



STATE OF MISSISSIPPI:
2020-2024: CHILD AND FAMILY SERVICES PLAN
(CFSP)

2023 ANNUAL PROGRESS SERVICE REPORT (APSR)
JULY 1, 2021-JUNE 30, 2022

Table Contents

I. Organizational Structure, Collaboration and Vision	
A. State Agency Administering the Programs.....	4
B. Vision, Mission, and Philosophy of the State	10
C. Priorities for Creating an Equitable Child Welfare System	11
II. Collaboration	14
III. Assessment of Current Performance in Improving Outcomes	36
IV. Quality Assurance System	113
V. Plan for Enacting the State’s Vision	117
VI. Update on the Service Descriptions	129
A. Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1).....	129
B. Services for Children Adopted from Other Countries (section 422(b)(11) of the Act).....	129
C. Services for Children Under the Age of Five (section 422(b)(18) of the Act)	130
D. Efforts to Track and Prevent Child Maltreatment Deaths	136
E. Emergency Funding for MaryLee Allen Promoting Safe and Stable Families (Division X) ...	138
F. Updates to Adoption Promotion and Support Services.....	124
G. Service Decision-Making process for Family Support Services (45 CFR 1357.15(r))	157
H. Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act)	158
I. Kinship Navigator Funding (title IV-B, subpart 2)	132
J. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits	165
K. Additional Services Information.....	165
VII. John H. Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program) (section 477 of the Act)	136
VIII. Consultation and Coordination Between States and Tribes	192
X. Updates to Targeted Plans within the 2020-2024 CFSP	193
XI. Statistical and Supporting Information	194
A. Juvenile Justice Transfers:	202
B. Education and Training Vouchers:	202
C. Inter-Country Adoptions:	202
D. Monthly Caseworker Visit Data:	202
XII. Financial Information	203
XIII. Publication and State Contact	204
A. Publication	204
B. State Contact	204
XIII. 2023 APSR Attachments.....	204

2023 Annual Progress and Services Report

A. MDCPS's Organizational Chart – See Attachment A	204
B. Financial Information – See Attachment B	204
C. ETV Attachment – See Attachment C	204
D. CAPTAS State Plan Requirements and Updates- See Attachment D.....	204
E. Targeted Plans	203

I. Organizational Structure, Vision, and Mission

A. State Agency Administering the Programs

The Mississippi Department of Child Protection Services (MDCPS) is Mississippi's lead child welfare agency, responsible for administering Mississippi's programs under Title IV-B and Title IV-E of Social Security Act. 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 MDHS agree to share administrative support services.¹ 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.

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."² This statutory authority includes primary responsibility for protective services for children, foster care, adoption, interstate compact, and licensure.³

MDCPS is led by an executive leadership team, which includes a Commissioner, Principal Deputy Commissioner, Deputy Commissioner of Child Safety, Deputy Commissioner of Child Welfare, Deputy Commissioner of Administration, and Chief Legal Counsel. Commissioner Andrea A. Sanders serves as commissioner. A chart of the agency's structure is located under Attachment A.

The following predominant areas are detailed below:

- **Deputy Commissioner of Child Safety:** The Deputy Commissioner of Child Safety leads MDCPS's efforts related to continuous quality improvement, federal data reporting, MSA data reporting, and special investigations.
 - **Mississippi Centralized Intake and Assessment (MCIA):** Mississippi Centralized Intake and Assessment is the child abuse and neglect hotline that operates per legal mandate 24 hours per day/7 days per week. Calls and electronic reports are received with information about child abuse, child neglect, human trafficking, or other services needed for the safety or well-being of a child. This information is collected, assessed, documented, screened, and disseminated to appropriate staff for handling within required parameters as set in policies and procedures. Quality assurance measures are

¹ Miss. Code Ann. 43-26-1.

² *Id.*

³ Miss. Code Ann. 43-1-51.

- used to track performance and ensure compliance with state requirements, federal requirements, and the agency's mission.
- **Special Investigations:** This unit is responsible for investigating all allegations of child maltreatment of children that are in MDCPS custody and any fatality reported to MDCPS statewide.
 - **Deputy Commissioner of Child Welfare:** The Deputy Commissioner of Child Welfare leads MDCPS's field and programmatic staff through seven (7) direct reports: Director of Permanency Support Services, Director of Licensure, Director of Therapeutic and Prevention Services, Director of Field Operations, East, Director of Field Operations, West, Director of Field Operations, South, and a Staff Officer.
 - **Permanency Support Services:** The Director of Permanency Support Services leads MDCPS's independent living program, state office support units for both termination of parental rights and adoption, and a specialized staff of adoption caseworkers across MDCPS's fourteen regions. An adoption caseworker is assigned in addition to a child's frontline caseworker when the child's permanent plan changes to adoption, and these caseworkers specialize in preparing the necessary paperwork for adoption and identifying an adoptive family if the child's foster family does not intend to adopt. A similar supervisory structure to that of the frontline staff exists for the adoption caseworkers, with adoption caseworkers reporting to adoption supervisors, adoption supervisors reporting to regional adoption supervisors, and the regional adoption supervisors reporting to adoption bureau directors for the eastern and western halves of the state.
 - **Licensure:** The Director of Licensure manages MDCPS's efforts to recruit, and license foster homes (relative and non-relative) and manage ICPC placements. Bureau directors of foster-home licensure for the eastern and western halves of the state manage a staff of licensure workers that mirrors the structure of MDCPS's frontline and adoption workforce across the fourteen regions: i.e., licensure worker, licensure supervisor, regional licensure supervisor. The 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. A bureau director manages Rescue 100, MDCPS's primary mechanism for foster-home recruitment through faith-based organizations. A division director manages the state office Licensure Unit which 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. Finally, a division director manages a state office staff coordinating ICPC placements to and from Mississippi.
 - **Therapeutic and Prevention Services:** The Director of Therapeutic and Prevention Services has primary responsibility for managing MDCPS service contracts and

coordinating the delivery of services to children and families served by MDCPS. A prevention services bureau director manages staff that coordinate referrals to community service providers for substance affected infants and their families as an alternative response to MDCPS intervention as part of Mississippi's implementation of the Comprehensive Addiction Recovery Act. The prevention staff also coordinates referrals to in-CIRCLE, MDCPS's primary intervention for preventing children's entry in foster care after a report of child maltreatment. The staff also administers MDCPS's primary prevention grants. The bureau director of therapeutic services' staff includes nurses who assist frontline staff with coordinating and tracking medical services for children in custody; interpreters, who assist frontline staff serving children or families needing interpreter services; and the therapeutic placement unit, who assists frontline staff with finding placement for children in foster care with therapeutic needs. Additionally, there is a division director that manages MDCPS's efforts regarding state and federal compliance for Victims of Trafficking. Lastly, a division director manages the Interpreter Services Unit which provides interpreter services to all MDCPS staff and clients statewide.

- **Field Operations:** The three directors of field operations are responsible for managing the frontline case-management workforce across the western, eastern, and southern thirds of the state. This staff is divided into fourteen (14) regions. Each region is led by a regional director. Each regional director is supported by two or three regional supervisors, who supervise the frontline supervisors. Each frontline supervisor manages five caseworkers. These caseworkers have responsibility for investigating all allegations of child maltreatment reported to MDCPS except maltreatment in care, and to provide case management for children in foster care or receiving in-home services from MDCPS. MDCPS caseworkers in most counties carry mixed caseloads of investigations, in-home cases, and foster-care cases, however, in some of Mississippi's more populous counties investigations are specialized with dedicated units of caseworkers.
- **Deputy Commissioner of Administration:** The Deputy Commissioner of Administration has responsibility for finance, procurement, administrative services, and eligibility.
 - **Financial Services:** The Chief Financial Officer supervises staff that manages MDCPS's budget, coordinates the use of children's funds, makes board payments for children in MDCPS custody, performs eligibility determinations, and administers federal claiming and financial reporting.
 - **Eligibility:** The Director of Eligibility manages the staff involved in determining the type of eligibility of children in the foster care system.
 - **Procurement:** The Director of Procurement manages staff involved with planning, directing, and coordinating the purchase of materials, products, or services. Procurement includes the negotiation of contracts with vendors and suppliers, preparation of RFPs, review of bids, presentation of procurement information for contract approval, analysis of

- contracts for compliance with regulations. The Director is also responsible for implementation of state and federal procurement regulations.
- **Administrative Services:** The Director of Administrative Services provides support to property, county buildings, fleet management and supplies.
 - **Chief Legal Counsel:** MDCPS's General Counsel serves as chief legal officer and is responsible for the Office of Legal Counsel and the Federal Reporting Unit. General Counsel handles all legal matters affecting MDCPS's operations; works with programmatic areas and senior leadership to develop agency policy and implement policy initiatives; and supervises federal reporting related to the CFSP, APSR, and CFSR PIP. General Counsel also coordinates with the Office of the Attorney General and outside counsel on litigation matters.
 - **Deputy Administrator for Human Capital:** The Deputy Administrator of Human Capital leads efforts to meet the employment and training needs of all MDCPS staff at every stage of their experience through five direct reports: Director of Professional Development, Director of Human Resources, Director of Compliance, Director of Workforce Wellbeing and the Director of the Fingerprint and Background Unit.
 - **Professional Development:** The Director of Professional Development leads MDCPS's efforts to provide training services and support to all employees. Training Specialists provide Pre-Service Training to all new case carrying staff as well as Supervisory Training for all supervisors of case carrying staff. Professional Development provides ongoing coaching and support training to promote best practice in the field of child welfare, update staff on new or revised policies or procedures and meet annual educational requirements.
 - **Human Resources:** The Director of Human Resources is responsible for coordinating the activities of hiring, promoting, and separating MDCPS employees as well as all lateral of supervisory changes. Human Resources staff also coordinate employee benefits such as state agency health insurance and multiple supplemental benefit programs. Human Resources staff are located throughout the state to provide support and assistance with all human resource functions.
 - **Compliance:** The Director of Compliance is responsible for coordinating MDCPS's Family Medical Leave Act, Worker's Compensation and Americans with Disabilities Act benefits and rights. Compliance staff is also responsible for time keeping processes and for review and documentation of disciplinary actions.
 - **Workforce Wellbeing:** The Director of Workforce Wellbeing is responsible for coordinating recruitment and retention activities to stabilize the workforce and create a positive work culture. Workforce Wellbeing 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 Wellbeing staff supports morale and a positive work culture by coordinating employee recognition events and awards.

- **Fingerprint and Background Unit:** The Director of the Fingerprint and Background Unit coordinates efforts to process requests for fingerprinting and background checks for hiring, volunteers, and licensed foster parents throughout MDCPS. The Fingerprint and Background unit maintains the MS Central Registry and processes requests for background checks from other child welfare partners statewide.
- **Director of Constituent & Legislative Affairs:** The Director of Constituent & Legislative Affairs directs the agency's Legislative agenda, collaborates with community stakeholders and advocates on behalf of the agency. The Director of Constituent & Legislative Affairs serves as the agency spokesperson when the Commissioner is unavailable and functions as the Public Relations Team Lead. The office of the Director of Constituent & Legislative Affairs supervises a Constituent Services Manager who responds to constituent issues regarding agency policy, frontline services and various questions from interested community stakeholders. The Director of Constituent & Legislative Affairs also supervises a Director of Communications who is responsible for website content management and internal communications through regular newsletters and digital mediums. Included on the Communications team is a Public Relations & Marketing Manager who coordinates graphic design for advertising and marketing publications, creates content for social media platforms and maintains media relations for MDCPS. 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.
- **Chief Information Officer:** The Chief Information Officer oversees all operations of the Information Technology (IT) Department. This includes managing IT staff, planning and implementation of new systems, selecting and procuring required technologies, directing IT projects, managing technical support, monitoring cybersecurity and compliance, and setting the technical direction for MDCPS.
 - **Information Technology Department:** The information Technology (IT) Department consists of Application Development Services, Application Support Services, IT Project Management Services, Data Management Services, End User Support Services, Network Support Services, Information Security and Compliance Services, and Technical Asset Management Services. MACWIS/CCWIS have dedicated support and development units. The IT Department has the responsibility of developing, implementing, securing, and supporting all hardware, software, and applications utilized by MDCPS.
- **Director of Internal Affairs and Audit:** The Director of Internal Affairs and Audit oversees Internal Audit, Sub-Recipient Monitoring, Internal Investigations, and Continuous Quality Improvement.

- **Internal Audit:** This unit assists MDCPS in accomplishing its objectives by evaluating and improving the effectiveness of the organizations' governance, risk management, and internal controls.
- **Sub-Recipient Monitoring:** This unit ensures funds awarded to sub-grantees are used for the purposes which they are awarded, safeguard public monies to the greatest extent possible, and provide guidance to sub-grantees in establishing and maintaining sound business accounting procedures.
- **Internal Investigations:** This unit investigates complaints or offenses committed by MDCPS employees and/or contractors.
- **Continuous Quality Improvement (CQI):** The Director of Continuous Quality Improvement manages a staff of quality assurance reviewers across MDCPS's fourteen regions. The reviewers have responsibility for performing periodic and ongoing case reviews. These case reviews include the Foster Care Review which fulfills the 6-month administrative review for children who remain in foster care and Regional Reviews utilizes the federal onsite monitoring system. The reviewers are supervised by case review supervisors. The office of Congregate Care licensing is housed within the CQI unit. The office is managed by a director of Congregate Care. The Director of Congregate Care manages MDCPS's facility licensure staff, who has responsibility for licensing emergency shelters, group homes, and therapeutic group homes that accept children from MDCPS for placement, and for monitoring facilities' compliance with MDCPS contract requirements. Annual performance-based contract reviews are also conducted on these facilities to assess their compliance in service delivery and pursuant to their contracts and scopes of services. The Safety Review Unit is a functional area within the CQI unit. This area supports the quality assurance review of Maltreatment in care investigations and reviews screened out maltreatment in care reports to ensure adequate screenings were conducted.

Reorganization of Service Delivery

MDCPS has begun the process of reorganizing how services are delivered to children and families under the leadership of the Deputy Commissioners of Child Safety and Child Welfare. The goal of the reorganization is to provide a seamless service delivery system for child and families through their entire engagement with the child welfare system.

The MDCPS service system is currently designated into 14 regions across the state with intake and assessment falling under Child Safety and abuse/neglect investigations, in-home and foster care case management falling under Child Welfare. The 14 regions are led by 14 Regional Directors reporting through 3 Office Directors to the Deputy Commissioner of Child Welfare. There are separate directors of the areas of Licensure and Permanency reporting directly to the Deputy Commissioner with reporting structures outside of the 14 Regional Directors. The current structure has created silos of responsibility and fragmented effort rather than a cohesive delivery of services wrapped around the needs of the child or family.

2023 Annual Progress and Services Report

The reorganization will move the responsibilities for all intake, initial assessment, and investigations under the responsibility of Child Safety and case management for children receiving in-home services or in foster care falling under Child Welfare (newly named Child Wellbeing and Permanency).

The 82 counties of the state will be divided into 7 Service Areas with 7 Assistant Deputy Commissioners serving as the Service Area Director for each and reporting directly to the Deputy Commissioner of Child Wellbeing and Permanency. Each Service Area Director (similar to our current Office Director positions) will have 4-5 Service Area Teams (similar to our current Regional Director positions) that will coordinate case management services to in-home and foster care children. There will also be an Assistant Deputy Commissioner of Practice and Policy reporting directly to the Deputy Commissioner of Child Wellbeing and Permanency.

There will be 4 Assistant Deputy Commissioners serving as an Investigation Director with the responsibility of overseeing investigations in 1-2 Service Areas and reporting directly to the Deputy Commissioner of Child Safety.

MDCPS received over 80 applications for the Assistant Deputy Commissioner positions and will have completed 35 interviews by August 5th, 2022. MDCPS hopes to have recommendations finalized by the end of August 2022.

The Deputy Commissioners of Child Safety and Child Wellbeing and Permanency, as well as the 12 Assistant Deputy Commissioners will make up the agency's clinical management team. MDCPS believe this new service delivery structure will broaden our management support and allow the Assistant Deputy Commissioners to effectively coordinate services and provide leadership in a geographically smaller area. Child Safety and Child Wellbeing and Permanency efforts will provide a cohesive continuum of services to meet the needs of children and families.

B. Vision, Mission, and Philosophy of the State

Vision

MDCPS's vision is "Mississippi's children will grow up in strong families, safe from harm and supported through partnerships that promote family stability and permanency."

Mission

MDCPS's mission is "to lead Mississippi's efforts in keeping children and youth safe and thriving by

- strengthening families
- preventing child abuse, neglect, and exploitation; and
- promoting child and family well-being and permanent family connections

Safe at Home Philosophy

The MDCPS Safe at Home philosophy is founded in the belief that the first and greatest investment of time and resources should be made in the care and protection of children in their own homes. With the appropriate investment of short-term services and intensive supports designed to strengthen families, even those who experience temporary family disruption can reach sustainable, long-term familial safety and stability. Through these supports, MDCPS can prevent unnecessary family separation and out-of-home placement, reducing additional trauma to children and families while also achieving safety and maintaining permanency.

However, when a child cannot safely remain in his or her own home because of eminent or actual danger, MDCPS recognizes immediate steps must be taken to protect and care for that child while simultaneously working toward timely reunification with the child's family whenever safely possible. When this is not an option, MDCPS works to assure timely completion of other permanent plans—adoption, durable legal custody, guardianship, or a successful transition to independence. Overall, MDCPS works to empower the family and encourage self-sufficiency while meeting the child's needs for safety and well-being and achieving timely permanency.

MDCPS's philosophy recognizes that Mississippi cannot achieve sustainable, long-term child and family well-being and permanent family connections simply by operating a foster care system in which government raises children in lieu of their families. Rather, MDCPS believes long-term well-being for children and families only can be achieved by ensuring foster care is one tool in a much broader child welfare system which seeks to preserve the family whenever possible. Key to this is establishment of a statewide partnership with community connections essential to the safety, well-being, and permanency of all Mississippi families. This safety net is particularly critical when a child is removed and placed into state custody. Immediate and diligent efforts must be made to place the child and/or sibling group with other relatives, if possible, or with a licensed foster family which can maintain the child and/or sibling group in their own schools and communities. The goal is to minimize trauma to the child and birth family as much as possible. In these situations, families can best be supported by a strong safety network, extended family, and community. Frontline staff and other partnerships supporting them are, cooperatively, leading agents of positive change in the lives of these children, youth, and families working in tandem toward sustainable, long-term child and family well-being and permanent family connections.

C. 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 [ACYF-CB-PI-22-01](#), 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 Foster Care Better Than When They Entered, and Develop

and Enhance 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 to county. The availability of parent representation, which could also influence whether a child remains in MDCPS custody after the initial removal, also varies from county to county and is not universally available throughout the state.

To redefine neglect and to mitigate the effects of poverty, 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 will 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.

MDCPS is promoting meaningful engagement to ensure equal footing by a different approach to how the agency seeks programs. Instead of procuring for specific services/programs that MDCPS has determined was needed, MDCPS is now allowing providers to respond based on the services that they can appropriately provide in specific underserved counties/jurisdictions. This change was made to disrupt the status quo and allow the agency to get different responses to request for proposals from across the state and allow new service providers with experience catering to minority and or disenfranchised communities the opportunity to work with our

agency. While MDCPS is dedicated to onboarding new and minority driven providers that can offer new or and existing services throughout the state, our goal remains to prevent children from entering foster care. Therefore, the agency will actively work with new and existing providers to ensure tangible prevention efforts are a key component of their practice. There is evidence of the positive impact of this work in the state's declining foster care entry rate which is discussed in the "Assessment of Current Performance" in Section III below.

The Dorcas program provides services to all families regardless of race, color, gender, political, social, or economic status. The Dorcas program has an extension data collection system of demographics which includes race, gender, ethnicity, other factors to help ensure their program's equality. In-CIRCLE provide site 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.

This procedural change was the result of an internal assessment that was conducted through office directors and their team to determine what services should be made available to expand the prevention array. From this assessment, it was determined that underserved communities could benefit from the following services transportation, counseling and housing/rental support and childcare, homelessness, domestic violence, and service for teens mothers. From this, assessment a more comprehensive RFP was developed that will allow more community-based organizations in rural areas to provide those services in underserved communities. The goal is to gain multiple contracts that will serve different areas around the state. MDCPS is hopeful that this approach will allow equitable prevention services to expand statewide.

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. Currently, these services are only offered on the Mississippi Gulf Coast. However, we plan to implement very robust marketing initiatives to highlight the importance of the program/services and how it can be beneficial for our agency's workers and for the families we serve. In an effort 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 would work with kinship caregivers and ultimately give children permanency with kinship guardians and still allow them to receive that financial benefit. 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 Foster Care Better Than When They Entered

MDCPS has the distinct privilege of being able to get firsthand data to assess the perspectives of youth who are currently engaging 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, 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 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 all efforts 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.

Develop and Enhance 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. As we look to where and how we invest the agency realizes that training and the hiring process are top priorities to develop an equitable welfare workforce. From a training perspective, everything that is embedded throughout the pre-service training specifically includes diversity. In the last two years there has been an agency wide release of courses centered around equity and diversity.

One major step MDCPS has taken is implement centralized hiring. This process produces equity because, regardless of which part of the state the candidate is in their selection is based off a statewide committee versus being drawn from persons within their local community. The implementation of this process came from stakeholder feedback the agency received in which the agency was informed that we were not hiring the correct people or enough people to serve the populations that our agency serves. In implementing the centralized hiring process, the agency has incorporated an inclusive training plan to address and eliminate hiring bias. The centralized hiring platform is designed to do 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 racial diverse workforce. MDCPS has expanded our reach further and not just schools of social work, which have been historically done and the agency have targeted those, but we know that we get related degree fields particularly in psychology and criminal justice in our recruiting efforts, we expanded that reach to the schools of psychology and criminal justice because we want to reach out to some of the smaller schools of social work. The agency made strategic efforts to reach out to smaller Historically Black Colleges and Universities across the state such as Rust College and Alcorn State University.

2023 Annual Progress and Services Report

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 will conclude December 2021.

MDCPS 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 loop between employees and leadership.

Additionally, the agency has implemented several new projects and areas of focus to improve the workplace environment that will assist in the efforts to continue facilitating peer-to-peer support groups. These include but are not limited to:

- The Commissioner's Leadership Institute has been implemented offering a virtual bi-weekly, interactive meeting for supervisory staff members with the Commissioner and other MDCPS leadership. Initial topics will focus on "mission buy-in," effective leadership skills, and building team cohesion. Workforce Wellbeing Directors are involved in the implementation of this project and future topics will be responsive to staff feedback and request.
- MDCPS's Professional Development is reviewing and revising initial supervisor training and ongoing training and resources to increase the availability of tools and skills development for supervisor to support employees.
- MDCPS has hired a full time Workforce Development Director dedicated solely to recruiting new staff by building relationships with schools and professional associations. Mission focused, motivational materials have been prepared for use in advertising, presentations, social media, and tabling at job fairs. Workforce Wellbeing and Workforce Development are working together to include existing staff in recruitment activities.
- MDCPS has designated a new Communications Director who is working closely with MDCPS leadership, Workforce Wellbeing and Workforce Development. The Communications Director has increased frequency, consistency and quality of internal communications and allowed for expansion of recruitment efforts through social media and marketing.
- A new MDCPS website is under construction and will provide improved public and stakeholder interaction as well as offer an interactive employee portal to MDCPS staff.

Workforce Wellbeing will have a dedicated section for providing supportive content and creating connections with team members.

- Workforce Wellbeing is expanding the Service Pin and Certificate program to include recognition of 1, 3 and 5 years of service with the agency.
- The Motivational Mavericks committee was created, emphasizing building morale and team cohesion. Members include: WWB Directors, Communications Director, and team members from HR and Finance.
- Workforce Wellbeing 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.

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 increased, the workforce will stabilize and engagement with children and families will improve.

II. Collaboration

A. On-Going 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, create 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, trainings, 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. During this reporting period, Families Strengthening Families Parent Café conducted recruitment activities, organizational activities, advisory/leadership changes, and Parent Cafes'. Additionally, ACT Raising Safe Kids and Anger Management classes continued to be implemented during this quarter. Additionally, the distribution of Community Resource Guides and send referrals to other community agencies. In recognition of Child Abuse Prevention Month, Families Strengthen Families also coordinated the following:

- Downtown Street Pole Flags instead of Blue Ribbon
- CAPM Banners in various locations throughout the city
- Community Pinwheel Ceremony 4/1 @ 12:00pm @Discovery Center
- Week of the Young Child 4/2-4/8 (different theme each day)
- Trike-A-Thon Parade/IDENT-A-Kids 4/9 @ 10:00am-12:00pm @Sudduth
- Parenting Question of the Week each Tuesday on Facebook
- PARENT TALK at Discovery Center 4/13 & 4/27 on YouTube
- Blue-Out social media Challenge each Friday on Facebook
- Recognizing and Dealing with Depression Seminar 4/21 via ZOOM
- MSU Extension Office Adult Mental Health First Aid Training @TBA
- Blue Sunday 4/24 @Local Churches
- Other activities:
 - Sally Kate Winter hosted a Human Trafficking Training. The training focused on signs that indicate it is potentially occurring and protocols for handling suspected situations.
 - Every 2nd and 4th Wednesday of the month, podcasts were available on YouTube.
 - Podcast Meeting with Sally Kate Winters Child Advocacy Center
 - Community Parent Support Group Meeting
 - Advisory Council/Leadership Team Meeting
 - Women Empowerment Health Expo Awareness
 - SOSD Technology Department Meeting with Dr. Long
 - Peter's Rock Community Group Awareness

All activities will continue through the end of the contract.

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. During the reporting period, Project CARE continued to offer the following services: Parenting Education Classes, Concrete Supports, Respite Services, Case Management/Referral

2023 Annual Progress and Services Report

Services, use of the Family Resource Library, and Public Awareness Activities. Parenting Classes included:

- Active Parenting-The Beauty of a Good Rule
- Active Parenting- Freedom Within Limits: When Then Rule
- Active Parenting- The Importance of Choices and Consequences
- Parent Engagement
- Positive Parenting Discipline
- Positive Parenting- The Importance of Stress Relief
- Active Parenting- Encouraging Positive Behavior

Additionally, to reach more families, Project CARE increased their social media presence through weekly Facebook videos and regular postings of classes and events and articles on child abuse prevention. Families were provided with 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.

Project CARE continues to make an impact in the lives and families of Oktibbeha County by providing concrete support to the families of this community by sponsoring Raid Our Closet Clothing Giveaway. This event provides needy families the opportunity to get new or gently used donated clothing for their families for free. Partnering with Starkville Utilities and TVA Energy Right to provide a Home Energy Workshop, in which parents learned DIY and no-cost or low-costs ways to save energy and decrease their energy bills. Hosting Cooking Matters, a cooking segment in partnership with Mississippi State Extension Service to help parents learn healthy cost-effective ways to provide home cooked meals for their families. Project CARE continues to plan and implement ways to help the community address the issue of teen delinquency. Project CARE Sponsors Treasures in the Library, a social media video post that helps parents of preschooler's access learning resources that are available at the Discovery Center Resource Library, resources are available for home use. Continued to promote successful early learning and literacy by sponsoring a weekly book reading segment in the Resource Library. Sponsored a free childbirth class for expecting families teaching the basics of preparing for and having a healthy baby. Project CARE also continues to offer Parenting Zoom Classes, Community Parenting Support Group and Active Parenting In-Person Class.

The Dorcas Program through Baptist Children's Villages provide support services to families who have been identified by MDCPS as having the need and conducted home visits, referrals, and other services for those families. From October 1, 2021, through December 31, 2021, the program served 08 families with 22 children and 10 adults. From January 1, 2022, through March 3, 2022, the program served 36 children, 14 families, and 27 parents for a total of 63

individuals. The Dorcas program provides services to all families regardless of race, color, gender, political, social, or economic status. The Dorcas program has an extension data collection system of demographics which include race, gender, ethnicity, other factors to help ensure their program's equality.

In-CIRCLE provided 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 to help 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

MDCPS continues to serve as a key partner with the Mississippi Human Trafficking Council. 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 main Human Trafficking Council Chairs now meets virtually each month or on a schedule determined by the council (Please see Attachment E) for a full list of the Multidisciplinary Team/Stakeholders. There are no new collaborative partnerships since last year submission. The most recent collaborative partnership began in April 2021 with the National Child Welfare Anti-Trafficking Collaborative. The agency has also continued to participate in monthly Human Trafficking Committee Meetings: (Victim's Service and Training Committee meetings and the Main Human Trafficking Council Meeting.) The focus

for each group is to review the next steps on the logical model and its progress in response to HT).

During the second quarter, the agency participated in a State Self-Assessment developed by the National Assessment Committee (NAC). The Preventing Sex Trafficking and Strengthening Families Act of 2014 mandated the NAC to report/ described how each state has implemented its recommendations to address sex trafficking in children and youth. The NAC administered a survey allowing states to assess their progress in implementing NAC recommendations. Submissions allowed states to document their efforts in the following sections: Multidisciplinary Response, Screening and Identification, Child Welfare, Service Provision, Housing, Law Enforcement and Prosecution, Judiciary, Demand Reduction, Prevention, Legislation and Regulation, Research and Data, and Funding. Each state was given the opportunity to provide a self-assessed tier ranking for each recommendation and present justification of the agency's assessment, sources for its assessment, and the public or private nature of those sources.

In the third quarter, a new Training Proposal for Human Trafficking was presented to leadership. This 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 proposal for a Human Trafficking curriculum for employees of the Mississippi Department of Child Protection Services (MDCPS). If approved, this will be a 5-year annually renewable proposal containing an overall project description, project rationale, and details of the following training sessions: 1.) Human Trafficking 101 Training 2.) Human Trafficking Training for Pre-Service sessions and Lateral Hires 3.) Human Trafficking Booster Sessions 4.) Human Trafficking Train-the-Trainer Sessions. The anticipated date of completion/approval is still unknown.

MDCPS Human Trafficking Coordinator conducted a Human Trafficking presentation for the Mississippi G.V. Sonny Montgomery VA Medical Center Social Work Symposium on March 10, 2022, via zoom. The training provided an overview of the risk factors for Child Sex-Trafficking with special emphasis on runaway and homeless youth. The session also covered the importance of early intervention, timely responsive services, and use of a Multi-Agency Response Model. Participants were allowed to ask questions prior to the end of the training. Operational Feedback was also collected by the moderator.

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 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. During the next program year, our agency plans to hold quarterly meetings for this council funded by the Children’s Trust Fund. Once the PAC is completely developed, the CTF will no longer serve as a PAC capacity. The CTF Council will fund stipends and other incentives for parents for the time and dedication towards the PAC.

The Mississippi Child Death Review Panel

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 CDRP identify factors that put children at risk of injury or death. Meetings were held July 15, 2021, September 16, 2021, November 18, 2021, April 20, 2022, and on October 26-27, 2021, the National Center for Fatality Review and Prevention Meeting was held. The Mississippi Health Department of Health is the state lead agency for the CDRP. The quarterly meetings were held more frequently over the past year to catch up from the COVID-19 related cancelations.

Mississippi’s Youth Advisory Council

Mississippi's Youth Advisory Council (YAC) formerly Teen Advisory Board (TAB) is a youth leadership and advocacy training platform coordinated through the YTSS Office. YAC engages youth in I.L. program and policy changes/updates through monthly regional meetings and quarterly state level meetings. Meetings were held monthly within their respective regions to establish the topics to be addressed at the state level quarterly meeting. Each region is required to have a minimum of one youth to be considered an active board without a maximum limit of youth. The regional YAC participation fluctuates from month to month due to placement, custody status, extracurricular activities, etc. The regional YAC’s are open for any youth in care age 15-18 to participate. The Transition Navigator for the region facilitates the meeting with a previously developed agenda to gather information at the regional level for discussion at the state level YAC meeting held quarterly. Information about the regional YAC

meetings is shared with the youth, case workers, ASWS', and Regional Directors. There is currently a 13-member state level YAC with one youth from each region. YTSS employs virtual as well as in person YAC meetings to accommodate the schedules of the youth.

Each regional YAC board identifies current practice they would like to work on and uses the current policy as a guide to make updates and suggested revisions. The state level YAC meetings are where agency leadership, YTSS leadership and YAC members meet to discuss and revise policy identified by the youth in their regional YAC meetings. These meetings resulted in the new structure that we have implemented, which includes each region having its own board to allow more youth participation and more youth involvement. These meetings also resulted in the creation of a curriculum that youth would work on in their Regional YAC meetings that includes:

Education	Leadership and Advocacy	YAC Marketing/Program Awareness
<ul style="list-style-type: none"> •Secondary and Post-Secondary Activities •Vo-tech/Career Trainings •Education Track Guide •Identify Educational Resources 	<ul style="list-style-type: none"> •Communication •Team Building/Teamwork •Commitment •Adaptive Change •Mentorship •Research and Public Speaking •Social Media •Professional Decorum 	<ul style="list-style-type: none"> •Social Media •Newsletter •PowerPoint •Community Engagement •MPB •Flyer •Capitol Day •Conference Presentation •MS Youth Voice •Did You Know? •Email, Text, Apps •YAC Challenge •TikTo •Video •Foster Parents, Guardians, Adoptive Parents, Group Home Providers

The Mississippi Youth Advisory Council will continue to 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. Activity goals, other than regional quarterly meetings, and state board quarterly meetings include collaborating directly with the MDCPS Commissioner as part of the Commissioner's Council for Change. The Commissioner's Council is a unique opportunity for older youth in care to share lived foster care experience with the Commissioner of MDCPS as advocates and stakeholders. The council will also serve 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. Additional activities goals include presenting at the quarterly Clinical Management Team meetings as well as providing leadership during our Annual Youth Conference and serving as a youth panel during the annual joint planning meeting. During the annual joint planning meeting, there were a panel of three youth from different parts of the state presented on the topic “Permanency for Older Youth”. During the session the youth answered questions, shared their experiences, and talked about their future. This platform gave them an opportunity to present to various stakeholders, such as representatives from the Children’s Bureau and MDCPS along with judges, community organization representatives, and foster parents. The session aligned with the MDCPS goal to Increase Family Engagement and address permanency.

YTSS has implemented the practice of including at least two youth in care in all meetings, conference calls, trainings, and planning committees to allow a youth voice in all aspects of program development and improvement. Youth also can provide feedback and make suggestions regarding system improvement for youth who experience foster care through the Mississippi Youth Voice program when they exit foster care.

Foster Parent Recruitment

The Liaison regularly utilizes email to share information with our foster parents. These emails are used to keep our foster parents updated on training opportunities, MDCPS policy, and other helpful information.

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 supports 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.

Foster Parent Support Groups

The Liaison notifies the foster parents, the licensure unit, and our partnering therapeutic agencies directly of the support group schedule via email each month. The Liaison collects the sign in sheets of each group and distributes them to the licensure staff in each region, each month. Foster parents receive training credit for participating in the face to face and virtual meetings.

2023 Annual Progress and Services Report

In July there were four support groups that met. There were groups that met in Desoto, Harrison, Oktibbeha counties, as well as one that met virtually. In August there were six support groups that met. There were groups that met in Desoto, Forrest, Oktibbeha, Tate and two in Harrison County. In September there were six support groups that met. There were groups that met in Desoto, Forrest, Harrison, Oktibbeha, Simpson, and Tate counties. In October there were five support groups that met. There were groups that met in Desoto, Harrison, Oktibbeha, and Tate counties. In November there were three support groups that met. There were groups that met in Desoto, Oktibbeha, and Harrison Counties. All the groups met once during the month. In December there was only one group that met in. The meeting was in Yalobusha County and there were three foster parents at that meeting. In January there were 7 support groups that met. There were groups that met in Forrest, Jackson, Oktibbeha, Pontotoc, Simpson, Tate, and Yalobusha counties. In February there were 11 support groups that met. There were groups that met in Desoto, Forrest, Harrison, Jackson, Lauderdale, Oktibbeha, Pontotoc, Tate, Warren, and Yalobusha Counties. In March there was 14 support groups that met. There were groups that met in Desoto, Forrest, Harrison, Jackson, Jones, Lauderdale, Lee, Oktibbeha, Pontotoc, Rankin, Simpson, Tate, and Yalobusha counties.

In April, 14 support groups met in Madison, Marion, Harrison, Alcorn, Desoto, Oktibbeha, Jackson, Pontotoc, Lee, Yalobusha, Lauderdale, and Tate counties. In May, 10 support groups met in Marion, Desoto, Simpson, Jones, Jackson, Warren, Alcorn, Lee, Yalobusha, and Tate Counties. In June there were 12 support groups scheduled to meet in Alcorn, Forrest, Lauderdale, Panola, Harrison, Jackson, Oktibbeha, Pontotoc, Rankin, Tate, and Yalobusha counties.

Meeting topics ranged from positive discipline, parenting on purpose, promoting a loving environment and attachment, understanding trust based relational intervention, foster family self-care, the beauty of adoption, sexual abuse in adolescence, impact of fostering on kids already in the family, the adoption process, relating to our children, the role of the GAL, choices and compromises and things to consider when placing a child of a different race or ethnicity.

Foster Parent Forums

Foster Parent Forums are a town hall type meeting where the Liaison meets with the foster parents face to face to answer their questions, address their concerns, and update them on MDCPS policy. In January, Foster Parent Forums were hosted in Desoto, Jones, and Lauderdale Counties. There were 20 participants in Desoto County, 13 in Jones County, and 25 in Lauderdale County. In February, a Foster Parent Forums were hosted in Alcorn and Rankin County. There were 4 participants in Alcorn County and 14 in Rankin County.

Topics discussed in the forums varies depending on the questions asked by the participants. In Jones County the main topics discussed were childcare vouchers, poor notification of court, family team meetings, and foster care reviews, what to do if you are unable to reach your caseworker, and what information they should receive from MDCPS on the children when they are placed in their homes. In Desoto County, the main topics discussed were information that should be shared at placement, the role of the GAL, poor notification of court, family team meetings, and foster care reviews. In Lauderdale County the main topics discussed were field staff's transparency and working for the best interest of the child and poor notification of court dates. In Alcorn County, the main topics discussed were the need for more counseling services and frustrations with getting needed documents such as birth certificates and social security cards. In Rankin County, the main topics discussed were the purpose of foster care reviews, the need for information being shared at the time of placement by staff, and if older youth can share what they want with staff and the courts. Due to substance abuse having an impact on the well-being of children, the program offered through Southern Christian Services assists parents on the importance of substance abuse assistance. Mothers can bring their children to the rehab center, and this assists with bonding time and proper care of the child. Additional services offered by other subgrantees assist in community-based services to assist parents and caregivers. Subgrantees have satisfaction surveys and pre/post surveys for participants. The services are aligned to continue various avenues of parental resources, as it relates to knowledge of parenting, child abuse and neglect prevention. Additionally, these organizations have other programs and Family Resource Centers, where parents/caregivers can receive additional support.

The MDCPS foster parent liaison participated in events aimed in engaging with foster families. In December, the Liaison cohosted a Foster Dad's Night Out with the Sunnybrook Cares staff from Sunnybrook Children's Home. The event was held at Sunnybrook's Sunset Hill property in Flora. The purpose of this event was for fellowship and connection between foster dads. There were seven foster dad's that attended the event and the feedback received from those in attendance was very positive. The Liaison plans to continue to host these events two or three times a year going forward. Also, in December many counties held holiday celebrations for the children and their foster families. The Liaison was able to attend the two of these held in Hinds and Rankin Counties. This was a great opportunity to meet and speak to foster parents as well as MDCPS staff.

Foster Parent Feedback Group

MDCPS formed a Foster Parent Feedback Group to provide insight from a cross-section of foster families across Mississippi as it relates to the agency's practices and policies. This group reviews existing and proposed changes to child welfare/foster care policies. It provides a clearinghouse of information from other foster parents related to key issues facing MDCPS. The Foster Parent Feedback Group consists of six foster families. The eleven members of the

group are from Alcorn, Oktibbeha, Bolivar, Hinds, Jones, and Jackson counties. The feedback group is intentionally kept small to increase the chances of getting feedback from all the members of the group. The Foster Parent Feedback group met in July and discussed creating a foster parent "starter pack" and foster parent mentoring. The starter pack would include things like links to MDCPS policy, unit maps with contact information, resource guide, glossary of terms, and financial guide. The group discussed the need for foster parent mentoring. The basic need for foster parents is to be heard. The feedback group brought up the barrier of being able to speak with someone with "actual authority" to address problems.

The Foster Parent Feedback group met in September and discussed foster parent retention. The group discussed the importance of staff retention and being able to trust the staff that they work with directly and how those effect foster parent retention. They also discussed the need for community among foster parents and how that can impact retention. The group gave examples of how words of affirmation from MDCPS contributes to retention.

They discussed how MDCPS policy can be a barrier to retention. The group discussed being able to evaluate the staff that they interact with on a regular basis. The purpose would be for MDCPS supervisors and leadership to be aware of how staff are viewed by the foster parents when performing internal evaluations on staff. The question was asked how MDCPS contributes to foster parents finishing well when they decide to close their home.

The Foster Parent Feedback group met in December and discussed foster parent participation in Family Team Meetings, Foster Care Reviews, Court Hearings, and shared parenting opportunities. The feedback received was that MDCPS and the courts could do a better job of informing foster parents of those meetings. There are times when sufficient notice is not given to the foster parents so that they can make arrangement to attend these meetings. Suggestions given as a part of this conversation were to create a foster parent starter pack of information to give newly licensed foster parents. The starter pack would include some information provided in training as well as contact information for staff as well as frequently asked questions. Another suggestion was to create a way for foster parents to document what would be accessible to MDCPS staff.

The Foster Parent Feedback group met in January and discussed creating a foster parent "starter pack" and foster parent mentoring. The starter pack would include things like links to MDCPS policy, unit maps with contact information, resource guide, glossary of terms, and a financial guide. The group discussed foster parent mentoring. The basic need for foster parents is to be heard. The feedback group brought up the barrier of being able to speak with someone with "actual authority" to address problems. The following steps are taken once the Foster Parent Liaison receives a complaint:

1. Forward the complaint to the appropriate MDCPS unit

2023 Annual Progress and Services Report

2. If applicable, provide the foster parent contact information for MDCPS staff that can provide appropriate assistance
3. Follow-up with MDCPS staff for updates that will be forwarded to the foster parent(s)
4. Communicate continuously with the foster parent(s) until the complaint is resolved and/or they no longer want to pursue the issue

Guardian Tool

At the beginning of the program year the contract for the MDCPS Guardian Tool expired. Subsequently, the agency felt that due to participation garnered from the usage of the tool it did not render a renewal of the contract for the service. MDCPS instead choose to utilize a newly developed Shared Parenting Survey because it focused on feedback from the individual visits field staff made to the foster parent's home. The survey was developed and administered via survey monkey between January 4-14, 2022. This survey was administered to all MDCPS licensed foster parents. Five hundred foster parents responded. The survey was a Likert item scale survey with seven questions intended to monitor foster parent's commitment to shared parenting and three questions for respondents to notate reasons why they have/have not participated or embraced the idea of shared parenting.

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 in 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 or 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 the 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, 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.

During the program year, the education division transitioned from the permanency unit and is now under the direction of the prevention and therapeutic services unit. Although there was an internal unit transition, MDCPS continued to cultivate its relationship with the Mississippi Department of Education and its leadership. The relationship remains important to ensure that compulsory school-age children in foster care receive the needed services in school districts throughout Mississippi. At present, the updated Joint Guidance document that outlines procedures and processes on how MDCPS and MDE should work together has been submitted for final approval.

During the program year, there were several pre-service trainings that the education liaison gave overviews of the education unit. Topics ranged from Introduction of ESSA- Every Student Succeed Act, Best Interest Determinations (BID), Child Placement- enrollment verification, and Education Records Review (ERR), School Attendance and Special Education Services and other educational concerns. At present, there have been approximately one hundred sixty-eight (168) foster children that were assisted with educational needs since the program year began.

MDCPS began implementing processes in 2019 that takes a deeper dive into reviewing all educational records of children in care while being inclusive of family members (when applicable) in making educational decisions for them. Assisting the frontline staff in completing BIDs for all compulsory school age children (who come into care or placement changes while in care) to ensure their educational stability is maintained. Future goals for this collaboration are to assist and train more of the frontline staff on how to complete BIDs for children entering or changing placements. To begin reviewing the educational records of all compulsory school age children that enter care to assist the frontline staff in identifying and addressing more educational concerns and needs, MDCPS takes a deeper dive into reviewing all educational records of children in care while being inclusive of family members (when applicable) in making educational decisions for them.

Youth who enter custody or change placement are expected to remain in their school of origin unless it is determined to be in their best interest not to in order to prevent educational disruption.

If a school change is possible, the COR worker, school foster care point of contact, foster parents (if applicable), biological parents (if applicable), IEP committee members (if applicable), special education staff (if applicable) and other appropriate school personnel should engage in a conversation to make a Best Interest Determination (BID) regarding school placement for the youth. The BID form serves as documentation for the occurrence of the BID process.

COR workers are instructed to email completed BID forms to the BID@mdcps.ms.gov email for review by the Education Unit for quality assurance purposes and to ensure youth are not experiencing unnecessary educational disruption. Compliance for this standard is measured by the completion of the BID form.

BIDs were completed and submitted for 29 youth. Ninety-four (94) school age youth entered care and one hundred and ninety-three (193) school age youth changed home placement during the PUR. 287 had a possible school change. Twenty-three (23) BIDs resulted in a school change (79%). Six (6) BIDs resulted in the youth remaining in their school of origin (21%). The most common reason for the determination was a placement made it impossible to remain in their school of origin. Some school districts continued the option for virtual learning which allowed youth to remain in their school of origin regardless of placement.

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 (SRC) 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 individuals admitted to the United States (U.S.) as refugees. 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.

Joint Planning 2022

On April 7, 2022, the MDCPS held the 2022 Mississippi Conference on Children and Families (formerly known as Joint Planning). The theme for the conference was Focusing on What Matters Most: Children, Families and Agency Personnel. MDCPS selected this theme to discuss the efforts surrounding workforce wellbeing highlighted in the PIP. The event's participant list included CB personnel, MDCPS staff and leadership, judges, court support staff, various service providers, foster parents, community organizations, and foster youth. The conference consisted of two parts that each had two separated focused conversations for participants to choose from. In part one, participants were able to select from Focused

Conversations 1: When Working Together Matters Most, this session brought together a judge, a parent defender, a foster mother, a former foster youth, and a staff member from the Mississippi Division of Medicaid to discuss how working together can have the greatest impact for our child welfare system. The second session choice was Focused Conversations Session 2: How Efforts around Family Engagement and Placement Impact the Children and Families we Serve which was a collaborative presentation from MDCPS's licensure, congregate care, and therapeutic placement units. This session provided an in-depth understanding of the efforts that MDCPS's programs and services are taking to address the needs of children and families. In part two, participants could select from Focused Conversations Session 1 MDCPS Services to Mississippi Children and Families Matter which explained a range of innovative and exciting services that are in the works for the agency and aimed to benefit Mississippi Children and Family. The second choice for this session is Focused Conversations Session What Current Strategic Efforts are Strengthening Workplace Wellness. This session brought representation from frontline leadership across the state, to MDCPS's workforce wellbeing and retention directors. This session highlighted the key and strategic efforts that MDCPS has been making to strengthen the wellness of the agency through active and strategic engagement with personnel and through ongoing strategic recruitment efforts for new frontline staff throughout the state.

B. Collaboration with State Courts, Legal and Judicial Community

CFSR PIP: During the past year, several collaboration efforts between MDCPS and Mississippi's judiciary have continued to advance Mississippi's CFSR PIP along with 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 is conducting regular reviews of agency data and using the information to identify areas where practice and coaching may require additional attention and developments.

MDCPS General Counsel met with Judge Hicks on December 22, 2021, whereas Judge Hicks provided feedback on the PMLC training that Hinds County (Region III-S) completed on September 30, 2021. Judge Hicks indicated that the training served as a refresher for the best practices that she has already implemented in her courtroom.

To continue reinforcing the PMLC principles, MDCPS in conjunction with the Mississippi Judicial College and the Court Improvement Project, hosted a statewide mandatory Judicial Training via Zoom on January 21, 2022. Justice Randy Pierce moderated the event, Chief Justice Michael Randolph offered opening remarks, and two youth court judges, along with

some of the most experienced frontline MDCPS staff and supervisors, provided a panel discussion on court preparation. Both the youth court judges and MDCPS staff discussed expectations for court preparation and court appearances, suggestions for training and supervising new staff, and conversation about overcoming some of the challenges associated with the work. The maximum number of participants who attended the training was 1,000 and the training has been made available for viewing through MDCPS's Cornerstone Training platform.

MDCPS's plan for Goal 5, Strategy 2, Activity 5 (CFSR PIP), was to "Reconvene local court teams at future trainings for further guidance in the directions of their local action plans." A historical review of emails and correspondence regarding MDCPS's renegotiation of the other activities in this strategy reveals that MDCPS intended for this activity to be incorporated to focus more on Hinds County.

MDCPS's General Counsel reviewed additional actions conducted by MDCPS and CIP in 2021 that were not reported in previous quarters of the PIP (but are now reported below).

The previously unreported updates are as follows: MDCPS and the Court Improvement Program conducted a statewide training in HOPE Science in April 2021. This training was held in-person in three locations across the state (Oxford, Pearl, and Gulfport) and virtually in all other counties. MDCPS staff from each county represented the Agency, as did representatives from the court and other members of the local court teams. As a reminder, the HOPE Science Institute was previously housed within the CIP, but it has since expanded its mission and is now a stand-alone entity. Since that expansion, MDCPS involvement only includes participation in the HOPE trainings. The HOPE training focuses on the HOPE assessment tool, which identifies a family's strengths – both as a unit and as individual members – to prevent the children in a family from entering MDCPS custody. MDCPS believes that this training qualifies as a reconvening of local teams. CIP has advised MDCPS that the HOPE Science Institute is sending periodic reminders/training emails as reinforcement.

Judge Hudson hosted an additional reasonable efforts training for new judges on February 28, 2022.

Joint Planning: As previously mentioned in April, Mississippi hosted the 2022 Mississippi Conference on Children and Families (formerly known as Joint Planning) the virtual convening focused on What Matters Most Children, Families and Agency Personnel. The breakout session *When Working Together Matters Most* brought together Forrest County's County and Youth Court Judge as a collaborator and panelist, as well as a parent defender, a foster mother, a former foster youth, and a staff member from the Mississippi Division of Medicaid to discuss how working together can have the greatest impact for our child welfare system.

IV-E Reimbursement for Legal Representation: Mississippi still intends to reimburse the Office of the Attorney General for its representation of the agency in Mississippi youth courts through the utilization of IV-E funds. MDCPS has submitted an amendment to the current cost allocation plan and The Children’s Bureau provided feedback in April. MDCPS is revising the cost allocation based on the feedback.

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 has 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 have already found several internal policies that are 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 2022, Youth Courts added two new counties to its parent representation program, Lowndes and Lauderdale and are looking at adding a third. Marion County has shown such great success with their program that the county is now fully supporting the Marion County Parent Representation program. 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 February 16, 2022, Mississippi Judicial College director Randy Pierce moderated this event which allowed youth court judges and personnel with Child Protection Services caseworkers to address issues that each side faces in court. Among the speakers were Chief Justice Michael K. Randolph, MDCPS Commissioner Andrea A. Sanders, and Director Pierce. A panel consisting of Director Peirce, Judge Trent Favre, Judge Carol Jones and MDCPS caseworkers from Forrest and Hancock counties, addressed issues ranging from court room rules and decorum to judicial interaction with MDCPS caseworks. More than 800 participants attended the event via Zoom. Continuing Legal Education (CLE), Mandatory Judicial Education (MJE) and Social Work Education Credit was offered to those in attendance.

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 the 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 provide 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, guardian's ad litem, and court clerks.

Subjects of training 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 have held 80 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 will 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 has re-started its work in anticipation of the upcoming 2023 Mississippi Legislative session. Professor David Calder and Judge John Hudson, Jurist in Residence, are co-chairing that committee. MDCPS has multiple members of the agency sitting on the committee, which is scheduled to begin meetings in mid-to-late August 2022, with the hope of submitting proposed legislation to be introduced in January 2023.

III. Assessment of Current Performance in Improving Outcomes

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

Safety Outcomes Introduction

System-wide, administrative data trends on the front-end of the Mississippi child welfare continuum provide important evidence of contextual factors contributing to Safety Outcomes performance observed in case record review items discussed below. These administrative data trends reveal high rates⁴ of children screened-in for investigations, and found as victims, along with a relatively low rate of entry to care⁵, illuminating potential groups of children most in need (e.g., for statewide safety data indicators—S1: Maltreatment in Care, and S2: Recurrence of Maltreatment), and may reveal evidence of workload issues that affect the quality and frequency of ongoing risk assessments (e.g., for OSRI Item 3).

Specifically, while the frequencies of children investigated in the state began to decline even prior to the pandemic (Figure 1).

⁴ Investigation and victimization frequencies and rates (Figures 1 to 4) taken from: <https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2020.pdf>

⁵ Entry frequencies and rates (Figures 7 & 8) taken from MS Supplemental Context Data (Feb. 2020).

2023 Annual Progress and Services Report

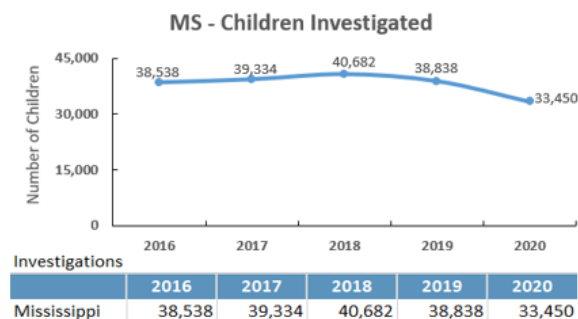


Figure 1. Investigation Frequencies

The investigation rate for Mississippi also decreased over the past few years but continued to be notably higher each year than the trend observed nationally (Figure 2).

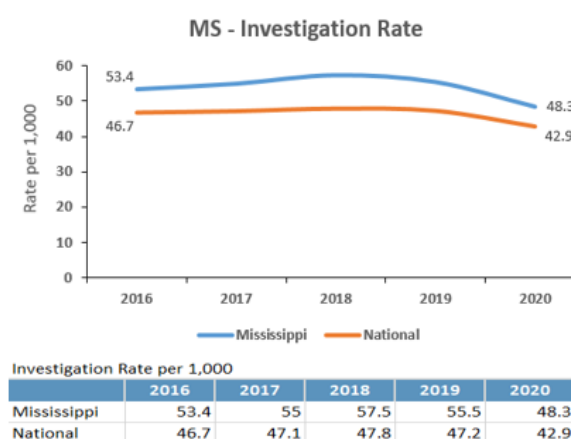


Figure 2: Investigation Rates

A similar pattern is evident for Mississippi with respect to children who were found as being victims of maltreatment. The number of child victims declined over the past several years, beginning prior to the pandemic (Figure 3).

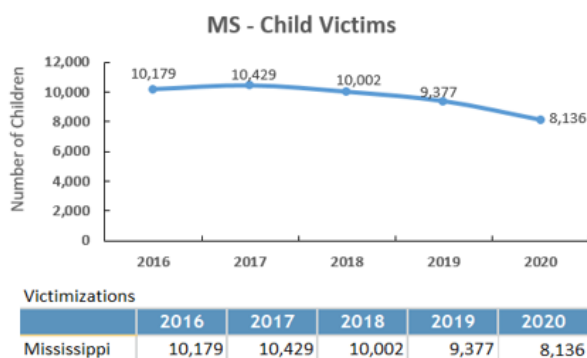


Figure 3: Victimization Frequencies

but the rate of victimizations, while also declining, has consistently been much higher than rates observed nationally (Figure 4).

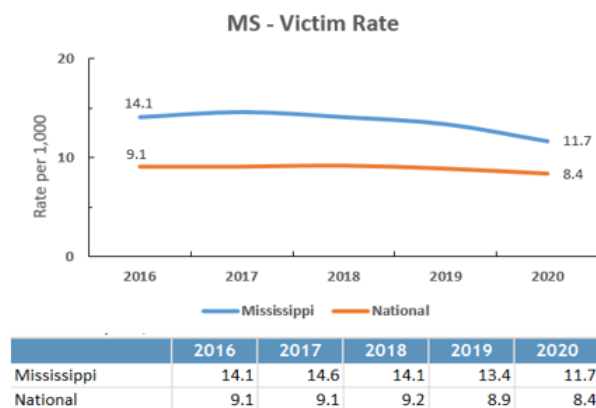


Figure 4: Victimization Rates

While disaggregation of the investigation and victimization data by different variables (e.g., age, ethnicity, county, etc.) will be important for future CQI efforts (e.g., to identify target groups and geographic areas most in need, and to propose potential program efforts to assist)—the persistent, high overall rates could be contributing to a difficult workload that impacts staff capacity to carry out risk and safety assessments with the frequency and quality that are needed to improve performance on Item 3.

Furthermore, the dearth and quality of risk assessments could in turn be a detrimental factor underlying the consistently low performance on the S-1 Maltreatment in Care statewide data indicator⁶. A first step in determining potential responses to ameliorate this trend is to verify that abuse ‘incident dates’ are being accounted for in data entry and calculation of this measure.

Over the past several years, the Mississippi maltreatment in care rate—though dropping slightly from 11.84 in FY2017 to 10.26 in FY2019—has been above the national performance of 9.67 per 100k days in care. The data indicate that rates tend to be highest for 17-year-olds, followed by 11 to 16-year-olds, and 6 to 10-year-olds (Figure 5). And though small frequencies make these data somewhat volatile, rates were also consistently quite high in, among other counties, Lee and Marshall (not graphed but evident in the Supplemental Context Data).

⁶ Information referenced for Figures 5 & 6 are taken from MS Supplemental Context Data (Feb. 2020).

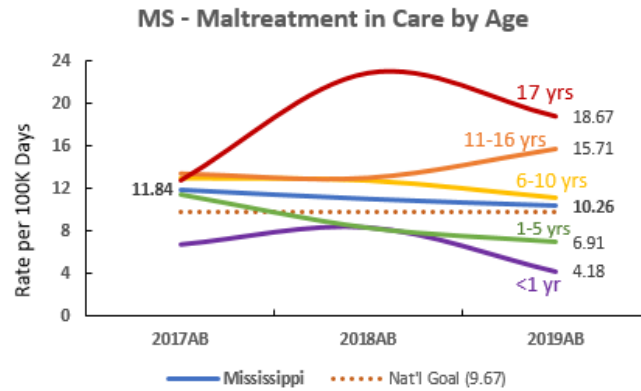


Figure 5: Maltreatment in Care by Age at Entry or on First Day

Maltreatment in care rates stratified by ethnic group show a less consistent pattern (Figure 6). Rates for White children tend to be higher than the state rate (and they account for more than half the care days provided). Rates for Black children appear to have declined in the most recent time period, rates for '2 plus Races' are consistently low; and rates for Hispanic children appear to have increased dramatically (though they account for relatively few care days, and very few instances of victimization).

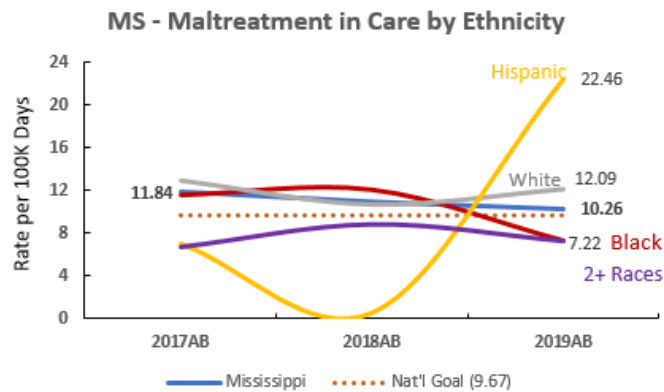


Figure 6: Maltreatment in Care by Race/Ethnicity

MDCPS will look to further understand whether target populations emerging from these administrative data trends (e.g., older teens, White children, from Lee, Marshall and perhaps Harrison or Hinds counties) are among those identified by case record review for OSRI Item 3 as needing improvement for risk and safety assessment.

Further along the continuum of the front end of the child welfare system, the number of children entering care also decreased over the past several years, beginning to decline prior to the pandemic, though may be increasing slightly again (Figure 7).

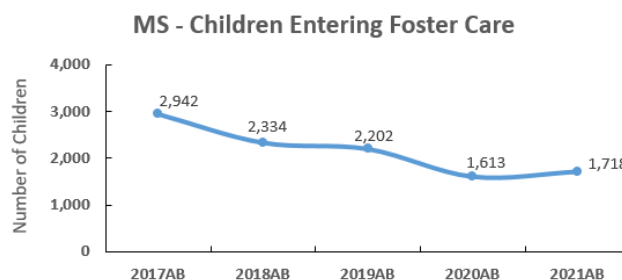


Figure 7: Foster Care Entry Frequencies

Foster care entry rates in the state also 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 (Figure 8).

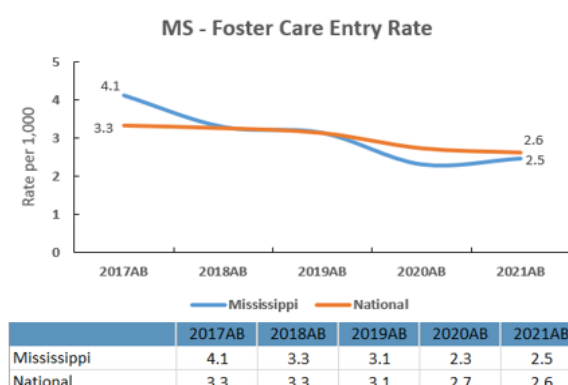


Figure 8: Foster Care Entry Rates

Entry rates were highest for infants, and for children 1 to 5 years old (not graphed but evident in the Supplemental Context Data), and they were consistently low for children 6 years and older. In terms of race/ethnicity, Hispanic children had consistently low rates, while White children and those of two or more races had rates that were consistently higher than the state rate. Harrison, Jackson, and Warren counties were notable as having consistently high entry rates, while DeSoto and Hinds counties had entry rates that were much lower than the state as a whole.

It is possible that the declining entry rates could be at least one contributing factor to the persistently high statewide rate observed for the S2-Recurrence of Maltreatment data indicator (Figure 9)⁷. Though not the initial, preferred course of action, a removal into foster care is known to reduce the likelihood of recurrence of maltreatment. Entry rates were highest in the state for infants, and this group was among the least likely to experience recurrence of maltreatment. Teens 17 years old were also very unlikely to experience recurrence; but while their statewide entry rates were very low, it is possible that they turned 18 prior to experiencing a subsequent substantiated allegation within 12 months of the initial victimization. By contrast,

⁷ Information referenced for Figures 9 & 10 are taken from MS Supplemental Context Data (Feb. 2020).

children 6 years and older tended to have recurrence rates higher than the statewide rate, and removal rates for these children were consistently low in recent years.

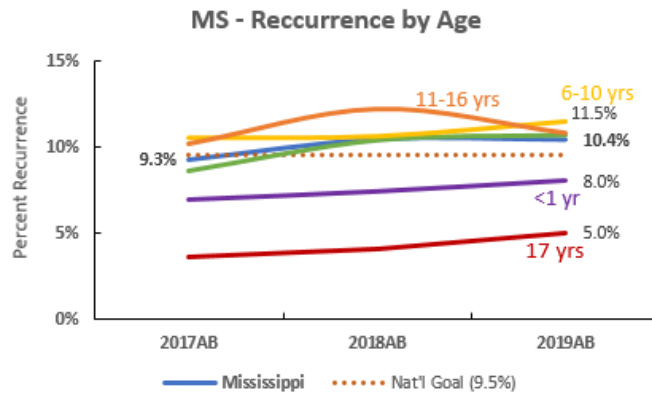


Figure 9: Recurrence by Age at Initial Victimization

Hispanic children in the most recent time frame also had a high recurrence of maltreatment rate, and their removal rates are consistently low (Figure 10). However, other ethnic groups (e.g., White children had both consistently high recurrence and entry rates; and Black children had both consistently low recurrence rates and low entry rates), and county trends (e.g., Hinds County had both consistently low recurrence rates and low entry rates) do not follow this same pattern.

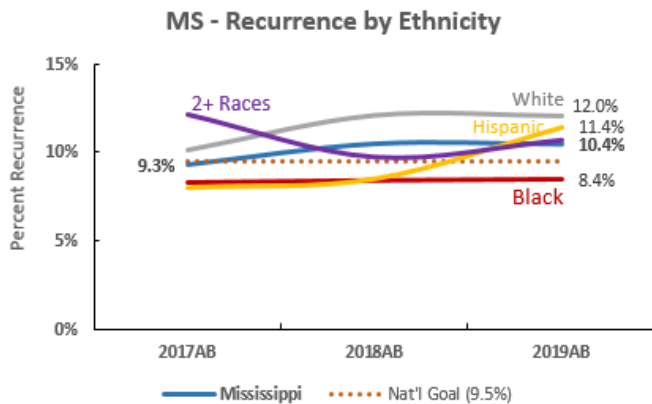


Figure 10: Recurrence by Race/Ethnicity

Clearly, further examination of these and other data are warranted. In addition to examination of each of the OSRI Items discussed below, multivariate analysis could help tease apart the relationship between rates of recurrence, child demographic factors, and agency practices such as propensity to remove—as well as identification of client needs (e.g., substance use services, domestic violence services) at initial substantiation, along with availability, provision, duration, etc. of those needed services. Safety Outcome 1 at PIP Measurement 7 was at 65.73% Substantially Achieved and goal is 68% (fell below the goal even though PIP goal has already been met).

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

- Item 1: 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? *SRU tracks data that will add to this in the future.*

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. Mississippi's assessment of current performance and goals for improvement 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 2021 to March 2022. 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 2021 to March 2022.

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

Item 1 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 – Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	115	123	111	117
Number of Total Applicable Cases	170	174	168	178
Performance (%)	67.65%	70.69%	66.07%	65.73%

Item 1 corresponds to CFSR PIP Goal 3 (improving supervisory support), Strategy 1/activities 1-3. The Regional Review Item Rating Summary for the period under review included some of the following practice concerns:

2023 Annual Progress and Services Report

- 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 family according to the State policy for the level of the report received. To date, the strategy and related activities are complete. 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.

- Item 2: 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 3: 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?

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 7 and added to the chart 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).

Item 2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care.

Item 2 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	41	35	37	43
Number of Total Applicable Cases	71	69	76	80
Performance (%)	57.75%	50.72%	48.68%	53.75%

This item corresponds to CFSR PIP Goal 2 Strategy 1/activities 1-3. To date, the strategy and related activities are complete.

2023 Annual Progress and Services Report

The decline in performance observed through CQI reviews continues to be attributed to deficits in engagement with parents, missed opportunities in practice to identify and/or address specific safety threats, and missed opportunities in practice to implement immediate safety related services to reduce the threat(s) and prevent entry into foster care. These missed opportunities are linked to the Agency's current risk and safety assessments being difficult to use and interpret and does not provide meaningful guidance when developing tasks and goals. MDCPS recognized a decline in performance after revised definitions were incorporated into training. Next steps include determining barriers that limit the improvement of the quality of these assessments.

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.

Item 3: Risk and Safety Assessment and Management.

Item 3 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	223	217	206	190
Number of Total Applicable Cases	350	350	350	350
Performance (%)	63.71%	62%	58.86%	54.29%

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. This item's goal of 68% has not been met and the data suggests that performance is trending in the wrong direction.

Findings from the case reviews indicates reasons the department is not meeting the goal are related to 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.

Additionally, Item 3 reflected inconsistent contacts with parents and all household members were a contributing factor or barrier noted in the completion of comprehensive and ongoing assessments of the safety and risk factors. Lastly, 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) was 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.

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

Restructuring of the agency is currently taking place. A strategic move to specialize 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.

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 is 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.

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

Permanency Outcomes Introduction

As discussed above regarding safety outcomes, it is also useful to examine system-wide trends in administrative data when evaluating effectiveness of child welfare permanency outcomes. Trends in the Mississippi CFSR Data Profile Statewide Data Indicators provide an important macro-level view of MSCPS permanency efforts that complement information gleaned from the Onsite Review Instrument items discussed below. Further, this context helps to enhance understanding of potential target groups and geographies where efforts might be directed for notable areas needing improvement such as Item 6 (Achieving reunification, guardianship, adoption, or other planned permanent living arrangement), and Item 12B (Needs assessment and services to parents).

The CFSR Supplemental Context Data⁸ reveal aspects of timely permanency where state performance is strong, as well as suggesting target populations and geographic areas where permanency may need to be improved. These data show a high rate of children discharged to permanency within 12 months among those entering care (Statewide Data Indicator P1: Permanency in 12 months for entries). Over the most recent reporting periods, the state rate increased from 43.6% to 46.3% which was above the national (risk standardized) goal of 42.7% in each year (Figure 11).

However, despite this promising aggregate statewide trend, the data nonetheless indicate that there are potential groups of children for whom attention is needed: infants (particularly those 0-3 months old) and 17-year-olds had consistently low rates of timely permanency. All other age groups had permanency rates that were higher than the overall state rate, and national goal for each of the last several years.

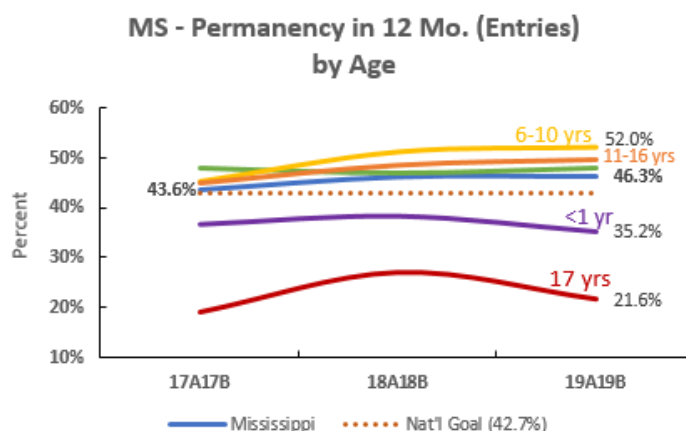


Figure 11. Permanency in 12 Months (Entries) by Age

⁸ Figures 11, 12, 13, 14, & 15 generated from MS Supplemental Context Data (Feb. 2020).

Stratified by ethnicity, timely permanency for entries shows a less stable pattern (Figure 12). Permanency rates for Black and White children were higher than the national goal for each year of available data, and these 2 ethnic groups account for over 90% of all entries to care in the state. However, rates for Hispanic children and ‘2 plus Races’ changed notably over this span. Hispanics are potentially a group with high need since their rate declined over this time span and is currently lowest in the state (25%); and the ‘2 plus Races’ rate had been the lowest but is currently the highest in the state (49.3%). It is important to note that the number of children in both latter ethnic groups is small; hence, changing the outcome for one or two sets of siblings in these ethnic groups could lead to a large change in the trend for this outcome.

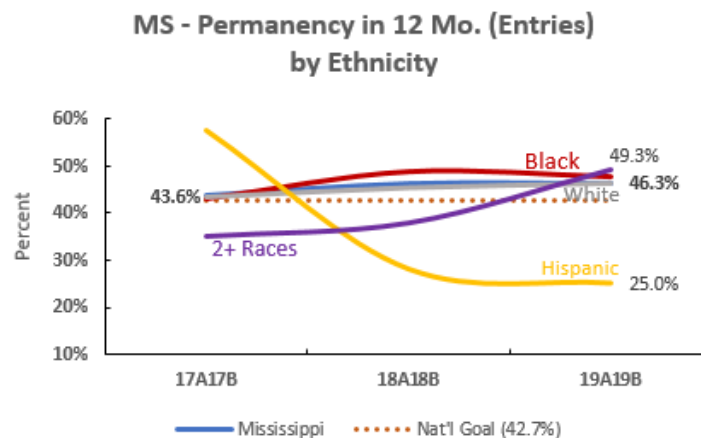


Figure 12: Permanency in 12 Months (Entries) by Ethnicity

When timely permanency for entries is stratified by jurisdiction (not graphed but available in supplemental context data), many counties appeared to perform well, though there were several where rates fell below the national goal—most notably Jackson which is one of the largest counties in the state, and thus could be a target area for potential reform. Other counties (e.g., Alcorn, Jones, Neshoba, Washington) had consistently low rates; but these jurisdictions are small, and so a change of several children among entries or permanency discharges could have a large effect on performance.

Permanency appears to slow in MDCPS for children not exiting in the first year after entry. That is, while timely permanency for children who enter care in Mississippi is relatively strong (except for certain groups noted above), for children who are in care between 12 and 23 months (Statewide Data Indicator P2), exits to permanency have been consistently below the national goal (of 45.9%) and have declined slightly over the past several years (Figure 14). Among those in care on the first day of the most recent reporting period, all age groups had a permanency rate that was lower than the national goal (except for children 1-5 years old whose rate crept just above this threshold), with 6-10 years old declining the most; and 17-year-olds had the lowest rate, though it had increased notably in the most recent time frame (frequencies were small, however).

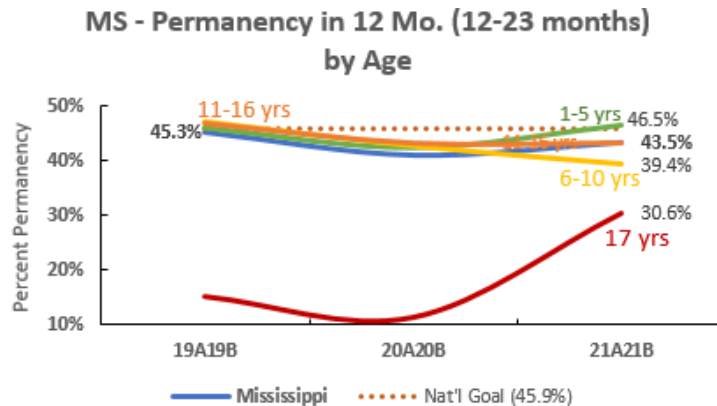


Figure 14. Permanency in 12 Months (12-23 months) by Age

When permanency for children in care 12-23 months is stratified by ethnicity, White children had a rate slightly higher than the national goal, notably higher than the state rate, and consistently higher rate than all other ethnic groups (Figure 15). Black children, and those of ‘2+ Races’ had the lowest permanency rates in the most recent time period. Hinds, Lauderdale, and Rankin were among counties where performance on this indicator were lower than the statewide trend.

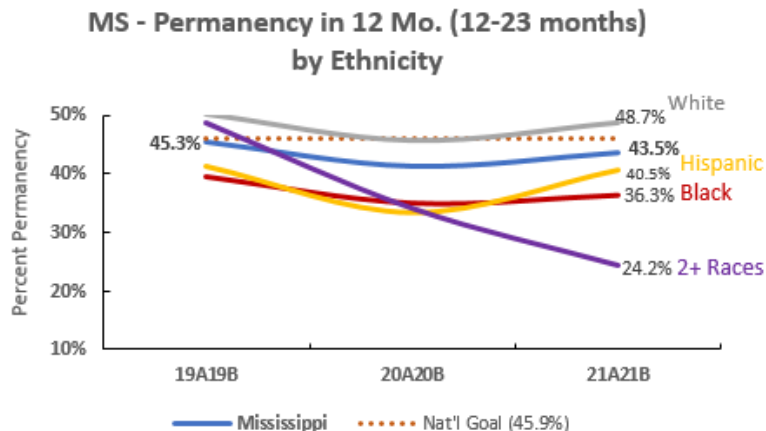


Figure 15. Permanency in 12 Months (12-23 months) by Ethnicity

Finally, since reentry to foster care is a critical “companion measure” for permanency (Statewide Data Indicator P4: Reentry to foster care in 12 months), it is important to note that a couple of jurisdictions may merit attention. That is, though the reentry rate for MSCPS is extremely low compared to the national goal and therefore very much a strength in this state, both Pike and Hinds counties had reentry rates that were above the statewide trend (Figure 13), and thus may be geographies to examine more closely for potential practice improvements.

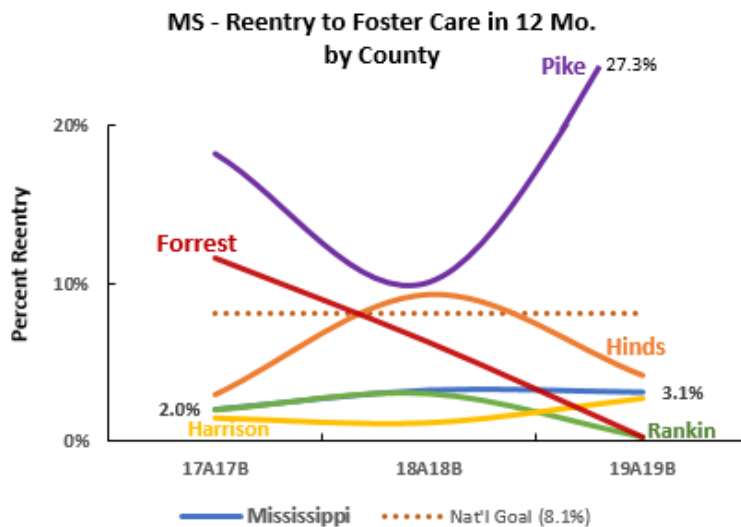


Figure 13: Reentry to Foster Care in 12 Months

In sum, administrative data point to potential groups of children for whom particular efforts may need to be focused to improve permanency: among entries—infants, 17-year-olds, Hispanics, and several counties (e.g., Jackson); and for those already in foster care between one and two years—children older than 6 years, and particularly 17-year-olds, all non-White children and particularly those of 2+ races, as well as perhaps those in several counties (e.g., Hinds, Jackson, Lauderdale, Pike, etc.). PIP 7 for Perm Outcome 1 was 22.86% substantiality 65.71% Partially Achieved.

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

- Item 4: 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 5: Did the agency establish appropriate permanency goals for the child in a timely manner?
- Item 6: Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child?

Item 6 is very close to being met for the PIP. Looking at Items 4-6, Item 6 does most effect Permanency Outcome 1. A key driver is length of time in care, which corresponds to Statewide Data Indicators. Wendy's Wonderful Kids, new diligent search tool or other statewide initiatives will assist with achieving permanency.

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 2021 to March 2022. The Practice Performance Report offers an analytical breakdown of practice elements measured from the

2023 Annual Progress and Services Report

rolling Regional Reviews that contribute to the overall Permanency Outcome 1. Placement stability (Item 4) is a continued ongoing strength for the State.

Item 4: Stability of Foster Care Placement

Item 4 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	167	170	170	176
Number of Total Applicable Cases	2108	210	210	210
Performance (%)	79.52%	80.95%	80.95%	83.81%

Item 4 corresponds to Goal 1 Strategy 1/activities 1-7 and Goal 1 Strategy 2/activities 1-7 of the CFSR PIP. The goal of 80% continues to be met and MDCPS rates this item as a strength. The federal CFSR Data Profile report shows that Mississippi has been consistently at or above the national risk standardized performance for the CFSR Placement Stability (moves/1,000 days in foster care) indicator. The strategies continue to meet the intended impact.

Most of the placements were considered stable at the time of the rolling Regional Reviews. However, for those cases rating area needing improvement concerted efforts to prevent the disruption of placement(s) is not always made by the assigned staff for the target child. MDCPS Field Operations leadership will continue to provide coaching efforts to prevent disruption in placement. Supervisors are encouraged to discuss potential placement disruptions regularly in case staffing. For youth with therapeutic needs, frontline staff are encouraged to consult with the therapeutic placement units to identify resources that may prevent placement disruption.

Item 5: Permanency Goal for Child

Item 5 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	67	73	77	99
Number of Total Applicable Cases	210	210	210	210
Performance (%)	31.9%	34.76%	36.67%	47.14%

2023 Annual Progress and Services Report

Item 5 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The goal of 47% has been met, separate from the APSR purpose.

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 along with completing and submitting timely TPR Packets. Permanency is an ongoing part of case staffing.

MDCPS Field Operations leadership continues to receive coaching around permanency and completing and submitting timely TPR Packets. MDCPS has 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 to increase docket capacity to hear these cases. MDCPS and the Office of the Attorney General currently are in discussions of ways to increase capacity for litigating these cases.

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 indicators. This has been described above and is also described in Section V of this Plan.

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

<u>Item 6:</u> <u>Case Review Results</u>	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	56	62	65	67
Number of Total Applicable Cases	210	210	210	210
Performance (%)	26.67%	29.52%	30.95%	31.9%

Item 6 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. The goal of 34% has not been met during any of the monitoring periods and performance has slightly increased each period making this item's rating an area needing improvement.

The related strategies have not had the intended impact in meeting this item although CFSR PIP Goal 1 Strategy 1/activities 1, 2, 5 and Goal 1 Strategy 2/activities 4 and 6 are complete. The state would benefit from reassessing these strategies/activities to see gains in performance. In April 2022, CQI began attending Regional Staff meetings and providing data and training on what is being measured in the Items to improve practice and documentation to support the practice that was being completed. CQI suggested utilizing and training on the Practice Model Guides because other leaders deemed it a good practice.

Statewide data indicator trends revealed aspects of timely permanency that state performance is strong and provided target populations and geographic areas where permanency can be improved. Due the increased rate from 43.6% to 46.3%, MDCPS will bolster efforts to maintain the practice of children being discharged to permanency within 12 months among those entering care.

Achieving reunification, guardianship, adoption, or other planned permanent living arrangements is a collaborative effort. Achieving timely permanency requires collaboration with the youth court, service providers, family members and foster parents. MDCPS Field Operations leadership team is conducting regular reviews of agency data and using the information to inform practice and coaching needs.

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 2021 – March 2022. Placement with siblings and seeking relative placements for foster children are a continued, steady practice for the State. Concerted efforts in maintaining connections with separated siblings and parents, extended and community connections, and the promotion and encouragement of shared parenting activities rates Area Needing Improvement. For PIP period 7, Permanency Outcome 2 - 47.85% substantiality achieved, 43.06%, 9.09% not achieved.

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 73.68% Strength and 26.32% Area Needing Improvement. Practice Performance results reflected that a percentage of foster children were placed with all their siblings who were also in foster care (n=62). Furthermore, although the sibling group was not placed together, there were valid reasons for those placement separations in 50.7% 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 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. MSA 5.2.b.2 collects data on having a visitation plan for any sibling not in the same placement. (Q1 2022 data- 39.3%, 239 of 634 children).

MSA 5.2.b.2.a reports data that at least monthly visits were provided for siblings not in the same placement (25.4%, 161 of 634).

MSA 5.2.b.3 collects data to show that reasonable efforts were made to facilitate twice a month in person visits for children 6 and younger and at least monthly visits for children 7 and older. (28.7%, 182 of 634)

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 that a worker selects if the siblings are not placed together and why.

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 42.95% Strength and 57.05% 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 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.

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. MSA 5.2.b.2 collects data on having a visitation plan for any sibling not in the same placement. (Q1 2022 data- 39.3%, 239 of 634 children).

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.

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? *Refer to the PIP Measurement Period 7 report and see above comments about Data Indicators*

Item 9 rated 61.84% Strength and 38.16% Area Needing Improvement for Permanency Outcome 2. Practice Performance results reflected those concerted efforts were made consistently in 61.84% of cases reviewed to maintain the child's established connections (connections prior to entry into care) to community, faith, language, extended relatives, etc. (n=128). 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=202). The OSRI Item Rating Summary 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.

Item 10 Relative Placement: Did the agency make concerted efforts to place the child with relatives when appropriate?

Item 10 rated 71.78% Strength and 28.22% 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 portion of the applicable cases (n=63). 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. The OSRI Item Rating Summary 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). The Item Rating Summary for Item 10 also reflects those efforts were lacking in the continual search for both maternal and paternal relatives particularly if the child's family relationships were complex (complicated relationship issues).

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.

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.

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?

Item 11 rated 29.5% Strength and 70.5% 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 were needing 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).

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).

Visitations is 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.

There is no percentage goal outlined in the PIP, however, Shared Parenting is identified in PIP Goal 1, Strategy 2. 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.

C. 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. MDCPS original assessment of the workforce revealed peer-to-peer support groups would be the right tool to develop the desired workplace environment. The goal of the pilot peer-to-peer group project was to provide support to staff in a safe and supportive environment and focus on challenges by providing them with the tools needed to increase and improve the core practice areas of family engagement, assessment, and service delivery using structured learning models. To improve employee retention and increase the well-being of the staff, the facilitator would encourage employees to share their experiences as it relates to improvement needed in practice areas such as: family involvement in case planning, caseworker/parent contacts, maintenance of the relationship between a child in custody and their parents. In addition, staff are given the opportunity to share what has been helpful that has been a success in their work.

During the pilot project, MDCPS's Director of Workforce Well-being facilitated five (5) group sessions across the five pilot areas (2W, 4N, 7E, Hinds County, and Lee County). There was

strong attendance in the first three months of the pilot (August- 123, September- 55, and October-54) but attendance began to decline in the last two month (November- 41 and December- 24). Throughout the pilot project, the Director of WWB sought additional avenues to improve the workforce environment and well-being of staff using various approaches, including having one-on-one conversations as a mechanism to inform staff that these practices are necessary to improving and achieving success in their work. 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 weren't 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.

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 loop 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.

Wellbeing outcome1 was 29.14% substantially 44% partially, and 26.86% not achieved.

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

2023 Annual Progress and Services Report

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, has fallen below that goal at 28.79% for Measurement Period 3, at 28% Measurement Period 4, at 27.14% for Measurement Period 5, 27.14% for PIP Measurement Period 6, but up a small percentage to 29.14% for PIP Measurement Period 7.

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 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	100	95	95	103
Number of Total Applicable Cases	350	350	350	350
Performance (%)	28.57%	27.14%	27.14%	29.43%

Sub-Item 12A: Needs Assessment and Services to Children

Item 12a rated 62% Strength and 38% Area Needing Improvement. Practice performance results reflected that while initial and/or ongoing assessments were comprehensive and accurate to understand the child's well-being needs (n=229), there was a lower practice performance to ensure appropriate services were provided to meet the child's needs (n=160).

FCR does not collect any data that would be helpful to 12A, as the 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.

2023 Annual Progress and Services Report

- 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).
- 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).
- 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 by case type and ANI rating), there was a slightly higher number of In-Home cases rating area needing improvement (n=77) versus Foster Care Cases (n=56). 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.

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.

Sub-Item 12B: Needs Assessment and Services to Parents

Item 12b rated 22.71% Strength and 77.29% 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 for Item 12b indicated that the Agency's formal written comprehensive family assessment 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.
- 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).

- 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.

Sub-Item 12C: Needs Assessment and Services to Foster Parents

Item 12c rated 77.95% Strength and 22.05% Area Needing Improvement. 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 68.75% of cases reviewed (n=88).

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 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. Q1 2022 data for this was at 58.3%, 1053 of 1806 of children were placed in a foster home or Therapeutic foster home during the PUR that gave supporting documentation that the FPs needs were assessed monthly and provided. 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

2023 Annual Progress and Services Report

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.

Item 13: Child and Family Involvement in Case Planning

Item 13 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	153	160	154	149
Number of Total Applicable Cases	326	325	326	325
Performance (%)	46.93%	49.23%	47.24%	45.85%

Item 13 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis? The Agency met this goal at 41% and has continued to improve. For cases rating Strength, concerted efforts were made to actively involve foster children, all household children (in-home cases), mothers, and fathers consistently by consulting the parents in goal and task development.

MDCPS will continue to utilize the 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/PSR Goal, located in Section V of this document.

Item 14: Caseworker Visits with Child

Item 14 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022

2023 Annual Progress and Services Report

Item 14 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Number of Cases Rated as a Strength	271	273	256	251
Number of Total Applicable Cases	350	350	350	350
Performance (%)	77.43%	78%	73.14%	71.71%

Item 14 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. 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 is still rated an area needing improvement. The Practice Performance report still 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) shows progress 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 CQI MSA qualitative data on children in foster care has maintained a high rating although that rating in 2021 dropped from 83% in Q1 2021 to 78% in Q3 2021. As mentioned in reporting period 5, the OMS item rating narrative summary for Item 14 reflected a higher number of in-home cases rating area needing improvement than that of foster care cases. 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. Q1 2022 MSA for 5.1.a continued to show a decrease in quality contacts at 72.2%, 1,453 of 2012 children in foster care reviewed had quality monthly contacts. The above response supports the comment that In-home cases bring will further decrease this rating.

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.

Item 15: Caseworker Visits with Parents

Item 15 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	102	103	93	89
Number of Total Applicable Cases	276	274	271	265
Performance (%)	36.96%	37.59%	34.32%	33.58%

Item 15 corresponds to Goal 1 Strategy 1/activities 1-6 and Goal 1 Strategy 2/activities 1-5 of the CFSR PIP. 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? The goal of 30% was met in reporting period 2 and continues to be met each period. It appears that the related strategies have had the intended impact.

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

2023 Annual Progress and Services Report

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.

In partnership with the MS Supreme Court's initiative to build trauma informed and hope centered practice in MS court systems and child welfare services, MDCPS asked employees to complete the Hope Survey in May 2021. MDCPS received 447 responses from approximately 1,390 MDCPS employees (a 32.16% response rate). While MDCPS do not know a concrete reason why the response rate was low, it could be similar to the reason that the peer-to-peer support group attendance decreased, possibly including issues with a lacked confidence in the confidentiality, a poor use of their limited time or Specialists were not seeing sufficient changes in their areas of concerns quickly enough to warrant response. The response rate did indicate to MDCPS Leadership a need for new ways of communicating and gathering information from staff and a need to increase trust in the workplace environment.

Workforce Wellbeing 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 continue 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.

Wellbeing outcomes 2 and 3: The RFP for in-CIRCLE has been revised as of July 2022. The expected date of implementation is October 2022. It includes an array of requested services from the Providers. 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 serve children and youth who have emotional and behavioral problems and/or experienced abuse and neglect.

2023 Annual Progress and Services Report

- Programs 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:

- 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.
- 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.
- Tertiary Prevention- services for families that have substantiated evidence of child abuse/neglect.
- The Expected Outcomes are Safety, Permanency and Well-Being which address the following:
 - Protect children from abuse and neglect.
 - Safely maintain children in their homes whenever possible and appropriate.
 - Ensure children have permanency and stability in their living situation.
 - Preserve the continuity of family relationships and connections for children.
 - Enhance the capacity of the family to provide for their children’s needs.
 - Ensure children receive adequate services to meet their physical and mental health needs.
 - Practices reduce the impact of social stress on the mental health of vulnerable children and families.

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 73.39% Strength and 26.61% 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 provide assistance 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 at 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 7 of April 2021 to March 2022. Wellbeing Outcome 3 rated at 30.66% substantially achieved, 14.98% partially, and 54.36% not achieved.

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 30.66% (n=88), Partially Achieved at 14.98% (n=43), and Not Achieved at 54.36% (n=156). 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. The breakdown of the Practice Performance elements measured for each item is notated below in separate tables.

Item 17 Physical Health of the Child: Did the agency address the physical health needs of children, including dental health needs?

Item 17 rated 38.72% Strength and 61.28% 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).
- 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.

MDCPS notes that there is no specific measurement goal established for this item in the CFSR PIP. The nursing staff utilize the snapshot for children coming into MDCPS custody to assist with ensuring our foster children are gaining medicals, EPSDT, and dentals. The nursing unit utilizes reports from Magnolia healthcare such as foster care members reports and EPSDT noncompliance reports.

MDCPS Field Support Unit revised the Health Care Oversight and Coordination Plan, which has been utilized effective January 2020. Initial medical timeframes, now being utilized show children should receive an initial medical within 72 hours of the child's entry into foster care. Initial EPSDT shall be completed within 30 days of the child entering foster care. Initial dentals are still reflecting 90 days of the child's entry into foster care. This plan's revision is a new focus to provide ongoing support to frontline staff to help meet the needs of the families and children they serve. The Health Care Oversight and Coordination Plan is designed to strengthen activities that improve the healthcare and oversight of children and youth in foster care. This plan is currently being utilized and implemented by the Nursing Unit.

Item 18 Mental/Behavioral Health of the Child: Did the agency address the mental/behavioral health needs of children?

Item 18 rated 37.14% Strength and 62.59% Area Needing Improvement. Practice Performance results reflects 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 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.

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

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.

D. CFSR Systemic Factors

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 4,397 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 is an area needing improvement. 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 consist of reports that are primarily build 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,

2023 Annual Progress and Services Report

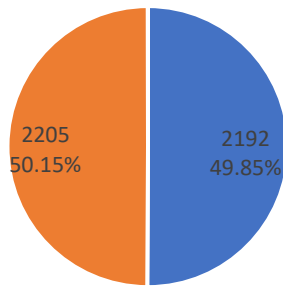
LLC to transition the current statewide information system (MACWIS) to a CCWIS-compliant system.

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.

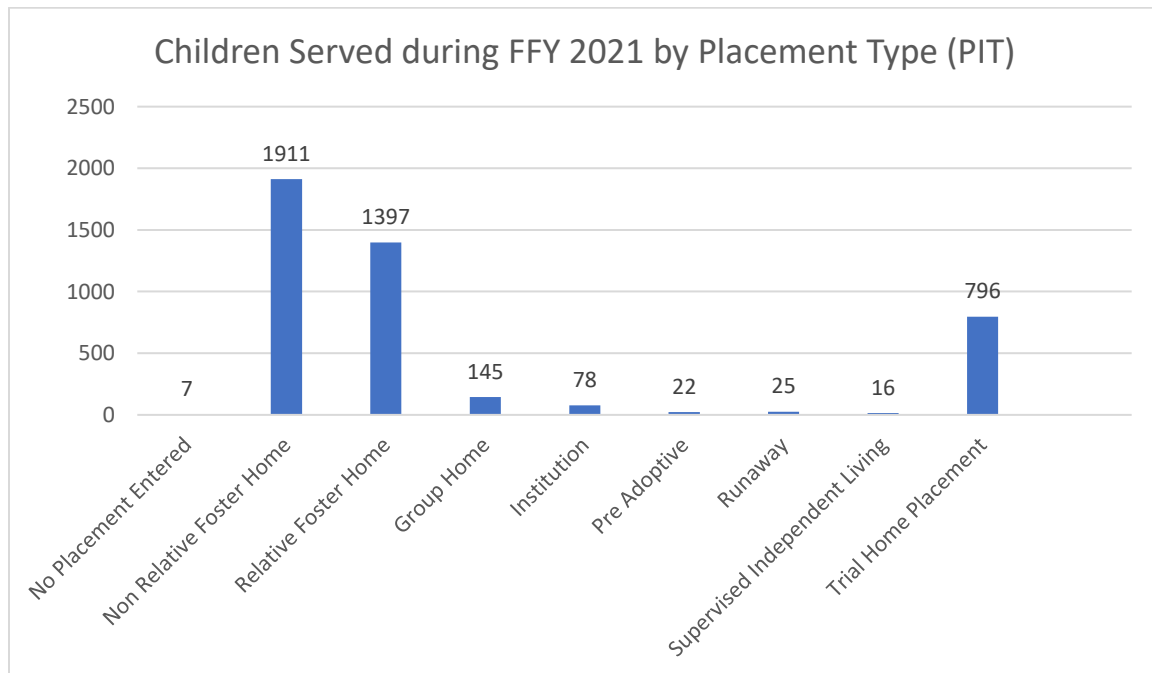
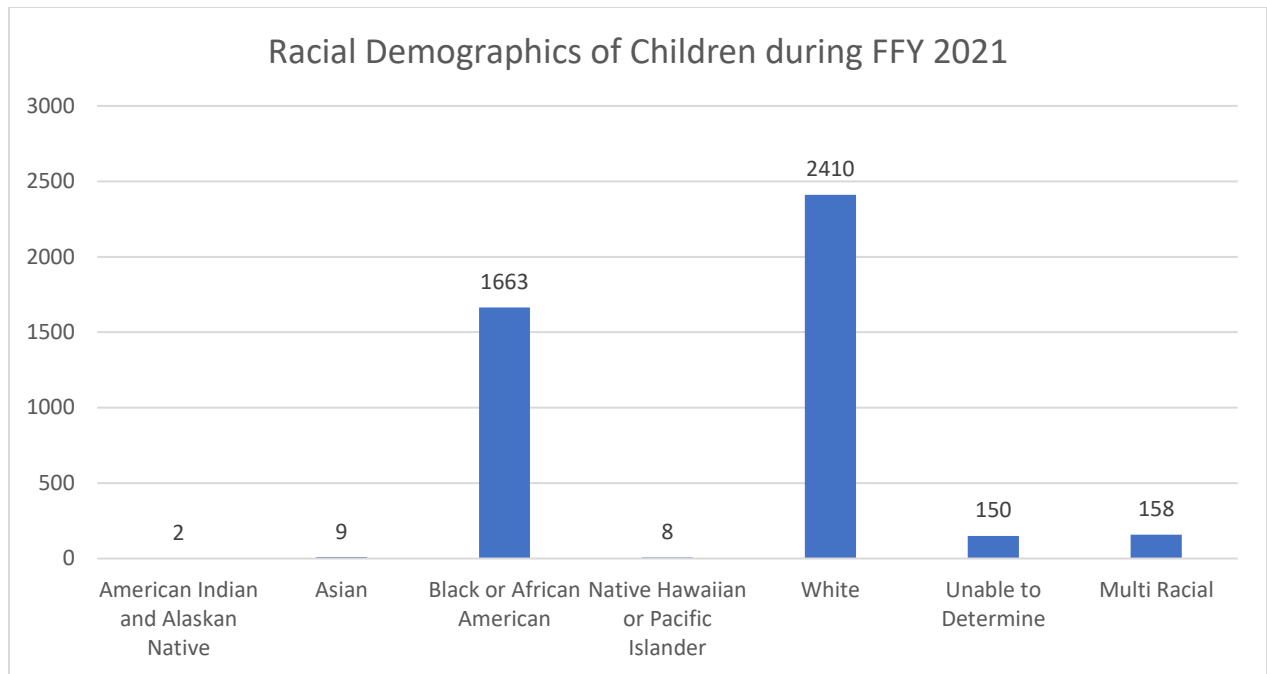
Gender Demographics of Children Served during FFY 2021

Total 4,397

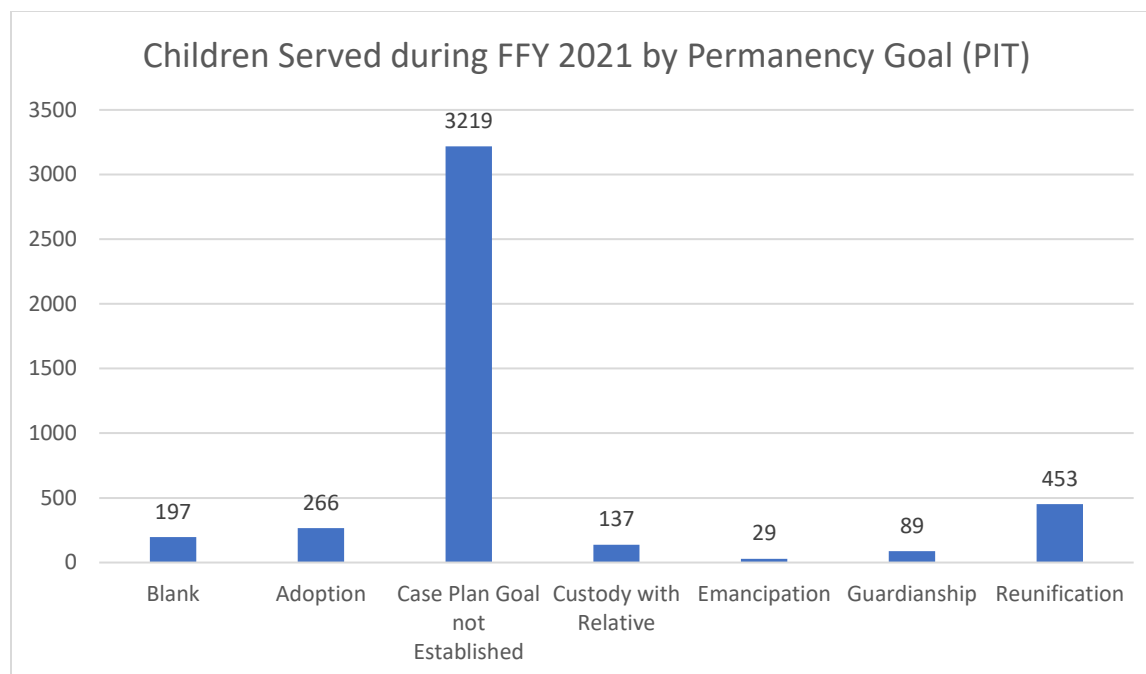


■ Male ■ Female ■ N/A

2023 Annual Progress and Services Report



2023 Annual Progress and Services Report



The number of cases with the case plan goal not established (3,219) 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 Case Review Results	Reporting Period 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 – Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	67	73	77	99
Number of Total Applicable Cases	210	210	210	210
Performance (%)	31.9%	34.76%	36.67%	47.14%

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 case plans, it does not effectively ensure that parents are engaged in the development of initial and ongoing case plans; however, it does not effectively ensure that parents are engaged in the development of initial and ongoing case plans. This was identified as an area needing improvement in the CFSR. And although MDCPS's performance in this area has improved, it remains an area needing improvement.

The Case review process (Foster Care Review and Regional Review using the OSRI) provide 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 4	Reporting Period 5	Reporting Period 6	Reporting Period 7
Data Period	July 2020 – June 2021	Oct 2020 –Sept 2021	Jan 2021 – Dec 2021	April 2021 - March 2022
Number of Cases Rated as a Strength	153	160	154	149
Number of Total Applicable Cases	326	325	326	325
Performance (%)	46.93%	49.23%	47.24%	45.85%

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.

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
Q1 2021 (January 2021 – March 2021)	95%
Q2 2021 (April 2021 – June 2021)	99%
Q3 2021 (July 2021 -September 2021)	95%

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 below for 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.b. MDCPS will take all reasonable steps to ensure that a court review, which may be called a review, dispositional or permanency hearing, is held for each child in foster care custody within 12 months of initial placement and annually thereafter. The population of children represented in this data set include all children due for a foster care review during the PUR that have been in custody for at least 12 months. This represents the number of children due for a 6-month administrative review (Item 21 Periodic Reviews) and the Reviewer found that either a permanency hearing was held timely or a request for a hearing was made timely.

Reporting Period	Reasonable Steps to Ensure a Permanency Hearing
Q1 2021 (January 2021-March 2021)	99.7%

2023 Annual Progress and Services Report

Q2 2021 (April 2021-June 2021)	99.7%
Q3 2021 (July 2021-September 2021)	98.7%
Q4 2021 (October 2021- December 2021)	99.5%
Q1 2022 (January 2022-March 2022)	98.6%

Item 23: Termination of Parental Rights

MDCPS agrees with the CFSR rating for this item as an area needing improvement. During the qualitative review conducted by the Permanency Support Services/TPR Unit for the period of January 1, 2021, to December 31, 2021, it was found that MDCPS was compliant in 18% of cases. It was noted that MDCPS requires much needed improvement in filing timely TPR referrals and notating initial/subsequent ASFA exceptions.

The PSS/TPR Unit conducted a qualitative review for the period of January 1 - December 31, 2021. 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 2020 and 2021.

- 2020 ASFA Exceptions – 6.3.b.2 – 11 Valid ASFA Exceptions (Numerator)/958 Total Population (Denominator)
- 2021 ASFA Exceptions – 6.3.b.2 – 03 Valid ASFA Exceptions (Numerator)/816 Total Population (Denominator)
- 2020 TPR Referrals – 6.3.b.2 – 134 Timely TPR Referrals (Numerator)/958 Total Population (Denominator)
- 2021 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.

2023 Annual Progress and Services Report

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.

MDCPS Field Operations leadership continues to receive coaching around completing and submitting timely TPR Packets. MDCPS has 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 to increase docket capacity to hear these cases. And MDCPS and the Office of the Attorney General currently are in discussions of ways to increase capacity for litigating these cases. During SFY 2021, 10 children became legally free for adoption in Hinds County. Since the appointment of a special judge, 50 children became legally free for adoption during SFY 2022.

During SFY 2021, 10 children became legally free for adoption in Hinds County. Since the appointment of a special judge, 50 children became legally free for adoption during SFY 2022.

The Office of Legal Counsel, which assisted in helping Hinds County clear the backlog of TPR cases as part of the PIP, is preparing to turn its attention to other counties that may need assistance. Currently, OLC is working with the Permanency Unit to assess the data on cases where a child's permanency plan has changed to adoption but where the packet has not yet been received at State Office for review and submission to the Office of the Attorney General. OLC plans to provide legal support on deficiencies or needs involving missing court order and other legal documentation. OLC is also determining the feasibility of finding staff in the regions who can dedicate time to completing these packets, as it is done successfully in Region I-N.

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

2023 Annual Progress and Services Report

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 (*similar to 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 County Conference invitation letter are 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
Q1 2021 (January 2021-March 2021)	77% of caregivers invited (Caregiver includes any current placement)

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
	<p>caregiver the child is living with at the time of the review)</p> <ul style="list-style-type: none"> • 78% Mothers invited • 75% Fathers invited • 73% Children invited • 77% Caretakers invited • 67% Guardian ad Litem (GAL) invited • 100% Relevant Professionals invited • 52% All relevant parties invited
Q2 2021 (April 2021-June 2021)	<p>70.9% of caregivers invited</p> <ul style="list-style-type: none"> • 74.5% Mother invited • 70.2% Father invited • 72.9% Child invited • 70.9% Caretakers invited • 67.2% GAL invited • 100% Relevant Professionals invited • 46% All relevant parties invited
Q3 2021 (July 2021-September 2021)	<p>80.3% of caregivers invited</p> <ul style="list-style-type: none"> • 77.7% Mother invited • 78.1% Father invited • 82.2% Child invited • 80.3% Caretakers invited • 75.1% GAL invited • 100% Relevant Professionals invited • 65.6% All relevant parties invited
Q4 2021 (October 2021- December 2021)	<p>69.1% caregivers</p> <ul style="list-style-type: none"> • 78.1% Mother invited • 76.7% Father invited • 76% Child invited • 69.1% Caretakers invited • 71.5% GAL invited • 100% Relevant Professionals invited • 55.1% All relevant parties invited

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
Q1 2022 (January 2022- March 2022)	74.5% caregivers <ul style="list-style-type: none"> • 80.6%- Mother invited • 79.4%- Father invited • 79.5%- Child invited • 77.2%- GAL invited • 74.5%- Caretakers invited • 100% - Relevant Professionals invited • 61.0% All relevant parties invited

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?

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 strategies, 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 percent of other in-home maltreatment investigations.

2023 Annual Progress and Services Report

- 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.

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, represent a full Plan-Do-Study-Act (PDSA) CQI/QA process and is the Review process detailed below.

Annually, 350 cases which represents a sample of twenty-five cases from each of the fifteen regions in the State are conducted as part of the Regional Review process. Of those twenty-five cases, fifteen are foster care and ten are in-home cases. The federal OSRI, maintained by the CB and made available through a secure on-line portal called Online Monitoring System (OMS) ensures a comprehensive, outcome-focused approach. The OMS provides a multitude of detailed reports that are used to calculate and communicate findings from the case review process.

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.

2023 Annual Progress and Services Report

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.

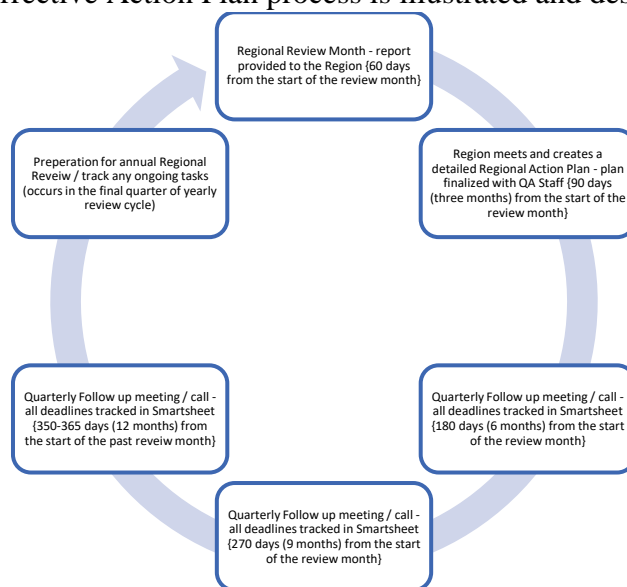
When fully staffed, OMS has nine dedicated staff. To ensure that practice is assessed uniformly among the team members, staff participate in monthly training sessions to discuss and clarify questions related to the interpretation of the meaning of particular case review questions, variation in reviewer's 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.

<u>Regional Corrective Action Plan Template</u>						
<u>Date Action steps developed:</u>						
<u>Goal(s)/Expected Outcome(s):</u>						
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 qualitative, 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 is planning improvements. 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. In 2020, MDCPS shifted from face-to-face classroom training to virtual instructor led training. MDCPS, with advances in training delivery, is beginning to pursue a new training model to train all newly hired staff.

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 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 for 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 Professional Development 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.

2023 Annual Progress and Services Report

The consultants have not started the focus group and at this time Professional Development does not have the capacity to do these while training all the classes. At this time the decision has been made to stop this process and begin looking at next steps toward the creation of a new curriculum development team. The executive leadership of the agency is in talks about how to proceed with these steps. This will be for creation of Pre-Service as well as initial Supervisory training for the agency.

In the current year, MDCPS provided pre-service training to 280 staff: 263 caseworkers and 17 supervisors. The training is pass / fail, a total of 4 tests. All 280 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 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,

2023 Annual Progress and Services Report

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. Professional Development will evaluate this training and determine next steps. In addition, MDCPS have purchased content from Cornerstone to help further train staff on Professionalism and Leadership Development. MDCPS is working with a potential university partner to deliver a licensure prep course to unlicensed staff to assist with securing licensure. Professional Development has worked with the Executive office to begin delivering Leadership Forums that are required of all supervisory staff. The Forums are virtual, interactive sessions with all levels of leadership and are led by members of the Executive office. The material is shared with all agency staff at the conclusion of the training.

MDCPS 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.

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 have 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. 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 supervisor to support employees. MDCPS set a goal to begin this endeavor the first quarter of 2023.
- MDCPS has hired a full time Workforce Development Director dedicated solely to recruiting new staff by building relationships with schools and professional associations. Mission focused, motivational materials have been prepared for use in advertising, presentations, social media, and tabling at job fairs. Workforce Wellbeing and Workforce Development are working together to include existing staff in recruitment activities.
- A new MDCPS website is under construction and will provide improved public and stakeholder interaction as well as offer an interactive employee portal to MDCPS staff. Workforce Wellbeing will have a dedicated section for providing supportive content and creating connections with team members.
- Workforce Wellbeing (WWB) 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.

- 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 increased, the workforce will stabilize and engagement with children and families will improve.

MDCPS worked with Public Knowledge on a revised curriculum that launched in April 2022. Updates included policy revisions and minor changes made to ensure the curriculum flows. Professional Development conducted a train the trainer to prepare all Training Specialists on how to deliver this material. Discussions about what changes had been made were conducted to ensure specialists are aware as they prepare to lead this training.

Professional Development delivers training to over 1,400 MDCPS employees. The challenge is meeting an increased demand with regards to all trainings being developed and delivered and hiring enough staff to successfully support the entire state. MDCPS will hire 20 new training specialists to support training demands throughout the state. Training Specialists will 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,

2023 Annual Progress and Services Report

- 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.

Additionally, MDCPS's foster/adoptive parent training is continually improving in April/May 2021, a Trauma Informed Training was instituted for all current relative and non-relative foster parents.

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.

The MDCPS Licensure Unit continues to use the same curriculum (PATH) to train prospective foster parents. Due to COVID restrictions, MDCPS completed the in-person portion of training via Zoom/Facetime. Rescue 100 discontinued all weekend events a year ago and is assisting county Licensure staff with conducting initial training via Zoom/Facetime as well as licensing homes in some of the counties that are experiencing staff shortages. The Licensure Unit also modified the requirement for 10 hours/every 2 years face to face training and allowed employees to receive those hours via online courses during most of 2021. Ongoing training moved to in-person January 2022, and there are plans to transition all in-classroom training for PATH after March 2022.

Foster Parents are not licensed until attendance and completion of the initial PATH/PREP training. Training is provided once MDCPS receives an application and conducts a walk-through of the home along with background checks. The training is completed, typically, before the home study interview. A portion of the interview is completed online through Cornerstone. Families that experience issues maneuvering Cornerstone are given one-on-one training when needed. Due to COVID, during the year 2021 the face-to-face portion of PATH was facilitated via Zoom.

Small groups during training create an opportunity for active learning and instructional flexibility. Participants and staff are comfortable and more engaged, which allows development and/or enhancement of required skills to succeed in their job and within MDCPS. 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.

In 2021, there were 368 non-relatives' homes approved, and 408 relative homes approved; all these families were trained.

MDCPS contracts with Foster Parent College to provide online training opportunities to existing foster parents (relative or non-relative). Most support group meetings discontinued in

person due to COVID, but the Foster Parent Liaison continues to provide ongoing training via Zoom/Facetime meetings. All support groups will meet in person again starting January 1, 2022.

Trauma Informed Training began 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 delivered the training to all foster parents via Smartsheet with a YouTube video. Once foster parents finished an evaluation, credit was issued, and a certificate of completion was uploaded to their SharePoint file. Current relative and non-relative foster parents are required to complete trauma informed 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. The Licensure Specialist conducts quarterly visits and monthly visits as needed to conduct an ongoing assessment of the home and foster placements. 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 assures that training is provided. An evaluation is given to measure understanding and serves as achievement of a final Corrective Action Plan. The Plan signifies completion of that requirement.

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. The online training in P.R.E.P. required each foster parent applicant to complete an evaluation of the 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.

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. 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 assures that training is provided.

The classroom training has been conducted virtually since March 2020 due to the widespread of COVID-19. MDCPS planned to resume in-person training January 2022, however, the increased incidences of COVID-19 made it necessary to continue providing training online and virtually. MDCPS plans to transition back to classroom and online training no later than July 2022. Rescue 100 discontinued all weekend events but assisted county Licensure staff with virtual orientation via Zoom/Facetime as well as licensing homes in some counties experiencing staff shortages. Currently, MDCPS continues to provide virtual classroom training to applicants via Zoom and Teams.

So far in 2022, 94 non-relative homes were approved; 115 relative homes were approved. All these families were trained.

MDCPS contracts with Foster Parent College to provide ongoing training on a variety of topics to foster parents. The family completes free educational training online. Training topics with Foster Parent College include anger management, eating disorders, sleep disorders, runaways, Reactive Attachment Disorder, sex trafficking, mental illness, problematic sexualized behaviors, lying, self-harming, fire play, and Autism. The Licensure Supervisors and Bureau Directors 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. 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. The support groups discontinued in-person meeting for a time in 2021. A newsletter was distributed statewide to MDCPS foster parents explaining the expectation that Support Groups will return to in-person. As of January 2022, 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. Support groups are now meeting in person. Currently, the Licensure Specialist conducts re-evaluation to the Licensure Supervisor for

review to ensure the training hours are obtained. MDCPS has a Resource Re-licensure report that indicates when home has expired and will expire. However, we do not have a tool to calculate the compliance rate.

Also, support groups are now meeting in person. 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 finished 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. An RFP was advertised to procure for community-based services geared towards primary and secondary prevention. 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 needed families
- Clothing and food assistance

2023 Annual Progress and Services Report

- 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 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.

Service array and resource development continues to be areas needing improvement. MDCPS provides services to address the safety and wellbeing, 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 a 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. In 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 is continued 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 the 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 waitlist 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.

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 supports.

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 supports 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).

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.

MDCPS continues to engage the faith-based community through Rescue 100 recruiting efforts.

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 have 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 in 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 loops 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. But there is not a more robust partnership in framing the actual text of the CFSP/APSR at this time.

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

2023 Annual Progress and Services Report

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 supports the agency’s vision and mission. MDCPS actively continues to collaborate with other agencies by establishing Memorandum of Understandings (MOU) that strengthen 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 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.

2023 Annual Progress and Services Report

Provider	Brief Description of 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 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?

2023 Annual Progress and Services Report

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 a few exceptions to our requirements in two areas: 1) the age of the relative applicant can be less than 21 years old and 2) the applicant doesn't have to be legally married or divorced. Expedited homes are tracked by the State Office Licensure Unit to assure we are being consistent and addressing safety and non-safety issues as well as timeliness. The CQI Unit reviews every expedited home within 30 days once an action is taken, to make sure that a third level of review is held. The non-relative homes are reviewed by the Regional ASWS within 7 days of approval and a case review tool is used and recorded in a Smartsheet. If there are any issues that need resolving, the Regional ASWS gives a deadline and shows it's been resolved in a timely manner.

While our field staff licenses the foster home, the 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. As of March 31, 2022, we have processed a total of 600 non-expedited applications.

Month	Jan. 2022	Feb. 2022	March 2022
No. of Applications Received	169	255	176

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 for quality by reporting to Public Catalyst the results of our review of non-relative and expedited homes. The results of the 2022 quarterly reviews for non-Relative homes are as follows:

2023 Annual Progress and Services Report

Reporting period 1 st quarter 2021	2 nd MSA Provision	Provision Description	Performance: 100%
Jan. – March 2022	3.1	Quality Review of Non-Relative Foster homes	Review of records that were approved: 100% Quality of records reviewed: 82%

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. 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. 479 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.

82% (n=80) of the approved homes reviewed in Q1. Ninety-one (91) were found to have a comprehensive file. Ninety-one (91) homes were labeled Foster Homes and twenty-one (21) homes were labeled Child Specific/ICPC homes. Twenty-one (21) homes had issues that needed resolving before the review was considered complete. Eighty-three (83) of the Ninety-one (91) licensed foster homes were approved timely. 91% were licensed timely.

In our 1st quarterly 3.1, 3.3 a and b Memo, the total number of homes licensed in 1st quarter is 91. For the rebuilding period, October 2021 to present, our "to date" total is 180.

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 Regional ASWS is viewing the SharePoint file while completing their review so they should be able to assure the correct forms are being used and address the issues with the ASWS's where they see a pattern. 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. The Master Non-Relative Smartsheet has been filtered to give each Regional/ASWS their own listing so they can keep track the home from entry until completion. The Bureau Directors will address the continued issues with reviews in their monthly staffing with all ASWS's and Regionals.

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.

Non-relative homes are reviewed by a third level review team (within the Licensure Unit) for documentation and quality, within 7 days of approval by the Area Social Work Supervisor. In 2022, we licensed 94 non-relative homes:

- January 2022: 29 homes

2023 Annual Progress and Services Report

- February 2022: 24 homes
- March 2022: 41 homes

Expedited Relative homes are allowed a few exceptions to our requirements: 1) the age of the relative applicant can be less than 21 years old, and 2) the applicant does not have to be legally married or divorced. Expedited homes are tracked by the State Office Licensure Unit to assure we are being consistent and addressing safety and non-safety issues as well as timeliness. The Continuous Quality Improvement Unit reviews every home that within 30 days, once an action is taken, to make sure that a third level review is held. We report these findings monthly and quarterly to Public Catalyst. We had action taken on 185 homes in 2022.

- January: 59 homes
- February: 64 homes
- March: 62 homes

No Expedited Relative family is not to 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 our newly renegotiated Rebuilding Period of our Modified Settlement Agreement, new quotas were formulated for the months of October 2021-January 2023. We must license 486 nonrelative homes during that 18-month period. 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.

Rescue 100 is in the process of being revamped. We are in the process of removing the Rescue 100 name off materials such as the applications and we have discontinued the distribution of the Rescue 100 brochures. Removal of all Rescue 100 branding from the website is also in progress. As of April 1, 2022, the development of the MDCPS Foster Parent Recruitment Unit (FPR) was developed. Currently, the unit consists of three (3) Recruitment Supervisors and seven (7) Recruitment Specialists. The unit's primary focus is recruitment throughout the state to help identify new potential foster families so that we can license the targeted number of 486 homes by the end of January 2023. There is a possibility that the unit will also provide the Pre-Service Training but planning and development is ongoing at this time. Contractors are still being utilized to help aide in licensing non-relative homes. We will hopefully have this completely decided in the coming months.

Retention:

2023 Annual Progress and Services Report

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.

Resource Home Closures FFY 2021	Number Closed
Agency Decision	91
Agency Decision / Agency Licensing Requirements	3
Agency Decision / Agency Licensing Requirements / Family Request / No children place in the home	3
Agency Decision / Agency Licensing Requirements / No children place in the home / Substantiated ANE	1
Agency Decision / Family Moved Out of State	1
Agency Decision / Family Request	7
Agency Decision / Family Request / Family Uncooperative / No children place in the home	1
Agency Decision / Family Request / No children place in the home	3
Agency Decision / Family Uncooperative	1
Agency Decision / Family Uncooperative / No children place in the home	2
Agency Decision / No children place in the home	26
Agency Decision / No children place in the home / Substantiated ANE	3
Agency Decision / Substantiated ANE	6
Agency Licensing Requirements	13
Agency Licensing Requirements / Family Request	2
Agency Licensing Requirements / No children place in the home	2
Facility Request	19
Facility Request / No children place in the home	8
Family Moved Out of State	2
Family Moved Out of State / Family Request	3
Family Moved Out of State / Family Request / No children place in the home	2
Family Moved Out of State / No children place in the home	3
Family Request	241
Family Request / No children place in the home	144
Family Uncooperative	2
Family Uncooperative / No children place in the home	1
No children place in the home	171

Resource Home Closures FFY 2021	Number Closed
No children place in the home / Substantiated ANE	1
Substantiated ANE	5
Grand Total	767

A newsletter is sent out 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.

Our Licensure Unit currently completes the local background checks as well as a walk-through of the non-relative home before scheduling the family for fingerprints and enrolling them in training. Licensure is given a 45-day deadline, from the date of the inquiry, to complete these

2023 Annual Progress and Services Report

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 specialist 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 the applicant 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 for collected during the program year.

Month	Non-Rel Resource Applicant	Relative Resource Applicant	Adoption	Youth in the home	Total	Adam Walsh Disqualifier
Jul 2021	76	66	0	26	168	0
Aug 2021	145	68	0	17	230	1
Sept 2021	132	90	0	15	237	0

Month	Non-Rel Resource Applicant	Relative Resource Applicant	Adoption	Youth in the home	Total	Adam Walsh Disqualifier
Oct 2021	102	81	0	15	198	0
Nov 2021	102	76	0	13	191	0
Dec 2021	73	80	0	21	174	0
Jan 2022	67	57	0	10	134	0
Feb 2022	63	34	0	13	110	0
March 2022	64	87	0	37	188	0
April 2022	76	66	1	22	165	0
May 2022	73	61	0	18	152	1
Grand Total	973	766	1	207	1947	2

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 Licensure Unit continues to complete a monthly calendar of events for each region to show recruitment efforts. They often conduct activities such as speak 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 is needing 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 has been utilized more to recruit for families that most closely match to 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 has 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 still will 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 thru 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. 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?

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 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 on 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

2023 Annual Progress and Services Report

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; Obtaining additional staff to divide up caseloads to provide better case management and processing through the ICPC office.

ICPC continues to work with local offices and other states to adhere to and promote the standards set forth in the Safe and Timely Act of 2006 encouraging timely home studies. ICPC also has on going collaboration with Administrative Office of Courts (AOC) Court Improvement Program for educational training and collaboration with judges to work through permanency barriers. Additionally, ICPC works 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.

During this reporting period, the Division Director and all 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. Regarding the AAICPC Conference for 2021, The AAICPC organization decided to hold the AAICPC Virtual Business and Health and Human Services Update conference, in which all ICPC Staff participated as trainers. One of Mississippi’s representatives was elected to serve as the Chairperson of this Training Committee. This training forum was also available for local agency staff to attend nationwide in which MDCPS staff from various areas within the state participated. County Front Line, Licensure and Adoptive staff were able to be trained and become familiarized with the ICPC process. This meeting was held in October 2021. Currently, ICPC staff are encouraged to attend all monthly AAICPC conference calls which gives 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. An “AAICPC Special” meeting was called for the national body to amend Articles of Organization to create an emergency provision to permit official electronic voting by the ICPC member body during times of emergency or Acts of God (Nature) when the ICPC body is unable to meet in person, and outstanding business matters as appropriate. This meeting was held in November 2021. It was attended by the Deputy Compact Administrator. This Mississippi ICPC representative was also elected to serve on the AAICPC Executive Committee at this meeting.

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.

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 Attorney General's office when dealing with situations beyond the scope of the division's daily policies and procedures. 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 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.

When new 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 were entered. It has made it easier and more efficient in corresponding with participating states. It has been most effective in lowering cost for postage as well as for paper.

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 State Office, so they can also check on the case status remotely. 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 at easily accessing ICPC case files.

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

NEICE: 149 cases handled for Regulation 7 (parent, foster, public adoptions, private adoptions, residential placements, and court jurisdiction only cases)

1. Regulation 1-3
2. Regulation 2 -Parent, Foster, Public Adoption, Court Jurisdiction-82
3. Regulation 4 -Residentials 47
4. Regulation 7- 3
5. Regulation 12-Private Adoptions-14

The total number of homes for licensure between July 1,2021 – September 30, 2021, was 34.

These homes were assessed for a total of 13 single child placement and 21 sibling placement cases. Some of these homes were for placement of sibling groups. The homes were categorized as single child placement and sibling group placements along with the percentages represented by each category.

Single child placement homes completed timely 13 (100%)
Single child placement homes not completed timely 0
Sibling group homes completed timely 21 (100%)

2023 Annual Progress and Services Report

Sibling group homes not completed timely 0

The total number of homes for licensure between October 1, 2021 – December 31, 2021, was 40.

These homes were assessed for a total of 12 single child placement and 28 sibling placement cases. Some of these homes were for placement of sibling groups. The homes were categorized as single child placement and sibling group placements along with the percentages represented by each category.

Single child placement homes completed timely 6 (50%)

Single child placement homes not completed timely 6 (50%)

Sibling group homes completed timely 23 (82%)

Sibling group homes not completed timely 5 (18%)

NEICE & SMARTSHEET: 264 cases handled for Regulation 7, parent, foster, public adoptions, private adoptions, residential placements, and court jurisdiction only cases)

1. Regulation 1-1

2. Regulation 2 -Parent, Foster, Public Adoption, Court Jurisdiction-102

3. Regulation 4 -Residentials 22

4. Regulation 7- 0

5. Regulation 12-Private Adoptions-4

NEICE & SMARTSHEET: 264 cases handled for Regulation 7, parent, foster, public adoptions, private adoptions, residential placements, and court jurisdiction only cases)

1. Regulation 1-2

2. Regulation 2 -Parent, Foster, Public Adoption, Court Jurisdiction-231

3. Regulation 4 -Residentials 14

4. Regulation 7- 5

5. Regulation 12-Private Adoptions-12

The total number of homes for licensure between January 1, 2022 – March 31, 2022, was 168.

These homes were assessed for a total of 77 single child placement and 91 sibling placement cases. Some of these homes were for placement of sibling groups. The homes were categorized as single child placement and sibling group placements along with the percentages represented by each category.

Single child placement homes completed timely 28 (36%)

Single child placement homes not completed timely 7 (9%)

Sibling group homes completed timely 28 (21%)

Sibling group homes not completed timely 6 (7%)

The total number of homes for licensure between April 1, 2022 – June 30, 2022, was 56.

These homes were assessed for a total of 20 single child placement and 36 sibling placement cases. Some of these homes were for placement of sibling groups. The homes were categorized

as single child placement and sibling group placements along with the percentages represented by each category.

Single child placement homes completed timely 2 (10%)

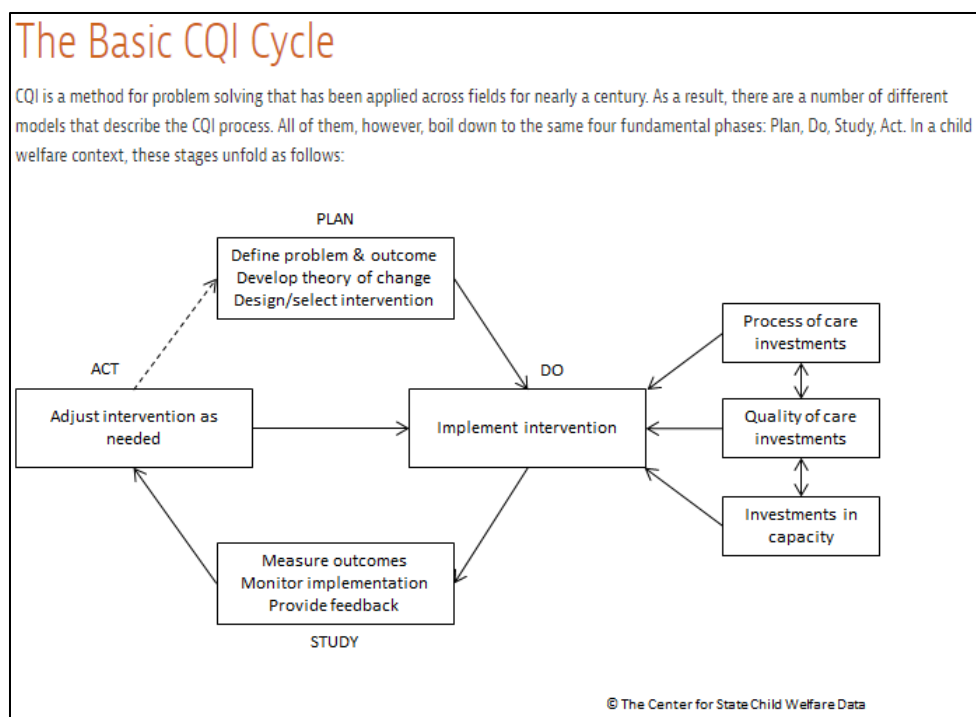
Single child placement homes not completed timely 7 (9%)

Sibling group homes completed timely 0 (0%)

Sibling group homes not completed timely 2 (6%)

IV. 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 joint planning meeting provided an opportunity for a diverse group of stakeholders to discuss pressing and emerging issues in our child welfare system. Shortly after this Conference on Children and Families, the decision was made to expand the number of Joint Planning meetings to quarterly; these quarterly meetings are scheduled to begin in October 2022. Other steps to continue to develop a robust CQI structure has been to take steps to develop a quality data system that will yield quality data (i.e., contracting with RedMane Technology, LLC, described below). A Senior Data Analyst has been added to the Data Management Team to focus on federal/CQI data set modeling and analytics. Additionally, a small CQI workgroup, developed to prepare for the APSR, explored various CQI processes and drafted a Plan-Do-Study-Act graphic that will be proposed for use within Mississippi's child welfare system. One of the first changes will be the adoption of a Plan, Do, Study, Act (PDSA) cycle. 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.



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 Joint Planning Meeting:** This external stakeholder team will meet quarterly to discuss and strategize high level agency priorities, including agency-wide performance data will be shared and discussed.
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 Team 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. Although the CQI Team itself will be charged with developing an organizational structure, it is envisioned that program area sub-committees will be developed, these sub-committees will bring in a variety of front line and supervisory staff to provide input through various avenues (i.e.: surveys, topical focus groups, “listening” meetings, etc.) In addition to program-specific committees, sub-committees may be focused on specific CQI stages. 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.

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), currently under development, will be a foundational planning artifact for MDCPS data quality initiative. The Agency will 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.

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 four 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
- Placement stability

Outcomes below national risk standardized performance are:

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

To move the understanding of these indicators throughout the state, a series of CFSR Data Indicator Workshops will be provided to 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 provided not only to 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 Team will utilize stakeholder groups, such as the Youth Advisory Council., the Foster Parent Feedback Group, and the Joint Planning Meeting 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).

V. 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:

2023 Annual Progress and Services Report

- A stable, qualified workforce, including the Agency’s restructuring efforts (described on pp. 39-40), the Workforce Wellbeing Initiative (pp. 24-26), 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.

MDCPS’s 2023 APSR Goals and Objectives have been revised to reflect solutions to agency needs identified through an analysis of various forms of evidence and stakeholder feedback.

Below is a summary of Revisions to the 2022 APSR Goals and Objectives (Note: The rationale included in each strategy reflects CQI data and/or information that as used to identify and inform the revisions.)

- 2022 APSR Goal 2, Objective 1, to *“Increase the number of children safely maintained at home through improved risk, safety, and family needs assessment.”* Has been incorporated into 2023 APSR Goal 1, Objective 1. This revised goal/objective includes the development of Centralized Intake and Assessment, Structured Decision Making, and staff restructuring to form specialized program area units.
- 2022 APSR Goal 1, Objective 1, which stated: *“Prevent child maltreatment through local community collaboration to identify and develop resources that strengthen families’ capacity to care for their children.”* has been revised slightly and is now located under the Goal 2: Prevention and includes strategies such as expanding frequency of Joint Planning Meetings (multi-disciplinary task force), and meaningfully engaging birth parents in an advisory capacity.
- 2022 APSR Goal 2, Objective 2, to *“Increase the number of children safely maintained at home through an expanded array, and increased quantity, of intensive in-home services”* is contained in Goal 2, Objective 1, to *“contractually knit together a continuum of in-home services.”*
- 2022 APSR Goal 2, Objective 3 and Goal 3, Objective 2 speak to reducing foster care placement and increasing permanency through improved statewide parental representation in youth court. These objectives have been removed from the formal goals and objectives section because they are incorporated into MDCPS’s ongoing collaboration with state courts, legal and judicial community, discussed in Section II. **CFSR PIP:** During the past year, several collaboration efforts between MDCPS and Mississippi’s judiciary have continued to advance Mississippi’s CFSR PIP along with CFSP goals and strategies.

Additionally, The Parent Representation task force meets quarterly, and its purpose is specifically to work to expand the availability of parent representation, Youth Courts added two new counties to its parent representation program, Lowndes and Lauderdale and are looking at adding a third. Marion County has shown such great success with their program that the county is now fully supporting the Marion County Parent Representation program.

- 2022 APSR Goal 3, Objective 1, to “*Increase the number of children safely reunified through improved family needs assessment*” has been incorporated into several strategies throughout the Goals and Objects section, specifically, the strategy to implement structured decision making and to improve family engagement through staff training.
- 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 2022 APSR discussed plans to create a Task Force within the agency that will ensure the programs and initiatives align with the agency’s goals and feedback impacted, data driven decisions are made. The CQI Team will serve this purpose.

Child Safety and Wellbeing:

Goal 1: Mississippi will support the safety and wellbeing of its children by reducing rates of recurrence of child maltreatment.

As noted in Section III, Mississippi’s recurrence of maltreatment rate of 10.4%, is higher (worse) than the national performance (9.5%). This CFSR statewide data indicator (SDI) is the baseline performance. The SDI, which are used as baseline measures throughout this section, are produced and disseminated by the federal Children’s Bureau twice a year. Therefore, to monitor implementation and measure impact, MDCPS will develop indicators using internal data. Each objective contains proposed indicators for “Monitoring Progress and Impact”. These indicators will be fine-tuned throughout the implementation year

Objective 1: Increase consistency in decision making from intake through investigation.

Child welfare decision-making practices directly affect the ability of agencies to achieve safety outcomes. Staff at all levels in the child welfare agency are responsible for strengthening decision-making, including administrators who establish systems, set policies, and review quality; midlevel managers and supervisors who ensure agency policies and programs are implemented and adequately supported; and frontline workers who conduct assessments and make decisions at the individual and family level⁹. Mississippi will develop several strategies designed to improve decision making in child welfare, including the following:

Centralized Intake and Assessment: Improve intake screening decision making

Rationale: Administrative data reveals that 48.3/1,000 children in Mississippi are involved in a CPS Investigation, and 11.7 children per 1,000 are determined victims of maltreatment. Both rates (indication and victimization) are higher than the national rates. Additional data is in Section III, Assessment of Current Performance. Additionally, variation in screened-in reports

⁹ Decision-Making in Child Welfare for Improved Safety Outcomes, Capacity Building Center for States for the Children’s Bureau, 2017.

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 will develop a Centralized Intake process. A state-level process will receive the report and determine 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, will 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 the quality risk and safety assessments, including the revision of definitions of risk and safety for consistency, clarity, and common understanding. Also, as part of the CFSR Program Improvement Plan, MDCPS reinforced its expectations of case staffing tools to improve supervisors’ ability to facilitate high quality case staffing.

Initiative: During the upcoming year, MDCPS will implement Structured Decision Making (SDM). This evidence-based model uses structured assessments to improve the consistency and validity of each decision throughout the life of the child welfare case. MDCPS will work with Evident Change, a leader in SMD assessments for child protection. SDM, as mentioned above, supports decision making throughout the life of the case, including Intake, Risk and Safety Assessments, and others. This initiative will support the transition to a Centralized intake, described above, and will support specialized staff training in using the assessment results to link services to families to minimize trauma and reduce recurrence of maltreatment.

Actualized and measurable results of this work will not be immediate; however, not carefully structured and well implemented interventions, along with other Workforce Wellbeing, are. The estimated implementation timeframe is 12-18 months. MDCPS will provide implementation updates throughout the CFSR non-overlapping period.

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.

Staff Re-structuring: MDCPS’s staffing pattern will be restructured into dedicated units which will allow for job specialization, training, and supervision. This will create more efficient and effective service provision, whereby staff will have specialized skills to assess and address the needs of children and families throughout each CPS 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. MDCPS seeks to restructure staff to reflect the child/family's experience as they travel through the child welfare system, from "door to door".

Initiative:

Restructuring MDCPS staff allows the Agency to create a workforce of specialized staff – investigations, care management, etc., that will also receive role-specific training, coaching, and supervision. Specialization will increase 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 also seeks to decrease the space between upper-level positions and field positions.

Monitoring Progress and Impact:

- Agency caseload reports will be monitored monthly.
- Workforce Wellbeing will utilize assessment tools to monitor job satisfaction.
- Qualitative data to assess performance will be 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. Administrative data shared by the Children's Bureau indicates that Mississippi's rate of foster care entries (per 1,000 children in the state) is very close to the national placement rate (Mississippi's most recent foster care entry rate is 2.5 children/1,000 children in the state vs. the national rate of 2.6). Furthermore, as described in Section III, foster care entry rates have declined over the past five years. However, additional efforts are needed to support families to address higher than national investigation, victimization, and recurrence rates.

MDCPS will approach 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.

Status

An internal assessment was conducted through office directors and their team to determine what services should be made available to expand the prevention array. From this assessment it was determined that underserved communities could benefit from the following services transportation, counseling and housing/rental support and childcare, homelessness, domestic

violence, and service for teens mothers. From this, an assessment of a more comprehensive RFP was developed that will allow more community-based organizations in rural areas to provide those services in underserved communities. The goal is to gain multiple contracts that will serve different areas around the state.

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 (FFPSA planning)**

- **Contractually knit together a continuum of in-home services**

MDCPS has not yet participated in the federal Family First Prevention and Services Act (FFPSA) initiative. In the upcoming planning year, MDCPS will assess internal and external capacity and commitment to the development of a FFPSA Preventive Services Plan. A first step in this process is to gather information about existing services, gaps, and effectiveness of services and service delivery. Additionally, MDCPS will work to develop a continuum of in-home services to address the risk and safety concerns of children, youth, and families. This will be accomplished through a multi-pronged approach.

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 1) assess and address service needs and 2) to assess the potential for developing a FFPSA Preventive Services Plan.

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.

The Task Force will meet bi-monthly.

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 expand opportunities for birth families to provide input into services, policies, etc. A birth family advisory group and other forums will be established to ensure birth families are active and engaged.

Monitoring Process and Impact:

Initial indicators will consist of process measures to track the implementation of the birth parent advisory group, 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 will monitor prevention services, which will be awarded as subgrants, via an internal auditor. MDCPS has issued an RFP and has received multiple responses. The agency is currently reviewing those responses and anticipates that the selection will be made by the fall.

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. As previously mentioned, 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 will work with the Professional Development unit to re-vamp training, emphasizing areas identified as barriers to effective parental engagement.

Monitoring Progress and Impact:

- Training participation, training evaluation responses
- Case Review findings will improve 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 adopted¹⁰. 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.
46.0%	42.7%	Permanency in 12 months for children entering foster care (Higher is preferable)
41.7%	45.9%	Permanency in 12 months for children in care 12 to 23 months (Higher is preferable)
35.6%	31.8%	Permanency in 12 months for children in care 24 months or more (Higher is preferable)
4.2%	8.1%	Reentry to foster care (Lower is preferable)
4.20%	4.44%	Placement stability (Lower is preferable)
Rates represent Risk Standardized Performance for the most recent time period available. Source: Mississippi CFSR 3 Data Profile, February 2022, 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). Those results identify Permanency Outcome 1, as an area needing improvement. In the upcoming planning year, MDCPS will prioritize the following initiatives to support Goal 3.

The Joint Planning Meeting included a session titled, "Permanency for Older Youth", which provided a platform to present to various stakeholders, such as representatives from the Children's Bureau and MDCPS along with judges, community organization representatives, and foster parents. The session aligned with the MDCPS goal to Increase Family Engagement and address permanency.

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

¹⁰ Mississippi Supplemental Context Data, February 2022, provided by the Federal Children's Bureau.

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 in 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.

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 will be created to track guardianship assistance program development (Note: MDCPS is currently in the process of data modeling, a process to assess current availability of quality data and the capacity to regularly produce indicators such as GAP indicators.)

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. Approximately 500 are awaiting a TPR trial; and it is estimated that approximately 235 children are awaiting the filing of a TPR petition. MDCPS is working with the State's Attorney General's office to reduce the barriers to TPR, on a global and case-specific level.

Initiative: MDCPS and the Attorney General's Office (AGO) have engaged in an internal review of the agency's internal TPR process. Currently, 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.

Representatives from MDCPS's Office of Legal Counsel (OLC) and the AGO recently had the opportunity to speak at a judicial conference. As a result of that presentation, the Chief Justice of the Mississippi Supreme Court invited further discussion of barriers to TPR and has created an ad hoc committee to provide support and recommendations for streamlining the process. Those meetings began in June 2022 and are expected to continue for several months. OLC and the AGO are guiding the meetings and anticipate the committee will make recommendations to the youth court judiciary. OLC will also collaborate with the Mississippi Judicial College and the Mississippi Supreme Court's Jurist in Residence on educating the judiciary statewide regarding any recommendations for streamlining the TPR process and implementing best practices for TPR trials.

OLC will also begin a county-by-county review of outstanding TPR packets and will assist county and state office staff in resolving legal obstacles and other deficiencies preventing the TPR packet from being submitted to AGO for filing.

Additionally, given the number of outstanding trials and cases waiting for petitions to be filed, MDCPS believes that there is 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 is implementing a plan to hire 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 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 will closely collaborate 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 will provide 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 will 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 (4.2% re-entry rate vs. national re-entry rate of 8.1%).

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 other sections of the APSR. A few essential supports are below:

Fiscal Support: MDCPS will rely on funding streams to support the organizational restructure which includes hiring more staff to maintain 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: As mentioned in the Quality Assurance System section, MDCPS has contracted with RedMane Technology, LLC to assist with moving the child welfare system of record (MACWIS) towards CCWIS compatibility. 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.

Training and Coaching: Frequent practice opportunities will be provided 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.

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 personnel is still working to develop a protocol for determining the appropriate referral among the pool of in-home services programs. An assessment was conducted to determine the gaps in services within the counties. MDCPS Office Directors and frontline supervisors completed a needs assessment to procure for services. MDCPS has successfully released two Request for Proposals. As a result of the RFP, and to expand the array of services, two providers have been selected. One provider will provide various types of Prevention services that will provide flexibility in meeting the needs of children and families. LifeSet is an intensive, community-based model that acts as a bridge from foster care to successful adulthood. LifeSet will enhance safety, protective factors, and permanency for young people in the community to improve long-term outcomes. The program will assist positive long-term outcomes for transition-age youth: Relational Permanency, Housing, Mental & Physical Health, Career & Employment, Life Skills, and Education.

Health Connect America provides the client and/or family the necessary tools to succeed within the community by identifying and gaining access to community providers. The Northeastern counties of the state will be served through this provider. The Community Support Services uses a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's and family comprehensive needs.

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

Once the final RFP receives responses and providers are awarded, the Prevention Unit in collaboration with both internal and external partners will continue to work on an official training for both internal and external stakeholders.

Activity 5: Develop a manual of in-home services interventions

The Prevention Unit will develop an in-home manual for all programs once services are completed.

MDCPS engaged Public Knowledge (PK), a national management consulting firm, as consultant partner to complete assessment of current system and policy (including national review) for required changes that will support organizational restructure. PK also

recommended changes to policy, messages, and training. PK is specifically assisting MDCPS in the following areas:

- Redesign of pre-service and Supervisory Training Curricula
- Communication Planning
- Prevention Planning
- Expand available service for families by implementing FFPSA

The redesigning of pre-service and Supervisory Training Curricula include training on family engagement, assessment, service planning, and supervisory practice. The Communication Planning includes collaboration with the courts and other stakeholders. Focus groups with the courts and other stakeholders are being planned and feedback from the focus groups will be used to inform the Family First Prevention Plan Act prevention plan. The Prevention Planning with feedback from the courts and other stakeholders will include the enhancement and expansion of the current service array to include additional EBPs. As mentioned in the section outlining the renegotiated PIP items, an assessment was conducted to determine the gaps in services within the counties. MDCPS Office Directors and frontline supervisors completed a needs assessment to procure for services. MDCPS has successfully released two Request for Proposals. As a result of the RFP, and to expand the array of services, two providers have been selected. One provider is for various types of Prevention services that will provide flexibility in meeting the needs of children and families.

VI. Update on the Service Descriptions

A. 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.

B. Services for Children Adopted from Other Countries (section 422(b)(11) of the Act))

Children adopted from other countries are eligible to utilize post adoption services that are provided through Southern Christian Services for Children & Youth's Adoption Permanency Division (APD). These post-adoption services consist of counseling, mental health treatment,

family preservation and stabilization, crisis intervention and management, peer support, and respite care.

Southern Christian Services for Children & Youth's Adoption Permanency Division (APD) continues to raise awareness of the services that are available to support the families of children adopted from other countries by broadening their marketing efforts through networking, formal presentations, informal face-to-face presentations, social media postings, support systems, push cards, emails, phone calls, and flyers. APD has also put into place a more targeted marketing plan, that includes, mailing or emailing marketing materials to adoption specific businesses, such as, law firms and organizations that specialize in adoption.

During this reporting period, there were no children or families adopted from other countries utilized adoption services.

C. Services for Children Under the Age of Five (section 422(b)(18) of the Act)

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.

- ***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 assist 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.).

- ***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 for 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, 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 consist 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.

D. 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 MCI 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 MCI 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 Data Reporting continues to submit NCANDS reports, work with field staff to improve data quality, and work with the Special Investigations Unit to identify and correct issues in MACWIS related to NCANDS reporting. NCANDS federal report for FFY2021 was submitted on 01/31/2022 and accepted on 03/29/2022.

The Office of Data 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.

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 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 or 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 participated in the panel. The panel met as recently as 8/9/2022 to discuss the annual report and updated recommendations. The final recommendations have not been released but 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 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>

E. Emergency Funding for MaryLee Allen Promoting Safe and Stable Families (Division X)

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 request. PSSF Funds are divided upon 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 on 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.

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

2023 Annual Progress and Services Report

funded by PSSF 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 TANF. Currently, Canopy is now solely funded through TANF 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 2021 – June 7, 2022, are below:

Family Preservation:	555 families and 1364 children
Family Reunification:	232 families and 543 children
<u>Family Support:</u>	<u>787 families and 1907 children* *</u>
Totals:	787 families and 1907 children

The increase is due to both providers being included, although only Youth Villages is funded through PSSF. The breakdown is shown at the end of the report in our section.

Family Support Services which the state offers 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 are below:

Family Preservation:	517 families and 1259 children
Family Reunification	211 families and 492 children
<u>Family Support:</u>	<u>728 families and 1751 children* *</u>
Totals:	728 families and 1751 children

* *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-

2023 Annual Progress and Services Report

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.

The target population for this program has changed: Only the following are serviced through in-CIRCLE:

(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.

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 November 16, 2019, 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 upload it in an *in-CIRCLE* 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 visited by program staff within 48 hours. 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 is 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 began. 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:
 - o Family outcome goals
 - o Strategies and procedures for achieving the goals
 - o Specific therapeutic, social, and psychological services to be delivered, including intensity, provider(s), tenure, etc.
 - o Specific parenting, social, employment, educational, home economic, and other identified concrete supports to be provided, including method for acquiring, provided by whom, intensity, etc.
 - o Responsibility of parties
 - o Methods for measuring impact of each service and support, as well as progress toward overall goal
 - o 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:

- o **Crisis Management** – program staff are to intervene as soon as possible (within 24 hours of referral) if family is deemed to be in a crisis.
- o **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.
- o **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.
- o **Time limited and low caseload** – Families receive 8-12 weeks of intensive interventions with 8-10 hours of face-to-face contact per week. *Program* staff (teams) served a limited number of families at a time so that at least 80-100 hours of services could be provided per family during this period. The family can continue to receive services and supports 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 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.
- o **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.
- o **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 supports, communication skills, problem-solving skills, mood management skills, safety planning, and routine daily planning.
- o **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.

2023 Annual Progress and Services Report

- o **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.
- o **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.

Due to the high volume of referrals in Region I South, Region II East, and Region 3 South, there is Waiting List that is managed by the two state program coordinators to provide for expeditious entry into the program. Additional teams for both providers are also added to reduce the numbers on the wait list. Although similar, each vendor has a different scope of services as to how each accomplish the above criteria.

Youth Villages *in-CIRCLE* PSSF Funding (June 1, 2021 - May 16, 2022)

	Number Individuals served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	297	130	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

2023 Annual Progress and Services Report

	Number Individuals served	Number Families served	Population served **	Geographic area served **
Time-Limited Reunification and Family Reunification Services	173	67	See Geographical Locations	Counties: Hinds, Stone, Pearl River, Hancock, Harrison, Jackson
TOTALS	470	197		

Canopy in-CIRCLE State General Funds (June 1, 2021-May 16, 2022)

	Number Individuals served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	962	387	Statewide	Statewide
Time-Limited Reunification and Family Reunification Services	319	144	Statewide	Statewide
TOTALS	1281	531		

With the *in-CIRCLE* Program, MDCPS has been able to serve approximately 728 additional families this reporting period (June 1, 2021 – May 16, 2022). Since the program began October 2017, the number of children served for both Family Preservation/Family Reunification services is 8200 up to April 30, 2022.

2022 CFSP ACTIVITIES REGARDING-RESEARCH

Parham Group, Independent Contractor, evaluated the quality of services provided to *in-CIRCLE* children and families participating in the program from March 28, 2022, until June 30, 2022. To assess the effectiveness of the in-CIRCLE Program, the Parham Group conducted a process evaluation to assess participating family and MDCPS satisfaction and to identify any implementation issues. Five (5) methods to identify and determine the level of program

2023 Annual Progress and Services Report

effectiveness. Family Interviews, Key Informant Surveys by 5 MDCPS associated staff, 5 representatives from each in-circle provider, and 3 court personnel. Additionally, the North Carolina Family Assessment Scale (NCFAS) was used to determine family functioning

* *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.

The target population for this program has changed: Only the following are serviced through in-CIRCLE:

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.

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 November 16, 2019, 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.

2023 Annual Progress and Services Report

- 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 upload it in an *in-CIRCLE* 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 visited by program staff within 48 hours. 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 contacts 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 began. 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 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 8-10 hours of face-to-face contact per week. *Program* staff (teams) served a limited number of families at a time so that at least 80-100 hours of services could be provided per family during this period. The family can continue to receive services and supports 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 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 supports, 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.

Due to the high volume of referrals in Region I South, Region II East, and Region 3 South, there is a Waiting List that is managed by the two state program coordinators to provide for expeditious entry into the program. Additional teams for both providers are also added to reduce the numbers on the wait list. Although similar, each vendor has a different scope of services as to how each to accomplish the above criteria.

Youth Villages *in-CIRCLE*
PSSF Funding
(July 1, 2021 – June 07, 2022)

	Number Children served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	294	132	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	147	58	See Geographical Locations	Counties: Hinds, Stone, Pearl River, Hancock, Harrison, Jackson
TOTALS	441	190		

Most families are single African American females, 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, educational, 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 see the need for more services that are not just geared towards abuse and neglect.

Some demographic information is gathered in through our referral and assessment process, but it has not been analyzed for disproportionalities or disparities as of now but is something MDCPS is willing to explore in future evaluations of the program.

2023 Annual Progress and Services Report

MDCPS recently had a process and outcome-based evaluation of in-Circle completed by an independent party. 5 methods were used to identify and determine the level of program effectiveness: family interviews, key informant surveys, NCAFAS Assessment Comparison, Discharge Analysis, 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 things will be considered as MDCPS continues to assess and make improvements to the current service array.

Canopy in-CIRCLE State General Funds (July 1, 2021 - June 07, 2022)

	Number Children served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	907	358	Statewide	Statewide
Time-Limited Reunification and Family Reunification Services	352	154	Statewide	Statewide
TOTALS	1259	512		

2023 Annual Progress and Services Report

With the *in-CIRCLE* Program, MDCPS has been able to serve approximately 702 additional families this reporting period (July 1, 2021 – June 07, 2022). Since the program began October 2017, the number of children served for both Family Preservation/Family Reunification services is 8402 up to June 07, 2022.

Dorcas (July 1, 2021 – June 07, 2022)

	Number Children served	Number Families served	Population served **	Geographic area served **
Family Support Services	148	59	See Geographical Locations	Counties: Region I-N, I-SII- E, II-W, III-N, and III-S
TOTALS	148	59		

With the *in-CIRCLE* Program, MDCPS has been able to serve approximately 728 additional families this reporting period (June 1, 2021- May 16, 2022). Since the program began October 2017, the number of children served for both Family Preservation/Family Reunification services is 8,200 up to April 30, 2022.

There is a waitlist and both providers off care coordination services while a family is on the waitlist. It is done to address and offer community referral services and referrals prior to intensive services.

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.

E. Updates to Adoption Promotion and Support Services

During SFY 2022, the Office of Permanency has worked to find ways to expand and improve upon the post adoption services that are currently available to adoptive families. To achieve this goal, the Department has contracted with two providers (Southern Christian Services for Children & Youth and Catholic Charities). Both providers will begin offering various post adoption services in SFY 2023 to ensure the needs of adoptive families are being met statewide.

Services Provided under PSSF Adoption Promotion and Support Services

PSSF ADOPTION PROMOTION 2021	
EXPENSES	COST
Post Adoption Subgrant	\$563,607.00
Expansion of Respite Care Services (Post Adoption Subgrant)	\$145,000.00
Adoption Scan Project	\$257,250.00
Travel	\$24,000.00
NACAC Conference Registration	\$23,200.00
NACAC Membership Fee	\$1,000.00
One Loud Voice Conference Registration Fee	\$6,800.00
AAICAMA Membership Fee	\$7,500.00
National Adoption Association Membership Fee	\$2,000.00
National Adoption Association Conference Registration Fee	\$1,750.00
Office Supplies	\$5,000.00
TOTAL	\$1,037,107.00
PSSF Adoption Promotion 2021	\$1,037,511.00
BALANCE	\$404.00

Adoption Finalizations

Permanency Support Services/Adoption Unit's (PSS/AU) adoption finalization goal for SFY 2022 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 period, 605 were finalized and 82 of these adoptions were finalized by MC School of Law.

The Office of Permanency continues to work diligently with Department staff and the Attorney General's Office to identify barriers before/during the TPR and adoption process. This along with the prioritizing of TPR and Permanency hearings by Youth Court judges has helped to support the increase in the number of adoptions achieved during SFY 2022.

SFY 2022 Adoption Finalizations by Region and Quarter

Regions	Quarter 1	Quarter 2	Quarter 3	Quarter 4	

2023 Annual Progress and Services Report

	July 1, 2021 – September 30, 2021	October 1, 2021 – December 30, 2021	January 1, 2022 – March 31, 2022	April 1, 2022 – June 30, 2022	Yearly Total
I North	9	20	11	7	47
I South	22	38	36	13	109
II East	3	8	5	8	24
II West	7	5	0	2	14
III North	11	5	11	0	27
III South	1	15	6	10	32
IV North	12	13	2	3	30
IV South	18	14	11	19	62
V East	6	1	9	21	37
V West	5	3	11	5	24
VI	21	13	24	6	64
VII Central	13	24	5	4	46
VII East	20	10	27	1	58
VII West	14	7	5	5	31
Total	162	176	163	104	605

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 2022.

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.

2023 Annual Progress and Services Report

During the second and third quarter, the physical Heart Gallery display was featured at the following locations:

Location	Dates
Cedar Lake Church Biloxi, MS	October 14, 2021 – December 1, 2021
Hardy Street Baptist Church Hattiesburg, MS	November 8, 2021 – December 3, 2021
Michael Memorial Baptist Church Gulfport, MS	December 4, 2021 – January 3, 2022
Journey Church Laurel, MS	January 7, 2022 – February 4, 2022

Heart Gallery and Adopt US Kids (Website)

During this reporting period, 22 children had their photographs taken to be featured on the Heart Gallery website. 297 inquiries came from the MDCPS Heart Gallery website and 51 inquiries through the Adopt US Kids Resource Tracking Tool to MDCPS. 5 children were adopted during this reporting period.

Grant Me Hope

During this reporting period, 14 children participated in a Grant Me Hope photo shoot. Photo shoots took place on September 20 & 21, 2021 and October 21, 2021. 24 inquiries were received, and 0 children were adopted. At the beginning of 2022, MDCPS made the decision to thoroughly evaluate current recruitment projects and the effectiveness of each. Due to the lack of success of finding adoptive homes for children legally free for adoption, MDCPS' partnership with Grant Me Hope was ended on April 5, 2022.

Virtual Adoption Match Meeting (VAMM)

During this reporting period, the Permanency Support Services/Recruitment Unit (PSS/AU) continued to present licensed MDCPS and private provider families who are interested in adopting older children/youth, sibling groups, and/or children with special needs.

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.

2023 Annual Progress and Services Report

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.

COVID-19 Impact and Service Continuum

Based on current adoption finalization numbers, there has been minimal impact to the work within the Permanency Support Services/Adoption Unit.

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, 2021 – September 30, 2021

2023 Annual Progress and Services Report

During this quarter, conference calls were held during the month of August 2021 and 989 cases were reviewed statewide.

October 1, 2021 – December 31, 2021

During this quarter, conference calls were held during the month of November 2021 and 920 cases were reviewed statewide.

January 1, 2022 – March 31, 2022

During this quarter, conference calls were held during the month of February 2022 and 837 cases were reviewed statewide.

April 1, 2022 – June 30, 2022

During this period, conference calls were held during the month of May 2022 and 789 cases were reviewed statewide.

TPR SharePoint Library

The TPR SharePoint Library continues to be utilized by field staff to submit TPR packets to the Permanency Support Services/TPR Unit (PSS/TPRU). PSS/TPRU continues to electronically receive, review, and submit TPR referrals, to the Attorney General's Office through the library.

TPR Packets Submitted to State Office – 666 (individual children)

July 1, 2021 – September 30, 2021

- 177

October 1, 2021 – December 31, 2021

- 188

January 1, 2022 – March 31, 2022

- 170

April 1, 2022 – June 30, 2022

- 131

TPR Packets Submitted to the Attorney General's Office by State Office – 693 (individual children)

July 1, 2021 – September 30, 2021

- 209

October 1, 2021 – December 31, 2021

- 180

2023 Annual Progress and Services Report

January 1, 2022 – March 31, 2022

- 200

April 1, 2022 – June 30, 2022

- 104

Children Legally Freed for Adoption – 661 (individual children)

July 1, 2021 – September 30, 2021

- 200

October 1, 2021 – December 31, 2021

- 166

January 1, 2022 – March 31, 2022

- 168

April 1, 2022 – June 30, 2022

- 127

G. 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. MDCPS advertised an RFP for family support services. There were no respondents to the RFP; however, MDCPS is providing services in-house for families. The advertised RFP will be attached and PSSF COVID funds are being utilized to assist families in remain safely together.

A Request for Proposal (RFP) is advertised on MDCPS's website with specific criteria. Prevention subgrantee's are selected based on the responses to the RFP and the provider with the highest score.

Prevention subgrantee's understand that to receive funds, both state and federal, all programs/services must be geared towards community-based child abuse and neglect prevention. Additionally, subgrantee's offers referrals and other community linkages for families if they are unable to assist the family. These referrals can be but not limited to childcare assistance, legal services, food assistance/TANF, transportation assistance, etc.

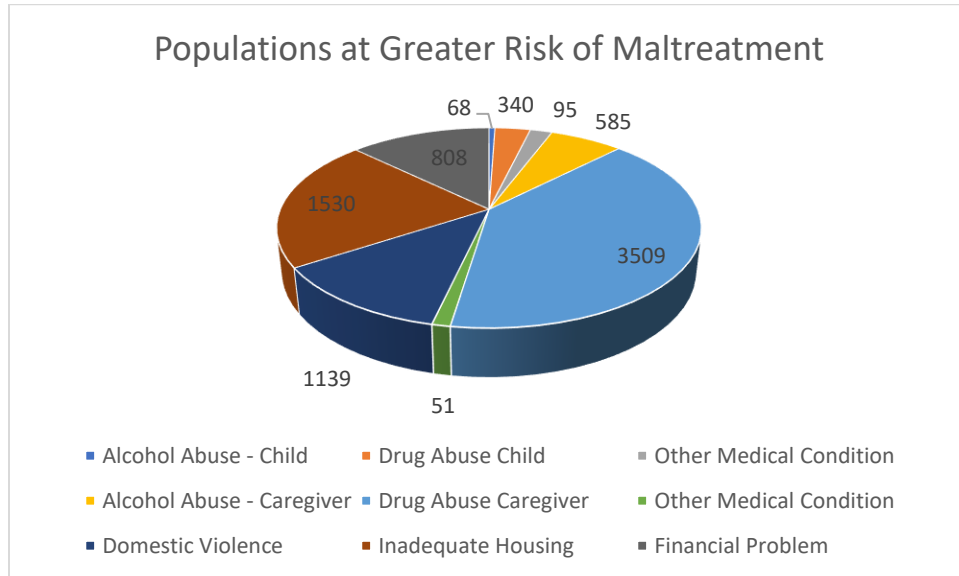
The following subgrantees are providing community-based services through a contractual agreement: Southern Christian Services for Children & Youth, Starkville Oktibbeha Consolidated School District (Families Strengthen Families, and Project CARE), and Health

2023 Annual Progress and Services Report

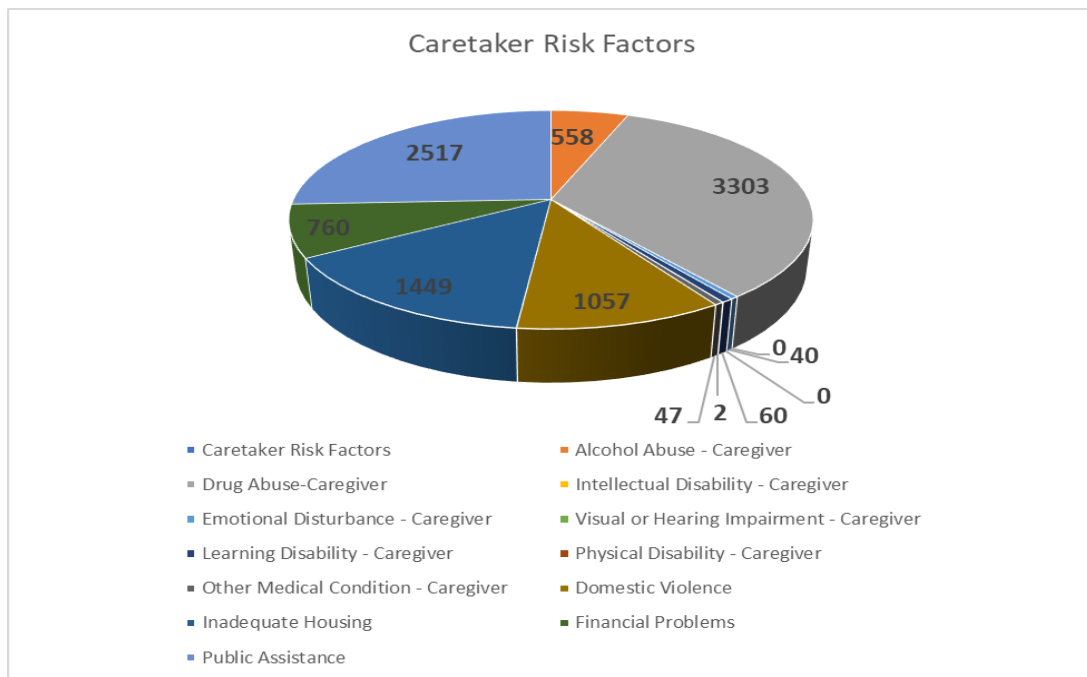
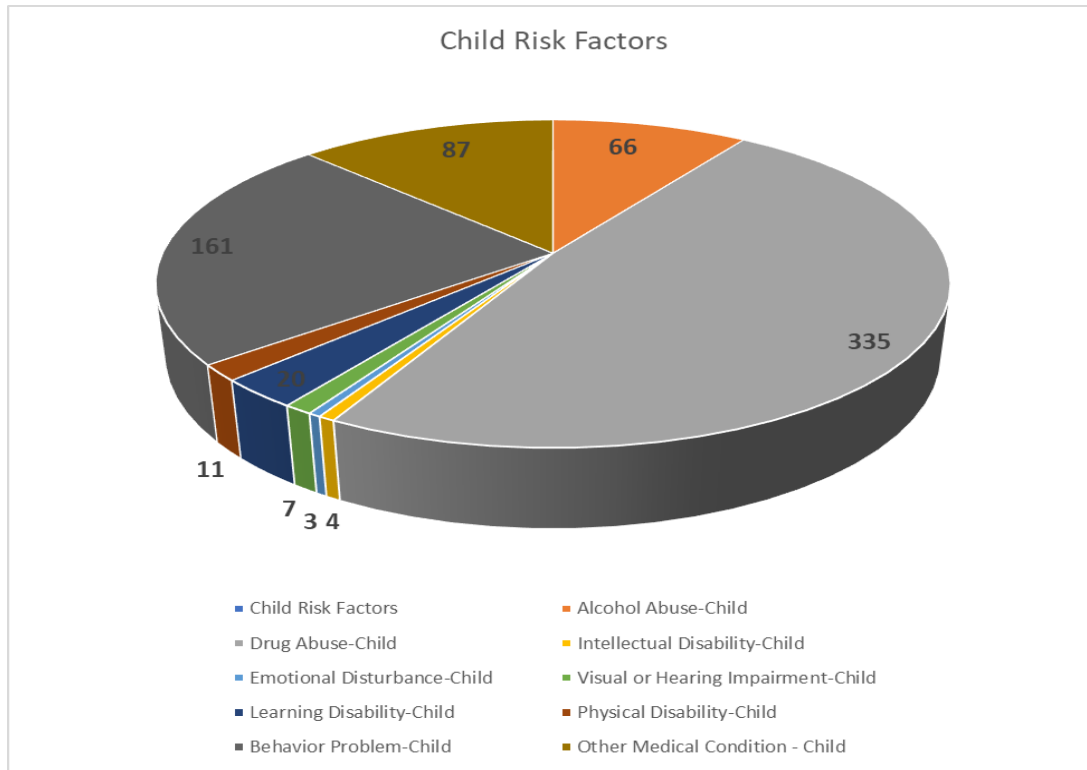
Connect of America. Additionally, Youth Villages LifeSet program is implemented to assistance foster children that are transitioning out of foster care. Services will include housing, education, and other services to assist transition.

H. 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:



2023 Annual Progress and Services Report



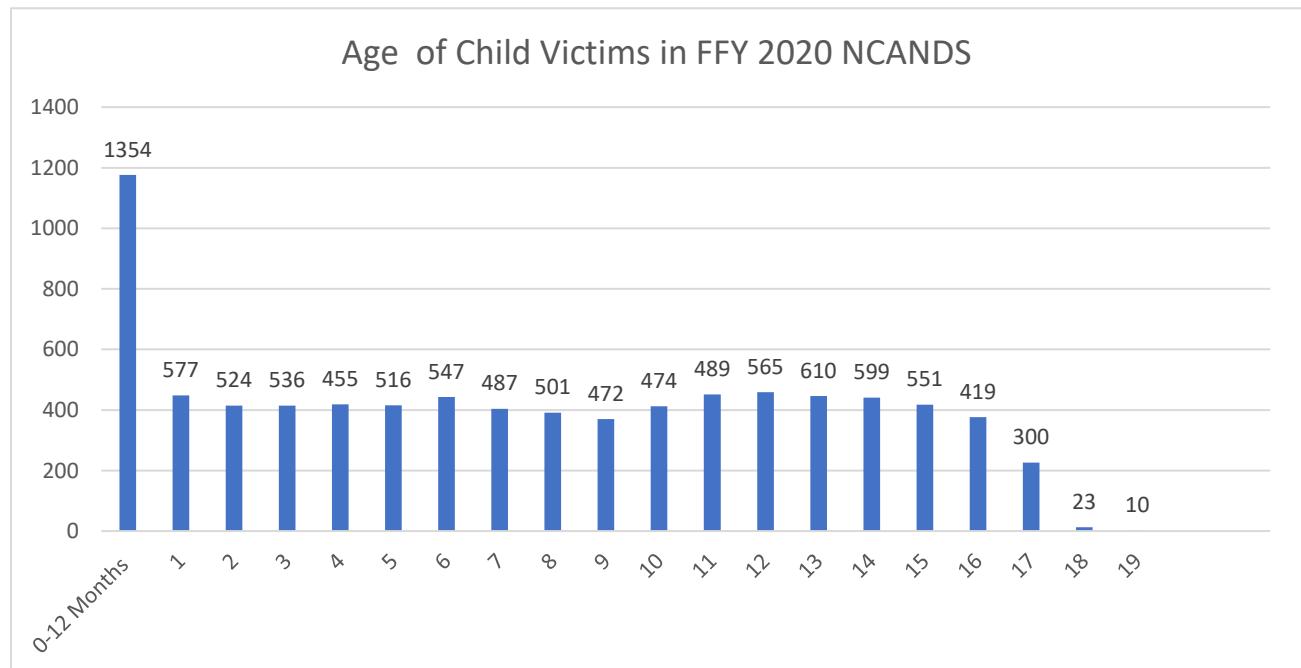
Services will be targeted to these populations in the upcoming year using any available service options that apply. CARA response and referrals to appropriate resources will be used when appropriate for infants affected by caregiver substance abuse. New procurements for diversified in home services will 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

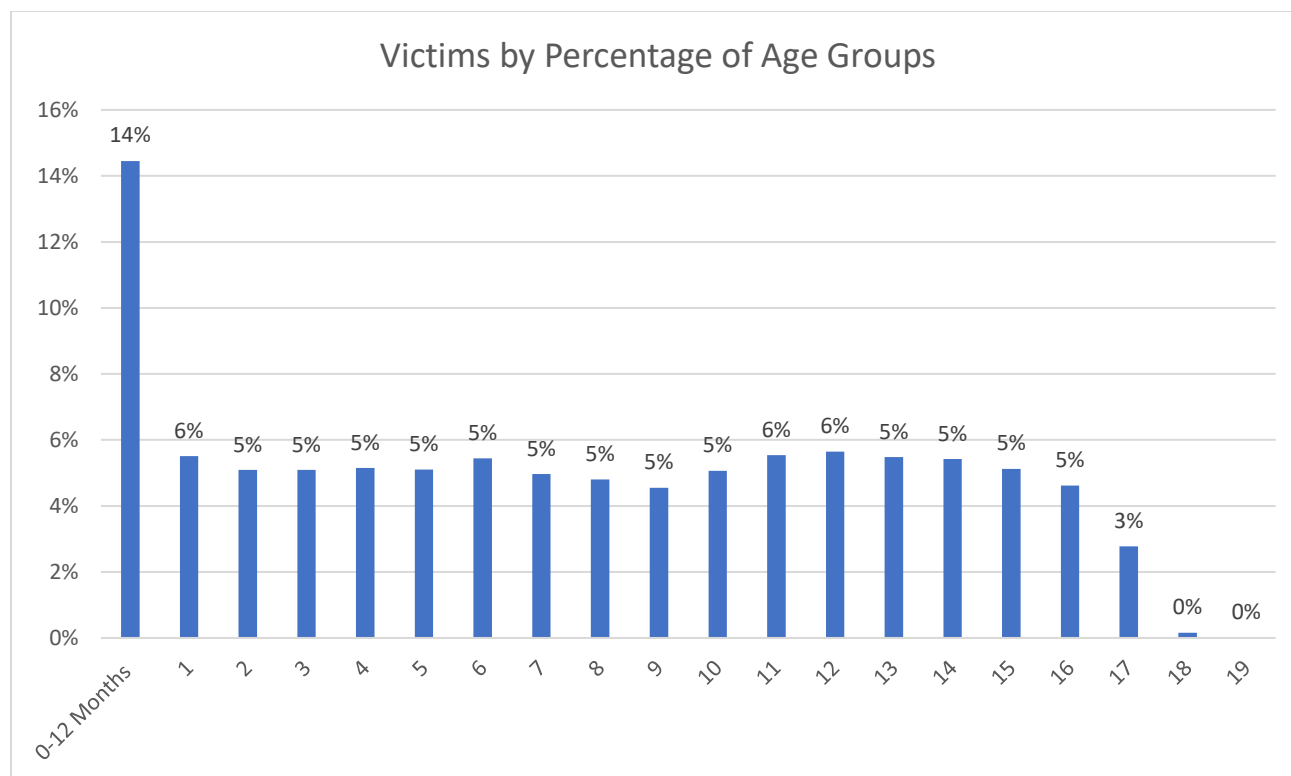
2023 Annual Progress and Services Report

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 the 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 relatively at 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 the 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. Additionally, Kinship staff has started attending staff meetings at

2023 Annual Progress and Services Report

MDCPS county offices to inform workers of the program. During the reporting period, Catholic Charities staff members facilitated an online caregiver support group via Zoom. There were 6 caregivers that attended the zoom meeting. Most caregivers are grandparents that attend various kinship events. All populations in the community are invited and encouraged to attend all community engagement activities sponsored by the program.

The purpose of this two (2) hour group was to provide a safe, supportive, and productive space to help normalize the caregiving experience. During the group, focus was on providing tips to caregivers on how to care for themselves. Another topic discussed was overcoming the holidays while grieving. The group participated in a discussion about the importance of caring for themselves, having medical and legal documents in order, and learning the new technologies to keep up with the safety of the children. Staff continued to participate in an interview with the Lighthouse Business Professional Women to promote the kinship program. Additional activities that took place included:

- Kinship Program flyer continued to be featured monthly in the Gulf Coast HUB for Volunteers & Nonprofits.
- Program Coordinator and kinship staff met with several organizations in the community such as Pearl River Community College, Gulf Coast Community Ministries, Mississippi State University Extension Service and Mississippi Regional Housing Authority #8 to promote the kinship program and provide program brochures.
- Program Coordinator and kinship staff attended the MS Regional Housing Authority VIII/PCC/FSS Graduation and the Petal Family Health & Resource Fair to promote the program and inform the community of available resources for relative and fictive kin caring for children.
- Program Coordinator and kinship staff continued to connect families to local food pantries.
- Program Coordinator and kinship staff met with an organization in the community, including Mendenhall CPS, to promote the program and provide brochures.
- Program Coordinator and kinship staff attended the Lighthouse Business and Professional Women Luncheon to inform attendees of the available resource for families, promote the program and provide program brochures. Lighthouse Business Professional Women is an organization to assist women, support business and community relationships.

For the 2022-2023 grant funding, the Kinship Navigator program received an increase. This increase was needed to expand and sustain the program to additional counties and employment of program staff. For Kinship caregivers served, the demographics include African Americans, Caucasian, and Biracial ethnicities, mostly females, but males are included as well. Ages vary from mid-40's to late 60's. Most of the referrals for the Kinship program are coming from the community; however, there are few referrals that are submitted from county offices. Participants inquired about ongoing monthly financial support in some of the referrals that the program received. This has been a challenge as some other states provide this assistance and at this time Mississippi does not. However, Kinship staff offers their services and assistance to families with other needs. Currently, referrals have increased in the Coastal counties (Lamar,

2023 Annual Progress and Services Report

Harrison, and Hancock). Additionally, Kinship staff have started to advertise and market for legal clinics.

Staff from the Kinship Navigator program attends various meetings to maintain community collaboration and bring awareness to the program. Networking has been one of the vital tools for promoting the program in the counties currently served.

There has also been several training opportunities that the program participants have taken part in during the program including: Straughter Counseling Services, Love Your Neighbor Ministries, Mississippi in Action, MCH Community Clients possibilities, Jackson Public Schools PTA District President, Reading keeps us Ready, Operation Shoestring Community Resources, Widows Son Lodge #451, Hinds Behavior Health Community Support Services Division, Jordan Grove M.B. Church, Region 6 Housing Authority and Youth Villages.

The subgrantee attended various community events to bring awareness to the program. Additionally, a suggestion was made to the subgrantee to attend meetings at the MDCPS's county offices in which their program serves. The goal for attending the meetings is to bring awareness of the program to county staff and new hires.

Kinship staff continues to attend MDCPS county office meetings to promote the program.

Target Population

Based on a recommendation from Mississippi Feasibility Study, the program has expanded to include the many non-child welfare involved kin in Mississippi.

Kinship Staff through Catholic Charities has observed that through the population served, kinship caregivers need basic health, health care for children, legal custody and/or guardianship, transportation, childcare, and respite needs.

Service Area

The Kinship Navigator program will be implemented statewide in three (3) phases. Through their partnership with South Mississippi Planning and Development District, the 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.

2023 Annual Progress and Services Report

The Kinship Navigator contract will be renewed October 1, 2021. This will be 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 launch in August 2022, there 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.

Consultation with Kinship Caregivers

At this time, the state has not created an Advisory Council for Kinship Caregivers. Efforts will be made to creating and implementing the council prior to the start of year two.

Due to staff shortage, the Kinship Council was not developed. With the assistance of the Kinship staff through Catholic Charities, the provider has agreed to assist in the start-up of the council.

Kinship services depends on the needs of the kinship family. An open navigation case can range from three (3) months to one (1) year. Caregivers presenting a higher level of need are offered more intensive navigation services through an open case. In an open case, the Kinship Navigator and caregiver create a Navigation Plan to meet identified needs. Navigation plans are reviewed and updated regularly, at a minimum of every 90 days.

<u>Location</u>	<u>Totals</u>
Phone	271
Telehealth	19
Face-to-Face	6
Totals	296

Location	Totals
South Region	223
Central Region	30
Totals	253

Kinship websites:

<http://smpdd.com/kinship-navigator-program/>

<https://catholiccharitiesjackson.org/whatwedo/youth/#kinship>

J. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

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. Early discussions are in place to use funding to implement new programs that will improve the quality of caseworker visits.

MDCPS has and continues to meet the statutory performance standards for annual caseworker visits. For the period October 1, 2020 – September 30, 2021 (FFY 21), 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 – 95.25%

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 child's residence – 92.84%

Additionally, to support the day-to-day operations of the agency and ensure the safety and well-being of children, MDCPS staff are charged with investigating allegations of maltreatment. During FFY 2021 in Mississippi; 26,156 investigations were received and completed. Of those, 6,259 (24%) were substantiated, 18,929 (72%) were unsubstantiated and 968 (4%) closed without a finding.

K. Additional Services Information

1. 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 - \$600 per child/per finalization)
- Statewide & Regional Adoption Celebrations (to celebrate children who achieved permanency through adoption)
- Recruitment Expansion (Wendy's Wonderful Kids)

2023 Annual Progress and Services Report

- Non-Therapeutic Adoptive Placements through Private Providers (allows private providers to license adoptive placements for harder to place children/youth who are legally free for adoption)
- Transunion TLOx (used to identify and locate family members of children and youth who enter care)
- Conference and Training for Permanency Staff (i.e., AAICAMA/CWLA)

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 INCENTIVE 2022	
EXPENSES	COST
Adoption Finalizations	\$390,000.00
Adoption Celebration 2022 (Statewide)	\$10,000.00
Adoption Celebration 2022 (Regional)	\$7,000.00
Non-Therapeutic Adoptive Placements	\$150,000.00
Wendy's Wonderful Kids Recruiter & Supervisor Salaries	\$387,862.00
GAL and Court Fees	\$238,000.00
AAICAMA Conference Registration Fees	\$810.00
TOTAL	\$1,183,672.00
ALGIP 2019	\$1,184,500.00
BALANCE	\$828.00

Adoption Savings

The Mississippi Department of Child Protection Services (MDCPS) uses the Children's Bureau (CB) Method with random sampling to calculate its annual adoption savings. The CB Method with Actual Amounts was previously used by MDCPS, and it proved to be challenging due to the internal, manual processing involved.

Over the next year, the Department expects to expand services provided to children and families by providing prevention services to families before adoption finalization and also increasing the number of providers that currently provide post adoption services.

A meeting was held on May 4, 2021, to discuss the use of Adoption Savings and the services that will be provided to children and families. As of the submission of the Annual Adoption Savings Calculation and Accounting report for FFY 2021, a total of \$2,999,305 was expended towards post-adoption/guardianship services and \$5,498,804 was expended towards services for children at risk of foster care. MDCPS reported a cumulative unexpended adoption savings

balance of \$3,825,458.00. The Department is currently undergoing an internal review, and this report may require revisions.

If revisions are required, this may lead the Department to a lower savings amount which would mean that any unused savings have already been applied.

2. Family First Prevention Services Act Transition 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.

VII. 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.

A. 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 have the opportunity participate in independent living activities regardless to 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 PRICIPLES

- Achieve positive results for youth through purposeful, high-quality services.
- Promote 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.

Organizational Structure

Update:

The program's administration has recently changed, removing the Education (other than Education Training Voucher Program) element from the division. The current organizational structure consists of the following staff: one (1) Bureau Director, two (2) Social Services Team Leads, and 26 Social Services Program Coordinators (SSPC)/Transition Navigators (TN). Currently, the division has 11 SSPC/TNs. The division has posted and closed on the application process for fifteen (15) additional SSPC/TNs. Interviews are pending agency review of

applications. Social Services Team Leads should be advertised, interviewed, and hired by the second quarter of FY 2023. Please see descriptions below:

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, Modified Settlement Agreement (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.

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. See Chafee Service Map (Attachment G).

Independent Living Program Objectives and Initiatives

Independent Living Services were previously provided through a sub-contract with Southern Christian Services. The services are now provided internally through our Youth Transition Support Services. Each region of the state has a designated Youth Transition Navigator whose role is to provide intensive support to youth 14-21. This includes assisting youth with the development of an Independent Living Plan that supports the participants' capability to acquire basic life skills in their progress from dependency toward self-sufficiency. When reunification, durable legal custody, or adoption no longer becomes a logical solution for a youth, and a plan of APPLA is determined, Youth Transition Support Services Navigators work diligently with youth to not only provide independent living skills and resources but to also provide a pathway

forward as it relates to post-secondary education, employment, transportation, financial management and housing.

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.

Employment

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.

Transportation

Transition Navigators assess transportation needs from obtaining a permit, driver's license, as well as access to owning a vehicle or access to public transportation. The challenge in Mississippi is that public transportation is not available statewide, but mainly in few larger, metro areas. This serves as a barrier to youth who may exit custody without being able to obtain a vehicle of their own before exiting custody.

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.

Housing

MDCPS began partnership to administer the Foster Youth to Independence (FYI) program in mid-2021 with Tennessee Valley Regional Housing Authority (TVRHA) and Youth Villages in the northern part of the state. Recently, MDCPS partnered with Jackson Housing Authority and Southern Christian Services to implement the FYI program in the metro Jackson area. Prior to July 1, 2022, youth who had exited foster care and had not yet reached the age of 21 were in limbo because the lack of capability to enter a legal binding contract (ex. Lease). If former foster youth had not been legally emancipated by the court, youth could still not take advantage of the FYI program without a lengthy legal process due to the previous statute. Now that this is no longer a barrier, MDCPS plans to expand the FYI program across the state providing a housing opportunity for both eligible in-care youth exiting custody within 90 days

and eligible former foster youth. Currently, four (4) youth are housed with the TVRHA housing authority and there are five (5) pending approvals with the Jackson Housing Authority.

Mississippi Department of Child Protection Services continues to utilize additional services and resources to ensure permanency, regardless of type of permanency (reunification, durable legal custody, Adoption, APPLA). There are waitlists for in-Circle as referenced earlier. in-CIRCLE Services through Prevention provides Reunification services to families whose children have been removed (see other section regarding in-CIRCLE). Youth Villages and Canopy provide the total number of families they serve in MYPAC to MDCPS because of their in-Circle work but MDCPS does not have access to data related to MYPAC being provided by other providers. Services available to parents related to removal depend upon the individual needs of the family. Some of the available services include reunification, parenting classes, referral and assessment with local mental health and health providers. Those services include:

- MYPAC Services to stabilize placement, and reduce placement disruptions
- Local Mental Health for assessments and to address behavioral concerns for child(ren) in care placed in a foster home
- Respite Services – contracted through Southern Christian Services for Resource Parents
- CAP (Correction Action Plan) - to correct minor policy violations with resource families
- Ongoing training - 10 hours yearly; 20 hours for re-evaluation of license
- Ongoing advocacy and support - through one-on-one contact with CPS staff (Frontline, Resource and Adoption)
- Adopt US Kids Website (National Database) - recruitment of permanent homes for all children free for adoption with no identified families
- Heart Gallery – recruitment for permanent families (through visuals of children free and history of their experience with foster, etc.)
- Wendy’s Wonderful Kids (Wendy’s Foundation) - child specific recruitment for hard to place children (teenagers and children with major behavioral issues and medically fragile) in collaborations with Mississippi Families for Kids and Southern Christian Services Placement Committee Meetings (Regional, Multi-Regional and State Placement)
- Adoption Status Meetings - these meetings are held monthly throughout the state for all children with a plan of adoption. These collaborative meetings are held with various disciplines (Adoption Unit, Resource Unit, Frontline Staff, Regional Directors, and Attorney General’s Office).
- Independent Living Services were previously provided through a sub-contract through Southern Christian Services. The services are now provided internally through our Youth Transition Support Services. Each region of the state has a designated Youth Transition Navigator whose role is to provide intensive support to youth 14-21. This includes assisting youth with the development of an Independent Living Plan that supports the participants’ capability to acquire basic life skills in their progress from dependency toward self-sufficiency.

YTSS preserving connection goals consisted of the following by the end of the fiscal year:

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 SSPC/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 SSPC/TN staff present as a guest speaker to new hire sessions each month to explain ILP services and provide regional contact information. SSPC/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. Additional partners in the areas of education and employment will be added to this partnership as our service array expands.

Update:

MDCPS/YTSS continues to work with First Place for Youth (FPFY) and the Anne E. Casey Jim Casey Initiative. MDCPS was working with First Place for Youth and Annie E. Casey to build a state administered community based Supervised Independent Living Program in Mississippi for youth at age 18 while they continue their education, enter the workforce, and receive daily living skills to support stable independence when they exit care. However, this program has not been established yet due to barriers beyond MDCPS and First Place for Youth's control to include the age of leasing signing capacity at 21. Fortunately, during the early 2022 legislative session, MDCPS worked with FPFY to provide details of gaps in service for youth in housing. Among changes in Mississippi legislation effective July 1, 2022, both in-care foster youth and former foster youth will have the capacity to sign and be responsible for housing leases. Although, a community based supervised independent living program may not be the outcome for MDCPS in 2023, this is an important step in realigning goals and barriers with the work around stable housing for youth ages 18 and older exiting care.

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.

Update:

YTSS is collaborating with in-care youth, First Place for Youth, Jim Casey Initiative, the Annie E. Casey Foundation, and Public Knowledge to develop surveys to determine additional training for MDCPS staff, foster parents and community stakeholders to increase foster care awareness, service availability and to demonstrate how to incorporate education, safety, permanency, child/youth involvement and child/adolescent development to improve outcomes for children/youth who experience foster care and interrupt generational cycles. In March 2022, MDCPS, in collaboration with the Children's Foundation of MS, administered a survey for both in-care youth and former foster youth. Analyzed data will soon be reviewed by MDCPS in the determination of intentional pathways for housing, transportation, education, and employment for youth. Data will also be used to determine additional training needs for MDCPS staff, foster families, and other community organizations.

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 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 for both in-care youth and former foster youth aged 18 and older is implemented July 1, 2022, MDCPS can re-initiate efforts for an individualized apartment placement program that also supports the newly established Foster Youth for Independence (FYI). Currently, MDCPS has contracts with Tennessee Valley Regional Housing Authority (TVRHA) and Youth Villages to provide FYI vouchers to eligible youth in northeastern counties of the state as well as a recent contract with Jackson Housing Authority (JHA) and Southern Christian Services for the Jackson, Metro area. TVRHA has housed two (2) youth with two recent referrals by MDCPS. MDCPS submitted the first referral to JHA in April 2022.

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.

Policy Initiatives

The Youth Appraisal is used to identify needs of all youth ages 14-21 in care. The Youth Appraisal was co-developed by MDCPS/YTSS, First Place for Youth and Jim Casey and adopted by MDCPS as the new Independent Living assessment tool. As of May 23, 2022, 1,383 youth have completed the YTSS Youth Appraisal and based on the data captured through the Youth Appraisal, YTSS has implemented the following:

- The MOU with the Tennessee Regional Valley Housing Authority and HUD has been signed and adopted to implement the HUD FYI vouchers for youth exiting foster care. YTSS has referred the first youth for this housing program and are currently awaiting HUD's funding of the voucher.

Update: MDCPS has also partnered with Jackson Housing Authority and Southern Christian Services to provide FYI in the Jackson, Metro area.

- The development of the statewide Supervised Independent Living program with First Place for Youth and Annie E. Casey.

Update: Barriers beyond both MDCPS and First Place for Youth and Annie E. Casey prevented the development of the statewide Supervised Independent Living Program. With new legislation allowing in-care youth and former foster youth capability to sign leases at 18, MDCPS will review Apartment Placement capabilities with individual landlords as well as revisit the capability to design a statewide supervised Independent Living Program.

- Contract with Foster Success for direct payments of ETV funds to youth via debit cards.

Update: This contract ended, however MDCPS is looking at capabilities to issue ETV funds to youth via an in-house debit card as well as look at outside contractors for this purpose.

- Contract with Instructional Access to provide online daily living skills training.

Update: This contract is set to end June 30, 2022. After a review of participation, MDCPS plans to issue another Request for Proposal for both Online Skills and Face-to-Face Skills classes during the first quarter of FY 2023.

- Contract with Mississippi Families for Kids (MFFK) to provide workforce development through a partnership with Wendy's.

2023 Annual Progress and Services Report

Update: The contract for this Pilot is set to expire July 30, 2022. Initially, the pilot was offered at three (3) Wendy's in the Jackson, Metro area. Approximately 15 referrals have been made to the Jackson area. Currently, one (1) youth is doing well and soon to be interviewed for a supervisory position. MFFK is willing to extend the program to other Wendy's stores in the state based on referrals. Outreach will be conducted by MDCPS, however MFFK will also seek referrals from other foster youth agencies within MS.

- A partnership with The Mississippi Department of Education and The Legal Center for Foster Care and Education to support youth in foster care by providing workforce development training, daily living skills and post-secondary/vocational preparation in the schools across the state.

Update: Due to the organizational changes, the Education Division should maintain the above-mentioned partnerships.

- A partnership with Youth Village's to provide Life Set services to youth in care.

Update: This partnership continues and is doing well. Until recently, all slots were full. Referrals continue to be made by both YTSS TNs and frontline staff.

Other information gathered from the Youth Appraisal or other MDCPS reports:

Update:

Youth Appraisal <ul style="list-style-type: none">• 1383 youth with a completed Youth Appraisal age 14-21
Permanency <ul style="list-style-type: none">• 537 youth with four (4) or more placements• 90 youth report being in a residential treatment facility within FY 2022
Pregnancy Prevention <ul style="list-style-type: none">• 25 youth who have a child 14-21
Safety <ul style="list-style-type: none">• 14 Youth report not feeling safe in their current placement• 84 Youth report being arrested

When safety concerns are brought to the Transition Navigator's attention, the TN reports all concerns to the COR caseworker and Supervisor to initiate either a family team meeting or investigation. The Transition Navigator follows up with the COR caseworker to support case next steps.

YTSS PLANNED ACTIVITIES ARE AS FOLLOWS:

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 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. 12 Regional YACs for Mississippi 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 Teen Advisory Board (TAB) boards meet quarterly at a minimum, with each regional TAB board sending a representative for State TAB board, which will also meet quarterly. The Mississippi Teen Advisory Board 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.

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 there 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.

Division X Supplemental Chafee Funds

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

2023 Annual Progress and Services Report

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 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 age 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

2023 Annual Progress and Services Report

- The number of staff dedicated to this project and the method for 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.

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 calendar year 2022. Credit unions, community banks, and other community-based organizations who offer these types of trainings 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 expend 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.

Independent Living Support Services/Stipends

Update:

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 completing 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 \$1500.00 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 of 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
Initial Pre-Assessment Stipend	0	0
IL Personal Enhancement Stipend	505	\$278,450.45
IL Senior Year Stipend	51	\$25,335.18

2023 Annual Progress and Services Report

Update: In effort to give the most accurate information through June 30, 2022, this table will be updated in the 2023 First Quarter Update.

In review of data from reports pulled for the reporting period, the following observations and additions have occurred.

- o 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.
- o 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.
- o IL Skills Stipend and IL Start Up Stipend have been added.

B. 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 to ongoing planning to implement services based on lived experience of youth. YTSS is currently developing a redesign to provide individual case management to youth at age 17 until their exit from care as a direct result of information collected through NYTD. The housing and transportation plan submitted by YTSS was built based on the experiences surrounding housing and transportation that youth who exit care have faced. 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.

Update: Under new YTSS Leadership, technical assistance was requested and received from the Children's Bureau on April 11, 2022. Several references were received from the Administration of Children and Family's Children's Bureau staff. Currently, MDCPS is providing basic introductory training to staff as it relates to NYTD and its importance. NYTD will continue to be a focus as the data is vital in tailoring services for both in-care and former foster youth.

Update:

2023 Annual Progress and Services Report

Under new YTSS Leadership and after initial non-compliance with the submission of the 2021B Reporting period surveys, technical assistance was requested and received from the Children's Bureau on April 11, 2022, several references were received from the Administration of Children and Family's Children's Bureau staff. Currently, MDCPS is providing basic introductory training to staff as it relates to NYTD and its importance.

Challenges:

- o The new survey administration process now consists of division staff (Transition Navigators) conducting surveys and division leadership validating file submission, however division staff are new to survey administration as prior division leadership administered surveys and validate file submission. Time is needed to redevelop a process that is successful.
- o 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.
- o Data from NYTD has not been adequately reviewed or relayed because the data system is new to division leadership and staff. Navigation of errors, reports, etc. is cumbersome when first learning.

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.

C. 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:

Update:

Placement and Adoption

2023 Annual Progress and Services Report

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.

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.

Program Development and Financial Literacy for Youth

Jim Casey Youth Opportunities Initiative: Jim Casey, based in Baltimore, Maryland, is a youth initiative driven agency that focused on youth development based on brain science research and youth empowerment. The agency has partnered with MDCPS and First Place for Youth to implement Race Equity and Inclusion work, the Opportunity Passport Match Savings program and assist MDCPS with building capacity around education and employment resources. Jim Casey is invested in Mississippi's foster care system. The foundation is continuing to provide financial support implement the Opportunity Passport Program.

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

2023 Annual Progress and Services Report

staff works closely with Catholic Charities' Unaccompanied Refugee Program to ensure that youth are aware of the program and application process.

Housing

Housing for youth exiting the foster care system without a plan of adoption or reunification is a primary focus for the Department. MDCPS has recently established Memorandums of Understanding with two Mississippi Housing Authorities and have spoken with two additional Housing Authorities regarding administering the program. MDCPS will seek agreements with each Regional Housing Authority in the state, but also with smaller local housing authorities as to provide housing options for youth exiting custody who are at risk of being homeless. Current housing partners are listed below.

Tennessee Valley Regional Housing Authority (TVRHA) - manages Foster Youth to Independence (FYI) housing vouchers for youth in care. Currently, two (2) youth are housed, and four (4) youth are awaiting vouchers.

Jackson Housing Authority (JHA) - manages Foster Youth to Independence (FYI) housing vouchers for youth in care. Currently, seven (7) youth are awaiting vouchers.

Southern Christian Services - assists with finding and 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. The agency also provides support services to youth in the Foster Youth to Independence (FYI) housing 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.

Youth Villages - provides support services to youth in the Foster Youth to Independence (FYI) housing 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.

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.

LGBTQ+ Youth

In the past, services for LGBTQ+ have not been established or maintained in a manner that promotes quality service delivery. During this plan year, the YTSS Independent Living Division plans to conduct research to find quality community organizations and other state's best practices to provide insight and model pathways so MDCPS can better assess youth and implement new services. Resources and helpful links will be placed on the Independent Living tab of MDCPS' new website.

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 public-private 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.

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.

Program Development and Financial Literacy for Youth

Jim Casey Youth Opportunities Initiative: Jim Casey, based in Baltimore, Maryland, is a youth initiative driven agency that focused on youth development based on brain science research and youth empowerment. The agency has partnered with MDCPS and First Place for Youth to implement Race Equity and Inclusion work, the Opportunity Passport Match Savings program and assist MDCPS with building capacity around education and employment resources. Jim Casey is invested in Mississippi's foster care system. The foundation is continuing to provide financial support implement the Opportunity Passport Program.

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.

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 through administration of the Youth Appraisal, YTSS will continue outreach as it relates to Medicaid to existing Mississippi youth residents as well as youth that transfer to Mississippi from another state through its new tab on the MDCPS website that is anticipated to go live in September 2022. The Deputy General Counsel is working to coordinate meetings with Medicaid on the state's requirements to offer Medicaid to eligible young adults formerly in foster care who move to a new state after January 1, 2023. The Department is still working out details of compliance of this requirement. When established, contact information, flyers, website information and other resources for this coverage will be listed on the Youth Transition Support Services tab of the MDCPS website. Other health and mental health resources as well as individual Transition Navigator contacts will also be listed on the tab so that a live person can be reached should additional questions need attention. New research includes available Medicaid offices on college campuses for in-care or former foster youth. A challenge for the college campus is that most providers in clinics are not certified under Medicaid. YTSS staff and our partners are currently researching available clinics in close proximity to college campuses to see if campuses who offer transportation can include the Medicaid clinics on their routes.

Open Arms Health Clinic: Health and counseling services; Free STI testing/treatment; and Services for LGBTQ persons.

Workforce Development

In efforts to bring living wage jobs to both in-care youth and former foster youth, the YTSS Division leadership met with Central MS planning and development district in June 2022 to inquire about training opportunities for Transitional Navigators to be most up to date on employment services for youth in the Central MS area. Plans to meet with the other three main planning and development districts (South Delta, Twin Districts, and Three Rivers) will take place within the reporting year to establish concrete employment pathways in each region should youth decide post-secondary education is not the pathway they wish to take.

D. 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 2022 APSR Update. The below is the same information submitted in the 2022 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.

2023 Annual Progress and Services Report

- 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 with youth achieving educational success based on each youth's identified individual needs.

Update:

Although the ETV program has not changed much in its eligibility determination, pandemic isolation changed the world. It proved successful in program design changes as it relates to processes such as using social media outlets for outreach and presented new and efficient methods of sending and receiving information such as links to forms for applications and document upload. MDCPS has adopted and will retain using an electronic ETV application that automatically registers a youth for eligibility review and storage of ETV required documents. YTSS is also in review of required documents for eligibility determination. Two forms that should not be required each academic year is a birth certificate and social security card when the attainment of a driver's license required both documents for issuance.

Recently, YTSS has engaged with Mississippi's Get2College. This program aids students in getting the most from federal, state, college, and private funding sources. The also assist in navigating the Free Application for Federal Student Aid (FAFSA) and understanding the financial aid formula. The Get2College staff also provides training and other education resources so that MDCPS can become subject matter experts in this process. MDCPS plans to continue to work with Get2College as presenters during youth events for the upcoming reporting period and to navigate training for YTSS Transition Navigators.

Transition Navigators also engage with campus staff when enrolling youth for ETV. Engagement takes place with Bursars from the Registrar's Office and representatives from both the Financial Aid Office and Housing Office. During the start of the 2023 Academic Year, YTSS staff has found that many new ETV enrolling students have balances from prior years due to gaps in education from the pandemic. Our staff has worked tirelessly to speak with all campus staff necessary for each student, whether on a community college campus or university, to assure that students can enroll in Fall 2023 semester classes. ETV details are located on the Youth Transition Support Services tab of the website. When speaking with campus representatives we educate staff about ETV benefits for foster youth.

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 14 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.

2023 Annual Progress and Services Report

- 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 21st 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 21st 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 3rd 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 \$5000.00 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).

E. 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.

F. 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.

VIII. 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 2023 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 2021 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 2023 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 2022 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. There was no Annual Indian Child Welfare (ICWA) Conference due to the COVID-19 pandemic. However, the 10th ICWA Conference is tentatively scheduled for August 25, 2021.

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:

- o 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
- o 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.

X. 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)

XI. Statistical and Supporting Information

Information on Child Protective Service Workforce:

This information below is regarding 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:

Statistical and Supporting Information

Position	Function	Minimum Qualifications	Training Requirements
Social Services Specialist I	Frontline Caseworker Level I	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Frontline Caseworker Level II	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist II	Frontline Caseworker Level III	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Adoption Caseworker Level I	BS/BA in related field	Pre-service Training – 270 hours

2023 Annual Progress and Services Report

Position	Function	Minimum Qualifications	Training Requirements
			Ongoing Training – 40 hours annually
Social Services Specialist I	Adoption Caseworker Level II	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist II	Adoption Caseworker Level III	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Licensure Caseworker Level I	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Licensure Caseworker Level II	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist II	Licensure Caseworker Level III	MS/MA in related field or BS/BA in related field + 2	Pre-service Training – 270 hours

2023 Annual Progress and Services Report

Position	Function	Minimum Qualifications	Training Requirements
		years of experience	Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Continuous Quality Assurance Coordinator Level I	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
Social Services Specialist I	Continuous Quality Assurance Coordinator Level II	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually

2023 Annual Progress and Services Report

Position	Function	Minimum Qualifications	Training Requirements
Social Services Specialist II	Investigation Specialist Level I	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
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	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually

2023 Annual Progress and Services Report

Position	Function	Minimum Qualifications	Training Requirements
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	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually
Social Services Supervisor	Regional level supervisor	LSW + 6 years of experience OR LSW and MSW + 3 years of experience	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually

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 1443 employees. Demographically, the makeup of the workforce is as follows:

2023 Annual Progress and Services Report

Race	Number of MDCPS Employees	Percentage of MDCPS Workforce
American Indian	3	Less than 1%
Caucasian	381	26%
Hispanic	6	Less than 1%
African American	1052	73%
Asian	3	Less than 1%
Other	6	Less than 1%
Sex	Number of MDCPS Employees	Percentage of MDCPS Workforce
Male	114	8%
Female	1338	92%

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 (Protection or Prevention County of Service)		0.0294
Adoption (Adoption County of Service)	15 Children	0.0667

Role	Standards	Weight Per Case - 100% Capacity
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.

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 an important component 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, 2020, through June 30, 2021, and July 1, 2021, through June 30, 2022.

C. Inter-Country Adoptions:

There were no children, adopted from other counties that entered state custody in FY 2022 because of the disruption of a placement for adoption or the dissolution of an adoption.

D. Monthly Caseworker Visit Data:

The State submitted the FFY 2021 Annual Caseworker Visits data to the Children's Bureau in December 2021. The report submitted reflects that of the 5,177-youth served in the population for the period, 92.84% of the monthly in-home visits occurred; surpassing the requirement of at least 50% (For FFY 2012 and each FFY thereafter: At least 50 percent of the total number of monthly visits made by caseworkers to children in foster care during a fiscal year must occur in the child's residence).

Additionally, 95.25% of the required monthly visits occurred meeting the 95% standard (For FFY 2015 and each FFY thereafter: The total number of visits made by caseworkers monthly to children in foster care during a fiscal year must not be less than 95 percent of the total number of such visits that would occur if each child were visited once every month while in care).

XII. 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 at this time.

2023 Annual Progress and Services Report

4. FY 2019 Title IV-B Expenditure Report
The MDCPS has no changes at this time.
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)

XIII. Publication and State Contact

A. Publication

A copy of the state's approved 2023 APSR and other required documents will be available on MDCPS's website. The MDCPS's website is: <https://www.mdcps.ms.gov/reports/>. Additionally, an electronic copy of the of the 2023 APSR will also be emailed to its stakeholders by MDCPS.

B. State Contact

The state contact for the 2023 APSR and other federal plans is Karen Austin, Director of Federal Reporting. The contact email address is Karen.Austin@mdcps.ms.gov.

XIII. 2023 APSR Attachments

- A. MDCPS's Organizational Chart - See Attachment A
- B. Financial Information - See Attachment B
- C. ETV Attachment - See Attachment C
- D. CAPTA State Plan Requirements and Updates - See Attachment D
- E. Targeted Plans