
Government of the District of Columbia



Child and Family Services Agency

Performance Oversight Hearing Fiscal Year 2020-2021

“Child and Family Services Agency”

Responses to Hearing Questions

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Council of the District of Columbia

Committee on Human Services

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BACKGROUND

Agency Organization

- 1. Provide a current organizational chart for CFSA and NCCF. Provide a narrative explanation of any organizational changes made during FY20 and to date in FY21.**

Attachments Q1, CFSA Organization; and Q1, NCCF Organization Chart.

CFSA is in the process of updating our child welfare information system. As part of the FY21 capital budget supporting this update, five additional FTE resources were added in the Child Information System Administration.

- 2. With respect to employee evaluations, goals, responsibilities, and objectives in FY20 and to date in FY21, describe:**

- a. The process for establishing employee goals, responsibilities, and objectives;**

CFSA uses the performance management standards in Chapter 14 of the District Personnel Regulations to establish employee performance plans for each fiscal year. The plans encompass competencies, S.M.A.R.T. (Specific, Measurable, Achievable, Realistic, Timely) goals, and individual development plans (IDPs), and they're geared toward aiding the direction and accomplishment of key functions and tasks assigned to each employee. In addition, the CFSA management team works collaboratively across program administrations to ensure that employee goals align with the organization's strategic goals and mandates under District law.

- b. The steps taken to ensure that all CFSA employees are meeting individual job requirements; and**

Managers conduct supervision with direct reports to assess current performance. In these discussions, managers and employees review either clinical or administrative practice. In addition, managers and staff identify opportunities for improved performance and prioritize key targets, initiatives, and goals. Performance plans and mid-year evaluations are tools we use to assess how well employees are meeting their respective job requirements.

- c. The remedial actions taken for employees who failed to meet employee goals, responsibilities, and objectives.**

Managers address failure to meet goals, responsibilities or objectives, and a Performance Improvement Plan (PIP) is implemented. This performance management tool is designed to assist the employee in improving performance. The Agency can also offer training in the areas of identified deficiencies through CFSA, DCHR, Skillport, and external vendors. Human Resources and management can also provide verbal counseling. Where the matter is not performance related, e.g. stress, drug and alcohol, domestic matters, employees are referred to the Employee Assistance Program (EAP).

Alternatively, management may also pursue corrective and/or adverse action as deemed appropriate for conduct or performance-based deficiencies under Chapter 16 of the District's Personnel Regulations.

3. With respect to employee's ability to file anonymous internal complaints through the Agency's Human Resources department, describe:

a. The process by which these complaints are made.

The Labor Management Partnership Council (LMPC) of CFSA formed the "Employee Feedback Committee" (EFC). The goal of the EFC was to create a feedback system so that all CFSA staff could voice their opinions, concerns, suggestions, and acknowledgements to the respective units and administrations throughout the Agency.

Employees can file anonymous internal complaints through the Employee Feedback Portal. The portal is located on CFSA's intranet site. All-staff emails are also sent to employees reminding them of the portal and how to access it.

Staff can also contact the Human Resources Administration (HRA) directly via telephone or email to file anonymous internal complaints.

Additionally, staff may contact CFSA's Ombudsman with an anonymous internal complaint.

b. The process by which these complaints are reviewed.

Complaints that are received via the Employee Feedback Portal are sent directly to an HR MSS staff member and an AFSCME union shop steward. Once the complaint is received and reviewed, it is sent to the Deputy Director who heads the specific program for review and response. A newsletter is also sent out that addresses anonymous complaints and/or concerns. For complaints brought directly to HRA, a member of the Human Resources team also works directly with staff to address complaints and come to a resolution.

Sexual harassment allegations/complaints are handled directly by the Sexual Harassment Officer (SHO).

c. The types of complaints received in FY20 and to date in FY21.

CFSA received the following types of complaints in FY20 and FY21:

- Hostile work environment;
- Americans with Disabilities Act compliance; and
- Inappropriate comments.

d. The actions taken to address those complaints.

CFSA takes all complaints seriously. When these complaints were received, they were assigned to an HR Specialist/Generalist. The complaints were investigated, and disciplinary action was pursued as needed to include the following:

- Verbal Counseling
- Employee Reassignment within the agency
- Mediation
- Training

4. Provide the job description for family support workers and elaborate on their day-to-day functions and responsibilities to the Agency's resource families.

Attachment Q4, Family Support Worker Position Description

The following are some of the duties performed by a family support worker on a daily basis:

- Transportation of youth or parents to school, visits, and other appointments;
- Coordination of placements to include transportation of youth, gathering and delivery of belongings, accompanying youth to screenings; and
- Documentation of all duties and observations into FACES, the agency's current child welfare information system.

5. List all reports (annual or otherwise) published by CFSA, citing statutory authority. Highlight the report deadline as well as the date of actual submission by CFSA for FY20 and to date in FY21.

The following reports are submitted annually to the D.C. Council. All reports reflect program activity for the previous year.

- *Newborn Safe Haven Program Report* is due annually on January 31, as a result of the Newborn Safe Haven Act of 2010 (D.C. Law 18-158; D.C. Code § 4-1451.01 et seq.). The law requires an annual status report on the number of newborns in the District surrendered under the law within the year. The 2019 Report was transmitted to the D.C. Council on February 6, 2020. The 2020 Report was transmitted to the D.C. Council on January 14, 2021.
- Child and Family Services Agency's Annual Public Report is due annually on February 1, under the DC Adoption and Safe Families Act (ASFA) of 2000 (D.C. Law 13-136; D.C. Code § 4-1303.01 et seq.). CFSA is required to provide an annual public report (APR) to the Executive Office of the Mayor, the Council of the District of Columbia, and the general public. Each APR must describe the ongoing and specific actions CFSA has taken to implement the federal Adoption and Safe Families Amendment Act of 2000 (ASFA). The

Fiscal Year 2019 Report was transmitted to the D.C. Council on February 28, 2020. The Fiscal Year 2020 Report was transmitted to the D.C. Council on January 25, 2021.

- Child and Family Services Youth Ombudsman Annual Status Report is due annually on February 28, under the Foster Youth Statement of Rights and Responsibilities Amendment Act of 2012 (D.C. Law 19-276; D.C. Code § 4–1303.71 et seq.) and the Foster Parents Statement of Rights and Responsibilities Amendment Act of 2016 (D.C. Law 21-217; D.C. Official Code § 4-1303.81 et seq.). The CFSA Office of the Ombudsman Annual Report: Foster Youth and Foster Parent Statements of Rights and Responsibilities Annual Status Report reflects concerns reported by foster youth, resource parents, and concerned parties; outcomes of the investigations; and trends and issues. The 2019 Report was transmitted to the D.C. Council on February 28, 2020. The 2020 Report is expected to be transmitted to the D.C. Council by February 28, 2021.
- The Grandparent Caregivers Program Report is due annually on February 28, under the Grandparent Caregivers Pilot Program Establishment Act of 2005 (D.C. Law 16-69; D.C. Code § 4–251.01 et seq.). The law requires an annual report that includes a statistical overview of the number of children and families receiving a monthly subsidy through the Grandparent Caregivers Program. The 2019 Report was transmitted to the D.C. Council on February 28, 2020. The 2020 Report to include a statistical overview of the first year of operating the Close Relative Caregivers Program is expected to be transmitted to the D.C. Council by February 28, 2021.
- The Close Relative Caregivers Program Report is due annually on February 28 starting in 2021, under the Close Relative Caregivers Pilot Program Establishment Act of 2019 (D.C. Law 23-0032; D.C. Official Code § 4–251.22 et seq.). The law requires an annual report that includes a statistical overview of the number of children (brother, sister, nephew, niece or cousin) and families receiving a monthly subsidy through the Close Relative Caregivers Program. The 2020 Report to include the Grandparent Caregivers Program Report is expected to be transmitted to the D.C. Council by February 28, 2021.

Spending

- 6. Provide the amount budgeted and actually spent in FY20 and to date in FY21 for the agency and its programs and activities, broken out by source of funds, Comptroller Source Group, and Comptroller Object. The Committees preference is to receive this as an excel spreadsheet.**

Attachments Q6, CFSA Budget and Expenditures FY20 and FY21.

7. List any reprogramming, in or out of CFSA, which occurred in FY20 and FY21, to date. For each reprogramming, list the total amount of reprogramming, the original purposes for which funds were dedicated, and the reprogrammed use of the funds.

FY20 Reprogramming	Amount	Funding Source	Original Purpose of Funds	Reprogrammed Use of Funding
LaShawn V. Bowser Compliance	\$449,782	Local (0100)	Teen youth services	Support of the oversight monitor (CSSP).
Kinship Support	\$75,000	Local (0100)	Kinship support services	Licensure of kinship homes.
City Wide Reprogramming	\$2,500,000	Local (0100)	Budgeted in various objects.	Support of City-wide reprogramming.
Child Welfare - Federal Grant - COVID-19	\$34,743	Federal (8231)	Budget loaded in incorrect object	Prevention, preparation, and response to COVID.
Child Welfare Social Services program	\$324,541	Federal (8200)	Contractual services	Subsidies and transfers within child placement.
Chafee Foster Care Independence (INDL)	\$112,358	Federal (8200)	Subsidies	Direct services in support of the youth engagement contract and the high intensity family engagement project.
Business Services Administration	\$3,500	Federal (8200)	Office supplies	Training to assist families that suffer maltreatment from abuse.
CISA - Data Plans and Hardware Purchases	\$250,000	Federal (8200)	Contractual services	Distance learning support and replacement of phased out equipment.
Maintain Business Applications	\$306,000	Federal (8200)	Rentals-machinery equipment	Securing of software to maintain business applications.
Total	\$4,055,925			

FY21 Reprogramming	Amount	Funding Source	Original Purpose of Funds	Reprogrammed Use of Funding
Kinship Support	\$50,000	Local (0100)	Kinship support services	Licensure of kinship homes.
Total	\$50,000			

8. For any program code, explain any year to date expenditures that are equal to or greater than 50% of the revised budget amount allotted or under 10% of the revised budget amount allotted.

There are no expenditures that meet these criteria.

9. Provide a list of every purchase order in place for FY20 and FY21. For each purchase order, detail the amount that has been paid against it, to date.

Attachments Q9, CFSA Purchase Orders FY20 and FY21.

10. For Activities 4010 (Adoption and Guardianship) and 4011 (Guardianship Subsidy Activity), provide the following:

- a. How much is budgeted in FY21;
- b. How much has been obligated and spent in FY21, to date; and

Program Name	Activity	Supply Item Description	FY21 Budget Request	FY21 Obligation & Expenses	Balance
4000: Caretaker Subsidies	4010	Adoption Subsidies	\$15,949,537	\$5,926,509	\$10,023,027
		TOTAL	\$15,949,537	\$5,926,509	\$10,023,027

Program Name	Activity	Supply Item Description	FY21 Budget Request	FY21 Obligation & Expenses	Balance
4000: Caretaker Subsidies	4011	Guardianship Subsidies	\$7,573,291	\$2,732,913	\$4,840,378
		TOTAL	\$7,573,291	\$2,732,913	\$4,840,378

- c. Does CFSA believe that it will fully spend the amount budgeted to these activities? Explain.

At this point in time, CFSA believes it will spend the full amounts budgeted in Activities 4010 and 4011 based on the agency's current rate of spending.

11. Provide the amount the agency spent per child in foster care on placement during FY19, FY20, and FY21, to date. Explain your calculations, and include the amounts spent on each of the following:

- a. Allowance;
- b. Transportation;
- c. Room & board.

Attachment Q11, Foster Care Placement Spending.

12. Flex Funds:

- a. How much of the available Flex Funds were spent in FY20?
- b. How much is currently budgeted for Flex Funds in FY21 and how much has been spent in FY21, to date?

The table below reflects the available flex funds for children and families served by the In-Home Administration and those in foster care.

Description	FY20 Expenses	FY21 Approved Budget	FY21 Expenses to-date	FY21 Available Budget
Child Care - Other Services	\$460,306	\$689,678	\$86,090	\$603,587
Emergency Funds	\$84,926	\$145,000	\$3,281	\$141,719
Food Vouchers	\$193,400	\$115,000	\$134,175	\$(19,175)
Child Care - Clothing	\$137,200	\$141,918	\$0	\$141,918
Child Care - Furniture	\$229,878	\$177,583	\$48,123	\$129,460
Total	\$1,105,710	\$1,269,179	\$271,669	\$997,509

13. Contracting and procurement each contract, grant, and procurement (“contract”) awarded or entered into by CFSA during FY20 and FY21, to date. For each contract, provide the following information, where applicable:

- a. Name of the provider;
- b. Approved and actual budget;
- c. Funding source(s);
- d. Whether it was competitively bid or sole sourced;
- e. Purpose of the contract;
- f. The term of the contract;
- g. Contract deliverables;
- h. Contract outcomes;
- i. Any corrective action taken, or technical assistance provided;
- j. Program and activity supported by the contract;
- k. Employee responsible for overseeing the contract; and

I. Oversight/Monitoring plan for the contract.

Attachments Q13, Grants Reports FY20 and FY21; Q13, Contracts Report FY20 and FY21; and Q13(I), Contracts and Grants Oversight/Monitoring Plan.

14. List the providers responsible for any CFSA-funded counseling services for foster, adoptive or kin families that require the provider to allow CFSA open access to the therapeutic record.

a. Explain the reasoning behind requiring this open access.

Adoptions Together/Family Works and Center for Adoption Support and Education (CASE) were contracts maintained by CFSA in FY20 to provide counseling services to foster, adoptive, or kin families. In FY21, Adoptions Together/Family Works is the single contractor providing this service.

There are no requirements in the contracts that require the provider to allow open access to the therapeutic record. The provider may be required to produce reports, treatment plans and updates on progress regarding the provision of services.

b. Explain how many instances CFSA has reviewed these types of records in FY20 and to date in FY21?

In FY20 and FY21 to date, there were no instances where CFSA had access to an open therapeutic record. There are times that therapeutic records are requested in discovery for a Court proceeding, e.g. neglect, adoption, or guardianship trial. There are also times where a mental health evaluation is ordered by the Court and conducted by the Department of Behavioral Health (DBH). In these cases, the subject of the evaluation signs a release acknowledging the report will be shared with all parties to the neglect case.

15. Provide the following information for all contract modifications made during FY20 and to date in FY21:

- a. Name of the vendor;**
- b. Purpose of the contract;**
- c. Modification term;**
- d. Modification cost, including budgeted amount and actual spent;**
- e. Narrative explanation of the reason for the modification; and**
- f. Funding source.**

Attachments Q15, Contract Modifications Reports FY20 and FY21.

Internal Operations, Analysis, and Performance

16. Provide a list of all MOUs currently in place and any MOUs planned for the coming year. Provide copies of all such MOUs.

Attachment Q16, Memoranda of Understanding.

17. Provide a list of all studies, research papers, and analyses (“studies”) the agency prepared, or contracted for, during FY20 and FY21, to date. State the status and purpose of each study.

Attachment Q17, List of CFSA Studies, Research Papers, and Analyses.

COVID-19 Response

18. How many CPS workers (and what percent of total) have been exempted from conducting in-person investigations due to health conditions? What are they being assigned to do instead of in-person investigations?

There were 14 CPS social workers (13 percent of 94 filled FTEs) who have been exempt from conducting in-person investigations during the COVID-19 public health emergency due to health conditions.

The following are duties provided to social workers who are not conducting in-person investigations:

- Providing follow-up investigative activities after an investigation has been initiated, e.g. requesting health record, school attendance, and mental/behavioral health information and following up with clients or collaterals to provide additional information to complete the investigation;
- Providing support to District-wide COVID-19 activities; and
- Assisting with eliminating duplicative client information within FACES.

19. What is the average caseload for workers doing in-person investigations as of now?

The average caseload for workers conducting in-person investigation is five investigations.

20. There have been reports that CPS investigators have been doing interviews and other parts of investigations remotely. Please describe any changes to CPS operations due to the pandemic.

Throughout the public health emergency, the Child Protection Services (CPS) Hotline referral and investigative functions and procedures have continued. The CPS Hotline has continued 24/7 operations throughout the pandemic with staff working remotely. CPS social workers continue to conduct in-person investigations of allegations of child abuse and neglect and

assess for safety, while following Centers for Disease Control and Prevention (CDC) COVID-19 guidance. Prior to conducting in-person investigations, social workers are to initiate the COVID-19 screening questions as well as take the temperature of those with whom they will interact. If the screening responses reveal potential exposure or individuals exhibiting symptoms, investigative work is conducted remotely until it is safe for our staff to conduct an in-person investigation.

21. Please describe the current use of virtual vs. in-person interactions by in-home and permanency social workers.

Since the onset of our operations under the public health emergency, CFSA has sought to conduct visits with both in-home and out-of-home clients on virtual platforms to the greatest extent possible.

In collaboration with managers, case-by-case determinations are made by social workers about whether safety, well-being, and/or permanency objectives necessitate in-person contact.

Additionally, the following detailed guidance provided to the workforce specifies the requirements for virtual visitation under various circumstances (i.e., whether or not a visual component is necessary).

In-Home:

- General visitation requirements. For all assigned cases, a minimum of two visits (virtual or face-to-face) should occur each month. If both visits are held virtually, for at least one of those visits, the family must be physically in their home. For all intensive level of care cases, weekly contact (virtual or face-to-face) is required in addition to monthly in-person contact. For all non-intensive level of care cases, weekly contact should be made as needed.
- In-person visitation requirements. There must be at least one in-person visit with the child and family each month if one of the following three criteria is met: the family has an intensive level of care; the family is difficult to engage/hard to contact; or the family is being transferred from CPS to In-Home.

Out-of-Home (case-carrying social workers in the Permanency Administration and Office of Youth Empowerment):

- Social worker visits with children newly in care or in a new placement. For children in their first month of foster care, two of the four required monthly visits are held in-person and two are held virtually. For children not in the first month of care but in a new placement, a clinical decision is made to determine the level of support needed to maintain stability. For these children, two of the four required social worker visits in the first month may be held in-person, or all four may be held virtually.
- Social worker visits with children in stable placements. For children not in the first month of a new placement, the two monthly visits are held virtually.

- Social worker supervision of in-person parent-child visitation. For children who have entered care within the last 45 days, and for reunification cases in which birth parents are actively pursuing their case plan, two in-person and two virtual visits occur monthly. For all other cases, parent-child visitation is held virtually.
- Social worker visits with parents. Social workers supervising in-person parent-child visitation should use the opportunity to case plan with the parent. Otherwise, for cases open 90 days or fewer, two parent-worker virtual contacts should occur each month. For cases open longer than 90 days, all parent-worker visits are virtual.

Social workers across all client-facing divisions at CFSA are provided with detailed guidance on safety procedures for in-person contact (including pre-screening and visit requirements), as well as tip sheets and webinars on conducting effective virtual visits.

Additionally, social workers interacting with clients in-person have regular access to safety supplies (masks, non-contact digital thermometers, hand sanitizer and disinfectant wipes). To date, CFSA has distributed 2,331 safety kits during 23 “curbside” events.

To ensure our mission-critical work is accomplished, while also remaining aligned with evolving pandemic conditions in the District, CFSA’s practice guidance and business processes in these areas are frequently reviewed and adjusted as needed.

22. What is the plan for getting CFSA case-carrying workers and case aides vaccinated when the appropriate phase becomes available?

The guidelines for vaccinations are administered by DC Health and DCHR. CFSA will support both agencies as requested. Based on guidance from DCHR, employees are permitted two hours of administrative leave to get the vaccine.

23. What is the status of the virtual learning hub(s) that CFSA has piloted for some foster youth? How many youths are involved in these hubs?

In summer 2020, as it became clear that schools would continue with distance learning, CFSA worked with philanthropic partners to create a plan to support resource parents with educational needs in the virtual environment.

In October 2020, CFSA partnered with three resource parents to serve as Network Educators who facilitate satellite Educational/Learning Hubs and provide an in-person learning opportunity for some of our youth who need extra support in a virtual environment. The learning Hubs continue to support families and youth through the ever-changing pandemic. Currently, CFSA is providing virtual learning opportunities to six children via two Hubs.

24. To date, how many families and youth have utilized the respite center during the ongoing public health emergency?

To date, 18 children have utilized the respite center during the public health emergency.

SERVICES

Child Protection Investigations and Differential Response

25. Regarding calls to the Child Abuse Hotline, provide the following for FY20 and for FY21, to date:

a. Total number of Hotline calls received;

In FY20, a total of 25,868 Hotline calls were received. In FY21 to date, a total of 6,280 Hotline calls have been received.

Recorded in FACES (Yes/No)	Hotline Call Type/Outcome	FY20	FY21
Yes	Investigations	4,544	1,083
	Information and Referral	582	292
	Screened-Out	8,514	2,162
	<i>Subtotal</i>	<i>13,640</i>	<i>3,537</i>
No	Abandoned Calls (hang ups)	944	147
	Updates/Contact Notes/Additional Information	3,780	870
	General Information	7,504	1,726
	<i>Subtotal</i>	<i>12,228</i>	<i>2,743</i>
Total Calls		25,868	6,280

b. Total number of Hotline calls resulting in a referral for Family Assessment, by type of allegation (e.g. educational neglect, parental substance abuse, trafficking, etc.);

CFSA discontinued differential response and consequently, the use of the Family Assessment track as of April 1, 2019.

c. Total number of Hotline calls concerning children who are wards of CFSA, by type of allegation;

These data represent hotline calls where the victim child was a ward of CFSA; it does not necessarily mean that the resource parent is the alleged maltreater.

FY20 Allegation Type Category	Total Referrals
Domestic Violence	1
Inadequate Supervision	4
Mental abuse	1
Neglect	1
Physical Abuse	11
Sex Trafficking	1
Sexual abuse	5
Substance Abuse	2
Total¹	15

FY21 Allegation Type Category	Total Referrals
Physical Abuse	1
Substance Abuse	1
Total	2

Notes: This summary shows the count of "accepted" Investigations where a victim was in foster care on the referral date and represents the mapping category of each allegation.

d. Total number of Hotline calls resulting in the opening of an investigation, broken down by type of allegation;

FY20 Investigations: Allegation Type Category	Total Hotline Calls
Physical Abuse	1,561
Substance Abuse	1,407
Inadequate Supervision	1,053
Domestic Violence	784
Inadequate Housing	456
Neglect	439

¹ The totals may not add up because a child may be associated with multiple allegations.

FY20 Investigations: Allegation Type Category	Total Hotline Calls
Educational Neglect	434
Sexual abuse	396
Caregiver incapacity (due to incarceration, hospitalization, or physical or mental incapacity)	358
Medical Neglect	312
Caregiver discontinues or seeks to discontinue care	184
Mental abuse	148
Sex Trafficking	117
Child Fatality	18
Medical abuse	7
Imminent danger of being abused and another child in the home has been abused or is alleged to have been abused	5
Total Investigation Hotline Calls²	4,544

FY21 Investigations: Allegation Type Category	Total Hotline Calls
Physical Abuse	358
Substance Abuse	314
Inadequate Supervision	277
Domestic Violence	227
Educational Neglect	135
Inadequate Housing	109
Neglect	101
Caregiver incapacity (due to incarceration, hospitalization, or physical or mental incapacity)	91
Sexual abuse	86
Medical Neglect	64
Caregiver discontinues or seeks to discontinue care	47
Mental abuse	40
Sex Trafficking	15
Child Fatality	3
Imminent danger of being abused and another child in the home has been abused or is alleged to have been abused	2

² The totals may not add up because a child may be associated with multiple allegations.

FY21 Investigations: Allegation Type Category	Total Hotline Calls
Total Investigation Hotline Calls³	1,083

Notes: This summary shows the count of "accepted" investigations by allegation types and represents the mapping category of each allegation.

e. Total number of Hotline calls resulting in the agency providing information and referral;

In FY20, a total of 582 Hotline calls resulted in the agency providing information and referrals.

In FY21 through December 20, 2020, a total of 292 Hotline calls resulted in the agency providing information and referrals.

f. Total number of Hotline calls screened out;

In FY20, a total of 8514 Hotline calls were screened out. In FY21, a total of 2,162 Hotline calls were screened out.

g. How calls to the hotline are categorized if there is more than one allegation concerning one child.

The Structured Decision Making (SDM) tool provides guidance to determine allegation type.

h. Total number of Hotline calls received since March 11, 2020, the date in which Mayor Bowser Declared the COVID-19 Public Health Emergency.

A total of 8,751 calls were received at the Hotline since March 11, 2020.

26. Regarding CPS, provide the following for FY20 and FY21, to date:

a. The number of CPS investigations for child abuse and neglect by ward;

Fiscal Year	Ward of Origin								No Ward	Total
	1	2	3	4	5	6	7	8		
FY20	261	59	86	372	622	352	955	1,496	236	4,439
FY21	40	6	12	60	89	61	146	228	15	657

Notes: 1. This summary represents closed non-institutional abuse investigations. 2. Ward 8 is with the highest number of closed investigations during the reporting FY.

³ The totals may not add up because a child may be associated with multiple allegations.

b. The number of investigations substantiated by ward;

Fiscal Year	Ward of Origin								No Ward	Total
	1	2	3	4	5	6	7	8		
FY20	55	12	13	66	150	78	215	367	33	989
FY21	11	0	0	13	22	12	31	69	5	163

Notes: 1. This summary represents closed non-institutional abuse investigations. 2. Ward 8 is with the highest number of substantiated investigations during the reporting FY.

c. The number of investigations that were not substantiated by ward;

Fiscal Year	Ward of Origin								No Ward	Total
	1	2	3	4	5	6	7	8		
FY20	206	47	73	306	472	274	740	1,129	203	3,450
FY21	29	6	12	47	67	49	115	159	10	494

Notes: 1. This summary represents closed non-institutional abuse investigations. 2. Ward 8 is the neighborhood with the highest number of non-substantiated investigations during the reporting FY.

d. Identify the top ten factors that led to an investigation being substantiated;

FY20 Allegation Type Category	# of Investigations
Substance Abuse	259
Domestic Violence	207
Inadequate Supervision	199
Physical Abuse	168
Educational Neglect	132
Caregiver incapacity (due to incarceration, hospitalization, or physical or mental incapacity)	97
Medical Neglect	77
Inadequate Housing	48
Caregiver discontinues or seeks to discontinue care	36
Neglect	33

FY21 Allegation Type Category	# of Investigations
Domestic Violence	42
Substance Abuse	38
Inadequate Supervision	35
Educational Neglect	24
Physical Abuse	22
Caregiver incapacity (due to incarceration, hospitalization, or physical or mental incapacity)	19
Medical Neglect	9
Inadequate Housing	8
Sexual abuse	7
Neglect	6

- e. The services and interventions available to families who have had an investigation substantiated and a list of vendors who directly provide these services and interventions;**

See response to question 26(g).

- f. For each specific service listed in (e), above, the number of families referred for services in FY20, and in FY21, to date;**

See response to question 26(g).

- g. For each specific service listed in (e), above, the number of families served in FY20, and in FY21, to date;**

Tables 1 and 2 below display services and interventions available to all families with an open investigation, In-Home case, Out-of-Home case, or no CFSA involvement (walk-in). CFSA does not track referral source to be able to break out referrals from CPS only. Service/Intervention Target populations are as follows:⁴

- Parent Education and Supportive Services. Families with an open Healthy Families/Thriving Communities Collaborative case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Project Connect. Families with an open CFSA investigation, In-Home case, or Out-of-Home case with a goal of reunification.

⁴ Mobile Crisis Stabilization Services (MCSS) was offered exclusively to resource parents in FY20 and FY21.

- Parent and Adolescent Support Services. Families with an open CFSA investigation or In-Home case (specific cases).
- Family Peer Coaches. Families with an open In-Home case.
- YVLifeset. Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Transition to Independence (TIP). Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Adolescent Community Reinforcement Approach (A-CRA). Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Multi-Systemic Therapy (MST). Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Trauma-Focused Cognitive Behavioral Therapy. Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Parent Child Interaction Therapy (PCIT). Families with an open Collaborative Case, CFSA Investigation, In-Home case, or Out-of-Home case.
- Neighborhood Legal Services. Families with an open Collaborative Case, CFSA Investigation, Investigation, In-Home case, or Out-of-Home case.
- Healthy Families America/Parents as Teachers (HFA/PAT). Families with an open CFSA Investigation, open or previous In-Home, Out-of-Home cases.

Table 1. FY20 Services and Interventions Families Referred and Served

Service/Intervention	Vendor/Provider	# of Families Referred ⁵	# of Families Served ⁶
Parent Education & Supportive Services	Collaborative Solutions for Communities	76	66
	East River Family Strengthening Collaborative	145	87
Project Connect	DC Child and Family Services Agency	58	56
Parent and Adolescent Support Services	Department of Human Services	114	76
Family Peer Coaches	Community Connections	62	58

⁵ Families referred includes all families that have been referred to a service or intervention, regardless of eligibility. A family that meets eligibility criteria and does not refuse services prior to intake is captured in the "Families Served" count.

⁶ Families Served includes all families that have met eligibility criteria and enrolled into a service or intervention. This is not a unique count. A family may be referred and served at multiple times throughout the Fiscal Year (FY).

Service/Intervention	Vendor/Provider	# of Families Referred ⁵	# of Families Served ⁶
YVLifeset	DC Child and Family Services Agency	60	61 ⁷
Transition to Independence (TIP)	Department of Behavioral Health	6	0
Adolescent Community Reinforcement Approach (A-CRA)	Department of Behavioral Health	7	0
Multi-Systemic Therapy (MST)	Department of Behavioral Health	8	1
Trauma-Focused Cognitive Behavioral Therapy	Department of Behavioral Health	36	3
Parent Child Interaction Therapy (PCIT)	Department of Behavioral Health	8	1
Neighborhood Legal Services	Neighborhood Legal Services	147	112
HFA/PAT	Mary's Center	183	24
Total		910	544

Table 2. FY21 Services and Interventions Families Referred and Served

Service/Intervention	Vendor/Provider	# of Families Referred	# of Families Served
Parent Education & Supportive Services	Collaborative Solutions for Communities	33	19
	East River Family Strengthening Collaborative	37	27
Project Connect	DC Child and Family Services Agency	16	38 ⁸
Parent and Adolescent Support Services (PASS)	Department of Human Services	21	60 ⁹
Family Peer Coaches	Community Connections	5	33 ¹⁰

⁷ YVLifeset Families Served count is higher than Families Referred because 27 cases from FY19 rolled over to FY20 and 26 referrals were refused by youth who did not choose to enroll.

⁸ Project Connect Families Served count is higher than Families Referred because 32 cases from FY20 rolled over to FY21 and 10 referrals were either pending or denied. Families who rolled over to FY21 are included in the FY21 Families Served calculation, whereas families whose referrals are pending/denied are excluded.

⁹ PASS Families Served count is higher than Families Referred because 39 cases from FY20 rolled over to FY21 and are included in the FY21 Families Served calculation.

¹⁰ Family Peer Coaches Families Served count is higher than Families Referred because 28 cases from FY20 rolled over to FY21 and are included in the FY21 Families Served calculation.

Service/Intervention	Vendor/Provider	# of Families Referred	# of Families Served
YVLifeset	DC Child and Family Services Agency	25	21
Transition to Independence (TIP)	Department of Behavioral Health	0	0
Adolescent Community Reinforcement Approach (A-CRA)	Department of Behavioral Health	0	0
Multi-Systemic Therapy (MST)	Department of Behavioral Health	2	0
Trauma-Focused Cognitive Behavioral Therapy	Department of Behavioral Health	8	0
Parent Child Interaction Therapy (PCIT)	Department of Behavioral Health	2	0
Neighborhood Legal Services	Neighborhood Legal Services	36	51 ¹¹
HFA/PAT	Mary's Center	34	11
Total		219	262

Tables 3 and 4 specify all CPS referrals made to the Healthy Families/Thriving Communities Collaboratives, including the number of families referred and served by each Collaborative.

Table 3. FY20 Collaborative Activity (CPS Only)

Collaborative Agency	Families Referred	Families Served
East River Family Strengthening Collaborative ¹²	107	69
Far Southeast Family Strengthening Collaborative ¹³	150	96
Georgia Avenue Family Support Collaborative ¹⁴	24	25
Edgewood/Brookland Family Support Collaborative ¹⁵	82	66
Collaborative Solutions for Communities ¹⁶	33	24

¹¹ Neighborhood Legal Services Served count is higher than Families Referred because 24 cases from FY20 rolled over to FY21. Families who rolled over to FY21 are included in the FY21 Families Served calculation, whereas families whose referrals are pending/denied are excluded.

¹² East River Family Strengthening Collaborative Served count includes 12 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

¹³ Far Southeast Family Strengthening Collaborative Served count includes 10 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

¹⁴ Georgia Avenue Family Support Collaborative Served count is higher than Families Referred because 6 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

¹⁵ Edgewood/Brookland Family Support Collaborative Served count includes 18 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

¹⁶ Collaborative Solutions for Communities Served count includes 6 cases from FY20 rolled over to FY21 and is included in the FY20 Families Served calculation.

Collaborative Agency	Families Referred	Families Served
Total	396	280

Table 4. FY21 Collaborative Activity (CPS Only)

Collaborative Agency	Families Referred	Families Served
East River Family Strengthening Collaborative ¹⁷	27	30
Far Southeast Family Strengthening Collaborative ¹⁸	53	78
Georgia Avenue Family Support Collaborative ¹⁹	14	27
Edgewood/Brookland Family Support Collaborative ²⁰	17	36
Collaborative Solutions for Communities ²¹	20	17
Total	131	188

h. The total number of families and the total number of children who were referred to services listed in (e), above, broken down by type of allegation;

Referrals are not tracked by allegation type. That, coupled with families who may have more than one allegation, means CFSA does not have the ability to report on allegation data by intervention/service referrals.

i. Of the total number of families and the total number of children who were referred to services listed in (e), above, how many cases were closed in FY20 and FY21, to date, by reason for closure (e.g. case objective achieved, family refused services, etc.);

Table 5 and Table 6 display the FY20 and FY21 Services and Interventions provided to CFSA-involved families and their children, inclusive of CPS investigations, by case closure reason.

Table 7 and Table 8 specify all CPS referrals made to the Healthy Families/ Thriving Communities Collaborative agencies, by case closure reason.

¹⁷ East River Family Strengthening Collaborative Served count is higher than Families Referred because 13 cases from FY20 rolled over to FY21 and are included in the FY20 Families Served calculation.

¹⁸ Far Southeast Family Strengthening Collaborative Served count is higher than Families Referred because 50 cases from FY20 rolled over to FY21 and are included in the FY20 Families Served calculation.

¹⁹ Georgia Avenue Family Support Collaborative Served count is higher than Families Referred because 16 cases from FY20 rolled over to FY21 and are included in the FY20 Families Served calculation.

²⁰ Edgewood/Brookland Family Support Collaborative Served count is higher than Families Referred because 30 cases from FY20 rolled over to FY21 and are included in the FY20 Families Served calculation.

²¹ Collaborative Solutions for Communities Served count is higher than Families Referred because 1 case from FY20 rolled over to FY21 and is included in the FY20 Families Served calculation.

Table 5. FY20 Services and Intervention. Case Closure Reasons

Service/Intervention	Vendor/Provider	# of cases served	# of cases closed	# withdrew or disengaged from services	# completed services
Parent Education & Supportive Services	Collaborative Solutions for Communities	66	8	6	2
	East River Family Strengthening Collaborative	87	28	15	13
Project Connect	DC Child and Family Services Agency	56	24	7	17
Parent and Adolescent Support Services	Department of Human Services	76	57	9	48
Family Peer Coaches	Community Connections	58	33	14	19
YVLifeset	DC Child and Family Services Agency	61 ²²	1	1	0
Transition to Independence (TIP)	Department of Behavioral Health	0	0	0	0
Adolescent Community Reinforcement Approach (A-CRA)	Department of Behavioral Health	0	0	0	0
Multi-Systemic Therapy (MST)	Department of Behavioral Health	1	0	0	0
Trauma-Focused Cognitive Behavioral Therapy	Department of Behavioral Health	3	0	0	0
Parent Child Interaction Therapy (PCIT)	Department of Behavioral Health	1	0	0	0
Neighborhood Legal Services	Neighborhood Legal Services	112	85	53	80
HFA/PAT	Mary's Center	24	2	2	0
Total		544	238	107	179

²² YVLifeset Families Served count is higher than Families Referred because 27 cases from FY19 rolled over to FY20 and 26 referrals were refused by youth who did not choose to enroll.

Table 6. FY21 Services and Intervention. Case Closure Reasons

Service/Intervention	Vendor/Provider	# of cases served	# of cases closed	# withdrew or disengaged from services	# completed services
Parent Education & Supportive Services	Collaborative Solutions for Communities	19	21	8	13
	East River Family Strengthening Collaborative	27	18	13	5
Project Connect	DC Child and Family Services Agency	38 ²³	8	2	6
Parent and Adolescent Support Services	Department of Human Services	60 ²⁴	20	14	6
Family Peer Coaches	Community Connections	33 ²⁵	5	2	3
YVLifeset	DC Child and Family Services Agency	21	2	2	0
Transition to Independence (TIP)	Department of Behavioral Health	0	0	0	0
Adolescent Community Reinforcement Approach (A-CRA)	Department of Behavioral Health	0	0	0	0
Multi-Systemic Therapy (MST)	Department of Behavioral Health	0	0	0	0
Trauma-Focused Cognitive Behavioral Therapy	Department of Behavioral Health	0	0	0	0
Parent Child Interaction Therapy (PCIT)	Department of Behavioral Health	0	0	0	0
Neighborhood Legal Services ²⁶	Neighborhood Legal Services	51 ²⁷	30	18	13

²³ Project Connect Families Served count is higher than Families Referred because 32 cases from FY20 rolled over to FY21 and 10 referrals were either pending or denied. Families who rolled over to FY21 are included in the FY21 Families Served calculation, whereas families whose referrals are pending/denied are excluded.

²⁴ PASS Families Served count is higher than Families Referred because 39 cases from FY20 rolled over to FY21 and are included in the FY21 Families Served calculation.

²⁵ Family Peer Coaches Families Served count is higher than Families Referred because 28 cases from FY20 rolled over to FY21 and are included in the FY21 Families Served calculation.

²⁶ Completed NLSP referrals specify clients who completed intake with NLSP. Closed (resolved) cases mean that the attorney finished providing legal assistance and closed the case in our system. For example, a case in which a client completed intake and was receiving ongoing legal assistance, such as representation in court, would have been a completed referral but would not yet be a closed (resolved) case.

²⁷ Neighborhood Legal Services Served count is higher than Families Referred because 24 cases from FY20 rolled over to FY21. Families who rolled over to FY21 are included in the FY21 Families Served calculation, whereas families whose referrals are pending/denied are excluded.

Service/Intervention	Vendor/Provider	# of cases served	# of cases closed	# withdrew or disengaged from services	# completed services
HFA/PAT	Mary's Center	11	0	0	0
Total		262	104	59	46

Table 7. FY20 Collaborative Activity. Case Closure Reasons (CPS)

Collaborative Agency	Number Served	Number of Closures	Family Goals Addressed	Requested Services Provided	Unresponsive	Family Withdrew	Transferred /Moved to Another Area	Ineligible	Safety Concerns
East River Family Strengthening	69	12	9	0	2	1	0	0	0
Far Southeast Family Strengthening	96	0	0	0	0	0	0	0	0
Georgia Avenue Family Support	25	6	2	2	1	0	1	0	0
Edgewood/Brookland Family Support	66	16	9	4	1	2	0	0	0
Collaborative Solutions for Communities	24	0	0	0	0	0	0	0	0
Total	280	34	20	6	4	3	1	0	0

Table 8. FY21 Collaborative Activity. Case Closure Reasons (CPS)

Collaborative Agency	Number Served	Number of Closures	Family Goals Addressed	Requested Services Provided	Unresponsive	Family Withdrew	Transferred to Another Collaborative/Program	Ineligible
East River Family Strengthening Collaborative	30	42	25	2	11	5	0	2
Far Southeast Family Strengthening Collaborative	78	35	1	13	14	7	0	2
Georgia Avenue Family Support Collaborative	27	4	1	2	1	1	0	1
Edgewood/Brookland Family Support Collaborative	36	23	7	6	7	3	0	0
Collaborative Solutions for Communities	17	16	4	10	1	1	0	0
Total	188	127	38	33	34	17	0	5

j. How many investigations closed because relatives stepped forward to care for the child and prevent the child from entering the system?

Investigations are closed once safety has been assessed and allegations of abuse and neglect are addressed. No investigation is closed solely because a relative steps forward to care for a child.

k. The current number of open investigations by ward;

Fiscal Year	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8	No Ward	Total
FY20	22	7	9	27	49	32	82	137	8	373
FY21	21	5	5	41	44	33	103	152	7	411

Note: Ward 8 is the neighborhood with the highest number of open non-institutional investigations.

l. The total number of backlogged investigations by ward;

Fiscal Year	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8	No Ward	Total
FY20	0	0	0	3	4	2	6	15	2	32
FY21	6	0	1	4	9	4	17	32	1	74

Note: Ward 8 is the neighborhood with the highest number of open non-institutional investigations.

m. For the backlogged investigations, the length of time each has remained open, and the reasons for the backlog;

FY20

Total Number of Backlogged Investigations = 32

Length of Time of Backlogged Investigations: 36-60 Days = 23

Length of Time of Backlogged Investigations: 61+ Days = 9

Status	Extension Reason	36-60 Days	61+ Days	Total Backlogged
With Extension	Child fatality	0	1	1
	Delay in receipt of critical information	10	2	12
	Law Enforcement	2	0	2
	Links	3	2	5
	Referral Reassignment	2	0	2
	Unable to contact client	1	0	1
	Unable to identify or locate	0	2	2
	Uncooperative client	2	1	3

Status	Extension Reason	36-60 Days	61+ Days	Total Backlogged
	Subtotal	20	8	28
Without Extension	N/A	3	1	4
Total		23	9	32

Note: Institutional Abuse not included.

FY21

Total Number of Backlogged Investigations = 74

Length of Time of Backlogged Investigations: 36-60 Days = 56

Length of Time of Backlogged Investigations: 61+ Days = 18

Status	Extension Reason	36-60 Days	61+ Days	Total Backlogged
With Extension	Child fatality	0	2	2
	Delay in receipt of critical information	5	3	8
	Law Enforcement	4	4	8
	Links	4	2	6
	Referral Reassignment	4	0	4
	Unable to contact client	3	1	4
	Unable to identify or locate	0	1	1
	Uncooperative client	6	2	8
	Subtotal	26	15	41
Without Extension	N/A	30	3	33
Total		56	18	74

Note: Institutional Abuse not included.

n. The number of children being removed by ward;

Fiscal Year	Ward 1	Ward 2	Ward 3	Ward 4	Ward 5	Ward 6	Ward 7	Ward 8	No Ward	Total
FY20	4	2	5	8	25	16	47	40	3	150
FY21	1	0	0	0	2	0	3	8	1	15

Notes: 1. This summary represents victims removed from substantiated non-institutional investigations.
2. Ward 7 is the neighborhood with the highest number of children removed during the investigations in FY20, and Ward 8 is the neighborhood with the highest number of children removed during the investigations in FY21.

o. The total number of FTEs allocated for CPS;

FY20	209
FY21	215

p. The total number of workers assigned to the CPS;

FY20	119
FY21	117

These numbers are the number of social workers assigned to CPS.

q. The total number of vacancies in CPS; and

FY20	10
FY21	23

Vacancies reported as of September 30, 2020 and February 8, 2021.

r. The number of vacancies the agency plans to fill and the plan for filling these vacancies.

CFSA plans to fill all vacant positions.

27. Regarding caseload requirements under *LaShawn A. v. Bowser*:

a. What is the required investigation/caseload for CPS-Investigations Workers?

The *LaShawn* and Exit Sustainability Plan standard is 90 percent of investigators and social workers will have caseloads less than or equal to 12. No individual investigator shall have a caseload greater than 15 cases.

b. Provide for FY20 and FY21, to date (organized by the unit each worker is assigned):

i. The average current caseload per worker;

Attachment Q27, Average Current Caseload Per Worker FY20 and FY21.

ii. The total number of instances (this could be multiple times in a year per worker) that the caseload has been between 13 and 15;

As of September 30, 2020	Social Worker	Total # of Instances
FY20	Social Worker 23	1
FY20	Social Worker 64	1

As of December 31, 2020	Social Worker	Total # of Instances
FY21	Social Worker 73	1
FY21	Social Worker 83	2

- iii. The total number of instances (this could be multiple times in a year per worker) that the caseload has been 16 or more; and

In FY20 and FY21, there were zero instances where the caseload has been 16 or more.

- iv. The average length of time caseloads exceeded the required number.

FY20	Days
The average length of time caseloads have been between 13 and 15	2.5
The average length of time caseloads have been 16 and more	0

FY21	Days
The average length of time caseloads have been between 13 and 15	5
The average length of time caseloads have been 16 and more	0

- c. For each of the units, provide a monthly breakdown of each worker that exceeded a caseload of 12 with the following information:

- i. The number of days that the case load was between 13 and 15; and

Social Worker	Jan-20	Feb-20	Total # of days
Social Worker 23	4	0	4
Social Worker 64	0	1	1
Total	4	1	5

Social Worker	Dec-20	Total Number of days
Social Worker 73	11	11
Social Worker 83	4	4
Total	15	15

ii. The number of days that the case load was 16 or more.

In FY20 and 21, there are zero days where the caseload was 16 or more.

iii. Anytime the caseload is 16 or more, provide the maximum number of cases that worker had at one time.

N/A.

28. In FY20 and in FY21, to date, how many child protection reports has the Agency received alleging educational neglect of youth in CFSA custody and not in CFSA custody? Break down the response for reports involving (i) children with 0-9 cumulative unexcused 7 absences, (ii) children with 10-19 cumulative unexcused absences, (iii) children with 20-25 cumulative unexcused absences; and (iv) 26 or more cumulative unexcused absences.

Referral Status	Custody Type	Cumulative Unexcused Absences	SY2019 – 2020 (Aug 01, 2019 - Aug 30, 2020)	SY2020 – 2021 (Aug 31, 2020 - Dec 31, 2020)
Accepted	Non CFSA Custody	0 - 9	18	9
		10 - 19	191	47
		20 - 25	105	34
		26 or more	105	57
		Not Recorded	76	32
		Subtotal	458	162
Screened Out	CFSA Custody		4	7
	Non CFSA Custody		2,005	895
		Subtotal*	2,009	901
Other	Non CFSA Custody		58	138
		Total*	2,525	1,201

***Unique Counts**

Notes:

1. The other referral status consists of AVOKA/QuickBase reporting source of referrals with no educational neglect allegation.
2. Accepted linked referrals are excluded
3. 'Non CFSA Custody' represents children who are not a ward of CFSA at the time of the hotline call.
4. The referrals counted under "Not Recorded" consists of alleged educational neglect victims where the number of absences were not documented.

- a. How many of these reports were substantiated? Break down the answer by the categories (i), (ii), (iii) and (iv) listed above.

Custody Type	Cumulative Unexcused Absences	SY2019 – 2020 (Aug 01, 2019 - Aug 30, 2020)	SY2020 – 2021 (Aug 31, 2020 - Dec 31, 2020)
Non CFSA Custody	0 - 9	10	3
	10 - 19	57	14
	20 - 25	29	11
	26 or more	41	19
	Not Recorded	17	9
Total*		133	49

***Unique Counts**

Notes:

1. This summary counts closed investigations where the educational neglect is substantiated.
2. "Non CFSA Custody" represents children who are not a ward of CFSA at the time of the Hotline call
3. There were no reports alleging educational neglect of youth of youth in CFSA's custody during this period.
4. The referrals counted under "Not Recorded" consist of alleged educational neglect victims where the number of absences were not documented.

- b. Of the reports that were substantiated, how many led to a child's removal from their home? Break down the answer by the categories (i), (ii), (iii) and (iv) listed above.

		SY2019 – 2020 (Aug 01, 2019 - Aug 30, 2020)		SY2020 – 2021 (Aug 31, 2020 - Dec 31, 2020)	
Custody Type	Cumulative Unexcused Absences	# of Investigations	# of Children	# of Investigations	# of Children
Non CFSA Custody	0 - 9	1	2	0	0
	10 - 19	3	4	2	2
	26 or more	1	1	1	1
	Not Recorded	0	0	1	1
Total*		4	7	3	4

***Unique Counts**

Notes:

1. This summary counts closed Investigations where the Educational Neglect allegation is substantiated and removal on/after the hotline referral date.
2. "Non CFSA Custody" represents children who are not a ward of CFSA at the time of the hotline call.
3. There were no reports alleging educational neglect of youth in CFSA's custody during this period.

4. The referrals counted under “Not Recorded” consist of alleged educational neglect victims where the number of absences were not documented.

c. How many reports were received from DCPS? From charter schools? Provide the number of reports attributable to each LEA.

Public School Type	SY2019 – 2020 (Aug 01, 2019 - Aug 30, 2020)	SY2020 – 2021 (Aug 31, 2020 - Dec 31, 2020)
DCPS	1,481	717
DCPCS	862	403

***Unique Counts**

Notes:

1. This summary considers referrals from either DCPS and DCPCS only.
2. Referrals received by other independent or private schools or by other sources are not included.

29. Provide an update on the status of implementing the new practice model that includes creating a social work unit dedicated to educational neglect triage and responding to accepted educational neglect referrals.]

a. Provide a detailed explanation to this organizational change.

CFSA and its education and community partners have collaborated to address the increase of educational neglect and chronic absenteeism. CFSA created a specialized social work unit to respond to allegations of educational neglect. CFSA and DCPS are currently testing this model at Moten Elementary and Excel Academy to better support families by providing community-based services through early intervention.

b. How has the agency adjusted its approach to investigating truancy and educational neglect?

The specialized social work unit and the Educational Triage Unit is staffed by family support workers who also serve as points of contact to a cluster of schools. They provide additional support to school counselors and attendance coordinators on matters of educational neglect and prevention.

c. In what ways has CFSA worked with DCPS and other LEAs to address concerns around truancy and educational neglect?

If a family requires support through the prevention track, CFSA will complete triage and teaming within five days, to include the school, the Show Up Stand Out program (if applicable), and other community-based providers to ensure the family is supported in addressing concerns to reduce absenteeism.

30. How many children did CFSA remove, by age and reason for removal, in FY20? In FY21, to date?

Age	FY20	FY21
<1 year	53	13
1	9	3
2	14	5
3	13	2
4	11	3
5	10	4
6	3	5
7	7	1
8	3	3
9	4	3
10	1	2
11	8	2
12	5	2
13	16	5
14	12	3
15	16	1
16	17	2
17	14	3
18	1	0
Total	217	62

Note: Age is calculated as of the entry date.

Removal Reason	FY20	FY21
Abandonment	10	1
Alcohol Abuse (Parent)	7	0
Caretaker ill/Unable to Cope	4	3
Child's Behavior Problem	8	3
Drug Abuse (Parent)	31	13
Inadequate Housing	2	0
Incarceration of Parent(s)	13	0
Neglect (Alleged/Reported)	164	44
Physical Abuse (Alleged/Reported)	46	13
Relinquishment	3	2
Sexual Abuse (Alleged/Reported)	2	1
Voluntary	6	0

Note: Totals not provided as a child may have multiple removal reasons.

Attachment Q30, Removals by Age and Reason.

a. How many of these children had a family team meeting held before removal?

In FY20, 217 children were removed. Of those 217, 33 had an At-Risk of Removal FTM. In FY21, 62 children were removed. Of those 62, 7 had an At-Risk Removal FTM.

FY20	33
FY21	7

b. How many of these children had a family team meeting held within 72 hours of removal?

FY20	193
FY21	51

c. How many of these children had a non-custodial parent identified prior to removal?

CFSA does not currently track this data. However, in all removals, CFSA requests the name and contact information of all non-custodial parents and submits a mandatory referral to the Diligent Search Unit requesting information on all prospective parents/kin.

d. How many of these children had kinship resources identified prior to removal?

The chart below indicates the families that had identified kin prior to removal. This does not mean, however, that the child went on to be placed with that identified kin or that they were able to be licensed.

FY20	125
FY21	17

e. How many of these children were removed after CFSA received just one hotline call regarding the child? After 2-3 calls? After 4-5 calls? After more than 5 calls?

Hotline Calls*	FY20	FY21
0	19	7
1	71	21
2 - 3	79	19
4 - 5	37	10
6+	11	5
Total Removals	217	62

*Hotline Calls include Investigations, FA's and Screened Out calls that came for the child within 12 months prior to his/her entry into care.

Note: Removals with no Hotline Calls are due to referrals not being counted if they fall under the following scenarios:

1. Client ID in the Referral and Case are different.
2. No allegations are entered in the referral for the child that was removed.
3. Investigations that were opened subsequent to a closed FA with a reason of "Open CPS Referral" are not being counted.

f. How many pre-removal family team meetings were held in FY20? In FY21 to date?

FY20	208
FY21	82

g. How many of these children were placed in emergency or short-term placements in FY20? FY21, to date?

FY20	21
FY21	5

h. What is voluntary removal and relinquishment? Identify the statutory authority for removal on these bases.

A parent entering a “voluntary placement agreement” is considered a “voluntary removal” and permits a parent to voluntarily agree for their child to be placed by CFSA for a period of time not to exceed 90 days. *See* DC Code § 4-1303.03(a)(2).

31. How many neglect petitions did CFSA file in Family Court in FY20? FY21, to date?

a. How many children were the subject of a neglect petition filed by CFSA in Family Court in FY20 and in FY21 to date?

In FY20, there were a total of 214 children. In FY21 to date, there have been 54 children.

b. How many of the children subject to those petitions were removed by CFSA prior to the filing of those petitions?

In FY20, there were a total of 135 children. In FY21 to date, there have been 40 children.

c. How many of the children subject to those petitions were community papered?

In FY20, there were a total of 79 children. In FY21 to date, there have been 14 children.

d. What, if any, data does CFSA collect on outcomes for children whose cases are no papered?

In FY20, there were 14 children that were no-papered. For all 14 children, CFSA collects data to determine whether there were subsequent hotline calls, removals, or open In-Home cases. Ten children have not had any further calls to the hotline or any removals. Five children have open in-home cases that are still open.

In FY21 to date, there is one child that was no-papered. This child has no additional referrals or removals, and there is an open in-home case.

e. What, if any, data does CFSA collect on outcomes for children where the allegations do not result in removal or court involvement?

When a screened-in allegation results in an investigation but does not result in removal or court involvement, the family may be referred to their local Collaborative for services or to the In-Home administration for services. For families referred to the Collaboratives, CFSA tracks whether they started services, have additional substantiated reports during Collaborative involvement or within six months of Collaborative case closure, and whether they entered care during Collaborative involvement or within six months of Collaborative case closure. For In-Home cases, CFSA tracks the families, the average amount of time In-Home cases remains open, repeat maltreatment on open In-Home cases and whether the families receive court

involvement after the In-Home case opening through community papering or a removal. This allows CFSA to better understand contributing factors that may lead to another occurrence of maltreatment and ways to prevent maltreatment from reoccurring.

32. Regarding Early Interventions for At-Risk Newborns, provide an update on the Agency's policies for newborns with positive toxicology results.

a. Total number of Hotline calls received regarding newborn toxicology in FY20 and FY21, to date;

Fiscal Year	Total # of hotline calls received regarding newborn toxicology (a)	# of calls that resulted in an in-home wellness visit (b(ii))	# of calls that resulted in an investigation (b(iii))	# of calls resulting in the agency providing information and referral (d)	# of calls that resulted in removal (e)
FY20	264	233	262	0	21
FY21	50	43	50	0	1

b. The number of calls that resulted in (i) no in-person follow-up; (ii) an in-home wellness visit; (iii) an investigation; (iv) other;

See response to question 32(a).

c. The most prevalent reasons for in-home visits and full investigations;

CFSA currently requires that all positive toxicology reports for newborns be screened in to determine if there is a need to open a CPS investigation.

All reports require the following:

- Referral to the CFSA Office of Well Being for intervention by the CFSA nursing staff;
- Development of an intervention plan;
- Completion of home visits to ensure a safe environment;
- Establishing contact with the parent, caregivers, siblings, and other household members to assess safety and risk; and
- Submission of other referrals as needed.

All newborn positive toxicology referrals are required to have a Plan of Safe Care in accordance with the federal Comprehensive Addiction and Recovery Act (CARA). The Plan of Safe Care includes provision of services and supports that address the infant's and affected caregiver's physical, social-emotional health, and safety needs.

d. Total number of Hotline calls resulting in the agency providing information and referral;

See response to question 32(a).

- e. The number of these Hotline calls that resulted in removal.

See response to question 32(a).

Health and Mental Health Care

33. Provide the following information regarding medical and dental screenings for children entering foster care or are wards of CFSA:

- a. The number and percentage of children who entered foster care in FY20 that received health screenings prior to placement. In FY21, to date;

Fiscal Year	# of Removals	# of Youth Requiring a Health Pre-Placement Screening	# and % of Youth Receiving a Health Pre-Placement Screening
FY20	217	177	165 (93%)
FY21	62	54	49 (91%)

Note: Children who are hospitalized do not require a screening prior to placement; they are medically cleared by the hospital's attending physician upon discharge.

- b. The number and percentage of children who entered foster care in FY20 that received medical and dental evaluations within 30 days of placement. In FY21, to date;

Fiscal Year	# of Removals	# of Youth Requiring Medical Evaluation within 30 days of Placement	# and % of Youth Receiving a Medical Evaluation within 30 days of Placement
FY20	217	195	175 (90%)
FY21	62	38	34 (89%)

Fiscal Year	# of Removals	# of Youth Requiring Dental Evaluation within 30 days of Placement	# and % of Youth Receiving a Dental Evaluation within 30 days of Placement
FY20	217	144	13 (9%)
FY21	62	22	7 (32%)

The COVID-19 pandemic has caused a significant delay in dental appointments since dental offices were mostly closed until the end of June 2020. When dental offices did begin to take appointments, it was for emergencies and surgery only. In some offices, regular dental cleanings began in August, but dental offices had significantly fewer available appointments due to newly implemented safety protocols, which included social distancing and capacity limits of 30 percent.

To address the unprecedented barriers caused by the COVID-19 pandemic, dental appointments are now being made immediately following removal to ensure an appointment

can be made within the designated time frame. A list of Medicaid approved dental providers is also now available through the Healthy Horizons Assessment Center, and a weekly compliance email is sent to all social workers with clients within the first 90 days of removal.

c. The number and percentage of children who were in foster care in FY20 that received health screenings within one year of their most recent screening;

CFSA tracks the number and percentage of children in foster care who receive health screenings before placement. For ongoing medical examinations, children determined to have significant medical needs based on medical necessity criteria via the Healthy Horizons Assessment Center or by team members identifying a need for intensive medical case management services are referred to the Nurse Care Management Program (NCMP). For children/youth not eligible for the NCMP, the assigned social worker takes the lead in coordinating routine medical care in cooperation with the resource parent and with consultation from the Healthy Horizons Assessment Center as needed.

d. The number and percentage of children who were in foster care in FY20 that received at least one medical evaluation with a physician every 132 days; and

See response to question 33(c).

e. The number and percentage of children who were in foster care in FY20 that received at least one dental evaluation with a dentist every 132 days.

CFSA tracks the number and percentage of children in foster care who receive dental evaluations commencing from 30 days after entry into care through 90 days after entry into care. For ongoing dental needs, the assigned social worker takes the lead in coordinating all routine dental care in partnership with resource parents.

34. For FY20 and FY21 to date:

a. How many medically fragile and developmentally delayed children and youth have entered care?

In FY20, three children/youth met the criteria for a medically fragile diagnosis; and thirteen children/youth met the criteria for a diagnosis of developmental delay. In FY21 to date, two children/youth meet the criteria for a medically fragile diagnosis; and zero children/youth met the criteria for a diagnosis of developmental delay.

Fiscal Year	Medically Fragile	Developmentally Delayed
FY20	3	13
FY21	2	0

- b. How many medically fragile and developmentally delayed children and youth have been identified in in-home cases?

Fiscal Year	Medically Fragile	Developmentally Delayed
FY20	11	20
FY21	1	0

These data represent children who were referred to CFSA community nurses.

35. For FY20 and FY21, to date, regarding screening and referral of children age birth to three involved in substantiated cases of abuse and neglect for IDEA Part C/Strong Start/DC Early Intervention Program:

- a. How many children age birth to three were involved in substantiated cases of abuse and neglect?

Fiscal Year	Total Children
FY20	469
FY21	102

- b. How many of these children did not enter foster care?

Fiscal Year	Total Children
FY20	390
FY21	93

- c. How many of these children age birth to three not entering foster care were screened for developmental delays and using what instrument?

Our goal is to screen all children. However, we can only do so with parental consent. Out of the 1500 referrals that were received from CPS investigations in FY20, 272 referrals were screened. Out of the 272 referrals, 31 were substantiated.

Fiscal Year	Children Screened Using the Ages and Stages Questionnaire
FY20	31
FY21	5

d. How many of these children were referred to Strong Start/DC Early Intervention Program (DC's IDEA Part C program)?

In FY20, 1500 referrals were received from CPS. 272 referrals were screened, and 31 were substantiated. Out of the 31, four were referred to Strong Start (they met the criteria).

For FY21 Q1, we have 145 referrals, and 38 were screened. Out of the 38, five were substantiated, and one of the five was referred to Strong Start.

Fiscal Year	Children Screened and Referred to Strong Start
FY20	5
FY21	1

36. Provide the following information regarding mental health services for children in foster care:

- a. CFSA uses a quarterly tracking report reflecting the timeliness of service inception following a documented referral for services. Provide all quarterly reports for each Choice Provider for the entirety of FY20 and all reports completed thus far in FY21.**

In FY20, CFSA referred 141 children and youth for mental health assessments and treatment. DBH staff co-located at CFSA connect children directly with DBH Core Service Agency (CSA) Choice Providers and other CSAs within the DBH network. This electronic access ensures referrals are sent quickly to the CSAs. Enrollment with the provider occurred within an average of one day. Enrollment does not indicate receipt of services, but rather that the child has been connected to a CSA for further evaluation to determine the need for services. The remaining children were referred and connected to private providers.

In FY21 to date, CFSA referred 23 children for mental health assessment and treatment. Enrollment with the provider occurred within an average of one day.

CFSA Referrals for Mental Health Diagnostic Assessment and Average Days for Linkage					
FY20	Community Connections	MD Family	Other Providers (Non-Choice)	Total	AVG Days from Referral to Linkage
Oct-19	2	5	6	13	1
Nov-19	0	2	5	7	0.2
Dec-19	0	0	12	12	0.3
<i>Q1 Total</i>	2	7	23	32	0.5
Jan-20	0	0	9	9	0.4

CFSA Referrals for Mental Health Diagnostic Assessment and Average Days for Linkage					
FY20	Community Connections	MD Family	Other Providers (Non-Choice)	Total	AVG Days from Referral to Linkage
Feb-20	0	2	12	14	0.2
Mar-20	1	2	6	9	0.4
<i>Q2 Total</i>	<i>1</i>	<i>4</i>	<i>27</i>	<i>32</i>	<i>0.3</i>
Apr-20	0	2	6	8	0
May-20	0	5	15	20	0.5
Jun-20	0	2	10	12	0.3
<i>Q3 Total</i>	<i>0</i>	<i>9</i>	<i>31</i>	<i>40</i>	<i>0.2</i>
July-20	2	1	11	14	0.3
Aug-20	0	3	9	12	0.9
Sep-20	0	2	9	11	0.6
<i>Q4-Total</i>	<i>2</i>	<i>6</i>	<i>29</i>	<i>37</i>	<i>0.6</i>
Total	5	26	110	141	0.4
DEFINITIONS/IDENTIFICATION: Children and Youth referred for mental health services via DMH are children/youth who are involved with the Child and Family services Agency (CFSA) ages 0 to 21 who were referred to a Core Service Agency (CSA) through CFSA's Clinical Health Services Administration. INTERPRETATION: This table shows the number of CFSA children/youth linked to a DMH CSA and the average number of days between CFSA referral and linkage to CSA.					

CFSA Referrals for Mental Health Diagnostic Assessment and Average Days for Linkage					
FY21	Community Connections	MD Family	Other Providers (Non-Choice)	Total	AVG Days from Referral to Linkage
Oct-20	1	0	6	7	0.6
Nov-20	0	3	7	10	0.6
Dec-20	0	1	5	6	0
Q1 Total	1	4	18	23	0.8
DEFINITIONS/IDENTIFICATION: Children and Youth referred for mental health services via DMH are children/youth who are involved with the Child and Family services Agency (CFSA) ages 0 to 21 who were referred to a Core Service Agency (CSA) through CFSA's Clinical Health Services Administration. INTERPRETATION: This table shows the number of CFSA children/youth linked to a DMH CSA and the average number of days between CFSA referral and linkage to CSA.					

b. What percentage of children entering foster care in FY20 received a mental health screening within 30 days of entry? In FY21, to date?

Mental Health Evaluations: In FY20, of the 71 eligible children, 67 children received a mental health evaluation of which 84 percent (56) were conducted within 30 days of entry. In FY21, of the 23 eligible children, 14 children received a mental health evaluation of which 100 percent (14) were conducted within 30 days of entry.

Eligible children represent children, ages 5 and over; and children not currently connected to mental health services.

i. As a result of these screenings, how many of these children were referred for further mental health evaluations with a mental health professional?

In FY20 and FY21, no children were referred for further mental health evaluations because CFSA mental health staff conduct mental health evaluations on-site.

ii. How many of these children completed the additional evaluations with a mental health professional?

In FY20 and FY21 to date, additional mental health evaluations were not required since CFSA conducts the initial evaluations internally.

c. What percentage of children who were in foster care in FY20 received the CAFAS/PECFAS every 90 days? In FY21, to date?

Out of the 690 children/youth in foster care requiring case plans, 86 percent had a current case plan in FY20. In FY21 to date, there are 654 children/youth in foster care, and 90 percent have a current case plan. In December 2019, CFSA stopped conducting aggregate tracking of CAFAS/PECFAS assessment data.

d. For children who received mental health services in each of these time periods, what is the average time between the mental health screening and delivery of services?

In FY20, the average time between mental health evaluations and the delivery of services was 28 days.

In FY21 to date, the average time between mental health evaluations and the delivery of therapy services was 26 days.

e. In FY20, and in FY21, to date, how many children, broken down by age and gender, had an episode of psychiatric hospitalization?

In FY20, 95 children (30 males and 65 females) had an episode of psychiatric hospitalization. In FY21 to date, 12 children (three males and nine females) have had an episode of psychiatric hospitalization.

FY20 Age	1 Episode	2 Episodes or More	Total Children
6	0	0	0
7	0	0	0
8	1	0	1
9	4	3	7
10	1	0	0
11	0	0	0
12	13	4	19
13	27	3	30
14	4	1	5
15	10	3	13
16	6	1	7
17	10	0	10
18	1	0	1
19	2	0	1
20	1	0	1
Total	80	15	95

FY20 Gender	1 Episode	2 Episodes or More	Total Children
Male	23	7	30
Female	57	8	65
Total	80	15	95
FY21 Age	1 Episode	2 Episodes or More	Total Children
6	0	0	0
7	0	0	0
8	0	0	0
9	0	1	1

FY20 Gender	1 Episode	2 Episodes or More	Total Children
10	0	0	0
11	0	0	0
12	3	0	3
13	1	2	3
14	1	0	1
15	2	0	2
16	1	0	1
17	1	0	1
18	0	0	0
19	0	0	0
20	0	0	0
Total	9	3	12

FY21 Gender	1 Episode	2 Episodes or More	Total Children
Male	2	1	3
Female	7	2	9
Total	9	3	12

- f. In FY20, and in FY21, to date, how many hospitalized children had more than one episode of psychiatric hospitalization?

See Q36(e) above.

- g. What percentage of children in foster care spent time at a Psychiatric Residential Treatment Facility (PRTF) in FY20? In FY21, to date? Break down by age.

In FY20, four percent of children in foster care spent time at a PRTF. In FY21 to date, two percent of children in foster care have spent time at a PRTF.

Age	FY20 Children placed at a Psychiatric Residential Treatment Facility (PRTF)
9	2
10	1
11	2
12	4

Age	FY20 Children placed at a Psychiatric Residential Treatment Facility (PRTF)
13	3
14	5
15	4
16	6
17	1
18	0
Total	28

Age	FY21 Children placed at a Psychiatric Residential Treatment Facility (PRTF)
9	1
10	0
11	1
12	2
13	1
14	2
15	1
16	3
17	3
18	0
Total	14

- h. How many referrals for evidence-based, specialized services (Multi-Systemic Therapy, Functional Family Therapy, Trauma-Focused Cognitive Behavioral Therapy, Child Parent Psychotherapy for Family Violence, and Parent Child Interaction Therapy) did CFSA make in FY20? How many referrals has CFSA made in FY21, to date? For each fiscal year, identify how many referrals were made for cases in which children:**
- i. Had not been removed at the time of referral;**
 - ii. Were in foster care at the time of the referral; and**
 - iii. Were living under protective supervision following a period in foster care at the time of referral.**

In FY20, CFSA therapists provided 87 children with evidence-based specialized services. In FY21 to date, CFSA therapists provided 31 children with evidence-based specialized services; and

CFSA made 5 referrals for evidence-based specialized services to MBI. All the children were in foster care at the time of the referral.

- i. In FY20 and FY21, to date, how many diagnostic assessments were completed for youth who had open an open investigation, family assessment, or abuse and neglect case with CFSA? How many of these assessments resulted in a recommendation for therapy?**

In FY20, 67 children completed diagnostic assessments (mental health evaluations), of which 43 were recommended for therapy. In FY21 to date, 14 children completed diagnostic assessments (mental health evaluations), of which 14 were recommended for therapy.

- j. What treatment resources does CFSA offer for children who have attachment disorders?**

Children with attachment disorders can be treated by DBH clinicians, a private counseling agency under a contract with CFSA, or internal CFSA mental health therapists. CFSA therapists have training in Trauma Focused Cognitive Behavioral Therapy (TF-CBT), grief and loss, and Trauma System Therapy (TST) treatment modalities.

- k. What training, if any, does CFSA provide to social workers and foster parents regarding attachment disorders?**

CFSA's Child Welfare Training Academy (CWTA) offers a six-hour course, "Attachment, Grief, and Loss," as an in-service training available to social workers and resource parents. CWTA has also integrated information on attachment and attachment disorders throughout the new social worker pre-service and ongoing social worker in-service training curricula. We had a strong focus in FY19 on attachment disorders. In FY20, training focused on motivational interviewing, adolescent brain development, and de-escalation.

- l. Describe the Agency's efforts to improve access to mental health services for children living in Maryland.**

Children in foster care placed in Maryland foster homes continue to be eligible for services in DC, and CFSA also contracts with a service provider in Maryland. In addition, CFSA's Temporary Safe Haven partner, NCCF, has partnered with Maryland Family Resources to provide mental health services for District children placed in Maryland.

- m. What treatment resources does CFSA offer for children who have an autism spectrum disorder? What training, if any, does CFSA provide to social workers and foster parents regarding autism spectrum disorders?**

Children who are diagnosed with Autism Spectrum Disorder (ASD) are enrolled with Health Services for Children with Special Needs (HSCSN) to receive treatment which can include

behavioral therapy services and medication management if their level of service need indicates they need a higher level of services. Children diagnosed with ASD may also receive speech, language, and occupational therapy and social skills through education programming as indicated on their Individual Education Plan (IEP).

CWTA currently provides social workers, family support workers, resource parents, nurses, and CFSA community partners with a three-hour Autism Spectrum Disorder course which includes a review of ASD symptoms and diagnoses pursuant to the guidelines in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). The course reviews interventions and best practices for children and youth diagnosed with ASD. Also discussed are perspectives on the impact of the disorder on service delivery for the families in the District.

37. Provide a detailed update regarding the Agency's implementation of mobile crisis stabilization services for youth in foster care, including the following information:

- a. During FY20, how many calls for crisis mobilization services has CFSA and/or its vendors received? FY21, to date?**

FY20	69
FY21	6

- i. How many of these calls have been from foster parents and providers located in DC?**

FY20	51
FY21	6

- ii. How many of these calls have been from foster parents and providers located in Maryland?**

FY20	18
FY21	0

- iii. How many of these calls resulted in a dispatch of services to the youth's location?**

FY20	45
FY21	0

iv. How many of these calls resulted in the youth being hospitalized?

FY20	1
FY21	0

b. How has the Agency evaluated the effectiveness of mobile crisis stabilization services?

i. If an evaluation has been done, provide a summary of the results and attach a copy of the composite results.

This contract was discontinued, and the resource was brought in-house.

ii. If no evaluation has been done, describe the Agency's plans to evaluate the effectiveness of this program, including timelines for evaluation, methods of evaluation, and the types of data that will be collected.

Due to underutilization, CFSA transitioned from contracting with Catholic Charities for Mobile Crisis Stabilization Services (MCSS) at the end of FY20 and brought the services in-house. Those services are now provided by the Resource Parent Support Unit. CFSA believes that this transition of services will improve continuity of service delivery on behalf of resource families and children/youth in their care. To support the transition of stabilization and crisis intervention services in-house, the following enhancement/additions have been implemented:

- Resource parent support workers received additional training on parent coaching to support their ability to assist resource parents in engagement with children/youth.
- The REACH Resource Parent Support Line is staffed after normal business hours and available to resource parents and youth amid challenging circumstances.
- Two resource parent support workers have been hired to appropriately address crisis intervention calls from 5:00 p.m. — 1:00 a.m. These after-hours crisis intervention services provide an additional layer of support to address escalating behaviors presented by children/youth placed in DC CFSA resource homes.

c. Are there any other mental health/crisis supports and services available?

Resource parents can access mental health/crisis supports through the REACH Resource Parent Support Line and also through Children and Adolescent Mobile Psychiatric Services (ChAMPS), a local DBH funded resource that responds to crisis situations.

- d. What hours of the day/days of the week are each of the services available and how are they accessed?

Service	Days	Hours of Operation
REACH Resource Parent Support Line	Monday - Friday	5:00PM-1:00AM
	Weekend and holidays	9:00AM-1:00AM
ChAMPS	Monday - Sunday	24 hours a day

NCCF has an emergency on call phone number that offers crisis supports to NCCF foster parents and youth after business hours 7-days per week, and 365-days per year. NCCF utilizes a Call Center that receives and dispatches all emergency calls after hours to their Trauma Specialist who contacts the individual directly to offer support and an emergency response. NCCF's On-Call Crisis team is comprised of Trauma Specialists and Licensed Independent Clinical Supervisors who support the Trauma Specialist with consultation on emergencies after hours.

38. Provide the number of youth served by the in-house mental health providers hired by CFSA in FY20 and FY21, to date. Include the following information for each youth: 1, to date. Include the following information for each youth:

- e. Length of service;
- f. Type of service; and
- g. Whether service was transitioned to an external provider, and if so, what the time between cessation of treatment by the CFSA mental health provider and the new provider was.

Attachment Q38, Youth Served by the In-House Mental Health Providers Hired by CFSA FY20 and FY21.

For FY21 to date, 14 evaluations have been completed, and there are 10 mental health evaluations pending for children recently removed. Of the 14 evaluations completed, four were referred to CFSA's in-house therapists, and 10 were referred or reconnected with a Core Service Agency (CSA). It was discovered after the evaluation was completed that some youth were already connected to a CSA.

39. There are many parents with in-home cases who need immediate mental health services in order to comply with their case plans, as well as their children. What is CFSA doing to increase the supply of needed mental health services for parents and children with in-home cases?

CFSA In-Home families access mental health services through DBH. CFSA and DBH work collaboratively to address families' immediate and on-going mental health needs to achieve better outcomes for families.

40. Provide the number youth who changed mental health care providers as a result of contractual or administrative changes during FY20 and FY21, to date.

In FY20, no youth experienced a change of mental health providers as a result of contractual or administrative change.

In FY21 to date, no youth experienced a change in mental health provider as a result of a contractual or administrative change.

41. Provide the following responses for FY20 and FY21, to date:

- a. Of the number of youth who entered foster care, how many received substance abuse screenings through the Healthy Horizon's Clinic? Based on the screenings administered, what are the most commonly used drugs?**

In FY20, 217 youth entered foster care and 54 of those youth were eligible for and consented to a substance abuse screening. Based on the screening administered, the most commonly used drug was THC (marijuana).

In FY21 to date, 62 youth have entered foster care and five of those youth were eligible for a substance abuse screening. Of those five eligible youth, four consented to a substance abuse screening. Based on the screening administered, the most commonly used drug was THC (marijuana).

- b. How many youths were referred to an Adolescent Substance Abuse Treatment Expansion Program (ASTEP) provider for treatment? Of the youth referred, how many were no shows?**

In FY20, 50 youth were referred for an assessment by an ASTEP provider. Of the 50 youth, seven youth agreed to an assessment, of which two were no shows. In FY21 to date, 13 youth have been referred to OWB for an assessment by an ASTEP provider. Of the 13 youth, five agreed to an assessment, of which one did not show up for the assessment.

- c. What if any common themes did the youth provide in their explanations of not showing up to their assessment appointments?**

Denial of substance use/abuse was the common theme for not attending assessment appointments.

- d. Of the youth assessed, how many successfully linked to services?**

In FY20, four of the five youth assessed were successfully linked to services. In FY21 to date, two of the four youth assessed have been successfully linked to services.

42. Provide the number of children who suffered fatal incidents while in CFSA care with a breakdown of whether the child was in -home, in foster care, reunified, or otherwise placed.

During FY20, there were two children in foster care who suffered fatal incidents. There were no fatalities for in-home cases.

During FY21, one child in foster care suffered a fatal incident while in foster care. There have been no fatalities for in-home cases.

Identifying, Documenting, and Providing Services to Trafficked Victims

43. Under the “Sex Trafficking of Minors Prevention Amendment Act of 2014”, the Metropolitan Police Department is required to refer children and families to CFSA when there is a suspicion that children might be involved in trafficking. The federal “Preventing Sex Trafficking and Strengthening Families Act of 2014” requires that CFSA identify, document, and determine services for children and youth under the care or supervision of the state, who the state has reasonable cause to believe are victims, or are at risk of becoming a victim, of sex trafficking or a severe form of trafficking in persons. The “Justice for Victims of Trafficking Act of 2015” requires that CFSA provide services to children known or suspected to be victims of sex trafficking. Lastly, the Child Neglect and Sex Trafficking Amendment Act of 2017 (now known as the Omnibus Public Safety and Justice Amendment Act of 2018) went into effect on May 24, 2019.

- a. In light of the passage of the Omnibus Public Safety and Justice Amendment Act of 2018, provide an update on protocols to screen and accept all referrals for minor sex trafficking without regard to the identity of the maltreater, with special attention to any changes and a copy thereof.**

There have not been any changes to the protocols to screen and accept all referrals for minor sex trafficking.

- b. How many referrals did CFSA receive from MPD regarding minors who were alleged commercially and sexually exploited or sex trafficked in FY20 and in FY21, to date? How many of these calls came during Mayor Bowser’s announcement of the public health emergency beginning March 11th, 2020 to date? Provide the outcome of these calls and their corresponding referrals.**

Fiscal Year	Accepted					Accepted Linked	Total Calls
	Incomplete	Inconclusive	Substantiated	Unfounded	Subtotal		
FY 2020	4	5	15	2	26	6	32
FY 2021	0	0	0	1	1	3	4

Calls Received during Mayor Bowser's announcement of the Public Health Emergency*

Reporting Period	Accepted					Accepted Linked	Total Calls
	Incomplete	Inconclusive	Substantiated	Unfounded	Subtotal		
3/11/20 – 12/31/20	3	3	10	2	18	6	24

*This data is a subset of FY2020 and FY2021 data shown above.

- c. Has the nature of these calls changed during the public health emergency beginning March 11th, 2020 to date? Provide the outcome of these calls and their corresponding referrals.

No, the nature of the calls has not changed since CFSA last reported nor has it changed during the public health emergency. CPS' investigative practice and response has also remained consistent. The hotline continues to receive reports of abuse and neglect 24/7, and referrals are assigned for investigations per usual operating procedures.

- d. How many referrals did CFSA receive in FY20 and FY21, to date where the alleged trafficker was a parent, guardian, or legal custodian? Has the nature of these calls changed during the public health emergency beginning March 11th, 2020 to date? Provide the outcome of these calls and their corresponding referrals.

See tables below.

- e. How many referrals did CFSA receive in FY20 and FY21, to date where the alleged trafficker was not a parent, guardian, or legal custodian? Provide outcomes for these calls and their corresponding referrals.

See tables below.

FY20 Allegation Type		Failure to protect against human sex trafficking	Sexual exploitation of a child by a caregiver (d)	Sexual exploitation/sex trafficking of a child by a non-caregiver (e)	Total Hotline Calls
Accepted	Incomplete	0	1	17	18
	Inconclusive	1	2	16	18
	Linked Investigation	0	0	1	1
	Open	0	0	0	0
	Substantiated	0	11	33	38
	Unfounded	1	4	39	42
Subtotal		2	18	106	117
Accepted Linked		0	2	16	18

FY20 Allegation Type	Failure to protect against human sex trafficking	Sexual exploitation of a child by a caregiver (d)	Sexual exploitation/sex trafficking of a child by a non-caregiver (e)	Total Hotline Calls
Screened Out	0	0	0	0
Total # of Calls	2	20	122	135

FY21 Allegation Type		Failure to protect against human sex trafficking	Sexual exploitation of a child by a caregiver (d)	Sexual exploitation/sex trafficking of a child by a non-caregiver (e)	Total Hotline Calls
Accepted	Incomplete	0	0	0	0
	Inconclusive	0	0	2	2
	Linked Investigation	0	0	1	1
	Open	1	1	7	7
	Substantiated	0	0	2	2
	Unfounded	0	0	3	3
Subtotal		1	1	15	15
<i>Accepted Linked</i>		<i>0</i>	<i>0</i>	<i>3</i>	<i>3</i>
Screened Out		0	0	1	1
Total # of Calls		1	1	19	19

Calls Received during Mayor Bowser's announcement of the Public Health Emergency (March 11, 2020 - December 31, 2020)*

Allegation Type		Failure to protect against human sex trafficking	Sexual exploitation of a child by a caregiver (d)	Sexual exploitation/sex trafficking of a child by a non-caregiver (e)	Total Hotline Calls
Accepted	Incomplete	0	1	9	10
	Inconclusive	0	2	12	14
	Linked Investigation	0	0	2	2
	Open	1	1	7	7
	Substantiated	0	9	19	22
	Unfounded	0	2	19	21
Subtotal		1	15	68	76
Accepted Linked		0	1	13	14
Screened Out		0	0	1	1
Total # of Calls		1	16	82	91

*This data is a subset of FY2020 and FY2021 data shown in the tables above.

- f. What is the Agency's plan for handling referrals made to CFSA where the alleged trafficker is a parent, guardian, or legal custodian? How will CFSA ensure that a referred child receives proper services?**

CFSA hotline workers process referrals using the CFSA Hotline Structured Decision-Making Screening and Assessment Tool. An investigation will occur if the referring source suggests sexual exploitation by a parent, guardian, or legal custodian. For those youth who are CFSA-involved, regardless of whether the alleged trafficker is a parent, guardian, or legal custodian, there is an internal CFSA Commercial Sexual Exploitation of Children (CSEC) case review held weekly. CSEC case reviews have a multidisciplinary team approach that includes the social work team, mental health provider, anti-trafficking agencies, caregiver, guardian ad litem (GAL), and MPD (if appropriate). The purpose of these reviews is to discuss the identified risks associated with CSEC and the child's overall functioning and health while developing a plan of care to address any barriers such as mental health, substance abuse, domestic violence, safety, and placement. A representative from Fair Girls or Courtney's House participates in CFSA CSEC case reviews to provide updates on their contact with the youth and the status of services being tracked by the youth's social work team.

- g. What is the Agency's plan for handling referrals made to CFSA where the alleged trafficker is not a parent, guardian, or legal custodian? How will CFSA ensure that a referred child receives proper services? Provide a copy of all updated internal guidance on handling such referrals to ensure referred children receive proper services.**

Attachments, Q43g, AI Commercial Sexual Exploitation and Sex Trafficking Identification and Response; Q43g, CSEC CPS Response to Child Sex Trafficking; and Q43g, Human Trafficking Guide Updated November 17, 2019.

- h. What kind of screening for sex trafficking will occur? Provide a copy of the screening tool and who will conduct the screenings?**

There are several assessment approaches used by CFSA to identify victims of sex trafficking. Preliminarily, the social worker uses key indicators and red flags to determine whether further assessment is needed.

If the child is the subject of a Child Protective Services report and the preliminary assessment suggests that child has been sexually exploited, a referral is made to one of the designated community resources specializing in commercial sexual exploitation/sex trafficking assessment and intervention.

Attachment Q43g, AI - Sex Trafficking Identification and Response.

- i. **Which if any other sister Agencies is CFSA coordinating with to properly screen and provide services to these youths? Did CFSA work with other agencies to develop their screening tool?**

CFSA worked with the Court Social Services Division to develop our screening tool. In addition, CFSA coordinates with the following agencies to screen and provide services to youth impacted or thought to be impacted by sex trafficking:

Metropolitan Police Department (MPD): CFSA and MPD have reciprocal agreements regarding screening and the provision of services to this population. CFSA's procedures require all reports that allege sex trafficking to be reported to MPD immediately and no later than 24-hours after the information is received. MPD is required to report to CFSA when MPD has knowledge, information, or suspicion that a child is engaging in behaviors related to sex trafficking. CFSA collaborates with MPD to ensure the child is referred to one of the designated community resources specializing in sex trafficking assessment and intervention, runaway and homeless youth programs, and other identified resources.

Department of Behavioral Health (DBH): The nurse practitioner may confer with the DBH co-located staff for service referrals, if the initial medical screening indicates evidence of sex trafficking.

Court Social Services Division (CSSD): The Child Guidance Clinic of the CSSD developed the Sex-trafficking Assessment Review (STAR), a brief, objective, non-intrusive, quantitative decision-making system for determining a youth's amount of commercial sexual exploitation of children (CSEC) risk. The STAR is intended to screen and triage children's needs therefore, the STAR is typically not used to confirm a CSEC suspicion, but rather to assess whether or not a youth should be provided with a thorough CSEC assessment.

Office of the Attorney General (OAG): The CFSA social worker coordinates with the assigned assistant attorney general (AAG) from the Office of the Attorney General regarding legal matters involving a youth impacted or thought to be impacted by sex trafficking.

- j. **In FY20 and FY21, to date, how many CFSA staff members have been trained on human trafficking issues? How frequently do CFSA staff attend these trainings? What is covered in the training? What additional trainings are planned for the continuation of the public health emergency?**

In FY20, 141 CFSA and private agency staff completed human trafficking training. In FY21 to date, six have completed the training. This course is offered virtually and occurs one to three times each quarter. This cadence of course offerings has continued during the public health emergency. CFSA staff are required to complete this training annually as mandated by federal law. The six-hour Human Trafficking course focuses on recognizing the risk factors and conditions that place children and youth involved in the child welfare system at heightened risk for CSEC. By the end of the six-hour session, participants are able to demonstrate best practice

approaches in reducing the risk of victimization, engaging children and youth in screening, responding to CSEC indicators, and partnering to develop trauma-informed and strengths-based plans to promote safety and empowerment. The course is routinely updated to include the most current statistics and information.

- k. In 2020, more than one youth in CFSA's care testified that the agency has identified them as being survivors of commercial sexual exploitation or sex trafficking. How many youth have been sexually exploited or trafficked in another jurisdiction in FY20, in FY21, and during the public health emergency beginning March 11th, 2020 to date? Specify which jurisdictions the youth have been exploited in.**

CFSA does not aggregate data on youth who have been exploited or trafficked in other jurisdictions. The trafficking of youth in other jurisdictions is not a determining factor in the provision of services. We do follow federal data point requirements which track if sex trafficking was a reason for/occurring at removal, if it occurred before care and/or while youth was in care, whether law enforcement was contacted when sex trafficking is found (include date of contact), and what the placement type may have been when youth was trafficked.

- l. Describe how the Agency is coordinating with law enforcement and child welfare agencies in other jurisdictions when youth in foster care are suspected to be trafficked outside of the District. Identify the number of cases where CFSA engaged in such coordination in FY20 and FY21, to date.**

CFSA does not track the coordination of these types of cases in the aggregate. When there are youth suspected of being trafficked outside of the District, CFSA can utilize DC MPD to assist with coordinating with other law enforcement agencies which is within their purview. CFSA's focus is on the child, not the perpetrator. Investigations of the perpetrator who are not family members, is a criminal matter and outside of the scope of CFSA's authority, regardless of jurisdiction.

CFSA does not specifically track or report on the number of times the Agency coordinates with law enforcement or child welfare agencies in other jurisdictions *for the sole reason* of a youth in the District's care being trafficked outside of the District. CFSA does track how many referrals came from law enforcement directly (as the reporter) and how many required CFSA to notify law enforcement when they were not the reporter.

44. Provide an update on the placement options CFSA currently has to house youth who have been identified as or are at-risk of being trafficked.

a. How many of these placements currently exist and what is the capacity of each existing placement?

CFSA has no specific placements for youth who have who have been identified as or are at-risk of being trafficked. The Agency continues to work with community partners who have expertise in this area to provide support in the youth's existing foster home or congregate placement.

b. What plans does CFSA have to increase placement options?

CFSA continues to recruit resource parents who have the ability to meet the needs of youth in care. The Agency continues to recruit individuals who may be interested in working with this specific population. Lastly, programming has been approved for a few youth in order to meet their specialized needs.

c. Provide an update on CFSA's Placement Administration's efforts to identify resource families with special training as placement options for youth who have been identified or are at-risk of being trafficked.

Resource parent support workers, in conjunction with CWTA and the Office of Well-Being, continue to engage resource parents in discussion about the need for placements for these youth and to support and encourage resource parents to take the trainings provided. All resource parents are required to complete the 6-hour Foster Parent Training Regulation Act mandated in-service session, Specialized Populations, which includes a focus on supporting children and youth at high risk of being trafficked. When it is suspected youth are at-risk, or identified as having been trafficked, information is shared with both the youth and the resource parents on community partners they can access for support.

45. In FY20 and FY21, to date, how many children and youth under the care or supervision of the state has CFSA identified as being sex trafficked or at-risk of being sex trafficked?

Fiscal Year	Foster Care	In-Home	Total # of Children
FY20	8	6	14
FY21	3	2	5

46. What efforts are CFSA making to prevent youth under the care or supervision of the state (including in foster care) from being sex trafficked or commercially and sexually exploited?

- a. Has CFSA contracted with any community-based service providers to offer services to survivors of child sex trafficking and children at risk of being sex trafficked? Identify the providers that CFSA has and plans to contract with as well as the services they offer.**

CFSA contracts with Courtney's House to provide trauma recovery services to survivors of child sex trafficking and children at risk of being sex trafficked. The contract is designed to support youth who have an active case with CFSA. Courtney's House's Survivor Hotline provides 24-hour crisis intervention services; and its drop-in center provides a safe environment for youth, support groups, workshops, and other therapeutic activities.

CFSA also contracts with FAIR Girls to provide support services to survivors of child sex trafficking and children at risk of being sex trafficked. FAIR Girls provides 24-hour crisis intervention services through its hotline, and it has a survivor support center. CFSA's contract with FAIR Girls is a preventive grant and is designed to support youth who are not in foster care.

- b. What services can CFSA provide to parents, guardians and caregivers who want assistance addressing a child's risk for sex-trafficking?**

Courtney's House provides support groups to parents, guardians and caregivers who want assistance addressing a child's risk for sex-trafficking. Courtney's House offers tips for parents, guardians, caregivers and children on what to look for and how to prevent sex trafficking.

FAIR Girls provides supportive case management and educational services to parents and guardians who want assistance addressing their child's risk for sex-trafficking. This support includes tips for parents, guardians, and children on what to look for and how to prevent sex trafficking.

- c. Provide an update on how CFSA collaborated with DCPS and DCPCS to raise students' awareness of the signs and risk factors of the commercial sexual exploitation in elementary, middle, and high schools?**

The Child Welfare Training Academy (CWTA) provides in-person training session to the District of Columbia Public School System, Office of the State Superintendent of Education, Department of Human Services, Department of Youth Rehabilitation Services, and any other youth serving agency that requests training. The online mandated reporter training is currently in the process of being updated to align with the new in-person training session. CFSA expects to launch the new online mandated reporter training site by July 2021.

47. CFSA has implemented a Multi-Disciplinary Team to review cases that have a trafficking component.

- a. List all MOAs, MOUs and statutes guide the agency's information sharing practices during these meetings? Have there been any changes in the past year?**

There have been no changes in the past year. Currently, there are no other MOAs or MOUs currently in affect for the Multi-Disciplinary Team. An MOA is in process with associated agencies and is under review for approval.

- b. List all memoranda of understanding (MOU) entered into by CFSA during FY20 and FY21, to date concerning the sharing of personal information of children who have been allegedly commercially sexually exploited, as well as any memoranda of understanding currently in force.**

CFSA and Court Social Services entered into an MOA in FY2018 regarding CFSA's use of the Sex-trafficking Assessment Review (STAR) assessment tool developed by Child Guidance Clinic. No other MOUs have been entered regarding sharing of personal information specific to this population.

Attachment Q47b, CFSA and CSSD Star Agreement.

48. Describe the involvement that CFSA has had in DC Superior Court's HOPE Court.

- a. How many cases did the Hope Court hear in FY20 and in FY21, to date?**

FY20, 15 youth in foster care were involved with HOPE Court. For FY21, two new admissions have occurred bringing the total to 17.

- b. What resources does CFSA need in order to effectively implement its role in the HOPE Court?**

The Mayor's budget will address all resource needs for CFSA.

Education

49. In FY20 and FY21 to date, provide the following information regarding foster youth school stability and continuity:

- a. How many children who were removed and entered foster care changed schools within 1 month of their removal? 3 months? 6 months? 1 year?**

Of the 163 compulsory school-aged youth (ages 5-18) who entered care during FY20, a total of nine children changed schools subsequent to their removal and entry to care:

- Three youth changed schools within one month of entering care
- Six youth changed schools within three months of entering care

- No youth changed schools within six months of entering care

Of the 34 compulsory school-aged youth (ages 5-18) who have entered care in FY21 to date, no children have changed schools subsequent to their removal and entry to care.

b. How many children who changed foster care placements changed schools within 1 month of the placement change? 3 months? 6 months? 1 year?

CFSA tracks its statistics on school changes of foster youth by academic year. Of the 502 children in foster care who were enrolled in pre-K-12th grade at the end of the 2019-2020 school year, 52 (10 percent) experienced a change of school during the academic year. Of the 52 youth who changed schools, seven youth (one percent) changed schools subsequent to a foster care placement change. The other 45 youth changed schools due to residential placement/detention, service needs, or child/guardian school choice or election.

c. How many foster children who were removed and entered foster care requested school stability transportation? How many children received the requested transportation? For each child who received school stability transportation, for how long was transportation provided? For each child who did not receive requested transportation, explain why not.

In FY20, there were 114 youth referred for school stability transportation. Of that total, 109 youth received the requested transportation. School stability transportation was provided for an average of 127 days.

Note: The public health emergency closed schools on March 13, 2020 which has reduced utilization of this service.

There were five youth who did not receive school stability transportation. The reasons are as follows:

- Two youth no longer required support because their social workers made alternative arrangements;
- One youth was transported to the school by the resource parent;
- One youth returned home and was transported by their parent; and
- One youth changed placements after the transportation referral was submitted, and transportation was not needed in the new placement.

d. How does the Agency inform foster parents and other stakeholders of the availability of school stability transportation?

CFSA's Office of Well Being (OWB) works with internal and external partners to ensure that transportation to support school stability is a priority. We offer informational forums to stakeholders and provide resource information. In addition, CFSA has a school transportation

tip sheet that reviews specific criteria to qualify for and receive school transportation. The tip sheet is available on the CFSA website for resource parents and other stakeholders.

Lastly, the transportation program specialist provides ongoing support to social workers and resource parents to notify them of changes, answer questions, or address concerns about transportation services.

e. How does the Agency train CFSA social workers regarding the availability of school stability transportation? How does it train private agency social workers regarding this topic?

In addition to the individual case outreach to social workers regarding school stability transportation services, OWB participates in staff and management team meetings to provide training about the resource.

The Agency also has education tip sheets and FAQs including one specifically on the school stability and school transportation services provided by the Agency. These tip sheets have been distributed at trainings and staff meetings and are accessible on the Education and Child Care Resources page on CFSA's website at <http://cfsa.dc.gov/page/educationresources>.

Attachments Q49(e), Education Stability; Q49(e), School Transportation; Q49(e), Monitoring Education; Q49(e), School Placement Decision Making Guide

f. Describe the agency's efforts in FY20 and FY21, to date, to improve school stability and continuity for youth who enter foster care or change foster care placements while in care.

In FY20, CFSA maintained its commitment to improve school stability and continuity for the youth in its care. CFSA continues to collaborate with the OSSE and various local education agencies to implement the provisions of the Every Student Succeeds Act (ESSA) that support foster youth's school stability. In addition, CFSA continued to participate in monthly meetings convened by the Prince George's County schools to review services for DC foster youth enrolled in its schools to promote better coordination of services and ensure legal compliance with ESSA school stability provisions.

50. Provide a copy of the agreements negotiated by CFSA with the Office of the State Superintendent (OSSE) and Prince George's County Public Schools (PGPCS) to access the standardized test scores of all District foster youth attending DC Public Schools (DCPS), Public Charter Schools (DCPCS) and PGPCS who are required to take standardized test. Indicate whether any of these agreements are new or have been altered since last year's performance oversight.

Attachments Q50, FY20 MOA CFSA-OSSE Data Sharing Agreement; and Q50, MOA CFSA-PGCPS.

CFSA attached its current data-sharing agreements with OSSE and the Prince George’s County Public Schools (PGCPS) for accessing the standardized test scores of all District foster youth attending DC Public Schools (DCPS), Public Charter Schools (DCPCS) and PGPCS who are required to take standardized tests. The standardized test scores provide an indicator of each youth’s reading and math proficiency levels.

CFSA updated its agreement with OSSE in the Fall of 2019 to better describe its current purpose and each agencies’ responsibilities with respect to the usage and security maintenance of the data exchanged. The data-sharing agreement with PGPCS remains the same.

- a. Provide any aggregate data the agency has available regarding the percentage of children in foster care who are at, above, or below grade level in math.**

CFSA does not have access to current math proficiency levels of its youth in foster care since school districts put a hold on administering standardized testing in Spring 2020 due to the pandemic.

- b. Provide any aggregate data the agency has available regarding the percentage of children in foster care who are at, above, or below grade level in reading.**

CFSA does not have access to current reading proficiency levels of its youth in foster care since school districts put a hold on administering standardized testing in Spring 2020 due to the pandemic.

51. How many youths received tutoring in FY20 and to date in FY21?

FY20	159
FY21	96

- a. What is the total funding in the FY21 budget for tutoring? Explain any variance from FY20?**

CFSA’s FY21 tutoring budget is \$500,000. There is no budget variance from FY20.

- b. Identify each tutoring provider and the amount allocated in FY21? Explain any variance from FY20?**

CFSA has a contract with A Plus Success, LLC, an in-home tutoring service for approximately \$500,000.

c. What have been the outcomes of youth in tutoring?

In March 2020, in response to the public health emergency, the agency converted its tutoring service from in-home service to virtual tutoring support. With this shift in service provision, the tutoring vendor no longer had the capacity to perform pre- and post-service assessments which are used measure student outcomes. As a result, the data below reflects the performance outcomes for the 51 students receiving tutoring services for whom we were able to administer a post-service assessment between October 2019 and March 2020.

Of the 51 youth receiving tutoring services, 16 youth received tutoring services for six months to a year prior to assessment. These 16 youth demonstrated the following outcomes:

Reading Skills Outcomes after 6 months – one year of tutoring service:

TOTAL = 75 percent have improved their reading skills

- 19 percent improved by a grade to two grade levels
- 31 percent improved by a ½ grade to a full grade level
- 25 percent improved by a ½ grade level or less

Math Skills Outcomes after 6 months – one year of tutoring service:

TOTAL = 69 percent have improved their math skills

- 13 percent improved by two grade levels or more
- 31 percent improved by a grade to two grade levels
- 19 percent improved by a ½ grade to full grade level
- Six percent improved by a ½ grade level or less

The 35 youth who had received tutoring services for a year or more, prior to assessment, revealed the following outcomes:

Reading Skills Outcomes after one year or more of tutoring service:

TOTAL = 81 percent have improved their reading skills

- 10 percent improved by two grade levels or more
- 31 percent improved by a grade to two grade levels
- 24 percent improved by a ½ grade to a full grade level
- 16 percent improved by a ½ grade level or less

Math Skills Outcomes after one year or more of tutoring service:

TOTAL = 81 percent have improved their math skills

- 16 percent improved by two grade levels or more
- 41 percent improved by a grade to two grade levels
- 20 percent improved by a ½ grade to a full grade level

- Four percent improved by a ½ grade level or less

52. How many youth received mentoring services in FY20 and to date in FY21?

FY20	64
FY21	44

a. What is the total funding in the FY21 budget for mentoring? Explain any variance from FY20?

CFSA's FY21 mentoring budget is \$289,030, which represents a \$210,270 budget reduction from FY20. The budget reduction is a result of program right-sizing for to accurately reflect capacity and utilization.

b. Identify each mentoring provider and the amount allocated in FY21? Explain any variance from FY20?

Best Kids, Inc. is CFSA's mentoring provider. The FY20 mentoring service contract was for \$500,000. The FY21 Best Kids budget was adjusted to \$289,030, to right size the program and accurately reflect capacity and utilization.

Additionally, beginning in FY21, to meet the identified needs for mentoring for older youth, CFSA established a partnership with the Department of Youth and Rehabilitation Services (DYRS) Credible Messenger Initiative. Credible Messengers are full-time employees whom DYRS has contracted to provide intensive transformative mentoring and life coaching to youth and their parents/adult caregivers. This takes the form of fostering daily intensive support through evening group sessions, support circles, crisis intervention, and 24-hour responsiveness. The program began January 25, 2021.

c. What have been the outcomes of youth in mentoring?

The following outcomes are based on 75 surveyed youth²⁸ and 58 surveyed parents.

Cognitive Functioning

- 69 percent of surveyed youth increased their scholastic competence.
- 83 percent of youth surveyed increased their educational expectations.

Emotional/Behavioral Functioning

- 69 percent of caregivers reported improvement in their foster child's openness.

²⁸ Surveyed youth include a combination of youth who were paired with mentors, and youth who participated in mentoring group activities provided by the vendor.

- 86 percent of caregivers reported improvements in their foster child's ability to accept help when needed.

Social Functioning

- 77 percent of surveyed youth reported increased feelings of being understood by their caregiver.

Risky Behaviors

- 98 percent of surveyed youth reported avoidance of at least one high-risk behavior (smoking, drinking, stealing, fighting).
- 79 percent of surveyed youth reported avoidance of all high-risk behaviors.

Involvement of caregiver

- The caregiver has an intricate role in the mentoring relationship. They provide support and encouragement to the youth as well as insight to the mentor with regards to issues and behaviors.

IN-HOME SERVICES & PREVENTION

In-Home Visiting

53. Provide a detailed update regarding the Agency's in-home cases:

a. The number of staff currently serving in-home cases;

A total of 45 social workers, 10 family support workers, 10 supervisory social workers, two program managers, and one administrator are assigned to In-Home cases.

b. The services and interventions available to families who have in-home cases and a list of vendors who directly provide these services and interventions;

See response to question 26(g).

c. The additional services and interventions that have been or will be made available in FY21 under the Family First Prevention Services Act and Families First DC;

See response to question 26(g) for services available under the Family First Prevention Services Act.

In addition to the services outlined in question 26(g), In-Home families can access the 10 Family Success Centers (FSCs) within their neighborhoods. The FSCs provide an array of services including:

- Parent Cafés
- Concrete Support (food, clothing, diapers)
- Family Fun Night
- Restorative Justice
- Physical and nutritional health (fitness, dance, health eating and wellness checks)
- Trauma and Community Violence groups
- Personal and Professional Development
- Work Readiness
- Books & Breakfast
- Nurturing Parenting Program
- Knowledge of Child Development
- Economic Development
- Fatherhood/Men/Boys sessions
- Creative Arts
- Mental Health and Wellness
- Housing support
- School assistance and support
- Black History Month celebration
- Family Trivia Night

d. For each specific service listed in (b), above, the number of families referred for services in FY20 and in FY21, to date;

See response to question 26(g) for all services available to In-Home Families.

The number of In-Home families referred to and served by the Healthy Families/Thriving Communities Collaboratives are shown in the tables below displaying FY20 and FY21 Services and Interventions.

FY20 Collaborative Activity. Families Referred and Served (In-Home Only):

Collaborative Agency	# of Families Referred from In-Home	# of Families Served from In-Home*
East River Family Strengthening Collaborative	29	22
Far Southeast Family Strengthening Collaborative	25	15
Georgia Avenue Family Support Collaborative	8	6
Edgewood/Brookland Family Support Collaborative	34	19
Collaborative Solutions for Communities	12	15
Total	108	77

*Notes:

1. East River Family Strengthening Collaborative Served count includes 9 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

2. Far Southeast Family Strengthening Collaborative Served count includes 2 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.
3. Georgia Avenue Family Support Collaborative Served count includes 2 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.
4. Edgewood/Brookland Family Support Collaborative Served count includes 2 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.
5. Collaborative Solutions for Communities Served count is higher than Families Referred because 3 cases from FY19 rolled over to FY20 and are included in the FY20 Families Served calculation.

FY21 Q1 Collaborative Activity. Families Referred and Served (In-Home Only):

Collaborative Agency	# of Families Referred from In-Home	# of Families Served from In-Home*
East River Family Strengthening Collaborative	3	2
Far Southeast Family Strengthening Collaborative	3	1
Georgia Avenue Family Support Collaborative	2	1
Edgewood/Brookland Family Support Collaborative	4	2
Collaborative Solutions for Communities	4	4
Total	16	10

*Notes: Collaboratives data does not include any rollover families referred from In-Home in FY20. Teaming case types were removed from the Collaboratives contract in FY20.

e. The total number of families with new in-home cases in FY20 and in FY21, to date, by type of allegation;

Fiscal Year	Abuse	Child Fatality	Neglect	Sex Trafficking	Sexual Abuse	Total Cases Assigned to In-Home Units
FY20	109	5	357	4	19	494
FY21	26	0	88	0	7	121

Note: This report includes all new and re-opened cases transferred from CPS to In-Home Units A2/D2 during the reporting period.

- f. **The number of in-home cases closed in FY20 and in FY21, to date, broken down by reason for closure;**

Closure Reason	FY20	FY21
Adoption	1	0
Child aged out	2	0
Child Welfare services not needed	256	70
Client's failure to cooperate	10	0
Client's Request	3	0
Completion of Treatment Plan	61	19
Court Action	5	1
Death of Client	0	1
Guardianship Disruption	1	0
Moved out of state	16	4
Other	17	3
Services to be given by others	10	2
Services/Service Plan Completed	81	23
Total Cases Closed	463	123

- g. **Provide any evaluations or assessments that have been conducted to assess the effectiveness of its efforts with families with in-home cases. Describe what efforts the agency is making to assess the effectiveness of its efforts with families with in home cases; including the timelines for any evaluation(s), the methods that will be used, and an explanation of the types of data that will be collected as part of the evaluation process.**

CFSA uses the Quality Service Review (QSR) process to assess the effectiveness of practice with families receiving either In-Home or Out-of-Home services. The QSR is a case-based qualitative review process that requires interviews with all the key people familiar with the child and/or family whose case is under review. Using a structured protocol, trained QSR reviewers synthesize the information gathered and rate how well the child is functioning and how well the system is performing to support the child, family, and foster family (as applicable). Reviewers provide direct feedback to social workers and supervisors as well as a written summary of findings.

As part of FY21 evaluation and continuous quality improvement (CQI) activities in alignment with the Family First Prevention Services Act, the Community Partnerships' Evaluation and Data Analytics (EDA) team will be working closely with the In-Home Administration and the Agency at large to assess key factors contributing to the overall effectiveness of the MI model for prevention-eligible (candidate) families, including families receiving In-Home services.

CFSA's In-Home supervisory staff, and supervisory staff across the Agency, will be responsible for conducting quarterly reviews of the use of MI in case practice to ensure fidelity to the model. Outcome measures are in the process of being refined and will continue to include reports of maltreatment and entries into foster care following the provision of services.

Family First Prevention Services Act

54. Explain any budgetary changes that the agency made in FY20 and FY21 in anticipation of funding from the Family First Prevention Services Act. How did CFSA offset any loss in FY21?

In July 2020, CFSA received federal approval of its Title IV-E Prevention Plan Amendment to include Motivational Interviewing (MI) as a federally reimbursable prevention service, as authorized under the Family First Prevention Services Act. From July through the end of calendar year 2020, CFSA developed the cost allocation and claiming framework necessary to support the drawdown of federal funding. Beginning in the 2nd fiscal quarter of FY21, CFSA will be able to draw down federal revenue Title IV-E prevention funding for this activity.

In terms of the CFSA budget, there was no change in the FY20 budget due to Family First Prevention Services Act provisions. The impact of these provisions on the FY21 budget will be determined based on actual claiming.

55. How many children, parents, and families did CFSA serve with the \$80,000 in federal dollars it received under Family First in FY21?

Through an MOU with DC Health, this funding was used to buy 40 slots in their Parents as Teachers program for our prevention candidate population.

56. Explain any budgetary changes that the agency made in FY20 and FY21 in anticipation of funding from the Family First Transition Act. How did CFSA offset any loss in FY21?

The most significant fiscal aspect of the Family First Transition Act (FFTA) for CFSA is the creation of the Federal Funding Certainty Grant. As a former Title IV-E "waiver state" (Title IV-E demonstration project, aka "waiver" ended in FY19), CFSA qualifies for a federal Funding Certainty Grant in FY21, which is intended to bridge potential financial gaps between the end of the waiver and the full implementation of Title IV-E prevention services under Family First Prevention Services Act. The grant is flexible in terms of allowable expenses and does not expire until FY26. CFSA is currently assessing the impact on and use of the Grant in its FY21 and FY22 budget, in relation to current Title IV-E claiming activities. The Grant had no impact on the FY20 CFSA budget.

The FFTA also included a one-time funding grant of \$593,681 to CFSA, to remain available through September 30, 2025. To date, CFSA has identified the following planned uses for this funding in its FY21 budget:

- \$200,000 for the Neighborhood Legal Services program;
- \$200,000 for the Rapid Housing Assistance program; and
- \$98,500 for the Parent Adolescent Support Services program (operated through an Intra-District agreement with the Department of Human Services).

57. How much, if any, did CFSA receive from the CARES Act?

As part of the CARES Act, CFSA received a one-time funding grant of \$48,985. These funds were used in FY20 to offset Agency supplies and equipment expenses related to the COVID-19 pandemic.

Families First DC

58. How many children and families did CFSA serve with the \$3.489 million enhancement to the Community Partnerships division for the D.C. Families First in FY21 to date?

To date, since their opening in October 2020, the ten Families First DC Family Success Centers have collectively served 2,789 families. 358 of these families have engaged in ongoing services with the Family Success Centers.

a. Provide the names of the organizations receiving grants to operate the Success Centers

Ward 7:

- Sasha Bruce - Clay Terrace
- North Capitol Collaborative - Mayfair/Paradise
- Life Deeds - Stoddert/37th Place
- East River Family Strengthening Collaborative - Benning Park/Benning Terrace and Benning/Minnesota

Ward 8:

- Smart from the Start - Woodland Terrace
- Community of Hope - Bellevue
- Far Southeast Family Strengthening Collaborative - Congress Heights
- A Wider Circle - Washington Highlands
- Martha's Table - Anacostia

**b. On what date were the \$250,000 grants issued to each of the Success Centers?
Was it in a lump sum or in installments?**

The FY20 grants were issued in December 2019 in a lump sum of \$280,000. An additional \$10,000 was issued to each grantee prior to the end of the fiscal year to support training and staff development.

The FY21 grants were issued in September 2020 in a lump sum total of \$325,000. Each grantee has an itemized budget against which expenses are tracked quarterly.

59. Since the opening of the Success Centers:

a. What types of services does CFSA provide at the Success Centers?

The Families First DC (FFDC) Family Success Centers (FSC) provide services, referrals, and programming centered around the five Strengthening Families Protective Factors (Concrete Support, Social Connection, Knowledge of Parenting, Social Emotional Competence, and Parental Resilience) and a set of core indicators (Education and Early Education, Housing, Employment, Physical and Nutritional Health, Behavioral and Mental Health).

Concrete Support

- Market/Food Distribution
- McKenna's Wagon
- Diaper Distribution for Children
- Diaper Distribution for Seniors
- Grocery Market with DCPS & DCPCS
- Computer Literacy
- Economic Development
- Civic and Leadership
- DC Legal Services
- Computer Literacy
- Produce Giveaway
- Grocery Bag Pick-up
- Breakfast and Lunch Pick-up
- Books and Breakfast
- Resident Support
- Housing Information
- Experiences and Relaxation
- Parent Support
- Work Readiness
- Financial Literacy/Education
- Food Pantry
- Clothing Distribution
- Baby and Me

- Mask Giveaway

Social & Emotional Competence

- Mental Triumphant
- Trauma and Community Violence
- Self-Care Summit
- Family Fitness & Wellness
- The Power of Positive Parenting
- DBH Wellness Series/Parent Support
- Experience in Relaxation
- Meditation
- Therapy Sessions
- Testimony Tuesdays
- Motivational Mondays
- Mental Health and Wellness

Knowledge of Parenting

- Virtual Learning Sessions for Parents
- Baby and Me
- Parent Café
- Nurturing Parents
- Parenting Class
- Tutoring/Supporting Children's Education
- School Assistance
- The Power of Positive Parenting
- Early Childhood Developmental Milestones
- Parent Support
- Learning Through Play
- Time for Intentionally Parenting
- Parents as Advocates
- Prenatal Education sessions

Parental Resilience

- Empowerment Groups (women, men, youth)
- Restorative Justice
- Baby and Me
- Personal and Professional Development
- Self-Care Summit
- The Men's Challenge: Living Together without Violence
- Parent Support
- Credit/Money Management
- Financial Literacy

Social Connection

- Let's Get Moving
- Jazz Funk Fitness
- Stepping into Fitness
- Yoga
- WeFitDC Workout
- Mindful Monday
- Sugar-in-Check Diabetes Wellness Program
- Baby and Me
- Testimony Tuesday
- Community Networking
- Cupcake Creatives
- Creative Arts
- Poetry
- Family Fun Night
- Toddler Playgroups
- Coffee and Conversation
- Dance
- Family Trivia Night
- Cosmetic Demo
- Black History Month Celebration
- Family Fitness
- Black History Gallery walk showcase
- Father, Men, Boys
- Virtual Trauma Support Group
- Parent Support

- b. Please explain the interagency relationship with other government agencies, such as CFSA and DHS, in the Success Centers.**

The FFDC have focused their interagency relationships on maximizing impact through the collaboration and integration of services in order for families to seamlessly know and access needed resources. The partnerships have included building trust and identifying key staff members, as well as interagency presentations and trainings, co-location, information and resource sharing.

Sister Agency Partnerships / Service Integration – Status	DCPL	DCPS	DBH	DHS	DOES	DPR
Relationship building and identification of key staff members and points of contact	X	X	X	X	X	X
Identification of direct Agency points of contact (POCs) for the Grantees	X	X	X	X		
Cross-presentations – agency to agency, sister-agency to grantees, grantees to sister-agencies	X	X	X	X	X	
Cross-trainings – core and critical information to build capacity and technical knowledge		X	X	X	X	
Co-location/Kiosk (Pop-Up) Tours and Discussions	X	X				X
On-going connections and meetings to stay abreast and up-to-date of agency happenings		X	X	X	X	
Knowledge/use of online community resource and referral tracking system		X				

FFDC has worked with a number of additional government agencies to conduct cross agency presentations, trainings, share information and resources, and identify key staff members. Agencies that have collaborated with FFDC to implement these activities include: the Department of Disability Services (DDS), the Office of the State Superintendent for Education (OSSE), DC Health Care Finance (DHCF), the Department on Energy and Environment (DDOE), the Department of Insurance, Securities, and Banking (DISB), DC Housing Authority (DCHA), Office of the Chief Technology Officer (OCTO), and the Deputy Mayor for Planning and Economic Development (DMPED, the Office of Victims Services and Justice Grants (OVSJG), the Office of Neighborhood Safety and Engagement (ONSE), Cure Violence, Thrive by Five, the Mayor’s Office of Community Relations and Services (MOCRS), and DC Women, Infants, and Children (DC WIC).

c. How many families have been served at each location?

Table 1 below provides the total number of families served at each FSC in FY21 Q1:

Table 1: Family Success Centers – Families Served by location – FY21 Q1

Ward	Family Success Center (FSC)	Grantee	Families Served ²⁹	Welcome Forms Completed ³⁰	Protective Factors Surveys Completed ³¹
7	Stoddert/37th FSC	Life Deeds	184	41	33
	Benning/Minnesota FSC	East River	49	49	14
	Benning Park/Benning Terrace FSC	East River	56	56	53
	Clay Terrace FSC	Sasha Bruce	185	8	30
	Mayfair/Paradise FSC	NCCI	308	43	43
8	Bellevue FSC	Community of Hope	38	26	15
	Woodland Terrace FSC	Smart from the Start	302	47	45
	Congress Heights FSC	Far Southeast	224	30	29
	Washington Highlands FSC	A Wider Circle	20	6	6
	Anacostia FSC	Martha's Table	523	0	23
Total			1,889	306	291

d. What services are located at each location? Which service is the most sought?

Each site is required to provide services relative to the Protective Factors and community identified needs (align with evaluation indicators - Education/Early Education, Housing/Homelessness, Employment, Physical and Nutritional Health, Behavioral and Mental Health).

Services and Programming include: Parent cafés, concrete support (food, clothing, diapers), family fun night, restorative justice, physical and nutritional health (fitness, dance, health eating

²⁹ Families served = all families who have access a Family Success Center for services. The number of families served in Q1 was calculated as follows: Reported number of families served in October 2020 + Reported number of families served in November 2020 + Reported number of families served in December 2020. Due to persisting compliance and data quality issues with the launch of the FSCs, some duplication may be present in the data. The FFDC team and Grantees are in the process of redesigning the Welcome Form and corresponding data reporting template in order to resolve those ongoing issues.

³⁰ Welcome Forms Completed = include all families who access a FSC for services and completed the welcome form (proxy for more substantive engagement).

³¹ Protective Factors Surveys Completed include all families who have accessed a FSC for services, completed the welcome form, and then went on to receive at least 12 hours of services (proxy for most substantive service engagement).

and wellness checks), trauma and community violence groups, personal and professional development, work readiness, books & breakfast, nurturing parenting program, knowledge of child development, economic development, fatherhood/men/boys sessions, creative arts, mental health and wellness, housing support, school assistance and support, Black History Month celebration, and family trivia night.

The full list of services currently offered at each location for the month of February 2021 are found in the attached documents. *Attachments, Q59(d), Ward 7 Program Calendar February 2021; and Q59(d), Ward 8, Program Calendar February 2021.*

Top Services Requested by Month across the FSCs:

- October 2020 - Employment, Parental Support, and Educational Support
- November 2020 - Food, Employment, and Youth Activities
- December 2020 - Food, Educational Workshop, and Employment Opportunities, Fatherhood Initiatives

Other Services Requested:

- Housing, Financial Management, Mentoring, Whole Family Enrichment, Caregiver Education, Parent/Child Interaction, and Children's Education

60. How is CFSA avoiding redundancy between the Success Centers and existing programs?

One of the main goals of Families First DC (FFDC) is to integrate services and help families navigate access to existing resources as opposed to duplicating or replicating services. The CFSA FFDC team is in constant communication and collaboration with the Family Success Centers (FSCs), as well as government and community-based organizations to ensure coordination.

61. How has CFSA measured the success of the Success Centers?

The Families First DC (FFDC) team developed a comprehensive Evaluation Framework for the ten Family Success Centers (FSCs) to monitor performance and ultimately evaluate the impact of the Families First DC initiative. This framework was designed during the Planning Phase, in collaboration with the FFDC grantee network, and included the definition of evaluation research questions, a theory of change, logic model, and questions for continuous quality improvements.

The three key research questions are:

- Can access to the FSCs strengthen families?
- Can access to the FSCs reduce the risk of child abuse and neglect?
- Can access to the FSC reduce the likelihood of foster care entry and re-entry?

The three key CQI questions are:

- How do we integrate services and supports for families in need?
- How do we effectively engage parents in service delivery and refinement?
- How do we offer FSC staff the support they need to serve families?

The FFDC Theory of Change (attached) showcases that while there are risk factors and challenges identified in the neighborhoods selected for FFDC FSC sites, access to family strengthening services will support families in acquiring the protective factors and resources needed to reduce risk factors for child abuse and neglect. FFDC is designed to a) facilitate families' access to these services and b) support families in navigating these services to successfully meet their needs. It is posited that the seamless connection to resources and the family-strengthening approach utilized by the FSCs will increase families' Protective Factors³²/reduce risk factors for child abuse and neglect – and ultimately increase family and community strength at-large.

The logic model (attached) encapsulates FFDC's core values and outlines the three tiers of the FFDC evaluation framework to assess 1) Family Level, 2) Program Level, and 3) Community Level impacts. The Family Level indicators are designed to address individual families' outcomes using the protective factors survey and satisfaction surveys. The Program Level indicators include assessing the reach, utilization, and impacts of the services and program offerings, as well as the compliance of the grantees. The Community Level indicators are longitudinal and the plan for evaluation will continue to be refined, as it will require 3 to 5 years to assess true impacts. For example, as a result of the FSCs, CFSA will evaluate whether communities improved in the areas of health, employment, housing, education, etc.

Attachment Q61, Family First DC Questions, Theory of Change and Logic Model.

Reporting and Documentation to Date:

Since the FSCs launched in October 2020, CFSA has measured the success of the FSCs across four performance management indicators:

- 1) Reach – The number of families served and referred to services.
- 2) Protective Factors Surveys - Pre-surveys have been administered and the post surveys will be collected and analyzed in March.
- 3) Satisfaction Surveys – Capturing families' satisfaction with programming and services.
- 4) Program & Self-Assessment Tool - Used by each FSC to assess their progress in the implementation of the Standards of Quality for Family Strengthening and Support (nationally adopted standards used as a blueprint for family strengthening and support programs to promote quality practice, peer learning, and mutual support).

³² The Protective Factors are research-based, evidence-informed and known to reduce the risk of child abuse and neglect.

In addition to the quantitative data, CFSA has captured the success of the Family Success Center through qualitative/anecdotal reports:

- Example #1: Through connections of the FSC, a father who was recently incarcerated received support to re-connect with his children. He enrolled in sessions at the site and is receiving job training. He's in the fatherhood support group and has transitioned in the community in a positive way.
- Example #2: Through connections of the FSC, a grandmother has received support for her daughter who's struggled with substance use, as well as educational support for her grandchildren. She has received referrals to assist with behavioral challenges for her granddaughter and joined her FSC's Community Advisory Council meetings to remain connected with others.

PLACEMENT AND PERMANENCY

Kinship Care

62. Describe CFSA's policies and practices with respect to allowing relatives to serve as guardians of children either through a kinship diversion or an "informal arrangement". a. Are there different policies and practices if an investigation has been completed or not? Explain. b. Are there different policies and practices if an investigation determines that the report of abuse and neglect was substantiated, unfounded, or inconclusive? Explain.

Attachment Q62, AI Diversion Investigations.

63. How many youths were placed through a kinship diversion in FY20 (provide the relevant timeframe) and FY21, to date?

a. How many youths were returned to the parent within three months, six months, and one year after the relative took custody of the youth (and/or the safety plan was signed)?

CFSA finalized the Diversion Policy in June 2020. Since July 2020, CFSA had 1 child who was diverted. There is a process in place to track this data monthly.

64. How many youths were placed through an "informal arrangement" in FY20 (provide the relevant timeframe) and FY21, to date?

a. How many youths were returned to the parent within three months, six months, and one year after the relative took custody of the youth (and/or the safety plan was signed)?

In finalizing the diversion policy, CFSA clarified its diversion practice and no longer refer to diversion as an informal arrangement.

65. With respect to safety plans that prevent children from entering care, describe:

a. How many individual safety plans were developed in FY20 and to date in FY21?

CFSA does not currently track the number of safety plans developed.

b. How does the Agency manage safety plans once a child has been rerouted to a home?

Safety plans clearly describe immediate threats to the child(ren) safety and details how these threats will be managed. It is the responsibility of the assigned social worker to establish intervals and timeframes for review of the plan. The safety plan may be resolved and closed if the family demonstrates the protective capacity to ensure the child's safety without it.

c. What kind of supports do individuals caring for children under a safety plan receive?

Families have access to any number of supports such as being linked to a Collaborative, DBH core service agency, emergency assistance to support concrete needs and housing assistance. See also response to Question 59a.

d. For children who remain long-term with the caregiver under the safety plan, what steps are taken to assist these caregivers with facilitating medical and education rights without a formal custody arrangement?

CFSA has a current contract with the Neighborhood Legal Services Program to provide these families with pro-bono legal assistance to help facilitate medical and educational rights.

e. For children who are placed with a kin caregiver under the safety plan, what are their options should they feel in the future that they need assistance?

As with any kin caregivers in the District, these families can access the Grandparent Caregivers Program, the Close Relative Caregiver Pilot Program, the Kinship Navigator Program, and emergency flex funds. In addition, they can access services through the Collaboratives and through other government agencies.

66. In FY20 and to date in FY21, how many children placed with resource families were returned to a kin placement after 6 months? After 9 months? After 12 months? After 18 months? After 2 years? After 3 years or more?

There were 279 children who entered or re-entered foster care during FY20 to FY21 Q1. Out of that number, 54 (19 percent) children were placed immediately with kin. Another 66 (24 percent) children were initially placed with a non-relative resource family and were

subsequently placed in a kin placement. The table below outlines the timeframes by which the ultimate placement with kin occurred.

Timeframe	Children
< 1 month	49
1-3 months	12
4-6 months	9
7-9 months	6
10-12 months	0

67. In each instance in FY20 and to date, in FY21, that a youth was transferred to a nonbiological “Kin” from a resource parent, identify the type of non-biological relationship between the kin caregiver and the youth.

The Agency has a broad definition of kin and does not track information in this way.

68. In FY20 and to date in FY21, provide the number of children transferred from a resource family placement to kin care whose placement disrupted and they returned to care.

Provide the following:

- a. How long the child was in the resource home; ex
- b. How many months after transfer to kin the placement disrupted;
- c. How many of those children were returned to the resource home they were in previously and
- d. How many were placed in a new home.

All kin care providers are licensed providers. CFSA does not currently track disruptions by kin versus non-kin provider.

69. In FY20 and FY21 to date, what percentage of youths living in foster care (both in Maryland and in DC) were in kinship foster care and what percentage were in foster homes without a relative caretaker?

FY20 Placement Type	# of Children	% of Children
Kinship Foster Homes	195	36%
Non-Kinship Foster Homes	347	64%
Total	542	100%

FY21 Placement Type	# of Children	% of Children
Kinship Foster Homes	173	33%
Non-Kinship Foster Homes	353	67%
Total	526	100%

a. How do these number compare to the national percentages?

CFSA had 28 percent of children placed in kinship homes. The national average is 32 percent.³³

b. How does CFSA account for the difference between the local and national percentages?

Many identified kin reside in Maryland and do not meet the Code of Maryland Regulations (COMAR) requirements for licensing. CFSA does not have authority to utilize waivers in Maryland as it does in the District.

Additionally, lack of affordable housing continues to be an issue for the families CFSA serves.

c. What efforts did CFSA make to increase the percentage of foster children placed with kin?

In addition to continuing to maintain two units who solely support the identification and licensing of kin, the following efforts were made to increase the percentage of kin:

- Continued analysis to outline and address barriers to kin;
- Continued collaboration across administrations;
- Provided training to partnering agency;
- Contingency planning with CPS;
- Concurrent kin planning with In-Home; and
- Permanency focused meetings for on-going cases

70. In FY21 to date, has CFSA encountered a lack of housing as an issue resulting in lower rates of kinship placements?

Yes.

71. What percentage of foster children does the agency project will be placed with kin by the end of FY21?

CFSA projects 32 percent of children will be placed with kin by the end of FY21.

³³ National Average 2018. <https://www.childwelfare.gov/pubPDFs/foster.pdf>

72. Describe the policies and procedures with respect to how the Agency decides:

- a. When kin may go through the expedited licensing process, and when they must go through the full licensing process?**

When a child enters foster care, CFSA seeks to find a kinship placement and to issue a temporary kinship license after assessing the home. Once a temporary kinship license is issued, the child can be placed and the full licensing process begins.

If kin are not identified during an investigation or there are safety or capacity concerns preventing immediate placement with identified kin, the kin are engaged, and asked to attend pre-service training and to begin full licensure process prior to placement.

- b. If adoption planning with a foster parent is in process, at what point does the agency stop searching for kin?**

CFSA believes that early identification of kin is crucial to child well-being and permanency planning. The Agency has a resource development specialist (RDS) assigned to search and engage kin for the first 30 days of a case.

After that time, the engagement of kin is the responsibility of the ongoing social worker as a part of their case planning with parents. The Agency asks parents about their familiar supports, and who they would want to care for their children if reunification does not occur. Nine months after entering care, there is an internal review to assess progress towards reunification, status of kin involvement, and how the child is doing in their current placement. There are situations where relatives present themselves “late” (more than 12 months after the child’s removal) and these are closely monitored, and decisions are made in the best interest of the child.

- c. How the relationship/attachment a child has with a non-relative placement is weighed when there is late-arriving kin?**

Every case is different, and a child’s bonding and attachment is always considered. In many cases, the Court will order an Interaction Study through the DBH Assessment Center. This assessment addresses the attachment, impact of separation from current caregiver, and impact of severing birth family connections.

73. Provide a detailed report on the Grandparent Caregiver Program, including:

- a. In FY20 and FY21 to date, how many families were and are in the program?**

FY20	521 Families
FY21	498 Families

- b. In FY20 and FY21, to date, how many children were and are served by the program?

FY20	823 Children
FY21	781 Children

- c. In FY20 and FY21, to date, what is the average benefit received?

FY	Average Monthly Payment
FY20	\$603
FY21	\$614

- d. In FY20 and FY21, to date, were any children or families on the waiting list? If so how many?

There are currently 53 families on the waitlist.

- e. In FY20 and FY21, were any families turned away from the program or removed from the program? If so, so many and for what reason?

Reason	FY20	FY21
Failure to Recertify	42	2
Aged Out	50	21
Waitlisted ³⁴	64	13
Total	156	36

74. Provide a detailed report on the Close Relative Caregiver program, including:

- a. In FY20 and FY21 to date, how many families were and are in the program?

FY20	15 Families
FY21	19 Families

³⁴ The waitlist is established to track interested families once the GCP budget is exhausted and new clients cannot be accepted. Once on the waitlist new clients can be enrolled as children age-out of the program, families fail to re-certify or the GCP receives additional funding.

- b. In FY20 and FY21, to date, how many children were and are served by the program?**

FY20	23 Children
FY21	29 Children

- c. In FY20 and FY21, to date, what is the average benefit received?**

	Average Monthly Payment
FY20	\$677
FY21	\$689

- d. In FY20 and FY21, to date, were any children or families on the waiting list? If so how many?**

There is no waiting list for the program.

- e. In FY20 and FY21, were any families turned away from the program or removed from the program? If so, so many and for what reason?**

Reason	FY20	FY21
Failure to Recertify	2	0
Aged Out	2	0
Total	4	0

CFSA's Partnership with NCCF

- 75. Has CFSA created or amended any procedures and policies to ensure parity between CFSA and NCCF?**

CFSA has not created or amended any policy to specifically address parity between the two agencies. CFSA promulgates policy to ensure consistent application of procedures for children/families regardless of where they receive services.

- 76. Does CFSA plan to create or amend any policies or procedures in FY21 in order to achieve parity between CFSA and NCCF?**

There are no current policies or practice under review for this purpose. Should an issue arise that requires a change in policy, or should a process need revision, CFSA will follow the established process of working with the stakeholders to review and develop content, which is then vetted on several levels before final approval by the Director.

77. How many Maryland foster families connected to NCCF are currently licensed to provide placement to DC children and youth?

NCCF has 238 homes licensed and is able to provide placement for DC children.

78. Describe status of collaboration with NCCF, including the following information:

a. How many children have been placed with NCCF in FY20 and in FY21 to date?

Fiscal Year	Total Unique Children Placed with NCCF
FY20	451
FY21	299

Note: Universe includes children placed with NCCF at least one day during the FY.

b. How do NCCF and CFSA ensure consistent practices between CFSA and NCCF?

CFSA and NCCF placement teams continue to have weekly partnership calls to (1) assess the placement array and availability of resource homes, (2) assess placement needs and challenges among foster parents and youth, (3) update and/or develop placement protocols, (4) facilitate clinical staffing for youth who exhibit needs beyond the foster home setting, as well as, (5) participate in daily information sharing and problem solving. These calls include the Deputy Director for Programs Operations, Contract Monitoring, OAG, and NCCF leadership. Further, to ensure consistent practices between the agencies, NCCF and CFSA collaborate monthly for joint placement meetings).

c. How do CFSA and NCCF coordinate placement?

See response to question 78(b).

d. What are the performance metrics CFSA applies to NCCF? e. How does CFSA monitor NCCF's performance?

The *LaShawn* metrics and contract provisions are used to measure performance for all contracted placements.

The Contracts Monitoring Division is responsible for assessing the delivery of contract requirements that includes personnel matters, placement capacity, licensing and training of resource parents, delivery of case management services to children, youth, and families, follow up with unusual incidents and child protection services reports, COMAR compliance maintenance, and address resource parent and community provider concerns.

In addition, CFSA assesses NCCF on compliance with *LaShawn* metrics. The Performance Accountability and Quality Improvement Administration (PAQIA) conducts Quality Services

Reviews assessing a sample of cases through review of case documentation and interviews with multiple stakeholders involved in cases. Quality Service Review (QSR) findings inform CFSA and NCCF of challenges and strengths to support individual and systemic case practice.

e. How has NCCF performed in FY20 and in FY21 to date?

NCCF's Quality Improvement team has streamlined communication between CFSA and NCCF increasing timeliness of data requests. A revised monthly reporting structure that captures programmatic data and trends has helped increase oversight and awareness of NCCF's performance.

NCCF social work caseload ratio improved during FY20 with ninety-six percent of NCCF social workers' caseloads in compliance with the social worker-to-case ratios of 10:1. Personnel reviews demonstrated that NCCF continues to hire a competent workforce that can meet the needs of the child welfare population. Personnel record audits were found in compliance with background clearance, licensure, and training requirements.

Child case record audits demonstrated NCCF's strengths in addressing safety issues and providing justification for permanency goals. The agency continues to need to place greater emphasis on barriers to permanency. NCCF facilitates Permanency Goal Review Meetings (PGRM) to address permanency barriers, however, in February 2021, NCCF will begin to participate in PGRMs facilitated by CFSA to ensure consistency.

NCCF established two new teams to increase emphasis on minimizing placement disruptions, achieving permanency for youth and identifying potential kinship placements and lifelong supports for youth in care. NCCF created a team of kin network specialists to provide intensive and exhaustive search and engagement of relatives for youth who are in care and have no viable permanency options with the goal to identify potential placements and to identify potential family supports for youth.

NCCF implemented the Foster Parent Coach Academy in FY20. Foster parent coaches provide one-on-one support to foster parents with a goal of maintaining placement stability. Foster Parent Coaches are assigned to: (1) newly licensed foster parent after they received their first placement; (2) foster parent caring for a child that has experienced 2 or more placement disruptions within a 6-month period; (3) foster parent who requested 2 or more foster child replacements within a 6-month period; (4) foster home with child/youth at risk of placement disruption; (5) foster home license at risk of suspension; and (6) foster parent who received a score of D or below on their annual performance evaluation.

During FY20, NCCF was issued a corrective action plan to address late submission of quarterly expenditure reports. The issue has since been resolved. NCCF was issued a Level 1 Performance Improvement Plan (PIP) to address concerns related to respite placements. NCCF submitted action plans to address the concerns outlined in the PIP. The PIP remains in the finalization process to date.

79. Youth placed in foster homes contracted with NCCF in Maryland still, in many cases, come to DC for school and other services and activities.

- a. In FY20 and in FY21 to date, who was responsible for paying for transporting youth placed in Maryland?**

In FY20, CFSA and NCCF were responsible for paying for transportation for children in their care, including private transportation vendors.

Beginning in Fall 2020, CFSA became solely responsible for paying private transportation vendors through a centralized process.

- b. If there was a change, explain why the change was made.**

In FY20, CFSA centralized transportation services with its private provider partner, NCCF. A new transportation protocol was developed in which school transportation requests are sent to CFSA for processing. In FY21, CFSA assumed full responsibility of transportation costs.

- c. How many youths placed in NCCF Foster Homes were receiving transportation services that were funded by NCCF or CFSA in FY20 and in FY21 to date?**

In FY20, 98 unique youth received transportation services that were funded by NCCF and CFSA.

In FY21, to date, three unique youth received transportation services funded by CFSA.

- d. How much was spent on transporting youth in NCCF Foster Homes in FY20 and FY21, to date? Include the total amount spent as well as the average amount spent per youth.**

In FY20, CFSA spent \$999,475; and in FY21, CFSA spent \$5,090 transporting youth whether they were in the care of CFSA or NCCF.

80. What is CFSA's policy about investigating reports of abuse and neglect at foster homes managed by NCCF?

- a. Are there ever instances in which CFSA will receive a report of abuse and neglect and permit NCCF to investigate the issue and close the complaint? Explain.**

No, NCCF does not have investigative authority. If CFSA received a report of abuse and neglect in a Maryland foster home, CFSA makes a report to the appropriate County CPS division and they conduct the investigation per Maryland regulations.

b. Have any of these procedures changed during FY21 during the public health emergency as declared by Mayor Bowser on March 11, 2020?

All procedures have remained in place during the public health emergency.

Placements & Providers

81. Provide the following by age, gender, race, provider, location, daily rate and time in care during FY20 and FY21, to date:

- a. Total number of foster children and youth;
- b. Total number of foster children and youth living in foster homes;
- c. Total number of foster children and youth living in group homes;
- d. Total number of foster children and youth living in independent living programs;
- e. Total number of foster children and youth living in residential treatment centers; and
- f. Total number of foster children and youth in abscondence, and the length of time they have been in abscondence.

- ID/DD = Intellectually Disabled/Developmental Disability Facility
- D&E = Diagnostic and Emergency Facility
- ILP = Independent Living Program
- RTC = Residential Treatment Facility

FY20 Age	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
<1 Year	15	20	35	0	0	0	0	0	0	0	35
1	15	15	30	0	0	0	0	0	0	1	31
2	17	22	39	0	0	0	0	0	0	0	39
3	16	17	33	0	0	0	0	0	0	1	34
4	15	24	39	0	0	0	0	0	0	0	39
5	8	12	20	0	0	0	0	1	1	0	21
6	7	17	24	0	0	0	0	0	0	0	24
7	11	18	29	0	0	0	0	0	0	2	31
8	9	15	24	0	0	0	0	0	0	0	24
9	10	16	26	0	0	0	0	1	1	0	27
10	7	15	22	0	0	0	0	0	0	0	22
11	10	12	22	0	0	0	0	3	3	1	26
12	10	12	22	0	0	1	0	1	2	0	24

FY20 Age	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
13	3	11	14	0	1	3	0	3	7	4	25
14	8	11	19	0	0	3	0	3	6	4	29
15	7	12	19	0	2	4	0	0	6	10	35
16	8	19	27	0	1	5	0	6	12	8	47
17	8	19	27	0	0	11	0	1	12	14	53
18	4	22	26	0	0	6	0	0	6	11	43
19	4	19	23	1	0	3	6	0	10	12	45
20	3	19	22	1	0	5	2	1	9	8	39
Total³⁵	195	347	542	2	4	41	8	20	75	76	693

FY20 Gender	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
Female	82	178	260	0	4	16	7	10	37	41	338
Male	113	169	282	2	0	25	1	10	38	35	355
Total³⁶	195	347	542	2	4	41	8	20	75	76	693

FY20 Race	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
Asian	0	4	4	0	0	0	0	0	0	0	4
Black, African American	178	262	440	1	4	32	8	15	60	65	565
Hispanic	13	69	82	1	0	8	0	5	14	11	107
White	0	1	1	0	0	0	0	0	0	0	1
Not Reported	4	11	15	0	0	1	0	0	1	0	16
Total³⁷	195	347	542	2	4	41	8	20	75	76	693

³⁵ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

³⁶ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

³⁷ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

FY20 Race	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
FY20 Provider Location	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
DC	96	132	228	1	4	38	8	1	52	66	346
MD	98	198	296	1	0	3	0	4	8	5	309
VA	0	9	9	0	0	0	0	4	4	2	15
Other States	1	8	9	0	0	0	0	11	11	3	23
Total³⁸	195	347	542	2	4	41	8	20	75	76	693

FY20 Time in Care	Family-Based Homes			Congregate Care Settings						Other	Total
	Kin	Foste	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
0 - 3 Months	13	22	35	0	0	5	0	0	5	7	47
4 - 6 Months	17	26	43	0	1	3	0	1	5	7	55
7 - 12 Months	37	38	75	0	1	5	0	1	7	6	88
13 - 24 Months	67	108	175	0	2	8	1	8	19	18	212
25+ Months	61	153	214	2	0	20	7	10	39	38	291
Total³⁹	195	347	542	2	4	41	8	20	75	76	693

FY20 (As of September 30, 2020) Time in Abscondence	Total Children
0 - 3 Months	23
4 - 6 Months	5
7 - 12 Months	7
13 - 24 Months	1
25+ Months	1
Others	0

³⁸ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

³⁹ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

FY20 (As of September 30, 2020) Time in Abscondence	Total Children
Total	37

Note: Other include Abscondence, College/Vocational, Correctional Facilities, Developmentally Disabled, Hospitals, Not in Legal Placement, COVID-19 Placement/Under 21 (Non-Paid) and Juvenile Foster Care (Non-Paid)

****** Non-Kinship Foster Family includes Pre-Adoptive, OTI, Therapeutic, Traditional and Traditional Foster Family Emergency.

FY21 Age	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster Home	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
<1 Year	13	19	32	0	0	0	0	0	0	1	33
1	15	20	35	0	0	0	0	0	0	0	35
2	13	18	31	0	0	0	0	0	0	0	31
3	17	15	32	0	0	0	0	0	0	1	33
4	11	18	29	0	0	0	0	0	0	0	29
5	10	16	26	0	0	0	0	1	1	0	27
6	8	20	28	0	0	0	0	0	0	0	28
7	7	17	24	0	0	0	0	0	0	1	25
8	6	15	21	0	0	0	0	0	0	1	22
9	10	17	27	0	0	0	0	1	1	1	29
10	8	12	20	0	0	0	0	0	0	0	20
11	8	13	21	0	0	0	0	1	1	0	22
12	7	17	24	0	0	2	0	1	3	1	28
13	2	12	14	0	0	3	0	0	3	2	19
14	8	12	20	0	0	6	0	5	11	3	34
15	7	13	20	0	0	3	0	0	3	4	27
16	9	19	28	1	0	6	0	6	13	6	47
17	5	15	20	0	0	13	0	5	18	10	48
18	3	27	30	0	0	5	0	0	5	12	47
19	3	24	27	1	0	2	5	0	8	8	43
20	3	14	17	1	0	5	4	1	11	10	38
21	0	0	0	0	0	1	0	0	1	1	2
Total⁴⁰	173	353	526	3	0	46	9	21	79	62	667

⁴⁰ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

FY21 Gender	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
Female	70	182	252	0	0	20	8	13	41	29	322
Male	103	171	274	3	0	26	1	8	38	33	345
Total⁴¹	173	353	526	3	0	46	9	21	79	62	667

FY21 Race	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
Asian	0	4	4	0	0	0	0	0	0	0	4
Black or African American	153	264	417	2	0	39	8	16	65	52	534
Hispanic	15	64	79	1	0	6	1	5	13	10	102
White	0	1	1	0	0	0	0	0	0	0	1
Not Reported	5	20	25	0	0	1	0	0	1	0	26
Total⁴²	173	353	526	3	0	46	9	21	79	62	667

FY21 Provider Location	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster	Sub-total	ID/DD	D&E	Group Home	ILP	RTC	Sub-total		
DC	88	135	223	2	0	42	9	1	54	55	332
MD	84	209	293	1	0	4	0	3	8	5	306
VA	0	4	4	0	0	0	0	3	3	1	8
Other States	1	5	6	0	0	0	0	14	14	1	21
Total⁴³	173	353	526	3	0	46	9	21	79	62	667

FY21 Time in Care	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster	Subtotal	ID/DD	D&E	Group Homes	ILP	RTC	Total		
0 - 3 Months	13	47	60	0	0	4	0	0	4	3	67
4 - 6 Months	12	15	27	0	0	4	0	0	4	3	34

⁴¹Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

⁴²Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

⁴³ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

FY21 Time in Care	Family-Based Homes			Group Settings						Other	Total
	Kin	Foster	Subtotal	ID/DD	D&E	Group Homes	ILP	RTC	Total		
7 - 12 Months	39	35	74	0	0	5	0	2	7	4	85
13 - 24 Months	47	101	148	0	0	10	2	9	21	12	181
25+ Months	62	155	217	3	0	23	7	10	43	40	300
Total⁴⁴	173	353	526	3	0	46	9	21	79	62	667

Time in Abscondence (As of December 31, 2020)	Total Children
0 - 3 Months	12
4 - 6 Months	4
7 - 12 Months	7
13 - 24 Months	4
25+ Months	1
Total	28

82. How many placement changes did youth in CFSA care experience in FY20 and FY21, to date, including their age and reason for change?

FY20 Placement Episodes					
Age at end of FY	1	2	3-4	5+	Total
<1 Year	21	10	4	0	35
1	23	7	1	0	31
2	27	11	0	1	39
3	28	5	1	0	34
4	26	10	3	0	39
5	14	6	0	1	21
6	17	6	1	0	24
7	19	8	4	0	31
8	15	6	3	0	24
9	18	5	1	3	27
10	14	5	3	0	22
11	19	5	2	0	26
12	13	5	4	2	24
13	9	5	5	6	25
14	13	5	6	5	29

⁴⁴ Due to the pandemic, 27 youth age 21+ chose to remain in foster care. CFSA's information system is not set up to capture data for youth in extended foster care. CFSA is tracking all applicable data for this population manually. The 21+ population are included in the questions related to education, vocation, and housing for older youth.

FY20 Placement Episodes					
Age at end of FY	1	2	3-4	5+	Total
15	9	9	7	10	35
16	19	9	7	12	47
17	21	17	8	7	53
18	22	10	7	4	43
19	28	7	8	2	45
20	22	11	6	0	39
Total	397	162	81	53	693
Percentage	57%	23%	12%	8%	100%

FY21 Placement Episodes					
Age at end of FY	1	2	3-4	5+	Total
<1 Year	33	0	0	0	33
1	34	1	0	0	35
2	29	1	1	0	31
3	28	4	1	0	33
4	29	0	0	0	29
5	22	5	0	0	27
6	25	3	0	0	28
7	23	0	2	0	25
8	16	4	2	0	22
9	27	1	1	0	29
10	19	1	0	0	20
11	19	3	0	0	22
12	21	4	3	0	28
13	14	4	0	1	19
14	29	4	1	0	34
15	18	5	4	0	27
16	29	8	9	1	47
17	37	11	0	0	48
18	40	4	3	0	47
19	38	4	1	0	43
20	35	2	1	0	38
21	2	0	0	0	2
Total	567	69	29	2	667
Percentage	85%	10%	4%	30%	100%

Notes: 1. The universe of this report is all children who were in placement on the last day of Fiscal Year. 2. Number of placement episodes is calculated between Start of Fiscal Year or Date entered care whichever is later and the last day of Fiscal Year. 3. Placements starting and ending same day are not counted as placements. 4. Placement types of Hospital (Non-Paid), Abscondence, College and Respite Care are not included in the count of placements.

83. Regarding the availability of beds/placements for children and youth in foster care, provide the following for FY20 and FY21, to date:

a. The current number of foster home beds available in the District and in Maryland.

As of December 31, 2020	Total Number of Beds
District	385
Maryland	497
Total	882

b. The number of foster home beds that are currently vacant in the District and in Maryland.

As of December 31, 2020	Total Number of Vacant Beds
Foster Homes	215

This number fluctuates on a daily basis and includes beds that are unavailable for placement due to COMAR requirements, respite, vacations etc.

c. The current total number of group home beds in the District and in Maryland.

Jurisdiction	Group Homes Beds
District	61
Maryland	6
Total	67

As of 2/8/21.

d. The total number of group home beds that are currently vacant in the District and in Maryland.

Jurisdiction	Vacant Group Homes Beds
District	15
Maryland	3
Total	18

As of 2/8/21.

e. The current total number of independent living program beds in the District's foster care system.

There are no independent living programs in the District's foster care system.

- f. The number of independent living program beds that are currently vacant.

N/A.

- g. The current total number of teen parent program beds in the District's foster care system.

Fiscal Year	Number of Teen Program Beds
FY20	12
FY21	12

- h. The number of teen parent program beds that are currently vacant in the District and in Maryland.

There are currently three vacant beds.

- i. The total number of beds in the District's foster care system that do not fall into any of the above categories.

All available beds fall into the above categories.

84. Describe CFSA's placement matching process:

- a. Provide a list of the child-specific and foster parent-specific factors taken into consideration when:
- i. A child is initially removed from their home of origin.

When a child is initially separated, the following factors are taken into consideration:

Child-Specific Factors	Resource Parent-Specific Factors
Current school location	Location of the resource home
Birth family residential home/ward	Availability and capacity for placement
Proximity to family/lifelong connections	Ability to support/parent older teens
Siblings in care	Availability and capacity for placement, willingness to take sibling of children currently in placement
Medical/health/allergies/behavioral issues	Ability and willingness to support special needs and take child to multiple appointments
Age/Gender	Open to accepting all ages
Sexual/Gender Identity	Open to accepting all sexual/gender identities

ii. A child is moved from one foster home to another foster home.

The same matching factors outlined above are used to identify a new home with the additional knowledge of the child's strengths, behavior patterns, and any other needs. Where possible, the former and current resource parents have the opportunity to meet and share information regarding the child. There has been an increase in planning placements whenever possible in order to have a proper transition for the child/youth and the resource parents being further prepared.

iii. A child is moved from a congregate/group home setting to a foster home.

Moving from congregate/group care to a foster home generally indicates a positive move for a child. CFSA strives for all youth to be in family-based care whenever possible and appropriate for the needs of the youth. The same factors are considered for the initial matching process listed above.

b. Explain what steps CFSA is taking to ensure that the number of available beds in the District's foster care system are appropriately matched to the number of children in need of placement, and that vacant beds are appropriately utilized.

CFSA monitors bed utilization on a daily basis. This information is used to determine trends and predict needs. This is impacted by the numbers and needs of children who enter the system, which are subject to change. CFSA works closely with its partner agencies to match children with the best placements available through a joint placement matching process. The placement matching system continues to be utilized to ensure the best and most appropriate matches are made.

c. Describe the joint placement matching activities that NCCF and CFSA engaging during the placement matching process.

The placement matching process starts with the full universe of available homes and uses the aforementioned factors to match a child or youth to a placement. Once a match is confirmed, both CFSA and NCCF verify that the matching results are valid through direct confirmation with the resource parent. The agencies also provide additional information to the resource parents while asking questions to determine the best option for placement. CFSA and NCCF speak daily on placement needs and the placement management teams meet twice a month for a formal review of youth; referral processes; and information on any challenges/strengths recently discovered in the resource family array.

85. Regarding the retention and recruitment of foster parents:

- a. What is the agency's foster parent yearly retention rate in FY20, and FY21, to date?**

CFSA:

On October 1, 2019, CFSA had 164 licensed traditional/adopt foster homes. CFSA licensed 24 new foster homes between October 1, 2019 and September 30, 2020. Of those 188 homes, 145 remained licensed and 43 were closed, for a retention rate of 77 percent.

At the beginning of FY21 (October 1, 2020), there were 145 traditional foster homes. As of January 31, 2021, there were 149 licensed families. Thus far, CFSA has closed seven homes, and 142 homes remain licensed for a current retention rate of 95 percent.

NCCF:

On October 1, 2019, NCCF had 285 licensed traditional/adopt foster homes. NCCF licensed 62 new foster homes between October 1, 2019 and September 30, 2020. Of those 347 homes, 257 remained and 90 were closed, for a retention rate of 74 percent.

At the beginning of FY21, there were 257 traditional foster homes. As of January 31, 2021, there were 266 licensed families. Thus far, NCCF has closed 28 homes and 238 remain licensed for a current retention rate of 93 percent.

- b. What are the agency's recruitment targets for increasing the total number of foster homes in the District's foster care system (i) in general and (ii) geographically within the District? What strategies have been implemented to reach these targets?**

CFSA's priority continues to be to increase the overall number of foster homes within the District of Columbia, with an emphasis on increasing the number of homes within the communities of origin from which children were removed. CFSA's FY20 target was to create 40 new beds within our array of traditional foster homes. At the end of FY20, 24 new homes were licensed, and 33 beds were created for youth in foster care.

To date, our strategies have been a combination of the following:

- Collaborated with and facilitated four shared informational session with faith-based organizations such as DC127 and LGBTQ Churches.
- Presented at the Transgender Award Ceremony to emphasize the needs of transgender youth in foster care.
- Changed the monthly informational sessions from in-person to virtual.
- Facilitated eight virtual information sessions on WebEx platform.

- Prior to pandemic, the recruiters presented and tabled information at over 40 events in the community including Churches, DCPS, DMV, MPD, Civic Associations, AARP, Health Alliance, Retired Nurses, DC State Athletic Association, Rainbow Families, etc.
- Facilitated two virtual Family Match Nights for children with the goal of adoption.
- Conducted over 70 virtual “At-Home” consultations with prospective foster parents.
- Posted promotional information about upcoming informational and orientation sessions in 100 newsletters and/or community calendars within the District including the Mayor’s Office of Latino Affairs, LGBTQ and Volunteerism, Anacostia Council Committee, Georgia Avenue Collaborative, My Community Listserv, etc.

In October 2020, an Agency-wide Recruitment and Retention campaign was launched entitled REACH (Recruit, Educate, Advocate, Collaborate, and Help). REACH’s primary objective is to strengthen the recruitment process leading to licensing and retention of more resource homes. Additionally, REACH seeks to improve internal and external partnerships, ensure consistency and continuity of strategies and information, and eliminate roadblocks along the way.

Several strategies were developed and added to the REACH Plan to achieve the FY21 target of 40 beds, with the overarching focus in the following four areas:

- Refining recruitment and retention related activities;
- Increasing social and traditional media presence;
- Building greater team coordination and
- Recruiting Ambassadors

Attachment 85(b) Recruitment Plan.

- c. What percentage of current foster homes are located geographically within the District? What percentage of youth are placed geographically within the District?**

Foster Home Location	# of Licensed Homes	% of Overall Foster Homes	# of Foster Youth Placed	% of Foster Youth Placed
District	247	47%	332	50%

- d. What has been the agency's progress in identifying homes and placements that will provide an appropriate setting for teenagers? What have been the barriers? Did the Agency achieve its target for FY20? What are the agency’s targets for FY21?**

See chart below in question 85(g).

- e. What has been the agency's progress in identifying homes and placements that will provide an appropriate setting for pregnant and parenting youth? What have been the barriers? Did the Agency achieve its target for FY20? What are the agency's targets for FY21?

See chart below in question 85(g).

- f. What has been the agency's progress in identifying homes and placements that will provide an appropriate setting for children with special needs? What have been the barriers? Did the Agency achieve its target for FY20? What are the agency's targets for FY21?

See chart below in question 85(g).

- g. What has been the agency's progress in identifying homes and placements that will provide a safe and positive space for LGBTQ foster youth? What have been the barriers? Did the Agency achieve its target for FY20? What are the agency's targets for FY21?

d. teenagers	
Barriers: The primary barrier with recruiting for this population is the continuous belief that a teenager would not do well in their homes. CFSA and NCCF foster parent training program, New Generation PRIDE speaks specifically to the challenges of working with teens and provides additional resources for parents to support them.	
CFSA	<p>FY20 Targets: In FY20, 15 additional beds will be developed for teens. In FY20, seven out of the 35 beds developed were identified for teens.</p> <p>FY21 Targets: In FY21, 10 additional beds will be developed for teens. Thus far, two beds have been developed for teens.</p>
NCCF	<p>FY20 Targets: NCCF exceeded the FY20 goal of recruiting an additional 10 foster homes to serve teenagers. NCCF recruited and licensed a total of 10 foster homes, which have an interest in both teenagers and pregnant and parenting teen placements. In addition, 10 of NCCF's existing foster parents accepted teenager placements based on NCCF's education to our foster parents on their needs and effective strategies for fostering teens.</p> <p>FY21 Targets: NCCF will target 10 additional beds to serve teenagers in FY21.</p>
e. pregnant and parenting youth	
Barriers: Recruiting individual willing to support the mother and her child. In MD, main barriers to recruiting foster parents for pregnant and parenting youth is space in the home. Due to COMAR regulations, the parent and baby must sleep in separate bedrooms.	
CFSA	<p>FY20 Targets: In FY20, the recruitment team continued outreach and designed strategies to recruit resource parents for this population through its community outreach. We continue to see a decline in this population.</p> <p>FY21 Targets: In FY21, the recruitment team will continue to outreach and emphasize the need for resource parents to support this population of youth in foster care.</p>

NCCF	<p>FY20 Targets: In FY20, NCCF exceeded its target of five additional homes to serve pregnant and parenting youth. Ten of the homes recruited this year, which have been licensed, have an interest in both teenagers and pregnant and parenting teen placements. In addition, four of NCCF existing foster parents accepted teenage parent placements based on NCCF's education to our foster parents on their needs and effective strategies for fostering teenage parents. Two of NCCF professional foster parents served as an appropriate setting for two teenage parent who presents with high risk behaviors</p> <p>FY21 Targets: NCCF will assess the bed capacity needs for pregnant and parenting youth and continue to recruit for this population.</p>
<p>f. children with special needs</p> <p>Barriers: Barriers include no desire to serve this population, lack of time to devote to the care these children need due to demanding schedules, and the perceived inconvenience of using in-home nursing and other associated services.</p>	
CFSA	<p>FY20 Target: In FY20, the recruitment teams continued to target, outreach, and partner with groups and organizations that serve this population of children, including Children's Hospital, National Alliance on Mental Illness, Psychiatric Institute of Washington DC, DC Chapter of Retired Nurses, and other organizations serving this population. The team also profiled this population of children on various adoption sites, frequently in the newsletter, and hosted a virtual "Family Match Night" exclusively for medically fragile children. These efforts have resulted in two homes out of the 24 created in FY20 for this population.</p> <p>FY21 Targets: In FY21, similar efforts will continue to target organizations who serve this population.</p>
NCCF	<p>FY20 Target: In FY20, NCCF met its goal to assess the training needs of foster parents serving 14 children with special needs and provide additional trainings centered around special needs. NCCF was available to provide one-on-one training support to foster parents upon request, based on their needs.</p> <p>FY21 Targets: NCCF will provide information about this population in our electronic newsletter and in social media postings to heighten awareness and encourage more foster parents to accept these placements. NCCF will continue to target professional organizations that have medical professionals as recruitment sources.</p>
<p>g. LGBTQ foster youth</p> <p>Barriers: Ongoing barriers include past discrimination and stereotype experienced by this population and religious conflicts and beliefs.</p>	
CFSA	<p>FY20 Targets: In FY20, maintaining and increasing the pool of resource parents for this population continued to be a priority, especially for transgender youth. Training on understanding and working with LGBTQ youth and a new policy for gender expression among youth was offered to the entire pool of resource parents to increase awareness and encourage more placement. Six out of the 24 homes developed in FY20 were LGBT individuals and families and or LGBTQ allies willing to provide a temporary or permanent haven for this population.</p> <p>FY21 Targets: In FY21, the recruitment's team commitment to bed development for this population will continue. As the number of LGBTQ youth in foster care increases, CFSA is dedicated to ensuring that the strategies utilized are affirming and inclusive for increasing this resource pool. During FY21, CFSA's relationship with</p>

	LGBT partners, faith-based organizations, and CFSA's Ambassadors will help develop more homes for this population of youth.
NCCF	<p>FY20 Targets: NCCF met its FY20 goal to offer additional trainings to foster parents on the LGBTQ youth population.</p> <p>FY21 Targets: NCCF will continue to build upon its existing recruitment efforts to acquire foster parents who are willing to provide a safe and positive space for LGBTQ youth to live. NCCF will also continue to provide trainings on understanding and working with LGBTQ youth and adolescent sexuality.</p>

h. What percentage of current foster homes licensed by CFSA and NCCF have adults who have received trauma informed training?

One hundred percent of current foster homes licensed by CFSA and NCCF have adults who have received trauma informed training, which is embedded within current pre-service and in-service curricula. The sessions, Trauma-Informed Caregiving, were offered to resource parents twice in FY20 with 31 total participants. Trauma-informed practices and caregiving specific to the various populations of children CFSA serves were also integrated in the mandated Specialized Populations training session.

Additionally, NCCF offers a Trauma Training Series each quarter, which consists of training topics which include: Trauma 101, Understanding Trauma's Effects, Building A Safe Place for Children, Dealing with Feelings and Behaviors, and Connections and Healing. This training series is from the curriculum of the National Center for Child Traumatic Stress called *Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents*.

i. What percentage of current foster homes licensed by CFSA and NCCF have adults who speak Spanish and are culturally competent to care for Latinx children and youth? What percentage of Hispanic foster youth live in foster homes where the adults speak Spanish?

CFSA:

Five foster homes in our system have adults who speak Spanish and are culturally competent to care for Latinx children and youth. CFSA contracts with the Latin American Youth Center (LAYC) for placement of Spanish speaking youth within the District.

NCCF:

NCCF has seven adults who speak Spanish and are culturally competent to care for Latinx children and youth. NCCF has one Spanish speaking youth, who is bilingual. She is 17 years old and she is not placed in a Spanish speaking home due to her stability in her current placement since August 2018.

- j. **What are the Agency's recruitment targets for increasing the total number of foster homes where the adults speak Spanish and the other frequently spoken non-English languages amongst children in foster care? What have been the barriers? What strategies have been implemented to reach these targets for FY20? What are the Agency's targets for FY21?**

In FY20, Latinx children comprised approximately 16 percent of the District's foster care population. CFSA recognizes the importance of placing these children with families who share their language and cultural identity. To meet this population's needs, CFSA contracts with LAYC. There are also ongoing community-based outreach efforts to increase the pool of Spanish-speaking resource families.

The barriers in recruiting prospective resource families, have been to get them to start the licensing process, completing the licensing process with the required official documentation, and recruiting Spanish-speaking foster parents to diversify available foster homes.

In FY21, CFSA will continue to contract with LAYC and collaborate with community partners such as the Mayor's Office on Latino Affairs and Mary Center. Additionally, CFSA has updated its Fosterdckids.org website to include a Spanish version of information, and the upcoming paid social media advertisements include targeting Latinx individuals and families.

NCCF:

NCCF strategies to recruit Spanish speaking homes include: marketing materials in Spanish, advertisements with Hispanic families on them, reaching out to existing families who speak Spanish to share with their networks.

- k. **How may foster families closed their homes in FY20 and FY21, to date? What are the reasons given for closing their homes? If any reasons were because of COVID, how did CFSA assist?**

CFSA Home Closure Reason	FY20	FY21
Permanency	12	3
Clinical/Regulatory	5	1
Resource Parent Request	26	1
Total	43	5

NCCF Home Closure Reason	FY20	FY21
Permanency	9	8
Clinical/Regulatory	5	3
Resource Parent Request	35	8

NCCF Home Closure Reason	FY20	FY21
Total	49	19

- 86. During FY20, how many youths in out-of-home care stayed in a hotel while awaiting a licensed placement? FY21, to date? For each youth who stayed in a hotel, provide:**
- The age of the youth;
 - The length of the youth's stay in a hotel;
 - The efforts made to identify a licensed placement;
 - The type of placement the youth was moved to following his/her hotel stay;
 - Steps the agency took to provide supervision for the youth;
 - The factors that led to youth staying in hotels; and
 - Steps the agency has taken to ensure that no youth in out-of-home care will stay in a hotel during the remainder of FY21.

There were no reported youth staying in a hotel during FY20 or FY21 to date.

- 87. During FY20, how many youths in out-of-home care stayed overnight at CFSA's offices while awaiting a licensed placement? FY21, to date? For each youth who stayed at CFSA, provide:**
- The age of the youth;
 - The length of the youth's stay at CFSA's office; c. The efforts made to identify a licensed placement;
 - The type of placement the youth was in before staying at CFSA's offices and following the stay at CFSA's offices;
 - Steps the agency took to provide supervision for the youth;
 - The factors that led to youth staying in the CFSA office overnight; and
 - Steps the agency has taken to ensure that no youth in out-of-home care will stay in a CFSA office overnight during the remainder of FY21?

In FY20, 22 unique children and in FY21 to date, one unique child remained overnight at CFSA's offices for a total of 38 nights. One child, age nine, stayed for a total of 12 nights. Many placement opportunities for the child were identified; the child would travel then refuse to either get out of the car or dysregulated to the point where safety was such a concern that the child vocalized wanting to return to the Agency. All available District resources supported, yet, the decision was made to allow the child to return. The child ultimately was approved for PRTF and has completed the program and we report the child has successfully reunified with the mother. The three youngest who stayed at the Agency, ages two, three, and four months experienced a late initial separation from their birth family and while a CFSA resource home was willing after further consideration, the family cited COVID-19 as the reason they couldn't continue. The sibling group was transported back to the Agency and placement search continued. The goal was to keep all of them together and the family who stepped forward could only take them the following morning. Another child, age six, experienced distress to the point of significant dysregulation caused by initial separation from their caregiver., Therefore,

despite having and appropriate placement identified, the decision was made to have her return to the Agency. The child was successfully placed the following morning. Five other youth who remained at the Agency overnight refused available and appropriate entities for placement.

The efforts for each youth to identify a placement included contacting the pool of licensed resource homes, conversations with both the CPS and Permanency/OYE social worker when possible to identify an approved relative, researching and vetting kin, and contacting congregate care providers and/or an emergency shelter (as necessary). The matching tool in FACES has been essential and, despite youth who refuse, there has been a reduction in youth staying in the building due to unavailability of a licensed provider. Each youth who experienced an overnight stay at CFSA was monitored by CFSA staff to ensure the youth's safety.

The factors that led to youth who stayed at CFSA's offices overnight during FY20 and FY21

- Placement disruptions occurring late in the evening or early morning hours
- Sibling groups
- Apprehension around COVID-19
- Youth who present with significant mental health and behavioral issues and not having mental health resources such as sub-acute psychiatric beds and partial hospitalization programs
- Youth escorted to the building by resource parent/MPD
- Youth who have been offered placement and they refuse to leave the building

CFSA continues to provide and strengthen our provision of support to resource parents to enhance their capacity to parent all youth in care, including youth with extreme behaviors, to avoid youth disrupting and potentially staying overnight. The expansion of the placement array that occurred in FY20 has certainly supported fewer overnight stays at the Agency.

FY20 Overnight Stays			
Age of Youth ⁴⁵	Length of Time (in days)	Type of Placement Before Overnight	Type of Placement After Overnight
11	1	Resource Home	Resource Home
16	1	Sasha Bruce	Emergency Shelter
18	1	Birth Family	Biological Mother
13	2	Resource Home	SOAR Resource Home
16	1	Hospital/Initial Separation	Resource Home
15	1	Group Home	Resource Home
14	1	Group Home	Resource Home
14	3	Abscondence	Biological Mother
12	1	Sasha Bruce	SOAR Resource Home

⁴⁵ Overnight stays listed in the order in which they occurred.

FY20 Overnight Stays			
Age of Youth ⁴⁵	Length of Time (in days)	Type of Placement Before Overnight	Type of Placement After Overnight
9	12 ⁴⁶	Resource Home	Psychiatric Residential Treatment Facility
17	1	Abscondence	Abscondence
14	1	Abscondence	Resource Home
20	1	Biological Brother	Family Member
15	1	Boys Town	Youth Services Center
15	1	Resource Home	Abscondence
13	1	Resource Home	Resource Home
15	1	Abscondence	Resource Home
20	1	Biological Brother	Wayne Place
2	1	Birth Family/Initial Separation	Resource Home
3	1	Birth Family/Initial Separation	Resource Home
4 months	1	Birth Family/Initial Separation	Resource Home
19	1	Resource Family	SOAR Resource Home
16	1	SOY Resource Home	SOY Resource Home
FY 2021 Overnight Stays			
6	1	Birth Family/ Initial Separation	Resource Home

⁴⁶ The 12 nights were not consecutive.

88. During FY20, how many youths in out-of-home care stayed at Sasha Bruce shelter beds while awaiting a non-short-term placement? FY21 to date? For each youth, provide:
- The age of the youth;
 - A description of the type of placement;
 - The length of the youth's stay in a Sasha Bruce shelter bed; and

Sasha Bruce Stays		
Age*	FY20 Unique Children	FY21 Unique Children
11	1	0
12	7	0
13	5	2
14	14	0
15	9	5
16	10	3
17	4	0
Total	50	10

*Age is calculated as of the start of the fiscal year (October 1)

Length of Stay	FY20 Unique Children	FY21 Unique Children
0-2 days	8	1
3-5 days	11	4
6-10 days	10	3
11-20 days	12	2
21-30 days	15	1
31+ days	3	0
Total	50	10

Subsequent Placements					
FY	Foster Homes	Congregate Care	Other	No Subsequent Placements	Total Placement Episodes
FY20	27	12	22	4	65
FY21	6	1	4	0	11

Notes: Foster Homes include Kinship, OTI, Pre-Adoptive, Therapeutic, Traditional foster homes and Stabilization, Observation, Assessment and Respite (SOAR) homes. Congregate Care includes: diagnostic and emergency care, group home, independent living program, and residential treatment facilities. Other includes abscondence, hospital, and not in legal placement.

The efforts made to identify a non-short-term placement.

CFSA makes the same efforts for any youth requiring a placement, whether it be an initial entry or a re-placement. When a youth is placed in an emergency setting, the placement worker continues to work with the team to seek the best match across the range of placement options. Clinical work has increased between CFSA and Sasha Bruce as well, as they are tasked to truly observe, assess and provide recommendations from their perspective. This has allowed youth to leave as quickly as possible for their permanent placement entity.

89. How many youths separated from their parents at the border entered CFSA's care in FY20 and FY21, to date?

None

Standby Guardianship

90. What steps have CFSA taking to educate families about the right to designate a standby guardian?

In 2019, CFSA published an Administrative Issuance (AI) entitled Immigration Status of Clients, and an accompanying tip sheet regarding standby guardianship for immigrant families. These were posted on the CFSA [website](#), shared with staff and sent to external partner organizations.

Please note that for standby guardianship, the parent must designate the guardian and initiate the process. CFSA has no role in the standby guardian designation process if the family does not have an open CFSA case. CFSA only becomes involved when we receive a hotline call to report children alleged to be abused or neglected, or unattended. Once children are brought to the Agency's attention and are in need of care, we conduct "diligent search" to identify kin if the family has not made other arrangements already. In 2019, when the legislation was originally amended in anticipation of ICE raids causing immigrant families to be separated, community-based legal and advocacy organizations took the lead in conducting direct outreach and education to families potentially impacted. These community organizations are much better situated to support families because of the trusted relationships they have. CFSA, as an entity perceived as "taking children" from families, is not an effective messenger on this subject.

Attachments Q90, AI Immigration Status of Clients; and Attachment Q90, Immigration Tip Sheet for Families.

91. What, if any, changes have been made since March 11, 2020?

Since the amendment of the Act, CFSA drafted a second tip sheet more broadly applicable to all families. The tip sheet, along with the Administrative Issuance (AI), are posted on the CFSA [website](#). Both documents are in the process of being translated (Amharic, Chinese, French, Korean, Spanish, and Vietnamese) and will be posted on our website.

Information about the Standby Guardianship Amendment Act of 2020, with links to the CFSA AI and tip sheets, were announced in the CFSA Today and Fostering Connections newsletters in February 2021.

Attachment Q91, Standby Guardianship Tip Sheet.

Permanency

92. Provide the total number of youth, by age and gender, who in FY20 and FY21, to date, have a permanency goal of:

- a. Adoption;**
- b. Guardianship;**
- c. Custody;**
- d. Another Planned Permanent Living Arrangement (APPLA).**

FY20 Permanency Goal						
Age	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
0	5	0	0	30	0	35
1	12	0	0	19	0	31
2	14	0	0	25	0	39
3	6	0	1	27	0	34
4	15	0	1	23	0	39
5	6	0	1	14	0	21
6	11	0	0	13	0	24
7	13	1	0	17	0	31
8	9	0	4	11	0	24
9	10	0	3	14	0	27
10	8	0	3	11	0	22
11	9	0	6	11	0	26
12	11	0	6	7	0	24
13	6	0	3	16	0	25
14	5	1	10	13	0	29
15	4	2	11	18	0	35
16	10	4	13	19	1	47
17	6	7	19	21	0	53
18	6	12	18	7	0	43
19	2	28	13	2	0	45

FY20 Permanency Goal						
Age	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
20	2	33	4	0	0	39
Total	170	88	116	318	1	693

FY20 Permanency Goal						
Gender	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
Female	70	48	62	157	1	338
Male	100	40	54	161	0	355
Total	170	88	116	318	1	693

FY21 Permanency Goal						
Age	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
0	3	0	0	30	0	33
1	11	0	0	24	0	35
2	4	0	0	26	1	31
3	6	0	0	26	1	33
4	10	0	0	19	0	29
5	7	0	0	20	0	27
6	11	0	0	17	0	28
7	8	0	0	17	0	25
8	6	1	2	13	0	22
9	10	0	4	15	0	29
10	6	0	4	10	0	20
11	11	0	5	6	0	22
12	9	0	5	14	0	28
13	5	0	2	12	0	19
14	10	1	6	17	0	34
15	3	2	10	12	0	27
16	8	4	14	21	0	47
17	7	6	16	19	0	48
18	3	16	18	10	0	47
19	1	28	12	2	0	43
20	1	30	7	0	0	38
21	0	2	0	0	0	2

FY21 Permanency Goal						
Age	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
Total	140	90	105	330	2	667

FY21 Permanency Goal						
Gender	Adoption	APPLA	Guardianship	Reunification	No Goal	Total
Female	54	47	53	168	0	322
Male	86	43	52	162	2	345
Total	140	90	105	330	2	667

93. How many adoptions were finalized in FY20 and FY21, to date? What was the average length of time from filing of an adoption petition to finalization of such adoptions?

Fiscal Year	Number of Adoptions Finalized	Average Months to Finalize
FY20	98	10 Months
FY21	38	13 Months

94. How many guardianships were disrupted in FY20 and FY21, to date? Provide a breakdown of whether the permanency provider was kin or non-kin.

Fiscal Year	Total	Kin	Non-Kin
FY20	7	4	3
FY21	2	0	2

95. How many adoptions were disrupted in FY20 and FY21, to date? Provide a breakdown of whether the permanency provider was kin or non-kin.

Fiscal Year	Total	Kin	Non-Kin
FY20	1	0	1
FY21	0	0	0

OLDER YOUTH ISSUES

96. In FY20 and FY21, to date, provide the number of youth, by age, who are enrolled in youth development enrichment programming provided by CFSA through OYE.

Support and Enrichment Programming	FY20	FY21	Age Range
Education Units	121	94	14-23
Making Money Grow (MMG)	121	107	15-21
Rapid Housing	22	3	21-23
YVLifeSet	61	27	17-21

97. What positions in OYE specifically support youth exiting care who express housing needs?

CFSA does not have positions dedicated solely to addressing housing needs. CFSA continues to focus on permanency for all youth which relieves the need to focus on independent housing at age 21. It is the responsibility of the OYE, Permanency, NCCF, Children's Choice, and LAYC social workers to assess youth housing needs while they are in care. Housing is discussed in all Youth Transition Planning (YTP) meetings. In addition, the OYE Aftercare Services supervisor is responsible for Jump Start meetings and closely tracks those youth who have housing instability between the ages of 20.5 and 21.

c. When do these staff start working with youth on their housing needs?

Staff begin working with the youth on their housing needs as soon as housing is identified as a need, and during each Youth Transition Planning meeting (YTP), which happen every 90 days once youth turn age 18. YTPs are held every month for all youth in care ages 14 through 18. Housing is further explored at the 21 Jump Start review that is held when a youth turns age 20.5.

d. How many youth did this position(s) assist in FY20 and FY21, to date?

While no specific position(s) focus solely on housing, the following is an accounting of the number of youth with housing as an identified need in their YTP.

FY20	60
FY21	10

e. What other responsibilities do these positions have?

Case carrying social workers are responsible for case management and transition planning for all youth on their assigned caseload.

98. How many youths are currently in care between the ages of 13 and 20 (by age)? And by gender?

Age	Female	Male	Total Children
13	9	10	19
14	22	12	34
15	16	11	27
16	27	20	47
17	29	19	48
18	26	21	47
19	26	17	43
20	14	24	38
21	2	0	2
Total	171	134	305

99. How many youths remained in care past the age of 21 from March 11, 2020 to date?

There were 27 youth who remained in care past the age of 21 from March 11, 2020. Of those youth, three cases have since been closed by the court (one transitioned to an apartment; one transitioned to the Genesis program; and one transitioned to DDS). Currently, there are 24 youth over the age of 21 in care.

100. What is the number of youth in CFSA's care who are DYRS/juvenile justice system involved? Provide a breakdown by age and gender.

Dual-Jacketed Youth		
Age	Male	Female
14	0	1
15	0	1
16	2	1
17	3	3
18	1	2
Total	6	8

Education

101. Regarding youth in high school and GED programs, provide the following for the 2019-2020 school year and the 2020-2021 school year to date:

- a. The number of youth in foster care currently attending high school by grade (9th, 10th, 11th, 12th);

Grade	# of Youth School Year 2019-2020	# of Youth School Year 2020-2021
9 th	65	74
10 th	52	53
11 th	43	43
12 th	28	25
Total	188	195

- b. The number of youth in foster care who graduated high school in 2020;

Fiscal Year	# of youth who graduated
FY20	26

- c. The number of youth who received their GED;

Fiscal Year	# of youth who received their GED
FY20	1
FY21	1

- d. The number of youth who received graduation certificates;

Fiscal Year	# of youth who received graduation certificates
FY20	1
FY21	0

- e. The median grade point average for youth ages 15-21;

CFSA's data sharing agreements provides access to grade point average (GPA) information for DC wards enrolled in DCPS and PGCPs high schools. For the 2019-2020 school year, CFSA had

access to GPAs for 77 youth in grades 9-12 enrolled in DCPS and PGCPs schools as of the last day of the school year. The range of GPAs included a low of 0 to a high of 3.81, with an average GPA of 1.98 and a median GPA of 2.0.

For the first term of 2020-2021 school year, CFSA had access to the grade point averages (GPAs) for 82 youth in grades 9-12 enrolled in DCPS and PGCPs schools at the end of the first quarter. The range of GPAs included a low of 0 to a high of 4.00, with an average GPA of 1.90 and a median GPA of 1.94.

f. The number of youth who dropped out in FY20 and FY21 to date;

Grade	# of Youth in FY20	# of Youth in FY21
9	8	7
10	3	4
11	1	0
12	1	3
GED classes	8	5

g. The high school graduation rate for youth in foster care as of the end of the 2019-2020 school year, including an explanation of how this rate was calculated; and

School Year	Graduation Rate
2019-2020	69%

The high school graduation rate at the end of the academic year was calculated by dividing the number of youth who graduated from the 12th grade (26 and GED (one) and Certificate of completion (one) by the end of the school year by the number of foster youth who were in the 12th grade/GED program (39) at the beginning of the school year.

h. A list of schools attended by foster youth, by ward, and the number of youth in each school.

Attachment Q101(h), List of Schools Attended by Foster Youth.

102. Regarding vocational programs, provide the following for FY20 and FY21, to date:

a. The number of youth enrolled in vocational programs;

FY20	14
FY21	3

b. The names of vocational programs in which youth are enrolled;

Vocational Training Program Names	FY20 # of Youth Enrolled	FY21 # of Youth Enrolled
Salon Professional (Cosmetology)	1	1
Bennett Cosmetology	1	0
Aveda Institute	1	0
Community College Preparatory (HVAC)	1	0
Hair Academy II	1	0
UDCC/CNA	1	0
YEALP/DOES EMT	1	0
RCM of Washington (HHA)	1	0
CCP Plumbing	1	1
UDC EMT	1	0
SE Welder	0	0
Maya Angelou Cosmetology	1	0
UDCC/Medical Assistant	1	0
Youth Build PC (Construction)	2	0
Montgomery Community College (Electrician)	0	1
Total	14	3

c. The number of youth who successfully completed vocational programs;

Vocational Training Program Name	FY20 # of Successful completion
UDC-EMT	1
UDCC/CNA	1
Salon Professional	1
Hair Academy II	1
Total	4

- d. The number of youth who enrolled but failed to complete vocational programs;
and

Vocational Training Program Name	FY20 # of Youth failing to complete programs
Maya Angelou	1
Construction	1
Bennett Cosmetology	1 (due to COVID-19)
UDC-EMT	1 (due to COVID-19)
Total	4

- e. For youth who failed to complete vocational programs, what reasons were provided for not completing programs.

Reasons for Non-Completion	FY20 # of Youth	FY21 # of Youth
Became Pregnant	1	N/A
COVID-19 Related	2	N/A
Attendance Issues	1	N/A
Total	4	0

103. Regarding enrollment in 4-year college, provide:

- a. The number of youth who were enrolled at a 4-year college during the 2019-2020 academic year, broken down by year (freshman, sophomore, junior, and senior);

School Year	Freshman	Sophomore	Junior	Senior	Total
2019-2020	9	8	7	11	35

- b. The number of youth described in (a) who enrolled in summer classes during the summer of 2020, broken down by year (freshman, sophomore, junior, senior);

Term	Freshman	Sophomore	Junior	Senior	Total
Summer 2020	0	2	0	2	4

- c. The number of youth described in (a) who dropped out of college at any point prior to the start of the 2019-2020 academic year, broken down by last year (freshman, sophomore, junior, and senior), if any, completed;

School Year	Freshman	Sophomore	Junior	Senior	Total
2019-2020	8	1	1	0	10

- d. The number of youth who were enrolled at a 4-year college during the fall semester of the 2019-2020 academic year; and

School Year	Freshman	Sophomore	Junior	Senior	Total
2020	7	12	5	11	35

- e. The number of youth who received a bachelor's degree during or at the end of the 2019 2020 academic year.

School Year	Bachelor's Degree
2019-2020	4

104. What is CFSA's current college preparation programming? Has it changed since March 11, 2020?

Since March 11, 2020, CFSA enhanced educational opportunities for students during the pandemic by working to ensure youth were equipped with technology and DCPS learning packets for virtual distance learning. CFSA's educational specialists increased check-ins with youth and foster parents to help ensure youth were equipped for distance learning.

CFSA made concerted efforts to help keep youth engaged academically by hosting biweekly virtual Educational Kickback Power Hours; these events would have usually been held in person. These workshops provided assistance and support to youth in high school and college regarding distance learning, financial aid and scholarships, transitioning from high school to college, college admissions, financial literacy and college resources and connections. CFSA's educational specialists also kicked off a positive youth engagement workshop series aimed at recognizing and enhancing youth strengths, teambuilding building, opportunities for cultural experiences and promoting positive youth outcomes. Nothing has changed except that the agency will continue these virtual events throughout FY21.

105. Regarding college preparation and college attendance, provide the following for the 2019-2020 school year and the 2019-2020 school year to date:

a. The number of youth enrolled in graduate school;

School Year	Graduate Degree
2019-2020	2
2020-2021	3

b. The number of youth who received an associate degree, bachelor's degree, or master's degree; and

Fiscal Year	Associate Degree	Bachelor's Degree	Master's Degree
FY20	1	4	0
FY21	0	3	2

c. Number of youth who dropped out of college. If known, provide the reasons that youth did not stay in school and the highest level the youth completed.

FY20 Reason Youth Left College	# of Youth
Mental Health Issues	0
Employment/Vocational Programs	11
Parenting	2
Academic Probation/Dismissal	4
Housing Issues/Relocation	0
Judicial	2
Miscellaneous	1
Total	20

106. Regarding enrollment in 2-year college, provide:

- a. The number of youth who were enrolled in a 2-year college during the 2019-2020 academic year, broken down by year;**

FY20	# of Youth Enrolled in a two-year college
Freshman	11
Sophomore	2
Total	13

- b. The number of youth described in (a) who enrolled in summer classes during the summer of 2020;**

Fiscal Year	# of Youth enrolled in summer school
FY20	2

- c. The number of youth described in (a) who dropped out of college at any point prior to the start of the 2019-2020 academic year. How many of these students completed their first year;**

Fiscal Year	# of youth who completed their first year of college
FY20	7 (of the 13, 7 completed their first year)
FY21	N/A

- d. The number of youth who were enrolled at a 2-year college during the fall semester of the 2019-2020 academic year;**

School Year	# of youth enrolled in a two-year college
2019-2020	9

- e. The number of youth who received an associate degree during or at the end of the 2019-2020 academic year.**

School Year	# of youth received an associate degree
2019-2020	1

107. How many youth receive education support and services through the Department of Disability Services?

FY20	6
FY21	4

108. How many youths in FY20 and FY21 to date have participated in the Bank on DC financial literacy program? How many youths created matched saving accounts?

Fiscal Year	Financial Literacy Program	Match Savings Accounts
FY20	121	121
FY21	107	107

Employment

109. How many youths participated in OYE's subsidized employment program in FY20 and FY21, to date? Provide the employers with which CFSA partnered for this program, and the number of youth who took part in an internship with each provider.

Employer	FY20	FY21
Bennett Babies Child Development Center	1	0
Bread for the City	5	0
Covenant House Greater Washington	8	12
Health Services for Children with Special Needs	0	3
LPM/Facility Manager	0	3
Think of Us	7	2
TOTAL	21	20

110. Regarding youth employment and training, provide the following for FY20 and FY21, to date:

- a. How much funding (local and federal) is the agency spending on training and employment opportunities for foster youth?**

The following table is an accounting of the funding spent in FY20 and FY21 to date on training and employment opportunities for foster youth.

Fiscal Year	Local (Subsidized Employment Dollars)	Federal (CHAFEE Grant Dollars)
FY20	0	\$41,324
FY21	0	\$19,636

- b. The names of organizations receiving funding from the agency to provide employment training to foster youth, the amount of funding allocated to each organization, and the number of youth served by each organization.

FY20	# of Youth	Expenditures
Six Flags	1	\$47.00
PSI	1	\$52.00
Youth Reimbursement	1	\$149.00
Cap City	1	\$100.00
Payments Direct to Youth	19	\$40,976
Total	23	\$41,324

For FY21, due to the pandemic, other partners have not been engaged to provide employment training to foster youth to date.

FY21	# of Youth	Expenditures
Payments Direct to Youth	13	\$19,636
Total	13	\$19,636

- c. Number of youth who are age 21 and are employed or enrolled in a vocational program

Fiscal Year	Employed	Vocational Program
FY20	14	0
FY21	5	2

111. Regarding youth in foster care between the ages of 18 and 21, indicate the following for FY20 and FY21, to date:

- a. The number of youth between the ages of 18 and 21;

The number of youth between the ages of 18 and 21 on September 30, 2020 = 127

The number of youth between the ages of 18 and 21 on December 31, 2020 = 130

- b. The number of youth between the ages of 18 and 21 who are employed full-time and part-time;

Fiscal Year	Total Full-Time	Total Part-Time
FY20	10	77
FY21	4	9

- c. The types of jobs that have been obtained;

Job Type	FY20	FY21
Administrative	2	3
Security	1	1
Childcare	3	0
Construction	1	0
Retail	6	3

Job Type	FY20	FY21
Food Service	23	4
Customer Service	4	1
Entertainment	1	0
Housekeeping	0	1
Other	0	0
Total	46	13

- d. Of the youth ages 18 to 21 who are not employed, how many are currently attending high school? A GED program? College? A vocational program? None of these?

Of the 130 youth ages 18 to 21, 48 are in high school, 34 are in college, 1 is pursuing a GED, 14 are enrolled in a vocational/technical program and 12 are participating in an internship. There are 21 youth who are unemployed and not participating in an educational or vocational/technical program.

Status FY20	# of Youth
Enrolled in HS	48
Enrolled in College	34
Enrolled in GED	1
Enrolled in Vocational/Technical Program	14
Participating in Internship	12
Total	109

- e. The number of youth between the ages of 18 and 21 who are enrolled in a 4-year college full-time and part-time;

Employment Status	FY20	FY21
Full-Time	23	18
Part-Time	0	0
TOTAL	23	18

- f. The number of youth between the ages of 18 and 21 who are enrolled in a 2-year college full-time and part-time;

Two-Year College Status	FY20	FY21
Full-Time	8	5
Part-Time	3	4
TOTAL	11	9

- g. The number of youth between the ages of 18 and 21 who are enrolled in vocational training;

See response to Q111question 111(d).

- h. The number of youth between the ages of 18 and 21 who are attending high school;

See response to Q111question 111(d).

- i. The number of youth between the ages of 18 and 21 who are enrolled in a GED program;

See response to Q111question 111(d).

j. Number of youth participating in Urban Alliance internship program;

CFSA no longer contracts with the Urban Alliance internship program. CFSA provides other internship opportunities for youth. See response to question 111(d).

k. Number of youth participating in the Summer Youth Employment Program (SYEP);

FY20	95
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l. Number of youth participating in Department of Employment Services (DOES) year-round programs (including Career Connections); and

Program	FY20	FY21
DC Career Connections	1	0
YEALP	0	0
1K	0	0
Total	1	0

m. Number of youth participating in Career Pathways training and programs.

CFSA no longer uses the Career Pathways and Training Program.

Youth Aftercare Program

112. What is the status of the Youth Aftercare program? Describe the current program including the following information:

CFSA established the Youth Aftercare program on October 1, 2019.

a. The number of youth being served

In FY20, 69 youth were served.

b. The services being offered;

The Youth Aftercare program includes case management services centered on fostering independence by connecting youth with community resources. The Youth Aftercare program provides youth with both individual support and group opportunities that offer connections to the following supports: housing; medical/mental health; education/vocational training preparation; employment assistance; budget and financial management; life-skills

development; guidance on accessing public services and benefits; transportation stipend; and limited emergency support.

In FY21, the Youth Aftercare program provided virtual workshops in several areas to include: money management, life skills, how to navigate securing government resources and career readiness. The program also created the Youth Aftercare Advisory Board (YAAB), which is designed to teach self-advocacy, boost self-esteem, provide team building, leadership and public speaking skills opportunities. During this fiscal year, the OYE internship program was extended to youth falling under the Aftercare program age range of 21 – 23 years old.

c. How CFSA is providing information about Youth Aftercare; and

CFSA has sent the information via agency wide emails, including the information in the resource parent newsletters, and agency wide newsletters to all staff informing them of the new Youth Aftercare program. CFSA has also shared this information during informational sessions with the Citizen's Review Panel as well at other community stakeholder meetings. The information is also provided to the youth and their team during the 21 JumpStart review that is held for each youth in care. The information about Young Women's Project has been removed from CFSA's website.

d. Are any services being provided by outside contractors? If so, identify them.

No. While there are no services currently contracted for Youth Aftercare services, the team works closely with various nonprofit and other government providers offering subsidies when applicable.

113. Regarding youth who aged out of foster care, indicate the following for FY20 and FY21, to date:

a. The number of youth who aged out of foster care;

Fiscal Year	# Exited care on 21st birthday	# Remained in extended care	Total
FY20	27	17	42
FY21	1	10	11
Total	28	27	53

b. The Number of youth who aged out of foster care since March 11, 2020.

Fiscal Year	# Aged out of care and not participate in extended care
FY20	8
FY21	1

- c. The number of youth who were employed full-time at the time they aged out. Employed part-time. For those youth who were not employed, what was the reason?

Employment	FY20	FY21
Full-Time	5	4
Part-Time	9	1
Unemployed	28	6
Total	42	11

*Total includes youth who opted to remain care since March 11, 2020

Reasons for not working	FY20	FY21
Abscondence	3	0
College	1	0
DDS	3	1
Incarceration	2	0
Pregnant/New Mother	0	1
Not engaged	3	0
Seeking Employment	15	3
In HS/GED/Vocational Program	1	0
Pending Immigration	0	1
Total	28	6

- d. Among youth who aged out, at the time of their 21st birthday, how many had stable post-emancipation housing in place? Provide a breakdown of the types of anticipated living arrangements (e.g. own apartment, apartment with roommate, college dorm, staying with former foster parent, staying with biological parent, staying with other family member, staying with friends, abscondence, incarcerated, shelter system, no housing identified, etc.);

Type of Living Arrangements	FY20	FY21
<i>Stable Housing</i>		
College Dorm/Job Corps	1	0
DDS Placement	2	0
DDS Placement (Extended care)	1	0
Family	7	1

Type of Living Arrangements	FY20	FY21
Former Resource Parent	5	0
Former Resource Parent (Extended care)	4	6
Own Apartment	3	0
Own Apartment (Extended care)	1	2
Staying with Mentor/friend	2	0
Transitional Housing	3	0
Transitional Housing (Extended care)	3	0
Group Home (Extended care)	5	2
<i>Unstable Housing</i>		
Abscondence	2	0
Shelter/homeless	0	0
Incarcerated	2	0
Incarcerated (Extended care)	1	0
Total	42	11

e. What resources, referrals, or support did CFSA offer when youth who aged out had no housing identified at the time of their 21st birthday?

CFSA makes referrals to transitional housing programs throughout the city including Wayne Place and DBH supportive housing. Youth are also referred to the Mayor's Services Liaison Office and CFSA's housing support programs such as the Rapid Housing program, if qualified, and the Family Unification Voucher program (FUP) for a limited time housing voucher. The Youth Aftercare program plays a vital role in continuing to support youth in identifying stable housing options post age 21.

f. The number of youth that were homeless within a year of aging out of foster care.

CFSA does not track this information. Data is maintained by DHS.

114. Regarding pregnant or parenting youth, provide the following for FY20 and FY21, to date:

a. The number of youth who are pregnant or who are parents

Status	FY20	FY21
Pregnant	2	3
Parenting	23	26
Total	25 (1 extended care)	29 (4 are extended care)

b. A breakdown of the types of placements (e.g. foster homes, teen parent programs) in which known pregnant or parenting youth are placed and how many youths are placed in each type of placement.

Program Type	FY20 # of Youth	FY21 # of Youth
Independent Living Program	8	9
Foster Home	9	13
Professional Foster Home	3	3
Group Home	1	2
Detention Center	1	1
PRTF	0	1
Unlicensed Placement	3	0
Total	25	29

115. Regarding teen parent programs, describe:

a. The training that program staff receive to work with teen parents;

Teen parent program staff are required to meet the same training requirements as staff within other congregate care programs as outlined in Chapter 62, Licensing of Youth Shelters, Runaway Shelters, Emergency Care Facilities and Youth Group Homes. Program staff must complete at least 20 hours of pre-service training and 40 hours of annual in-service training. They have participated in training specific for PPY through the Effective Black Parenting Model and receive training that includes trauma informed practice, working with LGBTQ youth, de-escalation of conflict, human trafficking, and ethics.

b. How CFSA monitors teen parent programs to ensure the safety of and quality of services provided to pregnant and parenting youth;

CFSA conducts announced and unannounced visits, physical facility checks, youth record reviews, staff record reviews; and youth interviews to ensure the safety and quality of services for pregnant and parenting youth.

The Generations teen parent unit also meets monthly with the staff of The Mary Elizabeth House to discuss the young families' progress and service needs.

c. The programming CFSA provides for teen mothers/fathers;

Teen mothers are offered budget/financial literacy, nutritional and parenting classes, linkage to a core service agency, daycare vouchers, support from DC127 and cooking/meal planning. Teen mothers and teen fathers are also eligible for linkage to all community resources relating to parenting youth such as Women, Infants & Children (WIC), Safe Sleep, Healthy Babies, Mary's Center, and the DC Diaper Bank. When a young man in care is identified as a father, he is eligible to receive the same supportive services afforded to teen mothers.

d. The number of teen mothers/teen fathers that have participated in these programs; and

Program	Teen Parents who Participated
Budget/ Financial Literacy	16
Parenting Classes	23
Core Service Agency	14
Daycare Voucher	17
DC 127	5
Nutrition/M meal Prep	8

e. The program outcomes.

Overall program outcomes have a series of qualifying factors. These factors include reviewing school attendance/completion rates, vocational training involvement, mental health service engagement, apartment maintenance, independent parenting skills, and non-CPS involvement. Outcomes are measured on an individual basis, as youth age ranges and functionality may differ. Outcomes are reviewed and discussed bi-annually through the Youth Transition Planning (YTP) process and monthly reporting. It should be noted that the number of teen parents and repeat births have decreased annually.

116. What if any changes did the Agency makes to the supports offered to fathers of children born to young women in care? For young fathers who are in foster care?

There are no changes in the supports offered to fathers of children born to young women in care and/or of young fathers in foster care themselves. CFSA continues to be focused on permanency and family connections to increase the young parents' natural supports. There remains a focus on identifying fathers and ensuring connectivity and access to available community resources. This includes linkage to the Healthy Families/Thriving Communities Collaboratives for participation in the fatherhood initiative programs through the Family First program.

117. Provide an update regarding CFSA's progress in implementing the recommendations of its Youth Aftercare Workgroup. What if any recommendations remain to be implemented?

There are no outstanding recommendations stemming from the Youth Aftercare Workgroup. This workgroup has not met in more than three years. The contract for aftercare ended in FY19 and an OYE unit managing aftercare went into effect on October 1, 2019.

118. What barriers exist to creating placement options for foster youth over the age of 18 who desire to cohabitate with their partners and children?

Presently, CFSA does not have a placement option for youth over the age of 18 who desire to cohabitate with their partners and children. While this is the case, co-parenting is encouraged and supported through the visitation process at all placement options.

MISCELLANEOUS

Housing & Rapid Housing

119. How much is budgeted for housing in FY21?

A total of \$550,000 is budgeted.

a. How much has been spent on housing in FY21, to date?

A total of \$133,800 has been spent.

b. What vendors are receiving housing funds?

East River Family Strengthening Collaborative
District of Columbia Housing Authority (DCHA)

- c. How does the agency plan to spend down these funds in FY21 including how much will be allocated to each vendor?**

CFSA allocated \$50,000 to East River Family Strengthening Collaborative to provide financial assistance to families who are currently engaged with CFSA. CFSA has allocated \$500,000 to DCHA to act as the fiscal manager for the Rapid Housing Assistance Program (RHAP). Through both vendors, CFSA will spend housing funds to provide emergency and short term rental assistance to prevent children from entering care, help families reunify when housing is a barrier, or allow youth transitioning from foster care (or former foster youth) to establish a stable place to live after emancipation.

120. Provide a detailed status report on the usage of Rapid Housing in FY20 and in FY21, to date, including:

- a. The number of parents who *applied* for Rapid Housing to keep children out of foster care. How many children were within these families?**

See Rapid Housing Assistance Program Table 1 below.

- b. The number of parents who *received* Rapid Housing to keep children out of foster care. How many children were within these families?**

See Rapid Housing Assistance Program Table 1 below.

- c. The number of reunification cases in which families *applied* for Rapid Housing.**

See Rapid Housing Assistance Program Table 1 below.

- d. The number of reunification cases in which families *received* Rapid Housing.**

See Rapid Housing Assistance Program Table 1 below.

- e. The number of youth emancipating from care who *applied* for Rapid Housing.**

See Rapid Housing Assistance Program Table 1 below.

- f. The number of youth emancipating from care who *received* Rapid Housing.**

See Rapid Housing Assistance Program Table 1 below.

Table 1. Rapid Housing Assistance Program (RHAP) Status Report – FY20 and FY21 YTD

Case Type	FY20			FY21		
	Applied	Received	# of Children	Applied	Received*	# of Children
Preservation	23	2	5	1	0	0
Reunification	54	10	37	8	2	9
Exiting Youth	24	22		3	3	

*Families approved for assistance have 90 days from the date of approval to locate housing and submit documentation for assistance. Families and youth approved in FY21 to date may still be in the process of looking for housing to meet their family's needs.

g. Did the Rapid Housing program run out of funds at any time in FY20? If so, what was the reason for that?

RHAP did not run out of funds at any time in FY20.

h. Were there any changes to the Rapid Housing program in FY20 or FY21, to date? If yes, what were the changes and the reasons for these changes?

In FY20, all RHAP requests were completed using one unified *CFSA Housing Supports Request Form (an online form)* to increase the timeliness of application review and accurate connection to the best-fit housing resources. The unified screener is managed and reviewed by staff within CFSA's Community Partnerships Administration.

In FY21, Community Partnerships implemented an additional process efficiency: instituting a Housing Review Committee (HRC) to further streamline the business process for social workers and/or designees to access housing assistance for youth and families. The HRC affords staff the opportunity present their request with their application to a panel of CFSA staff relevant to the youth/family's request. A final recommendation is now made within three (3) business days of hearing the request.

i. What was the average award for each population of Rapid Housing recipients?

Type of Case	Average Total* Award per recipient (FY20)	Average Total* Award per recipient (FY21)
Preservation	\$8,710	\$9,001
Reunification	\$9,930	\$13,399
Youth Aftercare/Exiting Youth	\$6,512	\$4,785

*Note: Award averages are calculated annually.

121. For FY20 and FY21, to date, how many of the youth, who (1) emancipated and (2) aged out of care, used Rapid Housing funding to:

a. Subsidize housing with relatives or former foster parents?

Fiscal Year	Independent Housing	Relative/Formal Foster Parent	College Housing	TOTAL
FY20	12	0	10	22
FY21	3	0	0	3

b. To support independent housing?

See response above to question 121(a).

122. Other than Rapid Housing, what type of financial housing support does the agency provide youth who age out of care?

a. Describe the capacity of these supports to assist youth in foster care who haven't accessed them before.

CFSA continues to offer four supportive housing programs specifically focused on youth who have transitioned out of the foster care system. These programs are outlined below and implemented in partnership with other District agencies and community partners.

The Wayne Place Project is a joint effort between CFSA and DBH to provide transitional supportive housing for youth aging out of the foster care system or youth transitioning from psychiatric residential centers and who require intensive services to stabilize them in a community environment. The program focus is to provide a real-life community experience, so the youth are prepared to positively and successfully engage and participate in the community environment. A major component of the program is the evidence-based model, Transition to Independence Program (TIP). The TIP model contains educational and employment preparation and supportive services.

In FY20, there were two options available for pregnant and parenting youth that include Genesis and the Mary Elizabeth House Transitional living program. Genesis has 8 apartments in an inter-generational community and is currently full. The Mary Elizabeth House Transitional living program has 11 slots in 5 units. In FY21, the Mary Elizabeth House Transitional living program was discontinued due to underutilization.

As well, CFSA continues to work with DCHA to provide Family Unification Program (FUP) vouchers to youth who are between the ages of 18-24 who have left foster care or who will leave foster care within 90 days and are homeless or at risk of becoming homeless. These FUP vouchers are time-limited to 36 months and are designed to provide assistance to youth who need additional time and support to transition with safe housing.

b. How many youths started accessing these supports in FY20 and in FY21, to date?

Program	FY20 Utilization	FY21 Utilization
Wayne Place	22	15
The Mary Elizabeth House	5	N/A
Genesis	10	8

c. For how long would youth access these supports (at least include the average length of time, and the two longest cases)?

Program	FY20 Average Length of Stay	FY21 Average Length of Stay
Wayne Place	22 months	19 months
The Mary Elizabeth House	8 months	N/A
Genesis	4 years	4 years

*Due to COVID-19, 5 youth were able to remain in the program past the 18 months length of stay

123. Are there special housing or financial programs for parenting youth? If yes, how many youths received the assistance? What was the total amount of assistance provided?

In order to uniquely address the needs of pregnant and parenting youth, CFSA developed a program solely focused on this population. Within the array of services offered, housing and financial programs are afforded to youth through referral services to community vendors and a contractual partnership with the Mary Elizabeth House.

The Mary Elizabeth House transitional living program offered stipends to youth and case management services focused on educating young mothers in the areas of housing, financial literacy and parenting skills up to age 24. During FY20, there were 11 available slots with a total cost of \$643,059. There were 5 young families placed during FY20. The grant was not renewed for FY21 because of under-utilization and the decrease of young families transitioning from care on a yearly basis.

124. Provide an update on CFSA's "Front Yard Strategy" in partnership with DHS:

CFSA continues to partner with DHS to allow community-based "Front Yard" referrals of young homeless families to be made directly from the Healthy Families/Thriving Communities Collaboratives to improve family functioning and family stability.

In October of 2017, CFSA implemented a partnership with DHS to allow community-based "Front Yard" referrals to be made directly from DHS via the Virginia Williams Family Resource Center (VWFC) to CFSA's five community-based prevention service providers, the Healthy

Families/Thriving Communities Collaboratives (Collaboratives) to improve family functioning and family stability. DHS and CFSA have continued the partnership to accept front yard referrals within the existing Front Yard category: Young Homeless Families. Young Homeless Families are defined in which the head of the household is between the ages of 18-25 years old with children under the age of 6 years old who are without a home or stable living condition. Young Homeless families are referred directly by DHS, and its contractors, to the Collaboratives to facilitate connection to case management and supportive services.

CFSA has expanded the partnership to include families who may fall outside of the target population age range, as well as include referrals of families who have accessed DHS's Homeless Prevention Program (HPP) sites, are currently residing in DHS's overflow shelters, or who have leased-up through DHS's Rapid Re-Housing program but who are not yet currently connected to long-term case management supports.

- a. **Provide a summary of the data CFSA has collected regarding referrals of families experiencing homelessness from Virginia Williams in FY20 and FY21, to date.**

Definitions:

Young Homeless families are defined as families with heads of household between the ages of 18-25, with children between the ages of 0-6)

- HPP Referral - Young Homeless families who are have sought services from one of DHS's four (4) Homeless Prevention Programs (MBI, Wheeler Creek, Community of Hope, and Everyone Home DC).
- Overflow Shelter - Young Homeless families who are placed in one of DHS's former overflow hotel sites (Days Inn, Quality Inn, or the Howard Johnson).
- Unassigned Rapid Re-Housing - Young Homeless families who have since leased-up in the DHS Rapid Re-Housing program but have not been assigned to a case management provider.

FY20 "Young Homeless Family" Referrals to the Healthy Families Thriving Communities Collaboratives (Collaboratives):

FY20 Referrals by Month	Count of Families
October	1
December	1
March	44 ⁴⁷

⁴⁷ The increase in referrals in March were due to hotel closures (Hotel Arboretum, Howard Johnson and Ivory City) and families were referred to Homeless Prevention Program sites where they were subsequently referred to the Collaboratives.

FY20 Referrals by Month	Count of Families
April	1
Total	47

FY20 Referrals of “Young Homeless Family” by DHS Referral Source:

FY21 Referrals by Referral Source	Count of Families
Unassigned Rapid Re-Housing	15
Homeless Prevention Program (HPP) Sites	32
Overflow Shelter (Hotels)	0
Total	47

- b. Is the agency collecting data regarding families experiencing homeless from homeless shelter providers other than Virginia Williams? If so, provide this data.**

No.

125. What tool does the agency use to assess youth housing needs?

Currently, CFSA does not utilize a standardized tool to assess youth housing needs. Housing needs are assessed during each Youth Transition Planning meeting as well as during the 21 JumpStart review. In FY20, CFSA started using a housing supports scoring matrix to assess the type of housing supports needed for youth exiting foster care.

LaShawn v. Bowser

126. For almost 20 years, CFSA has been tackling 88 accountability measures to exit the cloud of court oversight. Where does CFSA currently stand in the exit process?

In addition to meeting and exceeding many of the 88 accountability measures in the *LaShawn A. v. Bowser Implementation and Exit Plan*, CFSA demonstrated that it is a self-regulating and self-correcting Agency as evidenced by its sustained and improved performance over several years. As a result, in FY19, due to the significant progress, CFSA negotiated a reduction in the active monitoring of *LaShawn* from 88 measures to 24 measures resulting in the *LaShawn A. v. Bowser Exit and Sustainability Plan* (ESP). Following even more progress, CFSA, the Court Monitor, and the Plaintiffs’ Counsel came together in Summer 2020 to reach a mutual agreement on exit commitments and timelines, and in August, Judge Hogan signed a preliminary settlement agreement that will allow CFSA to exit court oversight on or before June 1, 2021.

This Settlement Agreement includes additional commitments to build and maintain a foster placement surplus, continue increased clinical and therapeutic services, and contract for a specialized psychiatric treatment option. Additionally, we will maintain our commitment to caseload standards as well as our commitments toward self-monitoring and public reporting.

CFSA will have a meeting with the Plaintiff and the Center for the Study of Social Policy (CSSP) in February 2021 to discuss progress on CFSA's commitments. CSSP will submit a report on CFSA progress from June 2020 through December 2020 prior to the June 1, 2021 fairness Hearing with the goal of ending the *LaShawn v. Bowser* Lawsuit.

127. At the CFSA Stakeholder forum, Director Donald stated that by January 2021, CFSA will begin self-reporting, and CSSP will move to a role of validating data reported by the agency. What is the status of this action?

The Settlement Agreement stipulates that as of January 2021, CFSA will publish two reports covering two six-month time periods in 2021. The Four Pillars Measurement Framework will detail progress on previously agreed upon performance measures. The Court Monitor became an Independent Verification Agent who will validate CFSA's data included in CFSA's two reports on performance. The reports will cover January – June and July – December of 2021 data.

128. Provide in detail CFSA's updated Exit and Sustainability Plan.

The Exit and Sustainability Plan (ESP) was replaced by the attached Settlement Agreement.

Attachment Q128, LaShawn Settlement Agreement.

Budget and Policy Directives

129. Provide a status update on the agency's compliance with the committee's FY21 budget and policy directives. When reports or other documents are indicated, provide those documents.

Policy Recommendations

1. Director Donald stated she believes that the FY 2021 proposed budget is sufficient to support all necessary activities of the Agency. However, since the full impact of the pandemic is yet to be realized, CFSA must be prepared to quickly act should additional needs arise. While CFSA has taken proactive steps to create a respite center for youth whose caregiver's have fallen ill due to COVID-19, the policies and procedures for admitting and caring for children in this location have not been made public.

Respite Center

While it is notable that CFSA seeks out alternative caregivers, including kin and fictive kin, before admitting children, CFSA should provide greater transparency about the respite centers as well as steps they take to divert youth from the child welfare system.

In April 2020, the District opened a community respite center for COVID-19 positive/exposed community and foster care children who need a safe place to quarantine and/or recuperate. To date, a total of 18 individuals have utilized this shared respite facility since its inception.

In September, the District made adjustments and relocated the respite center to another physical location. The center has continued to have a low number of children who have tested positive for COVID-19 and need this service. For those children who have been exposed to COVID-19, our foster parents continue to step up and leaned in to make sure our children are safe and stable during the pandemic; and are able to successfully quarantine.

Since the beginning of the public health emergency, CFSA has engaged community and District agency partners such as the Health Families/Thriving Communities Collaboratives, the Parent Advisory Committee (PAC), the Metropolitan Police Department, the schools, the Office of the Attorney General and various media outlets and social media posts to solicit the public's support in helping to keep children safe; and to highlight available District resources that include the respite center.

Resource Parents Recruitment

Furthermore, The Committee encourages CFSA to increase recruiting efforts for resource parents to ensure there are placements available for youth coming into care, especially since there may be an uptick as a result of the public health emergency.

On October 1, 2020, CFSA introduced one of our strategies to ramp up our resource parent recruitment efforts through the agency-wide R.E.A.C.H. (Recruit, Engage, Advocate, Collaborate, Help) campaign. As part of this campaign, CFSA created an Ambassador Program for CFSA staff and resource parents who are passionate, understand the urgency of recruiting new foster parents, and are willing to introduce the agency's call for foster parents into their social networks and organizational affiliations.

Abolish 6 Month Waiting Requirement for GCP and CRCP

CFSA should also make temporary emergency policy changes permanent. More specifically, officially abolishing the 6-month waiting period and the in-person registration requirement to enroll in the GCP and the CRCP.

CFSA has waived the six-month eligibility requirements for the Grandparent Caregivers Program and the Close Relative Caregiver Program so that eligible participants can access needed services and financial assistance swiftly. We are considering making these changes permanent at the end of the public health emergency. In addition, applicants do not have to register in-person. We moved to a majority in-person processes through the use of online portals for the submission of documents and have added the online forms to CFSA's webpage at [CFSA.dc.gov](https://cfsa.dc.gov).

Leveraging Federal Resources

Finally, CFSA must prioritize leveraging all available federal resources, including inter alia, Family First dollars and various COVID relief funds.

CFSA is currently reviewing the requirements of the Family First Prevention Services Act to get a clear understanding of the reimbursement opportunities that may exist for prevention services. Concurrently, CFSA continues to work with our federal partners to stay abreast of new programs as they become available to receive greater federal funding for prevention and placement services.

Over the course of FY20, CFSA planned a series of programmatic and administrative process improvements with the intent of leveraging federal funding to the fullest extent possible in FY21 and beyond. These improvements include:

- Training direct service social workers across the child welfare continuum on Motivational Interviewing.
- Amending the cost structure of the Agency's Public Assistance Cost Allocation Plan (PACAP) to leverage federal funding for prevention services and commercial sexual exploitation of children (CSEC) trafficking interventions that were made available through the Family First Prevention Services Act.
- Amending the Agency's Random Moment Time Study to capture social worker activities and costs associated with delivering these prevention services and CSEC activities.
- Revising the scope of CFSA's contracts with its Healthy Families/Thriving Community Collaborative partners to discretely identify federally reimbursable prevention services.
- Developing detailed management information reports in CFSA's FACES management information system to support federal reimbursement claims for these new programs.

2. CFSA should publicly share their official policy and procedure with oversight of suspected youth in danger of abuse and neglect during distance learning activities. Advocates and multiple public witnesses have shared a real concern that CFSA is not interacting with families that need support, especially during the public health emergency. While the District continues to slowly phase out of the Stay-at-Home order, CFSA must prepare to assist an increased number of youth at risk.

Strategies for Preventing Abuse and Neglect

CFSA should take steps to increase their visibility to youth that may be at risk of abuse or neglect through various strategies. For example, they could coordinate with DCPS and DCPCS to place a page in distance learning packets sharing a hotline number for youth to call for immediate assistance.

CFSA discussed the practicality of this recommendation and determined that for CFSA to direct students of all ages to attempt self-reporting their own potential abuse and neglect to a hotline without the opportunity to provide context and/or training beyond a written page within the distance learning packet presents complications and, at worst, safety concerns. CFSA concluded that it is more prudent for us to lean on educators and equip them with additional resources to support children during this time. We worked with DCPS, DCPCS, and OSSE to develop and distribute guidance to help teachers assess student safety and well-being in a virtual learning environment. In addition to the abuse and neglect referral protocol, we have updated our Mandated Reporter Training.

CFSA began meeting monthly with DCPS, DCPCS, and OSSE officials to problem solve any issues during the public health emergency and distance learning. These meetings involve discussing any concerns families may have during distance learning such as technology barriers that might result in a referral to CFSA, lack of student participation in distance learning and safety concern observed during distance learning. These meetings have enhanced the partnership between CFSA and the school system in better meeting the needs of families during the public health emergency.

Strategies for Preventing Sex Trafficking for Youth At-Risk

Additionally, CFSA should work closely with Courtney's House⁴⁸ and other advocacy groups assisting youth at-risk of being sex trafficked during the public health emergency.

After the CFSA FY19-20 Performance Oversight Hearing, CFSA staff met with Courtney's House to assess any increase in reports of trafficking and additional ways CFSA can support non-profits working in this area which resulted in an increase in funding. CFSA

⁴⁸ Courtney's House is an organization that helps youth who have or who are at risk of being sex trafficked.

continues to monitor the data and anecdotal information provided by all stakeholders to determine if additional support is needed.

For victims of child sex trafficking who are not wards of the Agency, CFSA has a contract with Fair Girls to provide services and supports for children and youth in the community who are at risk or who are victims of child sex trafficking. Regarding the grant for Fair Girls, this is a one-time grant from the DC Council that we are using for preventive support for children in need of these specific trafficking related services who are not in foster care.

3. As Director Donald explained, older youth and adolescents with trauma history require additional wrap around supports. One support that perhaps needs to be further addressed is tutoring. For the 2018-2019 school year, CFSA had access to grade point averages (GPA) for 84 youth in grades 9-12 enrolled in DCPS and PGCPs schools. The range of GPAs included a low of 0 to a high of 4.42, with an average GPA of 1.69 and a median GPA of 1.61. CFSA should take a closer look into why grades are alarmingly low and what can be done to increase GPAs.

Tutoring Efforts and Increasing GPAs

The GPA is a snapshot of a student's overall educational experience during their time in foster care. Our goal is to build a bridge to address any educational deficits youth may have upon entering care and try to focus necessary resources to address their educational needs. We have invested a lot in our youth and believe strongly in the value of educational achievement which is a part of normalizing their childhood.

CFSA has implemented multiple strategies to improve the educational performance of our foster youth. CFSA uses the Check and Connect Student Engagement and Intervention Model, an evidenced based model aimed at increasing student engagement, performance, and high school graduation rates. Education specialists are assigned to provide intensive supports to each youth in grades 9-12 who our data identifies to be educationally at-risk in the areas of attendance, grades, or behavior.

It is rare that these youth's academic struggles are isolated. Therefore, the education specialist conducts regular check-ins with the youth and family, collects, tracks and shares performance data from the school on a monthly basis and works with the social work team and school to put interventions/services in place to address areas of academic need.

We also entered into a partnership with Youth Villages to implement YVLifeSet, which focuses on the most disconnected youth by providing educational and vocational support. We enhanced our postsecondary services and training by including individualized supports to all youth in grades 11 and 12 and started a workshop series for high school-aged youth on topics related to college and career preparation.

Lastly, our current tutoring provider has been offering virtual tutoring during the public health emergency, allowing us to continue providing this vital support to a large number of students in need without interruption.

Budget Recommendations

Transfers In from Other Committees

- 1. The Committee on Housing and Neighborhood Revitalization directs \$200,000 to CFSA to support programming that prevents District families from unnecessarily entering the child welfare system through targeted legal interventions (8000, 8030, CSG50).**

Committee budget recommendation was reversed by the Committee of the Whole.

- 2. The Committee on Housing and Neighborhood Revitalization directs \$150,000 to CFSA to support an existing program that provides services to youth between the ages of 11-24 years that are not in CFSA's care and custody who have been victims of or are at risk of becoming victims of sex trafficking (2000, 2030, CSG50).**

Committee budget recommendation confirmed.

Operating Budget Recommendations

- 1. Recurring (\$500,000). Reduction in child placement to align the budget with projected spending in FY21.**

Committee budget recommendation confirmed.

- 2. One Time (\$150,000). Provide support to a program that helps fathers gain knowledge and skills to improve their involvement and connection to their children through voluntary home visits; parenting support; child development information and activities; health education and support; family goal planning; adult literacy; legal advocacy; links to community resources; and activities and outings that promote bonding and healthy habit.**

Committee budget recommendation confirmed.

- 3. One Time (\$160,000). Support an existing program that provides parenting group sessions and home visitation services to families with a focus on supporting mothers who are homeless, victims of domestic violence, and who are reuniting with their children after returning home following a period of incarceration.**

Committee budget recommendation confirmed.

- 4. One Time (\$200,000). Enhancement to provide support to a program that works to prevent families from unnecessarily entering the child welfare system through targeted legal interventions.**

Committee budget recommendation was reversed by the Committee of the Whole.

- 5. One Time (\$150,000). Enhancement to support an existing program that provides services to youth between the ages of 11 and 25 years that are not in CFSA's care and custody who have been victims of, or are at risk of, becoming victims of sex trafficking.**

Committee budget recommendation confirmed.

- 6. One Time (\$530,486). Support the Families First initiative (8040, 0501, CSG 0050). The Mayor's Errata letter (dated June 2, 2020) indicated that the Council should restore the amount, which was removed from the Families First DC budget due to a drafting error when submitting the budget. The Committee on Human Services stated the Mayor's letter did not offer any new sources of funding to correct their mistake.**

The ten Family Success Centers were originally slated to open October 2020. The Committee will closely track the performance outcomes to confirm they align with CFSA's overall prevention strategy. While federal dollars have not been identified to help fund Families First D.C., Director Donald vowed to continue working with federal partners to stay abreast of new programs as they become available to receive greater federal funding for prevention and placement services.

Committee budget recommendation confirmed.

- 7. Recurring (\$10,000). Reduction for costs associated with out of town travel expenses.**

Committee budget recommendation confirmed.

130. The Council renewed the FY20 one-time enhancement of \$200,000 in local funding in the FY21 budget. Provide a status update on the issuance of the funds for each of the four grants awarded.

Per the response to Question 56, the federal Family First Transition Act included a one-time funding grant of \$593,681 to CFSA, to remain available through September 30, 2025. CFSA identified \$200,000 for the Neighborhood Legal Services program as a planned use for this funding in its FY21 budget. Refer to the response to Question 131 regarding the status of issuing grants for these funds.

131. Last year in the FY21 Budget Support Act of 2020, the Council renewed funding for the Child and Family Services Agency Prevention Services Grants Act of 2019 (FY20 Budget Support Act of 2019). This funding reestablished four one-time grants. Provide an update on each of the four grants including:

a. When a decision was made or will be made for the grant recipient;

See Prevention Services Grant Table 1 below.

b. How the grant recipient was chosen;

See Prevention Services Grant Table 1 below.

c. Which provider has been awarded the grant (if the decision has been made); and

See Prevention Services Grant Table 1 below.

d. When the grant will be issued to the awardees/providers.

See Prevention Services Grant Table 1 below.

Table 1. Prevention Services Grants Act of 2019 Status Update – FY21 Budget Support Act of 2020

Prevention Services Grant Description	Awarded Provider (c)	Decision Timeline/Selection/Status (a,b,d)
(1) Support a program that provides targeted legal intervention services in matters involving child custody, child support, domestic violence, landlord-tenant issues, housing conditions, federally subsidized housing defense, and access to public benefits, for the purpose of preventing families from unnecessarily entering the child welfare system.	Neighborhood Legal Services	<ul style="list-style-type: none"> • RFP released in July 2019. • Provider selected in August 2019. • Grant executed on November 21, 2019. • Option Year 1 executed, effective November 21, 2020.

Prevention Services Grant Description	Awarded Provider (c)	Decision Timeline/Selection/Status (a,b,d)
(2) Support a program that helps fathers gain the knowledge and skills necessary to improve their involvement and connection to their children through voluntary home visits, parenting support, child development information and activities, health education and support, family goal planning, adult literacy, legal advocacy, access to community resources, and activities that promote bonding and healthy habits.	Mary's Center	<ul style="list-style-type: none"> • RFP released: N/A (sole source) • Provider selected in November 2019. • Grant executed November 21, 2019. • Option Year 1 executed, effective November 21, 2020.
(3) Support a program that provides services to youth between 11 and 24 years of age who have been, or are at risk of, becoming victims of sex trafficking, as that term is defined in section 103(12) of the Trafficking Victims Protection Act of 2000.	Fair Girls	<ul style="list-style-type: none"> • RFP released in November 2019. • Provider selected on January 13, 2020. • The grant was issued on March 19, 2020. • Option Year 1 will be executed in March 2021.
(4) Support a program that provides parenting group sessions and home visitation services to families, with an emphasis on services that assist mothers who are homeless, victims of domestic violence, and reuniting with their children following a period of incarceration.	Community Family Life Services	<ul style="list-style-type: none"> • RFP released in September 2019. • Provider selected in January 2020. • Grant was executed on January 21, 2020. • Option Year 1 was executed, effective January 21, 2021.