history. [2]

- House Bill 510 establishes a foster parents bill of rights. The legislation increases transparency for foster parents, expands communication opportunities with professionals, and makes the Mississippi Department of Child Protection Services personnel more readily available for foster parents. Additionally, it helps ensure that the educational needs of foster children are being met and provides access to available resources for parents.

- House Bill 1149 establishes the Mississippi Department of Child Protection Services as its own agency separate from MDHS. This separation will give it the ability to draw down more federal funds to support Mississippi families. The legislation will also help improve the efficiency of CPS procedures including adoption cases.
- House Bill 1625 gives the Mississippi Department of Child Protection Services the largest budget in its history. This equips the agency with the resources needed to effectively carry out its mission and better support Mississippi children.
- House Bill 1318 increases the opportunities available for parents to choose adoption by authorizing Safe Haven baby boxes across Mississippi. The legislation increases the age that children can be dropped off at these boxes, authorizes safety devices to be sponsored by emergency medical service providers, and authorizes any city or county to sponsor a baby safety device.
- Senate Bill 2384 establishes the Mississippi Task Force on Foster Care and Adoption. The task force will study Mississippi's laws regarding foster care, adoption, and other related areas and make recommendations for improvement to the legislature.

[2] Desoto News, Mississippi News, April 19, 2023: Bob Bakken, 'Reeves signs series of 'pro-mom' and pro-life bills.

CITIZENS REVIEW PANELS

Children's Trust Funds (CTF)

The CTF Fund Advisory Council (CTF AC) meets on a quarterly basis. The members continually provide oversight and management for the Children's Trust Fund of Mississippi including the subgrant to the subgrantee – Starkville Oktibbeha Consolidated School District, and Southern Christian Services for Children and Youth.

Children's Trust Fund Advisory Council Members consists of members from: MS Department of Health, MS Department of Mental Health, MS Department of Child Protection Services, MS Department of Education, (Commissioner will be appointing this member), community stakeholders and member from each Congressional District. From the ongoing meetings and discussions, the CTF has recommended implementing additional programs for rural areas and implementing more prevention programs so MDCPS does not get involved. Currently, the CTF Advisory Council agreed to serve as a Parent Advisory Council. Most of the council members are parents and/or caregivers and are open to give advice to MDCPS on ways to better engage and assist the community. Due to a staffing shortage in this current program year, MDCPS was unable to actively implement and hold meetings for our Parent Advisory Council. However, during this year we did begin the process of distributing and collecting applications for the council.

The CTF is no longer serving as the PAC. More information regarding the PAC will be reported as meetings continue. The first meeting with the PAC consisted of introductions, the purpose of the council, and sharing what other states are developing within their PAC. The CTF Advisory Council will continue to provide oversight of funds and initiatives as it relates to the agency and providing services for families and communities. The CTF Council will fund stipends and other incentives for parents for their time and dedication towards the PAC.

The Mississippi Child Death Review Panel

MDCPS continues to participate in the Mississippi Child Death Review Panel. Mississippi law creates the Mississippi "Child Death Review Panel. The CDRP identify factors that put children at risk of injury or death. The purpose is to foster the reduction of infant and child mortality and morbidity in Mississippi and to improve the health status of infants and children. The panel's membership consists of "one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General's office, the State Sheriff's Association, the Mississippi Police Chiefs Association, MDCPS, CAC, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children's Safe Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal's office. The panel is tasked with creating a report for the Mississippi Legislature outlining "appropriate recommendations to the Legislature on how to most effectively direct state resources to decrease infant and child deaths in Mississippi through case review.

As stated in the states 2020-2024 CFSP, CDRP aspires to:

- Identify factors that put children at risk of injury of death.
- Share information among agencies that serve children and families.
- Improve local investigations of unexpected child deaths.
- Identify and fill gaps in existing service systems.
- Reveal trends in unexpected child injury and death.
- Educate the public about child injury and death prevention strategies.

The Child Death Review Panel (CDRP) continues to compile findings reports from each case based on sources such as Mississippi vital records, toxicology reports, autopsies, and death scene investigations. The panel is led by the MS State Department of Health. MDCPS currently has three representatives that participate in the panel.

The panel met on August 9, 2022, to discuss the annual report, updated recommendations, and to review 19 cases with manner of cause of death related to fire, drowning, and notable deaths. Discussion during the case review included:

- State laws regarding smoke alarms for apartment complex and rental properties
- State laws regarding lifeguards at public pools, water parks, or open water areas
- State law or city ordinances for fencing requirements for private pools
- Signage for water parks, reserves, and other open bodies of water encouraging adults.

- Supervisions and lack of lifeguards' discussion during recommendations:
- Researching current state laws on lifeguards for public pools and public open waters
- Regulations regarding smoke alarms for apartments and rental properties
- Requesting additional records for the fire cases.

The recommendations focused on a safe sleep marketing campaign and cases involving co-sleeping. Suggestions included developing social media campaigns, communications from hospital NICU's, and partnering with other organizations to spread the safe sleep message. Dr. Vernesia Wilson will distribute a survey link for participants to provide suggestions regarding safe sleep marketing message and other suggestions that may decrease the SUID rate in the state. MDCPS will continue to participate in the panel and assess recommendations the agency can lead such as targeted child abuse and prevention campaigns from areas of education highlighted in the panel recommendations.

The fact sheet for Capitol Day 2023 was finalized and nomination and election of chairs was conducted during the November 19, 2022, meeting. Capital Day is coordinated by the Mississippi Economic Council (MEC) and took place on January 5, 2023, at the Mississippi Trade Mart and the Mississippi State Capitol. This year's event allowed nearly 1,000 business and community leaders to meet with their legislators while receiving information of the priorities for the 2023 session.

A quarterly meeting was held via ZOOM on April 13, 2023. There were 25 attendees. The cases reviewed, noted causes were Sudden Unexplained Infant Death cases. 10 of the 19 (53%) included bedsharing with adults and 3 of 19 (16%) had positional asphyxia, placed on stomach. The members discussed recommendations focusing on safe sleep marketing campaigns. The next CDR meeting is scheduled for July 20, 2023.

Dr. Randy Henderson presented on several cases with autopsy reports, reporting forms, and causes of sudden unexpected infant death from bedsharing with an adult. He also discussed positional asphyxia via the cases reviewed. Dr. Henderson's presentation included 19 cases reviewed by the committee members which focused on missing autopsy reports and SUIDI forms not being completed. Out of the 19 cases, only 10 had autopsy reports and 11 had reporting forms filled out.

Kristy Simmons, with the Mississippi Crime Lab, presented on the new software data management program (MDILog) developed by Dr. Stephen Clark. The new data management software replaced the CoronerME database and was effective March 1, 2023. Kristy gave an overview of the CDR portal and explained how CDR staff will retrieve needed reports for case reviews. Until the CDR portal is completed, Kristy will send reports to CDR staff. All reports will be in the completed version, autopsies, SUIDI reports, and other reports submitted.

Dr. Vernesia Wilson introduced herself as the new Director of Maternal and Infant Health Bureau tasked with provided staff and technical assistance to the Child Death Review Panel. Dr. Wilson provided an update on a new project she is implementing July 1, 2023, conducting informant interviews for all three of the review programs (Maternal Mortality, Child Death Review, and Feal and Infant Mortality). An update will be provided during the July meeting.

The following action items will be discussed during the July meeting: survey regarding recommendations/suggestions for decreasing SUID cases in Mississippi (due April 30, 2023); and development of statewide Logic Model for expansion of the state's Fetal and Infant Mortality Review program (due July 2023).

Tentative meeting dates are September 21, 2023 (motor vehicle/transportation related) and November 16, 2023 (review draft of annual report and yearly wrap-up).

The link to the MS State Department of Health website where CDRP annual reports are located is: https://msdh.ms.gov/msdhsite/_static/31,0,392,63.html

Mississippi's Youth Advisory Council

Mississippi's Youth Advisory Council (YAC), formerly Teen Advisory Board, is a youth leadership and advocacy training platform coordinated through the Youth Transition Support Services (YTSS) Office. YAC engages youth in I.L. programs and policy changes/updates through monthly regional meetings and quarterly state level meetings.

The YTSS leadership team met on March 3, 2023, and March 22, 2023, to discuss the current structure of the MDCPS Youth Advisory Council. Outcomes were as follows:
Regional Youth Advisory Council representation

- Region 1 will incorporate Service Areas 1 and 3
- Region 2 will incorporate Service Areas 2 and 4
- Region 3 will incorporate Service Areas 5 and 6
- Region 4 will incorporate Service Area 7

Youth Advisory Council positions to be held:

- Speaker
- Co-Speaker
- Secretary

The newly organized meeting should take place in the 4th quarter culminating in the appointment of Youth Advisory Council positions from each Region. A meeting will occur the month after appointments are made with sequential meetings occurring at least quarterly thereafter.

All council meetings touch on topics that either directly or indirectly affect the APSR. For the upcoming APSR (CFSP), topics that align with previous listening session recommendations will take place during monthly or quarterly meetings. All recommendations either directly or indirectly affect the APSR. Additional information is detailed in the Youth Transitions Support Services Organizational Structure section of this document.

FOSTER PARENT SUPPORT

Foster Parent Recruitment and Shared Parenting

The MDCPS Communications Director has utilized various social media platforms to explore and explain the role of foster families in the Shared Parenting relationship with the parents of foster children in their care. MDCPS's educational and public relations effort are focused on how foster parents are needed statewide to both care for children and to serve as support and role models/mentors for those children's parents and family. The photographic and video materials have been integrated into the agency's ongoing foster parent recruitment efforts and are being used as part of MDCPS's ongoing efforts to recruit foster parents for key populations of foster youth, which include children ages 10 and older, sibling groups, children with special needs, and children at risk of aging out of foster care without permanent family connections.

The new MDCPS website has a page specifically designed for Foster and Adoptive parents. Content heading for the page includes sections for Foster Parent Updates, Support Group schedules and helpful resources. This section of the website is used in conjunction with messages delivered by staff via face-to-face interaction to provide foster parents with consistent and current information on shared parenting and other topics relevant to their role.

Foster Parent Support Groups

The Liaison notifies the foster parents, the licensure unit, and partnering therapeutic agencies directly of the support group schedule via email each month. Licensure staff have access to the sign in sheets of each group (Smartsheet) that are collected by the Liaison. Foster parents receive training credit for participating in face-to-face and virtual meetings.

The Foster Parent Liaison led the support groups prior to departure from the agency in November 2022. The Deputy Administrator of Clinical Support continued with the support groups while awaiting the hire of three Foster Parent Liaisons that would cover the entire state. However, the Deputy Administrator departed from the agency May 2023, before the positions were staffed. Two FP Liaisons have been hired and will begin their roles August 2023.

Thirteen support groups met in July 2022 in the following counties: Harrison, Lauderdale, Panola, Alcorn, Rankin, Oktibbeha, Jackson, Pontotoc, Simpson, Lee, Yalobusha, and Tate counties. The

Panola group had four foster parents participate. The Alcorn group had three participants. The Oktibbeha group had nine participants. The Jackson group had eighteen participants. The Pontotoc Group had twenty-six participants. The Lee group had fourteen participants. The Yalobusha group had five participants. One Harrison group had twenty-two participants.

Fifteen support groups met in August 2022 in the following counties: Marion, Alcorn, Desoto, Jones, George, Panola, Oktibbeha, Jackson, Pontotoc, Lee, Warren, Lauderdale, Harrison, and Tate Counties. The Desoto group had twenty-one foster parents participate. The Panola group had ten participants. The Oktibbeha group had thirteen participants. The Jackson group had thirteen participants. The Pontotoc group had twenty-four participants. The Lee group had twenty participants. The Jones group had twenty-nine participants. The Warren group had sixteen participants. The Harrison group had twenty-four participants. The Forrest group had twenty-three participants.

Nineteen support groups met in September 2022 in the following counties: Pearl River, Desoto, George, Panola, Lowndes, Harrison, Lee, Oktibbeha, Jackson, Pontotoc, Forrest, Simpson, Tate, and Yalobusha counties. There were thirty participants in the Desoto group. There were twelve participants in the Panola group. There were eight participants in the Lowndes County group. There were eleven participants in the Harrison County group. There were ten participants in the Oktibbeha County group. There were twenty-four participants in the Pontotoc County group. There were twenty-two participants in the Forrest County group. There were thirteen participants in the Simpson County group. There were eighteen participants in the Tate County group.

Foster Parent Forums

Foster Parent Forums are a town hall type meeting where the Liaison meets with foster parents' face to face to answer questions, address concerns, and update foster parents on MDCPS policy. The Liaison notifies foster parents, the licensure unit, and our partnering therapeutic agencies directly of the support group schedule via email each month. Licensure staff have access to the sign in sheets of each group (Smartsheet) that are collected by the Liaison. Foster parents receive training credit for participating in face -to- face and virtual meetings. The MDCPS foster parent liaison participated in events aimed at engaging with foster families.

MDCPS Licensure staff has not received formal responses since the Liaison position became vacant. The previous Deputy Administrative of Clinical Supports provided informal feedback after attending support groups. Positive and negative feedback was shared with Licensure Staff to help create change. As MDPCS is working to replace the FP Liaison and Deputy Administrator positions, two FP Liaisons have been hired and are due to begin their roles August 2023. MDCPS will create a solid feedback loop to ensure information shared within the support groups inform participants of changes within the agency.

The Liaison regularly utilizes email to share information with the agency's foster parents. These emails are used to keep our foster parents updated on training opportunities, MDCPS policy, and other helpful information. To address feedback received from foster parents, the Foster Parent Liaison created a Smartsheet form for foster parents to share with the agency when our staff goes above and beyond their routine tasks/duties for the child placed in their home or their family. The Liaison has received twenty-seven responses between July 1st and September 30th with praise for staff. The feedback is shared with the staff members and their chain of command up to the Deputy Commissioner as well as with the Commissioner's Office and the agency's Work Force Well-Being Director. An example of the feedback received is "Mr. Thompson has been an exceptional worker. He took time out of his busy schedule to help my husband and I get Miles' passport so that we could go on vacation. He has also been incredibly involved in our case and helped progress the case along. He has also made himself available to answer any questions that we have had. Thanks for having such an awesome and engaged employee on staff."

The Liaison was able to assist the MDCPS county staff with locating and in most cases delivering furniture to families that we are working with. There was a total of fifty families that the Liaison provided resources to between July 1st and September 30th. There were seventeen families assisted in July, fifteen in August, and eighteen in September. Thirty-six of the families were in Hinds County, five in Rankin, eight in Madison, one in Pike. Eleven of those families were foster families and thirty-nine were biological families. We were able to deliver the needed furniture to thirty-nine of the families and eleven of the families were able to pick up the furniture. The Liaison has partnered with a nonprofit in Madison County that provides the furniture. The nonprofit has a box truck that the Liaison can utilize when the donations need to be delivered. The Liaison has listed the items below that were provided to assist these families such as highchairs, bunk beds, twin, full, and queen bed frames, mattresses, and beddings, toddler beddings, dressers, crib frames, food, dishes, coffee tables and lamps, dining tables with chairs, nightstands, towels, refrigerator, television, couches, and microwaves. The Liaison partnered with Sunnybrook Children's Home, Southern Christian Services, and the MS Braves to host a Foster Family Night at Trustmark Park in Pearl, MS. Thanks to the partnership foster families were able to attend the game for free. Also, in September the Biloxi Shuckers hosted a Foster Family Night at MGM Park in Biloxi. Foster families were able to attend the game for free.

Project CARE continues to serve children and families through community-based services. Services are geared towards preventing child abuse and neglect and by increasing the protective factors. Services are available for families through a 2- tiered program focusing on parental education and support services. Parenting Classes both onsite and virtual continues for the subgrantee. Concrete support, respite care, support groups/classes, case management services, the utilization of the Family Resource Center and outreach activities continues through the subgrantee. Various community events will continue throughout the reporting period.

Project CARE continued community-based programs including Parenting Classes. Classes facilitated in person and online via zoom. Topics included:

- Parent Engagement Active Parenting- The Importance of Bonding with your Child
- Brain Building in our Children.
- Discipline Methods
- Parent Engagement- Active Parenting
- Breathing Exercises for Stress
- Building Family Bonds Through Shared Traditions

Concrete Supports were also provided to families such as:

- Food, Clothing, Hygiene Items, Diapers, Wipes, Books, School Supplies, Car Seats, and Toys. Respite Care for families of young children while they pursue job prep/work, go to doctors' visits, care for sick family members, and participating in parenting classes. Support groups and Support Classes for Autism participants, Childbirth & Breastfeeding, and Computer Classes are also included. The Family Resource Center continues to be utilized and patrons and families.

All parent engagement classes continued throughout the reporting period. Class topic discussions included Parent Engagement Active Parenting-The Importance of Bonding with your Child, Parent Engagement- Active Parenting- Brain Building in our Children, Parent Engagement Active Parenting-Discipline Methods. We discuss Respite Care for families of young children while they pursue job prep/work, go to doctor visits, care for the sick, and participate in parenting classes. We discuss Support Group and classes including autism support participants, childbirth and breastfeeding, and basic computer classes. Project CARE also began serving teen parents along with their parent and support system through zoom for teens not in school and their parents and support system to be able to participate in Active Parenting classes. We engage at-risk communities by bringing Active Parenting classes into the community. Project CARE partners with 1st United Methodist church's Laundry Love Ladies of Starkville to provide services to the Brookville Garden community, a government subsidized apartment complex with a high occurrence of at-risk residents. Active Parenting classes are taught in the neighborhood. Patrons continued to visit the Resource Center throughout the reporting period. Provided parenting classes at the Discovery Center which allow parents the opportunity to gain parenting skills, knowledge, and wisdom, even from other parents' experiences. We provided classes that lead to the overall wellbeing of the family such as the Cooking Matters: Healthy Cooking Class series being offered. This is a six week, two-hour per week class where families learn to cook healthy meals for their families. Participants physically participate in meal preparation here at the Discovery Center and receive ingredients to prepare that meal at home for their family, which gives them actual meal preparation experience.

Ongoing activities include increasing community awareness of the protective factors to reduce the incidence of child abuse and neglect. We continue providing parenting classes and community-based services.

Foster Parent Feedback Group

The Foster Parent Liaison created a Smartsheet form for foster parents to share with the agency when our staff goes above and beyond their routine tasks/duties for the child placed in their home or their family. The Liaison has received twenty-seven responses between July 1st and September 30th with praise for staff. The feedback is shared with the staff members and their chain of command up to the Deputy Commissioner as well as with the Commissioner's Office and the agency's Work Force Well-Being Director. An example of the feedback received is "Mr. Thompson has been an exceptional worker. He took time out of his busy schedule to help my husband and I get Miles' passport so that we could go on vacation. He has also been incredibly involved in our case and helped progress the case along. He has also made himself available to answer any questions that we have had. Thanks for having such an awesome and engaged employee on staff."

MDCPS will begin developing a foster parent grievance policy in July 2023. Foster parents will have the option of sharing their concerns and/or grievances via a dedicated email address (Fpgrievance@mdcps.ms.gov) or a link on the MDCPS website. Furthermore, two out of three Foster Parent Liaisons have been hired and will monitor and direct the foster parent grievances to the appropriate department and managers for resolution. Ultimately, the new Foster Parent Liaison positions will be developing and maintaining relationships with foster parents and serve as an advocate for their concerns and/or questions.

STATE AGENCY COLLABORATIONS

Division of Youth Services (DYS)

MDCPS continues to collaborate with The Mississippi Department of Human Services (MDHS) via the Division of Youth Services (DYS) to provide services for juveniles at risk of becoming delinquent. MDCPS has continued to provide administrative support services in this collaborative effort. MDHS, DYS is the division that administers probation, aftercare services, and institutional programs for juveniles who have been adjudged delinquent in the Mississippi Youth Courts and are at risk of becoming delinquent. MDCPS and the MDHS, Division of Youth Services (DYS)'s, Community Services Director met to discuss and track the status of youth that have been identified as "crossover" youth. This is a joint effort that targets open protective cases for clients that have been transferred to the state juvenile institution, Oakley Youth Development Center (OYDC). Additionally, MDCPS and the Division of Youth Services participates in the State Level Case Review team led by the Mississippi Department

of Mental Health to problem solve placement issues for youth with SED (Serious Emotional Disturbances) and delinquency issues.

Mississippi Department of Education (MDE)

MDCPS Education Unit and MDE work in partnership to promote educational stability for all children in foster care. In accordance with the state policy and procedure, MDCPS and MDE are committed to helping students in foster care remain academically stable while completing courses and advancing to the next grade/level. This partnership has been found to be a strength for both agencies as we work closely together to monitor and maintain as much educational stability for children in care by implementing Every Student Succeed Act. This law was signed on December 10, 2015, and the implementation began in January 2016. The law emphasizes the importance of limited educational disruption of children in foster care. This law has helped to improve the awareness of the unique needs of children in foster care by creating and increasing meaningful dialogue specifically focusing on what is in the best interest of the child. MDCPS EDU relies on the MDE Point of Contacts to ensure educational stability for children in care by assisting in completing and monitoring of Best Interest Determinations (BID) for every school -age youth that comes into care or home placement changes while in care. The compilations of BIDs are documented at BID@mdcps.ms.gov.

The Education Unit ensures enrollment, attendance and educational stability for all compulsory school-age children that are in foster care. We assist and support social service area staff in adhering to the MSA requirements for education to include reviewing education records of school age children that come into care, monitor the enrollment timeframe/deadlines for those that change placement while in care and monitor the completion of best interest determinations (BIDs) for school age children. In addition, the EDU provides coaching, resources, and serves as subject matter experts to the field staff as guidance for a child's education plan and development.

Activities include collaboration meetings with the Mississippi Department of Education to continue finalizing the joint guidance document which outlines the procedures and processes on how both agencies should work together. We have provided eleven (11) pre-service training courses to new hires. We have provided ongoing coaching, in-services and numerous of follow-ups to educational concerns for frontline staff collectively and individually regarding child placement- enrollment verification, school attendance, special education, and best interest determination practices. Please see attached Joint Guidance**.** We continue assisting the social service area staff more in identifying and addressing educational concerns and needs of compulsory school age children.

We created an Education Manual to support the service areas with questions and concerns related to Education. The staff coordinated a two-day training course for the education unit to have an opportunity to learn more about various aspects of education, what to expect, how to

request information and what available resource options across the state. We have provided four pre-service training courses for new hires. We have provided ongoing coaching, in-services and numerous of follow-ups to educational concerns for service areas collectively and individually regarding child placement- enrollment verification, school attendance, special education, and best interest determination practices.

The number of education referrals helps us to determine how and what service area needs coaching and in-services. By monitoring the number of referrals, we receive after providing the coaching to those identified service areas is how we measure to see if it is working. We plan to assist the service area staff more in understanding the importance of completing and submitting the educational documents as required by the MSA lawsuit. This includes completing a Best Interest Determination (BID), a notification of placement (Change) form, and submitting education records. We call each specialist to inform them of the required documents and ask them to email them as follow up to the request. We reach back out if we have not received it and walk them through the process of obtaining the information. We identified this as a need in February 2023 and began implementing it, March 1, 2023, and addressing educational concerns and needs of compulsory school age children. Because this activity is ongoing, we began implementation in August 2022.

Ten (10) Pre-service training courses were provided to new hires as an overview of the Education Unit, and the role and responsibility of the Education Liaison. Our meeting with stakeholders is an ongoing goal of the Education unit to develop working relationships, provide an overview of the expectations and processes used by the Education unit to better support our youth in maintaining their education stability. Nine (9) meetings with stakeholders took place during the period under review (PUR). There have been some challenges around not having enough human capital to address and meet the needs of frontline staff related to education concerns for compulsory school-age children. Currently, we have three (3) Education Liaisons and one (1) Program Specialist. Our plan is to have at least seven (7) Education Liaisons to adequately support each service area to help address those immediate needs of all compulsory school-age youth.

While the agency met the requirements, there were a few barriers that caused us to not be able to meet each one of the needs that were presented to the unit related to education. That barrier was mostly around timing and not having enough staff to cover different areas at the same time. If there are education referrals awaiting assistance from an Education Liaison and we only have one other person than can assist, it is very challenging to do so when that person is working on several other cases. That may result in a missed opportunity to meet the needs of the child because we do not have an adequate number of staff to provide services across the state. We are planning to amend our policy and some protocols to ensure that our youth's voices are heard, and rights are not violated as it relates to school hearings. One amendment

to the policy is to ensure that we allow for any due process hearings for youth that are charged with misconduct and facing a long-term suspension. Please see attached amendment to the *Notice of Suspension/Expulsion and Disciplinary Hearings* policy.

The agency is still amending the policy and some protocols to ensure that our youth's voices are heard, and rights are not violated as it relates to school hearings. The unit is introducing to the service areas the newest amendment to the policy which is to ensure that we allow for any due process hearings for youth that are charged with misconduct and facing a long-term suspension. Providing more coaching to staff in understanding why this is so important. The unit is requesting from the service areas to be more involved when hearings are scheduled.

The Best Interest Determination (BID) and the Education Records Review (ERR) report is how we ensure equity for all school-age children. These reports capture the child's age, date of birth, gender, grade, county, school district, and school records. This gives the Education unit the opportunity to review, address and provide the needed support for each youth based on the information received.

Division of Economic Assistance (DEA)

The Division of Economic Assistance is the division that administers the Supplemental Nutrition Assistance Program (SNAP), formerly known as the food stamp program, and the Temporary Assistance to Needy Families (TANF) cash assistance program formerly known as welfare. The State Refugee Coordinator (SCR) continues to collaborate with this division for the Refugee Cash Assistance Program (RCA). RCA is part of the Office of Refugee Resettlement (ORR) Program. Through this program, financial assistance is provided to eligible refugees for up to eight months from their arrival date in the United States (or from the date of their immigration status for asylees or victims of trafficking). RCA is for eligible people who do not have minor children. The SRC and DEA are in constant communication regarding refugees applying for RCA, the status of their applications, payment amounts, duration of payments, and federal reporting. MDCPS continues the collaboration with the Division of Economic Assistance (DEA) to assist refugees applying for Refugee Cash Assistance Program with application status, payment amounts, etc.

COLLABORATIONS with STATE COURTS, LEGAL and JUDICIAL COMMUNITY

CFSR PIP

Collaboration efforts between MDCPS and Mississippi's judiciary are continuous with the intent to complete Round 3 of Mississippi's CFSR PIP and advance CFSP goals and strategies.

Achieving Reunification, Guardianship, Adoption, or other Planned Permanent Living Arrangements is a collaborative effort. Achieving permanency timely requires collaboration

with the youth court, service providers, family members and foster parents. MDCPS Field Operations leadership team conducts regular reviews of agency data and uses the information to identify areas where practice and coaching require additional attention and developments. CQI and Field Operations continue to collaborate by assisting field staff and supervisors better understand the data. Information is shared with leadership to create a feedback loop that informs initiatives, policy, training, and practice improvement.

MDCPS, in conjunction with the Mississippi Judicial College and the Court Improvement Project, hosted a statewide mandatory judicial training on September 14-16, 2022. The training was a joint meeting with youth court judges, referees, and MDCPS staff with the intent to address issues faced by all stakeholders and continue reinforcing the PMLC principles. Additional information regarding the training is in the *Joint Meeting of the Youth Court Judges and Referees and Child Protection Services* section.

MDCPS's plan for Goal 4, Strategy 1, Activities 3-5 (CFSR PIP), was to "Improve Service Array and Delivery" by diversifying intensive in-home services and expanding available funding for services by implementing the Families First Prevention Services Act (FFPSA). CB approved transfer of activities 3-5 from the CFSR PIP to the APSR. Additional action regarding the renegotiation of the activities and FFPSA is contained in the *Renegotiation Items from the CFSR PIP* and the *Additional Services Information: FFPSA* sections respectively.

Joint Planning

As previously mentioned, MDCPS hosted the Mississippi Conference on Children and Families (*formerly Joint Planning*) in April 2023. The in-person and virtual convening focused on pathways to prevention, permanency, and care. Emerging issues in our child welfare system were the focus of all presentations. Additional details regarding the conference can be found in the *Collaboration: Mississippi Conference on Children and Families 2023* section.

Title IV-E Reimbursement for Legal Representation

Mississippi intends to reimburse the Office of the Attorney General for its representation of the agency in Mississippi courts through the utilization of IV-E funds.

COLLABORATION BETWEEN ACCESS to JUSTICE, CASEY FAMILY PROGRAMS, MDCPS, AOC, MISSISSIPPI JUDICIAL COLLEGE, DEPARTMENT of EDUCATION, CHANCELLORS, OFFICE of STATE PUBLIC DEFENDER, MISSISSIPPI CENTER for LEGAL SERVICES, FAMILY RESOURCE CENTER, MISSION FIRST LEGAL AID OFFICE (MISSISSIPPI COLLEGE SCHOOL of LAW), CHILD ADVOCACY CENTER (OLE MISS SCHOOL of LAW) and YOUTH COURT JUDGES

Title IV-E PIP Collaboration (Section 422(b)(13) of the Act)

Mississippi does not have an active Title IV-E PIP. However, MDCPS's eligibility unit continues to maintain a shared Smartsheet with the Administrative Office of Courts to identify cases with court order deficiencies so they may be addressed by AOC with the local youth court. The AOC, through the Jurist in Residence, notifies the local youth courts of those deficiencies as an educational tool/reminder regarding the language that is required in order for a child to be considered IV-E eligible. The AOC also asks the court to submit transcripts that can supplement the order and provide the missing language.

MDCPS has also been working with Doug Swisher at Public Knowledge to review our Eligibility manual and procedures. Through that work, MDCPS has discovered that internal policy created requirements and restrictions that are not necessary to meet IV-E eligibility requirements for federal reimbursement. This effort is intended to assist in determining why Mississippi's penetration rate is lower than states with comparable demographics. MDCPS and Mr. Swisher found several internal policies that were hindering the Eligibility Unit's ability to make timely IV-E determinations, and the Office of Legal Counsel is assisting in amending those policies.

The Parent Representation task force meets quarterly, and its purpose is specifically to work to expand the availability of parent representation, which is an established goal in Mississippi's CFSP. In 2023, the Office of State Public Defender's Parent Defense Program provides parent representation in twenty-right (28) Mississippi counties, and ten (10) additional Mississippi counties fund their own parent defenders. As a reminder, although MDCPS supports parent representation at all stages of a case, MDCPS has no control over the implementation of parent representation across the state. MDCPS does have a seat on the Parent Representation task force and supports the work through that task force. The Supreme Court also recently seated an ad hoc committee to study ways to decrease the length of time required to try TPR cases, and MDCPS has advocated for increased rates of parent representation and early parent representation (beginning at shelter) to move children to permanency faster.

Joint Meeting of the Youth Court Judges & Referees & Child Protection Services

On September 14 – 16, 2022, Mississippi Judicial College director Randy Pierce moderated this event which allowed youth court judges and referees, along with personnel from Child Protection Services to address issues that each side faces in court. Among the speakers were MDCPS Commissioner Andrea A. Sanders and Director Pierce. A panel consisting of Youth Court judges and referees addressed issues ranging from disclosure of records involving children to the proposed amendments to the Mississippi Uniform Rules of Youth Court practice. More than 800 participants attended the event via Zoom. Continuing Legal Education (CLE), Mandatory Judicial Education (MJE) and Social Work Education Credit were offered to those in attendance.

Home for the Holidays Campaign

In October 2022, MDCPS launched its Home for the Holidays campaign to streamline and expedite the path to permanency for children in MDCPS care having a plan of adoption. The Home for the Holidays campaign launched October 15, 2022, and ended January 31, 2023, during which time 224 adoptions were finalized. Particularly, in the month of December 2022, this campaign resulted in a record number of adoptions, with MDCPS doubling the agency's average monthly number of adoptions. As part of the Home for the Holidays campaign, mass adoptions, where multiple adoptions were finalized on the same day and adoption celebrations were held, took place in Harrison, Hinds, Lauderdale and Jackson counties.

The success of this campaign was due in part to internal revisions of the agency's adoption and termination of parental rights policies. Those updated policies have now been implemented agency-wide and continue to yield expediated permanency outcomes. One such policy revision was eliminating the practice of waiting until after expiration of the 30-day appeal period before beginning preparation of the necessary adoption paperwork; and this change allows the adoption packet to be provided to the adoption attorney immediately upon expiration of the appeal window, which significantly speeds up that child's adoption finalization. Another such policy revision is the increased reimbursement rate to attorneys for adoption representation and finalization.

Indian Child Welfare Act (ICWA) 10th Annual Conference

The Indian Child Welfare Act (ICWA) 10th Annual Conference was held at the Silver Star Convention Center in Choctaw, Mississippi, this hybrid event featured prominent speakers from across the country. Approximately 400 people attended in person and via Zoom. Continuing Legal Education (CLE), Mandatory Judicial Education (MJE) and Social Work Education Credit was offered to those in attendance.

Keynote Speaker Sandy White Hawk is a Sicangu Lakota adoptee from the Rosebud Reservation in South Dakota. She is the founder and Director of First Nations Repatriation Institute, Elder in Residence at the Indian Child Welfare Law Office, served as Commissioner for the Maine Wabanaki State Child Welfare Truth and Reconciliation Commission and served as an Honorary Witness of the Truth and Reconciliation Commission on Residential Schools in Canada. Ms. White Hawk screened her award-winning documentary Blood Memory, which illustrated the continuing trauma suffered by indigenous children taken away from their families and placed with white families with the stated purpose to strip them of their indigenous history and practices.

Professor Kathryn Fort, Director of Clinics at Michigan State University College of Law, and the Indian Law Clinic, is the author of American Indian Children and the Law and co-edited Facing the Future: The Indian Child Welfare Act at 30 with Profs. Wenona T. Singel and

Matthew L.M. Fletcher. Professor Fort provided a legal update on cases impacting ICWA and the current state of Indian Law in general.

The conference also featured Chief Cyrus Ben of the Mississippi Band of Choctaw Indians (MBCI), MBCI Supreme Court Chief Justice Kevin Briscoe, and MDCPS Commissioner Andrea Sanders. In addition, there was training on Mandatory Reporting and ICWA by the Mississippi Attorney General's Office and a lived experience panel featuring indigenous persons from Mississippi, New Mexico, Alaska and more.

Mississippi Youth Court Information Delivery System (MYCIDS)

MYCIDS is a system for real time management of the activities of the Mississippi Youth Court System. It is a web-based application that provides support for the intake of youths into the court system, scheduling of youth cases, management of court dockets, tracking of custody situations, necessary document generation and provides a base dataset for statistical reporting purposes.

MYCIDS closely monitors the scheduling activities to make sure that the youth are treated according to the law. The system is designed to support the Youth Court staff in the decision-making process by providing rapid access and visibility to information shared in a common information repository.

The MYCIDS staff provides regular training to a wide variety of stakeholders throughout the Youth Court system including judges, administrators, Department of Youth Services, Mississippi Department of Child Protection Services, prosecutors, parent defenders, youth defenders, guardians ad litem, and court clerks.

Subjects of trainings include dockets, petitions, orders, court requirements, family service plans, reports, schedulers, intake, probation, reasonable efforts finding, custody, and referrals.

Due to COVID-19 precautions most trainings were held virtually. MYCIDS staff resumed in person training in April 2022. In the past year, including virtual and in-person trainings, the MYCIDS staff continued group trainings across the state.

MYCIDS/SACWIS Interface

One of the AOC's joint projects for the upcoming fiscal year is to develop an interface between MYCIDS and SACWIS, the Mississippi Child Protection Services data system. This has been a long-term goal that we hope to finally bring to fruition within the next 18 months.

Redefining Neglect to Mitigate the Effects of Poverty on Removal

The AOC partnered with Casey Family Programs, the University of Mississippi Child Advocacy Clinic, and Mississippi Judicial College to study the feasibility of redefining neglect

to consider the effects of poverty as opposed to intentional neglect. This could lead to a new approach in processing reports of neglect that are solely based upon the family's socio-economic condition. To accomplish this, however, the definition of neglect under Miss. Code Ann. § 43-21-105 must be revised. In doing so, these measures will increase the capacity of our public and private child welfare agencies to meet the needs of financially challenged families. Per David Calder, co-author of the study, research estimates that approximately 75% of all cases referred to Mississippi Department of Child Protection Services in Mississippi each year involve reports of "child neglect." In many cases, children are alleged to be "neglected" because they do not have "the care necessary" for their "health, morals or well-being," even if it is unintentional because of the family's socio-economic condition. Enabling more parents to provide for the health, safety, and welfare of their children would cause the number of cases requiring state intervention and judicial oversight to be dramatically reduced. The desired goal of these measures is to empower families and strengthen communities, prevent the unnecessary removal of children from their homes, and thereby give the disadvantaged children of our State the opportunity and hope for a prosperous future.

The task force/committee that started this work before the COVID pandemic re-started its work in advance of the 2023 Mississippi Legislative session. Although proposed legislation was submitted in 2023, that bill did not make it out of committee; however, it is anticipated that similar legislation will again be introduced in January 2024.

III. Assessment of Current Performance in Improving Outcomes

SAFETY, PERMANENCY, and WELL-BEING OUTCOMES

The CQI Unit conducted regional and foster care reviews to assist MDCPS meet its assessment of current performance and goals for improvement. The regional and foster care review measures the quality of the agency's practice. The goal of each review is to help Mississippi improve child welfare services by providing feedback about how well MDCPS is meeting the seven outcomes for families that receive services from the agency. Quality Assurance Case Reviewers complete the reviews using a combination of state and federal instruments and guidelines. The review process does not change the status of a case nor does the reviewer make case decisions. The questions are related to MDCPS practice, actions taken to help families, and next steps.

The regional review collects information based solely on the seven federally mandated outcomes as it relates to the last year of practice and involves a sample of cases from each region. The regional review is conducted via phone with the reviewer and participant. The Foster Care Review (FCR) is held every 6 months on each child in custody for the remainder

of the child's custody episode. The FCR focuses on gathering information about what is needed to achieve permanency for each individual child along with the 7 outcomes. The FCR also collects quality assurance data for the state's modified settlement agreement (MSA). The FCR is held in the county office and requires the worker, ASWS, parents, grandparents, resource parents, Guardian ad Litem (GAL), and child(ren) to be invited to attend.

Continuous Quality Improvement (CQI) staff implemented the following efforts during the Measurement Period beginning August 2022. These efforts are an intentional focus to support the improvement of quality practice statewide and may not have a direct impact on the data from PIP Measurement 11 or the upcoming periods.

- The agency's Moving Forward Together Conferences provided an opportunity for CQI Supervisors to collaborate and present on the different units within CQI, its purpose, and the 'why' behind different types of data. Presentations included an interactive and fun learning segment that was modeled after a game show and promoted critical thinking about best practices with Safety & Risk and Engagement practices in focus (information and answers were drawn from the Children's Bureau resources). The presentation also provided illustrations of quality documentation and offered interactive examples of how to capture / document experiences in the field. The PowerPoint presentation was shared multiple times with various MDCPS staff.
- CQI Supervisors and Executive Leadership collaborated to revise the Supervisory Case Staffing Form. It was assessed that performance was steady or would increase in results if Supervisory efforts were consistent in completing quality staffings with caseworkers. Additionally, it was assessed that supervisors had varying levels of skills and understanding of the staffing form (the completed form varied in depth / quality). The revised Supervisory Case Staffing Forms were expanded (from the original questions) to add more detailed guidance pertaining to Safety, Permanency, and Well-Being as well as worker well-being. The questions and guidance directed supervisors to think critically about the case being staffed and consider if practice efforts were captured for measurement later. The approved (revised) case staffing forms were distributed statewide on October 17, 2022, in a memo with directives from Executive Leadership for implementation.
    - CQI Supervisors developed strategic learning labs with all regional supervisors and leadership to support implementation of the revised Supervisory Case Staffing Forms. The strategic sessions focused on Item 3 measurement (defining quality practice), introducing / explaining the revised Supervisory Case Staffing Form, how to capture quality in documentation, and then RAP workgroup. RAP worksheets were used to develop tasks. The first session offered a "safe place" to promote understanding of the form as well as best practices on how to approach the strengthening of the case staffing time. The session reviewed the Documentation Framework and involved solution focused discussion on how supervisors can promote that type of documentation with staff under their leadership. The second session required critical thinking skills utilizing completed randomized peer reviews (from examples brought by participants). Peer Reviews included corrective feedback for quality narratives.

- The development of the Documentation Framework was a collaborative effort between CQI Supervisors and Executive Leadership. MDCPS Professional Development Unit has assigned statewide trainings using the SAP format (Summary, Assessment, & Planning). The Documentation Framework is a compilation of the SAP format with focused questions and guidance around Safety, Permanency, & Well-Being. The Documentation Framework covered focused areas of contacts with children in care, Parent/Caretaker contacts, In-home cases, resource parent contacts, and medical contacts/documentation. The Documentation Framework forms were distributed statewide in a memo from Executive Leadership with directives for implementation.
    - CQI Supervisors developed and piloted learning labs in February 2023, with teams in Service Area 1, 2, and 4 to support implementation of the Documentation Framework. The first session offered a "safe place" to promote understanding of different Frameworks, practicing the use of Summary / Assessment / Planning documentation, narrative examples, and solution focused discussion on how staff can promote and support each other in documentation improvement efforts. The second session required all staff to present printed narratives for Peer Reviews. Group facilitated discussions are intentional and strategic, acknowledging what can be done differently, and corrective feedback to move forward as a team to promote better documentation. The second session also has a focus on CORE to teach and review how data can be utilized to inform on needs to complete in practice. Starting April 2023, the FCR Unit began tracking the use of the SAP documentation in all foster care cases to determine if the SAP format was being utilized and if the narratives are of quality.
- CQI Supervisors and Regional Leadership meet monthly to prepare for nonoverlapping period meetings with the Children's Bureau. The focus of the collaborative effort between CQI and Field Operations is to better understand the data and describe concisely the efforts made by local leadership to promote practice improvements.

The case review unit works to overcome the barrier of being viewed as CQI. MDCPS staff must understand that CQI is a concept that belongs to the entire agency and begins with performance review of each worker. The case review unit has long been required to perform CQI activities. This mindset diminishes the sense of urgency and ownership at the field level to enter and analyze data correctly and take corrective action steps to strengthen or improve case deficiencies. The Senior Leadership Team plans to combat this barrier by meeting with appropriate staff to break down the Quality Case Review Unit and identify how all units are a part of CQI.

The CQI Unit makes great effort to incorporate equity, diversity, and inclusion for all children and families during the collection of data from the case reviews. The reviews provide information that is analyzed across every region and county in Mississippi. The reviews produce specific data for different requests such as MSA reporting, corrective actions, data quality and case practice. The results are analyzed based on several factors such as length of

time in care, type of permanent plan, age of child, etc. The analysis offers opportunities to provide feedback regarding consistency of practice across the state. Review results can be analyzed regionally or by county. Timely Permanency, comprehensive assessments and provision of needed services are a focus of the qualitative reviews. Information is shared with leadership to provide a feedback loop that informs initiatives, policy, training, and practice.

Safety Outcomes 1 and 2 (1355.34 (b)(1)(i))

Safety Outcome 1, *Item 1: Children are, first and foremost, protected from abuse and neglect.*
Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes?

The vision and mission of both Mississippi state government and MDCPS are outcome focused, dedicated to ensuring the safety and wellbeing of Mississippi's citizens over the next five years have been crafted to keep Mississippi's focus on outcomes.

The state completed the implementation period of the approved CFSR Round 3 PIP on January 31, 2022. Baseline measurements began July 1, 2019, and assisted MDCPS in determining strengths and challenges of current strategies. The data was also used to determine where MDCPS should focus efforts moving forward. Safety outcomes 1 and 2 are being addressed in Goal 2 and Goal 3 of the CFSR PIP. MDCPS continues to reinforce its expectations of case staffing tools being used to staff all cases at least monthly. The monitoring process is progressing, and supervisors are effectively using the tool to facilitate high quality case staffing and increase the quality of work in all aspects of practice.

A component of Mississippi's assessment of current performance is OSRI from MDCPS CQI reviews performed ongoing throughout Post Baseline period of April 2022 to March 2023. The following regions were reviewed during this time: 2E, 1N, 3S, 4S, 3N, 4N, 5E, 7C, 2W, 1S, 5W, 7E, 6, and 7W.

For Safety Outcome 1 (Item 1), the Practice Performance Report was exported from the Onsite Review Instrument (OSRI) for the Post Baseline Period of April 2022 to March 2023.

Item 1: Timelines of Initiating Investigations of Reports of Child Maltreatment

Item 1 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	112	114	114	115

Item 1 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Total Applicable Cases	183	184	177	185
Performance (%)	61.20%	61.96%	64.41%	62.16%

Item 1 corresponds to CFSR PIP Goal 3 (improving supervisory support), Strategy 1/activities 1-3. The PIP Goal of 68% Strength was met at PIP Measurement Period 4 and remained above the goal for Measurement Period 5 but has fallen below the goal from Measurement Period 6 to the most current period. Item 1 rated a Strength for Safety Outcome 1 at 62.16%. The Practice Performance Report reflected that of the reports of maltreatment not initiated timely (n=75), there were five applicable cases reviewed that identified circumstances beyond the control of the Agency. The Regional Review Item Rating Summary for the period under review included some of the following practice concerns:

- Ongoing, consistent efforts were not made (for each of reports received in the PUR) to attempt to locate the family according to the State policy for the level of the report received (Level 2 with timeframe of 72 hours or Level 3 with a timeframe of 24 hours).
- The criteria for attempted contacts were not consistently completed by the Agency. This includes instances where two or more locations had been checked to locate the alleged victim(s) and/or family. Concerted efforts to locate were not made daily until the family was found.

MDCPS will ensure that ongoing, consistent efforts are made to attempt to locate families according to the State policy for the level of the report received. MDCPS has partnered with Connect Our Kids, a 501(c)(3) non-profit who works with state and private agencies nationwide to create technology solutions that support connections for youth in care. MDCPS rolled out tier one last year which is a people search tool created specifically for child welfare professionals to find contact information for family and extended family of youth. The tool uses public information from over 300 sources and is free to child welfare professionals. This information was shared during a leadership forum with follow-up information being placed in Cornerstone for all agency staff. Tier two consists of in-person training delivered by the Connect Our Kids team around the state. Tier two is a two-hour training with a clinical focus on why connections matter. MDCPS has scheduled training in geographic locations of the Service Areas for ease of travel for participants. All current MDPS staff will be trained by the end of August 2023. MDCPS Professional Development unit will deliver subsequent training for new hires, transfers, and all other staff going forward. Timely and effective case staffing and using available data will continue to be a practice of the Agency.

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

For Safety Outcome 2 (and subsequent Items), the State Rating Summary Report was exported from the Onsite Review Instrument (OSRI) for the PIP Measurement Period 11 and added to the charts below. The MSA quarterly reporting could also be referenced for similar type practices measured; however, they are different tools, different ways of measurement (MSA measurements are more specific with smaller time frames). While there are no direct questions related to Item 3 of the OMS, the item rating narratives were mined for specific data drivers or practice themes that were affecting the ratings. What was found included themes around quality contact with key case participants to assess ongoing safety and risk factors. Therefore, there are a few FCR Supplemental questions that are cross relatable to this question. The Foster Care Review Supplement form question #1 was used to collect and guide the review determination.

- MSA 5.1a 60.0% (n=1138) of the children reviewed indicated that the caseworker and age-appropriate child addressed issues pertaining to the child's needs, services, and case goals during the visit.
- MSA 5.1.c/ 6.3.a.2 - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 911 children were applicable during the PUR (no TPR, permanent plan is reunification, parent is not absent, incarcerated, or lives out of state). 25.1% (n=229) of child files reviewed contained documentation of monthly contacts between the caseworker and the parent(s) with whom the child is to be reunified and those contacts were sufficient to assess service delivery and promote achievement of case goals, discuss progress on family service plan, to keep the family informed and involved in decisions about the child, child's well-being, and remain current on the family's circumstances. The Foster Care Review Supplement form question #13 was used to collect and guide the review determination.
- MSA 5.1.d - Children included in this data set represent all cases reviewed that received foster care review between January 2023 – March 2023. 1699 children were applicable and 49.9% (n=847) of those children indicated adequate assessment of resource parent's needs. The Foster Care Review Supplement form question #11 was used to collect and guide the review determination.

Safety Outcome 2, *Item 2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Reentry into Foster Care*. Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?

Item 2 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	50	58	64	63
Number of Total Applicable Cases	97	100	98	97
Performance (%)	51.55%	58%	65.31%	64.95%

This item corresponds to CFSR PIP Goal 2 Strategy 1/activities 1-3. To date, the strategy and related activities are complete. It was asserted by the State from PIP Measurement Period 1 that the goal of 60% had been met. For consecutive PIP Measurement Periods after meeting the goal, the State has rated below the Item PIP Goal until PIP Measurement Period 10. Item 2 rated 64.95% Strength and 35.05% Area Needing Improvement. Practice Performance results in the applicable cases reflected a small percentage (n=11) of cases where concerted efforts were made to prevent entry or re-entry into care and the child(ren) entered custody regardless of the efforts made due to the circumstances of cases reviewed. Practice Performance results reflected that a slightly higher number (n=30) of cases reviewed reflected those concerted efforts had been made and the child(ren) did not enter the Agency's care. Practice Performance results reflected in the applicable cases (n=22) that although the Agency did not make concerted efforts to prevent entry or re-entry, the removal of the child(ren) action was necessary to ensure the child(ren)'s safety.

Practice Performance results revealed that in 20 of the 97 applicable cases, concerted efforts to prevent entry or re-entry were not made and the children remained in the home. The OSRI Item Rating Summary report for the period under review indicated the following practice trends that effect the ratings:

- For the cases that rated ANI, Safety related activities were not attempted or explored at the pivotal moments in the period under review where safety threats were present for those applicable cases.
- For some cases, even though some safety related activities may have been implemented to address the safety threat, they were not specific enough to address the immediate threat.

Field operations leadership is exploring opportunities for increased specialization of investigation in certain areas across the state (most MDCPS caseworkers still carry mixed caseloads of investigations and ongoing casework). This approach is informed by the belief that specialization will allow better alignment of individual caseworkers' skills and job duties,

ensuring that those with the best assessment skills are handling investigations and initial risk and safety assessments.

MDCPS is also researching how it can incorporate more experiential learning into its training programs. Though the revised definitions have been incorporated into training, MDCPS sees that the understanding of those definitions will not translate into improved performance unless staff have the skills to apply those definitions in their work, so the Agency is seeking ways to improve trainings that will provide required skills.

CFSP/APSR Goal 2, located in Section V, includes strategies to support families through a continuum of effective in-home services and to improve family engagement practice. These strategies are expected to improve performance in this area.

Safety Outcome 2, *Item 3: Risk and Safety Assessment and Management*. Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?

Item 3 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	171	177	197	218
Number of Total Applicable Cases	350	350	350	350
Performance (%)	48.86%	50.57%	56.29%	62.29%

Item 3 does not correspond to a specific goal in the CFSR PIP however it is combined with Item 2 as a composite for overall safety outcome 2. The State has not met the PIP Goal of 68%. The review results have shown a decrease from the initial reporting period: Measurement Period 1 rated at 65%, Measurement Period 2 rated at 65%, Measurement Period 3 rated at 63%, Measurement Period 4 rated at 63.71, Measurement Period 5 rated at 62%, Measurement Period 6 rated at 58.86%, and Measurement Period 7 rated at 54.29%, and Measurement Period 8 rated at 48.86%. However, PIP Measurement Period 9 increased to 50.57 and PIP Measurement Period 10 increased to 56.29%. Review Results reflected a higher rating for Foster Care cases (69.05%) than that of In-Home cases (52.14%) for the current measurement period.

Item 3 is the only remaining Round 3 PIP Item not asserted as met. The Item 3 Ratings have shown a trend upwards for the past three rating periods. The review process weighs the statements of all interviewees as well as case record information. The two main practice

performance areas that affect the ratings include sufficient ongoing safety and risk assessments and detailed practice around safety plans. From the review of all item rating narratives, the top data drivers that are included in ongoing assessments are completing sufficient and quality assessments of all household children, all household adults (including paramours), and the assessment of physical home environment (of the parent(s) and /or children). A multitude of reviews found that some of the children in the in-home cases or children that may have remained in the home with the parent of foster care cases were not assessed ongoing and, in some cases, not included in the case documentation. Reviews also reflected that not all household adults and/or caregivers and paramours were assessed for Safety and Risk factors to the family's home. CQI launched an inner-rater agreement exercise of Item 3 during the Measurement Period to explore if the County of Responsibility's self-rating would mirror the final ratings of the practice for Item 3. While results vary from region to region, it has been assessed that COR responses reflect a need for a better understanding of how safety and risk practices are measured and how concerted efforts in practice are defined. There also appears to be a confusion between COR's understanding or verbiage around concerned efforts in practice versus case outcomes. The CQI Unit consistently facilitates the data results meetings in a manner that educates and discusses the definition of concerted efforts in agency practice and how such is rated and measured in CQI reviews. The understanding of concerted efforts in practice was promoted and encouraged through the Learning Labs (Supervisory Case Staff Tool training and SAP Documentation Framework Training) facilitated by CQI. Through Foster Care Review facilitation, discussion around concerted efforts in agency practice often occurs on a case specific basis. These abstract topics could be areas of focus in the future for the Agency's practice improvement efforts.

The OSRI Item Rating Summary indicated the following practice trends:

- The Agency's formal written safety and risk assessments did not contain the quality or frequency expected / needed, however, informal efforts in practice were conducted more often and more frequently by speaking to the child(ren) and case key participants during contacts and home visits. Systemically, to improve the Agency's practice, the plan is for the Agency to purchase a safety and risk assessment structured decision-making tool that will be used in case management. The new statewide tool will be used by both staff who complete investigations and staff who carry caseloads.
- Finding narratives for Item 3 reflected those inconsistent contacts with parents (and legal spouse / paramours) was a contributing factor or barrier noted in the completion of comprehensive and ongoing assessments of the safety and risk factors. This element is measured for parents when one of the Permanency Plans is reunification.
- In applicable cases where a safety plan was active or needed to be created with the family, the elements of the safety plan did not fully address or concretely define the activities or arrangements needed to fully control the immediate threat to the child(ren). Regarding the safety plan, review results indicate that defined end dates (short term) were needed so that

safety plan participants had a clear understanding of the plan agreed upon between the Agency and key participants of the safety plan. The agency will conduct meetings with all key participants throughout the development of the safety plans.

Improvement efforts continue and examples include additional and ongoing training for case workers and supervisors as well as additional training provided on assessments.

Restructuring of the agency is currently taking place. A strategic move to specialize in investigations from the ongoing casework is part of the restructure. The intent is to structure this part of the work such that efforts are placed on risk and safety factors at the onset of MDCPS's involvement for early identification and mitigation leading to agency engagement. No specific date has been determined; however, investigations will move from field operations (currently under the deputy commissioner of child welfare) to the deputy commissioner of child safety.

There has been a slight change due to the departure of the Deputy Commissioner of Safety. Investigations remain under field operations; however, staff have been specialized across the state. Caseworkers either carry a caseload made up of in-home and foster care cases or they serve as Investigation Specialists.

Structured Decision Making (SDM), staff restructuring, and improved family engagement practice are strategies included in CFSP/APSR Goals located in Section V of this document. These strategies are expected to improve performance in this area. The estimated implementation timeframe is 12-18 months. This activity has been marked complete in the PIP and MDCPS will provide implementation updates throughout the non-overlapping period.

Additionally, the CQI team will provide material and work with Professional Development to develop training and tools for caseworkers and supervisors. This team will develop training and tip sheets (attached) to ensure staff are adequately trained on the items being measured to ensure safety of children. In reference to this item, this will be completed in the 18-month non-overlapping period. The training occurred in July 2022 via Cornerstone. Additional details regarding the training are provided in Staff and Provider Training: Items 26-27.

Field operations will refer the task of monitoring weekly staffing tools to ASWS/OMAP to ensure parent engagement and involvement in their case. MDCPS supervisors will help around formulating and implementing quality safety plans that address immediate safety concerns and threats to children and the importance of ongoing monitoring of the plans to ensure there are no gaps or prolonged agency involvement that is not warranted.

Permanency Outcomes 1 and 2 (1355.34 (b)(1)(i))

Permanency Outcome 1: Children have permanency and stability in their living situations.
For Permanency Outcome 1 (and subsequent Items), the Practice Performance Report was exported from the OSRI for the Post Baseline Period of April 2022 to March 2023. The Practice Performance Report offers an analytical breakdown of practice elements measured from the rolling Regional Reviews that contribute to the overall Permanency Outcome 1. Placement stability (Item 4) is a continued ongoing strength for the State.

Permanency Outcome 1, *Item 4: Stability of Foster Care Placement*. Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)?

Item 4 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	176	170	174	171
Number of Total Applicable Cases	210	210	210	210
Performance (%)	83.81%	80.95%	82.86%	81.43%

Item 4 corresponds to Goal 1 Strategy 1/activities 1-7 and Goal 1 Strategy 2/activities 1-7 of the CFSR PIP. It was asserted by the State from PIP Measurement Period 1 that the goal of 80% had been met and MDCPS rates this item as a strength. The percentage goal has been maintained for PIP Measurement Periods 2-11.

Foster Care Review captures information required to measure data on placement stability or needed services to prevent a disruption in placement. The reviews have shown that MDCPS does a great job with placement stability and holding placement disruption meetings to keep a child in their placement and assessing the Foster Family for needed services to maintain the placement. The Foster Care Review Supplement form question #4 was used to guide the review determination.

> MSA 4.7.a-e Children included in this data set represent all cases that received foster care review between January 2023 – March2023. 213 children were applicable (a placement disruption - unplanned move occurred during the PUR). 79.3% (n=169) of those children indicated the following steps occurred: identifying the cause of the disruption, assessing whether the placement is appropriate for the child/if another placement is needed, assessing whether additional services were needed to support the placement, identifying what the placement should be if another placement is needed.

MDCPS Field Operations leadership continues coaching efforts to prevent disruption in placement. Supervisors discuss potential placement disruptions regularly in case staffing. For youth with therapeutic needs, frontline staff consult with the therapeutic placement units to identify resources that may prevent placement disruption.

Permanency Outcome 1, *Item 5: Permanency Goal for Child*. Did the agency establish appropriate permanency goals for the child in a timely manner?

Item 5 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	112	121	130	132
Number of Total Applicable Cases	210	210	210	210
Performance (%)	53.33%	57.62%	61.9%	62.86%

Item 5 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The State asserted that the PIP Goal of 47% was met during PIP Measurement Period 7 (at 47.14%) and has steadily increased each Measurement Period.

The OSRI Item Rating Summary indicated that many of the permanency plans were effective for the period under review and established timely in many cases and many were considered appropriate for the timeline and case dynamics for the cases reviewed. Review results reflect that performance measures did increase during the current period around appropriateness of active plans and practice of joining or filing termination of parental rights petitions.

MDCPS Field Operations leadership continues to receive coaching around permanency and completing and submitting timely TPR Packets. Permanency is an ongoing part of case staffing. MDCPS engaged with the Office of the Attorney General and the Administrative Office of Courts to expedite a backlog of termination of parental rights cases in Hinds County. A special judge was appointed by Mississippi's Chief Justice that resulted in increased docket capacity.

The federal CFSR Data Profile shows that Mississippi has been consistently at or above the national risk standardized performance for three of the four Permanency indictors. This has been described above and is also described in Section V of this Plan.

Permanency Outcome 1, *Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement*. Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangements for the child?

Item 6: Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	70	73	85	91
Number of Total Applicable Cases	210	210	210	210
Performance (%)	33.33%	34.76%	40.48%	43.33%

Item 6 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The State has asserted that the PIP Goal of 34% has been met at the end of Measurement Period 9. The current measurement period increased since that assertion.

Individual case dynamics / circumstances of cases reviewed were considered and justification given if federal timeframes were not achieved. The Agency and Courts collaborative efforts are considered in the practice performance measurements. While there were a small number of children with a plan of APPLA (other planned living arrangement), only one of those cases rated as a strength. The OSRI Item Rating Summary indicated that the services needed for those youth to successfully live independently were not consistently provided (some services but not all were provided throughout the PUR).

- Review results noted the need for consistent practice efforts to work towards the assigned goals. While many cases reflected some efforts in the PUR, expected practice is to have ongoing efforts to achieve permanency for each of the plans assigned (with both a permanent and concurrent plan assigned). Specific examples of practice improvements noted in the Item rating summary narratives that are needed so cases can be moved towards permanency faster include:
- The review process found that there were consecutive months in the period under review with no contact with parents when whereabouts were known or lacking efforts to locate parents when whereabouts became unknown all-in effort to work the plan of reunification. While this practice impacts the ratings for Item 6, it could also negatively impact ratings for Item 3 (Safety and Risk) as well as Item 12b (Strengths / Needs / Well-being of parents).
- The review process found there were consecutive months with no efforts to locate/begin processes with individuals that could fulfill the plan(s) of Guardianship. This would apply to plans of Custody with a Relative or Durable Legal Custody. It is commonly noted that

the Agency seems to do better initially in attempting to identify relatives, however, the ongoing practice needs strengthening. While this practice does impact the ratings for Item 6, it could also negatively impact ratings for Item 10 and possibly Item 9 which are related to preserving connections for the child in care.

- The review process found that historical factors do affect cases with the plan of Adoption. If the case has been open for a longer period, reviews often reflect historic issues with TPR packets having deficiencies and returned to the county, delays in the petition being filed for TPR, and continuances regarding TPR hearings. While there may be legal reasons for multiple continuances, that does cause delays in permanency achievements which can rate as Area Needing Improvement within the OMS (which may or may not be directly due to Agency practice).

Achieving Reunification, Guardianship, Adoption, or other Planned Permanent Living Arrangements is a collaborative effort. Achieving permanency timely requires collaboration with the youth court, service providers, family members and foster parents. MDCPS Field Operations leadership team conducts regular reviews of agency data and uses the information to identify areas where practice and coaching require additional attention and developments. CQI and Field Operations continue to collaborate by assisting field staff and supervisors better understand the data. Information is shared with leadership to create a feedback loop that informs initiatives, policy, training, and practice improvement.

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

For Permanency Outcome 2 (and subsequent Items), the State Rating Summary Report was exported from OSRI for the Post Baseline Period of April 2022 – March 2023. The State Rating Summary Report provides the ratings for the overall outcome measured as substantially achieved at 55.24% (n=116) partially achieved at 36.19% (n=76), and not achieved at 8.57% (n=18) of the applicable cases in the sample of cases reviewed.

Permanency Outcome 2, *Item 7: Placement with Siblings***.** Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?

Item 7 rated 77.21% Strength and 22.79% Area Needing Improvement. Practice Performance results reflected that less than half of the sample the target child was placed with all their siblings who were also in foster care (n=56). Furthermore, although the sibling group was not placed together, there were valid reasons for those placement separations in 61.25% of the applicable cases. Concerted efforts to keep the siblings together or to reunite any separated siblings with changing circumstances in the period under review is measured. The OSRI Item

Rating Summary (corresponding Excel Document) indicated that more practice efforts are needed to place sibling groups back together when specific circumstances that separated the siblings change during the period under review. The report reflected that a common circumstance from the applicable cases is related to behavioral issues with one or more children of the sibling group. Furthermore, if separation occurred due to treatment needs and recommendations, efforts were lacking to readdress placement back with the separated sibling(s).

FCR does not have data to show why the siblings are separated, however, FCR does collect data on visitation plans and maintaining visits.

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP.

MDCPS will ensure staff are appropriately assessing when siblings can be placed together and when placement together is not feasible due to behavior concerns, MDCPS will have ongoing assessment for sibling placement. There is a place on the placement tab where a worker selects if the siblings are not placed together and why.

Permanency Outcome 2, *Item 8: Visiting with Parents and Siblings in Foster Care***.** Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationships with these close family members?

Item 8 rated 52.07% Strength and 47.93% Area Needing Improvement. Practice Performance report reflects a need for increased frequency in the amount of and type of family visits between the target child and parents and target child and separated siblings. The OSRI Item Rating Summary (corresponding Excel Document) indicated that concerted efforts were not made consistently to promote both frequent and quality visitations consistently throughout the period under review particularly revisiting the visitations plans when case circumstances or case dynamics change (either positive or negative changes). The item rating summary report also revealed that the setting of the family and/or sibling visitations were not held in an environment conducive to promote the maintenance of a positive, quality connection between the parents and / or separated children. Furthermore, for the applicable cases where trial home visit occurred during the period under review, practice efforts to transition the child back into the home were not made.

Practice efforts to transition the child back into the home were not made for the applicable cases where trial home visit occurred during the period under review. MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP.

MDCPS field operations leadership will ensure efforts are made to ensure frequency of visitations between parents and child(ren) is sufficient to maintain and promote the continuity of the relationship. FCR does not have data to show why the siblings are separated, however, FCR does collect data on visitation plans and maintaining visits. MDCPS will continue to improve on efforts to provide visitation in an environment that is conducive for family engagement when possible.

For applicable cases, MDCPS will monitor stagnate trial home placements to ensure there are no barriers to timely reunification, in no attempt to show progression toward the child's transition to the home.

Permanency Outcome 2, *Item 9: Preserving Connections***.** Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends?

Item 9 rated 57.42% Strength and 42.58% Area Needing Improvement for Permanency Outcome 2. Practice Performance results reflected those concerted efforts were made consistently in 58.37% of cases reviewed to maintain the child's established connections (connections prior to entry into care) to community, faith, language, extended relatives, etc. (n=122). Practice performance was a strength in the Agency's inquiry if the child was a member of or if eligible to be a member of a federally recognized Indian Tribe (n=204). The OSRI Item Rating Summary (corresponding Excel Document) indicated that practice was as expected in seeking out and clarifying family connections (various degrees of familial connections such as siblings not in care, half siblings, extended family, or fictive kin).

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP. However, the MDCPS Leadership team will utilize the PMLC process, which includes discussions on connections, to combine efforts to focus on healing families.

Permanency Outcome 2, *Item 10: Relative Placement***.** Did the agency make concerted efforts to place the child with relatives when appropriate?

Item 10 rated 74.04% Strength and 25.96% Area Needing Improvement. Practice Performance results reflected that of the applicable cases reviewed, the child's most current or recent placement was with a relative in a small portion of the cases (n=58). However, for the percentage of children that were not placed with a relative during the period under review, there were concerted efforts made to identify, locate, inform, and evaluate both maternal and paternal relatives for possible placement with both maternal and paternal relatives in many of the applicable case. For the cases that did rate area needing improvement, results indicated that practice efforts were not consistently made during the period under review to identify, locate,

inform, and evaluate beyond the initial efforts at case openings (for the cases that opened during the period under review) nor were those efforts found for continual search for both maternal and paternal relatives particularly if the child's family relationships were complex (complicated relationship issues). If the custodial parent fails to provide the agency with maternal or paternal relatives, due to strain of relationship it causes a barrier for the agency. It is recommended that the agency implement a training regarding the importance of using assessment tools, etc. that helps them to address strained family relationships more comprehensively as the intervention/goal would be to for the family relationships to function more effectively to strengthen overall protective capacity.

MDCPS Professional Development Unit provides training and support regarding family dynamics in both pre-service and Clinical Supervisor Training.

Pre-Service training covers the importance of relationships, engaging families in case planning, family centered practice, diligent efforts, both in the classroom (virtual space) as well as during the on-job-training weeks, and include educational video tutorials to further strengthen and embed the concepts.

Cornerstone Training assigned:

All completed for OJT-

- Visualizing the Family and its Support System
- Strengths Based Family Centered
- Family Engagement
- PMLC 2 Virtual Tutorial Involving Children and Families in Case Planning and Decision Making
- PMLC 2 Virtual Scenario Involving Children and Families in Case Planning and Decision Making
- Reasonable Efforts Practice Scenario: Module 1 (Prevent Removal and Strengthen the Family)
- Reasonable Efforts Practice Scenario: Module 2 (Return Child Home)
- PMLC 7 Virtual Tutorial Preserving and Maintaining Connections (Involving Children and Families)
- PMLC 7 Virtual Scenario Preserving and Maintaining Connections (Involving Children and Families)
- Father Involvement in Child Welfare

Clinical Supervisor Training addresses Family Centered Practice, Practice Model Learning Cycle, engaging families, diligent efforts, and the importance of locating absent caretakers and extended family (both formal and informal). The informational tools provided are our standard use of resources such as utility companies, school records, law enforcement, economic assistance, google etc. Information is from the assessments conducted with families is captured

on the comprehensive family assessment and family service plan and used as a tool to guide the practice.

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP.

MSA qualitative data regarding the appropriateness and restrictiveness of the placement indicate that MS makes efforts to place children in homes that can meet their needs or level of care needed, however, improvement may be needed to identify relatives or document the reasons why relative placement is not appropriate. Question #3 on the Foster Care Review Supplemental form attached to this submission was used to collect and guide the review determination.

MSA 4.3 - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 1897 children were applicable and 99.9% (n=1896) of those reviews indicated the child is placed in the least restrictive setting. In order of consideration, this means placement with relatives; foster home care within reasonable proximity to the child's home community; resource home care outside of the child's home community; group home care; or institutional care.

MDCPS will continue to identify appropriate relatives through family members and diligent searches who can provide care; these efforts are included in Section V, Goal 3, Objective 1.

Permanency Outcome 2, *Item 11: Relationship of Child in Care with Parents***.** Did the agency make concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging for visitation?

There is no percentage goal outlined in the PIP, however, Shared Parenting is identified in PIP Goal 1, Strategy 2. This item is rated 50.68% Strength and 49.32% Area Needing Improvement. Practice Performance report reflected those concerted efforts were not consistently made to promote, support, or otherwise maintain a positive connection between the child and his/her mother and/or father. The OSRI Item Rating Summary indicated that that the Agency's practice in defining shared parenting activities, or the possibilities of shared parenting activities needed to be clarified for individual case circumstances with all key participants. Furthermore, the results reflected that shared parenting activities were not consistently encouraged and promoted for both parents (when more than one parent was applicable) although practice efforts were as expected for one of the parents. Also, results identified the need for a clear understanding of practice expectations when differentiating expected practice around shared parenting (defining the parental responsibilities that could be

shared with the Agency and placement providers when safe and appropriate to do so in the applicable cases).

For the cases that rated an area needing improvement, results did not find where practice encouraged the parent to participate in school, church, sports, medical, dental, therapeutic, and other shared parenting activities with the child. Supportive efforts that were missing in the reviews included providing transportation for the parents to support participation and defining what shared parenting could look like for the case in focus such as a mentoring relationship between the parent and foster parents.

MSA qualitative data suggests that while visitation plans are often established for children and parents and they include at least twice a month plans for visits, the plans are not updated with the parents (ongoing discussion with parents to encourage visits) and the percentage of visits that take place or that are documented is low. Increasing shared parenting could assist with this and consenting to innovative ways that allow resource parents to assist the worker to track visits may also need to be considered (example: allow them to track via a phone app/Smartsheet, or application that interacts with CWISS in the future). The Foster Care Review Supplement form gathers the follow the MSA Data:

Visitations between Parents and Children

- MSA 5.2.b - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 1,025 children were applicable during the PUR (parent rights were not terminated/parents were involved). In 62.9% (n=645) of child files reviewed, a visitation plan was developed and regularly updated in the FSP in collaboration with the parents, foster parents, and the child (as age appropriate). MSA 5.2.b.1 -Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 1,025 children were applicable (no TPR, no restricted visits or absent parents). During the PUR, 89.3% (n=915) of the children reviewed indicated that there was evidence that the visitation plan included a minimum of two visits per month with the parents, unless the court ordered visitation was not appropriate, parental rights were terminated, paternity was unknown, the parent was otherwise absent/uninvolved or failed to make themselves available. Absent parents include parents who are incarcerated or not involved in the care of the child. The Foster Care Review Supplement form question #6a was used to guide the review determination.
- MSA 5.2.b.1.a- Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 1,025 children were applicable (no TPR, no restricted visits or absent parents). During the PUR. 31.3% (n=321) of the children reviewed indicated that there was evidence of a minimum of two visits per month provided with the parents, unless the court ordered visitation was not appropriate, parent rights were

terminated, paternity was unknown, the parent was otherwise absent/uninvolved or failed to make themselves available. Absent parents include parents who are incarcerated or not involved in the care of the child. The Foster Care Review Supplement form question #6b was used to guide the review determination.

Visitation between separated siblings.

- MSA 5.2.b.2 -Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 610 children were applicable to this question (child reviewed had siblings in foster care residing in separate placements during the PUR and did not have an MSA exception documented). 25.7 % (n=157) of the child FSP's reviewed included documentation of a plan to provide at least monthly visits with any siblings in custody not in the same placement. The Foster Care Review Supplement form question #7 was used to collect and guide the review determination.
- MSA 5.2.b.2.a. - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 610 children were applicable to this question (child reviewed had siblings in foster care residing in separate placements during the PUR and did not have an MSA exception documented). 26.6% (n= 162) of the MACWIS records for each child reviewed indicated a visit was documented monthly for applicable separated siblings. The Foster Care Review Supplement form question #7a was used to collect and guide the review determination.
- MSA 5.2.b.3 - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 610 children were applicable to this question (child reviewed had siblings in foster care residing in separate placements during the PUR and did not have an MSA exception documented). 28.5% (n=174) of the child records reviewed found documentation of reasonable efforts to facilitate visits for separated siblings 2x monthly for age 6 and below and 1x monthly for those 7 and above. The Foster Care Review Supplement form question #7b was used to collect and guide the review determination.
- MSA 5.2.b.4.c. - Children included in this data set represent all cases that received foster care review between January 2023 – March 2023. 27 children were applicable to this question (child reviewed had siblings in foster care residing in separate placements during the PUR and exceptions were documented). 37% (n=10) of the children reviewed indicated that 5.2.b.4.a- the child or sibling is placed out of state pursuant to ICPC. 30% (n=8) 5.2.b.4.b- the visit may be harmful to one or more of the siblings as determined by the court or documented in the record why the visit would be harmful to one or more of the children. 33% (n=9) 5.2.b.4.c- one of the siblings is above age 14 and refuses such visits and the reason for refusal is documented in the case record. The Foster Care Review Supplement form question #7c was used to collect and guide the review determination.

Visitations are measured in Item 8. Shared Parenting is measured in Item 11; there is a distinction in the OMS / Measurement requirements. The MSA data collected better fits with Item 8 Visitation with the Parents. This Item goes beyond visits, it includes the parents in Shared Parenting, attending appointments, attending school events, so that the parents maintain a good relationship with their child in a parental role of nurture and support.

Shared Parenting is a pivotal piece in MDCPS practice. Currently, MDCPS is presenting shared parenting to foster parents during foster parent support groups. MDCPS educates and trains families and foster parents on shared parenting and it is an ongoing practice to improve the relationship between parent and child. Families and foster parents engage in activities that are mutually agreed upon and that will be beneficial to the child.

Well-being Outcomes 1, 2 and 3 (1355.34(b)(1)(iii))

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs. Well-being Outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

MDCPS's overall goal in this activity is to improve engagement with the children and families that we serve by stabilizing the workforce and modeling supportive, empathetic, and strengths-focused relationships in our work environment. The workplace relationships could then be replicated by staff with the families that we serve.

Based on what was learned, MDCPS has hired an additional Workforce Wellbeing Director to increase the unit's ability to interact with employees and increase person-to-person interaction in all offices across the state. The expanded Workforce Wellbeing unit has implemented monthly Hope Hero and Hope Hero Supervisor awards to highlight best practices and implemented a Service Pin and Certificate program to recognize tenure and commitment to the agency. Workforce Wellbeing is also conducting a "Wellness Check" tour of all agency offices to maintain in person communication and support and to continue the feedback look between employees and leadership. MDCPS will continue to actively listen to the feedback and concerns expressed by staff and develop strategies and activities to address the needs of the workforce. MDCPS believes that by meeting our employees where they are and providing employees with a supportive and encouraging workplace environment, employee retention will increase, the workforce will stabilize and engagement with children and families will improve.

Well-Being Outcome 1, *Item 12: Needs and Services of Child, Parents, and Foster Parents*. Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?

Item 12 overall are combined results from Items 12a, 12b, and 12c. There is no Practice Performance measurement type report for Item 12 overall. The OSRI Item Rating Summary for Item 12 overall reflected that the agency met expectations of practice performance with foster parents during the period under review by assessing the needs and providing services to address identified needs to the foster parents. The OSRI Item Rating Summary also reflected that practice expectations were not met in engaging the parents for the assessment of needs and providing services for the identified needs. Each of the Items that measures those practice performances are further broken down by Item 12a (child or children), 12b (parents), and 12c (foster parents).

- It was asserted by the State that the goal of 31% was met at PIP Measurement Period 1. The State maintained that percentage goal during PIP Measurement Period 2, however, fell below the goal from Measurement Periods 3-8. The goal was reached again for PIP Measurement period 9 and increased again for PIP Measurement Period 10 and 11.
- While interviews indicate more informal assessment occurs than is formally documented, the overall findings of all qualitative reviews suggest that the underlying needs of parents are often overlooked (missing assessments of underlying conditions) or not adequately addressed (referrals were needed or didn't match the needs of the parents). Performance results indicates that increased attention must be focused on diligent efforts to engage parents or other caretakers by asking questions that lead to comprehensive assessment of safety/ risk factors, needs, and the critical step of linking families to community services such as health, financial aid, housing, transportation, and mental health/substance abuse services.
- The results from the parts of Item 12 overall (a/b/c) often can have impacts on other items of the instrument as best practices require thorough and comprehensive assessments of the families we serve. Needs must be understood so the most appropriate services can be provided. (For example, a parent may display substance abuse issues and the practice attempts to address that, however, assessments may not have considered underlying mental health issues or coping struggles.)

MDCPS will engage families when formulating the comprehensive family assessment/family service plan for the assessment of needs and providing services for the identified need.

Item 12: Needs and Services of Child, Parents, and Foster Parents

Item 12 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	103	109	128	144
Number of Total Applicable Cases	350	350	350	350
Performance (%)	29.43%	31.14%	36.57%	41.14%

Well-Being Outcome 1, *Sub-Item 12A: Needs Assessment and Services to Children*

Item 12a rated 64.86% Strength and 35.14% Area Needing Improvement for Well-Being Outcome 1. Practice performance results reflected that while initial and/or ongoing assessments were comprehensive and accurate to understand the child's well-being needs (n=236), there was a lower practice performance to ensure appropriate services were provided to meet the child's well-being needs (n=149).

- The OSRI Item Rating Summary for Item 12a indicated that the Agency's formal written comprehensive family assessment of the child(ren)'s needs did not contain the quality or frequency expected, however, informal efforts in practice were conducted more often and more frequently by speaking to the child(ren) and case key participants during contacts, home visits, and with supporting service providers (as applicable to meet the identified need).
- Also, the report identified that practice was not as expected in assessing and addressing relationship needs of the child(ren) particularly around broken and/or dysfunctional family dynamics (mainly with siblings and / or parents).
- Furthermore, the item rating summaries reflected the need for improved practice around the assessment (knowing what skills were being learned and from what source) and providing of services (such as linking the foster youth with service providers) to improve the Independent Living skills for the applicable cases.
- Finally, when considering the case type and the results provided (by filtering the corresponding Excel document by case type and ANI rating), there was a slightly higher number of In-Home cases rating area needing improvement (n=69 of 140) versus Foster Care Cases (n=54 of 210). An element noted in the review findings indicates improvement is needed in practice to be inclusive of all household children and not solely focused on the child(ren) of concern or that was brought to the attention of the Agency in the investigation phase.

FCR does not collect any data that would be helpful to 12A, as MSA 5.1.a focuses on the quality of the caseworker contacts with the child and not direct services. For 12b, MSA data would be limited to cases with the plan of reunification, MSA 6.3.a.1.b measures services identified in the FSP, and services made available to the parents to achieve the plan of Reunification, and MSA 6.3.a.3 measures opportunities provided by the agency to the parents to support the plan of Reunification. This does provide more data, however there is a possibility that adding this information could skew data due to other permanency plans being omitted and the Agency may not be as active in cases that the plan is not reunification. These MSA items are specific to the plan of Reunification.

MDCPS will ensure CFA/FSP indicates frequency of services and document quality of service. Coaching will be provided to ensure the staff know how to appropriately review and update CFAs.

Well-Being Outcome 1, *Sub-Item 12B: Needs Assessment and Services to Parents*

Item 12b rated 35% Strength and 65% Area Needing Improvement. Practice performance results reflected those concerted efforts were not made consistently and/or at pivotal points in the case to assess and address the needs of the mothers and /or fathers. Item 12b also captures efforts around diligent searches for a parent when whereabouts are unknown or become unknown during the period under review.

- The OSRI Item Rating Summary (corresponding Excel Document) for Item 12b indicated that the Agency's formal written comprehensive family assessment, Family Service Plan, and informal practice efforts of assessing both parents' needs (and any spouse or paramour to the biological parent) did not contain the quality or frequency expected for the applicable case dynamics.
- Also, the report identified that practice was not as expected in assessing and addressing relationship needs of the mother and/or father particularly around broken and/or dysfunctional family dynamics such as damaged relationships with familial support systems and attachment / bonding concerns with the child(ren).
- Additionally, the Agency did not make needed referrals that could directly impact the identified reasons for the Agency's involvement with the mother and/or father to strengthen the parental functioning and needed skill building.
- Lastly, the item rating summaries reflected the need for improved practice in completing diligent searches for the applicable mother and / or father if whereabouts were or became unknown during the period under review for those applicable cases.

Foster Care Review does collect related data regarding services to the parents; however, it is measured differently than the OMS. MSA data (Item 12B) would be limited to cases with the plan of reunification, MSA 6.3.a.1.b measures services identified in the FSP, and services made available to the parents to achieve the plan of Reunification, and MSA 6.3.a.3 measures

opportunities provided by the agency to the parents to support the plan of Reunification. This does provide more data, however there is a possibility that adding this information could skew data due to other permanency plans being omitted and the Agency may not be as active in cases that the plan is not reunification. These MSA items are specific to the plan of Reunification.

Well-Being Outcome 1, *Sub-Item 12C: Needs Assessment and Services to Foster Parents*

Item 12c rated 80.81% Strength and 19.19% Area Needing Improvement for Well-Being Outcome 1. Practice performance results reflected those assessments were comprehensive and accurate to understand the foster parent's needs and that appropriate support services were provided as it related to caring for the children placed in their home in 73.94% of cases reviewed (n=142).

- The OSRI Item Rating Summary for Item 12c reflected that improvement in practice was needed in cases where the child had multiple placements in the period under review (practice with each placement in the period under review) specifically to address foster parent(s) skill set in parenting foster children with behavioral issues. To clarify, if foster parent(s)' ability to cope and effectively manage any disruptive type behaviors of the child(ren) placed in their home. Consequently, information gathered from interviews with key participants disclosed that if the foster parent did not feel equipped or did not have the support of the Agency while facing challenges with child(ren) placed in their home, this often-effected placement stability (separately measured in Permanency Outcome 1 – Item 4).

As revealed by statewide data indicator trends discussed above, there are several potential target populations where MDCPS may wish to bolster permanency efforts reflected in this item.

MDCPS will continue to recruit and train foster parents on understanding trauma and its effects on behaviors of children in care. This will be provided during the licensure process and ongoing foster parent training. The OMS findings correspond to related MSA CQI qualitative findings. Assessment of needs is higher for Resource Parents and children lower for Parents. Failure to continue searching for parents whose whereabouts are unknown or contacting those who are no longer actively working with the Agency to stay informed on current circumstances are the main areas of practice that need to be strengthened.

MSA 5.1.d measures the MDCPS's monthly assessment and services provided to foster homes to support the appropriate care and supervision of child(ren) placed in their home. Note: the MSA item is specific about monthly contacts, not overall assessment in the PUR, so if a visit did not occur in the FPs home at least once in the month for thorough assessment the question was answered No. This measure does not look at facility placements, congregate care, IL placements, or THVs.

Well-Being Outcome 1, *Item 13: Child and Family Involvement in Case Planning*
Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?

Item 13 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	139	139	156	168
Number of Total Applicable Cases	325	323	324	322
Performance (%)	42.77%	43.03%	48.15%	52.17%

Item 13 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The State made the assertion that the PIP goal of 40% was met during the PIP Measurement Period 2. The results reflect the goal has been maintained for Measurement Period 3 -11.

Item 13 rated 58.79% Strength and 41.21% Area Needing Improvement for Well-Being Outcome 1. Practice Performance report reflects that of the applicable cases participants in the cases reviewed, concerted efforts were not made to actively involve the mothers and fathers consistently in case planning activities during the period under review.

- The OSRI Item Rating Summary for Item 13 reflected those tasks and goals were not clarified with case participants and /or not updated as case participant's circumstances or case dynamics changed during the period under review.
- Also, results identified the lack of input from the mother and/or father in the creation of the tasks and goals as multiple interviews from the applicable cases reflected that the tasks and goals listed was more of an instruction / directive from the Agency of what was needed from the mother and/or father to show progress and needed changes from the parent(s).
- Furthermore, achievement criteria updates of the agreed upon tasks and goals were needed to fully understand the progress being made or lack of progress being made by the applicable case participants.

MDCPS will continue to utilize Workforce Wellbeing to assist with continuing to strengthen this goal. The feedback from work sessions and peer groups continues to provide opportunities for the agency's leadership to hear from frontline staff who engage with families and assist with the development of events, trainings, and meetings that involve children and families. MSA qualitative review data indicates case plans, tasks, and goals are often documented

initially, but, just as the other OMS items suggest, the ongoing efforts to continue to adjust goals, effectively engage the parent results in the ANI and lower percentages of performance.

Improving family engagement practice is a CFSP/APSR Goal, located in Section V of this document.

Well-Being Outcome 1, *Item 14: Caseworker Visits with Child*

Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

Item 14 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	232	233	252	259
Number of Total Applicable Cases	350	350	350	350
Performance (%)	66.29%	66.57%	72%	74%

Item 14 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The State made the assertion that the PIP goal has been met during the PIP Measurement Period 2. The goal has been maintained for Measurement Periods 3-5 but has fallen below the PIP Goal for Measurement Periods 6-11.

Item 14 rated 74% Strength and 26% Area Needing Improvement for Well-Being Outcome 1. The Practice Performance report reflects the typical frequency (or pattern) of visits (contacts) made between the Agency and child(ren) was less than once a week but at least twice a month and this was rated as sufficient frequency for the case. Furthermore, of the contacts made during the period under review, the quality of the visits (contacts) with the child(ren) rated 75.93% strength as age-appropriate discussions were held with the child (or caregiver(s) of younger or developmentally delayed children) pertaining to issues of safety, permanency, and well-being.

- The OSRI Item Rating Summary for Item 14 reflected a higher number of in-home cases (n=57 of 140) rating area needing improvement than that of foster care cases (n=34 of 210). In addition, it was noted the Agency did not meet the expected frequency and quality contacts with all household children in the applicable in-home cases as for the contacts that were made, those contacts were typically with the child(ren) of focus from the investigation phase of the Agency's involvement. Furthermore, the results identified that the Agency did not adjust engagements approaches with the applicable children when the child was

displaying or providing challenges around engagement efforts during the contacts that occurred.

MSA data is not the same as OMS data, MSA is very specific. MSA 5.1.a is specific to the quality of "monthly" contacts between the worker and the child to assess safety, well-being, and permanency to promote achievement of case goals. If the caseworker missed seeing the child in the home for one month out of the five-to-six-month PUR, then the question is answered No. Other factors include lack of quality documentation to support safety, permanency, and well-being.

MDCPS is still working to ensure that standards of care for foster care are the same for children in In-home cases ensuring all children have required contacts.

Well-Being Outcome 1, *Item 15: Caseworker Visits with Parents*

Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

Item 15 Case Review Results	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	83	90	112	129
Number of Total Applicable Cases	272	274	278	283
Performance (%)	30.51%	32.85%	40.29%	45.58%

Item 15 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The State made the assertion that the PIP goal has been met during the PIP Measurement Period 2. The goal has been maintained for Measurement Periods 3-11.

Item 15 rated 45.58% Strength and 54.42% Area Needing Improvement. From the Practice Performance Report, a combined typical frequency (or pattern) of visits (contacts) made between the Agency and the mother was either once a month or at least twice a month. Of the contacts made during the period under review, the quality of the visits (contacts) with the mother and father rated as an area needing improvement.

- The OSRI Item Rating Summary for Item 15 reflected that when contacts were made, discussions were not held consistently pertaining to issues of safety, permanency, and well-being (that the contacts with parents lacked purposeful conversations around reasons for

case opening, progress made on tasks and goals, ongoing or changing circumstances of the parents, needs of the parents, and/or the setting for which the contacts were made were not conducive to have in-depth discussions).

- Furthermore, the item rating narratives reflected that the expected frequency of contacts with the mother and/or father were not as needed for the case circumstances (particularly when the parent(s) needed increased frequency for supportive purposes and if a parent was incarcerated).

There are still some identified areas of practice that could improve the quality of the visits (contacts) with the mother and father. The percentages in the OMS reflect the percentages in the MSA qualitative data findings. Visits/contact with parents is very low. Caseworkers often document tasks and goals on the FSP and discuss these with parents initially, however, adjustments are not made as circumstances change and the case lacks documented efforts to encourage the parent to follow through or actively participate. The agency is considering offering or developing training regarding how to engage or document efforts with resistant clients as staff frequently reported needing more support in this area during the Regional Action Plan (RAP). Currently, MDCPS does not have any targeted or specific training regarding this topic.

MDCPS is continuing to make a concerted effort to target and address issues of the reason a case was open, safety, permanency, well- being, progress made on tasks and goals, ongoing or changing circumstances of the parents and needs of the parents when contacts are made with parents.

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

Well-being Outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs. For Well-Being Outcome 2 (and the subsequent Item), the Practice Performance Report was exported from the Onsite Review Instrument (OSRI) for the PIP Measurement Period 11 of April 2022 to March 2023. The Practice Performance Report offers an analytical breakdown of practice elements measured from the rolling Regional Reviews that contribute to the overall Well-Being Outcome 2 rating of Sustainably Achieved at 67.94% (n=142), Partially Achieved at 2.87% (n=6), and Not Achieved at 29.19% (n=61).

Workforce Well-being is incorporating guidance from the Annie E. Casey Foundation in creating individual assessment tools that will be administered via SurveyMonkey and/or a one-on-one interview with existing staff to monitor employee engagement. These assessment tools will also be utilized with recently separated employees to determine areas of focus to increase

employee retention. The Workforce Wellbeing Unit continues to provide ongoing opportunities for individual and group communications regarding organizational wellbeing and onsite observation in the various regions and counties. The Directors regularly report on identified concerns and observations to MDCPS leadership.

MDCPS continues to actively listen to the feedback and concerns expressed by staff and develop strategies and activities to address the needs of the workforce. MDCPS believes that by meeting our employees where they are and providing employees with a supportive and encouraging workplace environment, employee retention will increase, the workforce will stabilize and engagement with children and families will improve.

Well-being outcomes 2 and 3: The RFP for in-CIRCLE has been revised as of July 2022. Intercept services were implemented October 1, 2022. It RFP included an array of requested services from the Providers. The program is fully operating statewide and providing intensive in-home services to families. Currently, this program has been rated on the Title IV-E Prevention Clearinghouse as well-supported. Additional information will be discussed in the Prevention Plan upon submission.

The plan is to have continued intensive in-home services, and contracts will be drafted with a qualified Subgrantee to provide the services outlined in the RFP. The purpose of these contracts will allow MDCPS to refer families when services are deemed necessary to keep the family unit safely intact or to allow for safe reunification. Programs shall serve children from birth to age 18 who are at risk of entry or re-entry into out of home placements (e.g., foster care, residential facilities, or group homes).

Programs will be designed to:

a) Serve children and youth who have emotional and behavioral problems and/or experienced abuse and neglect.
b) work with participants to address significant functional impairments that are affecting life activities.

Providers shall be able to:

a) Establish, develop, expand, and operate well-supported, promising, and general practices.
b) Operate community-based family support, preservation, and reunification services.
c) Assure children's safety and development within the home and preserve intact families in which children have been maltreated when the family's problems can be addressed effectively.
d) Address the problems of families whose children have been placed in foster care so that reunification may occur in a safe and stable manner in accordance with the Adoption and Safe Families Act of 1997.

e) Support adoptive families by providing support services as necessary so that they can make a lifetime commitment to their children.

The Programs are also meant to include these types of Prevention Services:

a) Primary Prevention- refers to services and efforts before child abuse/neglect occurs. All members of the community have access to and may benefit from these services. Primary prevention attempts to influence societal forces that impact parents and children.
b) Secondary Prevention- supported services for populations who are "at risk" due to their life circumstances. Secondary prevention seeks to prevent future problems by focusing on stresses of parents, caregivers, and youth identified at-risk.
c) Tertiary Prevention- services for families that have substantiated evidence of child abuse/neglect.
d) The Expected Outcomes are Safety, Permanency and Well-Being which address the following:
e) Protect children from abuse and neglect.
f) Safely maintain children in their homes whenever possible and appropriate.
g) Ensure children have permanency and stability in their living situation.
h) Preserve the continuity of family relationships and connections for children.
i) Enhance the capacity of the family to provide for their children's needs.
j) Ensure children receive adequate services to meet their physical and mental health needs.
k) Practices reduce the impact of social stress on the mental health of vulnerable children and families.

Well-Being Outcome 2, *Item 16*: *Educational Needs of the Child***.** Did the agency make concerted efforts to assess children's educational needs, and appropriately address identified needs in case planning and case management activities?

Item 16 rated 67.94% Strength and 32.06% Area Needing Improvement. Practice Performance results reflect that the agency did make concerted efforts to accurately assess the children's educational needs in many of the applicable cases reviewed. At a slightly lower rating, Practice Performance results reflected those concerted efforts were made to address the identified educational and / or development needs through appropriate services for the applicable cases.

- The OSRI Item Rating Summary for Item 16 reflected practice improvements were needed during ongoing discussions with placement provider and/or parent(s) around struggles that the child(ren) faced in the educational setting (informal assessments of educational needs), the need for Agency representation in IEP meetings, Agency follow up in connecting any services that are educational and /or developmental based (such as speech therapy), and formal and informal follow up with representatives from the educational setting for grades / attendance / and progress of the children in applicable cases.

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP. The revised best interest determination (BID) process and accompanying form for children/youth's educational stability will help drive improved practice and identify the educational needs of children/youth in MDCPS custody. The BID process serves as an opportunity for MDCPS field operations team members to identify and address a child/youth's educational, developmental, psychological, and social-emotional needs, assist the child/youth's biological or adoptive family in being an active parent and advocate on behalf of the child/youth's educational best interest, establish connections with Local Education Agency (LEA), request the LEA conduct comprehensive evaluations for children/youth suspected of needing special education and related services, and advocate on behalf of the child/youth's educational best interest. MDCPS YTSS team members aid and guidance to field operations team members and LEA points of contact concerning all education related matters for each child/youth in MDCPS custody. The MDCPS YTSS team members also serve as advocates on behalf of the children and youth in MDCPS custody to ensure that the developmental, psychological, and social-emotional best interests are incorporated into each child/youth's education plan. MDCPS YTSS members participate in IEP meetings are the request of field operations team members and/or LEAs. MDCPS YTSS team members ensure educational rights, stability, needs, and best interest of each child/youth in MDCPS are upheld and met by each LEA across the state by ensuring the adherence to federal and state statute. To further support field operations team members and to effectively ensure improved educational outcomes, post-secondary education and career readiness, preparedness for transition into adult, and stronger long-term community support for each child/youth in MDCPS custody. MDCPS YTSS team members must be provided each child/youth's education records, completed BID forms, completed Notification of Placement form (for initial placement and each subsequent placement change), access to the child/youth's case plan and all legal documents.

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

For Well-Being Outcome 3 (and the subsequent Items), the Practice Performance Report was exported from the Onsite Review Instrument (OSRI) for the PIP Measurement Period 11 of April 2022 to March 2023. The Practice Performance Report offers an analytical breakdown of practice elements measured from the rolling Regional Reviews that contribute to the overall Well-Being Outcome 3 rating of Sustainably Achieved at 38.7% (n=113), Partially Achieved at 10.27% (n=30), and Not Achieved at 51.03% (n=149). Concerted efforts to accurately assess and provide appropriate services to children for dental health care needs and the Agency's appropriate oversight of prescription medications for physical health issues (only applicable to foster care cases) rated lowest in this practice performance item (Item 17). Accurate mental/behavioral health assessments, psychotropic medication oversight (according

to Agency policy), and ensuring appropriate mental / behavioral health services rated as areas needing improvement.

Well-Being Outcome 3, *Item 17: Physical Health of the Child***.** Did the agency address the physical health needs of children, including dental health needs?

Item 17 rated 46.09% Strength and 53.91% Area Needing Improvement. Practice Performance results reflects that the agency did not fully meet expectations in making concerted efforts to assess and/or ensure physical health needs, dental health needs, and have appropriate oversight of prescription medication for physical health issues (meeting the expectation for each of the practice elements measured).

- The OSRI Item Rating Summary for Item 17 reflected that the agency struggled with meeting all practice performance measures for this item. The Item Rating Summary also identified that while the agency did assess and address physical health needs and dental health need, the practice was not always in a timely fashion (where no systemic barriers beyond the control of the Agency were found in the review process). To clarify, if the COVID Pandemic and provider's boundaries effected timeliness, this was noted in the findings and did not affect the overall ratings as long as once services were available, the Agency made concerted efforts to re-schedule or seek services needed by the child(ren).
- Furthermore, it was revealed that in some applicable cases the agency was not aware of physical health services received by the child(ren) and had not performed any formal or informal follow up to ensure all physical health needs were met or to fully understood and to ensure recommendations made by physical health professionals were being followed by the parents or foster caretakers.

The department provides ongoing support to frontline staff to help meet the needs of the families and children they serve. All children entering custody must have an initial medical within 72 hours of custody start date. A comprehensive medical exam (EPSDT) within 30 days of custody start date for ages 4 and older. A dental exam is due within 90 days of custody start date for ages 3 and older. A follow-up dental exam is due every 6 months thereafter for ages 3 and older. Reports from Magnolia utilized by nurses, education/training provided to frontline workers on the purpose and functions of nursing staff and support provided, support provided to foster parents when needed, attend quarterly meeting with Magnolia Health. They provide psychotropic medication consolation and answer questions regarding medication prescribed. Nurses document visits and observations with medically fragile children with 45 day follow up documented in MACWIS. One nurse has been hired and a recommendation has been submitted for another one to be hired. The staff assist the county workers connect to providers that provide medical, dental, and psychological treatment.

The activities that were implemented include educating community stakeholder regarding signs and symptoms of child abuse and provide education and support to school personnel regarding child abuse awareness in the school system and mandated reporting for school personnel. Meeting with MDCPS contract providers to discuss the role of the nurses and the support that can be provided to the children in their licensed homes and group homes. The Coordinated Care Unit is staffed with four nurses. A new Bureau Director has been hired for the coordinated care team. Each nurse is assigned service areas to ensure statewide coverage and all support and fundamentals from the Coordinated Care Unit is provided as needed. Coordinated care leadership and nurses facilitate monthly well-being cadence calls to review all medical and dental exams that are due, coming due and past due. Reports from Magnolia utilized by nurses, education/training provided to frontline workers on the purpose and functions of nursing staff and support provided, support provided to foster parents when needed, attend quarterly meeting with Magnolia Health. We provide psychotropic medication consolation and answer questions regarding medication prescribed. Nurses document visits and observations with medically fragile children with 45 day follow up documented in MACWIS. We assist the county workers connect to providers that provide medical, dental, and psychological treatment.

MDCPS plans to educate community stakeholders regarding signs and symptoms of child abuse and providing education and support to school personnel regarding child abuse awareness in the school system and mandated reporting for school personnel. We will meet with MDCPS contract providers to discuss the role of the nurses and the support that can be provided to the children in their licensed homes and group homes. The ongoing activities includes,

- Monthly well-being cadence calls
- Reports from Magnolia utilized by nurses, education/training provided to frontline workers on the purpose and functions of nursing staff and support provided, support provided to foster parents when needed, attend quarterly meeting with Magnolia Health. Provide psychotropic medication consolation and answer questions regarding medication prescribed.
- Help the county workers connect to providers that provide medical, dental, and psychological treatment.
- Nurses document visits and observations with medically fragile children with 45 day follow up documented in MACWIS.

The Assistant Deputy Commissioner and Bureau Director of Coordinated Care facilitate monthly Cadence call meetings with a designee from all seven service areas to review medical and dental exams that are due, coming due and past due and to address any concerns and/or barriers to getting the appointments scheduled and completed.

The program continues working to ensure that all children get medicals and dentals in a timely manner. The program daily tracking is used to collect data on child custody demographics which is included in the MACWIS system and Magnolia report.

Well-Being Outcome 3, *Item 18: Mental/Behavioral Health of the Child***.** Did the agency address the mental/behavioral health needs of children?

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP. Item 18 rated 37.74% Strength and 62.26% Area Needing Improvement. Practice Performance results reflect that the agency did not make concerted efforts to assess and address the mental/behavioral health needs for the applicable cases reviewed. Practice Performance results also reflected that appropriate oversight (according to the State's policy) of psychotropic prescription medication was not performed consistently for the applicable cases.

- The OSRI Item Rating Summary for Item 18 reflected that the Agency did not consistently consult with the Agency Nurse when psychotropic medications were being recommended by a physician for the child in care for those applicable cases. To clarify, if the COVID Pandemic and provider's boundaries effected timeliness, this was noted in the findings and did not affect the overall ratings as long as once services were available by the provider, the Agency made concerted efforts to re-schedule or seek services needed by the child(ren).
- Furthermore, results reflected that mental / behavioral health needs were not provided to the child in a timely manner once the need for such services were provided (where no systemic barriers beyond the control of the Agency were found in the review process). Also, it was revealed that in some applicable cases the agency and had not performed formal and / or informal follow up to ensure all mental / behavioral health needs were met to fully understand and to ensure recommendations made for the child were being followed by the parents or foster caretakers.

The nursing staff utilize the snapshot for children coming into MDCPS custody to assist with ensuring foster children are gaining mental health assessments. The nursing unit utilizes reports from Magnolia healthcare such as psychotropic medications/foster care report. Nurses use this report to drive the nursing support that is provided to caseworkers and foster parents. The nursing supervisor also uses the reports to determine strengths, weaknesses, needs and opportunities to assist with securing additional medical services.

CFSR SYSTEMATIC FACTORS

Statewide Information System

Statewide Information System, *Item 19*: 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?

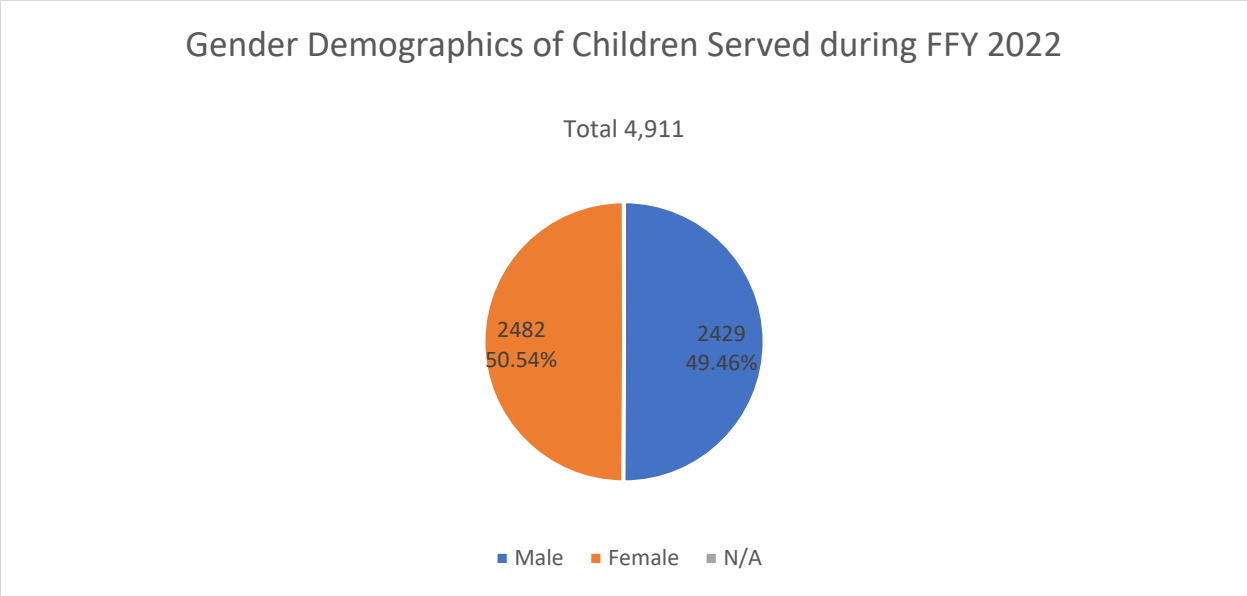
During FFY2021, MDCPS served 4,911 children in foster care. Data from MACWIS, submitted to the Children's Bureau, as required for AFCARS reporting was used as the basis for analysis for this systemic factor. The figures below display the status, demographic characteristics, location, and goals for children served during the period.

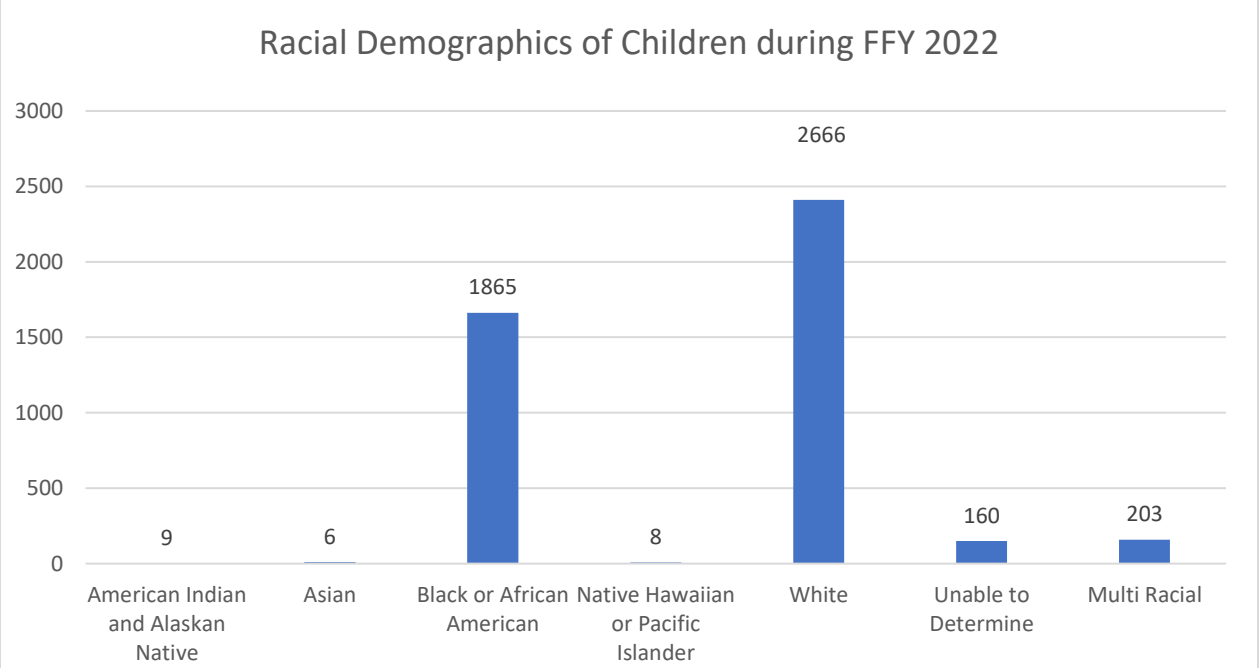
Item 19 MDCPS can readily identify the status, demographic characteristics, location, and goals for the placement of every child in foster care, and the federal Children's Bureau has assessed the AFCARS and NCANDS data submissions to be of sufficient quality.

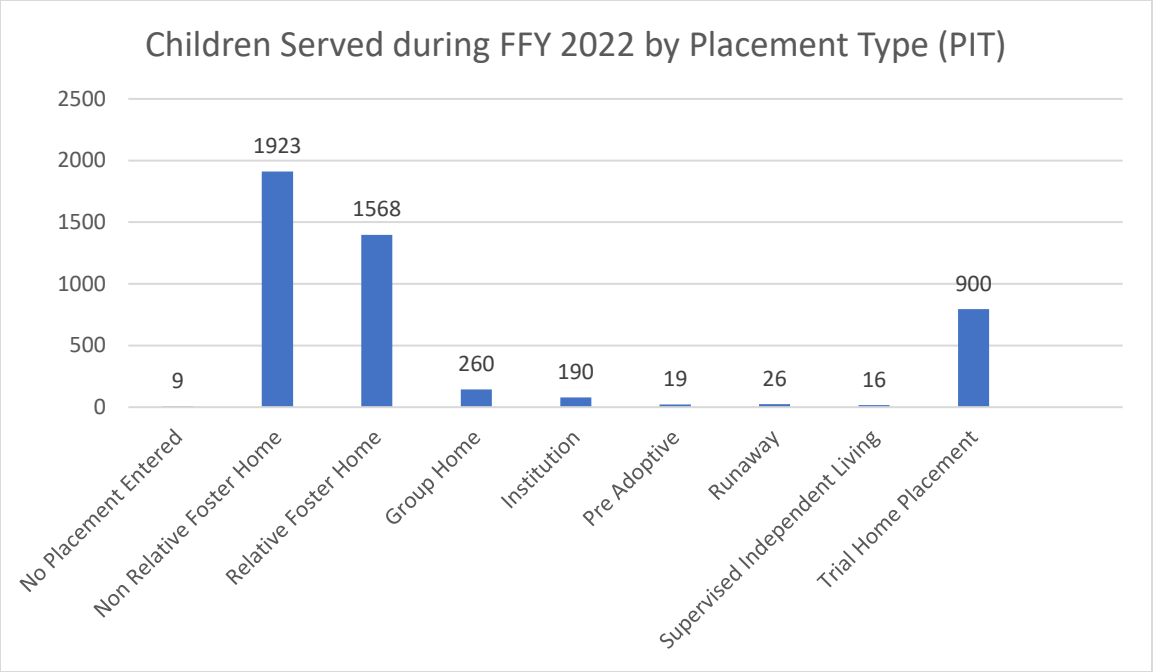
MDCPS's current data reporting system includes daily CORE Reports quantitative data reports that track agency performance. CORE, the Agency's Central Online Reporting Environment consists of reports that are primarily built around the MSA requirements, and many of them loosely align with several of the CFSR Items discussed in this section. However, the Agency has identified opportunities to improve the quality of the data that feeds CORE Reports, and on the use/analysis of quantitative data. MDCPS, however, is looking to better understand and ultimately improve the quality of data (accuracy and timely entry) and access to it. Through the work of an independent contractor, an assessment of current status is underway and includes in-depth analysis of the quality, accuracy, timeliness of entry, and accessibility of the information. This work also includes an assessment of gaps in administrative data needed to support CQI efforts. (Additional information is provided in Section IV.) To further support improvement in this area, MDCPS has engaged a private contractor RedMane Technologies, LLC to transition the current statewide information system (MACWIS) to a CCWIS-compliant system.

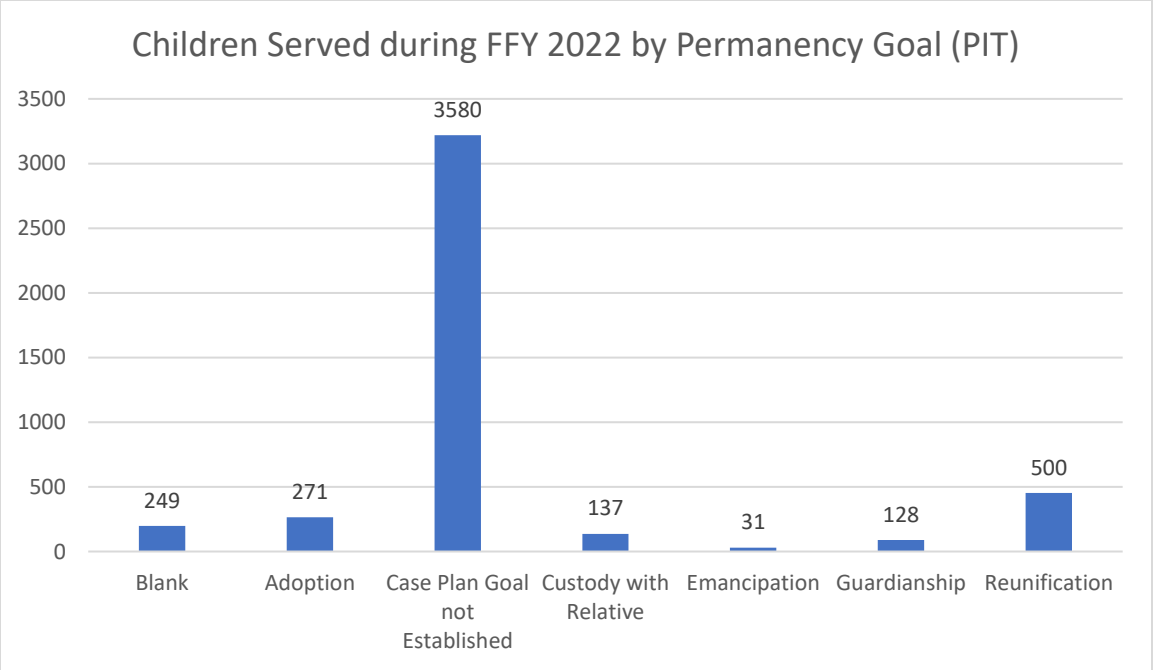
Specifically, MDCPS will focus on improving data quality, management, and literacy throughout the implementation of this CFSP/APSR, and as such, the CORE Reports will likely be revised. As MDCPS develops a fully functioning CQI Team, a significant focus will be on quality data collection and analysis.

Additional information about the development and use of data is provided in Section III, Item 25, Section V (Quality Assurance) and will also be included in the next submission of the MDCPS Data Quality Plan.


Gender Demographics of Children Served during FFY 2022
Total 4,911
2482
50.54%
2429
49.46%
Male
Female
N/A


Racial Demographics of Children during FFY 2022
3000
2500
2000
1500
1000
500
0
9
6
1865
8
2666
160
203
American Indian and Alaskan Native
Asian
Black or African American
Native Hawaiian or Pacific Islander
White
Unable to Determine
Multi Racial





The number of cases with the case plan goal not established (3,580) is remarkable. A partial explanation for this high number may be that this is point-in-time data that does not consider the length of time the child has been in foster care. A case plan goal, per regulations, must be determined within a predetermined number of days of placement.

Item 5 assesses if an appropriate permanency goal was established for the child in a timely manner. The case review results, provided above in Item 5, show that MDCPS has significantly improved performance and has met its CFSR Round 3 PIP goal, more work needs to be done.

Item 5 Permanency Goal for Child Practice	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	112	121	130	132
Number of Total Applicable Cases	210	210	210	210
Performance (%)	53.33%	57.62%	61.9%	62.86%

Case Review System

Case Review System, *Item 20: Written Case Plan*. The case review system is 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.

The Family Team Meeting process is used to develop Family Service Plans. Agency policy and best practices approaches outline the engagement of parents and case participants in the development of initial and ongoing reviews of family service plans. However, this was identified as an area needing improvement during Round 3 CFSR. And although MDCPS's performance in this area has improved, it remains below substantial conformity.

The Case review process (Foster Care Review and Regional Review using the OSRI) provides additional insight into performance. FCR data from the MSA is specific to the plan being Reunification for involving parents in case planning. This would skew data and not have data on cases that the plan has changed to a DLC type plan, IL, or Adoption in which TPR has not occurred.

Item 13 Child and Family Involvement in Case Planning	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	139	139	156	168

Item 13 Child and Family Involvement in Case Planning	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Total Applicable Cases	325	323	324	322
Performance (%)	42.77%	43.03%	48.15%	52.17%

Item 13 Child and Family Involvement in Case Planning (foster care)	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength	97	96	105	107
Number of Total Applicable Cases	185	183	184	182
Performance (%)	52.43%	52.46%	57.07%	58.79%

Item 13 Child and Family Involvement in Case Planning (Foster Care Cases)	Reporting Period 8	Reporting Period 9	Reporting Period 10	Reporting Period 11
Data Period	July 2021 – June 2022	Oct 2021 – Sept 2022	Jan 2022 – Dec 2022	April 2022 - March 2023
Number of Cases Rated as a Strength (Mother)	53 of 128 41.41%	58 of 130 44.62%	70 of 132 53.03%	81 of 139 58.27%
Number of Cases Rated as a Strength (Father)	27 of 74 36.39%	30 of 77 38.96%	34 of 80 42.50%	42 of 93 45.16%

Specifically, Item 13 Child and Family Involvement in Case Planning assessed through the Regional Reviews show that performance has steadily increased since baseline data collection began, and Item 13 PIP measurement was met in measurement period 3. Children in foster care rate highly on Item 13 as active participants and overall performance rating percentages

indicate that fathers are less likely to be actively involved than mothers in both in home and foster care cases. Review results from the OSRI item rating narrative summary indicate the written case plan and case documentation often do not fully reflect the efforts to actively involve parents and children, however, the interviews reveal more involvement than what is captured in the written case plan. Other areas to strengthen include intentionally focusing on engaging mothers and fathers, clarifying the reason for developing tasks and goals and updating case plans as circumstances or case dynamics change during the period under review to evaluate progress. Also, results identified the lack of input from the mother and/or father in the creation of the tasks and goals as multiple interviews from the applicable cases reflected that the tasks and goals listed was more of an instruction from MDCPS rather than an opportunity to brainstorm together to develop solutions.

MDCPS plans to strengthen the interview structure to provide opportunities for children, parents, and stakeholders to be more actively involved in the development of goals, plans, and solutions related to each circumstance. This is included in Goal 2/Objective 2 in Section V.

Case Review System, *Item 21: Periodic Reviews*. Is the case review system is 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?

This systemic factor continues to rate as a strength. An internal administrative review is held every 6 months for all children in foster care and a report entitled the Youth Court Hearing and Review Summary is submitted to the court after each review. The Foster Care Review Unit (a subunit of CQI) conducts the review which includes a comprehensive review of the child's electronic, paper and MYCIDS (youth court) file. A county conference is then held to discuss the child's plan, progress towards the plan and potential barriers. Parents, grandparents, caseworkers, resource parents/caregivers, the child and child's Guardian Ad Litem are required to receive invitation to participate in the county conference. All efforts are made to schedule and hold the conferences prior to the six-month timeframe and all children receive a review. Only 1%-5% of the children have a longer period under review (more than 6 months) (See table below). The Youth Court Hearing and Review Summary outlines the discussion that took place at the 6-month review and provides the court with information related to the efforts made by the agency, the parents and resource parents to achieve permanency for the child. The Agency has the option to request a court hearing when the Youth Court Hearing and Review Summary is submitted. In addition to the Youth Court Hearing and Review Summary, which is provided to the court, the Periodic Administrative Determination is provided to the County of Responsibility worker and Supervisor outlining documentation and practice areas that require follow up or recommending further assessment. The 6.4.a report is utilized to ensure that all children in state custody receive a timely periodic review. The report is reviewed quarterly to correctly identify the percentage of children overdue for a review due to potential

reporting or reviewer data entry errors. MYCIDS court orders are reviewed for those children identified as overdue (the review was not held prior to 6 months) to determine if a review court hearing was held in between the 6-month administrative review. The data below represents the percentage of children due for a 6-month review in each MSA quarter and the review was held timely.

MDCPS continues this case review process. This data represents children due for a review in each quarter and the review was held timely.

Reporting Period	Timely Administrative Review
Q4 2021 (October 2021 - December 2021)	93%
Q1 2022 (January 2022 - March 2022)	99%
Q2 2022 (April 2022 - June 2022)	99%
Q3 2022 (July 2022 - August 2022)	99%
Q4 2022 (September 2022 - December 2022)	99%

Case Review System, *Item 22: Permanency Hearings***.** Is the case review system is functioning statewide to ensure that each child has a permanency hearing in a qualified court or administrative body that occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter. The case reviewers assess court orders that are entered into the MYCIDS system by the court, MACWIS and the hard case file in the county of responsibility. The agency has also added a request for hearing button in MACWIS to ensure timely hearings are requested by the agency.

MDCPS agrees with the CFSR rating for this item as an area needing improvement.

Through the case review process, the case reviewers assess court orders that are entered into the MYCIDS system by the court, MACWIS and the hard case file in the county of responsibility.

Court data is not consistently collected and kept statewide, therefore, there are concerns about data quality and availability that affect the state's ability to report performance accurately in this area. To address this concern, MDCPS has requested that a hearing button be added to MACWIS to ensure timely hearings are requested by the agency.

MDCPS has and continues to collaborate with the AOC (Administrative Office of Courts), the Jurists in Residence, and local youth court judges in sharing data around timely hearings. Improving collaboration with courts that supports effective practice and timely permanency is addressed in Goal 5 of the CFSR PIP. See the table in Item 21 for results from qualitative reviews conducted by the foster care review staff for Olivia Y. reporting. The MSA 6.4.a report

is utilized to ensure that all children in state custody receive a timely periodic review. The report is reviewed quarterly to correctly identify the percentage of children overdue for a review due to potential reporting or reviewer data entry errors. MYCIDS court orders are reviewed for those children identified as overdue (the review was not held prior to 6 months) to determine if a review court hearing was held in between the 6-month administrative review. The data below represents the percentage of children due for a 6-month review in each MSA quarter and the review was held timely.

Reporting Period	**Reasonable Steps to Ensure a Permanency Hearing**
Q2 2022 (April 2022 - June 2022)	98.6%
Q3 2022 (July 2022 - September 2022)	98.6%
Q4 2022 (October 2022 - December 2022)	98.5%

Case Review System, *Item 23: Termination of Parental Rights*

MDCPS agrees with the CFSR rating for this item as an area needing improvement. The PSS/TPR Unit conducted a qualitative review for the period of January 1 - December 31, 2022. Results from this review found that 17.9% of the applicable cases rated as compliant (318 children with timely TPR referrals or timely ASFA documentation out of 1,774 children who reached 15 out of 22 months in care prior to or during the calendar years 2021 and 2022. It was noted that MDCPS requires much needed improvement in filing timely TPR referrals and notating initial/subsequent ASFA exceptions.

- 2021 ASFA Exceptions – 6.3.b.2 – 11 Valid ASFA Exceptions (Numerator)/958 Total Population (Denominator)
- 2022 ASFA Exceptions – 6.3.b.2 – 03 Valid ASFA Exceptions (Numerator)/816 Total Population (Denominator)
- 2021 TPR Referrals – 6.3.b.2 – 134 Timely TPR Referrals (Numerator)/958 Total Population (Denominator)
- 2022 TPR Referrals – 6.3.b.2 – 170 Timely TPR Referrals (Numerator)/958 Total Population (Denominator)

The method of analysis was related to provision 6.3.b.2. A termination of parental rights (TPR) referral shall be made on behalf of a child before the child has spent more than 15 of the last 22 months in foster care unless an available exception pursuant to the federal Adoption and Safe Families Act (ASFA) has been documented by MDCPS in the child's case record. After the initial ASFA exception, MDCPS may continue the exception for only one additional six-month period unless continued invocation of the exception is reviewed, approved, and documented semi-annually by the RD assigned to the county of responsibility for the child.

This quality assurance process has been established within the permanency support unit as part of the Olivia Y. CQI plan to ensure proper tracking, reporting and accountability to this provision. MDCPS details a process of leveraging timely termination of parental rights through court engagement and collaboration to ensure timely permanency for all children in care in the CFSR PIP.

The data presented was collected from MACWIS by the Data Reporting Unit and analyzed by the Permanency Support Services/TPR Unit and Staff Attorney.

The barriers and compelling reasons observed for not filing/referring a TPR packet to the AG's office in a timely manner include: (1) the county not submitting the packet to State office in a timely manner; or (2) a TPR packet may contain deficiencies that must be corrected on the county level before the packet can be referred to the AG's office. MDCPS is collaborating closely with representatives from the judiciary to address this issue and has included efforts in CFSP/APSR Goal 3 located in Section V.

In 2022, the Office of Legal Counsel began working with the Permanency Unit to assess cases where a child's permanency plan has changed to adoption but where the TPR packet has not yet been received at State Office for review and submission to the Office of the Attorney General. OLC and the Permanency Unit worked closely with the judiciary and attorneys across the state during MDCPS's successful Home for the Holidays campaign to streamline and expedite the path to permanency for children having a plan of adoption. The Home for the Holidays campaign went from October 15, 2022 through January 31, 2023, during which time 224 adoptions were finalized. Particularly, in the month of December 2022, this campaign resulted in a record number of adoptions, with MDCPS doubling the agency's average monthly number of adoptions.

The PSS/TPR Unit communicates with assigned staff bi-weekly to obtain status updates and provide targeted support that will assist in resolving deficiencies for TPR packets that have been in deficiency status more than 30 days. The agency has developed a tracking system to assist in verifying when a child's permanent plan changes to adoption that will assist field staff in submitting referrals and/or entering ASFA exceptions timely. As a result of MDCPS' engagement with the Administrative Office of Courts, the Attorney's General Office, Chancery Judges, Youth Court Judges, and Referees, the Permanency Support Services/TPR Unit is working with the Administrative Office of Courts to implement the use of notification alerts within the MYCIDS system. This alert will notify the PSS/TPR Unit staff as soon as the court order changing the child's permanent plan to adoption is uploaded into the MYCIDS system. Use of this alert will assist the PSS/TPR Unit in identifying new TPR cases and working with assigned direct service staff to ensure that TPR Referrals are submitted within the 30-calendar

day timeframe as established in the MDCPS Termination of Parental Rights Policy & Procedures.

The Permanency Support Services/TPR Unit incorporates equity for all children by collaborating with direct service staff to ensure that TPR referrals are made timely on behalf of children who have spent 15 of the most recent 22 months in care, unless an ASFA expectation has been noted in the child's case record.

Case Review System, *Item 24: Notice of Hearings and Reviews to Caregivers*. Is the case review system is functioning to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child? The case reviewer assesses MACWIS> Court Tab> Legal History> Select Current Custody line> County Conference tab> select current County Conference> Invitation Letter> review list of invitees and compare to Placement tab. All invitees are recorded in the MSA 6.4.a data question noted below.

Barriers include courts sending invitations of upcoming dates; courts not having updated information for child(ren) – invitations are mailed to the previous caregiver. MDCPS workers usually inform caregivers of upcoming court dates or print an unofficial letter. A way to address these barriers would be to add a character in the Court tab that allows MDCPS to print letters and invite important case members to court (*like how the county conference letters are selected, printed, and mailed*).

Information collected during interviews with stakeholders during the CFSR, showed that caregivers are not routinely notified of reviews and court hearings, and that their right to be heard in these proceedings is not always guaranteed. Stakeholders reported that practice varies across the state and that in some jurisdictions, caregivers are not allowed to remain in the courtroom or offer information during hearings. Due to these reasons, Item 24 is an area needing improvement.

The table below shows results from qualitative reviews conducted by the foster care review staff for Olivia Y. reporting. The method of analysis was related to provision *6.4.a.* A child's permanency plan shall be reviewed in a court or administrative case review at least every six months. Foster care reviews (FCR) shall satisfy this administrative case review requirement.

The County Conference invitation letter includes a space at the bottom for the invitee to respond and let their comments be heard during the county conference if they are unable to be there in person or via phone/conference line.

MDCPS will take all reasonable steps, including written notice, to ensure the participation of the child, parents, caregivers, and relevant professionals in court or administrative reviews. MDCPS has begun developing plans for improving notifications to parents, foster parents, and

others. It should be noted that the County Conference invitation letter is not simply notice of a hearing, but it is also an invitation to attend and participate. If a person is unable to be there in-person arrangements for teleconference or phone are available. If attendance is not possible, the bottom of the invitation provides space for their input; their comments are returned to the agency. The MDCPS will evaluate opportunities to collect data to identify the percentage of foster parents attending the hearings in an effective way. See the table below for results of the foster care review performance for the periods covered in this update: MDCPS began collecting the data by participant in 2020 and that information was included in each quarterly report submission. Also, the report data for each quarter submission from the MSA Quality Case Review Summaries report (the methodology to obtain the data is included on that can be found below.

Foster Care Review Results for Reasonable Steps* to Ensure Participation Reasonable steps include written notice, for participation in FCR	
Reporting Period	**% Invited to Participate in FCR, by role**
Q2 2022 (April 2022-June 2022)	74.1% of Caretakers invited • 80.4% - Mother invited • 77.5% - Father invited • 83.5% - Child invited • 76.7% - GAL invited • 74.1% - Caretakers invited • 100% - Relevant Professionals invited. • 61.3% - All relevant parties invited
Q3 2022 (July 2022- September 2022)	75.3% of Caretakers invited • 81.4% - Mother invited • 80.9% - Father invited • 79.9% - Child invited • 74.7% - GAL invited • 75.3% - Caretakers invited • 100% - Relevant Professionals invited • 63.9% - All relevant parties invited
Q4 2022 (October 2022- December 2022)	70.7% of Caretakers invited • 61.4% - All relevant parties invited • 79.7% - Mother invited • 80.1% - Father invited • 75.5% - Child invited • 74.7% - GAL invited • 70.7% - Caretakers invited • 100% - Relevant Professionals invite

Foster Care Review Results for Reasonable Steps* to Ensure Participation Reasonable steps include written notice, for participation in FCR	
Reporting Period	**% Invited to Participate in FCR, by role**
	• 61.4% - All relevant parties invited

Case Review System, *Item 25: Quality Assurance System***.** How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

The CQI Unit revised the Case Staffing Tool and created a Documentation Framework for all field staff to utilize to capture quality documentation. The Case Staffing tool trainings were implemented statewide during October 2022 through December 2022. The Documentation Framework was implemented statewide during February 2023 through June 2023 for all case carry staff. Two strategic meetings were held within each Region. Strategic meetings were focused on Item 3 measurement (defining quality practice), introducing / explaining the revised Supervisory Case Staffing Form / How to Capture Quality in Documentation, then RAP workgroup (use RAP worksheet to develop tasks for RAP- turn in sheets to RD prior to leaving). Each SSTL will have homework of using the revised Supervisory Case Staffing Form and bring a printed quality narrative from a worker on their workload to the next session (roughly two weeks from initial session). During the second session, Critical thinking skills were utilized completing randomized peer reviews (from examples brought by participants). The Supervisory Case Staffing forms and narrative examples were randomized and passed out with peer review questions. Staff completed peer reviews of each other's use and implementation of the staffing form and corrective feedback for quality narratives. Group discussion / dialogue was facilitated around self-identified strengths and needs then application to the existing RAP (any needed revisions or additions for the RAP are considered – internal feedback / accountability loop).

Through the evaluation forms and face-to-face feedback from both trainings it was determined that most of the staff prefer and are more receptive to face to face training versus virtual trainings. The implementation of the trainings brought uniformity across the state on the documentation format. It was offered to all agency units with case carrying staff. During the trainings, tools (framework documentation, example of framework documentation in practice, tips for engagement with case participation, SAP worksheet for contacts, facilitation of peer reviews and template, role plays and live video analysis) were given to all staff to utilize as a way to continue improving documentation and engage more effectively with the families that are served. Additionally, as a part of the training curriculum SMART goals were created to identify, and barrier bust for practice improvements. Instructions were also provided on how to effectively navigate and utilize CORE during staffings. The SMART goals were shared with all attendees which included all Service Areas Administration.

The program's ongoing activities will include case reviews, collection of data, analysis, reporting and training. Our goals are to provide reliable, comprehensive data from the case reviews that can be used to inform agency leadership and offer insight into needed revisions in policy, practice, procedures, training as well as offering a venue to measure success. Regional Reviews include 25 cases per region. FCR reviews every child in custody every 5 months that the child remains in custody (prior to or within every 6 months), Safety Reviews are conducted on all maltreatment in care investigations and screen outs and a large percentage of regular investigations. Congregate Care reviews every provider at a minimum annually and monthly assessments are conducted with all employees, resource parents and children served by congregate care providers.

Meetings are held after each Regional Review, so each Region has a meeting at a minimum once a year. Reports are submitted to each ADC and Social Service Manager monthly and a report is provided to each ASWS after each FCR. Every FCR/county conference offers an opportunity for a meeting to discuss the case and any questions. Also, the CQI Unit revised the Case Staffing Tool and created a Documentation Framework for all field staff to utilize to capture quality documentation. Two strategic meetings were held within each Region.

Challenges include conducting a 100% review of all children and collecting a large amount of information results in difficulty determining priority. The case review unit has been viewed as CQI, however, CQI is a concept that belongs to the entire agency and begins with performance review of each worker. The case review unit has long been required to carry out CQI activities but because that data collection and analysis belonged to that unit, it diminishes the sense of urgency and ownership at the field level to enter data correctly, analyze the data or to take corrective action steps to strengthen or improve case deficiencies. However, the Leadership Team will hold meetings in the future to break down the Quality Case Review Unit and how all units are a part of CQI.

A lot of data is collected on families and children from the case reviews. These reviews provide information that is analyzed across every Region and every county. The reviews produce specific data for different requests such as MSA reporting, corrective actions, data quality and case practice. The results are analyzed based on several factors such as length of time in care, type of permanent plan, age of child, etc. This analysis offers opportunities to provide feedback regarding consistency of practice across the state. Review results can be analyzed Regionally or by county as well. Timely Permanency, comprehensive assessments and provision of needed services are a focus of the qualitative reviews. Information is shared with leadership to provide a feedback loop that informs initiatives, policy, training, and practice.

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During the CFSR, Round 3, Mississippi received an overall rating of Strength for Item 25: Quality Assurance System. Since 2018, MDCPS has continued to implement improvement strategics, further strengthening the quality assurance system.

In July 2018, the Mississippi Department of Child Protection Services reorganized its agency structure to align skills and resources to the work required for CQI activities. What was previously known as the Foster Care Review unit and the Evaluation and Monitoring unit were consolidated into the Quality Case Review unit. In 2019 the Safety Review Unit and Congregate Care Unit were also consolidated under the same structure. This arrangement increases staff capacity to perform the functions of quality case reviews with consistency and integrity of the process.

The Quality Case Review Unit is comprised of approximately fifty staff who conduct various case reviews, including:

- Foster Care Reviews: The Foster Care Review is conducted for every child in foster care six months and every six months thereafter. Additional details on this process are found under Item 21.
- Safety Reviews: A case review is conducted for every investigation that includes a child in foster care to monitor the quality of the investigation. This process was developed in

response to the MSA. Throughout the year, the Safety Review Team also reviews a percentage of other in-home maltreatment investigations.

- Congregate Care Reviews: a licensure review is conducted annually for each provider licensed by MDCPS and after any alleged abuse or neglect in a licensed facility or provider licensed therapeutic resource home.
- Regional Reviews: The Regional Reviews are conducted in every region throughout the state using the federal On-Site Review Instrument (OSRI) and provide performance information that is the primary driver for Regional Action Plans. The QA process described in this Item focuses predominately on these Regional Reviews.

The case review unit has been viewed as CQI, however, CQI is a concept that belongs to the entire agency and begins with performance review of each worker. The case review unit has long been required to carry out CQI activities but because that data collection and analysis belonged to that unit, it diminishes the sense of urgency and ownership at the field level to enter data correctly, analyze the data or to take corrective action steps to strengthen or improve case deficiencies. However, the Leadership Team will hold meetings in the future to break down the Quality Case Review Unit and how all units are a part of CQI.

Although CQI is an identified program unit, its activities and processes are intentionally embedded throughout the fabric of the agency in collaboration with and, in some instances, led by other program units. There is a myriad of performance reviews that occur a part of the MSA, foster parent licensure reviews, and more than seventy quantitative data reports that track agency performance (CORE Reports). CORE, MDCPS' Central Online Reporting Environment consists of reports that are primarily built around the MSA requirements, and many of them loosely align with several of the CFSR Items discussed in this section. However, MDCPS has identified opportunities to improve the quality of the data that feeds CORE Reports, and on the use/analysis of quantitative data. MDCPS will focus on improving data quality, management, and literacy throughout the implementation of this CFSP/APSR, and as such, the CORE Reports will likely be revised. As MDCPS develops a fully functioning CQI Team, a significant focus will be on quality data collection and analysis. Additional information about the development and use of data is provided in Section V (Quality Assurance) and will also be included in the next submission of the MDCPS Data Quality Plan.

The Regional Review process, with the related Regional Action Plans, represents a full Plan-Do-Study-Act (PDSA) CQI/QA process and is the Review process detailed below.

Regional Reviews include 25 cases per region. Foster Care Reviews every child in custody every five months that the child remains in custody (prior to or within every six months). Safety Reviews are conducted on all maltreatment in care investigations and screen outs and a large percentage of regular investigations. Congregate Care reviews every provider at a minimum

annually and monthly assessments are conducted with all employees, resource parents and children served by congregate care providers.

The Learning Labs were rolled out in all seven Service Areas. The Learning Labs were broken into two sections: Overview and discussion of each Documentation Framework (Investigation, In-Home, Foster Care, Resource Parent, Physical Home Environment and Medical Documentation) and Peer Reviews for the second session. Each worker was tasked with bringing four quality narratives using the SAP Documentation Framework. Staff completed peer reviews and provided constructive feedback to each peer. Group discussion / dialogue was facilitated around self-identified strengths and needs then application to the existing RAP (any needed revisions or additions for the RAP are considered – internal feedback / accountability loop). An internal meeting was held with the Center for States and Children Bureau to assist with developing a CQI Plan for the Agency. Ongoing Non-Overlapping meetings are being held monthly via Teams with all Service Area Leadership to discuss each region's data, take aways from the Regional Review and outcome of the Region's RAP. This process will continue until the agency passes the PIP.

Additional insight into case practice is acquired from case-specific interviews with key individuals; if interviews can't be arranged, the case is eliminated. Key case-specific individuals include the child(ren) (when they are age and developmentally appropriate), parents, caregiver/foster care provider, the caseworker or supervisor, and, when possible, other service providers, or the attorney for the child (Guardian Ad Litem). The information provided by interviewees provides MDCPS with key insight into practice that may not be thoroughly represented in the written case record.

Currently, the case review sample is a random representation of children and families receiving foster care and in-home services through MDCPS. MDCPS continually seeks opportunities to improve the case review process and will be reviewing the guidelines for sampling to ensure that it reflects regional demographics, including proportional racial and ethnic representation.

When fully staffed, OMS has nine dedicated staff. To ensure that practice is assessed uniformly among the team members, staff participate in monthly training sessions to discuss and clarify questions related to the interpretation of the meaning of particular case review questions, variation in reviewer's ratings, and trends in findings. Consistency among case reviewers is achieved by a series of quality control procedures. Each case that is reviewed undergoes two levels of quality control reviews.

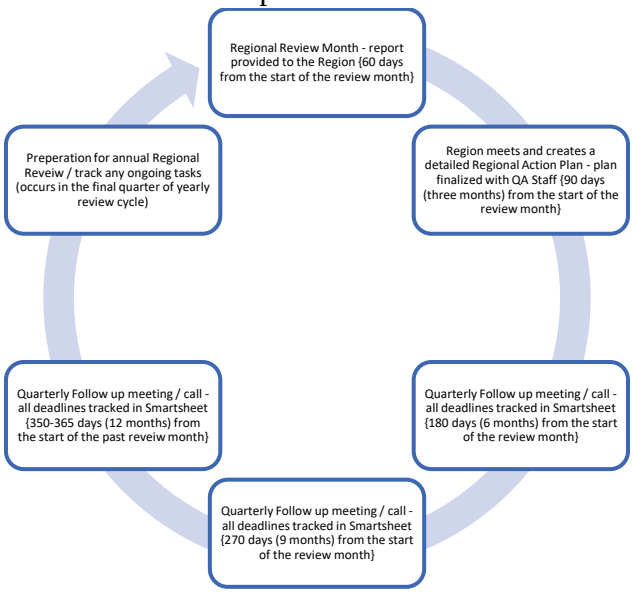
The results from case reviews are used to drive improvement efforts throughout the State. A case review item is rated as a strength when 90% of the cases that were reviewed are found to be substantially achieved. Case review findings, including strengths and areas needing improvement are compiled and shared internally. Throughout the upcoming planning year,

MDCPS will identify opportunities to share the case review findings with key external stakeholders; internal and external stakeholder CQI-focused groups are found in Section IV, Quality Assurance.

When a case review item is identified as needing improvement, Regional Action Plans (RAPs) are developed. RAP items are overarching areas of practice or practice themes that, when improved, positively impact several areas.

Regional Action Plan Process and Activities

The Regional Corrective Action Plan process is illustrated and described below:



Regional Action Plan Process:

- Report Provided to the Region: Upon completion of the regional review, a final report is compiled by the Regional Review Team that communicates the case review results and any trends / reoccurring practices that emerged during the regional review process.

  The federal OMS system is used to disaggregate findings to better identify the areas needing improvement. For example, in Item 3 is an area needing improvement, using the OMS system, MDCPS was able to disaggregate the results by case type and case characteristics to identify variation in performance. The review results provided to the region provide the information needed to focus and guide the goal setting process.

  A scheduled meeting takes place to explain the review results and clarify questions prior to the creation of the action plan. The Regional Review Unit leads the facilitation of the Review results. Due to the comprehensive nature of the Review. All review unit team leads and reviewers (i.e.: members of the Foster Care and Safety Review Teams) expected to

participate and assist with discussion and facilitation. Additional information, such as CORE and/or other data are also discussed.

- Following the release of the report, the region meets with staff and key participants to discuss the results, analyze the data provided, and identify goals for practice improvement moving forward.

  The Region develops their Regional Corrective Action Plan (RAP) with identified goals, tasks, achievement criteria, and responsible staff. The RAP is an individualized document intended to target specific areas of practice that are needing improvement. Quality Assurance Case Review Unit staff provide feedback and support to regional leadership as they develop and refine the draft plan. The Region utilizes a Regional RAP Smartsheet to capture the RAP tasks and goals and they will update the Smartsheet to provide updates as tasks are accomplished and goals are measured and revised.

  RAP development is a collaborative process. It is recommended that regional leadership include all pertinent staff in the creation of the region's plan and external stakeholders, as appropriate (as everyone will have some part of the improvement process). The identified action items should be limited to two-three items that are on the macro level (although it is understood micro / mezzo level work will have to occur for and during improvement efforts).

The RAP template utilized for the Regional RAP Smartsheet is below.

Regional Corrective Action Plan Template

Date Action steps developed:

Goal(s)/Expected Outcome(s):

Related Performance/Outcome item	Action Steps	Responsible	Deadline	Resources	Potential Barriers	Result
What is the identified area needing improvement?	What will be done?	Who will do it?	By When?	What do I need to do to complete this step?	What could get in the way of task completion? How will I overcome it?	What is the outcome of the task?

- Quarterly Follow Up Meetings: Following the approval development of a RAP, the Region will hold quarterly meetings with key stakeholders, CQI staff and other agency leadership to discuss and update the RAP Smartsheet which tracks the progress, activities, efforts, and revisions to the plan.

- Preparation for the annual Regional Review: Regional reviews occur yearly, therefore after the yearly follow up review, the Regional Action Plan is revisited and revised based on the new data and improvement needs of the Region. Continuous Quality Improvement is a continuous cycle to move towards improved practice and service to clients. Efforts to prepare for the yearly review will occur within the last quarter of the yearly cycle. MDCPS continually strives to improve the CQI/QA process and will continue to utilize the CQI framework outlined in ACYF-CB-IM-12-07 to guide this process. Additional information related to MDCPS's CQI process is in Section V, Continuous Quality Improvement/Quality Assurance.

There are several improvement opportunities for the QA case review process that will be addressed in the upcoming APSR planning year.

- Quality Case Review Staff are strategically assigned to support and provide feedback to regions statewide during the Regional Action Plan meetings ongoing for each of the region's yearly cycle. The plan for improvement is to change RAP facilitation approaches with the regions to be qualitive, solution focused discussions looking at the region's current CORE reports that are comparable to practice items rated for PIP measurement (strategic comparison of quantitative and qualitative Agency data). The RAP facilitation will also be regionally led to strengthen the understanding of regional dynamics that impact the quality of services and local practice. While facilitating, MDCPS staff will attempt to identify interventions used with family systems or possibly what is needed by frontline staff to improve practice efforts and family outcomes.
- The methodology for identifying the sample of case to be reviewed will be addressed.
- Other CQI-related improvement strategies are located within Section IV: Quality Assurance.

Staff and Provider Training

*Item 26: Initial Staff Training***.** How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions? The system is currently functioning well, and MDCPS has improved since last year. The current training model has been in place for well over 15 years. This model is an 8-week training and matriculates with one week of on-the-job training followed by a classroom week and this alternates for the 8-week cohort. Pre-Service training class is conducted almost every month except December due to the Christmas Holiday. In January 2023, Professional Development started two classes instead of one to include

December new hires. Additionally, training for the adoption staff was provided as they are shifting casework responsibilities; this was an online and in-person effort. During quarter three, work on a new supervisory training program started and there are plans to launch by October 2023. Professional Development also completed medical documentation training across the state and partnered with Hope to deliver training to all foster parent recruiters.

MDCPS Professional Development is responsible for employee training, coaching and support. The team's primary focus is Pre-Service, Supervisory, and ongoing trainings. The objective is to train and support newly hired staff as well as current staff. Pre-Service training begins once a month and all new hires for that month are in that training cohort. They then matriculate through the 8 weeks of training. MDCPS is also working toward job duties specialization with field operation staff. The goal is to support staff upon the completion of training both from a new hire perspective and an ongoing training perspective.

MDCPS has partnered with Public Knowledge to review our Pre-Service and Clinical Supervisory Training after the implementation of the Pre-Service revision. MDCPS staff implemented the revision to Pre-Service and began the first cohort at the end of April and did not complete until June. That cohort completed the training and there were plans for contractors to begin focus groups for follow up evaluation. In addition, we have survey data from the end of each week of classroom training. The most important feedback has come from Commissioner Sanders and Jennifer Walker, Director of Operations for Clinical Support, meeting with each of the training classes. Information shared in these sessions has provided valuable feedback related to the magnitude of material added by the consultant to the training. Professional Development adjusted the training as this feedback has been returned.

The contract with Public Knowledge was terminated, therefore the focus groups did not begin. Some adjustments were completed after meeting with each class during the training sessions:

- MDCPS implemented an asynchronous day to give the trainees a break from ZOOM each week, when possible, due to much reading and watching countless videos.
- IT assisted with resolving concerns regarding equipment.

CST was not reviewed by Public Knowledge prior to the end of the contract, but internally MDCPS began work to create a new Supervisory training tract that will focus on leadership and supervision and grow into a larger training that will be more than the 40-hour current training (one week).

The consultants have not started the focus group and currently Professional Development does not have the capacity to do these while training all the classes. Professional Development is in the process of revising the supervisory training program with the agency. The new training will be a 40-hour initial training with a 6-month program that will follow the completion of the 40-

hour training. Professional Development plans to incorporate graduated caseloads and more solidified training buddies to improve the experience of pre-service training.

In the current year, MDCPS provided pre-service training to 277 staff: 252 caseworkers and 25 supervisors. The training is pass / fail, a total of 4 tests. All 277 staff members passed. Anyone who fails is not eligible for employment with MDCPS as a caseworker/supervisor. Staff are allowed to re-test once. At the conclusion of each of the four weeks of classroom training an exam is given. An employee who fails the exam is allowed a re-test the following Monday. Passage of the exam is a requirement for carrying cases within the agency and failure to pass is grounds for termination.

MDCPS has a very extensive and intensive 8-week Pre-Service Training program. In the 8-week rotation there are 4 weeks of on-the-job training (OJT) and 4 weeks of instructor lead training. The OJT weeks are filled with shadow experiences, policy review, online training modules, and court. Successful completion of Pre-Service training is determined by accurate completion of all required OJT activities as well as successful passage of the tests at the end of each week of classroom training. Upon completion of training the training team follows a new hire for 18 months for ongoing support as they step into casework.

Staff cannot be assigned a caseload until successful completion of all weeks of instructor led training and on the job training. MDCPS track attendance in all classes as well as test scores. Additionally, on-the-job training is done with a training specialist who certifies completion of all activities that are required in on the job training.

MDCPS worked with Public Knowledge to further imbed the Practice Model Learning Cycle (PMLC) into Pre-Service Training, including guidance in the areas of trauma and self-care. The revised curriculum was launched in April 2022. Staff were equipped with better skills to deliver virtual training, how to engage all types of trainees and discussions were held around the next steps to revamp training. Below is a summary of the revisions:

- All modules were adjusted to be delivered in a classroom or virtual environment. The "Green Family" mock family and MDCPS case was updated to include new PMLC content. All tests were updated to include PMLC content. Specific conversations at the start of each day of training and learning circles to end each day were added.
- On the Job Training activities (OJT), robust resources, articles, videos, and content to the OJT Training manuals were added. All the PMLC E-Learning modules were formally incorporated into the OJT manuals. The PMLC E-Learning modules include a training, interactive tutorial, and job aide. Each manual has a weekly reflection journal for new workers to use in processing what they learned. All manuals include required observations, completion of documentation, and check-ins with supervisors as a part of the training activities.

The revisions further infused the PMLC into the training and cleaned up various pieces of the material. MDCPS, with the assistance of Public Knowledge held a Train the Trainer session to give special attention to Professional Development trainers regarding the new material as well as training in a virtual environment. MDCPS completed the train the trainer with Public Knowledge in February 2022. MDCPS has implemented training through Cornerstone for more specific guidance on Professionalism and Leadership Development. This implementation will continue into next year. MDCPS partnered with MSU Meridian to conduct a licensure prep class that is still in process. At the completion of this course the agency will determine the next steps for this piece. Commissioner Sanders opted to continue the Leadership Forums that are required of all supervisory staff.

MDPCS conducts surveys after each training via Cornerstone as well as receive candid feedback from staff and leadership (sample Likert Questions attached). The evaluation began with the first cohort and includes surveys to identify training gaps and job readiness, focus groups with varying levels of staff, supervisors, and administration. The evaluation will further guide MDCPS into the next phase of Pre-Service training that will be delivered in a multimodal format. The format will incorporate all types of learning geared towards engaging each participant during the training. MDCPS will begin a robust evaluation plan to assess all levels of Pre-Service training and begin further revisions. Check in and post-workshop transfer of learning discussions with the team will be added. Professional Development just completed the first cohort of this group and are beginning to evaluate further. Changes to the manual occurred during the training based off feedback from the trainees and trainers.

MDCPS is collaborating with university partners, courts and others as needed. Conversation with the Courts entails training for new initiatives that are forthcoming pending legislation. If approved, MDCPS work with the Courts will ensure judges are trained on all changes, thus achieving the goal to expedite permanency. Additional legal/court trainings and other collaborations with youth courts will be implemented because of new legislation such as the Foster Parents Bill of Rights.

It is now understood that "Staff," for purposes of assessing this item, includes all contracted and non-contracted staff who have case management responsibilities. Although MDCPS does not have data to quantitatively demonstrate adequate functioning, the Agency will reach out to a variety of service providers to collect relevant information. One avenue for collecting this information is through root cause analysis activities. When case review results and/or administrative data shows that performance is below standards, the Corrective Action Planning process will include root cause analysis, which will explore workforce issues, staff training, and other potential contributing factors. Root cause analysis is a critical CQI step.

Item 27: On-going 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? MDCPS is confident the ongoing training is functioning well and has plans to further evaluate this process in the coming year. Staff training is held virtually and captured in our learning management system. In addition, our training specialists provide support to newly hired staff for 18 months following the completion of training to assist as staff move into carrying their own caseloads.

In the CFSR, Round 3, Mississippi received an overall rating for Item 27 as an area needing improvement. The rationale for this rating was MDCPS's inability to track ongoing training hours. Since 2018, however, MDCPS has implemented the Learning Management System that captures staff training participation. An additional rationale for the rating was the lack of data about the effectiveness of ongoing training to inform decisions about training needs.

Due to improvements in tracking, brought about by the Learning Management System, MDCPS believes that on-going staff training is functioning well. Professional Development can generate a report at various intervals to determine completion rate. Historically, this report is run once a year in October to assess the rate of compliance leading to the end of the year. This can be modified as needed. Staff must complete acknowledgements following training conducted in the Learning Management System. An autogenerated notification is sent to the Supervisor and Administrator of the employee when training is late to further assist with follow-up.

Knowledge of practice and skill gaps are learned through CQI reports/results that identify areas of need and strengths, both qualitative and quantitative, to determine what training is most beneficial and needed. The Professional Development team also provides On-going coaching, support, and observation.

Professional Development Services follows each individual employee for a minimum of 18 months to provide individual practice coaching indirectly and directly to ensure quality documentation as well as understanding application in practice. Meetings are held between team lead/supervisor, employee and PDS team member following coaching sessions to identify practice needs, progress, and strengths. PDS provides written feedback to employees, team lead/supervisor, manager, and the respective Assistant Deputy Commissioner monthly to track progress and identify any other educational needs to help improve practice. Specialists who have been employees longer than 18 months also receive coaching sessions as needed and/or requested.

In addition to on-going staff training, MDCPS recognizes that on-going staff morale is critical to supporting workforce well-being, which in turn, is expected to be more prepared to meet the needs of children, youth, and families.

MDCPS has implemented several new projects and areas of focus to improve training strategies and activities that address our workforce and staffing needs:

- Professional Development is reviewing and revising initial supervisor training and ongoing training and resources to increase the availability of tools and skills development for supervisors to support employees. MDCPS set a goal to begin this endeavor in the first quarter of 2023.
- MDCPS has utilized annual conferences to bring together staff around priorities and promote collaboration within the Mississippi child welfare system. Initial parameters of the *2022 Forward Together Conference* included hosting approximately 300 employees in each of the northern, central, and southern regions (Tupelo, Jackson, Biloxi) of Mississippi from October 2022 – November 2022. To support as many opportunities for participation as possible, the conference was extended to include optional virtual attendance. The structure of the conference was to include large general sessions for a greater sense of togetherness.

  The anticipated outcome was to create opportunities for a wider range of employees to engage with one another, receive information and educational opportunities. The total number of staff that attended (in-person and virtual) is 1,130: Tupelo – 336, Jackson – 367, and Biloxi – 427.

  Presentations:
  - Commissioner Sanders: Agency Priorities, Successes, Ongoing Initiatives
  - Deputy Commissioner Kimberly Wheaton: Child Welfare
  - Deputy Commissioner Jaworski Davenport: Child Safety
  - Public Catalyst: Looking Forward: Understanding Olivia Y. Monitoring
  - Lamar Smith (Public Knowledge): Authentic Family Engagement
  - MDCPS CQI Team: Family and Child Quality Engagement
  - HOPE Rising Mississippi: Utilizing HOPE within Human Service Organizations, An Introduction to the Hope Framework
  - Casey Family Programs (CFP): Aligning Our Paths: Judicial Collaboration in Child Welfare
  - Delories Williams: Self Care - A Lifestyle, Strategies for Implementing Self-Care
  - National Child Welfare Workforce Institute (NCWWI): Building Healthy and Inclusive Cultures in Child Welfare Organizations: Exploring Strategies that Contribute to Sustaining a Healthy Child

- MDCPS implemented these strategies on July 1, 2022, by assessing staff that have been employed for 18 months or less. The assessment is a questionnaire (attached) meant to guide staff in journaling their experiences thus far. Workforce Wellbeing will follow-up with staff six months after the initial assessment (questionnaire). The first semi-annual evaluation will take place December 15, 2022. Appropriate training will be provided based on responses from the follow-up. Staff are also encouraged to contact WWB regarding

Employee Assistance Programs and other resources that will meet their well-being and professional needs.

MDCPS will continue to actively listen to the feedback and concerns expressed by staff and develop strategies and activities to address the needs of the workforce. MDCPS believes that by meeting our employees where they are and providing employees with a supportive and encouraging workplace environment, employee retention can be increase, the workforce will stabilize and engagement with children and families will improve.

Professional Development delivers training to over 1,400 MDCPS employees. A primary challenge is to meet an increased demand to develop and deliver all training as well as hire adequate staff to successfully support the entire state. MDCPS is overcoming this challenge as the number of trainers has grown from twenty-one (21) in 2022 to forty (40) in 2023. Training Specialists continue to deliver all classroom training and provide appropriate support to staff in the field.

*Item 28: Foster and Adoptive 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?

In CFSR Round 3, several strengths for this item were identified, and it was determined that:

- initial and ongoing training requirements are in place for foster and adoptive parents and staff in facilities,
- state licensing staff track training hours to ensure training requirements are met, and
- all foster and relative homes receive the same basic training, with additional training provided for homes that provide varying levels of therapeutic care.

However, it was determined that the State did not have information or data to demonstrate the effectiveness of initial and ongoing training to inform decisions about the training needs of current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities, therefore, CFSR Round 3 found Item 28, Foster and Adoptive Training to be an area needing improvement.

Foster Parent Training: All new relative and non-relative foster parents are required to complete Pre-Service Training. Pre-Service training consists of Orientation, Mississippi Parents as Tender Healers (PATH) Curriculum, Child Safety Training, and Finance and Travel Training. Training was updated to meet the needs of MDCPS. Training is conducted both in the classroom and online through a Cornerstone portal for foster parents named Parental Roles in Establishing Permanency (P.R.E.P.). Currently Pre-Service Training is approximately 15½

hours and is required before a family is licensed to foster children. The training is required for all household adults who will be in a caregiving role. Currently, the agency does not have a method to obtain feedback from foster parents about training. However, it was discovered in December 2021 that the survey caused several delays in updating the Licensure staff that the applicant completed training. The agency was not able to correct the issue and as a result the evaluation was removed. The evaluation has not been replaced to date, but the agency is in the process of implementing an evaluation to identify areas of strength and as well as areas needing improvement.

MDCPS acknowledges the lack of staff and time as barriers. The Licensure Unit is currently drafting an evaluation for Orientation, online training, and in-person training. The evaluation will be submitted to the Senior Leadership Team for review and implementation.

This training is provided after MDCPS has received an application and conducted a walk-through of the home along with background checks. The training is completed, typically, before the home study interview takes place. Families that experience issues maneuvering online training in P.R.E.P. are given one-on-one training by Licensure staff when needed. MDCPS has learned that it is difficult to apply what has been learned until the child is placed in a home. Therefore, training is conducted in small groups to create an opportunity for active learning and instructional flexibility. Licensure staff also utilize small groups in trainings to ensure relevant information is provided and to address concerns regarding the interview portion of the home study. MDCPS does not currently have information or data to demonstrate the effectiveness of initial and ongoing training to inform decisions about the training needs of current or prospective foster parents and adoptive parents. However, foster parents receive training credit for participating in face -to- face and virtual meetings. The MDCPS foster parent liaison participated in events aimed at engaging with foster families. The Licensure Specialist conducts monthly visits to conduct an ongoing assessment of the home and foster placement. Assessments are based on the observation of the assigned Licensure Specialist to each home. If concerns arise or specific training is requested by the foster parent, the Licensure Specialist ensures that training is provided. In addition, as mentioned in the Collaboration section of the APSR, the new MDCPS website has a page specifically designed for Foster and Adoptive parents. Content heading for the page includes sections for Foster Parent Updates, Support Group schedules and helpful resources. This section of the website is used in conjunction with messages delivered by staff via face-to-face interaction to provide foster parents with consistent and current information on shared parenting and other topics relevant to their role.

Classroom training is no longer conducted virtually. As of January 2023, the in-person training resumed in each region and is currently offered at least twice a month.

For the current reporting period, July 1, 2022- June 30, 2023, (94 non-relative homes were approved; 115 relative homes were approved). All these families were trained.

MDCPS contracts with Foster Parent College (Fosterparentcollege.com) and Foster Care & Adoptive Community, Inc. (FosterParents.com) to provide ongoing training on a variety of topics to foster parents. The family completes free educational training online. Training topics with both companies include positive discipline, conflict resolution, creating a healing environment for our children, anger management, eating disorders, sleep disorders, runaways, Reactive Attachment Disorder, sex trafficking, mental illness, problematic sexualized behaviors, lying, self- harming, fire play, Autism and a variety of many more. The Licensure Supervisors and Licensure Services Managers must approve training opportunities that are educational in nature but relate to fostering. Requests from foster parents to participate in workshops or conferences that offer hours are typically approved after review. MDCPS provides information to foster parents on available curriculum and workshops through a mass email that may contain a newsletter. In addition to Foster Parent College, training is provided by MDCPS Licensure Staff as needed.

MDCPS is charged with starting and maintaining regional support groups that meet monthly. Although an agenda is developed for each support group meeting (small groups / educational opportunities), foster parents can discuss concerns and issues. The educational opportunities are ongoing training and hours can be earned by foster parents for relicensing at the end of the 2-year license. As of January 2022, support groups are now meeting in person and MDCPS resumed the requirement of foster parents to receive 10 hours of ongoing training online and 10 hours of ongoing in-person training every two years. Currently, the Licensure Specialist conducts the re-evaluations and submits them to the Licensure Supervisor for review to ensure the training hours are obtained. MDCPS has a Resource Re-licensure report that indicates when a home has expired and will expire. However, we do not have a tool to calculate the compliance rate.

Trauma Informed Training was rolled out in April/May 2021 for all current relative and non-relative foster parents. The curriculum was created in conjunction with consultants at Public Knowledge. MDCPS distributed the curriculum via Smartsheet with a YouTube video. Once foster parents completed the training, an evaluation credit was issued, and a certificate of completion was uploaded to their SharePoint file. All families are required to complete training to be relicensed.

Sometimes families require additional training. MDCPS allows training on specific topics, using the Foster Parent College website, as a means of corrective action. An evaluation is given to measure understanding and serves as achievement of a final Corrective Action Plan. The Plan signifies completion of that requirement.

Service Array and Resource Development

Item 29: Array of Services. How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (CFSP)?

A needs assessment was conducted amongst MDCPS Staff to determine the services needed in various areas. MDCPS advertised an RFP to solicit the various suggested services statewide to procure for community-based services geared towards primary and secondary prevention. Many of these services have been added through current grantees. Additionally, Intercept was added to the array of services for intensive in-home services. Services were to target any child or youth under the age of 18, as well as the child's family.

- Drug rehab/ treatment both in-patient and outpatient
- Respite Care
- Domestic violence
- Homelessness
- Anger management
- Parenting classes (Implementing the Protective Factors)
- Pregnant and/or parenting teen mothers
- Transportation for parents/in home cases
- Free Transportation systems
- Drug testing availability
- Appropriate mental health services including in-patient.
- Services to locate jobs.
- Outreach programs to educate parents on needed items.
- Support systems/mentor programs/peer support
- Services for infants for diapers, wipes, and safe sleep
- Utility assistance for needy families.
- Clothing and food assistance
- Education support services for parents/caregivers
- Mentoring (ex: Fatherhood Engagement, Male and/or Female mentoring)
- Public Awareness (Required)
- Southern Christian Services for Children and Youth will serve the Central counties.
- Health Connect America will serve the Northern counties.
- Starkville Discovery Center will serve counties in the Northeastern part of the state.
- Kinship Navigator will serve the Southern and Central counties.

Additionally, in-CIRCLE will provide preservation and reunification services and will be discussed later in the report.

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

2. Services that address the needs of families in addition to individual children to create a safe home environment.
3. Services that enable children to remain safely with their parents when reasonable; and
4. Services that help children in foster and adoptive placements achieve permanency.

All programs have continued to provide support services to families who have been identified by MDCPS as having the need. Services are provided in the home, face-to-face visits, referral to community-based programs as needed and other support based on the family's need. During this quarter, the program also added another home service program which is Intercept. Intercept began in October 2022, and it is an Evidence Based Program which is statewide and offers services to families who have been identified as those with abuse/neglect and/or behavioral issues which would cause removal. The program is intensive and can last up to six months based on the need. Services are available to the family 24 hours.

The Dorcas program expanded statewide except for counties in Service Area 7, which did increase the number of families being served through our programs. There are plans to expand services into the 7th service area of the state within the next year.
Numbers served this by each program:

- **Dorcas:** There have been 12 referrals, with 28 children and 17 adults served through the program.
- **Intercept:** there have been 51 referrals, with 108 children and 17 adults served through the program.
- **In-CIRCLE (Youth Villages):** There have been 50 referrals, with 113 children and 66 adults served through the program. 13 referrals were for Family Reunification (FR) with 36 children and 17 adults served, 37 referrals with 77 children and 49 adults were served by Family Preservation services (FP).
- **In-CIRCLE: Canopy:** There have been 134 referrals, with 302 children and 192 adults served through the program. 49 referrals were for Family Reunification (FR) with 103 children and 72 adults. 85 referrals with 199 children and 120 adults were served by Family Preservation services.
- Dorcas is a program within the agency of Baptist Children's Village, and they collaborate and/or partner with MDCPS, as well as other agencies within the State. In-CIRCLE has continued Contractual Agencies regularly connect with our stakeholder and court regarding the program efficacy and the need for collaboration.
- The Providers (Dorcas, Youth Village and Canopy) have participated in conducting training to its staff for work with the programs, as well as participated in continued training for staff of that agency.

To address the impacts of childhood trauma, all in-CIRCLE staff attended the Assessment and Demonstration Training of CARENET (How to Ensure Children and Families Do Not Fall

Through the Cracks). All in-CIRCLE staff attended the following trainings: DMH ASIST Suicide Prevention Training whereas 6 staff members attended, UKG Dimensions Training – 11 staff members attended (Supervisors, in-CIRCLE Director & State Director), Boundaries and Ethics Relias Course – 1 Peer Support Specialist attended, and In-CIRCLE Symposium. All in-CIRCLE staff attended Assessment and Demonstration Training of Patient Health Questionnaire (PHQ-9) and Columbia Suicide Severity Rating Scale. In addition, all in-CIRCLE staff attended in-CIRCLE Trauma Training for Therapists (27 Therapists and 9 supervisors), in-CIRCLE Trauma Training for Case Managers (31 Case Managers and 9 Supervisors), and NCFAS Training Refresher (15).

Canopy facilitated the Olive Branch Map Team Meeting whereas 3 staff attended. Additional training was provided including Active Parenting – 6 staff attended, and NCFAS Training Refresher – 10 staff attended. Four staff attended The Desoto County Health Fair, In-Service with Rankin, County CPS – 7 staff attended, and Practice Wise Training was held whereas 10 attended. The SAFE Give Back Community Event was held with 1staff attended and Benton/Tippah County CPS Halloween Event with 2 staff attended.

The Intercept program began, and we initially received several referrals for this program. Since the onboarding of Intercept, there have been enough referrals which has not caused any barriers to implementing services for all programs. Most of the referrals received were primarily for our Therapeutic youth who are often in need of the services that the programs offer.

To ensure equability across the state for all families served through our various programs, our In-Home Services programs have addressed inequalities in transportation by partnering with Medicaid to cover transportation for those with transportation inadequacies. The program also offers translators for those whose English is a second language, or those who do not speak English. The in-CIRCLE program is also working with the Canopy LINKS program to provide services to clients in rural areas throughout the state.

Service array and resource development continues to be areas needing improvement. MDCPS provides services to address the safety and well-being, prevention, permanency, and well-being of families and children through internal service provision and in collaboration with other child and family service providers. At this MDCPS does not have a system in place that collects information by jurisdiction. Based on anecdotal information and informal polling of regional directors, service needs vary across the state. It has been consistently noted that there is limited access to services in some of the more rural parts of the state and that there is a growing need for additional adolescent substance abuse programs. The aforementioned factors can cause service gaps. MDCPS currently has statewide coverage for in-home services through two contracted providers. The Prevention Unit will be exploring evaluations plans and methods of collecting and analyzing data. We have identified many of the services and initiatives below.

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

   The Mississippi Department of Child Protection Services continues to assess the strengths and needs of children and families through two core formalized assessment tools: CFA and Safety and Risk Assessment. The Safety and Risk Assessment is completed during all open investigations. This tool is used to help assess the safety and risk of children and to determine if ongoing services are needed with the family. If it is determined that ongoing services are needed, the appropriate case type is opened and/or relevant referrals are made for the identified services. When an ongoing service case is opened, the Child and Family Assessments (CFA) are completed. This tool helps to identify areas to be addressed within the family to mitigate harm and/or risk factors and is listed as tasks/goals in the Family Service Plan (FSP). Together the CFAs and FSPs are jointly developed with the family, within 45 days of case opening, and updated every 90 days thereafter for as long as the case remains open. In addition, staff may reach out to other professionals including educators, medical professionals and mental health providers who may be involved with the child and family to gain information when completing an assessment.

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

   The Mississippi Department of Child Protection Services uses a Safety Checklist during the initial assessment (investigation) with a family to identify the presence or absence of safety issues within the physical home environment. This tool is used to bring awareness and attention to safety issues such as poisons, fire hazards, drowning hazards, firearm hazards, car safety, general safety (including safe sleep) and other areas within the home that could potentially cause safety concerns. The Safe Sleep protocol was implemented in Fall 2016 with families that had children 18 months and younger. The goal is to identify unsafe sleep situations and assist the family in correcting any unsafe sleep situations as part of prevention of co-sleeping fatalities. such cases of safe sleep issues, the Prevention Unit has budgeted funds to purchase cribs and pack n plays for families. The frontline staff can request assistance utilizing various prevention funds.

   For subgrantees through Prevention, surveys are conducted through the grantee for satisfaction and developmental purposes. Grantees use the data to explore options of better serving the community needs.

   The safety of each child in the home continues to be individually and collectively assessed during investigations and monthly through ongoing casework. To make reasonable efforts to prevent removal, MDCPS also uses safety plans that allow the agency and families to provide alternative living arrangements to reduce harm and risk in unsafe living situations for a limited time with the infusion of the supports from service providers.

3. Services that enable children to remain safely with their parents when reasonable:
   The Mississippi Department of Child Protection Services continues to receive support from local boards of supervisors within all 82 Mississippi counties. The amount of financial support varies from county to county, however. These funds allow counties around the state to provide informal support to children and families. These allocations have been used to meet an array of needs so that children can remain safely in their homes. More specifically, county funds have been used to assist families in the community who are experiencing financial difficulties with paying utilities, food or for housing/rental assistance. In addition, these funds have been used to assist with purchasing furniture such as beds to ensure appropriate sleeping; drug screenings to support the verification that a parent is free of illegal substances; intake fees for assessments at local mental health or outpatient substance abuse clinics as well as other identified family needs as presented. These families may or may not have cases with MDCPS. MDCPS has contracted with Canopy and Youth Villages to provide family preservation and reunification services through our program called In-CIRCLE. There are currently waitlists for in-CIRCLE Services. However, the providers offer care coordination and referral; to other support services until they can fully admit the family into the program. Preservation and Reunification services are provided. Services include crisis management, case management and in-home help that includes individual and family therapy. The DORCAS program is currently available in northern and central Mississippi, by referral, for in home family support services. The Program reduced service areas due to staffing: https://www.baptistchildrensvillage.com/locations. The purpose of the Dorcas In-Home Family Support Program is to provide family-driven, youth guided interventions to improve the stability of enrolled families and their ability to provide adequate care for the children for whom they are responsible. These interventions increase families' access to and utilization of community resources and assistance. The goal is to reduce the likelihood of removal or other disruption of their living arrangement.

   The Dorcas Program is available in Regions, I-N, I-W, II-E, II-W, II-N, and III-S which is in the Central and Northern part of the State. This Program through Baptist Children's Villages provides services to families who need support service to maintain their family.

   in-CIRCLE is an intensive in-home service designed to prevent removal and maintain children safely in their homes, or if removed, to assist with services to reunify. The purpose of the program is to provide intensive in-home programs that provides family preservation, reunification, and support services program for families with children who are at-risk of out-of-home placement or those currently in out of home placements for reducing time spent in foster care by providing reunification supports and services.

   in-CIRCLE is Statewide and offers services to all families regardless of race, color, gender, political, social, or economic status. There is a wait list established for families who are not able to get into the program within 48 hours. There is a triage for those families, and they are

contacted by the Provider and Coordinated Care Services are offered to address immediate needs and diffuse crisis. This intake service may include referrals to community-based agencies until the family can be admitted for intensive services. The average number of families on the wait list per month is 42-60. The wait list is no longer than 30 days at which time, families are moved to another Provider who has slots available. Also, within that 30 days, Care Coordination Services are provided which include phone contact, crisis management, referrals, and other soft supports.

It is notable that foster care entry rates in the state have declined over the past five years; they were slightly above the national rate in FY 2017, then dipped slightly below and are currently close to the national rate.

4. Services that help children in foster and adoptive placements achieve permanency:
The Mississippi Department of Child Protection Services understands the importance of finding the most appropriate, family-like placement setting for children and youth who must enter the states' foster care system. Additionally, in order of succession, permanency plans are determined in conjunction with the youth court, and case practice is aligned based on the established plan to aid in achieving permanency. Moreover, families can be referred to In-CIRCLE (reunification) for more intensive family support.

   If a child must enter foster care, the agency seeks family or fictive kin first to provide care to the child(ren). These families are afforded the opportunity to become licensed relative foster parents through the expedited licensing process. The training is abridged, to expedite the support offered with being fully licensed and to maintain the child with relatives; hopefully to expedite permanency, but still fully trains the family in providing care for the child(ren).

   Parenting and Education classes continued to be held at:

   - Born Free/New Beginning Residential Treatment Program
   - Harbor House Chemical Dependency Services (includes pregnant women and men)
   - Flowood Community Work Center Restitution Center
   - The Center for Independence: The Friendship Connection
   - Additionally, grantee continues to provide supportive services and parenting education.

   Ongoing activities are provided to support coordinated community-based efforts to develop, operate, enhance, and where appropriate to network initiatives aimed at the prevention of child abuse and prevention. To increase community awareness of the protective factors to reduce the incidence of child abuse and neglect. Educate community about child abuse and neglect and the impact of trauma on development through public speaking events, media campaigns, and informal information sessions.

MDCPS has an administrative structure (resource unit) that supports each of its fourteen (14) regions that is staffed with licensure specialists, adoption specialists, supervisors, and bureau directors. Their focus is on the recruitment and retention of foster and adoptive parents at the county and state level. All the Resource Unit staff (both Licensure and Adoption) work together to provide recruitment, pre-service training, in-service training, and home studies to license foster/adoptive homes across the state. Adoption Specialists also work with all children/youth in care whose permanent plan is adoption.

When reunification is no longer an option, other permanency options are explored including adoption. MDCPS closely tracks children, when their permanent plan changes to adoption, to ensure that they are achieving permanency timely. Although a manual process, in the fall of 2017, MDCPS identified the children with a plan of adoption and begin tracking them through regional calls to get a status and address barriers known that is preventing the case for moving forward to TPR and adoption. These calls have proven to be effective in getting children to permanency sooner. In SFY 2021, 518 children were permanently connected with a family through adoption.

Item 30: Individualizing Services. How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

MDCPS has successfully released two separate Request for Proposals to expand available services to children and families. MDCPS has received responses from the first proposal and has awarded new subgrants. MDCPS is still awaiting responses from the second request. Once all proposals are received, reviewed and providers selected, the Agency will continue work focused on *developing a protocol or assessment for determining the appropriate referral among the pool of in-home services programs* and a manual of in-home services. The in-CIRCLE Program has revised the RFP to include the levels of service.

Agency Responsiveness to the Community

Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR. How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the 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?

MDCPS rated this item as a "Strength." The agency continues to engage its stakeholders readily and consistently with its major initiatives, goals, and objectives that are pursuant to the CFSP and APSR. This is done to increase communication, understanding, and collaboration strategies across service systems with the goal of strengthening families and communities. The department continues to meet regularly through monthly, bi-monthly, quarterly, annual, and as needed meetings with its stakeholders including the Administrative Office of the Courts, Children Advocacy Centers of Mississippi, Tribal partners, Mississippi Association of Child Caring Agencies, representatives from mental health, education, state universities, and others to discuss the progress and/or barriers to the goals, objectives, interventions identified under the 2020-2024 CFSP. For the development of the state's APSR, the MDCPS Division of Federal Reporting contacts its stakeholders to request quarterly and periodic updates about any joint initiatives, service delivery information, successes, any perceived barriers, and strategies for improvement. These collaborative efforts are integrated throughout the APSR narrative. MDCPS continues to work towards completing the collaboration efforts identified in the 2020-2024 CFSP, the periodic updates provide valuable insight into the effectiveness of each strategy. This also serves as an internal/ external feedback loop to ensure that these activities were joint activities, each entity fulfilled their obligations, and initiatives were completed by established target dates. MDCPS also shares the Program Instructions and APSR with the Mississippi Band of Choctaw Indians (MBCI) and its stakeholders. MDCPS attends quarterly meetings with MBCI and collaborates on cases/issues on an as-needed basis. Members of the tribe are invited to participate in Mississippi's joint planning and other statewide meetings through the Commission on Children's Justice. And these meetings inform the CFSP/APSR to a degree. The MDCPS will continue to strengthen relationships with collaborators to develop a more robust partnership in framing the actual text of the CFSP/APSR.

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?

MDCPS rates this item as a "Strength." MDCPS heavily depends on the coordination and integration of services from its stakeholders to help with the development and revision of its policies and programs that support the agency's vision and mission. MDCPS actively continues to collaborate with other agencies by establishing Memorandum of Understandings (MOU) that strengthens and aid in coordinating services or benefits with other federally assisted programs that serve the same population. A Memorandum of Understanding has maintained its reputability with the Division of Medicaid, Mississippi Department of Human Services, the Office of the Attorney General, Department of Mental Health, the Mississippi Department of Education, the Mississippi Department of Health, Mississippi Band of Choctaw Indians and contractual agreements have remained in place with Baptist Children's Village, Mississippi

State University, Casey Family Programs, and the University of Mississippi Medical Center. These cooperative arrangements are examples of how the MDCPS is partnering statewide to ensure services, funding, and efforts are not duplicated**.** MDCPS has updated the current MOU between the agency and the tribe.

The continuation of MDCPS's Joint Planning meeting has also created an avenue for all stakeholders to express any major concerns as well as be involved in agency planning. MDCPS also continues to utilize the Foster Parent Liaison as a means for communicating information with foster parents and lifting their concerns to executive leadership.

The agency currently contracts with the following federally assisted programs that serve children and families:

Provider	Brief Description of Services
Catholic Charities	Provides resettlement services to unaccompanied refugee minors placed in MDCPS custody. The URM program ensures eligible youth receive the full range of assistance, care, and services available to all foster children in MDCPS custody. Some of the services provided are family tracing and reunification, case management, English language training, and education supports. Assists with finding and licensing homes for non-therapeutic children who are legally free for adoption and older. Facilitates the MDCPS Kinship Navigator Program.
Catholic School Services	Provides resettlement services to newly arriving refugees and their families. Services provided include employability services, English language instruction, translation and interpretation, case management, information and referral services, and citizenship and naturalization preparation services.
Canopy (MS Children's Home)	Services provided through the subgrant are In-Home Services focused on assisting children and families improving parenting and family functions.
Jackson Housing Authority (JHA**)**	Manages Foster Youth to Independence (FYI) housing vouchers for youth in care.
Mississippi Families for Kids (MFFK)	Assists with finding and licensing homes for non-therapeutic children who are legally free for adoption and older, provides case management services for the Wendy's Workforce Development program that employs foster youth.
MS Band of the Choctaw Indians	MDCPS provided pandemic stipends to MBCI youth. Life Skills training will be provided in the upcoming quarter.
Southern Christian Services	Provide services centered program to strengthen area families and improve child, family well-being and reinforce family connections, assists with finding and

Provider	Brief Description of Services
	licensing homes for non-therapeutic children who are legally free for adoption and older, provides post-adoption services including respite, crisis intervention and stabilization, mental health counseling, etc. to families who adopt from foster care, provides support services to youth in the Foster Youth to Independence (FYI) housing program.
Starkville Oktibbeha Consolidated School District (Project CARE)	Provide services for comprehensive evidence-based child abuse and neglect prevention services via Project Care. Project Care is expected to provide Parenting Skills, Home Visiting, Respite Services, Interactive Activities, Case Management, and Public Awareness Outreach Education on child abuse and neglect prevention with this subgrant for Oktibbeha County residents.
Starkville Oktibbeha Consolidated School District (Parent Café's)	Provide services centered program to strengthen area families and improve child, family well-being and reinforce family connections.
Tennessee Valley Regional Housing Authority (TVRHA)	Manages Foster Youth to Independence (FYI) housing vouchers for youth in care.
Youth Villages	Services provided through the subgrant are In-Home Services focused on assisting children and families improving parenting and family functions. Provides support services to youth in the Foster Youth to Independence (FYI) housing program.

Foster and Adoptive Parent Licensing, Recruitment, and Retention

Item 33: Standards Applied Equally. How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds?

MDCPS is required to license all Expedited Relative homes within 90 days and non-Relative homes within 120 days. At the end and throughout the process, the Licensure Staff and ASWS are staffing the homes in progress weekly and any barriers to becoming licensed are assessed. Expedited Relative homes are allowed exceptions to the agency's requirements in two areas: 1) the relative applicant can be less than 21 years old and 2) the applicant is not required to be legally married or divorced. Expedited homes are tracked by the State Office Licensure Unit to ensure the agency is consistent and addressing safety and non-safety issues and timeliness. The CQI Unit reviews every expedited home within 30 days once an action is taken, to make sure a third level of review is held. The non-relative homes are reviewed by the Regional ASWS within 7 days of approval then a case review tool is used, and appropriate information is recorded in Smartsheet. The Regional ASWS is given a deadline to complete any unresolved issues and updates Smartsheet indicating it has been resolved in a timely manner.

State Office staff provides supportive services in the areas of foster board payments, all non-expedited foster parent applications, expedited and non-expedited licensure process training, and tracking all expedited relative placements for the state while agency field staff licenses the foster home. As of May 31, 2023, MDCPS has processed 1,693 non-expedited applications.

Month	July 2022	Aug. 2022	Sept. 2022	Oct. 2022	Nov. 2022	Dec. 2022
No. of Applications Received	182	214	167	138	144	145

Month	Jan. 2023	Feb. 2023	Mar. 2023	April 2023	May 2023	June 2022
No. of Applications Received	152	116	159	130	146	116

MDCPS Licensure standards are applied to homes licensed by the contractual child placing agencies. The MDCPS Licensure Standards for foster homes closely aligns with the model home standards. The CB approved Mississippi's Title IV-E plan provision related to Section 471(a)36 addressing model licensing standards for foster family homes. The homes included in the report to Public Catalyst are all MDCPS non-relative and expedited homes. MDCPS conducts reviews of child placing agencies annually and maintains documentation of the results. At the end of each quarter, the MDCPS evaluates quality by reporting to Public Catalyst the results of our review of non-relative and expedited homes. The results of the 2023 quarterly reviews for non-Relative homes are as follows:

Reporting period	2nd MSA Provision	Provision Description	Performance: 100%
July – September 2022	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 70%
Provide a written summary of the findings including the strengths and the areas needing improvement, methodology, and description of the data presented (include the review			

Reporting period	2nd MSA Provision	Provision Description	Performance: 100%
July – September 2022	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 70%

tool used for measuring the provision): Data was collected and analyzed through the 2022 Non-Relative Master Smartsheet. This Smartsheet is managed by the Licensure Unit Deputy Director and the Bureau Directors/Regional Area Social Work Supervisor's for each side of the state. 475 non-Relative homes had action taken (approved or denied) during the 3rd quarter and all approved homes received a review prior to the Q3 reporting. The quality review is designed to be conducted 7-14 days after approval is made. All denied homes have relevant documents uploaded to an internal SharePoint file that is set up for every foster/relative home we assess.

70% (n=137) of the approved homes reviewed in Q3 ninety-six (96) were found to have a comprehensive file. Ninety-five (95) homes were labeled Foster Homes and forty-two (42) homes were labeled Child Specific/ICPC homes. Forty-one (41) homes had issues that needed resolving before the review was considered complete. Seventy-six (76) of the Ninety-five (95) licensed foster homes were approved timely. 80% were licensed timely.

In our 3rdnd quarterly 3.1, 3.3 a and b Memo, the total number of homes licensed in 3rd quarter is 95. For the rebuilding period, October 2021 to present, our "to date" total is 355.

Areas needing improvement: This quarterly report will be shared with all staff so they can see where the errors are occurring and continue to strive to reduce the number of errors. The ASWS needs to do a more thorough job of reviewing the file for quality and get necessary paperwork uploaded before approving the home. This will be addressed with each region where we have this issue. Trainings are being scheduled throughout licensure to address issues with documents not being uploaded to SharePoint prior to the home being approved. The Master Non-Relative Smartsheet has been filtered to give each Regional/ASWS their own listing so they can keep track of the home from entry until completion. The Social Service Managers will address the continued issues with reviews in their monthly staffing with all ASWS's and Regionals. Trainings are being scheduled throughout licensure to address issues with documents not being uploaded to SharePoint prior to the home being approved.

Strengths: We are not seeing any homes that were approved when they should have been denied as previously reported. All ASWS's are trained on this process have seasoned supervisors who know how to properly staff and train their staff on this process. We should see an increase in their attention to quality before approving homes.

Reporting period	2nd MSA Provision	Provision Description	Performance: 100%
October-December 2022	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 73%

Provide a written summary of the findings including the strengths and the areas needing improvement, methodology, and description of the data presented (include the review tool used for measuring the provision): Data was collected and analyzed through the 2022 Non-Relative Master Smartsheet. The Smartsheet is managed by the Deputy Director of the Licensure Unit and the Bureau Directors/Regional Area Social Work Supervisor's for each region of the state. Action was taken on 475 non-Relative homes (approved or denied) during the 3rd quarter and all approved homes received a review prior to the Q3 reporting. The quality review is designed to be conducted 7-14 days after approval. All denied homes have relevant documents uploaded to an internal SharePoint file that is set up for every foster/relative home that is assessed.

73% (n=102) of approved homes reviewed in Q4, seventy-five (75) were found to have a comprehensive file. Seventy-five (75) homes were labeled Foster Homes and twenty-seven (27) homes were labeled Child Specific/ICPC homes. Twenty-one (21) homes had issues that needed resolving before the review was considered complete. Fifty-five (55) of the Seventy-five (75) licensed foster homes were approved timely. 73% were licensed timely.

A total of 84 homes (4th quarter) were licensed in the agency's 4th quarterly 3.1, 3.3 a and b memo. The agency's "to date" total for the rebuilding period of October 2021 to present is 415.

Areas needing improvement: This quarterly report will be shared with all staff so they can see where the errors are occurring and continue to strive to reduce the number of errors. The ASWS needs to do a more thorough job of reviewing the file for quality and get necessary paperwork uploaded before approving the home. This will be addressed with each region where we have this issue. Training is being scheduled throughout licensure to address issues with documents not being uploaded to SharePoint prior to the home being approved. The Master Non-Relative Smartsheet has been filtered to give each Regional/ASWS their own listing so they can keep track of the home from entry until completion. The Social Service Managers will address the continued issues with reviews in their monthly staffing with all ASWS's and Regionals. Training is being scheduled throughout licensure to address issues with documents not being uploaded to SharePoint prior to the home being approved.

Reporting period	2nd MSA Provision	Provision Description	Performance: 100%
October-December 2022	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 73%
Strengths: We are not seeing any homes that were approved when they should have been denied as previously reported. All ASWS's are trained on this process have seasoned supervisors who know how to properly staff and train their staff on this process. We should see an increase in their attention to quality before approving homes.			

Reporting period	2nd MSA Provision	Provision Description	Performance: 100%
January-March 2023	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 64.8%

Provide a written summary of the findings including the strengths and the areas needing improvement, methodology, and description of the data presented (include the review tool used for measuring the provision): Data was collected and analyzed through the 2023 Non-Relative Master Smartsheet. This Smartsheet is managed by the Licensure Unit Deputy Director and the Bureau Directors/Regional Area Social Work Supervisor's for each side of the state. 197 non-Relative homes had action taken (approved or denied) during the 1st quarter and all approved homes received a review prior to the Q1 reporting. The quality review is designed to be conducted 7-14 days after approval is made. All denied homes have relevant documents uploaded to an internal SharePoint file that is set up for every foster/relative home we assess.

64.8 % (n=54) of the approved homes reviewed in Q1 of the fifty-four (54) were found to have a comprehensive file. Forty-five (45) homes were labeled Foster Homes and nine (9) homes were labeled Child Specific/ICPC homes. One (1) ICPC home was approved in error and is not reflected in the numbers. Fifteen (15) homes had issues that needed resolving before the review was considered complete. Thirty-five (35) of the Fifty-four (54) licensed foster homes were approved timely. 64.8 % were licensed timely.

In our 1st quarterly 3.1, 3.3 a and b Memo, the total number of homes licensed in the 1st quarter is 78. For the rebuilding period, October 2021 to present, our "to date" total is 517.

Areas needing improvement: This quarterly report will be shared with all staff so they can see where the errors are occurring and continue to strive to reduce the number of errors. The ASWS needs to do a more thorough job of reviewing the file for quality and get necessary paperwork uploaded before approving the home. This will be addressed with each region where we have this issue. Training is being scheduled throughout licensure to address issues with

documents not being uploaded to SharePoint prior to the home being approved. The Master Non-Relative Smartsheet has been filtered to give each Regional/ASWS their own listing so they can keep track of the home from entry until completion. The Social Service Managers will address the continued issues with reviews in their monthly staffing with all ASWS's and Regionals. Training is being scheduled throughout licensure to address issues with documents not being uploaded to SharePoint prior to the home being approved.

Strengths: We are not seeing as many errors for homes that were approved when they should have been denied, as previously reported. All ASWS's are trained on this process have seasoned supervisors who know how to properly staff and train their staff on this process. There are several new ASWSs. We should see an increase in their attention to quality before approving homes.

Non-relative homes are reviewed for documentation and quality by a third level review team within the Licensure Unit, within 7 days of approval by the Area Social Work Supervisor. MDCPS has licensed 330 non-relative homes from July 2022 through June 2023:

- July 2022: 21 homes
- August 2022: 37 homes
- September 2022: 37 homes
- October 2022: 33 homes
- November 2022: 33 homes
- December 2022: 18 homes
- January 2023: 38 homes
- February 2023: 16 homes
- March 2023: 24 homes
- April 2023: 25 homes
- May 2023: 24 homes
- June 2023: 24 homes

Expedited Relative homes are allowed exceptions to the agency's requirements: 1) the relative applicant can be less than 21 years old, and 2) the applicant is not required to be legally married or divorced. Expedited homes are tracked by the State Office Licensure Unit to assure consistency in addressing safety and non-safety issues and timeliness. The Continuous Quality Improvement Unit reviews every home within 30 days once an action is taken to ensure a third level review is held. The agency reports these findings monthly and quarterly to Public Catalyst. The agency had action taken on 772 homes between July 2022 and June 2023, and approved 412 of those homes.

- June 2022: 78 homes; 34 approved
- July 2022: 77 homes; 36 approved
- August 2022: 64 homes; 34 approved
- September 2022: 69 homes; 33 approved
- October 2022: 64 homes; 31 approved
- November 2022: 48 homes; 27 approved

- December 2022: 64 homes; 37 approved
- January 2023: 62 homes; 38 approved
- February 2023: 59 homes; 29 approved
- March 2023: 66 homes; 29 approved
- April 2023: 64 homes; 27 approved
- May 2023: 75 homes; 31 approved
- June 2023: 60 homes; 26 approved

Expedited Relative family cannot receive a board payment until their home is fully licensed. The County Worker assists the family with any needs that child might have while being licensed such as a clothing allowance and monthly allowance.

Recruitment:

The Licensure Unit has a required quota of how many foster homes the agency must license throughout the year. During the agency's newly renegotiated Rebuilding Period of the Modified Settlement Agreement, new quotas were formulated for the months of October 2021-January 2023. The agency is required to license 486 nonrelative homes during that 18-month period and the agency licensed 476. This is evaluated each month and reported to our public monitors for compliance. Licensure staff can look up data based on their region so they can more easily report on what the demographics are of the children in care. Licensure also reports monthly on all recruitment activities that took place during that period. We have begun to recruit more heavily for teens, sibling groups and special needs populations. We have updated our brochures to show the need for homes who will accept this population. We list all the requirements to becoming a foster parent and go through those requirements during our one-hour Orientation that is required of all applicants.

As of April 1, 2022, the MDCPS Foster Parent Recruitment Unit (FPR) was developed. Currently, the unit consists of three Recruitment Supervisors and fourteen (14) Recruitment Specialists positions with three vacancies. The unit's primary focus is recruitment throughout the state to help identify new potential foster families so that we can increase the number of licensed homes available for children in care. In addition to recruitment, the MDCPS Foster Parent Recruitment Unit is responsible for providing Foster Parent Orientation to all applicants. Contractors are still being utilized to assist with completing Non-Relative Home Studies to help aid in licensing new homes.

Retention:

Retention is being addressed by good communication and working relationships between the foster parent, Licensure and Front-Line Staff, as well as the Adoption Unit. MDCPS has a liaison for foster parents who provides support group leaders ~~/~~and speakers each month and is the liaison for the State Office. The liaison is available to receive calls if the foster parent cannot contact their worker or has a complaint/concern.

MDCPS has a Closed Resource report that lists homes that were closed, the reason for closure, the initial license date, and closure date. However, the Agency does not have a way to assess the satisfaction of the foster parent. Please see the below table related to resource home closures for homes that were classified as Foster Homes, Adoptive Home Domestic, Relative Foster Homes.

Resource Home Closures FFY 2024	**Number Closed**
Agency Decision	68
Agency Decision / Agency Licensing Requirements / Family Request / No children place in the home	2
Agency Decision / Family Request	5
Agency Decision / Family Request / No children place in the home	3
Agency Decision / Family Request / Substantiated ANE	2
Agency Decision / Family Uncooperative / No children place in the home	2
Agency Decision / Family Request / Family Uncooperative / No children place in the home	2
Agency Decision / No children place in the home	27
Agency Decision / No children place in the home / Substantiated ANE	6
Agency Decision / Substantiated ANE	3
Agency Licensing Requirements / Facility Request	1
Agency Licensing Requirements	7
Agency Licensing Requirements / Family Request	1
Agency Licensing Requirements / No children place in the home	4
Facility Request	9
Facility Request / Family Moved Out of State	1
Facility Request / No children place in the home	4
Family Moved Out of State	4
Family Moved Out of State / Family Request	1
Family Moved Out of State / Family Request / No children place in the home	1
Family Moved Out of State / No children place in the home	1
Family Request	190
Family Request / No children place in the home	152
Facility Request / Family Request / No children place in the home	1
Family Request / Family Uncooperative	1
Family Request / Substantiated ANE	1
Family Uncooperative / No children place in the home	1
No children place in the home	70
No children place in the home / Substantiated ANE	2
Substantiated ANE	5
Grand Total	**577**

A newsletter is distributed monthly to existing foster parents to provide on-line training opportunities. There has been an ongoing push for our agency to work in a Shared Parenting capacity so that the same message is being mirrored with all foster parents. Our goal is to enhance foster parent experience by providing them with resources needed to continue their efforts in foster parenting as well as help with any retention issues regarding foster parents who are interested in working with the agency or the biological family.

When a complaint or compliment is received, it is elevated to the person that is over that area of the state and it is dealt with in a timely manner We feel this is helping in the retention of foster parents because this process allows them the opportunity to state their concerns and are receiving a response in a timely manner.

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?

The MDCPS Recruitment Unit continues to educate the applicant during orientation about this requirement and explains that the agency also completes fingerprints on anyone in their household that is 14 years and older. We explain to them what documentation is needed to complete their fingerprints so they can begin collecting needed documents early on.

MDCPS has made efforts to improve the Criminal Background process. Currently, a new unit is being developed to remove the criminal background responsibilities from the Licensure Unit. The Unit will be responsible for obtaining the Local, State, and Federal background checks along with the Child Abuse Central Registry checks for anyone residing in the respective homes who are fourteen (14) years of age; and older and others that are entrusted with the protection and care of the children for the State of Mississippi. The goal of this implementation is to ensure that the agency follows federal requirements as it relates to Criminal Background clearances for all applicants requested for the State of Mississippi.

MDCPS Licensure Unit no longer completes local background checks. All local background checks and fingerprinting are completed by the Fingerprinting Specialist assigned to the services area. At a minimum, local background checks and a walkthrough of the home must be completed prior to enrolling the applicant in training. Licensure is given a 45-day deadline, from the date of the inquiry, to complete these fingerprints so we will know if we can proceed with licensing. If the child was placed in a relatives' home, the County Worker for the child conducts the walk through and local background check before handing off the COR packet to the Licensure Unit. The Licensure Unit then conducts a second walk through of the home and looks over the local background checks to know whether we can proceed. With relatives who

already have a custody child in the home, this assures that we do not leave a child in a placement that could be at risk.

Licensure uses the Adam Walsh Act to determine what findings are not allowed for a foster parent to have on their record. Should they have other charges on their record, we request in writing a justification letter to get a better explanation of their charges. The ASWS and Regional ASWS review any charges that are questionable to determine if that applicant could safely be approved for fostering. If it is determined that they cannot be licensed, the applicant receives a Notice of Action letting them know the reason we weren't able to license them. We do not list the charges and will only discuss those charges with the applicant in question.

Current foster parents must notify the Agency if any family members move into the home, so MDCPS can quickly get that person fingerprinted as well. MDCPS has 30 days to get those additional family members printed. With existing foster homes, MDCPS re-license their home every two years and re-fingerprint all eligible participants every four years. The process for ensuring safety for relative and non-relative homes is the same. MDCPS frontline workers and licensure specialists maintain required face to face contacts with foster children and foster parents. MDCPS frontline workers make a minimum of two face to face contacts per month with families assigned to them. Licensure Specialist visit the home per policy.

All foster parent applicants and household members 14 years and older must have fingerprints, local, child abuse central registry, sex offender, and social media, and MACWIS checks. Central registries from all stated applicants lived in the last five years are obtained. Background checks must be completed prior to the placement of a CIC. In case of relatives/fictive kin when a child is placed prior to the home being licensed through the expedited process, the COR worker must complete all locals, social media, MACWIS, Central registries, and sex offender check to ensure the safety of a child.

The table below contains fingerprint data collected during the program year.

Month	Non-Rel Resource Applicant	Relative Resource Applicant	Adoption	Youth in the home	Total	Adam Walsh Disqualifier
Aug 2022	141	88	0	16	245	1
Sept 2022	108	65	0	21	194	2
Oct 2022	98	84	0	24	206	0
Nov 2022	88	58	0	23	169	1
Dec	48	50	0	13	111	1

Month	Non-Rel Resource Applicant	Relative Resource Applicant	Adoption	Youth in the home	Total	Adam Walsh Disqualifier
2022						
Jan 2023	96	88	0	22	206	0
Feb 2023	73	53	0	10	136	0
March 2023	126	82	0	12	220	0
April 2023	89	69	0	7	165	0
May 2023	90	69	0	25	184	0
Grand Total	957	706	0	173	1836	5

Item 35: Diligent Recruitment of Foster and Adoptive 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 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? The Foster Parent Recruitment Unit currently uses internal data presented monthly. This data incorporates the Children in MDCPS Custody Map and provides areas of targeted and diligent recruitment throughout the state.

MDCPS continues to look for possible placements for a child based on their family's connections to the community. We have local staff recruiting in the county/region they work. They can access demographics about their community and can gear their recruitment toward a population that will most closely match the children in care. We recruit with all populations by explaining the data/demographics we have for that area. While recruiting for foster parents, the Recruitment Unit continues to complete a monthly calendar of events for each region to show recruitment efforts. They often conduct activities such as speaking to civic groups, post social media blasts about the needs in their community and hand out flyers and hang posters in area businesses. The Foster Parent Recruitment Unit also sets up booths, COVID restrictions have been lifted and MDCPS is recruiting in the community. Our future efforts will include targeting events for after school and extracurricular events where existing parents populate. They also look for meetings and groups who service special needs populations. We have found that nurses, doctors, law enforcement, and educators are employees who tend to do well with the population of children in our care. We have updated our brochures and posts to include our current need for more placements of teens, special medically fragile children (Autistic and

Asperger's) and someone to care for sibling groups. Our application requires that applicant mark an age range, so the applicant must choose an age range from 0-5, 6-11, 12-18 or 0-18. We also ask that they mark if they are willing to accept a sibling group. We do not ask them if they prefer a specific race or ethnicity when a child needs a placement in their home. If the foster parents tell us to be specific in which child we place in their home, we keep that in mind when seeking the most appropriate placement for that child.

During this program year, demographic statistics have been utilized more to recruit families that most closely match that population. Internal data does provide demographics pertaining to race and gender. However, the Foster Parent Recruitment Unit concentrates more of its recruitment efforts on data received from the Children in MDCPS Custody Map to guide targeted recruitment efforts. Our staff have access to data in our CORE system so they can look at trends to decide where to target their recruitment efforts. This data looks at ages, gender, race, and ethnicity but it has no way to tell us about sibling groups or children with special needs. This is information that will still need to be provided to the licensure staff. We have been utilizing the churches in our communities to provide wrap around services such as ongoing support groups for any families that go through with being licensed as a foster parent. We ask our foster parents to assist us in recruiting for other foster parents. If there is a child who has special needs or their primary language is not English, we seek assistance from the schools, courts, and community to find foster family resources for that family, and the agency's Interpreter Services. To align with the National model standards, MDCPS requires that the family be able to communicate with the child, agency, and community.

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? The ICPC continues to work with the local offices and other states to adhere to and promote the standard set forth in the Safe and Timely Act of 2006 to encourage timely home studies. The ICPC Division also has an ongoing collaboration with the Administrative Office of Court (ACO) Court Improvement Program for educational training and Collaboration with judges to work through permanency barriers. Additionally, ICPC works with the Association in the Process to introduce the "New Interstate Compact for the Placement of Children "to the legislative body within the state.

MDCPS encountered some strengths and challenges as it relates to the ensuring effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children. Some of the strengths were: The years of experience and knowledge of ICPC staff is to be able to work through challenges quickly to resolve issues; having a well-defined network of individuals to be able to seek/obtain needed documentation from other states as

well as within MDCPS. Some of the challenges were: Developing an effective method with the Professional Development Division for county staff to be trained in how to process ICPC cases. This should be part of the initial pre-service training with the agency; Providing an overview of ICPC to the training curriculum; Working with county staff to make sure services such as Medicaid benefits, etc. are set up for children placed in ICPC placements and understanding the documentation required to be more efficient in providing these services; Managing violations of the Compact when they are discovered by the ICPC Division, and Obtaining additional staff to distribute caseloads to provide better case management; processing through the ICPC office.

A consistent barrier is a local knowledge of the ICPC Process. The ICPC department is not fully staffed, hopefully, by the next chapter, we will have more staff. Many of our agency workers are unaware of the rules and regulations of the Compact regarding the placement of children across state lines. They sometimes fail to consider the licensing process, the procurement of services for therapeutic placements with private agencies, IV-E verification for medical services, and what constitutes an illegal placement, etc. This happens when new hires are not getting proper knowledge in their initial or ongoing training or when supervisors are not knowledgeable of the ICPC process to provide guidance to their workers. This is why the ICPC Division is planning to provide training to the seven service areas to increase their knowledge of the ICPC process, in the hope of preventing these barriers.

The MS ICPC Division discussed the training with the Professional Development Unit. It was determined that the ICPC Training will be conducted in-person and quarterly. Appropriate ICPC staff will participate in the Clinical Supervisory Training at the MDCPS state office in July 2023.

During this reporting period, ICPC worked with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) on the process to introduce the "New Interstate Compact for the Placement of Children" to the legislative body within the state. The Compact Administrator and Deputy Compact Administrator met with the agency's Director for Constituent & Legislative Affairs and the AAICPC Secretariat to collaborate on how to begin the introduction process to the legislature. Additionally, the ICPC Compact Administrator and the social Services Coordinator met to begin the process of developing a training curriculum for the ICPC program that will help the county staff and courts with the ICPC process.

The ICPC Division did lose a staff member that had been with the agency for 9 years. A new Social Services Program Coordinator II was hired in August 2022. This still left an opening for a Social Services Program Coordinator II position. The Director of Interstate Compact on the Placement of Children also left the agency.

The Division Director and staff participated in the following national capacity building activities: AAICPC Training Committee in preparation of the National ICPC Training, Business Meeting and Child Welfare Conference in New Orleans, LA on May 15 – 18, 2023. The MS ICPC Division coordinated the AAICPC 2023 Annual Business Meeting, Training Workshop, and Child Welfare Conference. ICPC staff are encouraged to attend all monthly AAICPC conference calls which provide updates on processes or accomplishments that have taken place nationwide. These conference calls also place emphasis on new national initiatives, Executive Committee decisions, updates on the AAICPC National Conference, financial reports, state fees, updates on NEICE and other national committees or conferences that members of the AAICPC have participated. The Deputy Compact Administrator currently serves on the Executive Committee of the AAICPC.

During this reporting period, The MS ICPC Division has been preparing for the AAICPC 2023 Annual Business Meeting, Training Workshop, and Child Welfare Conference. The AAICPC Conference will be held in New Orleans, LA on May 15 and 18, 2023. MS ICPC Division has three employees to attend the AAICPC Conference in New Orleans. The first day of the conference was ICPC Training Introduction Part I Track I with the Beginner Track. The Second day of the Conference was on the ICPC advanced track. On the third day of the conference, there was an AAICPC Business Meeting Opening session. We closed the conference on May 18, 2023, with an AAICPC Business Meeting and Blended Conference Sessions. AAICPC 2024 Annual Business Meeting. Training Workshop and Child Welfare will be held in the Virgin Islands in 2024. We will still have monthly conference calls. These conference call also places emphasis on new national initiatives, Executive Committee decisions update on the AAICPC National Conference, financial repo1ts, state fee, an update on NEICE, and other national committees or conferences that members of the AAICPC have participated in. ICPC remains in partnership with MDHS, Division of Youth Services (DYS), Interstate Compact on Juveniles (ICJ), private adoption agencies, and attorneys for processing of private adoptions. Prior to COVID 19, MDCPS was working with Alabama to amend its border agreement to include all bordering counties along the Mississippi/Alabama border. The ICPC office has not been made aware if this has been completed during this reporting period. ICPC staff also serve on various committees under the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC). There are fifteen (15) committees under the body of AAICPC. The committees in which the MS ICPC Division participate include: The Annual Business and Conference Planning Committee, Data Collection Committee, New ICPC Committee, Nominations Committee, Parental Placement Committee, Training Committee and NEICE Committee. These committees require meetings in the form of teleconferences and webinars that range from bi-weekly to quarterly. Due to COVID 19, many of the committees were inactive during the reporting period. MDCPS staff did participate on the national Training Committee in preparation for the October 2021 Virtual conference.

American Public Human Services Association (APHSA) is an organization that supports leaders from the sate county, and city human services agencies to advance the well-being of individuals, families, and communities nationwide. There are fifteen committees under the body of Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC). MS ICPC Division has committee meetings in the form of teleconferences and webinars that range from bi-weekly to quarterly. Each ICPC staff is a part of one of the committees. We work with these committees to plan for the AAICPC Annual Training, Business Meeting, and Child Welfare Conference. The ICPS Division also works with the Attorney General's office when dealing with an ICPC case that is beyond the scope of the division's daily policies and procedures.

The ICPC Unit always has at least one ICPC consultant available during business hours to assist field staff as well as outside agencies, attorneys, prospective placement resources, and any public inquires on the ICPC process regarding placement in another state. The ICPC Division regularly seeks legal advice and assistance from the agency's legal department. ICPC requires legal guidance on cases to remain in compliance with state and federal law. The ICPC office also works with various adoption attorneys and licensed adoption agencies in Mississippi in order to help facilitate private adoptions for permanency. The Division also aims to maintain a professional and positive working relationship with private agencies and attorneys as the state works through the ICPC process. MS ICPC Division has two new Social Services Program Coordinators II: Demetrius Lewis who brings a lot of experience from the MS Department of Human Services and Nakia Cooper who brings a lot of experience from her background working with Jackson State University as the director of the childhood daycare center. Deputy Administrator Ms. Olevia Billips also left the agency for better opportunities this quarter.

When incoming ICPC home study requests are received, data entry is completed in two separate systems: Smartsheet and the NIECE Database. Significant improvement has been seen in the ability to provide case management due to staffing increases. In the past year, the ICPC staff has increased from two members to a total of five. The increase in staff has been very beneficial in the intricate coordination of ICPC case work. Thanks to Mississippi being in the NEICE nationwide system, we can now process cases quicker, deliver them to participating states on the same day as well as receive approvals quicker. This can readily be seen in private adoption cases. Some cases have been received and approved in the same day. NEICE has also provided more quantitative and detailed reports on cases being processed by the ICPC Division. We are still in the process of utilizing all that NEICE offers as well as working to manage cases within the system, which can sometimes be a time-consuming task. The NEICE team rolled out an updated version of NEICE in July 2021. NEICE has allowed for better accountability of caseloads as it documents when cases are entered. It has made it easier and

more efficient in corresponding with participating states. It has been most effective in lowering costs for postage as well as for paper. The ICPC Division is working with RedMane Technology, LLC on the new PATHWAYS Mississippi system, that we are excited about.

Due to the agencies MACWIS system being limited in how it can assist the ICPC Unit, a Smartsheet spreadsheet was created to better organize what tended to be a paper process. This Smartsheet has afforded a better grasp of assigned caseloads and the monitoring of functions to be conducted on each case. The spreadsheet's "filter" function is used so that staff can see specific cases that are assigned to them and makes it easier to identify what processes need to be completed on each case. The Smartsheet also allows access to the status of a case and where each case is in the process to permanency for each child. It also allows for anyone in the ICPC Unit to get updates on all ICPC cases that have been entered. For example, the Compact Administrator position is not housed in the State Office, so they can also check the case status remotely. The ICPC Division is working with RedMane Technology LLC on the new system that we are excited about called PATHWAYS, Mississippi. MS ICPC Division has been working with RedMane to give them information that would help with the I CPC part of the system. Red Mane Technology LLC is working to interface with the NEICE system so that everyone will be on the same page.

Other benefits of the Smartsheet include identifying active and non-active cases, case assignment, overdue cases, supervision reports, county worker assignment, and license and re-evaluation information. Both the Niece and Smartsheet systems have been very effective in the processing of cases during the COVID-19 pandemic since physical case files are not readily available while staff are teleworking. Our previous issue with downloading narrative reports from MACWIS has been resolved. We can now print and save the document as a PDF file which makes it easier to save, upload and forward to other states. Although the pandemic has caused us to work differently, it has helped to open our minds to discover new and supportive ways to accommodate office processes.

Many technological advances have been utilized to enhance our work process. We attend weekly individual staff meetings, via the TEAMS platform to review and update the Smartsheet for ICPC case management. The division developed a SharePoint link to create paperless, electronic case files. Staffing documentation is also housed in a SharePoint file under the Licensure Division. Moving to more electronic platforms has been beneficial for easily accessing ICPC case files. The ICPC Department would also like to expand the use of the NIECE Database system to the local level and possibly create an ICPC Liaison for each region. The Liaison would assist with distributing information to the locals and help compile documents for local staff.

PATHWAYS will connect with the NEICE database system, allowing MDCPS frontline staff access to ICPC case files. The benefit of the collaboration between the two systems is that all stakeholders can see data in real time. The approval/denial of an ICPC case, status report and supervisor reports can be seen and will be accessible. ICPC and RedMane Technology meet weekly to develop the new tracking system. During the MS Conference on Children and Families, the PATHWAYS panel announced a 'go live' date of May 2024.

As mentioned above, we use two tools to track ICPC cases to provide data:

NEICE and Smartsheet: 104 cases handled for regulation parents, foster, public adoptions, private adoption, residential placement, and court jurisdiction only cases.

1. Regulation 1 - 2
2. Regulation 2 - Parents, Foster, Public Adoption, Court Jurisdiction - 66
3. Regulation 4 - Residentials 15
4. Regulation 7 - 5
5. Regulation 12 - Private Adoptions - 16

IV. Plan for Enacting the State's Vision and Progress Made to Improve Outcomes

Plan for Enacting the State's Vision

As indicated in the 2020-2024 CFSP, MDCPS's five-year goals are guided by three priorities:

- Safety and Wellbeing: Mississippi intends to ensure the safety and wellbeing of its children by reducing the number of instances of child maltreatment.
- Prevention: Mississippi seeks to support families by providing the services and resources needed to help children remain safely at home.
- Permanency and Wellbeing: Mississippi seeks to achieve lasting permanency as rapidly and safely as possible for every child who must enter foster care. MDCPS leadership prioritizes an evidence-informed process to establish annual goals and objectives. Several 2023 goals, objectives, and strategies have been revised to reflect Mississippi's current performance and improvement activities.

Additionally, throughout the upcoming year, the Agency developed a system to identify and prioritize needs and strengths, research improvement strategies, and establish clear indicators to evaluate the effectiveness of implemented initiatives. To support these efforts, MDCPS will work with the Capacity Building Center for States, Chapin Hall, Casey Family Programs, and other organizations.

There are overarching areas that are essential to supporting MDCPS's priorities, including workforce, CQI/data, and meaningful stakeholder engagement. Therefore, in addition to the goals and objectives listed below, MDCPS will continually work to enhance:

- A stable, qualified workforce, including the Agency's restructuring efforts, the Workforce Wellbeing initiatives, effective staff training, coaching and a more seamless connection between front-line staff and Agency leadership.

- Data Systems, Quality and Outputs to drive CQI: MDCPS has procured a vendor to support the development of a CCWIS Statewide Information System. A priority is to improve data quality, and the ability to disaggregate/drill down data to identify variability in performance (for example, does recurrence vary by age, race, county?) used to inform Agency decisions.

- Meaningful engagement of internal and external stakeholders, including youth, biological and foster parents, service providers, Courts, MDCPS staff, and others who support positive outcomes for children, youth, and families.

REVISIONS to GOALS, OBJECTIVES, and INTERVENTIONS

MDCPS's 2023 APSR Goals and Objectives were revised last year to reflect solutions to agency needs identified through an analysis of various forms of evidence and stakeholder feedback.

Throughout this implementation year, MDCPS will continue to evaluate the effectiveness of the programs and initiatives and adjust the goals and objectives as necessary. The CQI has made great strides in ensuring the programs and initiatives align with the agency's goals and feedback impacted, data driven decisions are made.

Child Safety and Wellbeing:

Goal 1: Mississippi will support the safety and wellbeing of its children by reducing rates of recurrence of child maltreatment. Mississippi's recurrence of maltreatment rate of 13.7%, is higher (worse) than the national performance (9.7%). Therefore, to monitor implementation and measure impact, MDCPS will fine-tune data indicators throughout the implementation year.
Objective 1: Increase consistency in decision making from intake through investigation. Mississippi will assess and continue to strengthen strategies designed to improve decision making in child welfare, including the following:
Centralized Intake and Assessment: Improve intake screening decision making Rationale: Variation in screened-in reports and victimization is seen by age, race/ethnicity, and county. Currently, intake calls are triaged at the State level as they are entered into the system, then dispersed to the counties for the final decision to accept or document the report. An

underlying factor to a variation in recurrence, investigation, and victimization rates is the current process of local decision making.

Initiative: MDCPS recognizes the importance of consistent, quality decision making at the front door – intake. In the upcoming planning year, MDCPS developed a Centralized Intake process, the Mississippi Centralized Intake and Assessment Center (MCIA). MCIA receives the report and determines the most appropriate course of action: accept, refer for investigation, screen it out, or refer directly to services.

Monitoring Progress and Impact:

- Regular tracking of recurrence, investigation, and victimization rates by county, age, and race/ethnicity.
- MDCPS, as a component of the Centralized Intake process, is continuing to develop unit-specific performance metrics.

Structured Decision Making (SDM): Improve safety and risk assessments

Rationale: The CFSR and the Agency's case review process, has identified Item 3, Risk and Safety Assessment and Management as an improvement area. Several strategies have been implemented to positively impact quality risk and safety assessments, including the revision of definitions of risk and safety for consistency, clarity, and common understanding. Also, MDCPS reinforced its expectations of case staffing tools to improve supervisors' ability to facilitate high quality case staffing.

Initiative: MDCPS will continue the process to fully implement Structured Decision Making (SDM) to improve the consistency and validity of each decision throughout the life of the child welfare case. SDM, as mentioned above, supports decision making throughout the life of the case. This initiative supports the transition to a Centralized intake, described above, and supports specialized staff training in using the assessment results to link services to families to minimize trauma and reduce recurrence of maltreatment.

Measurable results of this work will not be immediate; however, MDCPS is carefully structuring and implementing interventions. The estimated full implementation timeframe is within months.

Monitoring Progress and Impact:

- Annually, every region throughout the State is involved in a comprehensive case review process using the federal On-site Monitoring Instrument (OSRI). The OSRI allows MDCPS to monitor performance consistently and objectively on Item 3.
- CFSR Non-Overlapping monthly meetings were established in collaboration with the Children's Bureau. These meetings allow MDCPS to consistently discuss strategies and monitor performance.

Staff Re-structuring: MDCPS's staffing pattern has been restructured into dedicated units which will allow for job specialization, training, and supervision. This creates more efficient

and effective service provision, whereby staff will have specialized skills to assess and address the needs of children and families throughout each MDCPS decision.

Rationale: Based on an analysis of caseload reports and other data pulled from administrative data sources, there is variation in caseloads throughout the State. It is also noted that the majority of MDCPS staff carry mixed caseloads which can lead to multiple staff working on the same case. The restructuring of staff to reflect the child/family's experience as they travel through the child welfare system, from "door to door" helps with the caseload variations.

Initiative:

Restructuring MDCPS staff allows the Agency to create a workforce of specialized staff – investigations, care management, etc., that receives role-specific training, coaching, and supervision. Specialization increases expertise throughout each practice area, resulting in improved decision making and ultimately improved outcomes.

A specialized, supported workforce is also expected to improve job satisfaction, thereby reducing turnover. MDCPS is continuing to work to decrease the space between upper-level positions and field positions.

Monitoring Progress and Impact:

- Agency caseload reports are monitored monthly.
- Workforce Wellbeing utilizes assessment tools to monitor job satisfaction and support staff.
- Qualitative data to assess performance will be regularly collected from stakeholder engagement groups, such as the Youth Advisory Council and the Foster Parent Feedback Group. Additionally, data collected from case-related interviews during the case review process will be utilized.

Prevention

Goal 2: Mississippi will support families in creating and maintaining safe, supportive environments so that children may remain safely at home when reasonable.

MDCPS has a foundation of prioritizing prevention over foster care. MDCPS approaches this prevention goal with a public health framework, striving for a social and physical environment that promotes the well-being of children, youth, and families. MDCPS recognizes that stakeholder engagement, case level family engagement, and data analytics and evaluation, are necessary to change the child welfare paradigm from reactive (providing supports after the event) to preventive.

Objective 1: Develop a continuum of effective in-home services to meet the needs of children, youth, and families.

- **Assess internal and external capacity and commitment to prevention**
- **Contractually knit together a continuum of in-home services**

MDCPS has developed and submitted a FFPSA Preventive Services Plan to the Children's Bureau. Additionally, MDCPS will work to develop a continuum of in-home services to address the risk and safety concerns of children, youth, and families. MDCPS has procured evidence-based intensive in-home services programs such as Intercept.

Via a Multi-Disciplinary Task Force:

Rationale: Mississippi engages and collaborates with several stakeholders to help achieve Mississippi's child welfare goals and will continue efforts to further enhance meaningful engagement.

Comprehensive stakeholder input is necessary to embark on a thorough needs assessment of existing services, existing gaps, and strengths of the in-home service array and to develop strategies to meet existing needs. By joining forces and pulling towards shared goals, the scope and effectiveness of services to address families' needs will improve, thereby supporting families' ability to achieve safe home environments.

Initiative: Mississippi has a wealth of service providers that effectively address the needs of families and children. A Task Force will be developed to assess and address service needs.

The Task Force will identify service gaps, accessibility issues, and other emerging trends and collectively seek to address barriers to a robust continuum of service provision. The Agency's plan is to ensure representatives from the Courts/Judicial community, service providers, other state agencies, foster parents, and youth advisory groups are part of the Task Force.

Monitoring Process and Impact:

- Minutes, preparation and tracking of Task Force goals

Via meaningful engagement of birth parents:

Rationale: Mississippi youth currently and previously involved in the child welfare system are members of an active Youth Council; foster/adoptive parents participate in MDCPS trainings, meetings, and conferences. However, there is a need to develop a formal opportunity for birth families to contribute and provide meaningful input into the development of Mississippi's array of services.

Initiative: MDCPS will continue to expand opportunities for birth families to provide input into services, policies, etc. Initiatives such as Project CARE mentioned in Section II to ensures birth families are active and engaged.

Monitoring Process and Impact:

Initial indicators such as process measures track the implementation of the birth parent groups, the level of participation and two-way communication.

Via contractual services:
Rationale: In 2020, MDCPS identified a gap with in-home services. The Agency facilitated funding, via an RFP, to begin addressing this service gap.

Initiative: In order to encourage the effective use of agency funds to meet children, youth, and families' needs, MDCPS monitors prevention services, which will be awarded as subgrants, via an internal auditor. MDCPS has initiated new procurements to diversify and build further capacity for prevention (primary and secondary) and in-home services. They include parenting and support programs, homeless family programs, home visiting programs, counseling and mentoring programs, and substance abuse for youth and adults. Purchased services include case planning, family contact, ongoing assessments and coordination of services, training of staff and documentation of activities, provision of or referral to services, transportation, and supervision and management of referred cases and outcomes.

Monitoring Process and Impact:

- Monitoring results will be shared and evaluated internally

Objective 2: Improve family engagement practice through focused staff training.

Rationale: Preventive services are most effectively delivered to families who are fully engaged in the risk and safety assessment process and are partners in developing a service plan. Item 3, Risk and Safety Assessment and Management is an improvement area identified by Mississippi's CFSR. On-going case review results, using the OSRI, have confirmed that family engagement is a contributing factor.

The OSRI case reviews also found that inconsistent contacts with parents was a contributing factor or barrier noted in the completion of comprehensive and ongoing assessments of the safety and risk factors.

Initiative: **Focused Staff Training and frequent practice opportunities to reinforce learning objectives:** MDCPS leadership and team leads are working with the Professional Development unit to re-vamp training.

Monitoring Progress and Impact:

- Training participation, training evaluation responses
- Case Review findings are improving for Item 3

Permanency and Wellbeing:

Goal 3: Mississippi will identify and support appropriate timely and lasting permanency for all children in foster care.

In 2019, nearly 2,200 children were placed in Mississippi's foster care system. Within three years of a child's admission to foster care, 76% left foster care to permanency. Nationally, approximately 75% of the children in foster care achieved permanency during the same time period. For the children who entered foster care in 2019, and achieved permanency within three years, nearly half (1,069 children) were reunified with their families, 18% (387 children) were discharged to relatives, and 8% (175 children) were adopted[4]. MDCPS strives to support the best permanency outcome for each child, based on their individual and family circumstances.

The federal Children's Bureau provides five CFSR permanency indicators. Of those, Mississippi is at or above the national rate in four of the five indicators.

MS Rate	National Rate	Permanency Outcome 1: Children have permanency and stability in their living situation.
41.2%	32.2%	Permanency in 12 months for children entering foster care (Higher is preferable)
45.3%	43.8%	Permanency in 12 months for children in care 12 to 23 months (Higher is preferable)
39.9%	37.3%	Permanency in 12 months for children in care 24 months or more (Higher is preferable)
4.5%	5.6%	Reentry to foster care (Lower is preferable)
4.81%	4.48%	Placement stability (Lower is preferable)
Rates represent Risk Standardized Performance for the most recent time period available. Source: Mississippi CFSR 3 Data Profile, February 2023, prepared by federal Children's Bureau		

In addition to administrative data, cited above, Mississippi conducts case reviews on a sample of cases in every region using the federal CFSR case review instrument (OSRI). These results identify Permanency Outcome 1, as an area needing improvement.

Objective 1: Increase the number of children who exit to appropriate permanency, based on their individualized needs.

Support for Relatives/Kin as Placement and Permanency Resources

Rationale: Of all the children in foster care on September 30, 2019, approximately 31% were placed in a relative foster home (comparable to the national 32%). This represents a steady decline since 2015, 38% of the foster care population was placed in relative foster homes. When children are successfully placed with relatives, the potential for a permanent exit to the relative is likely.

[4] Mississippi Supplemental Context Data, February 2022, provided by the Federal Children's Bureau.

Initiative(s): MDCPS is prioritizing strategies to encourage relatives to engage in the foster care system.

Supporting Relatives as a Placement Resource: MDCPS is prioritizing efforts to support formal relative foster care using the following strategies:

- Enhance collaboration with the Kinship Navigator program.
- Revamp the waiver process for licensing relative foster homes. Updating the waiver process will reduce barriers that may exclude relatives from qualifying as foster parents, while making sure the foster home is a safe and stable placement for the child(ren).
- Utilize technology to locate and engage relatives as placement and/or permanency resources very early in children's foster care episode.

Supporting Relatives as a Permanency Resource: Develop a Guardian Assistance Program:

Rationale: As previously stated, Mississippi is below the national rate in one permanency metric. Children in Mississippi, who have been in foster care 1-2 years are slower to achieve permanency, than children in foster care nationally. It is generally understood that these children may have any permanency goal (reunification, exit to relative, adoption). Although additional research into disaggregated data is necessary, one theory is that this population of children may be placed with relatives and have not yet achieved permanency. A barrier to relatives committing to permanent custody may be the loss of financial assistance when they transition from foster parents to permanent custodians.

Initiative: MDCPS understands the priority of providing financial assistance to kin who accept permanent custodial responsibility for their relative's child(ren) after foster care. By developing a guardian assistance program (GAP) in Mississippi, it is estimated that approximately 200 children could be placed in a subsidized permanent custodial relationship with a relative. This will increase the number of children who exit to permanency while maintaining connections to family, without placing the stress of a financial burden on the custodial relative. MDCPS will draft policies and procedures, develop plans to educate judges and take other steps to implement a GAP. Mississippi is looking to model their program after a successful program in TN.

Monitoring Process and Impact:

Develop baselines and targets for the following metrics

- Number of relative foster homes licensed in a timely manner
- Number of children placed in relative foster homes
- Process indicators track guardianship assistance program development

Support for Timely Adoptions: Addressing TPR Backlog

Rationale: Administrative data shows that there are a significant number of children with a permanency planning goal of adoption who are not progressing through the process in a timely manner. MDCPS is continuing to work to reduce the barriers to TPR, on a global and case-specific level.

Initiative: MDCPS works at both the county and state level to collect the necessary paperwork and submit a comprehensive case history to the AGO for the filing of the TPR petition. This internal review identified several barriers and delays, some of which may be resolved internally, and some of which require cooperation with the judiciary to resolve.

In 2022, the Office of Legal Counsel began working with the Permanency Unit to assess cases where a child's permanency plan has changed to adoption but where the TPR packet has not yet been received at State Office for review and submission to the Office of the Attorney General. OLC and the Permanency Unit worked closely with the judiciary and attorneys across the state during MDCPS's successful Home for the Holidays campaign to streamline and expedite the path to permanency for children having a plan of adoption. The Home for the Holidays campaign went from October 15, 2022 through January 31, 2023, during which time 224 adoptions were finalized. Particularly, in the month of December 2022, this campaign resulted in a record number of adoptions, with MDCPS doubling the agency's average monthly number of adoptions.

Additionally, given the number of outstanding trials and cases waiting for petitions to be filed, MDCPS believed that there was a need for additional attorneys to try the existing cases and additional docket time (i.e., specially appointed judges). While MDCPS cannot appoint or pay salaries for special judges, MDCPS hired additional attorneys to try TPR cases.

Monitoring Process and Impact:

- MDCPS will continue to monitor the number of children awaiting a TPR hearing and a TPR filing.

MDCPS will measure progress by tracking and evaluating the number of days between the time a case plan changes to adoption through the date the TPR packet is submitted to the AGO for filing a TPR petition.

Wendy's Wonderful Kids: to recruit permanency resources (esp. long stayers)

Rationale: On October 1, 2020, 1,200 children in foster care had been in care for 2 years or more. Of those, 46% (558 children) exited to permanency by September 30, 2021 (CFSR metric). Although Mississippi's performance is better than the national rate on this metric, it is important to continue striving to increase permanency for all children, and particularly children in foster care for two or more years. MDCPS has determined that one key barrier is the lack of appropriate permanency resources for can be challenging.

Initiative: MDCPS collaborates with Wendy's Wonderful Kids (WWK), a program of the Dave Thomas Foundation for Adoption, to find permanent families for children in foster care. WWK provides local recruiters who utilize an evidence-based, child-focused model to find the right family for every child.

Monitoring Process and Impact:

- WWK and MDCPS monitor the number of permanent exits that occur because of the program's recruitment efforts.

- **Support for Timely Reunification**

  Rationale: Reunification occurs when the family is prepared to safely welcome their children back home; if the family is not prepared, children may re-enter foster care, further contributing to the child's traumatic experiences. Mississippi prioritizes the need to support families throughout the life of the case, and this is evidenced by a re-entry rate that is significantly better than the national rate (4.5% re-entry rate vs. national re-entry rate of 5. 6%).

  Initiatives: Each of MDCPS's goals and objectives reflect strategies to support families in creating and maintaining safe, supportive environments so that children may safely remain or return home.

  Monitoring Process and Impact: Refer to each goal's monitoring process and impact

Implementation and Program Supports:

MDCPS acknowledges that various supports are needed to support the successful implementation of the goals and objectives. Those supports are mentioned in the Assessment of Current Performance in Improving Outcomes section of the APSR. A few essential supports are below:

Fiscal Support: MDCPS will continue to rely on funding streams to support the organizational restructuring which includes hiring more staff to maintain the progress achieved and to continue to make progress. To further support the goals, MDCPS will procure services to assess practices and provide consultation as needed.

Technology Support: MDCPS will continue to focus on improving data quality, management, and literacy throughout the implementation of this CFSP/APSR, and as such, the CORE Reports will likely be revised.

Training and Coaching: MDCPS will continue to offer frequent practice opportunities to staff after focused training sessions to ensure the training and coaching is continuous. This will also allow the Professional Development unit to identify areas of strengths and barriers to effective training. The addition of the Deputy Commissioner of Clinical Supports to the Executive Leadership team has already proven to be beneficial in providing improved targeted training.

Renegotiated Items from the CFSR PIP:

MDCPS submitted a renegotiation letter to CB on November 29, 2021. Based on the feedback received from CB, an updated renegotiation letter request was submitted on December 30, 2021. In CB's response to MDCPS's renegotiation letter request, changes to the following activities were approved:

Goal 4: Improve Service Array and Delivery
Strategy: Diversifying Intensive In-home Services
Activity 3: Develop a protocol or assessment for determining the appropriate referral among the pool of in-home services programs.

MDCPS is committed to applying a family-centered, culturally competent, strengths-based approach for prevention service planning. We recognize that family voice in service planning is critical for authentic family engagement and equitable and unbiased decision-making and, when done well, will result in matching prevention services to the families to best meet their needs. Families, in-home providers, and supervisors will collaborate to co-develop the child specific prevention plan, using findings from the assessment to frame and inform decision-making. In doing so, the family's prevention needs will be matched with the most appropriate prevention EBPs available.

The process for developing a child-specific prevention plan begins with the assessment of safety and risk completed during the investigation of the report. During that time, the MDCPS child safety specialist, in consultation with a supervisor, makes a determination regarding child safety. Caregiver protective capacities are also assessed to identify the family's specific needs and determine appropriate services to address them. This information is gathered and synthesized by the specialist, then staffed with a supervisor. If the case is opened for in-home services and imminent risk criteria are identified, or at the time that a youth in foster care is identified as being pregnant or parenting, the assigned specialist and supervisor will make a referral to the Prevention Unit. That unit will review the information provided with the referral and, if appropriate, refer the case to an appropriate EBP provider who will develop a child-specific prevention plan. The child-specific prevention plan will include documentation of the identified need for services and the selected prevention services provided to the child and/or parent/caregivers to keep a child safely with the child's parent(s). The family's case goals, and other Title IV-B services provided to the family are also included in the child specific prevention plan, which will be incorporated and implemented as part of the child's case plan.

To facilitate the referral process, the Prevention Coordinators and Directors will be trained on all EBPs offered and will provide consultation to specialists and supervisors to ensure the

appropriateness of referrals. They will also manage relationships and ensure regular communication with contracted providers. Ongoing case management for families receiving prevention services will be provided by contracted provider partners in conjunction with MDCPS. Monthly reports from the providers and regular contacts with the family allow routine informal assessment of progress and the opportunity to obtain feedback on the efficacy of the services. The prevention plan will be reviewed formally at 6- and 12-month intervals. As part of this process, the specialist will meet with the family and service provider to discuss progress toward service plan outcomes and the need for any adjustments to the plan. If the 12-month review indicates the need for continued EBP services, candidacy will be redetermined and another prevention service plan developed.

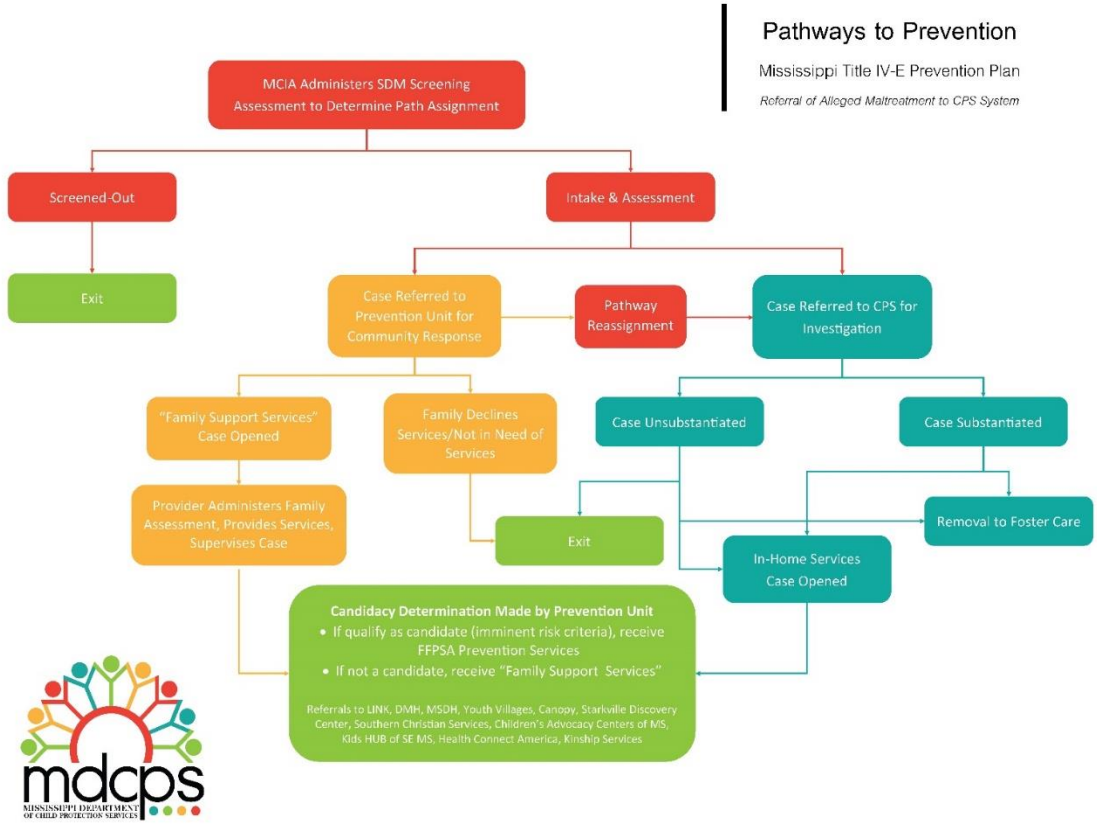
Mississippi is developing a plan to fully automate the child-specific prevention plan, including tracking start- and end-dates as well as which EBP was administered. This will enable easier data tracking and more efficient case management in the future. Current MACWIS technology expansion is on hold due to the enhancement to CCWIS/Pathways, which is being planned with these capabilities in mind.

In addition, MDCPS investigators, in consultation with their supervisors, will determine the level of risk and, in so doing, begin the process of determining eligibility for Title IV-E prevention services for those who exhibit imminent risk. This approach is consistent with current casework practice for in-home service cases and, with the addition of the Community Response pathway, will result in the case flow depicted in the diagram below.

Activity 4: Train internal and external stakeholders on the new in-home services array

MDCPS will determine training effectiveness through ongoing organizational health assessments, surveys, focus groups, evaluations, and any available outcome data.

MDCPS's Practice Model Learning Cycle (PMLC) reinforces the foundation of practice. Developed in 2010, the PMLC updated in FY 2016 to reflect MDCPS's commitment to a trauma



focus. The six components of the practice model are Involving Children and Families in Case Planning, Assuring Safety and Managing Risk, Strengths and Needs Assessment, Individualized Case Planning, Mobilizing Services Timely, and Preserving and Maintaining Connections. The PMLC includes content on trauma-focused child welfare practice within the context of the six practice model components. Practice changes resulting from the PMLC are anticipated to include greater consistency across the state in terms of applying the practice model components as exhibited through enacting the key behaviors defined and reinforced throughout the PMLC.

In its contracts with EBP providers, MDCPS will include terms to ensure that all staff administering Title IV-E prevention services have satisfied training requirements and fulfill other qualifications required by the model program, including that programs and services are offered in accordance with a trauma-informed framework. Through its contract monitoring efforts, the agency can be better assured that the providers can deliver effective service interventions to improve outcomes for children and families.

Activity 5: Develop a manual of in-home service interventions.
The Prevention Unit will develop an in-home service manual for all programs once services are completed.

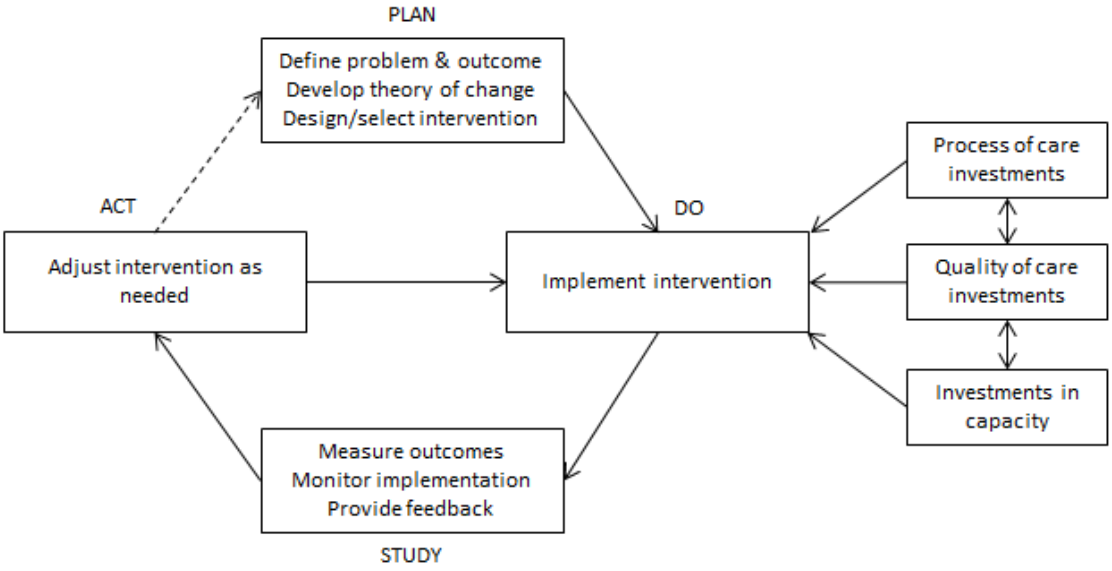
Quality Assurance System

MDCPS recognizes the critical role that an inclusive CQI process plays in improving child welfare outcomes. A priority this year has been to assess the agency's CQI process, and infrastructure, including meaningful internal and external stakeholder engagement and data development. In spring 2022, the Joint Planning Meeting was re-branded and called the Mississippi Conference on Children and Families, with a focus on "What Matters Most: Children, Families, and Agency Personnel." The MCCF meeting provided an opportunity for a diverse group of stakeholders to discuss pressing and emerging issues in our child welfare system. i.e., contracting with RedMane Technology, LLC, described below). The CQI Steering Committee was developed in Spring of 2023 in conjunction with Capacity Building Center for States that explores various elements of the statewide system with the goal of developing a robust CQI Plan in conjunction with the Data Quality Plan. A Data Lead position has been added to the CQI Steering Committee that will serve as a liaison between Data Governance Council and the State's CQI system. Also, CQI actively participates in the Data Governance Council to support the shared decision making between Information technology, CQI and data quality strategies. The Agency is still currently assessing CQI Processes and how the PDSA model can be adapted to Mississippi's child welfare system. MDCPS will continue its work with the Capacity Building Center for States by holding monthly meetings with the Steering Committee and developing tasks for each committee to complete during each monthly meeting. The agency is currently compiling CQI Self-Assessment to gauge current functioning of the CQI System. Each Steering Committee was tasked with creating a small work group based on different units across the State to include internal Stakeholders perspective of our existing CQI system. The agency will continue to work with the Center for States by April 30, 2024.

The graphic below is a PDSA model copyrighted by Chapin Hall at the University of Chicago; it illustrates the critical need to pay attention to each step of implementation. It is expected that the graphic will be personalized based on input from the internal MDCPS CQI team.

The Basic CQI Cycle

CQI is a method for problem solving that has been applied across fields for nearly a century. As a result, there are a number of different models that describe the CQI process. All of them, however, boil down to the same four fundamental phases: Plan, Do, Study, Act. In a child welfare context, these stages unfold as follows:



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Although MDCPS is still in the process of implementing a formal CQI process, the Agency is able cite several examples where the critical PDSA principles are part of regular practice – particularly, the development of logic models and theories of change have been used to plan practice improvement strategies.

Infusing Stakeholder Engagement throughout CQI

MDCPS is prioritizing how performance is analyzed and addressed in a manner that promotes meaningful stakeholder engagement and feedback. To achieve this, the Agency will develop two Forums:

1. Stakeholder MCCF Meeting: This external stakeholder team will meet quarterly to discuss and strategize high level agency priorities, including agency-wide performance data which will be shared and discussed. These meetings will tentatively begin in October 2023.
2. An internal CQI team comprised of key program areas within MDCPS: This CQI Team will be charged with facilitating a shared, agency wide PDSA process, which will begin with reviewing a variety of quantitative and qualitative performance evidence, including administrative data, case review results, input from stakeholders and persons with lived experience. The internal CQI team will collectively explore factors that contribute to current performance and develop theories of change. The CQI Unit developed a SAP Documentation Framework to implement statewide. The development of the framework is to ensure that

documentation is captured consistently throughout the State. The framework focuses on Safety, Permanency and Well-being within the family unit.

The CQI Steering Committee will be comprised of safety, permanency, and well-being, deputy-level staff as well as some front line/supervisory staff who will bring various levels of experience to support an application of the data to "on-the-ground" practice. The CQI Steering committee is committed to the duty of a thorough statewide assessment of the Agency capacity and abilities and leads CQI Sub-Teams in the assessment of the state. From input from multiple CQI Sub-Teams, the CQI Plan will be developed that encompasses internal and external stakeholders. For example, front line and supervisory staff may be called upon to provide input into underlying factors that impact performance and/or to brainstorm potential solutions from an on-the-ground perspective.

The CQI Steering Committee has envisioned CQI sub-committees. These CQI Sub-Committees will bring in a variety of clinical and supportive staff as well as external stakeholders to provide input through various avenues (i.e.: surveys, topical focus groups, "listening" meetings, etc.).

As part of the new CQI Plan, Deputy-level staff who frequently participate in external stakeholder meetings, are positioned to bring to the group, pertinent information received from external stakeholders, and in turn, bring planning information back to those stakeholder groups. Both teams will work collaboratively with the new MDCPS Communications to support effective internal and external communication.

In addition to the adoption of a PDSA CQI model, MDCPS continues to enhance the components of a quality CQI/QA process, as defined by the federal guidance document, ACYF-CB-IM-12-07.

Quality Data Collection

MDCPS has contracted with RedMane Technology, LLC to assist with moving the child welfare system of record (MACWIS) towards CCWIS compatibility. The expectation is that the system will be user friendly for the caseworkers to enter quality case information and will output accurate, complete, and timely administrative data reports to be used for day-to-day case management as well as in the agency's CQI process to analyze process and outcome performance.

MDCPS has prioritized the need for accurate, timely data. The Data Quality Plan (DQP) will be a foundational planning artifact for MDCPS data quality initiative. The Agency continues to work closely with RedMane Technology, LLC to diligently improve CCWIS data quality going forward by focusing initially on the development of the following areas:

- A framework for master data management to establish and purvey master reference files (single source of truth, no duplicated persons, etc.) for MDCPS subjects.
- Real-time data quality and timeliness measures and developing timely processes also to reconcile inconsistencies.

- Daily processes to identify data errors that eluded data capture edits or were sourced from external data, etc.

MDCPS established the Data Governance Council (DGC around June 2022. The council, primarily made up of members of the Data Management Team, worked on Data Governance activities such as identifying data quality issues, research around effective data governance, identifying terms to be defined in a data dictionary, and research of Master Data Management tools. In an effort to strengthen the DGC, it was restructured in March 2023, to include cross functional representation from the various departments within MDCPS. The DGC is responsible for governing, improving, and developing data quality policy and standards. The responsibilities of the DGC also include, but is not limited, to focusing on data quality priorities identified in the Data Quality Plan Biennial Review; creating, reviewing, and improving rules for data standards, quality, and security; and interacting with other agencies about data exchanges and sharing of data that will benefit staff with data about clients that exists elsewhere.

Additionally, MDCPS has begun developing strategies to build an Agency-wide understanding of the seven federal CFSR indicators. MDCPS's performance on the national indicators, as referenced in Section III, Update on Current Performance, is at or above the national risk standardized performance in three of the national indicators:

- Permanency in 12 months for children entering foster care.
- Permanency in 12 months for children in care 24 months or more
- Reentry to foster care.

Outcomes below national risk standardized performance are:

- Permanency in 12 months for children in care 12-23 months
- Recurrence of maltreatment
- Maltreatment in care
- Placement stability

To improve understanding of these indicators throughout the state, a series of CFSR Data Indictor Workshops will be recommended to key internal and external stakeholders.

When a network of community members and organizations share an understanding of the desired outcomes and how they are measured, they can collectively have a greater impact on improvement. Therefore, the CFSR Data Indicator workshops will be offered to not only MDCPS staff, but also to external stakeholders. These workshops will be provided via a collaboration between MDCPS (various Units) and the Capacity Building Center for States. Data workshops are most effective when they are personalized for the attendees, therefore, multiple workshops will be offered, beginning with administrative staff at MDCPS and members of the CQI Team. Capacity will be

built within MDCPS to enable the Agency to deliver tailored workshops to other audiences, such as the judicial community, service providers, etc.

Case Record Review Data and Process

MDCPS has a robust case record review process that is described in Section III, Item 25: Quality Assurance, which, according to ACYF-CB-IM-12-07, is "…critical [that] State CQI systems… "Have an ongoing case review component that includes reading case files of children…" p. 5.

Analysis and Dissemination of Quality Data

MDCPS is in the process of increasing its capacity to track, organize, process, and regularly analyze information from various sources of data, including administrative data, case review findings, and feedback from stakeholders.

Additionally, MDCPS is working closely with the Capacity Building Center for States to develop processes specifically, processes related to 1) acquiring, analyzing, and applying data and other evidence to day-to-day practice and 2) dissemination and feedback from stakeholders such as courts, service providers, tribes, and partners with lived experience.

Feedback to Stakeholders and Decision-makers and Adjustment of Programs and Process

MDCPS provides a consistent feedback loop with Stakeholders through various MDCPS led events and committees that allow Stakeholders the opportunity to provide the agency with feedback to improve outcomes for Mississippi children and families. Although several forums and groups described in Section II serve as opportunities to provide feedback to stakeholders. The formation of the CQI Steering Committee utilizes stakeholder groups, such as the Youth Advisory Council., the Foster Parent Feedback Group, and the Mississippi Conference on Children and Families as valuable contributors to CQI diagnostics, planning, and strategy implementation.

Feedback to stakeholders is a key CQI component. According to ACYF-CF-IM-12-07, it is "...a critical component to driving change within the organization and is key to improving outcomes for children and families. (ACYF-CB-IM-12-07, p. 7).

VI. Update on the Service Descriptions

Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B, Subpart 1) In the 2020-2024 CFSP, the State identified that 100% of these funds would be for board payments of children that are not IV-E eligible. APSR funds for 2022 continued to be used for board payments for children that were determined not to be IV-E eligible. MDCPS has not seen a decrease in the need to use this category for board payments. The penetration rate is tied to the agency's approved cost allocation plan. MDCPS is developing a new plan for submission.

From the end of the last state fiscal year to now, MDCPS has seen almost a three percent increase in the penetration rate. This has impacted the drawing down of federal funds by increasing the federal portion by a similar amount. By having more federal funds utilized, MDCPS can maximize federal funding and potentially free up general funds that can be used to enhance and further other areas within the agency.

Services for Children Adopted from Other Countries (section 422(b)(11) of the Act))

MDCPS has expanded the Post Adoption Support Services Subgrant to include two providers instead of one. MDCPS has partnered with Southern Christian Services for Children & Youth and Catholic Charities. These post-adoption services consist of counseling, mental health treatment, family preservation and stabilization, crisis intervention and management, peer support, and respite care. Information regarding the post adoption services available to families who have adopted and children who have been adopted from other countries was added to the MDCPS agency website under the *For Foster & Adoptive Parents* section.

MDCPS continues to partner with Southern Christian Services for Children & Youth's (SCSCY) Adoption Permanency Division (APD) to provide post adoptive services to this population. Currently, SCSCY-APD provides the following post adoption services to adoptive families:

- Case Management – assessment to determine needs & support in meeting those needs.
- Crisis Stabilization – support in handling any crisis (24 hours a day, 7 days a week)
- Information & Referral – to provide information and referrals to adoption competent services as well as follow-up services.
- Advocacy – to advocate for the adoptive family and their adopted child.
- Respite Services – planned, short term break offered once a month to families as requested and approved.
- Short-term Groups – for training and information for those individuals waiting to adopt.
- Therapy- to support children and families in long-term healing for those who have been adopted or are in the adoption process. (Jackson location or throughout MS by Telehealth)
- International adoption - providing additional services to include families who have adopted through international adoption.

To raise awareness, SCSCY-APD engaged in the following activities:

- Mailing or emailing marketing materials to adoption specific businesses/organizations, such as law firms and organizations that specialize in adoption. APD is also educating family physicians and school counselors regarding its services.
- Focusing its time and energy on high population counites and cites in the state. This listing is updated periodically using US Census data.

- Targeting marketing services in areas of the state where respite providers are needed, for example, in the Delta area of Mississippi.
- Presentations to Adoption & Foster Parent Support Groups.
- Participating in Multidisciplinary Assessment and Planning (MAP) Team meetings

Ongoing activities include increasing awareness of post adoption services that are available to families who have adopted children from other countries, and SCSCY APD will continue to the activities raising awareness and providing post adoption services.

Funds are distributed through a sub grant that is renewed annually. The funds for the current sub grant are allocated for the period of October 1, 2022, to September 30, 2023

The Office of Permanency hopes to increase awareness of pre and post adoption services by creating a brochure that will give adoptive families a brief, but informative overview. Once the brochures are created and produced, we hope to also work with the MDCPS Communications Team to explore other ways to raise awareness, for example, use of social media platforms. An anticipated date of completion has not yet been determined, but the Office of Permanency has made plans to begin compiling the information for the brochure by June 30, 2023.

During this reporting period, there were no children or families adopted from other countries that utilized adoption services.

Services for Children Under the Age of Five (section 422(b)(18) of the Act)

MDCPS is currently partnering with an agency who is facilitating meetings and other efforts that will assist the agency in developing and/or strengthening partnerships with agencies who provide services specifically for children under the age of five.

The MDCPS continues to use the following services and activities directly or through contractual agreements for children to address their overall safety, permanency, well-being, and prevention needs. In addition, the agency will work over the next 12 months to ensure there is a plan in place specifically related to services for children birth to five years old.

MDCPS will assess this population over the next year to determine what additional steps can be taken or services implemented to address timely permanency for youth aged 0 to 5.

- *Permanency and Concurrent Planning*- Caseworkers engage in permanency and concurrent planning regardless of the age of the child to facilitate permanency for children in foster care. MDCPS's Family Centered Practice uses an approach to permanency and concurrent planning that involves the immediate and ongoing implementation of strategies designed to assure the healthy development of children through a sense of continuity and connectedness.

- *Parent-Child Visitation*- Caseworker visits to families are essential to engaging families and assessing safety and well-being. It is the policy of MDCPS that all families, with whom the agency is engaged, be seen at a minimum twice a month. A successful, purposeful visit ensures a worker develops a connection with a parent/guardian/child, identifies the parent/guardian/child's needs and engages each family member in case planning decisions. During contacts with parent(s)/guardian, the worker should assess and document progress on case plans, address the safety and well-being of all children involved and problem-solve situations that are identified.
- *Safety and Risk Assessment and Child and Family Assessments*-The Safety and Risk Assessment is completed during all open investigations. This tool is used to help assess the safety and risk of children and to determine if ongoing services are needed with the family. If it is determined that ongoing services are needed, an In-Home Supportive Services case is to be opened or appropriate referrals are made for the identified services. When an ongoing service case is opened, the Child and Family Assessments (CFA) are completed. This tool helps to identify areas to be addressed within the family to mitigate harm and/or risk factors and is listed as tasks/goals in the Family Service Plan (FSP). Together the CFA's and FSP's are jointly developed with the family, within 45 days of case opening, and updated every 90 days thereafter if the case remains open.
- *Health and Developmental Screenings*- Children entering foster care receive an Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) or other comprehensive medical exam within 30 days of entering foster care. The (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services. EPSDT is:
    - **Early**: Assessing and identifying problems early
    - **Periodic:** Checking children's health at periodic, age-appropriate intervals
    - **Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
    - **Diagnostic**: Performing diagnostic tests to follow up when a risk is identified, and
    - **Treatment:** Control, correct or reduce health problems found

- ***Family, Preservation, Family Support and Family Reunification***- MDCPS's Prevention Unit continues to offer services through the in-CIRCLE program. The in-CIRCLE program is an intensive, home and community-based family preservation, reunification, and support services program for families with children who are at risk of out-of-home placement. The program works by implementing: Crisis intervention, Child and Family Team meetings, individual and family therapy, case management and service coordination, Trauma-Focused Cognitive Behavioral Therapy, Active Parent and Life Skills Training, Behavior Management Planning, and Wraparound Services. It was designed and implemented to help break the cycle of family dysfunction by strengthening

families, keeping children safe, and reducing foster care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child from home by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families. The target population for this program: (1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option, and (2) Families with pregnant mothers who were at high risk of the child being removed due to substance use issues once the child was born. Family Preservation is designed to keep families together, particularly in situations where children and adolescents are at risk of being removed from their homes. Family Reunification focuses on families where youth have been removed from their home and placed in MDCPS's custody.

Pregnant mothers are being served through the Program; as of October 1, 2018, the referral process has been revised to include those mothers who do not have other children in the home and methods to engage these families as well. Referrals to the program may come from the court system or MDCPS staff who identified the family and child(ren) as appropriate for and in need of program services. MDCPS currently have two staff serving as in-CIRCLE Program Coordinators, one for the northern part of the state and one for the southern part of the state.

In-CIRCLE programs manage and monitor community-based services, Intensive in-home service, and Family Support Services. The in-CIRCLE Program provides intensive in-home services to families whose children are at risk of removal and expedites the return of children who have been removed. They also offer support services to families as all services are part of the Primary, Secondary and Tertiary Prevention services. The Dorcas Program offers support services to families as part of the Primary Prevention services, and the Intercept Program provides services to reduce out of home placements and accelerate permanency. The in-CIRCLE Family Support Services Program continues providing home visits, therapy, parenting skills, alcohol and drug assessment, concrete needs, and referrals. All programs have continued to provide support services to families who have been identified by MDCPS as having the need. Services are provided in the home, face-to-face visits, referral to community-based programs as needed and other support based on the family's need. The program also added another home service program which is Intercept. Intercept began in October 2022, and it is an Evidence Based Program which is statewide and offers services to families who have been identified as those with abuse/neglect and/or

behavioral issues which would cause removal. The program is intensive and can last up to six months based on the need. Services are available to the family 24 hours.

The Dorcas program expanded statewide except for counties in Service Area 7, which did increase the number of families being served through our programs. There are plans to expand services into the 7th service area of the state within the next year.
The number of children, families, or individuals served by each program are:

- **Dorcas**- There have been 12 referrals, with 28 children and 17 adults served through the program.
- **Intercept**- there have been 51 referrals, with 108 children and 17 adults served through the program.
- **In-CIRCLE - Youth Villages** - There have been 50 referrals, with 113 children and 66 adults served through the program. 13 referrals were for Family Reunification (FR) with 36 children and 17 adults served, 37 referrals with 77 children and 49 adults were served by Family Preservation services (FP).
- **In-CIRCLE -Canopy**- There have been 134 referrals, with 302 children and 192 adults served through the program. 49 referrals were for Family Reunification (FR) with 103 children and 72 adults. 85 referrals with 199 children and 120 adults were served by Family Preservation services.

Staffing training continues to be provided by the Contractual Agencies. Currently, the Providers engage in the assessment with the families through the North Carolina Family Assessment Scale (NCFAS). Monthly reporting is received from the Providers regarding feedback and success stories. The Providers (Dorcas, Youth Village and Canopy) have continued to conduct training to its staff for work with the programs, as well as participated in continued training for staff of that agency. Dorcas is a program within the agency of Baptist Children's Village, and they collaborate and/or partner with MDCPS, as well as other agencies within the State. In-CIRCLE has continued Contractual Agencies regularly connect with our stakeholder and court regarding the program efficacy and the need for collaboration.

The Intercept program began, and we initially received several referrals for this program. Since the onboarding of Intercept, there have been enough referrals which has not caused any barriers to implementing services for all programs. Most of the referrals received were primarily for our Therapeutic youth who are often in need of the services that the programs offer.

To ensure equability across the state for all families served through our various programs, our In-Home Services programs have addressed inequalities in transportation by partnering with Medicaid to cover transportation for those with transportation inadequacies. The

program also offers translators for those whose English is a second language, or those who do not speak English. The in-CIRCLE program is also working with the Canopy LINKS program to provide services to clients in rural areas throughout the state. All demographics on the families are compiled with may include, race, ethnicity, etc. The programs have an extension data collection system of demographics which includes race, gender, ethnicity, and other factors to help ensure their program's equality.

- ***Maternal, Infant, and Early Childhood Home Visiting*** – MDCPS continues collaboration with MDHS, Division of Early Childhood Care and Development (DECCD)and the Maternal Infant and Early Childhood Home Visiting (MIECHV) Grant. This Grant funds the Healthy Families Mississippi program. This is a voluntary comprehensive home visiting support program that provides family support workers to assists families by linking them to the following community services and resources: child development, nutrition, financial and safety education, and referrals for family support services. Healthy Families Mississippi serves pregnant mothers or families with children from birth to three (3) years of age, who are low-income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration. Also, Healthy Families Mississippi has implemented the Healthy Families America home visiting model and the Partners for a Healthy Baby parenting curriculum. Healthy Families also serve mothers that are referred by the Comprehensive Addiction and Recovery Act (CARA) program. All services are provided free of charge. The program serves families in Claiborne, Coahoma, Copiah, Holmes, Humphreys, Issaquena, Jefferson, Neshoba, Sunflower, Sharkey, Tallahatchie, Tunica, Washington, and Wilkinson counties. MDCPS continues to serve as a representative on the Mississippi Home Visiting Partnership Advisory Group. Due to the limited counties that are served by Healthy Families, enrollment to Healthy Families continues to be very limited. At this time, there has been a total of 13 families referred and services have been rendered to families. Currently, there are no plans to expand the program through Healthy Families. However, MDCPS will consult with appropriate staff on a collaborative effort to expand in the future. Healthy Families is operated by the Department of Human Services. Expansion was mentioned in the past by the previous program director but there have been changes.

- ***Project Care and Families Strengthening Families***-Starkville Oktibbeha School District Family Centered Programs has two (2) contractual agreements with MDCPS. These agreements consist of Project Care which is funded by the state's CBCAP Grant and Families Strengthening Families which is funded by the Children's Trust Fund. Project Care provides child abuse and neglect prevention services to increase protective factors that include parental resilience, knowledge of parenting, social connections, concrete supports, and social and emotional competence in children for Oktibbeha County families. These services are administered through a two-tiered program focusing on parental

educational and support services. Universal services include alerting the public about child abuse and neglect prevention to include identifying and reporting child abuse and neglect. Family services are designed to strengthen the family unit and incorporate the following five evidence-based protective factors: parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence of children. Support groups are offered to allow parents to receive and provide support and information from other parents who have similar issues and problems in which they can come together for sharing coping strategies. Using the relaxed, informal Parent Café model, these support groups offer adults an accepting environment as they learn from each other. Home visitation provides one-on-one personal support to help parents deal with the stress associated with caring for infants, information on normal development of infants, and techniques for bonding with your child. Respite services are available to provide parents of young children childcare support while attending adult education classes, job interviews, doctor visits, etc. These services are provided for families 4 times a week, 8:00 a.m. – 12:00p.m. Adult Education Classes aids adults seeking a high school equivalency, high school diploma (on-line), and/or Work Keys certification. Classes are offered at Emerson Family School Monday – Thursday 8:00 a.m. – 5:00 p.m. and until 8:00 p.m. Tuesdays. Additionally, other referral services are available to link families to community agencies to help them secure support for basic needs (e.g., housing, food, clothing, medical needs, etc.).

Parent Café's continued various classes for parents and caregivers, including the following Anger Management classes:

- Hidden Issues: 1 (new)
- Choices & Consequences: 2 (1new)
- Unhelpful Thinking: 5
- Cognitive Restructuring: 3
- Pearls of Wisdom: 5
- Forgiveness and Letting Go: 7
- Hidden Issues: 2
- Personal Success Part I: 6
- Personal Success Part II: 5
- The Role of Expectations

ACT Raising Kids was also taught to parents and caregivers:

- Impact of social media: 3
- Understanding Children's Behaviors: 1 (new)
- When Parents Are Angry: 3
- Positive Discipline: 1
- Correcting Misbehavior: 1

- Positive Parenting and Emotionally Healthy Homes: 3
- Vaping: Techniques that Parents Need to Know: 2
- Young Children's Exposure to Violence: 3
- Stages of Change: 1

All community-based and outreach services will continue throughout the contract. Social media engagement and awareness, Facebook Parenting Question of the Week, Parent Talk at the Discovery Center Podcast on YouTube, and other community Meetings and Awareness events.

- ***Emerson Family Resource Center activities*** -The Starkville Oktibbeha Consolidated School District sub-grantee through the Community Based Child Abuse Prevention Grant (CBCAP) provides services through their Emerson Family Resource Center activities. The program used the Active Parenting curriculum to provide parent education on a weekly basis for parents, grandparents, caregivers, and future parents. Temporary Respite services are provided Monday through Thursday for children (5) years old for eight (8) weeks to allow parents time for doctor's appointments, grocery shopping, adult education, job interviews, training, etc. Staff administers a home visiting program for families with pregnant mothers or families with newborn children. The program provides support services and parenting education through the Nurturing Parenting curriculum. In addition, education on child development, breastfeeding and infant safe sleep education is provided. Support Services such case management and support groups are also provided to families and parents in need of support. The Family Resource Center affords parents the opportunity to check out resource materials such as parenting, marriage and relationships and financial management, as well as laminate instructional materials and use dye cuts for home-based activities with their children. Family interactive activities provide fun learning activities for the whole family. The center is open year-round, Monday – Friday, 8:00 a.m. – 5:00 p.m.

- ***IDEA (Individuals with Disabilities Act)*** - Individuals with Disabilities Education Act (IDEA), seeks to ensure services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children, and youth with disabilities. Infants and toddlers with disabilities (birth-2 y/o) and their families receive early intervention services under IDEA Part C. Children and youth (ages 3-21) receive special education and related services under IDEA Part B. The purpose of IDEA is to ensure that all children with disabilities have available to them a free appropriate public education (FAPE) that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living; to ensure that the rights of children with disabilities and their parents are protected; to assist localities and

educational service agencies in providing for the education of all children with disabilities; and to assess and ensure the effectiveness of efforts to educate children with disabilities.

For children in MDCPS custody receiving Early Intervention (Part C) services, the MDCPS caseworker will monitor the provision and continuation of Early Intervention services and assist First Steps agency team members and the child's family with timely referral to the local school district to begin the evaluation process for Special Education and Related Services. IDEA provides for a FAPE (Free Appropriate Public Education) for every eligible student. Mississippi Local Education Agencies are responsible for ensuring all eligible students receive FAPE and are responsible for identifying and evaluating children and youth with a disability or suspected of having a disability.

Local Education Agencies are responsible for providing Special Education and Related Services (Part B). Special Education and Related Services are implemented through an Individualized Education Program (IEP), which is developed by an IEP committee. An IEP committee is comprised of the child/youth's parent (Parent-as defined by IDEA), a school representative qualified to provide or supervise special education and knows general education curriculum and resources available in the district, at least one special education teacher, at least one general education teacher (if applicable), qualified professional(s) to interpret evaluations and the instructional implications, and other appropriate individuals.

MDCPS Division of Youth Transition Support Services provide educational, and education related support services to compulsory school age (6 years of age -17 years of age) children/youth in MDCPS custody by advocating for educational best interest on behalf of child/youth, helping identify children/youth in need of Special Education & Related Services, identifying educational needs through retrieving and reviewing education records, attending IEP meetings, collaborating with Local Education Agencies to ensure educational stability and improved educational outcomes for each child/youth in MDCPS custody.

- ***Comprehensive Addiction Recovery Act (CARA) referral services*** – As defined in the program instruction, MDCPS is in compliance with the federal requirements for CARA. The agency receives and accepts referrals from medical staff regarding infants born and testing positive for substance use by their mothers. The calls are received by MCI (Mississippi Centralized Intake) and in addition to an ANE screenings, a CARA screening is completed to determine if the criteria are met for a CARA referral versus an ANE referral. The Office of Therapeutic and Prevention Services staff will receive a MACWIS tickler notification when a referral is determined to be a CARA intake and then reviews, and screens are referred to an appropriate collaborating partner for services. MDCPS therapeutic and prevention services staff works, through Memorandum of Understandings

(MOUs) with the Department of Mental Health's Bureau of Alcohol and Drug Services, MS State Department of Health (MSDH), and Healthy Families of MS to refer children and their caregivers for appropriate CARA related services to include a single or combination of addiction services (in and outpatient), home visiting services, and healthy parenting learning opportunities. CARA has received and processed 863 referrals for services. CARA Coordinators offers education to providers, parents, caregivers, and medical personnel as needed and/or requested.

- ***Professional development to foster and adoptive parents regarding the care of children zero (0) to five (5)***- The state requires its foster and adoptive parents to complete pre-service training prior to being licensed, and regular ongoing training on an annual basis. Currently, MDCPS is contracting with two providers to offer pre-service training to its foster and adoptive parents. MDCPS collaborates with Family Resource Center of North Mississippi (FRC) who provides the training in North Mississippi, and Mississippi Community Education Center (MCEC) who provides the training in Central and South Mississippi. Training timeframes consists of three (3) sessions per quarter per region. Training topics include the following:
  - Characteristics of Children Served
  - Separation and Attachment
  - Developmental Stages
  - Behavior Management
  - Adoption Issues
  - Blood Borne Pathogens
  - Child Safety Course
  - First Aid/CPR
  - Travel and Finance

Evaluation of the Safe Babies Courts- This evaluation includes the Mississippi Infant-Toddler Court Program Sites in Forrest County and Rankin County. In September of 2020, MDCPS entered into a data sharing agreement with RTI International, who is conducting a program evaluation of the Infant-Toddler Court Program for the Zero to Three. While MDCPS has completed its data sharing obligations under that agreement, MDCPS currently is working on the completion of an expanded agreement with RTI, and it will likely continue this partnership going forward. In November, The Children and Families Program/Survey Research Division submitted a draft data agreement to MDCPS. The primary goal of the evaluation is to identify changes in the main child welfare outcomes, including child safety, placements/permanency, and child and parent well-being. Data about child and parent well-being will be collected directly from parents when the family enters the court program and again in the month before case closing or month 30 of the project, whichever comes first. Parents will be asked to complete a computer-based interview using an audio-computer assisted self-interviewing (ACASI), allowing parents to listen to the questions and answer choices on headphones as they

see them on the screen. The Community Coordinators will provide a private place for parents to complete the ACASI on the study laptop. The parent ACASI covers Parent Interview ACASI: questions on education, receipt of economic support, and economic struggles, and receipt of parenting services. The parent ACASI includes two instruments: The Child Behavior Check List (CBCL) as the main indicator of child well-being, and the depression assessment that consists of the main indicator of parent well-being. For children placed in out-of-home care, their main caregiver will be asked to complete the computer-based interview, but their interview only covers child well-being by using the CBCL.

Efforts to Track and Prevent Child Maltreatment Deaths

All child deaths that are suspected to be the result of abuse or neglect must be reported to MDCPS's Child Abuse Hotline. This information comes from many sources including law enforcement, the medical examiner's office, hospitals, medical staff or any other with knowledge or suspicion of a child abuse related death. The Mississippi Centralized Intake and Assessment (MCIA) unit maintains the Child Abuse Hotline which collects initial information regarding the child's death and enters it into the MACWIS system. Following the initial report, an investigation is assigned to the Special Investigation Unit to assess for maltreatment that may have resulted in the fatality. During the investigation, all the child's death information that has been collected and reviewed is entered into MACWIS. This information is stored and reported to NCANDS annually.

MCDPS continues the efforts to track and prevent child maltreatment deaths by requiring all child deaths that are suspected to be the result of abuse or neglect to be reported to MDCPS's Child Abuse Hotline. The MCIA unit maintains the Child Abuse Hotline which collects initial information regarding the child's death and enters it into the MACWIS system. Following the initial report, an investigation is assigned to the Special Investigation Unit to assess for maltreatment that may have resulted in the fatality. "During the investigation, information related to the child's death that is collected, reviewed and obtained from participating in the postmortem examination, reviewing the initial coroner's report and final autopsy is entered into MACWIS, including a disposition of the alleged maltreatment."

The Office of Reporting continues to submit NCANDS reports, work with field staff to improve data quality, and work staff to identify and correct issues in MACWIS related to NCANDS reporting. NCANDS federal report for FFY2022 was submitted on 01/31/2023 and accepted on 03/29/2023.

The Office of Reporting communicates with field staff through emails, phone calls and Microsoft Teams to provide training on how to correct the data issues in MACWIS. Currently, there is no plan of correction.

See Citizens Review Panels/*The Mississippi Child Death Review Panel* section for additional discussion.

MaryLee Allen Promoting Safe and Stable Families (PSSF)

As additional funding through Title IV - B and E under the Consolidation Appropriations Act is available to us, we are currently discussing with Senior Leadership our options for this funding which will be allocated for this fiscal year.

MDCPS is utilizing Division X funding by providing concrete support services. These concrete support services are based on need and provided to families that make appropriate requests. PSSF Funds are divided into various units in the agency. Prevention receives PSSF Funds for Family Preservation, Family Reunification, and currently the agency is using funds for Family Support. A portion of the funds are currently being utilized to assist families that need concrete services as stated below. During the program year MDCPS faced the challenge of not having respondents to the RFP for concrete services. In turn the agency developed a short-term program to utilize PSSF funds and assist families throughout the state.

MDCPS attempted to procure a community provider to accept referrals and to assist families and children with resolving crisis and utilize appropriate and necessary services to remain safely together or to reunify with family members. MDCPS recognized that several families were experiencing needs related to financial support, housing, and transportation during the pandemic. MDCPS established a process by which county staff may submit referrals to families at risk of being separated due to a concrete need or families whose barriers to reunification are related to short-term temporary concrete needs. The process allows the MDCPS Prevention Unit to directly assist families with short term needs that include but are not limited to housing deposits, furniture, food, transportation, and clothing for children. The MDCPS employee initiating the referral is responsible for meeting with the family and working with them to establish a plan for sustaining once the short-term support has ended. MDCPS staff were made aware of this being a time limited support and based on funding availability. During the period of July 1, 2022 – June 30, 2023, 889 families were served, and it was available in all Service areas throughout the State. Tracking was through Smartsheet and the Powerform.

PSSF Services

in-CIRCLE Family Support Services Program through Youth Villages and Canopy continue to provide services for families, however, only Youth Villages provides services funded by PSSF (Promoting Safe and Stable Families) funds. Canopy Children's Solutions utilizes state general funds to provide services. Both vendors continue to provide Family Preservation Services as defined in "Title IV-B, SUBPART 2 – Promoting Safe and Stable Families" regarding pre-placement preventative services designed to help children at risk of foster care placement to remain safely with their families. However, the expanded definition of Reunification Services within the *in-CIRCLE* program and the blended funding provided to

each vendor continue to offer different definitions for each vendor, but both fit within the PSSF definition structure. Canopy's definition of Reunification Services and those cases they served meet both the Time-Limited Family Reunification Services definition and the Family Preservation Services definition under PSSF of service programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement. There is no 15-month time limit as in the definition required to meet criteria under the definition for Family Preservation Services and Time Limited Family Reunification Services. Originally, Canopy was providing in-home services under PSSF; however, with the expansion of services, Canopy then was funded through PSSF and State General Funding. Currently, Canopy is now solely funded through State General Funding while Youth Villages is paid entirely through PSSF.

Family Support Services offered by the state are provided through in-CIRCLE services as all families who are referred receive Family Support Services. The number of families and children who receive this service for this FFY October 01, 2022 – May 31, 2023, are below:

Family Preservation:	523 families and 879 children
Family Reunification:	220 families and 338 children
Family Support:	743 families and 1,217children* *
Totals:	743 families and 1,217 children

The breakdown is shown at the end of the report in our section.

* *All children and families served through in-CIRCLE receive Family Support Services.

in-CIRCLE continues to be an intensive, home and community-based family preservation, reunification, and support services program for families with children who are at risk of out-of-home placement. It was designed and implemented to help break the cycle of family dysfunction by strengthening families, keeping children safe, and reducing foster care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families.

(1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option.

(2) Families with pregnant mothers who are at high risk of the child being removed due to substance use issues once the child is born.

Referrals to the program continue to come from the court system or MDCPS staff who identified the family and child(ren) as appropriate for and in need of program services. MDCPS currently have two staff serving as in-CIRCLE Program Coordinators, one for the Western part of the state and one for the Eastern part of the state. As of September 02, 2021, a Division Director was hired to provide oversight to the 2 staff Coordinators over the program. The duties of the two (2) Program Coordinators have not changed, and consist of the following:

- Review referrals from CPS, Courts, and Judges' staff to determine eligibility for in-CIRCLE or Dorcas by reviewing the online form (Smartsheet), attachments, etc., and reviewing the case in MACWIS.
- Assess families for alternative services.
- Review current case files to determine if cases are handled appropriately in MACWIS.
- Assist with drafting updated policy.
- Meet with the in-CIRCLE staff; attend home visits as needed.
- Provide technical assistance/training as needed.
- Revise packet for staff on the in-CIRCLE referral process as needed.
- The Division Director is responsible for managing the Program through tracking and assigning referrals, maintaining programmatic data, correcting, and requesting any missing documentation from the Providers through Smartsheet and supervising the two Coordinators. Smartsheet is a web-based software service application that is used for collaborating with Providers to manage the in-CIRCLE program. Information is also assessed and compiled from Smartsheet along with the caseload data from the states' two contractual Providers to generate weekly and monthly reports to senior and executive leadership for review and feedback. The Division Director is also responsible for reviewing child fatality reports to determine if they had received *in-CIRCLE* services. The referral process for the in-CIRCLE Program consists of the following procedures:
- *in-CIRCLE* referrals are submitted through Smartsheet. Referral sources complete the information on the web-based form and uploaded in an In-Home Participation Form. Smartsheet provides a secure method of distribution of referrals to the Providers. All Providers have access to their specific referrals via a secure email and password protected process through Smartsheet.
- Applications are reviewed for suitability for the Program by the in-state Coordinators and then forwarded to Providers for consideration for services. Once a valid referral is made, the family is contacted by program staff within 24 hours and will have direct contact within 3 days. If deemed an emergency, the family is visited as soon as possible, but within 24 hours. Once a Provider receives the referral, attempts are made to contact the family to set a schedule of service delivery. If after contact are made and it is deemed that the family is not in need of the intensity of services provided by the *in-CIRCLE* program, Providers worked with MDCPS and the family to make a more appropriate referral to a community

resource that would better suit the needs of the family. Some alternative referrals include referrals to MYPAC (Mississippi Youth Programs Around the Clock) services, Navigating Families to Success (LINK), local mental health professionals, and community mental health or substance use disorders treatment facilities.

- **Assessment Phase-** During the initial visit, any immediate crisis will be diffused, and the family functioning assessment process begins. The *Program* worker(s) assess family functioning and develop an assessment report within 3 working days of referral. Once the family functioning assessment is completed, a Family Service Plan (FSP) is developed with and for the family within seven (7) working days of referral. During this assessment, however, any needed crisis services deemed necessary to protect the child(ren) is to be provided by appropriately licensed and/or credentialed program staff. Once completed, a copy of the family functioning assessment is submitted to MDCPS. A Family Service Plan (FSP) is developed for each family and includes at a minimum the following:
  - Family outcome goals
  - Strategies and procedures for achieving the goals.
  - Specific therapeutic, social, and psychological services to be delivered, including intensity, provider(s), tenure, etc.
  - Specific parenting, social, employment, educational, home economic, and other identified concrete supports to be provided, including method for acquiring, provided by whom, intensity, etc.
  - Responsibility of parties
  - Methods for measuring impact of each service and support, as well as progress toward overall goal
  - Timeframe for completion-once completed, a copy of the FSP is submitted to the MDCPS.
- **Program Components and Strategies-** The primary intervention components of the program is engaging and motivating family members, conducting holistic, functional assessments, developing outcome-based goals, using evidence-based practices and interventions, teaching skills to facilitate behavioral change, and developing and enhancing ongoing community supports and resources. The core strategies to be utilized are:
  - **Crisis Management** – program staff are to intervene as soon as possible (within 24 hours of referral) if the family is deemed to be in a crisis.
  - **Accessibility** – Services are provided in the family's home and community, at times convenient to families. Appropriate staff are available 24 hours a day, 7 days a week for crisis intervention.
  - **Flexibility** – Intervention support strategies and methods are tailored to meet the needs, values, and lifestyles of each family, as well as, to provide a wide range of services/supports, such as meeting basic needs of food, clothing, and shelter, home economics and management, job readiness, parent education, substance abuse issues,

medical care, and navigating public services system to individual and family therapy, individual and family case management, and crisis intervention.

- **Time limited and low caseload** – Families receive 8-12 weeks of intensive interventions with the intensive level of care, a minimum of eight service hours per week will be provided to each family including home visits, telephone contacts, transporting and accessing concrete services along with community support. *Program* staff (teams) serve a limited number of families at a time. The family can continue to receive services and support up to another 12 weeks (period) with reduced intensity if deemed necessary for child safety and family preservation by program staff and MDCPS. Finally, program staff can maintain a casual, professional relationship with families in a soft support stage for up to 1 year from the time of entering the program to check on from time to time or to receive a call seeking advice or information. Under certain circumstances, a family can be referred to a more intense stage if in the opinion of the program and MDCPS staff involved it is necessary for child safety and family preservation.
- **Family-centered assessments and service planning** – Assessments were strengths-based and family-focused. Plans were individualized with measurable goals, developed collaboratively with the family, and in sync with the MDCPS plan for the family.
- **Research-based practices** – Program staff use evidence-based interventions, such as (but not limited to) motivational interviewing, behavioral parent training, cognitive-behavior therapy strategies, wraparound, and relapse prevention. Family members are taught a variety of skills, including child behavior management, effective discipline, positive behavioral support, communication skills, problem-solving skills, mood management skills, safety planning, and routine daily planning.
- **Community engagement and resource building** – Appropriate program staff encourage and facilitate the family's involvement and engagement in the community for continued relationships and supports, and help families assess their formal and informal support system, develop, and enhance ongoing resources needed to facilitate and maintain change after program is concluded.
- **Collaboration with Families First for Mississippi Programs** – Where available and appropriate, program staff utilize the family-supporting services provided through the Families First for Mississippi Centers, or similar entities, throughout the state.
- **Termination of Program Services and Supports**- When the family is ready to function safely on their own, based on family functioning evaluation scores, FSP goal accomplishment, and consensus of MDCPS and program staff, a termination summary report is submitted to MDCPS and to the court, if applicable, providing an assessment of the family functioning and outcomes of FSP goals. Peer support for the family is still accessed at this time, when possible. When convinced that program efforts are not enough to ensure sufficient family functioning and child safety, program staff submits a termination report to MDCPS and court, if applicable, providing evidence of a lack

of family effort, capacity, and/or willingness to implement the elements of the FSP which may result in termination of parental rights.

Youth Villages *in-CIRCLE*
PSSF Funding
(June 1, 2022 - May 31, 2023)

	Number Individuals served	**Number Families served**	**Population served ****	**Geographic area served ****
Family Preservation Services	359	220	See Geographical Locations	Counties: Tippah, Alcorn, Prentiss, Tishomingo, Union, Pontotoc, Lee, Itawamba, Monroe, Chickasaw, Clay, Lowndes, Yazoo, Madison, Warren, Hinds, Rankin, Copiah, Simpson, Walthall, Marion, Lamar, Forrest, Perry, Greene, Stone, George, Pearl River, Hancock, Harrison, Jackson
Time-Limited Reunification and Family Reunification Services	198	111	See Geographical Locations	Counties: Hinds, Stone, Pearl River, Hancock, Harrison, Jackson
TOTALS	**557**	**331**		

Canopy in-CIRCLE
State General Funds
(June 1, 2022-May 31, 2023)

	Number Individuals served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	962	595	Statewide	Statewide
Time-Limited Reunification and Family Reunification Services	363	241	Statewide	Statewide
TOTALS	**1315**	**836**		

With the *in-CIRCLE* Program, MDCPS has been able to serve approximately 1,167 families this reporting period (June 1, 2022 – May 31, 2023). Since the program began October 2017, the number of children served for both Family Preservation/Family Reunification services is 10,103 and families is 4,178 as of May 31, 2023.

Dorcas is another In-Home Service provided to the families of MDCPS with no cost offered through Baptist Children's Village. Their data of families served is below:

Dorcas
(July 1, 2022 – May 31, 2023)

	Number Children served	Number Families served	Population served **	Geographic area served **
Family Support Services	121	74	See Geographical Locations	Statewide
TOTALS	**121**	**74**		

Demographic Information on Referrals: Families are single: African American females (majority), Caucasian, Hispanic/Latino, Asian, Native American, etc.; head of household, with children under the ages of 10.

1. What we have learned: Most of the families are in metropolitan areas.
2. Families are limited in their support, education, finances, etc.

3. It may be more than one initial report made prior to services or removal.
4. An increase of substance abuse referrals.
5. Increase in domestic violence referrals.
6. Multiple types of issues, i.e., abuse, neglect, behavioral issues, etc.
7. Past Trauma

The data has assisted us to address issues and be included in the service array as we see the need for more services that are not just geared towards abuse and neglect.

Some demographic information is gathered through our referral and assessment process, but it has not been analyzed for disproportionalities or disparities as of now, but it is something MDCPS is willing to explore in future evaluations of the program.

MDCPS recently had a process and outcome-based evaluation of in-CIRCLE completed by an independent party. Five methods were used to identify and determine the level of program effectiveness: family interviews, key informant surveys, NCAFAS Assessment Comparison, Discharge Analysis, and Child Tracking Data Comparison.

Using a validated sample of families successfully discharged from in-CIRCLE in 2018, 2019, and 2020, the MACWIS data revealed that no cases were ever opened after discharge on:

a. Eighty-eight percent (88%) of children served by Canopy.
b. Eighty-seven percent (87%) of families served by Youth Villages.

This data reflects that both providers are effective at meeting the program goal of keeping children safely in-home and out of custody for at least one year after discharge. Additionally,

a. Ninety-two percent (92%) of the children of families discharged in 2018 have remained safely in-home for over three (3) years.
b. Eighty-four percent (84%) of children of families discharged in 2019 have remained safely out of custody for over two (2) years, and
c. Eighty-five percent (85%) of children of families discharged from In-CIRCLE in 2020 have remained safely out of custody for over one (1) year.

Recommendations for modifications to the Program included increases in mileage/travel stipends for families and an increase in the amount of discretionary funds families can be provided through the program. These Recommendations will be considered as MDCPS continues to assess and make improvements to the current service array.

MDCPS is currently able to see that the success of the program hovers around 90-94% of children remaining safely in their homes without further disruption.

2022 CFSP ACTIVITIES REGARDING-RESEARCH, EVALUATION, MIS AND/OR QUALITY ASSURANCE SYSTEMS

Parham Group, Independent Contractor, will begin evaluating the quality of services provided to *in-CIRCLE* children and families participating in the program from March 28, 2022, until June 30, 2022. The Evaluation will cover the areas of program effectiveness, program satisfaction, and referral process. The purpose of this evaluation will be to identify, analyze, and report the process and measurable outcomes of the in-CIRCLE Program as compared to the stated goal and objectives of the program. The Parham Group is currently finishing their evaluation and will provide data upon completion.

Updates to Adoption Promotion and Support Services

MDCPS, Office of Permanency, has contracted with two providers (Southern Christian Services for Children & Youth and Catholic Charities) to expand and improve upon the post adoption services that are currently available to adoptive families. Both providers began offering various post adoption services in SFY 2023 to ensure the needs of adoptive families are being met statewide.

MDCPS partnered with two Post Adoption Support Services Providers: Southern Christian Services for Children & Youth and Catholic Charities, Inc.

a. Southern Christian Services for Children & Youth's (SCSCY) Adoption Permanency Division (APD) continues to provide MDCPS' adoptive families with the following post adoption services: counseling, mental health treatment, family preservation and stabilization, crisis intervention and management, peer support, and respite. Services are available 365 days a year, 24 hours a day to ensure that families receive the supportive services they need.
b. Catholic Charities, Inc. recently partnered with MDCPS to provides adoptive families with respite services. There have been no adoptive parents and children served, as the program is in the beginning stages of recruitment and awareness of our post-adoption services.
c. Southern Chrisitan Services for Children & Youth and Catholic Charities raise awareness of respite services by mailing post adoption support information to families who have adopted. MDCPS also includes post adoption support information in a "Congratulations" packet that is sent to families after adoption finalization.
d. Children Legally Free for Adoption Conference Calls: November 2022, the Permanency Support Services/Adoption Unit began facilitating monthly Permanency Conference Calls for children that are legally free for adoption. The calls provide the State Office, Adoption Staff, and the Office of Legal Counsel an opportunity to review each case and work together to identify barriers and strategies that will ensure permanency is achieved in a timely manner.

The Permanency Support Services/Termination of Parental Rights Unit continues to facilitate the quarterly Permanency Conference Calls. The calls continue to provide the State Office, Frontline/Adoption Staff, and the Attorney General's Office the opportunity to review each case, with a permanency plan of adoption, and identify barriers and strategies to overcome each barrier to ensure that TPR referrals are submitted in a timely manner. Through this monitoring process, the department continues to find that barriers to permanency are being resolved and children are moving towards permanency timelier.

The PSS/Adoption Unit worked with the MDPCS Communications Team to raise awareness of the services provided to this population via MDCPS social media platforms. The Permanency Support Services and TPR and Adoption Unit provided services to children, families, and individuals.

a. Adoption Finalizations: During July 2022 – June 2023, 598 adoptions were finalized and 38 of those adoptions were finalized by MC School of Law.
b. Post Adoption Services: During July 2022 – June 2023, SCSY-APD served 1,084 families by providing direct and indirect services.
c. Permanency Conference Calls (formerly known as TPR/Adoption Conference Calls):
   August 2022: 772 cases were reviewed statewide.
   November 2022: 816 cases were reviewed statewide.
   February 2023: 694 cases were reviewed statewide.
   May 2023: 659 cases were reviewed statewide.
d. TPR Packets Submitted to State Office: 621
e. TPR Packets Submitted to the Attorney General's Office by State Office: 656
f. Children Legally Free for Adoption: 518
g. Children Legally Free for Adoption Conference Calls: During this quarter, conference calls were held during the months of November 2022 - 484 children reviewed statewide and December 2022 – 491 children were reviewed statewide.

The Permanency Support Services/Adoption Unit continues to facilitate the monthly Children Legally Free for Adoption Conference Calls. The calls continue to provide the State Office, Adoption Staff, and the Office of Legal Counsel an opportunity to review each case and work together to identify barriers and strategies that will ensure permanency is being achieved in a timely manner.

The Permanency Support Services/Adoption Unit incorporates equity for all children ensuring that pre and post adoption services are available to all children and families that have been adopted through foster care. Currently, the Permanency Support Services/Adoption Unit collects data through the monthly reports submitted by SCSCY's Adoption Permanency Division. Data is also collected in the MDCPS Footprints system and pulled from CORE.

Services Provided under PSSF Adoption Promotion and Support Services

Promoting Safe & Stable Families 2022 – Adoption (PSSF 2022)	
Obligation Date: September 30, 2023	Liquidation Date: December 30, 2023
EXPENSES	**COST**
Post Adoption Subgrant (Southern Christian Services for Children & Youth's)	$600,000.00
Post Adoption Subgrant (Catholic Charities, Inc.)	$262,499.00
TOTAL	**862,499.00**
PSSF Adoption Promotion 2022	**$862,499.00**
BALANCE	**$0.00**

Adoption Finalizations

Permanency Support Services/Adoption Unit's (PSS/AU) adoption finalization goal for SFY 2023 is 650. PSS/AU continues to partner with the adoption clinic at Mississippi College School (MC) of Law to finalize adoptions for families adopting through MDCPS.

During this reporting year, 599 were finalized and 38 of these adoptions were finalized by MC School of Law.

The Office of Permanency hopes to increase awareness of pre and post adoption services by creating a brochure that will give adoptive families a brief, but informative overview. Once the brochures are created and produced, we hope to also work with the MDCPS Communications Team to explore other ways to raise awareness, for example, use of social media platforms. An anticipated date of completion has not yet been determined, but the Office of Permanency has made plans to begin compiling the information for the brochure during April – June 2023.

SFY 2023 by Region and Quarter

Regions	Quarter 1 July 2022 – Sept 2022	Quarter 2 Oct 2022 – Dec -2022	Quarter 3 Jan 2023 – Mar 2023	Quarter 4 April 2023 – June 2023	Yearly Total
I North	9	19	21	5	54
I South	9	31	23	9	72
II East	6	4	5	1	16
II West	7	2	5	0	14
III North	0	10	4	4	18

Regions	Quarter 1 July 2022 – Sept 2022	Quarter 2 Oct 2022 – Dec -2022	Quarter 3 Jan 2023 – Mar 2023	Quarter 4 April 2023 – June 2023	Yearly Total
III South	6	12	11	2	31
IV North	4	10	11	13	38
IV South	20	23	28	12	83
V East	4	1	3	2	10
V West	11	8	10	13	42
VI	18	14	7	7	46
VII Central	14	24	16	7	61
VII East	15	28	14	6	63
VII West	8	14	14	15	51
Total	131	200	172	96	599

Currently, we do not have a database that will allow us to pull demographic information for this section. A manual review would have to be conducted to pull this information.

Collaborative efforts between the Department and Youth Court judge helped lead this region to an increase in the number of adoptions finalized during SFY 2023.

Post Adoption Services

Southern Christian Services for Children & Youth's Adoption Permanency Division (APD) continues to provide MDCPS' adoptive families with the following post adoption services: counseling, mental health treatment, family preservation and stabilization, crisis intervention and management, peer support, and respite. Services are available 365 days a year, 24 hours a day to ensure that families receive the supportive services they need.

During this reporting period, APD served 400 families by providing direct and indirect Services.

During the last reporting period, many adoptive families were impacted by COVID which led to the rise in the need for supportive/preventative post adoption services.

Recruitment of Adoptive Families

During this reporting period, the Permanency Support Services/Recruitment Unit (PSS/RU) continued to focus on adoptive parent recruitment through Heart Gallery promotions.

Heart Gallery (Physical Display)

Due to COVID restrictions during the first quarter, the physical Heart Gallery display was not featured throughout the state. Additionally, Heart Gallery and other recruitment activities were transitioned to the Foster Parent Recruitment and Support Unit in August 2022. The Foster Parent Liaison and his immediate supervisor left MDCPS. No information is available for the

2024 APSR reporting period regarding the display. MDCPS staff has been hired and the physical Heart Gallery display will resume August 2023.

Heart Gallery and Adopt US Kids (Website)

Heart Gallery and other recruitment activities were transitioned to the Foster Parent Recruitment and Support Unit in August 2022. The Foster Parent Liaison and his immediate supervisor left MDCPS. No information is available for the 2024 APSR reporting period. MDCPS staff has been hired and collaboration with Adopt US Kids will resume August 2023 in regard to reporting data.

Virtual Adoption Match Meeting (VAMM)

All recruitment activities previously handled by the Office of Permanency were transitioned to Foster Care. MDCPS discontinued tracking the Virtual Adoption Match Meetings once the transition occurred in August 2022.

July 1, 2021 – September 30, 2021

During this quarter, VAMM was held on September 16, 2021. During this match meeting, 10 licensed families were presented, and 10 matches were made. 1 child began pre-placement visits with a family matched during a previous VAMM held on June 17, 2021.

October 1, 2021 – December 30, 2021

During this quarter, VAMM was held on December 9, 2021. During this match meeting, 4 licensed families were presented, and 1 match was made. 1 child began overnight visits with a family matched during the previous VAMM held on September 16, 2021.

January 1, 2022 – March 31, 2022

During this quarter, no match meetings were held. The effectiveness of this recruitment project is currently under evaluation.

April 1, 2022 – June 30, 2022

During this quarter, no match meetings were held. 1 child was adopted because of being matched with a family during a Virtual Adoption Match Meeting. The effectiveness of this recruitment project is currently under evaluation.

Non-Therapeutic Adoptive Placements

MDCPS has contracted with three private providers (Catholic Charities, MS Families for Kids, and Southern Christian Services for Children and Youth) to provide adoptive placements for non-therapeutic children/youth in foster care. Each provider will be responsible for licensing and monitoring the home. A placement agreement shall be established prior to each placement. MDCPS will be responsible for finalizing the adoption. The provider shall work in partnership

with the county of responsibility and county of service to ensure the proper physical, mental, and emotional needs of all foster children are met through regular communication and family team meetings. Each contractor is to provide up to ten (10) adoptive placements. The contract is effective for the period beginning December 1, 2021, and ending on November 30, 2022. 0 children were placed during the current reporting period. One child was placed during the current reporting period. Factors that may have contributed to the underutilization of these placements include lack of awareness about the availability of this type of placement and some contracted providers not being able to provide appropriate placements based on the needs of the child. MDCPS staff will be informed, and awareness raised through agency newsletters and ebulletins should MDCPS seek to re-establish the Non-Therapeutic Adoptive Placement contracts.

Adoption Collaborations

Permanency Support Services/Adoption Unit continues to partner with the Office of the Mississippi Attorney General and with the Adoption Clinic at Mississippi College's School of Law to complete TPRs, adoption finalizations, and secure new birth certificates for families adopting through MDCPS.

Permanency Conference Calls (TPR/Adoption Conference Calls)

The Permanency Support Services/Termination of Parental Rights Unit continues to facilitate the quarterly Permanency Conference Calls. The calls continue to provide State Office, Frontline/Adoption Staff, and the Attorney General's Office the opportunity to review each case, with a permanency plan of adoption, and identify barriers and strategies to overcome each barrier to ensure that TPR referrals are submitted in a timely manner. Through this monitoring process, the MDCPS continues to find that barriers to permanency are being resolved and children are moving towards permanency timelier.

July 1, 2022 – September 30, 2022: During this quarter, conference calls were held during the month of August 2022 and 772 cases were reviewed statewide.

October 1, 2022 – December 31, 2022: During this quarter, conference calls were held during the month of November 2022 and 816 cases were reviewed statewide.

January 1, 2023 – March 31, 2023: During this quarter, conference calls were held during the month of February 2023 and 694 cases were reviewed statewide.

April 1, 2023 – June 30, 2023: During this period, conference calls were held during the month of May 2023 and 659 cases were reviewed statewide.

Filing of Timely TPR Referrals

Of the 1,759 children reviewed who reached 15 of 22 months in foster care during the calendar years 2021 and 2022, 394 had timely TPR referrals made to the Attorney General's Office.

2021 TPR Referrals - 6.3.b.2 - 126 Timely TPR Referrals (Numerator)/680 Total Population (Denominator).
2022 TPR Referrals - 6.3.b.2 - 268 Timely TPR Referrals (Numerator)/1,079 Total Population (Denominator).

Valid ASFA Exceptions
Of the 1,759 children reviewed who reached 15 of 22 months in foster care during the calendar years 2021 to 2022, 3 had valid ASFA Exceptions.

2021 ASFA Exceptions - 6.3.b.2 - 0 Valid ASFA Exceptions (Numerator)/680 Total Population (Denominator).

2022 ASFA Exceptions - 6.3.b.2 - 3 Valid ASFA Exceptions (Numerator)/1,079 Total Population (Denominator).

As shown above, of the 1,759 children reviewed, the 394 timely TPR referrals combined with the 3 valid ASFA exceptions from calendar years 2021 and 2022 amounts to 397 compliant children.

This proves to be 22.6% children in compliance with the data reporting period. method of analysis was related to provision 6.3.b.2. A termination of parental rights (TPR) referral shall be made on behalf of a child before the child has spent more than 15 of the last 22 months in foster care unless an available exception pursuant to the federal Adoption and Safe Families Act (ASFA) has been documented by MDCPS in the child's case record. After the initial ASFA exception, MDCPS may continue the exception for only one additional six-month period unless continued invocation of the exception is reviewed, approved, and documented semi-annually by the RD assigned to the county of responsibility for the child.

The barriers and compelling reasons observed for not filing/referring a TPR packet to the AG's office in a timely manner include: (1) the county not submitting the packet to State office in a timely manner; or (2) a TPR packet may contain deficiencies that must be corrected on the county level before the packet can be referred to the AG's office. The data presented was collected from MACWIS by the Data Reporting Unit and analyzed by the Permanency Support Services/TPR Unit Staff.

MDCPS is building a process within the new Pathways system that will have trigger points at certain parts of the TPR process for reviewing and tracking timely submissions of TPR packets.

TPR SharePoint Library

PSS/Termination of Parental Rights Unit continues to reach out bi-weekly to assigned direct service staff to obtain status updates and provide targeted support that will assist in resolving deficiencies for TPR packets that have been in deficiency status 30 days or more.

The PSS/Termination of Parental Rights Unit hopes to achieve the goals outlined below by June 30, 2023:

a. Develop a tracking system that assists in verifying when a child's permanent plan changes to adoption that will assist field staff in submitting referrals and/or entering ASFA exceptions timely.
b. As a result of MDCPS' engagement with the Administrative Office of Courts, the Attorney's General Office, Chancery Judges, Youth Court Judges, and Referees during Q1, the Permanency Support Services/TPR Unit is working with the Administrative Office of Courts to implement the use of notification alerts within the MYCIDS system. This alert will the notify PSS/TPR Unit staff as soon as the court order changing the child's permanent plan to adoption is uploaded into the MYCIDS system.

   Use of this alert will assist the PSS/TPR Unit in identifying new TPR cases and working with assigned direct service staff to ensure that TPR Referrals are submitted within the 30-calendar day timeframe as established in the MDCPS Termination of Parental Rights Policy & Procedures.

   The Permanency Support Services/TPR Unit incorporates equity for all children by collaborating with direct service staff to ensure that TPR referrals are made timely on behalf of children who have spent 15 of the most recent 22 months in care, unless an ASFA expectation has been documented in the child's case record. The MSA 6.3.b.2 data file is used to determine how well the agency is meeting this requirement. The Footprints system is also used to collect and review data pertaining to the timely filing of TPR referrals.

TPR Packets Submitted to State Office: 621

TPR Packets Submitted to the Attorney General's Office by State Office: 656 (individual children)

Children Legally Freed for Adoption: 518

Children Legally Freed for Adoption Conference Calls:

The Permanency Support Services/Adoption Unit continues to facilitate the monthly Children Legally Free for Adoption Conference Calls. The calls continue to provide State Office, Adoption Staff, and the Office of Legal Counsel an opportunity to review each case and work together to identify barriers and strategies that will ensure permanency is being achieved in a timely manner. Strategies are identified on a case-by-case basis to eliminate barriers that may exist.

November 2022: 484 cases/individual children were reviewed statewide.
December 2022: 491 cases/individual children were reviewed statewide.
January 2023: 438 cases/individual children were reviewed statewide.
February 2023: 446 cases/individual children were reviewed statewide.
March 2023: 450 cases/individual children were reviewed statewide.
April 2023: 428 cases/individual children were reviewed statewide.
May 2023: 401 cases/individual children were reviewed statewide.
June 2023: 380 cases/individual children were reviewed statewide.

Division X Supplemental Funding from the Supporting Foster Youth and Families Through the Pandemic Act

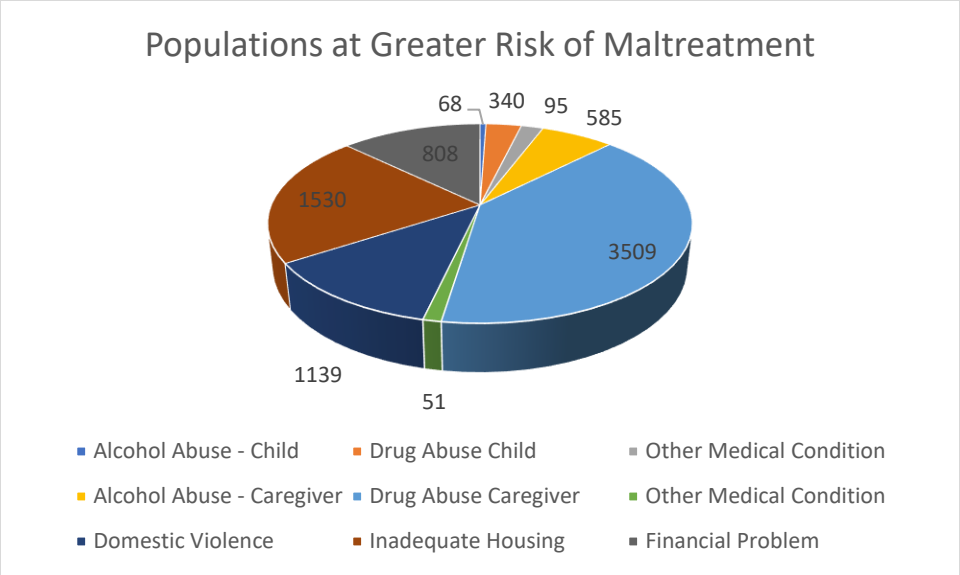
The Division X Pandemic Relief Funds are being distributed via check at the county level to youth in care and youth who are out of care that complete the application process.

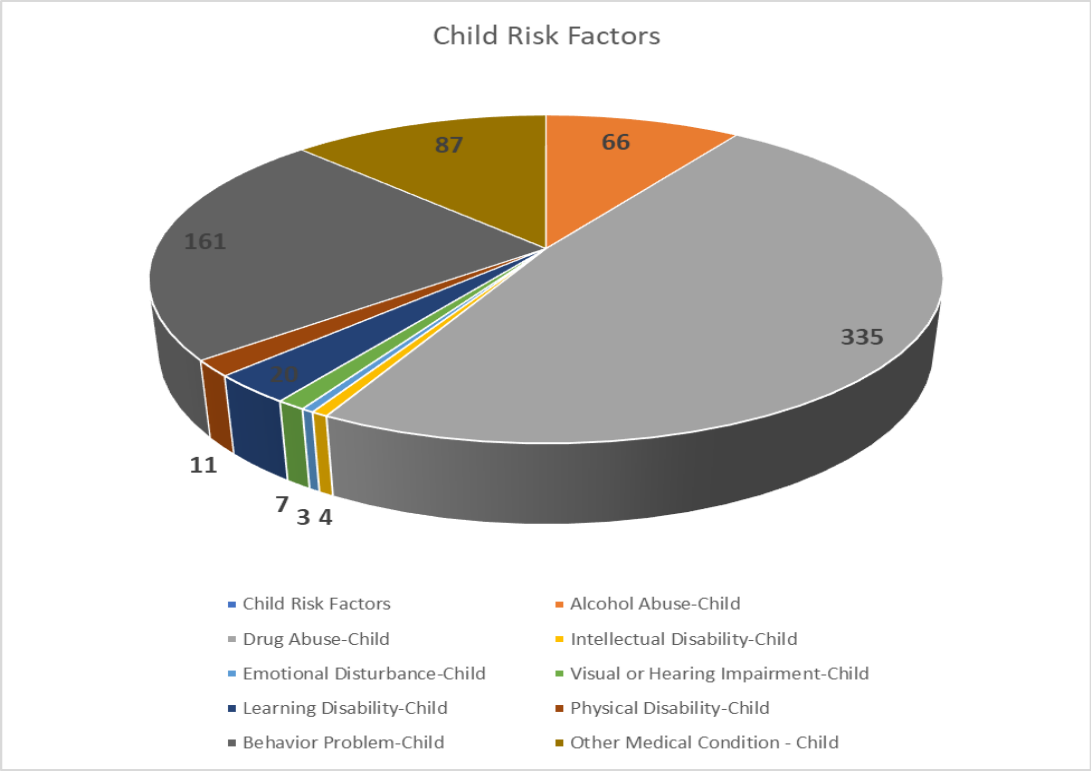
Service Decision-Making process for Family Support Services (45 CFR 1357.15(r))

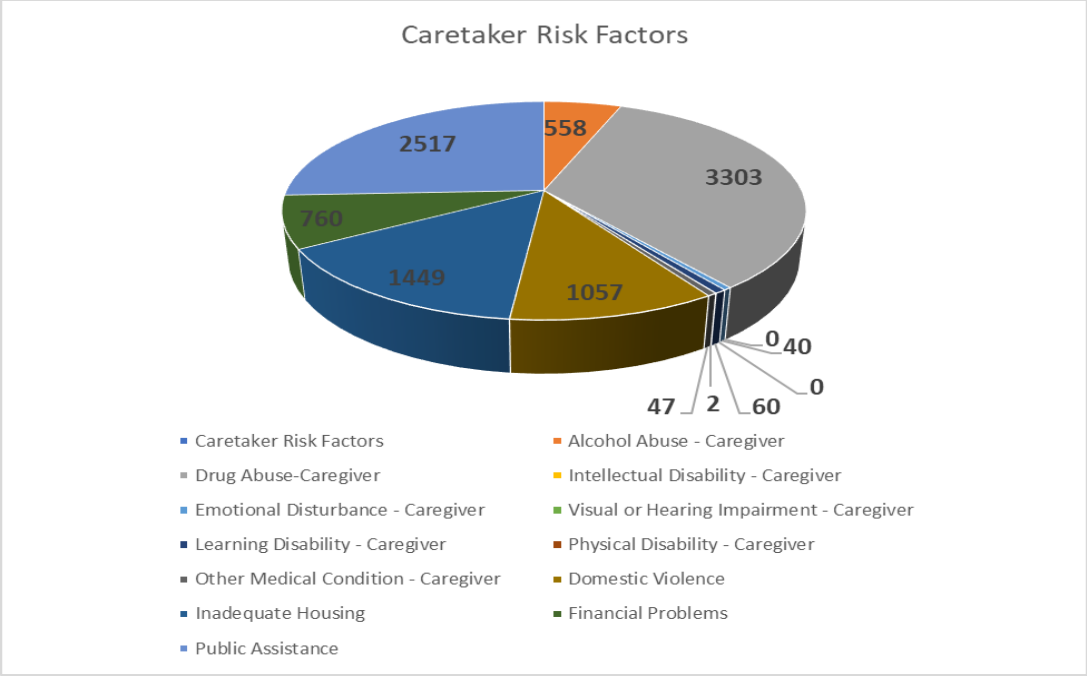
Please see section regarding MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2) which identifies how the state addressed the Family Support Services component of the PSSF program. Specific percentages of title IV-B, sub-part 2 funds are identified in the CFS 101-Part 1.

Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act)

Of the children that were substantiated for abuse and neglect in FFY 21, MDCPS saw the following underlying conditions contributing to abuse or neglect:


Populations at Greater Risk of Maltreatment
68
340
95
585
808
1530
3509
1139
51
Alcohol Abuse - Child
Drug Abuse Child
Other Medical Condition
Alcohol Abuse - Caregiver
Drug Abuse Caregiver
Other Medical Condition
Domestic Violence
Inadequate Housing
Financial Problem


Child Risk Factors
87
66
161
335
20
11
7
3
4
Child Risk Factors
Alcohol Abuse-Child
Drug Abuse-Child
Intellectual Disability-Child
Emotional Disturbance-Child
Visual or Hearing Impairment-Child
Learning Disability-Child
Physical Disability-Child
Behavior Problem-Child
Other Medical Condition - Child

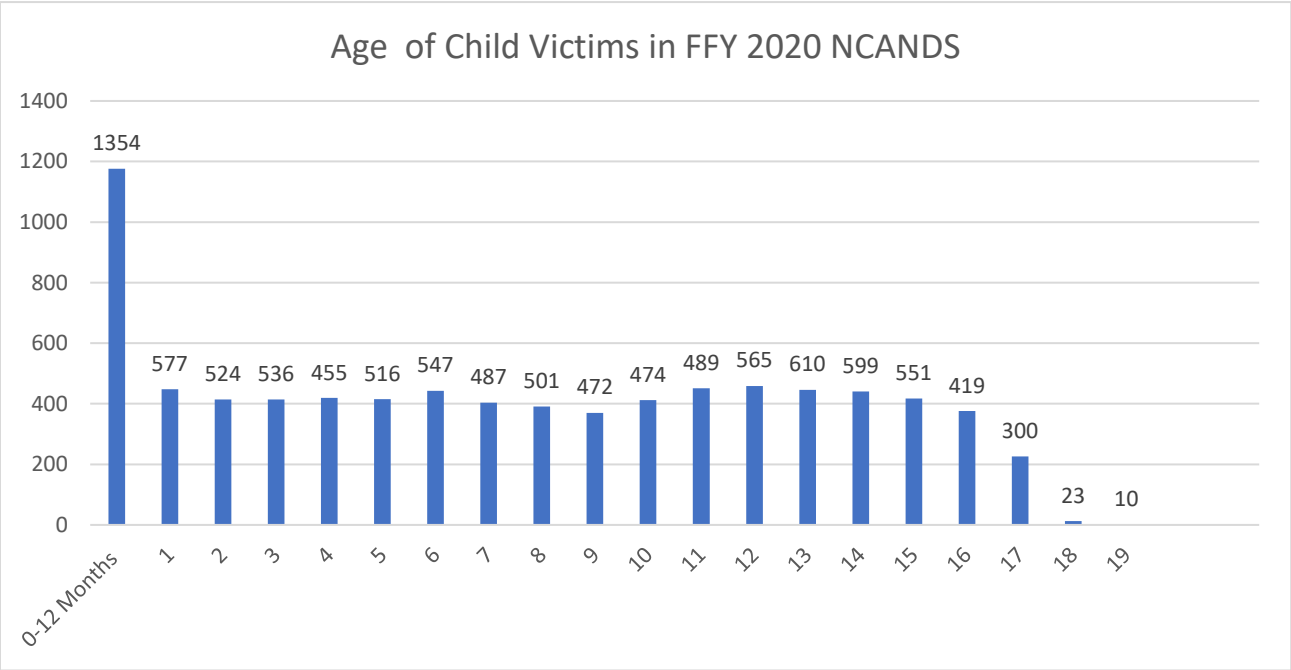


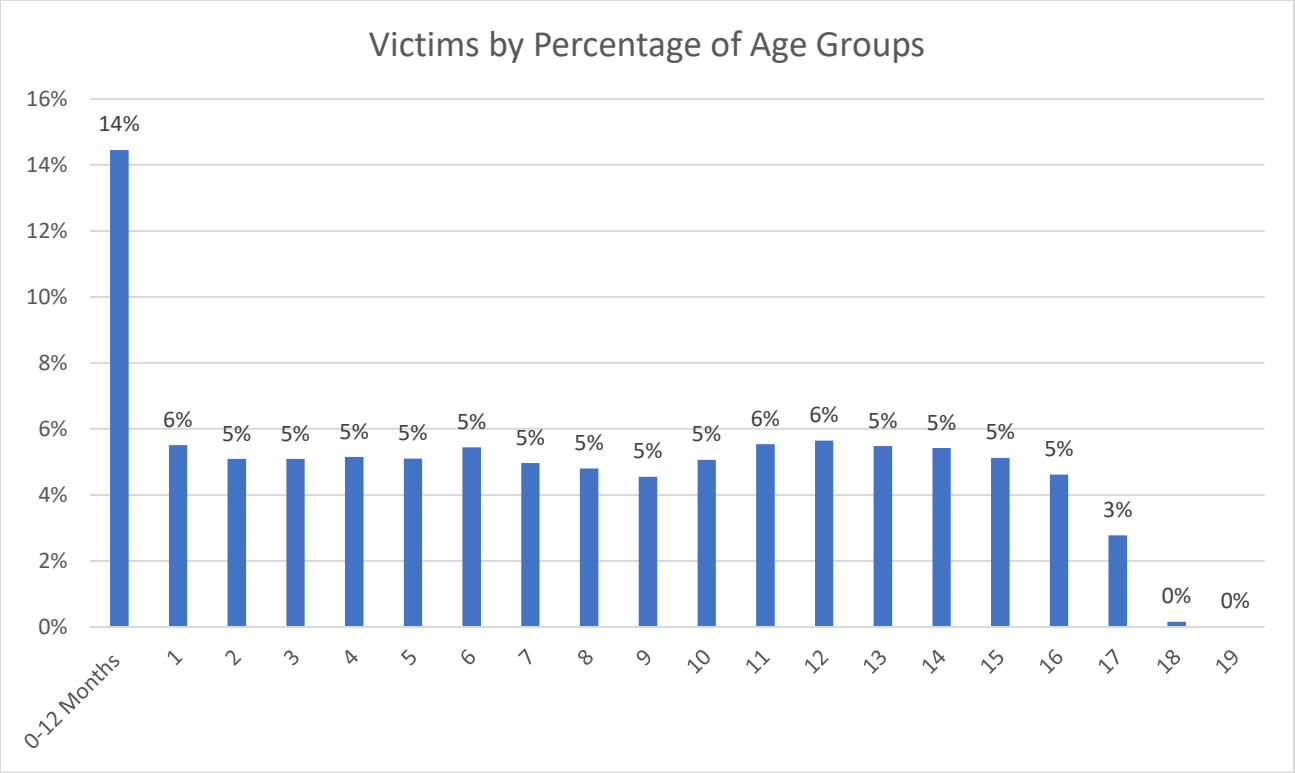
Services will be targeted to these populations in the upcoming year using any available service options that apply. CARA response and referrals to appropriate resources will be used when appropriate for infants affected by caregiver substance abuse. New procurements for diversified in home services will also be used to target services to these populations. MDCPS plans to expand the current in-CIRCLE program by issuing procurements for both intensive and less intensive versions of the services. MDCPS Prevention Services will also continue community-based prevention efforts and collaborations with community partners such as SIDS Alliance, MS Department of Mental Health, MS Department of Health. Prevention Services will also continue to look for opportunities to connect with new community partners and engage in innovative community-based prevention efforts.

Using the FFY 2021 NCANDS data file, MDCPS identified the populations at greatest risk of maltreatment as youth who are under the age of 12 months old (see chart below). Of the total number of victims in the file (10,010) with at least one substantiated maltreatment, 1,354 (14%) were 0-12 months old at the time of the maltreatment report. According to the data, youth ages 2 years old – 10 years old and 13 -16 years old are maltreated at relatively the same rate. Youth ages 17 and older are maltreated less frequently than any other age group which may conceptually relate to the operational definition of a "child" for the purposes of MDCPS' child welfare system or may reflect enhanced protective capacities of older youth.

Using the FFY 2021 NCANDS data file, MDCPS identified the populations at greatest risk of maltreatment as youth who are under the age of 12 months old (see chart below). Of the total number of victims in the file (8,527) with at least one substantiated maltreatment, 1,260 (15%)

were 0-12 months old at the time of the maltreatment report. According to the data, older youth ages 12 years old – 15 years old experience maltreatment at a higher rate than younger youth ages 1 – 6 years old. Youth ages 17 years old and older are maltreated less frequently than any other age group which may conceptually relate to the operational definition of a "child" for the purposes of MDCPS' child welfare system or may reflect enhanced protective capacities of older youth**.**





CARA response and referrals are currently being used when appropriate for infants affected by caregiver substance abuse with no additional safety concerns to address the needs of the caregiver and the infant to reduce the risk of abuse or neglect occurring. MDCPS completes assessments of the family to establish service needs. Services providers that MDCPS has collaborated with and referred populations at greater risk of maltreatment to are Healthy Families MS, Baptist Children's Village Dorcas program, in-CIRCLE provided by Canopy and Youth Villages. Services will be targeted to these populations in the upcoming year using any available service options that apply to the needs of the child or caregiver. New procurements for diversified in home services will also be used to target services to these populations. MDCPS plans to expand the current in-CIRCLE program by issuing procurements for both intensive and less intensive versions of the services. MDCPS Prevention Services will also continue community-based prevention efforts and collaborations with community partners such as SIDS Alliance, MS Department of Mental Health, Southern Christian Services for Children and Youth, MS Department of Health. Prevention Services will also continue to look for opportunities to connect with new community partners and engage in innovative community-based prevention efforts.

I. Kinship Navigator Funding (title IV-B, subpart 2)

The primary purpose of the Kinship Navigator program is to enhance the stability, safety, and well-being of youth at risk of non-relative placement by supporting Kinship care. Catholic Charities continues to collaborate with community agencies and organizations to

promote kinship care services. The Kinship Program was visible in the community to better focus our efforts and strategies to support the program. Our goal is to increase our reach, target our ideal population and continue to be an accessible resource. We are working to improve communication with community partners and at all stages of the process. The Kinship Navigator Program continues to play a fundamental role in creating more opportunities and helping communities thrive. We participated in the University of Southern Mississippi Field Instructor's Symposium and the Mississippi Access to Justice Meeting held at Supreme Court in Jackson, MS. An estimated amount of 150 flyers and program brochures were provided for marketing purposes. The Kinship Program has partnered with Catalyst Counseling and Therapy Services and Infinity Funeral Home to assist with hosting a Community Grief Counseling Group through the month of November. We are offering services to those who need help navigating their new normal. Attendees received a grief journal presented by kinship.

Catholic Charities promotes the Kinship Navigator program through various ways such as commercials, PSA's, attending the county staff meetings for MDCPS, faith-based organizations, and other community held events. Additionally, the program managers visit other public and private to inform them of the program in efforts to collaborate and provide additional services for families such as home improvements and/or other needed services that are not covered through the Kinship Navigator grant purposes.

Catholic Charities staff members partnered with Mississippi Volunteer Lawyer Project and Access to Justice to facilitate the Temporary Guardianship Clinic. Currently, custody clinics are held every other month. There is currently a waitlist in Harrison County due to a backlog of cases. The Kinship Navigator program would like to expand the clinic's efforts; however, this would require additional staff. The program has been expanded to the tri-counties (Hinds, Madison, Rankin, and surrounding counties) starting August 1, 2023. Staff have been interviewed and recommended for hire to provide services in these counties. Additionally, the staff will begin to network initiatives of a law firm to provide pro bono services.

The purpose of the clinic was to provide legal documentation to those who are caring for children in relative placement away from their biological parents. The clinic focused on individuals who are unable to obtain guardianship on their own due to being under the poverty level in Harrison, Hancock, and Stone County. The main objective was to ensure caregivers maintain the ability to care for the children without barriers to accessing needed resources. Thirty-three (33) caregivers were invited. However, twelve (12) successfully obtained legal assistance for guardianship. In addition, eleven (11) volunteer lawyers through the MS Volunteer Lawyer Project and MS Access to Justice and three (3) Kinship staff members were present for this event.

Catholic Charities staff members facilitated a face-to-face event in Gulfport, MS. The purpose of this two-hour (2) hour event was to bring families together for a holiday classic meal and enjoy the company of others as a kinship family. During the event, discussions occurred around the act of giving thanks and verbalizing what we are grateful for. Prior to the end of the event, tips for surviving the holidays and coping through a joy-filled season without their loved ones. One hundred and twenty-four (124) families were invited. However, seven-two (72) individuals attended.

Catholic Charities staff member attended an online event via Zoom. This is the first training in the series for frontline wraparound practitioners, supervisors, and directors as well as community partners who may participate in a child and family team process. Through attending this 3-day training, attendees were able to gain an understanding of the critical components of the Wraparound process in order to provide high-fidelity Wraparound practice. Two (2) kinship staff members attended this training and received eighteen (18) CE hours for participating in the training hosted by the Mississippi Wraparound Institute. Catholic Charities staff members partnered with Mississippi Volunteer Lawyer Project and Access to Justice to facilitate the Temporary Guardianship Clinic. The purpose of the clinic was to provide legal documentation to those who are caring for children in relative placement away from their biological parents. The clinic focused on individuals who are unable to obtain guardianship on their own due to being under the poverty level in Harrison, Hancock, and Stone County. The main objective was to ensure caregivers maintain the ability to care for the children without barriers to accessing needed resources. Twenty-two (22) caregivers were invited. However, nine (9) successfully obtained legal assistance for guardianship. In addition, seven (7) volunteer lawyers through the MS Volunteer Lawyer Project and MS Access to Justice and three (3) Kinship staff members were present. Community-based services will continue throughout the duration of the contract.

Project CARE continues to serve children and families through community-based services. Project CARE provides child abuse and neglect prevention services to increase protective factors for families through a 2-tiered program focusing on parental education and support services. Various community events continued throughout the reporting period.

a. Providing Active Parenting classes on-site as well as off-site in the community.
b. Providing parental support and knowledge through an informational workshop on "Vaping: What Parents Should Know" as a danger to the wellbeing of youth.
c. By hosting car seat safety training which trained parents to install car seats in a safe and correct manner.
d. Providing an outlet for parental stress through Breathing and Meditation Workshop.

e. Continuing to provide support classes for the community like Basic Computer class, Autism Support Group, Active parenting classes in the community.

To reach more families, Project CARE continues to increase their social media presence through weekly Facebook videos and regular postings of classes, events, and articles on child abuse prevention. Families continue receiving prevention services such as: food, clothing, hygiene items, baby items, books, and school supplies. Respite Care was available for families of young children while they pursue job prep/work, go to doctor visits, care for sick family members, and participated in parenting classes. Concrete Support Services were offered to grandparents raising grandchildren, caregivers for children with autism, childbirth and breastfeeding, and basic computer class skills. Concrete support, respite care, support groups/classes, case management services, the utilization of the Family Resource Center and outreach activities continues through the subgrantee. Starkville Project CARE is federally funded, and all funds have been secured through a contractual agreement.

MDCPS hosted *Family Night at the Dug Out*, a family engagement activity for in-home cases and/or foster care cases. The Prevention Unit hosted the 'Strengthening Our Home Base' events during National Child Abuse Prevention Month. Three baseball games were scheduled, one for each region of the state: North, Central, and South. MDCPS provided tickets and a concessions voucher for up to 200 in-home and foster care families and community partners/subgrantees. MDCPS staff volunteered at each game helping with setup, informational booths, and greeting guests while providing printed media related to MDCPS, benefits of foster parenting, and child abuse awareness.

- April 12, 2023: The University of MS vs Alcorn State University at Swayze Stadium in Oxford, MS
- April 20, 2023: Montgomery Biscuits vs MS Braves at Trustmark Park in Pearl, MS
- April 28, 2023: MS Braves vs Biloxi Shuckers at MGM Park in Biloxi, MS

Current efforts to ensure the program is equitable and inclusive for all children and families being served is the continued use of linguistic services. The program is seeking ways to incorporate services for a variety of underserved populations within the state. These populations range from families impacted by domestic violence to children and families of the LGBT community. There are also plans to incorporate services in rural areas that may be deemed underserved populations and develop services for teen parents. Ongoing activities will continue, including community engagement and resources for Kinship caregivers.

Service Area

The Kinship Navigator program will be implemented statewide in three (3) phases. Through their partnership with the South Mississippi Planning and Development District, additional counties were added; however, due to funding issues, CC had to lay off the staff that was going

to be serving the additional counties. Phase one (1) began in twenty-four (24) counties in the southeastern part of the state: Clarke, Covington, Forrest, Hancock, Harrison, George, Greene, Jackson, Jasper, Jefferson Davis, Jones, Kemper, Lamar, Lauderdale, Leake, Marion, Newton, Neshoba, Pearl River, Perry, Scott, Smith Stone, and Wayne counties served by the SMPDD Mac Center. An Information and Referral source for elderly and disabled in the state (designated as a No Wrong Door), the MAC (MS Access to Care) Centers are a pragmatic choice to be the first point of contact for kinship caregivers and would-be caregivers.

Currently, there are no activities carried out regarding research or evaluation, but MDCPS will consult with Aging and Adult Services in an effort to and obtain data.

The Kinship Navigator contract was renewed October 1, 2021. This is the second year of the program. At the end of the narrative the KN program will be active in 24 counties in the southeastern part of the state. In year 2, the Central MS Planning and Development District Mississippi Access to Care (MAC) Center will come on board and in year 3, Three Rivers Planning and Development District MAC center.

The Kinship Navigator program continues to serve as an information and referral source and is in phase 2 of its statewide program launch. Efforts were made to expand counties, but due to funding, services in the central counties had to stop. However, the current contract for 2022 -2023 has increased funding and counties in Central, MS are again implemented. The contract is for August 1, 2022, through July 31, 2023. The second phase of the program will be a streamlined effort to ensure high impact counties such as Hinds, Rankin and Warren are prioritized, as they have a substantial need for support of their kin caregivers.

Kinship websites:
http://smpdd.com/kinship-navigator-program/
https://catholiccharitiesjackson.org/whatwedo/youth/#kinship

Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

MDCPS used the Monthly Caseworker Visit Grant to improve the quality of caseworker visits by utilizing the funds to provide resources that will assist the caseworkers with performing their job duties and supporting the day-to-day operations of the agency.

Funds for monthly caseworker visit funding are still being utilized to help cover caseworker travel and other expenses related to caseworker visits.

MDCPS submitted the FFY 2022 Annual Caseworker Visits data to the Children's Bureau in December 2022. The information below was submitted in the report.

For the period October 1, 2021 – September 30, 2022 (FFY 22), MDCPS's performance was:

The total number of visits made by a caseworker monthly to children in foster care during a fiscal year must not be less than 95% of the total number of such visits that would occur if each child were visited once every month while in care – 94.22%. The state will begin providing more trainings to ensure compliance.

The percentage of visits that occurred in the child's residence is at least 50% of the total number of monthly visits made be caseworker to children in foster care during a fiscal year 8.74%.

Additional Services Information

Adoption and Legal Guardianship Incentive Payments (section 473 of the Act)

During the APSR period under review, Adoption and Legal Guardianship Incentive Payment Funds were used for the following projects:

- Guardian Ad Litem and Court Fees
- Adoption Finalization Fees (billed by attorneys - $1,000 per child/per finalization)
- Wendy's Wonderful Kids Recruiter & Supervisor Salaries
- Adoption Scan Project
- National Adoption Association Membership Fee
- AAICAMA Conference Registration Fee
- Office Supplies
- Recruitment Supplies

MDCPS expects to provide to children and families the following services using Adoption and Legal Guardianship Incentive Funds in FFY 2024:

- Post Adoption Support Awareness
- Child Specific Recruitment for Adoptive Placements & Permanent Connections
- Adoption Support/Finalization Expenses
- Adoption Competency/Trauma Training for Adoption Staff and Prospective Adoptive Families
- Digitizing files to ensure timely responses to record requests made by adoptees
- Training support for staff who coordinate adoptee movement across state lines post adoption

The Department has not experienced any changes, issues are challenges to the plan outlined in the 2020-2024 CFSP and subsequent APSRs for timely expenditure of the funds within the 36-month expenditure period.

Adoption & Legal Guardianship Inventive 2020 (ALGIP 2020)	
Obligation Date: September 30, 2020	Liquidation Date: December 30, 2023
EXPENSES	**COST**
Adoption Finalizations	$762,500.00

Adoption & Legal Guardianship Inventive 2020 (ALGIP 2020)	
Obligation Date: September 30, 2020	Liquidation Date: December 30, 2023
EXPENSES	**COST**
Teddy Bears for Children Who Exit Care Through Adoption	$26,000.00
Area Adoption Celebrations 2023 (North, Central, South)	$100,000.00
Wendy's Wonderful Kids Recruiter & Supervisor Salaries	$350,000.00
GAL and Court Fees	$500,000.00
Adoption Scan Project	$238,000.00
Travel	$24,000.00
AAICAMA Conference Registration Fee	$695.00
AAICAMA Membership Fee	$7,500.00
NACAC Conference	$30,000.00
NACAC Membership Fee	$1,000.00
One Loud Voice Conference	$7,500.00
National Adoption Association Conference	$15,000.00
National Adoption Association Membership Fee	$2,000.00
Trauma Informed Care Conference	$7,500.00
Training for Pre-Adoptive Families	$75,000.00
Office Supplies	$5,000.00
Recruitment Supplies	$100,000.00
Adoption Brochures	$2,500.00
TOTAL	**$2,254,195.00**
ALGIP 2020 Award	$2,717,500.00
BALANCE	**$463,305.00**

Adoption Savings

MDCPS continues using a portion of the adoption savings funds to train and support the activities of case specialists and supervisors who serve children legally free for adoption and their prospective families. MDCPS will continue using a portion of the funds to train and support the activities of case specialists and supervisors who serve children legally free for adoption and their prospective adoptive families. In addition, the Department anticipates expanding respite services and specialized training opportunities (i.e., TBRI, transracial adoption, cultural competence, etc.) to support families better post-adoption. MDCPS also intends to implement a guardianship assistance program to help further the efforts of children remaining in their families of origin with assistance when possible. MDCPS further intends to explore using the funding to support the cost of unmet needs for children and their families at-risk of entering foster care. The abovementioned activities remain fluid as the Department

continues exploring the best possible uses for the funds for prevention and strengthening adoptive families. MDCPS has approximately $24,118,801 in cumulative unexpended adoption savings funds as of the FY 2022 report submission. Since the submission of the FY 2022 Adoption Savings Report, the Department expended an additional $3,738,353. This leaves a balance of $20,380,448 in unexpended savings. The Department continues to use these funds for the purposes mentioned above and anticipates expending these funds over the next three to four years. The Department is not experiencing challenges in accessing and spending adoption savings funds. The Department does not wish to change its Adoption Savings methodology.

Family First Transition Act Funding Certainty Grants

MDCPS has not yet utilized its FFPSA transition grant funds. In October 2020, MDCPS solicited subgrant proposals from therapeutic group home providers to distribute transition grant funds to cover the costs of transitioning providers to compliance with the Act's QRTP standards. Ultimately, MDCPS decided to forego making an award under that solicitation and set forth a plan to use the transition act funds to pay supplemental rate to providers with the intent that those providers use that supplemental rate to comply with the QRTP standards under the Act. After further review by the new General Counsel, MDCPS determined that not all providers who would receive funding would be willing or able to convert their facilities and services to meet QRTP standards. MDCPS is working with Mississippi Association of Child Care Agencies (MACCA) to determine which providers have an interest in QRTP compliance.

FFPSA Transition Grants may be used for any purpose specified in title IV-B of the Act, the portions of the Act authorizing the Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1) and the MaryLee Allen Promoting Safe and Stable Families Program (title IV-B, subpart 2). Funds may also be used for activities directly associated with implementation of FFPSA. In addition, for jurisdictions that previously operated title IV-E child welfare waiver demonstration projects under the authority of section 1130 of the Act, the FFPSA Transition Grants may be used for activities previously funded under such projects to reduce any adverse fiscal impacts associated with the end of the waiver demonstration projects and the transitioning of project activities to other funding sources. The FFPSA Transition Grants will be awarded in fiscal year (FY) 2020 but will remain available to grantees for expenditure through the end of FY 2025.

MDCPS is also preparing a Request for Quotes related to the QRTP level of care, as part of a broader plan to implement tiered care levels and performance-based contracting. Once responses to that RFQ are received, MDCPS will be better situated to determine the level of interest and the capacity in the state for facilities to provide congregate care that meets QRTP requirements.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program) (section 477 of the Act)

The Chafee Foster Care Program for Successful Transition to Adulthood, including the Education and Training Voucher (ETV) Program, provides flexible funding to promote and support youth who have experienced foster care at age 14 or older in their transition to adulthood.

Services

MDCPS and its Chafee partners work to increase the well-being of young people 14-21 years old as evidenced by stable housing, educational success, financial stability, safety, and permanency and supportive connections. The Independent Living Program (ILP) helps adolescents acquire basic life skills in their progress from dependency toward self-sufficiency. All youth ages 14-21 can participate in independent living activities regardless of the youth's permanent plan. Youth in care ages 14 to 21 are eligible to receive Independent Living Services, based on the youth's individual Transitional Living Plan (TLP). The Mississippi Band of Choctaw Indian (MBCI) youth are eligible for independent living services based on the same criteria for MDCPS youth in care. Youth are eligible for independent living services based upon the following criteria:

- Youth in care, ages 14 until their 21st birthday, are eligible for all IL services except for the criteria placed on the Education and Training Voucher program.
- Youth who leave custody, ages 18 to their 21st birthday have access to a Transition Navigator and are eligible for community-based referral services until their 21st birthday; and,
- Youth who enroll in post-secondary education and vocation program are eligible to receive Education and Training Voucher (ETV) services until their 26th birthday or for 60 months.

Guiding Principles

- Achieve positive results for youth through purposeful, high-quality services.
- Promote MS Youth Voice by engaging youth people in the development, implementation and refinement of our work and practicing a youth-driven approach to service delivery.
- Cultivate collaboration relationships within and among our partner organizations and with other community organizations to maximize our ability to collectively support youth.
- Use data to measure progress and improve services; and
- Foster a culture of accountability throughout the organization for providing high-quality services that produce results for youth people.

Youth Transitions Support Services Organizational Structure

YTSS Bureau Director: The YTSS Bureau Director is responsible for overseeing the operation of Youth Transitions Support Services. Both Social Services Team Leads are

directly under the Bureau Director's leadership. Other responsibilities include but are not limited to overseeing the Chafee budget, service contact management, policy development and implementation, data analysis for program/service improvement, MSA reporting, federal reporting, community/provider engagement, and other duties as assigned.

Social Services Program Leads (Northern Region and Southern Region): The Social Services Program Leads are responsible for overseeing daily operations of the Independent Living Program. The Program Lead supervises each Region's SSPC/TNs. In these roles, the YTSS Program Leads provide training and coaching to TNs, collect program/service data for review, develop training curricula to improve program practices, work closely with field supervisory staff to assist TN training/coaching case workers regarding Independent Living.

Social Service Specialists/Coordinators referred to as Transition Navigators: Transition Navigators are responsible for the following to include but not limited to: ensuring case workers integrate Independent Living Plan (ILP) specific services into practice with youth, provide technical assistance around developing youth engagement strategies, offer technical assistance to frontline staff around implementing appropriate services, complete the Youth Appraisal with youth in care aged 14 and older, assist workers to provide direct ILP services to youth ages 14-21, complete monthly reporting requirements, attend court proceedings, case manager staff meetings, family team meetings or any other meeting as it relates to the youth's ILP, make ILP stipend request, build community resources and make referrals to community resources based on a youth's identified needs.

The current organizational structure provides capacity for the following staff: one Bureau Director, two Social Services Team Leads, and 26 Social Services Specialists/Coordinators (SSPC)/Transition Navigators (TN).

Update: Between July 1, 2022, and December 31, 2022, 9 Transition Navigators have been hired, however, 3 individuals left due to salary. The Transition Navigator was promoted into one of the Social Services Program Team Lead positions for the state's Northern Region, effective October 2022.

The YTSS leadership team conducted interviews on March 13th, 14th and 31st of 2023 for available Transition Navigator positions in the lower state counties to include Service Area 5, 6 and 7. Recommendations were made for three current MDCPS staff to transition into

Transition Navigator positions with a start date of May 2023. A Transition Navigator was promoted to a Social Services Program Team Lead in 2023.

YTSS currently has 16 staff including the YTSS Director and two Social Services Program Team Leads. YTSS is still awaiting a Transition Navigator new hire for Service Area 6 anticipated to start on or after June 1, 2023. Additional advertisements have been requested for Jones, Lee, Hinds and Jackson counties. YTSS coverage structure now aligns with the service area coverage maps rather than by region.

Objectives and Initiatives

1. Provide all current and newly hired MDCPS field staff with hands on technical assistance by way of providing more county level training and support services which is designed to strengthen independent living placement services provided to eligible youth.

   Update: YTSS TNs are housed in county offices and telework within their service area region to provide one on one assistance and training to workers as well as direct ILP services to youth. Designated YTSS TN staff present as a guest speaker to new hire sessions each month to explain ILP services and provide regional contact information. Meetings for this reporting period were conducted on:

   - August 24, 2022
   - September 28, 2022
   - October 26, 2022
   - November 30, 2022
   - January 4, 2023
   - February 15, 2023
   - March 8, 2023
   - May 4, 2023
   - June 28, 2023

TNs also attend regional and county staff meetings/trainings, family team meetings, foster care reviews, and court proceedings to strengthen the communication and sharing of information with all parties involved in the youth's case which results in better services for the youth.

2. MDCPS/YTSS community partnership efforts were streamlined to include First Place for Youth and the Anne E. Casey Jim Casey Initiative. This partnership is focused on increasing the continuity of Independent Living Services provided in-house by MDCPS/YTSS as well as fostering the voice of former foster youth for change. Additional partners in the areas of education and employment will be added to this partnership as our service array expands.

Update: During a portion of the period of review, 2022 Mississippi Partnership Impact included:

- Passage of the Kinkade Scholarship giving cost of attendance scholarship to eligible current/former foster youth, where 106 Students signed up in the first month;
- Passage of Legislation to allow current/former foster youth to sign leases at age 18;
- Financial literacy provided to 150 youth/young adults with a match of more than $50,000;
- A total of 500 hours of lived advocacy and influence for foster care policy and program efforts.

For 2023, the partnership will focus on engaging youth with lived experience in developing and implementing strategies that improve stability in housing and obtaining/maintaining living wage employment.

In November 2022, MDCPS joined First Place for Youth and MS Youth Voice in Phoenix, Arizona to celebrate each state's individual and shared contributions to the Jim Casey Initiative's national results and successes; strengthen our connections with each other and learn about innovations in the practice across network that may be replicable at other sites. Two of Mississippi's former foster youth, who now are a part of Mississippi Youth Voice were present where they shared the room with all Site Partners and Annie E. Casey Leadership as discussions took place around the Casey framework and the engagement of youth in each state.

MDCPS and First Place for Youth met with Barbara Langford for initial discussion of Technical Assistance around creating an Extended Foster Care plan on May 8, 2023. Technical Assistance topics of discussion included determination of key elements for extending care, developing a cost analysis based on design decisions, and analyzing net fiscal impact of extending IV-E eligibility. Options for Structuring the Design and Analysis process were discussed for determined final answer in the attached timeline: Internal Process, Small Collaborative Work Group, Larger Working Group. All partied involved decided on a Small Collaborative Work Group with members from MDCPS, Youth Villages, Southern Christian Services, the Children's Foundation, and youth with lived experience.

On June 1, 2023, a listening session was held by Mississippi Youth Voice for child welfare stakeholders including MDCPS, where suggestions for Pathways for Independence and Key Policy recommendations were shared. Key Policy Recommendations including the following topics:

- MDCPS Front-line staffing
- Documentation and Accountability
- Youth Rights and Involvement
- Placement Settings
- Transitional Planning

- Youth Socialization
- Parenting Youth
- The Need for Extended Foster Care

A listening session is planned for in-care youth regarding the above-mentioned recommendations during the upcoming Summer 2023 Youth Retreat. Questions will be taken from youth and discussed within MDCPS Youth Advisory Councils to see what kind of solutions youth would like to see occur or if they develop other recommendations along with the above. MDCPS will continue to cultivate an atmosphere of transparency so that youth's voice has impact on program outcomes.

3. YTSS has developed and released Independent Living training modules to MDCPS staff through Cornerstone. Workers have been assigned the following training modules: Adolescent Brain Development; Healing Comes First; Permanence; Stable Housing; Successful Connections; Young Parents; Family Team Meetings; MDCPS Foster Youth Needs; Population Needs; Transition Planning; Youth Assessment; and Youth Engagement.

4. Recruit a minimum of 10 youth per sub-grantee period for ILP apartment placement. Currently, two (2) youth meet the minimum criteria for apartment placement. To help meet this objective, ILP staff would promote the Independent Living Apartment Placement program to youth through the Teen Advisory Board (TAB) and field staff.

   Update: As previously stated, the community based Supervised Apartment Placement program as initially defined by First Place for Youth and MDCPS was not successful. As new legislation passed allowing both in-care youth and former foster youth aged 18 and older to sign leasing agreements and utility agreements independently, MDCPS has focused on the Foster Youth for Independence (FYI) program. Currently, MDCPS has MOUs with Tennessee Valley Regional Housing Authority (TVRHA) and recently, MS Regional Housing Authority VII along with Case Management entity, Youth Villages to provide FYI vouchers to eligible youth in northeastern and southwestern counties of the state. We also maintain a MOU with Jackson Housing Authority (JHA) and Southern Christian Services for the Jackson, Metro area. See Housing Section for current statistics.

5. Develop and implement a process to conduct annual credit checks on youth in care starting at age 14.

   Update: Mississippi implemented a Program Improvement Plan (PIP) with the Children's Bureau beginning February 1, 2022, through January 31, 2023. In the first quarter of the PIP, all first quarter action steps were met to include: making initial contact with all three credit reporting agencies, identifying roles and responsibilities of key staff, reviewing current policy

for change, drafting new policy with field and state office staff review, and drafting standard operating procedures. YTSS staff in coordination with other responsible parties also completed some of the 2nd and 3rd quarter actions steps to include establishing contractual agreements with the three credit reporting agencies as well as identifying and registering portal administrator and administrative users. MDCPS plans to remain ahead of Strategies and Action Step projected completion. The 3rd quarter PIP update was submitted to CB on December 1, 2022, where all action steps have occurred prior to or on schedule. The 4th Quarter entailed challenges due to IT issues, however, MS was able to implement the full process of the Annual Credit Check process and fulfilled the PIP with the Children's Bureau. Currently, monthly files are being requested for applicable population for administrative review to determine youth engagement, inquiry, and needed reconciliation.

Policy Initiatives

Housing and Transportation

Housing for youth exiting the foster care system without a plan of adoption or reunification is a primary focus for the Department. MDCPS has established Memorandums of Understanding with three (3) Mississippi Housing Authorities for the Foster Youth to Independence (FYI) Program and have spoken with additional Housing Authorities regarding administering the program. In efforts to continue to seek agreements each Regional or Local Housing Authority in the state, a reception was held by partnering Foster Youth to Independence (FYI) housing authorities for other interested MS Housing Authorities from across the State on December 5, 2022. Commissioner Andrea Sanders and partnering agencies spoke on the statistics of homeless former foster youth and the need for additional participation in the FYI Program.

Partnering Housing Authorities administer the FYI program by issuing the voucher and monitoring housing requirements while partnering Case Management entities provide support services to youth in the FYI program to include but not limited to basic life skills, counseling on compliance with rental lease requirements and with the HCV program participants requirements, job preparation and attainment counseling, and educational and career advancement counseling.

Update: Resulting from the December 5, 2022, Housing Reception, MDCPS finalized partnerships with MS Regional Housing Authority VII (MRHA VII) and Youth Villages to administer the FYI to service Adams, Amite, Franklin, Jefferson, Jefferson Davis, Lawrence, Lincoln, Pike, Walthall, Wilkinson counties on March 24, 2023. Initial meeting with representatives from MRHA VII, Youth Villages and MDCPS on April 17, 2023. Current statistics are as follows:

Tennessee Valley Regional Housing Authority with Case Management provided by Youth Villages

- Youth Currently Housed: 6
- Referrals awaiting HUD Approval: 2

- Referrals Awaiting HUD funding (HUD has approved these vouchers): 3

Jackson Housing Authority with Case Management provided by Southern Christian Services

- Youth Currently Housed: 5
- Referrals awaiting HUD Approval: 6
- Referrals awaiting HUD Funding (HUD has approved these voucher):

MS Regional Housing Authority VII with Case Management provided by Youth Villages

- Youth Currently Housed: 0
- Referrals awaiting HUD Approval: 2
- Referrals awaiting HUD funding (HUD has approved this voucher)

Housing and Transportation Committee

The Youth Transition and Support Services Division serves on a Housing and Transportation Committee for Mississippi Youth along with members from Youth Villages, Southern Christian Services, First Place for Youth, Mississippi Home Corporation, Mississippi Housing Authorities, and the MS Department of Transportation to address gaps in housing and transportation in MS. A focus for the Housing Committee is the FYI program participants and streamlining the process for youth to receive the FYI voucher and assistance is gaining stability when first leasing a home. Foster Youth to Independence (FYI) Sub-Committee met January 12, 2023, to discuss the pathway for foster youth who are referred to the FYI Program. An initial draft of checklist items was established by partners in the FYI sub-committee to include Youth Villages, First Place for Youth, Tennessee Valley River Housing Authority, Hope Rising Mississippi, and Southern Christian Services. In this meeting, it was determined that a different pathway exists for former foster youth and the workgroup committed to meeting again on March 23, 2023, to continue working on both pathway checklists. See attached Move-In SIM Draft January 12, 2023.

The FYI sub-committee met on March 23, 2023, to discuss challenges around the current FYI pathway for foster/former foster youth and challenges with former foster youth to establish varying pathways as applicable. This committee invited MDHS Community Services to also attend as they assist with security/utility deposits. The timing of referrals will be reviewed. Further progress was made on move-in pathways that incorporated heavy case management by case management entities. See also attached Move-In SIM Draft March 23, 2023.

Transportation remains a challenge in non-metro areas of Mississippi, especially the Delta. The MS Department of Transportation (MDOT) continues to advertise grant opportunities for transportation agencies, but the challenge of liability and credentialing remains. MDOT will have a networking conference July 19-20, 2023.

Family Unification Program

An initial meeting for the Family Unification Program (FUP) was held on May 5, 2023, and included representation from MDCPS, MS Balance of State, Mississippi United to end

Homelessness, MS Home Corporation, Hope Rising, and MS Housing Authorities to discus to possibility of MS Housing Authorities to apply for the FUP vouchers. Another meeting will be held May 11, 2023. A Family Unification Stakeholder meeting was held on May 11, 2023 where representatives from MDCPS, MS Balance of State, Mississippi United to End Homelessness, MS Home Corporation, Hope Rising, MS Housing Authorities, and Jim Casey partner, First Place for Youth discussed potential interest in any MS state Housing Authorities interested in applying for the Housing and Urban Development (HUD) Notice of Funding for Family Unification Program (FUP) Vouchers. Being awarded these vouchers would assist families with prevention of children entering custody due to lack of adequate housing if housing assistance could be provided via a FUP voucher. These vouchers could also be used for youth at least 18 years and not more than 24 years of age who are homeless or at-risk of becoming homeless. If awarded, a maximum of 25 vouchers or identified need, if lower than indicated cap. The due date for housing authorities to submit their applications under this Notice of Funding Opportunity was May 26, 2023. Applications must include Memorandum of Understanding between the applying housing authority, Continuum of Care organization and MDCPS. As of May 26, 2023, both Jackson Housing Authority and South Mississippi Housing Authority submitted applications for these vouchers. There is no estimated date of award currently.

Mississippi United to End Homelessness (MUTEH)-Mississippi's Lead Agency for Continuum of Care works with MDCPS to find additional housing opportunities for at risk or homeless former foster youth through housing programs like Rapid Rehousing, Chronically Homeless Permanent Supportive Housing, or the Emergency Solutions Grant.

Post-Secondary Education and Workforce Training Programs

Transition Navigators serve as a gateway to the Education and Training Voucher program where assistance can be given to youth interested in going to college or engaging in the state's workforce development training programs administered by both colleges and local planning and development districts.

Mississippi Governor Tate Reeves signed House Bill 1313 on April 19, 2023. The legislation provides one million dollars in scholarship money that can go to any person who was placed in either the legal custody of MDCPS or in any of the state's qualified residential child agencies after the age of 13. The Mississippi Postsecondary Education Financial Assistance Board oversees administering the scholarship program.

Update: FAITH Scholarship - The State Rep. Bill Kinkade Fostering Access and Inspiring True Hope (FAITH) Scholarship was created by the 2022 Legislature to provide full COA scholarships to students who have interacted with the state's foster care system. On November 4, 2022, MDCPS, Sunnybrook Children's Home, Baptist Children's Village, and MS Department of

Financial Aid discussed final eligibility for FAITH scholarship recipients, application dates, and determining eligibility from MDCPS.

The scholarship will first award for the 2023/2024 academic school year for post-secondary institutions for youth:

- U.S. citizen/MS resident
- < 25 years of age
- File the FAFSA and other federal aid applications, if applicable
- Meet one of the following criteria:
- In legal custody of CPS at any time since age 13
- In qualified residential facility at any time since age 13
- Adopted from CPS or qualified residential facility after age 13
- Enroll in at least 6 hours in a MS institution for undergraduate credential or degree

Award amount:
- Up to the full cost of attendance
- Room/board during breaks, where available

Award Length:
- Fall, Spring, or Summer Semester
- 5 Calendar Years

As of June 30, 2023, 259 students have been certified as eligible by MDCPS. Since the cost of attendance varies greatly by community college/universities, there is no initial number of award, but does have an initial funding amount of $1 million.

One of the requirements under the FAITH scholarship is for foster/former foster youth to apply for the Education Training Vouchers (ETV). Besides conducting individual and group outreach activities to in-care youth about the program, this has established an additional outreach avenue to promote the program to former foster youth enrolling in ETV. The ETV Enrollment application for the 2023/2024 Academic School year has already been released and is available to youth for completion.

YTSS has added an educational resource to our website page to answer questions about Financial Aid for Post-Secondary Education written by Intelligent.com Higher Education Team. This resource addresses why financial aid matters, work-study options, how federal grants can help pay for college and a link to the Free Application for Federal Student Aid (FAFSA). The resource also lists additional resources such as StudentAid.gov and the U.S. Department of Education.

The YTSS Division has also created a letter to assist foster/former foster youth in confirming their foster care status for enrollment in a post -secondary educational/vocational pathway.

Employment and Workforce Development

Update: For youth who decide that post-secondary education is not for them, connections are made to local WIN job centers for available job opportunities in their area or other areas a youth may be interested in. Transition Navigators also provide resources and connection to military branches should youth be interested in joining the military.

Endeavors to cultivate definitive community specific workforce pathways for both current/former foster youth are underway. MDCPS attended an initial share and learn Workforce Innovation and Opportunity (WIOA) meeting on February 23, 2023, to network with other state agencies and community-based organizations in efforts to bridge the gap between employment pathways for vulnerable youth in Mississippi. Those in attendance included representatives from MS Department of Child Protection Services, Central MS Planning Development District, MS Department of Human Services Workforce/Youth Services Division, MS Home Corporation, MS Department of Rehabilitation, MS Department of Transportation, First Place for Youth, and Hope Rising Mississippi. Items discussed included other agencies needed for collaboration, establishing a regular meeting, and a discussion of WIOA Internship Opportunity with Southcentral Mississippi Works as a resource.

YTSS Transition Navigators are also working independently to discover additional workforce training programs in their areas. Service Area 5 which includes Copiah County met with Job Corp on June 28, 2023 for a tour and are looking to coordinate a site visit for interested youth on July 13, 2023.

On April 5, 2023, MDCPS signed a Letter of Support for the MS Department of Mental Health to pledge commitment to participate in the activities and events related to the Supported Employment for Transition Age Youth (SE-TAY) with Serious Mental Illness/Serious Emotional Disturbance (SMI/SED) Policy Academy offered by Substance Abuse and Mental Health Services Administration (SAMHSA). The goal of the Policy Academy is to develop a state-wide strategic plan to advance policies and practices to enhance the state's capacity to meet the competitive employment needs of transition age youth with mental illness through the implementation of Supported Employment. On May 2, 2023, the MS Department of Mental Health received an acceptance letter to the Policy Academy. The first convening will took place in-person in Rockville, Maryland from June 20-22, 2023 at the SAMHSA building. Mississippi representatives included MS Department of Mental Health, MS Department of Human Services, MS Department of Child Protection Services, MS Department of Employment Security, and MS Department of Rehabilitation Services. A plan of initial steps was developed to begin building an infrastructure for SE-TAY with Serious Mental Illness/Serious Emotional Disturbance. First steps include:

- Making sure all partner voices are at the table to include MS Department of Medicaid and youth with lived experience

- Potentially having all entities be a part of Mississippi's Workforce Innovation and Opportunity Act (WIOA) state plan
- Exploring how to braid current services that may lead to additional funding capabilities

Financial Management

Transition Navigators make regular referrals to Opportunity Passport™, a financial literacy and matched savings program designed specifically for young people who have been in foster care. First Place for Youth manages Opportunity Passport in Mississippi in coordination with MS Department of Child Protective Services. The program was created by the Jim Casey Youth Opportunities Initiative and has two key components: Keys to Your Financial Future training and a matched savings opportunity.

Update: 2022 Impact Report (January 2022-December 2022) showed that Opportunity Passport provided financial literacy training and ongoing support to more than 150 youth/young adults; and matched more than $50,000 in asset purchases-22 vehicles, 5 housing, and 1 credit building match.

Health and Mental Health

Although MDCPS works on an individual level to assure that eligible youth that exit out of care are connected and stay connected to Medicaid, YTSS has continued efforts to engage the Division of Medicaid on Section 1002 (a) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment of Patients and Communities Act (the "SUPPORT Act") which provides that individuals who meet the eligibility requirements of the FFCC group may be enrolled in this group even if they meet the eligibility requirements for, but are not enrolled in, another mandatory eligibility group. A workgroup between MDCPS and the Division of Medicaid was created to engage both agencies beginning March 23, 2023, and again on May 19, 2023 with the following answers and Action items:

- On 05.25.23, Medicaid confirmed that they agency uses the Mississippi's legal definition of the word "emancipation".
- Medicaid finalized the Fact Sheet and sent this to MDCPS on 08.02.23. The Fact sheet, including a youth transition support email address, has been added to the YTSS Resource section of the MDCPS website and is set to be distributed to MDCPS staff via newsletter
- To their knowledge, the Medicaid Administrative Code has been updated to reflect the new January 2023 Requirement when youth move to another state. They will send the new code to us.

LGBTQ+

The MDCPS Youth Transition and Support Services Division met with the Spectrum Center on May 31, 2023, to discuss current available resources for our LGBTQ+ youth. Resources are available statewide, but mostly in Central and Southern Mississippi. The Center sent a list of LGBTQ+ friendly resources to YTSS for reference. Services include companies that are owned by

LGBTQI+ individuals and companies that are known to be LGBTQI+ friendly. Due to the law passage of House Bill 1125, MDCPS is reviewing the definition of gender affirming care as it relates to future activities, services, and partnerships. MDCPS will continue to support youth in their individual life journey and continue to have listening sessions with both in-care and former foster youth to identify strengths and weaknesses in current practice.

YTSS PLANNED ACTIVITIES

Aftercare Services: Aftercare services will continue to be offered to youth ages eighteen (18) to twenty-one (21). YTSS aftercare will function as an assessment/community-based program to youth out of care ages 18-21. Transition Navigators will administer the Youth Appraisal to youth seeking aftercare assistance to identify needs and make soft referral recommendations.

Additional Transitional Living Services: YTSS Transition Navigators will continue to provide additional transitional services to youth ages seventeen (17) to twenty-one (21) years old as they leave MDCPS. Services rendered will assist youth in making a successful transition to adulthood. A successful transition includes the following: Maintaining stable and suitable housing; remaining free from legal involvement; Participation in an educational/vocational program; developing life skills; build social and financial capital; build community connections; and connect youth to needed community-based resources necessary to pave the path to self-sufficiency. All eligible youth are encouraged to participate in community-based life skill learning opportunities offer through Families First and other community-based organizations. Youth ages 17-21 will be strongly encouraged to strengthen life skills through participation in online life skill classes and one on one coaching from their Transition Navigator.

Youth Engagement

YTSS' summer youth retreat was held at Camp Tanglewood in Lawrence, MS from July 26-July 28, 2022. Approximately 35 youth between the ages of 17-18 attended the youth retreat. A variety of activities were offered to include the following:

- Panel discussions on Human Trafficking and Gun Violence/Drugs
- Life skills lessons such as Communication/Social Development, Employment/Community Resources and Self-Care/Daily Living Skills
- Games to include a session with MDCPS called "Have you Ever"
- Presentations from Mississippi's Get2College and the MS Army National Guard
- Discussion on age-appropriate Independent Living Services to include the Education and Training Voucher (ETV) Program

Hearing from Youth about Mental Health

YTSS attended a mental health discussion presented by youth from Mississippi's Department of Mental Health's Open-Up MS on October 21, 2022, to talk about the 988 National Suicide

Prevention and Crisis Lifeline. Information about 988 is located on the Youth Resources page of the MDCPS website and Transition Navigators use this information when conducting Youth Appraisals or other case management appointments when discussing mental health needs. MDCPS is using information gathered from youth advisory councils and youth listening sessions from both in and out of care to determine gaps in service around mental health services.

Youth Surveys

Youth Survey Data Debrief with Children's Foundation on June 27,2022 regarding a youth survey that was administered to in-care youth ages 14-21 in February 2022. A few of the questions include:

- Are you planning on attending college?
- Have you heard about the Free Application for Federal Student Aid (FAFSA)?
- What is your gender?
- Overall, how would you describe your current physical health?
- When was your last physical exam?
- How easy or difficult is it to access physical health services?
- Overall, how would you describe your current mental health?
- How easy or difficult is it to access mental health services?
- Do you feel that you have an unmet physical or mental health need?
- Are you currently employed?
- Do you currently have your driver's license?
- How would you describe the place where you currently live?
- Have you ever been unsure about where you were going to sleep at night?

240 youth participated in the survey. The survey data supports additional needs in medical/mental health care resources and accessibility, intentional pathways to secure the feeling being prepared to transition out of care and securing additional partnerships to mitigate homelessness of former foster youth.

YTSS engaged in an email collection event for youth 17+ from December 16, 2022, to December 22, 2022. Email addresses were then stored for upcoming National Youth in Transition Database surveys as well as a survey administered by the Children's Foundation and Elucidata beginning December 30, 2022. Please see attached questions, not to be released as questions are the property of Elucidata, to give an idea of the questions that were surveyed. Currently, we do not know the number of participants that completed the survey. Official outcomes from the December 2022. The survey was anticipated to be released in January 2023, however, those outcomes have not been released yet.

The YTSS division met with the Children's Foundation and the leadership team on April 3, 2023, to discuss Policy and Programmatic Consideration from Surveys administered to State Judges,

Biological and Foster Parents, and Youth mentioned above, however outcomes have not been officially released. Policy and Programmatic Considerations are as follows:

Resources

- Hire more child protection service workers and include adequate pay to stabilize the workforce
- Provide more information to foster parents and biological parents about resources that are available
- Increase the available services to children, youth, and families across the state, with a particular focus on mental health services and wrap-around services

Judicial System

- Create a unified youth court system with full-time judges who are focused explicitly on child protection and juvenile justice matters

Training and professional development

- Consideration for improving training and professional development of child protection service workers with a particular focus on preparation for court hearings, timely data entry prior to court, and review of home visits protocol
- Increase training for judges and referees

Housing

- Increase available housing opportunities for youth, with a particular focus for youth in transition

Education

- Create specific pathways with youth transitioning out of care for an educational/career development plan

Youth Advisory Committee: YTSS will continue to engage youth in I.L. program and policy changes/updates through monthly regional meetings and quarterly state level meetings. Mississippi's Youth Advisory Committee (YAC) is a youth leadership and advocacy training program coordinated through the YTSS Office.

Update: YTSS discussed participation among YACs and had decided to transition from 12 Regional YACs to 4 Regional YACs for Mississippi. Meetings are held with the overall goal of de-traumatizing their experience in custody based on things they see that need change, provide them with leadership skills, advocacy skills, and professional decorum. Regional YACs meet quarterly at a minimum, with each regional YAC board sending a representative for the State YAC meeting, which will also meet quarterly. The Mississippi YAC will focus on incorporating the

voice of youth who are in the custody of MDCPS, into the policy surrounding the age group. Board advisors (staff) and members will collaborate on bringing awareness to the specific issues they face, adequately addressing the correct chains of command, and strategically having their voices heard.

Regional Youth Advisory Council representation:

- Region 1 will incorporate Service Areas 1 and 3
- Region 2 will incorporate Service Areas 2 and 4
- Region 3 will incorporate Service Areas 5 and 6
- Region 4 will incorporate Service Area 7

YAC meetings were held for Region 1 on May 4th and 22nd .
YAC meetings were held for Region 2 on May 8th and May 24th
YAC meetings were held for Region 3 on May 22nd but there was no participation
YAC meetings were held for Region 4 on May 24th

Topics discussed were:

- Transportation/lack of transportation
- Amount of time to receive stipends or other funds from MDCPS
- Meeting other foster children (having someone that knows what you are going through)
- Separation from siblings (not being able to communicate with them)
- Not knowing what is going on with their case

State meeting will be held June 30, 2023 for further discussion on the above topics. An additional listening session is scheduled for the upcoming Summer 2023 Youth Retreat being held August 1-4, 2023. This session will include recommendations from MS Youth Voice. All council meetings touch on topics that either directly or indirectly affect the APSR. Service gaps and anticipated program changes will be outlined in upcoming quarterly reports.

The Commissioner's Council for Change: The Commissioner's Council for Change will continue to provide a unique opportunity for older youth in care to share lived foster care experience with the Commissioner of MDCPS as advocates and stakeholders. The Commissioner's Council will also provide a mentoring program for the youth to experience support and guidance from the Commissioner to develop mentoring skills that will foster a mentoring community among the youth. This program is designed to build a bridge between youth in care and the adults who develop policy and implement practice to improve the service delivery, supports and outcomes for youth in care through a partnership-based approach to child welfare.

Update: Due to change in division leadership and the challenge of COVID 19, a virtual Regional Youth Advisory Council Meeting picked back up in the 3rd Quarter of the State Fiscal Year and a small in-person Commissioner's Council for Change Meeting in the 4th Quarter. Attendees for

both meetings included youth of various race, ethnicity, and were within the ages of 15 and 20. Since resulting outcomes from both meetings were consistent, all outcomes are listed as follows:

- Receiving Chafee/Chafee ETV stipends and allowances timely-the result of this issue has been to pursue shorter ways within the MDCPS system to get youth Chafee/ETV funds. MDCPS is exploring the process of using a debit card and debit card code from sister agency, MDHS, and for utilization. If this avenue is not possible, MDCPS is also exploring procurement for local community agencies to disburse funds on behalf of MDCPS.
- Availability and Communication with Caseworkers and Transition Navigators-initiatives for this outcome will include check ins with youth and Transition Navigators every time a youth appraisal is conducted on how they feel availability/communication of caseworkers and Transition Navigators is progressing.
- Involvement in Case Planning-to assure that youth are involved in their independent living plan, each youth participates in their independent living planning youth appraisal at least every six (6) months or earlier as needed. Continuing education about rights and responsibilities to youth along with check ins will gauge if youth feel like they have a voice in their case planning.

These items will not only continue to be monitored during Regional Youth Advisory Council Meetings and the Commissioner's Council for Change but also through inquiry with Independent Living Program youth individually and also surveyed during other Independent Living Program activities.

Peer Support Network: Peer Support Specialist will serve in a mentorship capacity as an advocate to transition age youth in MDCPS custody by providing the following direct services:

- Will be former foster youth with lived experience.
- Liaise between agency decision makers and the youth to ensure youth representation in policy and procedures.
- Act as a point of contact for transition age youth to offer advice and experience.
- Attend the YAC meetings in their service area.
- Assist with education and transition support; and,
- Assist with the planning and facilitation of the two annual retreats and one annual youth conference.

Update: This program has not been reimplemented since COVID-19, but YTSS will review avenues available to restart this program through YAC meetings.

Division X Additional Funding from the Supporting Foster Youth and Families Through the Pandemic Act

YTSS implemented the distribution of the Division X funds in May 2021 by issuing direct stimulus payments to all youth in care as well as providing a technology stipend to all youth in care to purchase computers, tablets, phones, hot spots, software, hardware, etc. The agency is also issuing need-based payments to former foster youth via outreach through social media and an online application process in addition to issuing direct stimulus payments to youth who

exited foster care at or after the age of 14 and are not yet 27. The agency found that by using social media platforms to provide funding availability, as well as additional resources provided vital information so that youth felt included in MDCPS activities. The Youth Transition Support Services Independent Living Tab of the MDCPS website has been revamped to include extensive information about independent living which will include links to available employment opportunities with MDCPS. The agency advertised and made attempts to recruit former foster youth to work in the Youth Transition Support Service Division. So far, the YTSS has made one (1) offer to former foster youth who did not accept the position.

Due to old systems, current challenges include timeliness of payments reaching the youth, however MDCPS plans to kick off its CCWIS project in the fall of 2022.

- The Division X Pandemic Relief Funds are being distributed via check at the county level to youth in care and youth who are out of care that complete the application process.
- Youth in care ages 14 and 15 received a $1,000.00 technology stipend and a one-time direct payment of $600.00. This includes the URM youth in MDCPS custody.
- Youth in care age 16 and up received a $1,000.00 technology stipend and a one-time direct payment of $1,200.00. This includes the URM youth in MDCPS custody.
- Youth who exited care at or after the age of 14 and are not yet 27 received a direct stimulus payment of $1,200 and additional funds for housing (rent, deposits, down payments, mortgage payments, etc.) transportation (down payments, care payments, insurance, maintenance, repairs, etc.), education, childcare, healthcare, utilities, groceries, and personal needs through the online application process.
- Applications are verified for eligibility by YTSS staff through a case search in MACWIS.
- Once eligibility is verified requests are sent to the field staff to enter in MACWIS for payment

The process to distribute funds is as follows:

- A MACWIS Service request is entered by a county worker
- The service request is approved by the worker's supervisor
- The service request is approved by YTSS
- The bookkeeper issues a purchase order in MACWIS
- Funds are deposited in the county bank account for the purchase order
- A check is written to the youth or provider by the county bookkeeper
- The check is mailed to the youth, or the youth is contacted to pick up the check from the county office based on what the youth indicated on their application
- 367 youth in care age 14 & 15 have received pandemic stimulus funds
- 479 youth in care age 16-20 have received pandemic stimulus funds
- YTSS has processed 1,922 applications for Pandemic Funds

- 1,112 former foster youth have received Pandemic Fund payments
- The number of staff dedicated to this project and the method of payment have been barriers to the timeliness of fund distribution.

YTSS implemented the distribution of the Division X funds in May 2021 by issuing direct stimulus payments to all youth in care as well as providing a technology stipend to all youth in care to purchase computers, tablets, phones, hot spots, software, hardware, etc. The agency is also issuing need-based payments to former foster youth via outreach through social media and an online application process in addition to issuing direct stimulus payments to youth who exited foster care at or after the age of 14 and are not yet 27. The agency found that by using social media platforms to provide funding availability, forms, as well as additional resource links provided vital information so that youth felt included MDCPS activities and available resources. The Youth Transition Support Services Independent Living Tab of the MDCPS website has been revamped to include extensive information about independent living to include resource links including links to available employment opportunities with MDCPS. We have not encountered any barriers other than the timeliness of payments reaching the youth.

Update: Total youth served with Division X funding is 3,510. This number includes URM youth, MBCI youth, and MDCPS youth.

The Department used Division X funds to address housing needs for youth in-care and out-of-care. Housing assistance was offered up to $7500 per young adult towards rental deposits, rental assistance, utility deposits, utility assistance, and emergency short-term hotel stays. Rental assistance was the most requested housing assistance category. These requests included assistance to catch up on rent, to pay several months of rent in advance, and to pay rental deposits and the first couple months of rent. Additionally, the Department assisted young adults who were couch surfing and homeless with emergency hotel placements until long-term housing could be secured.

Through offering this assistance, the Department further recognized the importance of instilling basic life skills such as understanding a lease, maintaining housing and utilities, budgeting, not financially over-committing oneself, etc. The Department intends to implement more intense life skills training on these topics in the third and fourth quarters of the calendar year 2022. Credit unions, community banks, and other community-based organizations who offer these types of training have been contacted.

The Department is partnering with local and regional housing authorities through the state to secure FYI housing vouchers for youth in care or out of care and homeless. Memorandums of Understanding have been secured with several housing authorities and private child welfare providers to offer housing options and support to youth. See the *Partnership* section of the APSR for more information on these partnerships.

Approximately $689,000 remains in Division X funding. The remaining funds will be used to support MDCPS, URM and MBCI youth. The Department continues to use the funds to meet the needs of its 14 and older population in care to recently include driver's license, vehicle purchases, vehicle payments, and vehicle insurance. The Department will issue another round of stimulus checks to youth in-care 17 and older. This will cost approximately $542,000. Additionally, several opportunities have been provided to prevent social isolation and engage youth. These opportunities have been in the form of regional youth advisory councils held in April, May of 2022, a Graduation Ceremony for MDCPS Seniors held June 10, 2022, and the Commissioner's Council for Change scheduled to be held July 11, 2022. Youth Retreats and Camps were held in October 22-24, 2021, April 8-10, 2022, June 18-23, 2022, offering a variety of activities and life skills training over the course of a few days and nights. Youth can earn stipends at these events to apply towards their personal budgets.

Update: The award to MDCPS for Division X Chafee funding was $3,352,706.00. MDCPS expended $3,336,051.36.

Independent Living Support Services/Stipends

1. Life Skills Training Stipend: A $25.00 stipend can be earned for the completion of two (2) Online or Face-to-Face Skills Classes. Face-to Face skills classes are taught by Transition Navigators or a contracted agency. The Transition Navigator will document earned skills classes and will notify the COR Worker that the youth has accumulated the required classes. The Worker will submit the request to the Independent Living Coordinator through MACWIS under State Funds. This stipend will be issued directly to the youth.

2. Teen Advisory Board (TAB) Participation Stipend: A $25.00 stipend can be earned for participation in monthly scheduled YAC activities. Up to a $75.00 stipend can be earned for participation in the quarterly meetings. Up to $100.00 can be earned for attending the Commissioner's Youth Counsel for Change. The Navigator will document satisfactory participation in the training and will notify the COR Worker. The Worker will submit the request through MACWIS under State Funds. This stipend will be issued directly to the youth.

3. Senior Year Stipend: A $600.00 stipend is available to help defray senior/final year expenses for youth receiving a diploma, GED, or a Certificate of Attendance at the close of the school/program year in which the stipend is requested. The youth shall also be a participant in Independent Living Program activities. This stipend should be requested by the Transition Navigator during the youth's senior year, then entered in MACWIS, by the COR Worker under State Funds. Payment may be issued to an individual/party, including the youth. A statement from the youth's school verifying enrollment, as a senior/final year with anticipated graduation/completion being that same academic/program year, must be filed in the paper case

record in the county. Typical senior/final year expenses include, but not limited to, pictures, invitations, cap and gown, prom attire, senior trip expenses. As an advance, a general statement of upcoming expenses may be provided to support the Senior Yr. Stipend.

4. High School Graduation/GED/HSE Stipend: A $200.00 Graduation Stipend is available to all youth in custody who receive a high school diploma or successfully complete a GED program. A copy of the diploma or GED Certificate must be filed in the paper case record in the COR office. This stipend can be accessed from the appropriate MACWIS screen. This one-time should be issued to the youth as a graduation gift to spend as the youth wishes. A signed receipt from the youth must be sent to the bookkeeper in the COR.

5. College Stipend: A $600.00 (1st year of college) College Bound Stipend is available to youth in care who plan to attend a post-secondary education program. A $250.00 College bound stipend can be requested each year thereafter until their senior year to assist youth with initial college registration needs. This stipend is requested by the Transition Navigator, then approval is sent to the COR for entry in the appropriate MACWIS screens after the COR Worker receives verification that the youth has been accepted in a post-educational program. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. All purchases must be receipted, and all receipts kept in the COR office. Allowable purchases are items needed to furnish a residence (on or off campus) such as, but not limited to bedspreads, curtains, rugs, refrigerator, microwave, trunk, bookcase, small appliances, computer, furniture items, and books/resource materials.

6. Start-Up Stipend: A $1,500.00 Start-Up Stipend is available to youth who leave care after turning age seventeen (17) and who have participated in the available Independent Living Program activities. This stipend may be requested during the six months prior to release from custody and up to the six months following release from custody. Youth who have been approved for Foster Youth to Independence Program or an MDCPS approved Independent Living Placement, shall have the option to utilize this one-time stipend upon approval. This stipend must be issued directly to the vendor(s). Payment may be issued to an individual/party including the youth. Acceptable purchases may include any items associated with the establishment of a home such as, but not limited to rent deposits, utility deposits, dishes, cooking utensils, appliances, linens, furniture, cleaning supplies, curtains, and rugs. The Transition Navigator should request this one-time stipend then send approval to the COR to enter services in the appropriate MACWIS screens. A youth released from custody at age 17 or older and already has a job may use a portion of this stipend to assist in the purchase or repair of a vehicle, if the vehicle is needed in the youth's job and if the youth already have the minimal essential

items needed to live independently. This youth must show proof of having a driver's license and State required liability insurance.

7. Personal Enhancement Stipend: The Personal Enhancement Stipend is available to youth who need additional financial assistance with secondary educational needs, extracurricular activities, and college prep activities. Education needs are defined as but are not limited to tutoring; GED prep; ACT prep; and/or additional academic opportunities beyond school curricula. Extra-curricular activities include but are not limited to fees for sports; fees for school clubs; participation in other extracurricular activities. College prep activities include but are not limited to housing fees; college/post-secondary education application fees; or college/postsecondary education registration fees. This stipend was developed to fill the financial gaps for youth needing additional funds to participate in school activities and to continue their education beyond high school or GED. The amount of this stipend is based on the need. A maximum of $1000.00 will be allowed per request per FFY.

8. Peer Mentoring Stipend: A $25.00 Peer Mentoring Stipend is available to young people participating as a program peer mentor to younger youth in care. A peer mentor must see their mentee in-person at least twice a month to earn the stipend. Mentors are identified through the Teen Advisory Board. Mentor/mentee interaction happens as a part of Teen Advisory Board activities. This stipend was developed to encourage youth participating in Teen Advisory Board to become mentors.

9. Youth Conference/Retreat/Summer Camp Stipend: A youth may receive a maximum cash stipend of $500.00 with actual amounts determined by the Director of Permanency of YTSS Director for successful completion or participation in youth conferences, retreats, or summer camps. The amount determined will be based on application approval, length of event and need for supplies. This stipend may be issued in advance for certain events dependent on the need for items to overcome any challenges for participation. This stipend will be requested by the Transition Navigator then approval sent to the COR for entry in MACWIS.

Support Service/Stipend July 1, 2020-June 30, 2021	**FY 2021 # Youth**	**FFY 2021 Amount Disbursed**
IL Aftercare	0	0
IL College Bound Stipend	14	$8,400.00
IL College Graduation Stipend	0	0
IL Contract Services	0	0
IL Educational Training Voucher	141	$705,000.00
IL GED/Certificate of Attendance Stipend	17	$3,400.00
IL High School Graduation Stipend	25	$5000.00
IL Initial Pre-Assessment Stipend	0	0
IL Personal Enhancement Stipend	505	$278,450.45

IL Senior Year Stipend	51	$25, 335.18

Update: In an effort to give the most accurate information through June 30, 2023, this table will be updated in the 2024 First Quarter Update.

Pending:

In review of data from reports pulled for the reporting period, the following observations and additions have occurred.

- Since payment of funds to youth is lengthy, stipends that show requested or approved in the MDCPS case system (MACWIS) but not paid have not been included in the above chart.
- The following services/stipends do not appear to have been utilized and will be reviewed for potential coding errors, removal or recategorized: IL Aftercare, IL Contract Services, Initial Pre-Assessment Stipend.
- IL Skills Stipend and IL Start Up Stipend have been added.

NYTD Data Collection and Collaboration

The State began offering independent living services to youth ages 14 and up in-house through the newly developed Youth Transition Support Services (YTSS) on June 1, 2018. This allows the agency to improve the outcomes for youth transitioning out of care and broaden the service array available to youth based on individualized needs. NYTD outcomes will directly affect our ability to indicate any gaps in services for youth while in care, during their transition out of care, and once they are out of care by implementing updated policy and procedures identified through the completion of the NYTD survey.

The data captured through NYTD is presented to agency leadership, the Youth Advisory Council and to community partners as evidence to support ongoing planning to implement services based on lived experience of youth. The data captured through NYTD allows YTSS to identify gaps in services and preparation for youth that could potentially mitigate the adverse outcomes youth are experiencing after their release from care. Feedback from youth, partners and other Child Welfare agencies include having an individual with lived experience administer the survey, conduct regular outreach such as monthly check-in calls or birthday cards containing cash to youth to assist in establishing rapport and maintaining contact with youth.

Update: Due to division turn-over and IT turn-over, Mississippi has struggled with survey administration processes and even incurred non-compliance with participation rates in reporting periods 2021B, 2022A, and 2022B.

Positives

- Participation Rate Non-compliance has decreased since 2021B

- YTSS now has a dedicated TN assigned to NYTD
- MDCPS in is compliance with 2023A Baseline

Challenges:

- Although in-care youth should be accessible, contact information for former foster youth have not been adequately stored or maintained to conduct survey administration. Division leadership is in current review of being able to pull email addresses through the youth appraisal in the form of a report from the MDCPS CORE reports.
- While NYTD data has been collected and utilized on several levels, the concern for accurate information remains. Navigation of errors, reports, etc. remains cumbersome.

NYTD will continue to be a focus for both division leadership and staff as the data is vital in tailoring services for both in-care and former foster youth. Technical assistance will continue to be requested as the division learns systems and best practices for outreach and survey administration. MDCPS also plans to assess if NYTD can be outsourced to a local community agency that can specifically focus on the importance of the survey and survey findings.

Coordinating Services with "Other" Federal and State Programs for Youth

The Independent Living program continues to coordinate efforts by collaborating with First Place for Youth and Jim Casey and government agencies such as the Mississippi Department of Human Services, Institution of Higher Learning (IHL), Community Colleges, Mental Health, and Medicaid are engaged to ensure processes to receive services are clear and manageable for youth transitioning out of custody. Non-profit agencies that focus on education, employment, housing, and various needed services are engaged to ensure youth have connections to community-based organizations that can assist them during transition. Participating non-profit agencies are:

Placement and Adoption

Methodist Children's Home: Congregate care/ transitional living facilities.

Mississippi Families for Kids (MFFK) assists with finding and licensing homes for non-therapeutic children who are legally free for adoption and older, provides case management services for the Wendy's Workforce Development program that employs foster youth.

Wendy's Wonderful Kids: Recently, MDCPS established partnership with the Dave Thomas Foundation to bring the Wendy's Wonderful Kid's program in-house. This unique partnership will fund adoption professionals to serve children and youth at risk of aging out of foster care without a family, including teenagers, children with special needs, and siblings.

Mississippi Governor Reeves announced the expansion of the Dave Thomas Foundation for Adoption's signature program, Wendy's Wonderful Kids, which focuses on finding adoptive homes for children within the Mississippi foster care system. The foundation, originally founded

by the fast-food tycoon Dave Thomas, is set to provide $1.7 million as well as their training program to the MDCPS. The partnership will fund 10 experienced adoption professionals to serve children who are at risk of foster care without a family.

Since its founding in 1992, the vision of the Dave Thomas Foundation has been for every child to have a permanent home and loving family. To date, the Wendy's Wonderful Kids program has found adoptive homes for more than 12,000 children across the United States, including 125 youth in Mississippi.

MDCPS is also drafting/finalizing a license type for a supervised independent living placement so that more apartment units on provider campuses may be utilized.

The Voice of Former Foster Youth

First Place for Youth: First Place for Youth, based in Oakland California, is an agency that focused on best practices for transition age youth. First Place has partnered with MDCPS with MS Youth Voice Alumni Board to provide insight in tailoring the Youth Transition Support Services program design, youth centered training modules and practice guides for MDCPS workers. First Place for Youth is continuing to partner with MDCPS/YTSS to improve data collection, policy development/implementation, and program design. First Place for Youth with the assistance of MDCPS, IHL and other vital community members created and secured legislation for the Kincade FAITH scholarship for both in-care and former foster youth meeting eligibility requirements.

The State Rep. Bill Kinkade Fostering Access and Inspiring True Hope (FAITH) Scholarship was created by the 2022 Legislature to provide full COA scholarships to students who have interacted with the state's foster care system. On November 4, 2022, MDCPS, Sunnybrook Children's Home, Baptist Children's Village, and MS Department of Financial Aid discussed final eligibility for FAITH scholarship recipients, application dates, and determining eligibility from MDCPS.

The scholarship was first awarded for the 2023/2024 academic school year for post-secondary institutions for youth. Certification by MDCPS or other certified living facilities through Mississippi Aid Application Portal (MAAP). All MDCPS administrators gained access as of March 1, 2023, and began eligibility on over 400 applications on March 28, 2023.

Access to Medicaid for Former Foster Youth

The Mississippi Division of Medicaid provides mandatory coverage for former foster care youth who are under age twenty-six (26) if the child was in foster care and Medicaid upon reaching the age of eighteen (18) or prior to age 21 when released from foster care. Continued Medicaid coverage is certified by the Division of Medicaid in coordination with MDCPS. YTSS was recently provided a Medicaid Fact Sheet for youth transitioning out of MDCPS custody from the Mississippi Division of Medicaid. The Fact Sheet also includes a support email for transitioning

youth that may have questions or experience challenges with coverage after custody exit. YTSS will continue to discuss Medicaid options with in-care youth and will incorporate information from the Fact Sheet in youth interactions. The Fact Sheet is also posted on the Youth Transition Support Services page of the MDCPS website, sent to partners, and will be sent out agency wide for all staff members to reference and disseminate as needed.

Collaboration with Unaccompanied Refugee Minor Programs (URM) for Chafee Services and Education and Training Vouchers

MDCPS/YTSS works with MDCPS Hinds Co. staff and Catholic Charities to ensure URM youth are aware and offered YTSS and ETV Program opportunities and services. MDCPS works closely with unaccompanied refugee minors in the Education and Training Vouchers Program. MDCPS staff works closely with Catholic Charities' Unaccompanied Refugee Program to ensure that youth are aware of the program and application process.

Education and Training Vouchers (ETV) Program (section 477(i) of the Act)

There has been no eligibility requirement updates, policy updates or financial disbursement updates for ETV since the 2023 APSR Update. The below is the same information submitted in the 2023 APSR Update.

Youth Transition Support Services (YTSS) is responsible for enrolling, approving, and tracking current and former foster youth receiving Educational Training Voucher (ETV) funds. This number may increase or decrease from year to year based on the following factors:

- Youth attending accredited post-secondary educational programs.
- Youth's ability to maintain a 2.0 GPA necessary for eligibility.
- Youth completing the enrollment process required to receive funds.
- Youth who are eligible to receive ETV funds based on the federal guidelines.

Yearly ETV enrollment for this reporting period can be found in the ETV (Attachment C). YTSS provides support services to assist youth achieving educational success based on each youth's identified individual needs.

One of the requirements for foster/former foster youth is to apply for the Education Training Vouchers (ETV). Besides conducting individual and group outreach activities to in-care youth about the program, this has established an additional outreach avenue to promote the program to former foster youth enrolling in ETV. The ETV Enrollment application has already been drafted

for Academic Year 2023/2024 and was released to the YTSS Transition Navigators in the 4th Quarter.

YTSS has added additional education resources to include an educational resource to answer questions about Financial Aid for Post-Secondary Education written by Intelligent.com Higher Education Team. This resource addresses why financial aid matters, work-study options, how federal grants can help pay for college and a link to the Free Application for Federal Student Aid (FAFSA). The resource also lists additional resources such as StudentAid.gov and the U.S. Department of Education.

The YTSS Division has also created a letter to assist foster/former foster youth in confirming their foster care status for enrollment in a post -secondary educational/vocational pathway. We began consistently providing this letter to youth in March 2023.

ETV Policy

MDCPS/YTSS policy has been updated to extend eligibility to youth who experienced custody based on the following criteria:

- Youth who have left custody at the age of 16 year or older, and not yet reached 21 years of age.
- Youth who were reunified on or after reaching age 16 and have not yet attained 21 years of age.
- Youth who were adopted on or after reaching age 16 and have not attained 21 years of age; and
- Youth who participated in the ETV Program prior to their 23rd birthday.

Youth participating in the ETV Program prior to their 23rd birthday is eligible to continue receiving ETV funds until their 26th birthday or for a maximum of 60 months. A month is calculated at 30 calendar days. The months of enrollment do not have to be consecutive. Failure of a class or semester will still be counted for use of ETV funds. Youth who have not participated in the ETV program prior to their 23rd birthday will not be eligible for ETV funds.

A. The following are eligible for ETV funds.

1. Youth currently in custody.
2. Youth who have left custody at the age of 16 years or older and have not yet reached 21 years of age.
3. Youth who were reunified on or after reaching age 16 and have not yet attained 21 years of age.

4. Youth who were adopted on or after reaching age 16 and have not yet attained 21 years of age; and
5. Youth who participated in the ETV Program prior to their 23rd birthday.

B. Youth must have a high school diploma, GED, or a certificate of attendance to receive ETV funds.

C. Youth must maintain a minimum GPA of 2.0 to continue receiving ETV funds. Youth who are unable to receive Pell Grants or subsidized loans because of GPA will not be eligible for ETV funds.

ETV Financial Disbursements

Youth are eligible to receive up to $5,000.00 per federal fiscal year for post-secondary education advancement. Payment of tuition takes priority over non-tuition post-secondary cost. Youth must present proof of tuition payment or loan approval before ETV funds are released. Youth who apply for ETV funds during the enrollment period specified by MDCPS/YTSS will be eligible to the maximum ETV amount. Youth who enroll after the specified enrollment period ends may receive a decreased amount of ETV funds, based on Chafee ETV availability.

Additional ETV Pandemic Funds are currently being allocated to eligible current and former foster youth and will continue to be utilized until September 30, 2022.

Division X Supplemental/ETV Funds

The distribution of the Division X ETV funds began October 1, 2021, after youth have enrolled in the ETV Program and for youth who requested pandemic funds for education and meet the Division X requirements. Division X ETV funds will be distributed through the county offices as follows:

Update:

- The Transition Navigator submits an ETV request for eligible youth.
- If approved, the approval is sent to the Transition Navigator, then to the county worker
- A MACWIS Service request is entered by a county worker.
- The service request is approved by the worker's supervisor.
- The service request is approved by YTSS.
- The bookkeeper issues a purchase order in MACWIS.
- Funds are deposited in the county bank account for the purchase order.
- A check is written to the youth or provider by the county bookkeeper.
- The check is mailed to the youth, or the youth is contacted to pick up the check from the county office based on what the youth indicated on their application.

The Department offered and continues to offer Education assistance through Division X Funding. This assistance included paying GED fees, past due tuition bills, students' loans that resulted from a youth attempting to pay past due student debt and stay in school, etc. Additionally, the

Department provided funding to youth for necessities such as desks, desk chairs, school clothing, and left-over cost of attendance fees that may not have been covered through state and federal financial aid grants and previous allotments of ETV. In the 2021-2022 academic school year, pandemic funding assisted approximately one hundred sixty-four (164) youth. MDCPS plans to use remaining funds for outreach to previous ETV students and other eligible students that may be eligible for ETV and an additional $2500 stimulus payment to 2022-2023 ETV students who may need additional upfront expenses to start the 2022-2023 academic school year. Currently ETV student count is one hundred thirty-seven (137).

Chafee Training

Chafee training continues to be provided by the Transition Navigator in their services areas directly to the frontline staff, supervisors, and Regional Directors either monthly or as needed to ensure the youth receive the supports and services necessary for a successful transition out of foster care. Designated YTSS Transition Navigator staff provide Chafee training during Pre-Service for new hires and Supervisors on an on-going basis.

The YTSS Independent Living Division plans to begin assessing gaps in independent living services especially as it relates to racial and gender equality to establish additional training needs.

Consultation with Tribes (section 477(b)(3)(G) of the Act)

A partnership between the MBCI was developed and Choctaw youth were eligible to receive Division X Pandemic Relief Funds through the John H. Chafee Program administered by the MDCPS Youth Transition Support Services (YTSS) as well as ongoing services and funds provided by MDCPS YTSS began in June of 2021. As mentioned, stimulus payments along with technology stipends were issued to all eligible youth. Through this partnership, YTSS will make all services, programs, initiatives, and stipends available to eligible Choctaw youth as outlined in the MDCPS policy. The processes for documentation and fund requests are being developed by MDCPS leadership to ensure compliance with all federal requirements. The MBCI will be included in the annual MDCPS joint planning session and the Youth Advisory Council (YAC) to provide the needed services and programs specific to tribal youth through a youth driven model. Eligible tribal youth will receive individualized services from the Transition Navigator assigned to their region.

The Transition Navigators assigned to region IV-N and IV-S make monthly contact with the Mississippi Band of Choctaw Indians (MBCI) to offer supports, life skills training and services to youth in care age 14 and older that are provided through MDCPS. The services available to the MBCI are as follows:

- Youth Appraisal completion to identify needs.
- Community based resources
- Stipends

- Youth Advisory Council participation
- Educational stability support
- ETV Enrollment

The MBCI are provided the opportunity to request services, resources, and supports through direct communication with the Transition Navigators assigned to their area. The MBCI was also provided the information regarding the Chafee Division X funds application process and the availability of funds for current and former foster youth.

VII. Consultation and Coordination Between States and Tribes

As mentioned earlier, the MDCPS collaborated with Mississippi Band of Choctaw Indians to finalize the MOU in October 2020 for the ongoing coordination of engagement between the two entities (see Attachment F). A copy of the state's 2024 APSR final report will be available on MDCPS's website. The MDCPS website is: https://www.mdcps.ms.gov/about/federal-reports. Additionally, an electronic copy of the State's 2024 APSR will be emailed to MBCI's designated contact.

Tribal On-going Collaboration

MDCPS collaborated with Mississippi Band of Choctaw Indians to finalize the MOU in October 2020 for the ongoing coordination of engagement between the two entities (see Attachment F). MDCPS consults with tribe representatives, Mae Bell, Coress Brandon, Melinda Ben, and Alyssa Ben. A copy of the state's 2024 APSR final report will be available on MDCPS's website. The MDCPS website is: https://www.mdcps.ms.gov/reports/. Additionally, an electronic copy of the State's 2024 APSR will be emailed to MBCI's designated contact.

Also, MDCPS and the Choctaw tribe meet quarterly to discuss any issues or concerns and share information and resources. Representatives from MDCPS and the tribe are invited to attend the quarterly meetings. Representatives from MDCPS include a staff attorney; the Eastern Region Office Director; and field staff from the Eastern Region, including Regional Directors, Regional Social Work Supervisors, and Area Social Work Supervisors. Representatives from the tribe include a staff attorney from the Office of the Attorney General, individuals from the Children and Family Services Program, and individuals from the Department of Early Childhood Development.

ICWA sets out federal requirements regarding removal and placement of Native American children in foster or adoptive homes. ICWA aims to preserve tribal culture and safeguard the rights of Native American children to their heritage.

Update: MDCPS consults with tribe representatives, Mae Bell, Coress Brandon, Melinda Ben, Alyssa Ben, Jannifer Willis, and Marcia Frazier. MDCPS met on May 11, 2022, to discuss any

issues or concerns and share information and resources. Transition Navigators are scheduled to be onsite at the main campus at least monthly to administer services and consult with tribe members. Agenda items discussed included:

- Pandemic payments to Tribal Youth- some payments had not been received. Since the meeting, YTSS leadership and Transition Navigators have worked with the Tribe and the county office to make sure any checks at the county office were delivered to the Tribe.
- Resuming Face-to-Face Meetings with Tribal Youth each month scheduled around Tribal staff and youth availability. Transition Navigators are scheduled to be onsite at the main campus at least monthly to administer same services available to youth in MDCPS custody and consult with tribe members regarding any gaps in or additional needed services.

VIII. CAPTA State Plan Requirements and Updates

Attachment D

IX. Updates to Targeted Plans within the 2020-2024 CFSP

Foster and Adoptive Parent Diligent Recruitment Plan (see attachment)
Health Care Oversight and Coordination Plan (see attachment)
Disaster Plan (see attachment)
Training Plan (see attachment)
MDCPS Plan for Centralized Hiring (see attachment)

X. Statistical and Supporting Information

Information on Child Protective Service Workforce:

The chart reflects the education, qualifications, and training requirements that are established by the state for child protection service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions. A minimum of 270 hours pre-training and 40 hours ongoing training (annual) is required for each position. An additional 40 hours of Clinical Supervisory Training is required for Social Services Team Lead (County or Unit Supervisor Level I/II) and Social Services Supervisor (Regional Level Supervisor):

Statistical and Supporting Information

Position	Function	Minimum Qualifications
Social Services Specialist I	Frontline Caseworker Level I	BS/BA in related field
Social Services Specialist I	Frontline Caseworker Level II	BS/BA in related field + 1 year of experience
Social Services Specialist II	Frontline Caseworker Level III	MS/MA in related field or BS/BA in related field + 2 years of experience
Social Services Specialist II	Frontline Caseworker Level IV	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience
Social Services Specialist I	Adoption Caseworker Level I	BS/BA in related field
Social Services Specialist I	Adoption Caseworker Level II	BS/BA in related field + 1 year of experience
Social Services Specialist II	Adoption Caseworker Level III	MS/MA in related field or BS/BA in related field + 2 years of experience
Social Services Specialist II	Adoption Caseworker Level IV	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience
Social Services Specialist I	Licensure Caseworker Level I	BS/BA in related field
Social Services Specialist I	Licensure Caseworker Level II	BS/BA in related field + 1 year of experience
Social Services Specialist II	Licensure Caseworker Level III	MS/MA in related field or BS/BA in related field + 2 years of experience
Social Services Specialist II	Licensure Caseworker Level IV	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience

Position	Function	Minimum Qualifications
Social Services Specialist I	Continuous Quality Assurance Coordinator Level I	BS/BA in related field
Social Services Specialist I	Continuous Quality Assurance Coordinator Level II	BS/BA in related field year + 1 year of experience
Social Services Specialist II	Continuous Quality Assurance Coordinator Level III	MS/MA in related field or BS/BA in related field + 2 years of experience
Social Services Specialist II	Continuous Quality Assurance Coordinator Level IV	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience
Social Services Specialist II	Investigation Specialist Level I	MS/MA in related field or BS/BA in related field + 2 years of experience
Social Services Specialist II	Investigation Specialist II	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience
Social Services Specialist II	Investigation Specialist III	MS/MA in related field + 4 years of experience or BS/BA in related field + 6 years of experience
Social Services Team Lead	County or Unit Supervisor Level I	MS/MA in a related field + 4 years of experience or BS/BA in related field + 5 years of experience
Social Services Team Lead	County or Unit Supervisor Level II	LSW +4 years of experience or LSW and in graduate school + 3 years of experience or LSW and MSW +2 years of experience
Social Services Supervisor	Regional level supervisor	LSW + 6 years of experience OR LSW and MSW + 3 years of experience

In accordance with the state's 2nd MSA, which went into effect in 2019, MDCPS caseworkers shall receive a minimum of 20 hours of in-service training, and all supervisors shall receive a minimum of 12 hours of in-service training. Also, beginning in 2019, MDCPS caseworkers shall receive a minimum of 40 hours of in-service training each year, and all supervisors shall receive a minimum of 24 hours of in-service training each year. MDCPS caseworker supervisors, within 90 days of hire or promotion, shall receive a minimum of 40 hours of training, directed specifically at the supervision of child welfare case workers. The MDCPS workforce is comprised of 1,629 employees. Demographically, the makeup of the workforce is as follows:

Race	**Number of MDCPS Employees**	**Percentage of MDCPS Workforce**
American Indian	3	Less than 1%
Caucasian	417	26%
Hispanic	7	Less than 1%
African American	1,193	73%
Asian	6	Less than 1%
Other	3	Less than 1%
Sex	**Number of MDCPS Employees**	**Percentage of MDCPS Workforce**
Male	113	7%
Female	1,516	93%

According to 2nd MSA and STRO, 90% of MDCPS caseworkers will have caseloads which do not exceed the caseload standards set forth below. Individual MDCPS caseworkers with generic caseloads shall not carry a mixed caseload that exceeds 100% capacity. Also, 85% of MDCPS supervisors shall be responsible for no more than five (5) caseworkers.

MDCPS caseworkers carry a mixed caseload except for licensure and adoption workers.

The chart below shows the case weights of the direct services used to calculate caseload compliance:

MDCPS Caseload Standards:

Role	Standards	Weight Per Case - 100% Capacity
Child Protection (Investigations Level 2 and 3)	14 Investigations	0.0714
Ongoing Foster Care (Placement Responsibility & Service)	14 children	0.0714
Ongoing Foster Care (Placement County of Responsibility)		0.0357
Ongoing Foster Care (Placement County of Service)		0.0357
In-Home Cases (Protection Responsibility & Service, Prevention Responsibility & Service, and Interstate Compact on the Placement of Children (ICPC Incoming)	17 families	0.0588
In–Home Cases (Protection or Prevention County of Responsibility)		0.0294
In-Home Cases		0.0294

Role	Standards	Weight Per Case - 100% Capacity
(Protection or Prevention County of Service)		
Adoption (Adoption County of Service)	15 Children	0.0667
New Application Licensing (Resource Inquiry, Interstate Compact on the Placement of Children (ICPC) and Foster Home Study)	15 Homes	0.0667
Renewal Licensing (Foster Home Supervision and Foster Home Renewal)	36 homes	0.0278

For most of the reporting period, the Intake staff were employed through a contract which provided staffing for the centralized intake services of MDCPS with direct supervision and training by MDCPS employees. In May of 2022, the process was initiated to hire full-time Intake Specialists as MDCPS employees. Intake staff already performing intake duties through the contractor were invited to apply. As the full-time intake positions are filled with MDCPS employees, the contractor will continue to supply the staffing for part-time staff working overnight hours, weekends, holidays, and any other time when additional coverage is needed. Since January 2023, 13 full time Intake Specialists and 1 full time Intake Supervisor have been hired to staff MCIA.

Mississippi Centralized Intake and Assessment (MCIA) staff responsibilities include receiving, assessing, screening, documenting, and disseminating reports of child abuse and neglect called in to the hotline or received through electronic web reporting. Assessment was added to the name of the department to reflect the focus on more detailed assessment for the screening of intakes through. This approach will prepare intake staff for the enhancement of intake duties to include assessment and screening decisions at the point of intake as the department work through procuring a Structured Decision-Making Tool. The development of this protocol began in May 2022.

Staff hired under the contract as Intake Specialists are to receive 40 hours of classroom training and 40 additional hours of on-the-job training or until the Intake Specialist can exhibit the competency required. On-the-job training and coaching by individual supervisors are important components utilized as Intake Specialists encounter new situations and learn the application of policy and screening decisions for those situations. Focused ongoing small-group trainings resumed in May 2022 to provide refresher trainings on specific topics.

The contracted Intake Specialists can advance by applying for MDCPS employee Intake Specialist positions and can apply for supervisory positions within MCIA. Intake Specialists can also apply for other positions with MDCPS for which they meet the qualifications.

The minimum education and qualification requirements mirror the qualifications of other Social Service Specialist I position within the agency. The minimum education qualification requirements for supervisory intake positions mirror the qualifications of other Social Service Team Lead positions within the agency.

A. Juvenile Justice Transfers:

Division of Youth Services (DYS) is the division that administers probation, aftercare services, and institutional programs for juveniles who have been adjudged delinquent in Mississippi Youth Courts or are at risk of becoming delinquent. The data sources for this information continues to come from MYCIDs, MDHS, Division of Youth Services (DYS)'s Oakley Youth Development Center (OYDC), and the Community Services Crossover Case Reporting Form. Data input for MYCIDs consists of the following staff:

- For delinquency cases, information is input by the DYS worker or Intake Officer.
- For truancy and educational neglect, information is input by the School Attendance Officer or Intake Officer.
- For abuse and neglect cases, the MDCPS case worker begins inputting data into MYCIDs within 24 hours of the initial investigation and must submit a completed report within 30 days to the courts and the court designee.

Youth released from the custody of OYDC are placed on parole for 6 months; however, the parole can be extended for an additional 6 months regardless of foster or adoptive placement. There were three children who MDCPS custody to the custody of a juvenile justice facility between July 1, 2021, and June 30, 2022.

B. Education and Training Vouchers:

See Attachment C for Mississippi ETV awards from July 1, 2021, through June 30, 2022, and July 1, 2022, through June 30, 2023.

C. Inter-Country Adoptions:

There were no children, adopted from other countries that entered state custody in FY 2023 because of the disruption of a placement for adoption or the dissolution of an adoption.

D. Monthly Caseworker Visit Data:

MDCPS submitted the FFY 2022 Annual Caseworker Visits data to the Children's Bureau in December 2022. The information below was submitted in the report.

For the period October 1, 2021 – September 30, 2022 (FFY 22), MDCPS's performance was:

The total number of visits made by a caseworker monthly to children in foster care during a fiscal year must not be less than 95% of the total number of such visits that would occur if each child were visited once every month while in care – 94.22%.

The percentage of visits that occurred in the child's residence is at least 50% of the total number of monthly visits made be caseworker to children in foster care during a fiscal year must occur in the– 88.74%.

XI. Financial Information

1. Payment Limitations

A. Title IV-B, Subpart 1

The MDCPS utilized FY2005 Child Welfare Services (CWS) funds to assist the State in providing the following:

1. Adoption Assistance Payments: $1,589,638 (FFP)/ $529,879 **(State Match)**
2. Foster Care Maintenance Payments: $2,179,983 (FFP) / $726,661 **(State Match)**

The total expenditures for FY 2005 Title IV-B, subpart 1 was $3,769,621.

B. Title IV-B, Subpart 2

The FY2020 state and local share expenditure amounts for the purposes of Title IV-B, Subpart 2 was $2,385,717. In addition, the FY 1992 base year amount for the Title IV-B, Subpart 2, Promoting Safe and Stable Families grant required to meet the non-sup plantation requirements in Section 432(a)(7)(A) of the act for the State of Mississippi was $900,347. Title IV-B, Subpart 2, funds will be allocated as follows: 20% Family Preservation, 25% Family Support, 20% Time Limited Reunification, and 25% Adoption Promotion and Support.

MDCPS will make every effort to ensure a minimum of 20% will be allocated to Family Support Services and Time-Limited Reunification; however, the number of clients served for each category is dependent upon the number of referrals received from the local field offices which are based on the needs of the children and families within their local communities. As a result of the referral-based system, client needs tend to fluctuate from year to year and MDCPS cannot determine what those needs will be in advance. Based

upon prior year trends, MDCPS anticipates an increased demand for Family Preservation Services which could reduce the demand for clients in need of Family Support Services and Time-Limited Reunification Services.

All programs receiving Promoting Safe & Stable Families funding are at or above the 20% requirement. Administrative costs are set at the 10% requirement. For Chafee, foster payments are not being paid from this funding source allowing us to stay below the 30% cap described.

2. Current Year Funding – 2021 Reallotments
   The MDCPS is currently not requesting any reallotments.

3. FY 2022 Budget Request
   The MDCPS has no changes currently.

4. FY 2019 Title IV-B Expenditure Report
   The MDCPS has no changes currently.

5. Expenditure Periods and Submission of Standard Form 425
   All requested SF-425s were provided to CB on July 22, 2021.

CARES Act Supplemental Funds
The MS Cares Act award was used to cover COVID related purchases for the agency to continue operations during the pandemic. This included PPE and safety items that were distributed to our workers in the field so they could continue to serve the children of Mississippi safely during the pandemic. (Please see the attached Executive Memorandum regarding Cares Act Supplemental Funding for Title IV-B)

XII. Publication and State Contact

Publication
A copy of the state's approved 2024 APSR and other required documents will be available on MDCPS's website. The MDCPS's website is: https://www.mdcps.ms.gov/about/federal-reports. Additionally, an electronic copy of the of the 2024 APSR will also be emailed to its stakeholders by MDCPS.

State Contact
The state contact for the 2024 APSR and other federal plans is Karen Austin, Director of Reporting Unit. The contact email address is Karen.Austin@mdcps.ms.gov.

XIII. 2024 APSR Attachments

MDCPS's Organizational Chart - See Attachment A
Financial Information - See Attachment B

ETV Attachment - See Attachment C
CAPTA State Plan Requirements and Updates - See Attachment D
Targeted Plans