

**EXECUTIVE SUMMARY**  
**Final Report: Massachusetts Child and Family Services Review**  
**February 21, 2008**

**INTRODUCTION**

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Massachusetts. The CFSR assesses State performance with regard to seven child and family outcomes and seven systemic factors. The Massachusetts CFSR was conducted the week of July 23, 2007. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Massachusetts Department of Social Services (DSS)
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for fiscal year (FY) 2004, FY 2005, and the 12-month CFSR period ending March 31, 2006
- Reviews of 65 cases across the Boston Region, the Lawrence Area Office, and the South Central Area Office
- Interviews or focus groups (conducted at all three sites and at the State level) with stakeholders, including but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys

**Background Information**

The CFSR assesses State performance on 23 items pertaining to the seven outcomes and 22 items pertaining to the seven systemic factors. In the Outcomes section of the report, an overall rating of Strength or Area Needing Improvement is assigned to each of the 23 items. An item may be assigned an overall rating of Strength if 90 percent of the applicable cases reviewed were rated as a Strength. State performance on the seven outcomes is rated as Substantially Achieved, Partially Achieved, or Not Achieved. In order for a State to be in substantial conformity with a particular outcome, 95 percent of the cases reviewed must be rated as having Substantially Achieved the outcome. A State that is not in substantial conformity with a particular outcome must develop and implement a Program Improvement Plan (PIP) to address the areas of concern within that outcome.

The Administration for Children and Families (ACF) has set very high standards of performance for the CFSR Review. The standards are based on the belief that because child welfare agencies work with our country’s most vulnerable children and families, only the highest standards of performance should be acceptable. The focus of the CFSR process is on continuous quality improvement; thus, standards are set high to ensure ongoing attention to the goal of achieving positive outcomes for children and families with regard to safety, permanency, and well-being.

It should be noted, however, that States are not required to achieve these standards through their PIP. ACF recognizes that the kinds of systemic and practice changes necessary to improve outcomes are complex to implement and are not likely to have immediate results. Instead, States establish their own goals for their PIP. That is, for each outcome or item that is an area needing improvement, each

State specifies how much improvement they will demonstrate and determines the procedures for demonstrating that level of improvement. Both the extent of improvement specified and the procedures for establishing improvement vary across States. Therefore, a State can meet the requirements of its PIP and still not meet the requirements of the onsite CFSR to achieve 90 or 95 percent conformity.

The second round of the CFSR is intended to address the issue of State's current level of functioning with regard to child outcomes by once more applying the high standards and consistent, comprehensive case-review methodology. This is intended to serve as a basis for continued PIPs addressing areas where the State still needs to improve, even though specific PIP requirements may have been achieved. The goal is to ensure that program improvement is an ongoing process and does not end with the closing of the PIP.

Because many changes have been made in the onsite CFSR process based on lessons learned during the first round of the CFSR and in response to feedback from the child welfare field, a State's performance in the second round of the CFSR is not directly comparable to its performance in the first round, particularly with regard to comparisons of percentages. Key changes in the CFSR process make it difficult to compare performance across reviews and include the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to increase consistency and to ensure an assessment of critical areas, such as child welfare agency efforts to involve noncustodial parents

## **CFSR Findings**

The CFSR identified some areas of exceptional performance in Massachusetts. First, the State achieved substantial conformity for Well-Being Outcome 2, which assesses how well children's educational needs are addressed. The high level of performance in the educational realm was an improvement on the 2001 CFSR performance and largely attributable to the agency's efforts to maintain consistent communication with children's schools through telephone contact and school meetings and to ensure that children's educational rights were attended to through educational surrogates. Despite reports by stakeholders that some school systems are inadequately serving children, this did not impede the agency in ensuring that children received the educational services they needed. The State is also recognized for its commitment to promoting attainment of higher education through assistance to current and former foster youth with college applications and college tuition.

The Onsite Review also showed positive performance in other areas. DSS is consistently effective in placing children in foster homes that are in close proximity to their parents, extended family members, and communities. The State also performed consistently in placing children with their siblings when possible. In addition, DSS demonstrated consistent efforts in ensuring that children in the foster care system are regularly seen by their caseworkers, although this same effort was not demonstrated with children remaining in

intact families. Finally, with regard to the cases reviewed, the agency improved efforts to ensure that children's mental health needs were assessed and addressed.

With regard to systemic factors, the State was found to be in substantial conformity with six of the seven systemic factors, including Statewide Information System, Quality Assurance System, Training, Service Array, Agency Responsiveness to the Community, and Foster Care Licensing and Recruitment. For example, the State continued to expand the capacity of its automated statewide information system, FamilyNet, to improve data availability to make needed quality improvements. Massachusetts also has made great strides in the development and implementation of a statewide quality assurance process, called Quality Service Reviews. To streamline delivery of both DSS-contracted services and community-based services for families involved with the child welfare system, DSS has undertaken a redesign of the service delivery system and implemented Family Networks in every region of the State. In addition, while onsite, the review team identified numerous examples of strong DSS collaborations and partnerships with consumers, community-based programs, academic institutions, and federally assisted agencies that supported the work of various child welfare improvement efforts.

Despite these areas of positive performance, Massachusetts was not in substantial conformity with six of the seven CFSR outcomes or the Case Review System systemic factor. Of particular concern during the review was the agency's lack of consistency in assessing the needs of children and families, involving parents and children in the case planning process, mutually identifying appropriate services to meet identified needs, and ensuring that these services met the intended goals for children and families. While inconsistencies were identified in these practice areas with both parents and children across all three sites, there was a pronounced lack of concerted effort at locating and involving fathers in case planning and appropriately assessing and addressing the needs of fathers. In addition, although there is a broad service array across the State, there are particular services that are either not available or not available to the extent that they are needed in certain communities. The lack of assessment and provision of appropriate services also may have been attributable to the identified statewide gaps in residential substance abuse services for parents and their children, psychiatric services, postpermanency services, and foster homes for adolescents.

The State also exhibited difficulty with regard to ensuring that children have permanency and stability in their living situations. This was evidenced by the following: the case review; stakeholder comments with regard to the State's permanency hearings; and the State not meeting the national indicators on any of the composites that address State performance with regard to an absence of repeat maltreatment, timeliness and permanency of reunification, timeliness of adoptions, placement stability, and permanency for children and youth in foster care for long periods of time. The agency did achieve a strong performance in the case review for reunification, guardianship, and placement with relatives; in addition, incidences of foster care reentries were low. However, there were concerns identified with regard to the timely assignment of permanency goals and the timely completion of adoptions for children, and there were inconsistencies in the quality of permanency hearings. In addition, in the cases reviewed, some children experienced placement instability, and stakeholder reports indicated that a lack of placements for adolescents resulted in youth experiencing night-to-night placements and spending long periods of time in DSS area offices. Finally, while the independent living services are reportedly both helpful and effective, too many older youth are aging out of the Massachusetts foster care system without the security of permanency in their living situations.

Specific findings with regard to the State’s performance on the safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State’s performance with regard to the seven systemic factors assessed through the CFSR. In the following section, key findings are summarized for each outcome.

## **I. KEY FINDINGS RELATED TO OUTCOMES**

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

Safety Outcome 1 incorporates two indicators. One pertains to the timeliness of initiating a response to a child maltreatment report (item 1), and the other relates to the recurrence of substantiated or indicated maltreatment (item 2).

Massachusetts did not achieve substantial conformity with Safety Outcome 1. The outcome was determined to be Substantially Achieved in 70.6 percent of the applicable cases, which is less than the 95 percent or higher required for a rating of substantial conformity. In addition, Massachusetts did not meet the national standards for the two data indicators relevant for Safety Outcome 1. These indicators pertain to the absence of maltreatment recurrence and the absence of maltreatment of children in foster care by foster parents or facility staff.

#### **Key Findings of the 2001 CFSR**

In the 2001 CFSR, the State was not in substantial conformity with Safety Outcome 1, because the State did not achieve the required performance levels for the national standards for repeat maltreatment and maltreatment of children in foster care. In its PIP, Massachusetts identified the following strategies to reduce maltreatment recurrence and the maltreatment of children in foster care:

- Undertook a major redesign of the DSS intake, assessment, and service/case planning system in order to provide an alternative response to investigation of low risk cases and more quickly and comprehensively identify needs and engage families in services
- Provided Continuous Quality Improvement Teams with a detailed analysis of incidents of maltreatment in order to assist area offices with understanding the factors contributing to repeat maltreatment incidents
- Piloted a teaming approach to facilitate the sharing of decision-making and case management efforts with families with complicated circumstances
- Supported the expansion of programs, such as PATCH and Family Nurturing, to provide additional support to vulnerable families

#### **Key Findings of the 2007 CFSR**

While the 2001 CFSR found timeliness of investigations (item 1) to be a Strength, additional concerns emerged in the 2007 CFSR with regard to timeliness of investigations and consistent face-to-face contact with children during the investigation period. Although investigations were found to be conducted in accordance with the State’s policy for all of the cases that required an emergency response, there were inconsistencies with regard to the State meeting the required 2-day investigation initiation response time for nonemergency reports.

With regard to repeat maltreatment (item 2), the State continues to experience challenges. In the 2007 CFSR, reviewers found cases in which there were two or more substantiated maltreatment reports within a 6-month period, and the State did not meet the national standards pertaining to the data indicators of absence of maltreatment recurrence and absence of maltreatment for children in foster care.

### **Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate**

Performance on Safety Outcome 2 is assessed through two indicators. One indicator (item 3) addresses the issue of child welfare agency efforts to prevent children's removal from their homes by providing services to the families that ensure children's safety while they remain in their homes. The other indicator (item 4) pertains to the child welfare agency's efforts to reduce risk of harm to children.

Massachusetts did not achieve substantial conformity with Safety Outcome 2. The outcome was determined to be Substantially Achieved in 72.3 percent of the cases reviewed, which is less than the 95 percent or higher required for a rating of substantial conformity.

### **Key Findings of the 2001 CFSR**

The State did not achieve substantial conformity for Safety Outcome 2 in the 2001 CFSR. Case reviewers found issues with the department's practices in assessing needs of family members and providing appropriate and timely services to address these needs in order to keep children safely at home and to reduce the risk of harm for children both at home and in out-of-home care.

To address these concerns, the State included the following strategies in four of the seven broad DSS PIP goals:

- Redesign of the intake, assessment, case planning, and family engagement processes
- Development and piloting of a shared approach to case management called "Teaming"
- Reprourement and redesign of the DSS contracted services system
- Targeting of services to meet the specialized needs of adolescents, including expansion of the outreach and tracking program for youth transitioning out of foster care
- Development and implementation of family team meetings

In addition, the State's PIP included the following strategies to increase the ability of staff to assess substance abuse and to assist families in gaining access to needed services:

- Staff training and consultation with substance abuse experts
- Service coordination with the Department of Public Health programs
- Prioritized attention given to DSS families in need of substance abuse services
- Statewide drug-screening services

### **Key Findings of the 2007 CFSR**

In the 2001 CFSR, services to protect children in their home and to prevent removal (item 3) was rated as an Area Needing Improvement, and it remains a concern in the 2007 CFSR. The 2007 CFSR found some of the same concerns noted in the 2001 CFSR, including inconsistencies in ensuring that children receive appropriate services in order to minimize risk of harm and prevent their removal from the home. While in the majority of cases reviewed children did receive appropriate services to support them at home, there were instances in which children remained in unsafe situations without their service needs being appropriately assessed or addressed.

Stakeholders agreed that the agency regularly provides a wide variety of services to children and families, although there are also some basic service gaps across the State, including transportation options, psychiatric services, postadoption services, and foster homes. While the Boston Region is reportedly well-resourced in terms of crisis stabilization services, there is a need for additional crisis stabilization services in some areas of the State.

In the 2001 CFSR, risk of harm (item 4) was rated as a Strength, yet in the 2007 CFSR, there were inconsistencies identified in ensuring that adequate safety and risk assessments were conducted and that risk of harm was adequately addressed for children. There were also some inconsistencies identified in assessing risk for children in foster care as well as for children reunified with their families.

Stakeholders generally indicated that the agency utilizes Family Group Conferencing, Teaming, Multidisciplinary Assessment Teams (MDATs), and clinical review teams to assess and minimize risk to children. However, some stakeholders attributed the State's inconsistency in assessing risk to the lack of a standardized risk assessment tool. Stakeholders indicated that the Boston Region is finding it particularly challenging to manage risk for children who run away or who are involved with gangs and prostitution.

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

There are six indicators incorporated in the assessment of Permanency Outcome 1, although not all of them are relevant for all children. The indicators pertain to the child welfare agency's efforts to prevent foster care reentry (item 5), ensure placement stability for children in foster care (item 6), and establish appropriate permanency goals for children in foster care in a timely manner (item 7). Depending on the child's permanency goal, the remaining indicators focus on the child welfare agency's efforts to achieve permanency goals (such as reunification, guardianship, adoption, and permanent placement with relatives) in a timely manner (items 8 and 9) or to ensure that children who have Other Planned Permanent Living Arrangements as a case goal are in stable placements and adequately prepared for eventual independent living (item 10).



Massachusetts did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following findings:

- The outcome was Substantially Achieved in 47.5 percent of the cases, which is less than the 95 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for the 12-month CFSR period ending March 31, 2006, the State did not meet the national standards for the four composite measures, including Composite 1: Timeliness and Permanency of Reunification; Composite 2: Timeliness of Adoptions; Composite 3: Permanency for Children in Foster Care for Extended Periods of Time; and Composite 4: Placement Stability.

Massachusetts' performance on Permanency Outcome 1 varied across sites. The outcome was found to be Substantially Achieved in 53 percent of the Boston Region cases, compared to 40 percent of the Lawrence Area Office and South Central Area Office cases.

### **Key Findings of the 2001 CFSR**

The State did not achieve substantial conformity for Permanency Outcome 1 in the 2001 CFSR. The CFSR identified the following key concerns with regard to achieving permanency for children in foster care: (1) the State did not meet the required performance level for any of the four national standards associated with this outcome, and (2) the case review identified delays in achieving permanency that were found to be a result of the following legal or procedural obstacles:

- The child's permanency goal was not clearly agreed upon by involved parties, and/or there was a lengthy period before the goal was appropriately changed.
- Alternative, appropriate permanency goals were not explored before a goal of Another Planned Permanent Living Arrangement (APPLA) was established.
- There were delays in scheduling, hearing, and reaching a decision in termination of parental rights (TPR) trials.
- Appropriate permanency/transition services were not provided.
- There was incomplete and/or untimely submission of paperwork to the courts or through the Interstate Compact on the Placement of Children (ICPC) Unit.

Some of the Massachusetts PIP goals were focused on lessening delays in achieving permanency, increasing efforts to find permanent families for older youth in particular, and supporting both substitute care and permanent placements. In successfully achieving these PIP goals, the department and the courts implemented the following strategies:

- Permanency planning policies were updated.
- Practices for making permanent connections for adolescents were developed and implemented.
- Foster care review staff were trained on adolescent issues and resources.
- Career and work opportunities for adolescents were developed.
- Increased collaboration between DSS and the courts was initiated, and judicial resources were more effectively utilized.
- An enhanced permanency hearing model for youth with APPLA as a goal was developed and implemented.

In addition, other PIP goals contained strategies for improving permanency outcomes related to foster care reentries, placement stability, and reunification and adoption. To improve outcomes related to these areas, DSS undertook the following:

- The redesign of the intake, assessment, and service planning systems
- The redesign and implementation of an invigorated service array, with lead agencies having the ability to individualize services and the capacity to strengthen linkages to the community
- The development and implementation of Family Group Conferencing and Teaming

### **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, foster care reentries (item 5), stability of foster care placements (item 6), a permanency goal for the child (item 7), adoption (item 9), and a permanency goal of APPLA (item 10) remain challenging areas for DSS. Related and additional key findings of the 2007 CFSR are presented as follows:

- The case review and the data profile for the Composite 1 individual measure on foster care reentries indicate that Massachusetts has challenges in preventing foster care reentries within a 12-month period (item 5).
- The case review indicates that there are inconsistencies in maintaining stable placements for foster children, particularly as it relates to (a) meeting the children's mental and behavioral needs, (b) ensuring that their placements are safe and well-supported, and (c) addressing the behaviors of children who run away. In addition, the State did not meet any of the national standards for Composite 4: Placement Stability for the 12-month CFSR period ending March 31, 2006 (item 6).
- Massachusetts continues to experience inconsistencies with regard to the establishment of timely and appropriate permanency goals for children in foster care, and the State is not consistently meeting the requirements of the Adoption and Safe Families Act (ASFA) and filing for TPR in a timely manner. Also, the State did not meet the national standard for Data Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time (item 7).
- Information from the case reviews and data from Composite 2: Timeliness of Adoptions indicates that the State is not consistently completing adoptions in a timely manner (item 9).
- The case review findings also suggest that the State is not consistently assisting youth in achieving the goal of permanent placement or a permanent foster care placement. In particular, there were inconsistencies with regard to ensuring that there were formal agreements between youth and their caregivers (item 10).

Despite these challenges, the case review findings indicate that Massachusetts is effective and timely in achieving reunifications and guardianships for children. However, the State did not meet the national standard for Data Composite 1: Timeliness and Permanency of Reunification (item 8).

Stakeholders expressed the following concerns relevant to this outcome:

- There are disruptions in adoptions and guardianships, and there is a need for more postpermanency services in the State.
- There is a lack of resource homes available for adolescents in the State.
- There are children staying in night-to-night placements and spending time in local offices awaiting placements, and multiple placement changes occur while the agency searches for appropriate placements for children.



- There are delays in timely filing for TPR when an adoptive resource or another permanent placement option has not been identified for a child; although there are provisions for expedited appeals, the appeals process remains lengthy.

Despite these concerns, stakeholders also expressed the following with regard to this outcome:

- The agency consistently uses permanency planning conferences to address children's permanency goals at 9 months after entry into foster care and foster care reviews to address the child's case plan goals at 6-month intervals.
- The Boston Region is reportedly effective in engaging in concurrent planning.
- Adolescent Outreach Services are effective and reportedly helpful to youth who wish to find jobs, complete school, and go to college.

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

Permanency Outcome 2 incorporates six indicators that assess the child welfare agency's performance with regard to placing children in foster care in proximity to their parents and close relatives (item 11); placing siblings together (item 12); ensuring frequent visitation between children and their parents and siblings in foster care (item 13); preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (item 14); seeking relatives as potential placement resources (item 15); and promoting the relationship between children and their parents while the children are in foster care (item 16).

Massachusetts did not achieve substantial conformity with Permanency Outcome 2. The outcome was rated as Substantially Achieved in 75 percent of the cases, which is less than the 95 percent or higher required for substantial conformity. The outcome was determined to be Substantially Achieved in 80 percent of the Boston and South Central Area Office cases and 60 percent of the Lawrence Area Office cases.

#### **Key Findings of the 2001 CFSR**

The State Substantially Achieved Permanency Outcome 2 in the 2001 CFSR. All of the items associated with this outcome were rated as Strengths, and the State was not required to address any of these areas in its PIP.

#### **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, item 11 (proximity of foster care placement) was rated as a Strength in the 2007 CFSR. While item 13 (visitation with parents and siblings), item 14 (preserving connections), item 15 (relative placement), and item 16 (relationship of child in care with parents) were all rated Strengths in the 2001 CFSR, they are rated as Areas Needing Improvement in the 2007 CFSR. Additionally, item 12, with a rating of 87.5 percent, is rated as an Area Needing Improvement in the 2007 CFSR, because Federal regulations require a higher threshold for rating achievement in the 2007 CFSR than in the 2001 CFSR (95 percent for outcome ratings and 90 percent for item ratings). Additional findings were as follows:

- In the cases reviewed, the most consistent pattern of visitation frequency for mothers was weekly, the most consistent pattern of visitation frequency for siblings was less than once a month, and the most consistent pattern of visitation frequency for fathers was no visits during the period under review (item 13).
- There was a lack of consistency with regard to supporting children’s connections with extended family, siblings, school, and community connections (item 14).
- There were inconsistent efforts made to search for maternal and paternal relatives as placement resources for children (item 15).
- The support of the parents’ relationship with their children while the children were in foster care was generally inconsistent; however, less attention was given to promoting children’s bonds with fathers than with mothers (item 16).

Despite these concerns, the case reviews also found the following:

- Children were routinely placed in proximity to parents or potential permanent caregivers (item 11).
- In the majority of cases, children were consistently placed with their siblings, unless there was a valid reason for separating siblings (item 12).

Stakeholders expressed the following opinions relevant to this outcome:

- In some areas of the State, there are not enough resource homes or more intensive placement resources located in children’s home communities.
- In the Boston Region, some parents and the courts want children placed out of the metro region in order to minimize harmful influences.
- The agency makes efforts to place siblings together, and when they cannot be placed together, the agency makes efforts to ensure that they have visits.
- The agency typically meets the standards of minimum visitation for families; however, foster parents across the State were of mixed opinions about the value of working with biological parents and assisting with visitation.
- The State is not consistently identifying the heritage of Tribal children and, therefore, not always linking children with their Tribes. When notification occurs, it may often be well after the initial involvement of DSS with the child and family.
- There is a perception of inconsistent decision-making around what kinds of Criminal Offender Records Information (CORI) findings can be waived for relative placements.

### **Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs**

Well-Being Outcome 1 incorporates four indicators. One pertains to the child welfare agency’s efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet identified needs (item 17). A second indicator examines the child welfare agency’s efforts to actively involve parents and children (when appropriate) in the case planning process (item 18). The two remaining indicators examine the frequency and quality of caseworker’s contacts with the children in their caseloads (item 19) and with the children’s parents (item 20).

Massachusetts did not achieve substantial conformity with Well-Being Outcome 1. This outcome was rated as Substantially Achieved in 44.6 percent of the cases reviewed, which is less than the 95 percent required for a determination of substantial conformity. Performance on this outcome was consistent across the sites, and there was little variation in the ratings based on whether the case was a foster care case or an in-home case.

### **Key Findings of the 2001 CFSR**

The State did not achieve substantial conformity for Well-Being Outcome 1 in the 2001 CFSR. Key concerns were predominantly related to needs assessment, service provision, and family involvement in case planning as follows:

- Assessment of the service needs of the child and family were not completed or were inadequate.
- Services provided did not address the identified needs.
- Service needs of fathers were not addressed in case plans.
- Families were not consistently involved in case planning.

Several of the State's PIP goals were broad-based systemic reforms and, as such, were intended to address cross-cutting issues related not only to the safety of children but also to the well-being of children and their families. As noted under Safety Outcome 2, these reform efforts included:

- Major redesign of the DSS intake, assessment, and service/case planning system
- Redesign and reprocurement of services with a local lead agency approach
- Several strategies to increase the ability of staff to assess substance abuse in families and assist families in gaining access to needed services, including staff training and consultation with substance abuse experts, service coordination with the Department of Public Health programs, and the implementation of statewide urine drug screening

Massachusetts successfully completed its PIP activities; however, the significant changes planned for the front end of the system (i.e., intake, assessment, and service planning) have not yet been fully implemented.

### **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, the needs and services of children, parents, and foster parents (item 17) and family involvement in case planning (item 18) remain as areas needing improvement in the 2007 CFSR. However, concerns also were identified with regard to caseworker visits with children (item 19) and caseworker visits with parents (item 20), both of which were strengths in the 2001 CFSR. The following concerns surfaced in the case review in the 2007 CFSR:

- There continues to be a lack of consistency in assessing and meeting the service needs of parents (particularly fathers) and children. The cases reviewed indicated that the agency is more consistently assessing and addressing the needs of mothers and children and less effectively assessing and meeting the service needs of fathers. Efforts to locate and/or engage fathers at the outset have improved, but overall efforts remain inconsistent (item 17).
- There also continue to be inconsistencies in adequately involving families (particularly fathers) in case planning (item 18).

- Caseworkers regularly visited with children in the foster care cases, but there were inconsistencies in caseworker visits with children in the in-home cases (item 19).
- The 2007 CFSR specifically differentiated between mothers and fathers in evaluating the frequency and quality of caseworker visits. In general, there were insufficient caseworker visits and challenges associated with the quality of visits with both parents. However, these findings were more pronounced for fathers, as evidenced by inconsistent, concerted efforts to visit or engage fathers in either case planning or services (item 20).

Stakeholders expressed the following opinions relevant to this outcome:

- The Family Networks system offers a broad service array of family stabilization services and community-based services to families. However, there are reported gaps in residential substance abuse services for parents and their children, psychiatric services, postpermanency services, and foster homes for adolescents.
- The degree of supports and services for foster parents is inconsistent across the State.
- While there has been an increased emphasis on family engagement and strength-based case planning with families, the degree to which these approaches are utilized in case practice varies not only across the State but among staff in local offices.
- Caseworkers see children on a monthly basis. Adolescent Outreach caseworkers see youth on a weekly basis, which is reportedly very helpful to these youth.

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

There is only one indicator for Well-Being Outcome 2. It pertains to the child welfare agency's efforts to address and meet the educational needs of children in both foster care and in-home services cases (item 21).

Massachusetts is in substantial conformity with Well-Being Outcome 2. Reviewers determined that 96 percent of the cases reviewed were rated as Substantially Achieved for this outcome. This percentage meets the required 95 percent or higher required for substantial conformity. The outcome was Substantially Achieved in 100 percent of the 37 applicable foster care cases and in 85 percent (11 cases) of the 13 applicable in-home cases.

### **Key Findings of the 2001 CFSR**

In addition to a lack of documentation of DSS efforts to respond to the educational needs of children, the 2001 CFSR found that caseworkers were not consistently addressing issues such as school failures and truancy. The State's PIP included revision of the tools and strengthening of processes used for assessing the educational needs of children. In addition, a number of PIP activities focused on addressing the particular needs of special populations, including high-risk adolescents.

### **Key Findings in the 2007 CFSR**

Although the State was not in substantial conformity in ensuring that children's educational needs were met in the 2001 CFSR, the State achieved substantial conformity with this outcome in the 2007 CFSR. In the cases reviewed, DSS ensured that children's educational needs were met in a variety of ways. Caseworkers ensured that children were in the proper educational settings to meet their needs, maintained consistent contact with children's schools, and regularly attended children's Individual Education Plan (IEP) meetings. Also, Educational Surrogate Parents and guardian *ad litem* (GAL) educational advocates consistently represented children's educational needs. In addition, the agency promoted higher education opportunities and assisted youth with college applications and college tuition.

Stakeholders indicated that there are systemic problems associated with children receiving adequate education assessments and getting their special education needs met; children receiving residential services when they need them; and the prevention and attention to issues such as truancy, substance abuse, and lack of school completion in the Boston Public Schools.

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

This outcome incorporates two indicators that assess the child welfare agency's efforts to meet children's physical health needs (item 22) and mental health needs (item 23).

Massachusetts did not achieve substantial conformity with Well-Being Outcome 3. The outcome was determined to be Substantially Achieved in 75.4 percent of the applicable cases, which is less than the 95 percent required for substantial conformity. Performance on this outcome varied across the sites. The outcome was determined to be Substantially Achieved in 82 percent of the Lawrence Area Office cases, 79 percent of the Boston Region cases, and 62.5 percent of the South Central Area Office cases. There was little variation based on the type of case reviewed. The outcome was determined to be Substantially Achieved in 74 percent (29 cases) of the 39 applicable foster care cases and 77 percent (17 cases) of the 22 applicable in-home services cases.

### **Key Findings of the 2001 CFSR**

The 2001 CFSR noted the following key findings with respect to the State's ability to meet the physical and mental health needs of children:

- The State was more consistent in providing the required initial screenings of children's physical health than their mental health.
- Mental health providers sometimes failed to submit adequate progress reports on children, and DSS staff were not consistent in following through with health-care providers.
- In a few cases, children's health conditions were not treated.
- Children's health records were not consistently provided to foster parents.

The State's PIP addressed issues with the identification of children's health needs as part of the intake, assessment, and case planning system revisions. In particular, this system includes new tools for the early and accurate identification of mental health issues. However, this system has not been fully implemented.

### **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, the physical and dental health of children (item 22) and the mental health of children (item 23) remain as areas needing improvement in the 2007 CFSR. In terms of meeting the physical and dental health needs of children, there were inconsistencies in the provision of health assessments and health records. In particular, comprehensive assessments of children's physical and dental health and medical information were not completed. There were also inconsistencies identified in assessing and addressing the mental health needs of children.

Stakeholders expressed the following with regard to physical and mental health services:

- There is a lack of dental providers that accept Mass Health coverage in various areas of the State.
- The State has mental health specialists available to assist local offices; but, across the State, children do not have timely access to needed psychiatric and residential services.

## **II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS**

### **Statewide Information System**

Substantial conformity with the systemic factor of a Statewide Information System is determined by whether the State is operating a statewide information system that can identify the status, demographic characteristics, location, and goals for children in foster care.

Massachusetts is in substantial conformity with the systemic factor of a Statewide Information System. FamilyNet, Massachusetts' Statewide Automated Child Welfare Information System (SACWIS), can readily provide the federally required data on every foster child's status, demographic characteristics, location, and goal. This systemic factor was also in substantial conformity in the initial CFSR, and the State was not required to address it in the PIP.

### **Case Review System**

Five indicators are used to assess the State's performance with regard to the systemic factor of a Case Review System. The indicators examine the development of case plans and parent involvement in that process (item 25), the consistency of 6-month case reviews (item 26) and 12-month permanency hearings (item 27), the implementation of procedures to seek TPR in accordance with the timeframes established in ASFA (item 28), and the notification and inclusion of foster and preadoptive parents and relative caregivers in case reviews and hearings (item 29).



Massachusetts is not in substantial conformity with the systemic factor of a Case Review System. Case plans are not routinely developed jointly with parents and youth, and there are ongoing concerns about the effectiveness of permanency hearings and notification of caretakers about reviews and hearings. This systemic factor was also found to be not in substantial conformity in the 2001 CFSR, and the State was required to address it in the PIP.

### **Key Findings From the 2001 CFSR**

Key concerns identified during the 2001 CFSR were the following:

- There was a lack of family involvement in case planning in many of the cases reviewed.
- The design and automation of the case/service plan in the FamilyNet system hindered parental involvement in the planning process.
- Permanency hearings were brief and perfunctory and did not adequately address the ASFA requirements for these hearings.

The State implemented the following PIP strategies to address concerns related to family involvement in case planning:

- Developed a new service planning process that is strengths-based, child-centered, family-focused, and community-connected
- Assessed the level of family involvement in case planning by internally reviewing case practices, conducting a survey of families involved with the department, and forming a Parent Advisory Committee to represent the diverse groups served by DSS
- Implemented Family Group Conferencing

In addition, the State implemented the following strategies to address concerns with the quality of permanency hearings:

- Explored barriers to high quality permanency hearings and identified methods to present quality information to the court for evaluation by involved parties
- Explored the roles of the participants in permanency hearings
- Piloted a new design for permanency hearings in cases with a goal of an Alternative Permanent Plan

### **Key Findings From the 2007 CFSR**

During the 2007 CFSR, most stakeholders noted the agency's efforts (during and after the PIP period) to improve family engagement in the case planning process. These efforts included the implementation of a standing Parent Advisory Committee that meets quarterly with the Commissioner of DSS and the use of Family Group Conferencing in a limited number of cases in all area offices. In addition, although the Family Engagement system has not been fully implemented, stakeholders across the sites agreed that the agency emphasizes greater participation by parents and age-appropriate children in case planning and reviews.

While the 2007 CFSR found that stakeholders acknowledged improvements in some courts, they also reported that barriers to quality permanency hearings still exist. Stakeholders reported the following:

- Some courts still docket numerous permanency hearings on the same day, which does not allow sufficient time for a meaningful review of the permanency plan.
- Some courts conduct *pro forma* hearings.

- There is inconsistent involvement of parents, youth and caregivers in permanency hearings.

### **Quality Assurance System**

Performance with regard to the systemic factor of Quality Assurance System is based on whether the State has developed standards to ensure the safety and health of children in foster care (item 30) and whether the State is operating a statewide quality assurance system that evaluates the quality and effectiveness of services and measures program strengths and areas needing improvement (item 31).

Massachusetts is in substantial conformity with the factor of Quality Assurance System because State standards for foster homes and congregate foster care have been enhanced and standardized, and the State has developed and begun to implement a statewide quality assurance system. However, although data are more readily available to managers, these data are not consistently used to determine the effectiveness of services or outcomes for children. In the initial CFSR, the State was in substantial conformity with this systemic factor and was not required to address it in the PIP.

### **Training**

The systemic factor of Training incorporates an assessment of the State's new caseworker training program (item 32), ongoing training for child welfare agency staff (item 33), and training for foster and adoptive parents (item 34).

Massachusetts is in substantial conformity with the Training systemic factor, because the State has continued to invest in the development of new curricula and the enhancement of existing curricula for both preservice and inservice training of staff, providers, and foster caregivers. This systemic factor was also determined to be in substantial conformity in the initial CFSR.

### **Service Array**

The assessment of the systemic factor of Service Array addresses three questions:

- Does the State have in place an array of services to meet the needs of children and families served by the child welfare agency (item 35)?
- Are these services accessible to families and children throughout the State (item 36)?
- Can services be individualized to meet the unique needs of the children and family served by the child welfare agency (item 37)?

Massachusetts is in substantial conformity with the Service Array systemic factor. The State has put in place a system of locally based lead agency and regional resource center contracts for the provision of a wide array of community-based services, including child abuse and neglect prevention, family preservation and support, intensive foster and congregate care, and rehabilitative services for children and families. These contracted agencies have the flexibility to develop new services based on local needs and the capacity to tailor services to address the particular needs of children and families. While the statewide service delivery system is in place, service

gaps do exist and were identified in some key service categories, including substance abuse, housing, and postpermanency. In addition, some areas of the State were identified as not having sufficient services to meet demand, resulting in delayed access to particular services such as behavioral and mental health. Also, a lack of transportation reportedly affects service accessibility in some regions of the State. In the 2001 CFSR, the State was also in substantial conformity and was not required to address this factor in the PIP.

### **Agency Responsiveness to the Community**

Performance with regard to the systemic factor of Agency Responsiveness to the Community incorporates an assessment of the State's consultation with external stakeholders in developing the Child and Family Services Plan (CFSP) (items 38 and 39) and the extent to which the State coordinates child welfare services with services or benefits of other federal or federally assisted programs serving the same population (item 40).

Massachusetts is in substantial conformity on the Agency Responsiveness to the Community systemic factor. In the initial CFSR, this systemic factor was also determined to be in substantial conformity. Since the 2001 CFSR, the State has taken affirmative steps to reach out to both the public and private sectors as well as to ensure representation of DSS consumers (parents and youth), providers, staff and partners in the development and implementation of systemic reforms that were part of the PIP. The State's efforts to engage the community and to include their input in PIP activities are also reflected in the goals, objectives, and activities associated with the CFSP.

### **Foster and Adoptive Parent Licensing, Recruitment, and Retention**

The assessment of this systemic factor focuses on the State's standards for foster homes and child care institutions (items 41 and 42), the State's compliance with federal requirements for criminal background checks for foster and adoptive parents (item 43), the State's efforts to recruit foster and adoptive parents who reflect the ethnic and racial diversity of foster children (item 44), and the State's activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

Massachusetts is in substantial conformity for the systemic factor Foster and Adoptive Parent Licensing, Recruitment, and Retention. The State continues to make significant investments in more effectively licensing, recruiting and supporting foster and adoptive parents. In the 2001 CFSR, this systemic factor was also determined to be in substantial conformity, and the State was not required to address it in the PIP. However, the lack of foster homes for adolescents, which was also identified as a need in the prior review, has become an ongoing issue.

**Table 1. Massachusetts CFSR Ratings for Safety and Permanency Outcomes and Items**

| Outcomes and Indicators   | Outcome Ratings            |                                 |                         | Item Ratings |                  |
|---|----------------------------|---------------------------------|-------------------------|--------------|------------------|
|   | In Substantial Conformity? | Percent Substantially Achieved* | Met National Standards? | Rating**     | Percent Strength |
| <b>Safety Outcome 1:</b> Children are first and foremost, protected from abuse and neglect.           | NO                         | 70.6                            | NO                      |              |                  |
| Item 1: Timeliness of investigations  |                            |                                 |                         | ANI          | 79               |
| Item 2: Repeat maltreatment   |                            |                                 |                         | ANI          | 79               |
| <b>Safety Outcome 2:</b> Children are safely maintained in their homes when possible and appropriate. | NO                         | 72.3                            |                         |              |                  |
| Item 3: Services to prevent removal   |                            |                                 |                         | ANI          | 80               |
| Item 4: Risk of harm  |                            |                                 |                         | ANI          | 74               |
| <b>Permanency Outcome 1:</b> Children have permanency and stability in their living situations.       | NO                         | 47.5                            | NO                      |              |                  |
| Item 5: Foster care reentry   |                            |                                 |                         | ANI          | 80               |
| Item 6: Stability of foster care placements   |                            |                                 |                         | ANI          | 65               |
| Item 7: Permanency goal for child   |                            |                                 |                         | ANI          | 67               |
| Item 8: Reunification, guardianship, and placement with relatives                                     |                            |                                 |                         | Strength     | 92               |
| Item 9: Adoption  |                            |                                 |                         | ANI          | 64               |
| Item 10: Other planned living arrangement   |                            |                                 |                         | ANI          | 53               |
| <b>Permanency Outcome 2:</b> The continuity of family relationships and connections is preserved.     | NO                         | 75                              |                         |              |                  |
| Item 11: Proximity of placement   |                            |                                 |                         | Strength     | 100              |
| Item 12: Placement with siblings  |                            |                                 |                         | ANI          | 87.5             |
| Item 13: Visiting with parents and siblings in foster care  |                            |                                 |                         | ANI          | 76               |
| Item 14: Preserving connections   |                            |                                 |                         | ANI          | 78               |
| Item 15: Relative placement   |                            |                                 |                         | ANI          | 77               |
| Item 16: Relationship of child in care with parents   |                            |                                 |                         | ANI          | 64.5             |

\*95 percent of the applicable cases reviewed must be rated as having Substantially Achieved the outcome for the State to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases must be rated as a Strength.

**Table 2. Massachusetts CFSR Ratings for Child and Family Well-Being Outcomes and Items**

| Outcomes and Indicators  | Outcome Ratings            |                                 | Item Ratings |                  |
|--|----------------------------|---------------------------------|--------------|------------------|
|  | In Substantial Conformity? | Percent Substantially Achieved* | Rating**     | Percent Strength |
| <b>Well-Being Outcome 1:</b> Families have enhanced capacity to provide for children’s needs.          | NO                         | 44.6                            |              |                  |
| Item 17: Needs/services of child, parents, and foster parents  |                            |                                 | ANI          | 49               |
| Item 18: Child/family involvement in case planning   |                            |                                 | ANI          | 49               |
| Item 19: Worker visits with child  |                            |                                 | ANI          | 86               |
| Item 20: Worker visits with parents  |                            |                                 | ANI          | 50               |
| <b>Well-Being Outcome 2:</b> Children receive services to meet their educational needs.                | YES                        | 96                              |              |                  |
| Item 21: Educational needs of child  |                            |                                 | Strength     | 96               |
| <b>Well-Being Outcome 3:</b> Children receive services to meet their physical and mental health needs. | NO                         | 75.4                            |              |                  |
| Item 22: Physical health of child  |                            |                                 | ANI          | 79               |
| Item 23: Mental health of child  |                            |                                 | ANI          | 86               |

\*95 percent of the applicable cases reviewed must be rated as having Substantially Achieved the outcome for the State to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95 percent Strength rating applies.

**Table 3: Massachusetts CFSR Ratings for Systemic Factors and Items**

| <b>Systemic Factors and Items</b>   | <b>In Substantial Conformity?</b> | <b>Score*</b> | <b>Item Rating**</b> |
|---|-----------------------------------|---------------|----------------------|
| <b>Statewide Information System</b>   | YES                               | 4             |                      |
| Item 24: The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.  |                                   |               | Strength             |
| <b>Case Review System</b>   | NO                                | 2             |                      |
| Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parents that includes the required provisions.  |                                   |               | ANI                  |
| Item 26: Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.  |                                   |               | Strength             |
| Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.   |                                   |               | ANI                  |
| Item 28: Provides a process for TPR proceedings in accordance with the provisions of ASFA.  |                                   |               | ANI                  |
| Item 29: Provides a process for foster parents, preadoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.  |                                   |               | ANI                  |
| <b>Quality Assurance System</b>   | YES                               | 4             |                      |
| Item 30: The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of children.   |                                   |               | Strength             |
| Item 31: The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided and that evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates implemented program improvement measures. |                                   |               | Strength             |

\*Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

\*\*Items may be rated as a Strength or as an Area Needing Improvement (ANI).



|   |     |   |          |
|---|-----|---|----------|
| <b>Training</b>   | YES | 4 |          |
| Item 32: The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.  |     |   | Strength |
| Item 33: The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.  |     |   | Strength |
| Item 34: The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E, and this training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.                   |     |   | Strength |
| <b>Service Array</b>  | YES | 3 |          |
| Item 35: The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families and individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency. |     |   | Strength |
| Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP.  |     |   | ANI      |
| Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.  |     |   | Strength |
| <b>Agency Responsiveness to the Community</b>   | YES | 4 |          |
| Item 38: In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, services providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.                             |     |   | Strength |
| Item 39: The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.   |     |   | Strength |
| Item 40: The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.   |     |   | Strength |

\*Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

\*\*Items may be rated as a Strength or as an Area Needing Improvement (ANI).

| <b>Foster and Adoptive Parent Licensing, Recruitment, and Retention</b>  | <b>YES</b> | <b>3</b> |          |
|--|------------|----------|----------|
| Item 41: The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards.  |            |          | Strength |
| Item 42: The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.  |            |          | Strength |
| Item 43: The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children. |            |          | Strength |
| Item 44: The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom adoptive homes are needed.  |            |          | ANI      |
| Item 45: The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.  |            |          | Strength |

\*Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

\*\*Items may be rated as a Strength or as an Area Needing Improvement (ANI).

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Administration for Children and Families  
Administration on Children, Youth and Families  
Children's Bureau

**Final Report**  
**Massachusetts Child and Family Services Review**  
**February 21, 2008**

**U.S. Department of Health and Human Services**  
**Administration for Children and Families**  
**Administration on Children, Youth and Families**  
**Children's Bureau**

## Introduction

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Massachusetts. The CFSR is the Federal government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. It is authorized by the Social Security Amendments of 1994 requiring the Department of Health and Human Services to promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau (CB) of the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services.

The Massachusetts CFSR was conducted the week of July 23, 2007. The period under review was from 4/1/06 to 7/23/07. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Massachusetts Department of Social Services (DSS).
- The State Data Profile, prepared by CB, within the U.S. Department of Health and Human Services, which provided State child welfare data for the years 2004, 2005 and the 12 month CFSR period ending March 31, 2006.
- Reviews of 65 cases at three sites throughout the State: 31 cases in the Boston Region; 17 cases in the Lawrence Area Office; and 17 cases in the South Central Area Office.
- Interviews or focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to, children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel and attorneys.

Information from each resource is presented for all of the items reviewed.

All 65 cases were open child welfare agency cases at some time during the period under review. The key characteristics of the 65 cases reviewed are presented in the table on the following page.

The first section of the report (Section A: Outcomes) presents the CFSR findings relevant to the State's performance in achieving specified outcomes for children in the areas of safety, permanency and well-being. For each outcome, there is a table presenting the data for the case review findings and National indicators (when relevant). The table is followed by a discussion of the State's status with regard to substantial conformity with the outcome at the time of the State's first CFSR review, the State's status relevant to the current review, and a presentation and discussion of each item (indicator) assessed under the outcome. Differences in findings across the sites included in the onsite review are described when noteworthy. Variations in outcome and item ratings as a function of type of case (i.e., foster care or in-home services) also are identified when appropriate. The second section of the report (Section B: Systemic Factors) provides an assessment and discussion of the systemic factors relevant to the child welfare agency's ability to achieve positive outcomes for children.

**TABLE OF CASE CHARACTERISTICS**

| <b>Case Characteristics</b>                              | <b>Foster Care Cases</b> | <b>In-Home Cases</b> |
|--|--------------------------|----------------------|
|  | <b>40</b>                | <b>25</b>            |
| <b>When case was opened/child entered foster care</b>    |                          |                      |
| Open prior to the period under review                    | 27 (67.5%)               | 15 (60%)             |
| Open during the period under review                      | 13 (32.5%)               | 10 (40%)             |
| Child entered foster care during the period under review | 15 (37.5%)               |                      |
| <b>Child's age at start of period under review</b>       |                          |                      |
| Younger than age 10                                      | 17 (43%)                 | NA                   |
| At least 10 but younger than 13                          | 2 (5%)                   |                      |
| At least 13 but younger than 16                          | 13 (33%)                 |                      |
| 16 and older   | 8 (20%)                  |                      |
| <b>Race/Ethnicity</b>                                    |                          |                      |
| African American (Non-Hispanic)                          | 8 (20%)                  |                      |
| White (Non-Hispanic)                                     | 17 (43%)                 |                      |
| Hispanic (of all races)                                  | 12 (30%)                 |                      |
| Two or more races  | 2 (5%)                   |                      |
| Unable to determine                                      | 1 (3%)                   |                      |
| <b>Primary Reason for opening case</b>                   |                          |                      |
| Neglect (not including medical neglect)                  | 17 (42.5%)               | 11 (44%)             |
| Physical abuse   | 6 (15%)                  | 5 (20%)              |
| Sexual abuse   | 3 (7.5%)                 | 0                    |
| Medical neglect  | 0                        | 1 (4%)               |
| Child's Behavior   | 5 (12.5%)                | 2 (8%)               |
| Juvenile Justice   | 1 (2.5%)                 | 2 (8%)               |
| Substance abuse by parent                                | 3 (7.5%)                 | 0                    |
| Substance abuse by child                                 | 1 (2.5%)                 | 0                    |
| Domestic violence in child's home                        | 0                        | 4 (16%)              |
| Abandonment  | 1 (2.5%)                 | 0                    |
| Mental/physical health of the child                      | 2 (5%)                   | 0                    |
| Other ("Dependency")                                     | 1 (2.5%)                 | 0                    |

\*Information on these characteristics for in-home services cases is not provided because all children in the family are considered in these cases.

## SECTION A: OUTCOMES

In the Outcomes Section of the CSFR Final Report, an overall rating of Strength or Area Needing Improvement (ANI) is assigned to each of the 23 indicators (items) reviewed. An item is assigned an overall rating of Strength if 90 percent of the applicable cases reviewed were rated as a Strength. In addition to the item ratings, States are evaluated with regard to performance on seven outcomes, each of which incorporates one or more of the individual items. The evaluation options for these outcomes are Substantially Achieved, Partially Achieved and Not Achieved. In order for a State to be in substantial conformity with a particular outcome, 95 percent of the cases reviewed must be rated as having substantially achieved the outcome. Two outcomes—Safety Outcome 1 and Permanency Outcome 1—also are evaluated based on State performance with regard to seven National data indicators. In order for a State to be in substantial conformity with these outcomes, the National standards for each data indicator must be met as well as the case review requirements. A State that is not in substantial conformity with a particular outcome must develop and implement a Program Improvement Plan (PIP) to address the areas of concern identified for that outcome.

ACF has set a very high standard of performance for the CFSR. The standards are based on the belief that because child welfare agencies work with our Nation's most vulnerable children and families, only the highest standards of performance should be considered acceptable. The standards are set high to ensure ongoing attention to achieving positive outcomes for children and families with regard to safety, permanency and well-being. The goal of the CFSR is to promote continuous improvement in performance on these outcomes.

It should be noted, however, that States are not required to attain the 95 percent standard established for the CFSR onsite review at the end of their PIP (PIP) implementation. CB recognizes that the kinds of systemic and practice changes necessary to bring about improvement in particular outcome areas often are time consuming to implement. Also, improvements are likely to be incremental rather than dramatic. Instead, States work with CB to establish a specified amount of improvement or implement specified activities for their PIP. That is, for each outcome or item that is an ANI, each State (working in conjunction with CB) specifies how much improvement the State will demonstrate and/or the activities that it will implement to address the ANI, and determines the procedures for demonstrating the achievement of these goals. Both the improvements specified and the procedures for demonstrating improvement vary across States. Therefore, a State can meet the requirements of their PIP and still not perform at the 95 or 90 percent level requirements of the CFSR.

The second round of the CFSR is intended to assess a State's current level of performance by once more applying these high standards and consistent, comprehensive, case-review methodology. The results of this effort are intended to serve as the basis for continued PIPs addressing areas in which a State still needs to improve, even though prior PIP requirements may have been achieved. The goal is to ensure that program improvement is an ongoing process and does not end with the closing of a PIP.

In the following sections, for each outcome assessed, there is a discussion of how the State performed on that outcome in the first round. If the outcome was not substantially achieved during the first round of the CFSR, there is a discussion of the key concerns



identified at that time and the strategies implemented in the States PIP to address those concerns. This discussion also focuses on whether the key concerns that emerged in the first CFSR continued to be present in the second review, or whether those concerns were resolved, but other concerns emerged.

Because many changes have been made in the onsite CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State’s performance in the second round of the CFSR is not directly comparable to their performance in the first round, particularly with regard to comparisons of data indicators or percentages regarding Strength and ANI ratings. Key changes in the CFSR process that make it difficult to compare performance across reviews are the following:

- An increase in the sample size from 50 to 65 cases.
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items.
- Changes in criteria for specific items to increase consistency and to ensure an assessment of critical areas, such as child welfare agency efforts to involve non-custodial parents.

**I. SAFETY**

**Safety Outcome 1**

| <b>Outcome S1: Children are, first and foremost, protected from abuse and neglect.</b>  |                              |               |                           |                     |                       |
|---|------------------------------|---------------|---------------------------|---------------------|-----------------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b> |                              |               |                           |                     |                       |
|   | <b>Lawrence Area Office</b>  | <b>Boston</b> | <b>South Central</b>      | <b>Total Number</b> | <b>Percentage</b>     |
| Substantially Achieved  | 6                            | 14            | 4                         | 24                  | <b>70.6</b>           |
| Partially Achieved  | 2                            | 1             | 3                         | 6                   | <b>17.6</b>           |
| Not Achieved or Addressed   | 2                            | 1             | 1                         | 4                   | <b>11.8</b>           |
| <b>Total Applicable Cases</b>   | <b>10</b>                    | <b>16</b>     | <b>8</b>                  | <b>34</b>           |                       |
| Not Applicable Cases  | 7                            | 15            | 9                         | 31                  |                       |
| <b>Total Cases</b>  | <b>17</b>                    | <b>31</b>     | <b>17</b>                 | <b>65</b>           |                       |
| <b>Conformity of Statewide data indicators with National standards:</b>                 |                              |               |                           |                     |                       |
|   | <b>National Standard (%)</b> |               | <b>State’s Percentage</b> |                     | <b>Meets Standard</b> |
| Absence of maltreatment recurrence  | 94.6                         |               | 89.1                      |                     | NO                    |
| Absence of maltreatment of children in foster care by foster parents or facility staff  | 99.68                        |               | 98.72                     |                     | NO                    |

**STATUS OF SAFETY OUTCOME 1**

Massachusetts did not achieve substantial conformity with Safety Outcome 1. The outcome was determined to be substantially achieved in 70.6 percent of the applicable cases, which is less than the 95 percent or higher required for a rating of substantial conformity. In addition, Massachusetts did not meet the National standards for the two data indicators relevant for Safety Outcome 1. These indicators pertain to the absence of maltreatment recurrence and the absence of maltreatment of children in foster care by foster parents or facility staff.

**2001 CFSR Findings**

In the 2001 CFSR, the State was not in substantial conformity with Safety Outcome 1, because the State did not achieve the required performance levels for the National standards for repeat maltreatment and maltreatment of children in foster care. In their PIP, Massachusetts identified the following strategies to reduce maltreatment recurrence and the maltreatment of children in foster care:

- Undertook a major redesign of the DSS intake, assessment and service/case planning system in order to, a) provide an alternative response to investigation of low risk cases, and b) more quickly and comprehensively identify needs and engage families in services;
- Provided Continuous Quality Improvement teams with a detailed analysis of incidents of maltreatment in order to assist Area Offices with understanding the factors contributing to repeat maltreatment incidents;
- Piloted a teaming approach to facilitate the sharing of decision-making and case management efforts with families with complicated circumstances;
- Supported the expansion of programs, such as Patch and Family Nurturing, to provide additional support to vulnerable families.

**2007 CFSR Findings**

While the 2001 CFSR found timeliness of investigations (item 1) to be a Strength, additional concerns emerged in the 2007 CFSR with regard to timeliness of investigations and consistent face-to-face contact with children during the investigation period. Although investigations were found to be conducted in accordance with the State’s policy for all of the cases which required an emergency response in the 2007 CFSR, there were inconsistencies with regard to the State meeting the required two-day investigation initiation response time for non-emergency reports.

With regard to repeat maltreatment (item 2), the State continues to experience challenges. In the 2007 CFSR, reviewers found cases in which there were two or more substantiated maltreatment reports within a six-month period, and the State did not meet the National standards pertaining to the data indicators of absence of maltreatment recurrence and absence of maltreatment for children in foster care.

**Item 1: Timeliness of initiating investigations of reports of child maltreatment**

Strength       ANI

**Case Review Findings**

The assessment of item 1 was applicable for 34 (52 percent) of the 65 cases. Cases were not applicable when there were no reports of child maltreatment during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency policy requirements.

Massachusetts’ DSS policy on reporting investigation timeframes is as follows:

- 1) Investigations for all screened-in emergency reports must be initiated within two hours and completed within 24 hours of the receipt of the report.
- 2) Investigations for all screened-in non-emergency reports must be initiated within two working days and completed within 10 calendar days of the receipt of the report.

| <b>Item 1</b>                 | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|-------------------------------|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                      | 7                           | 15            | 5                    | 27                  | <b>79</b>      |
| ANI                           | 3                           | 1             | 3                    | 7                   | <b>21</b>      |
| <b>Total Applicable Cases</b> | <b>10</b>                   | <b>16</b>     | <b>8</b>             | <b>34</b>           |                |
| Not applicable                | 7                           | 15            | 9                    | 31                  |                |
| <b>Total Cases</b>            | <b>17</b>                   | <b>31</b>     | <b>17</b>            | <b>65</b>           |                |

Item 1 was rated as a Strength when the investigation was initiated and face-to-face contact was established with the child within the timeframes required by State policy or law. Item 1 was rated as an ANI when face-to-face contact was not established within the required timeframes, and in all seven of the cases rated as an ANI, the reports were non-emergency reports requiring a two work day initiation response time. In five of the cases, the investigation was not initiated within the mandated time frame, and in two of these cases there was no face-to-face contact with the child during the investigation period.

**Rating Determination**

Item 1 was assigned an overall rating of ANI. In 79 percent of the applicable cases, reviewers determined that the agency had initiated an investigation of a maltreatment report in accordance with the required timeframes. This percent is less than the 90 percent required for an overall item rating of Strength. For the State’s 2001 CFSR, this item was rated as a Strength.

**Stakeholder Interview Information**

The majority of stakeholders commenting on this item indicated that DSS investigations are initiated and completed in a timely manner. Stakeholders in Lawrence reported that DSS and law enforcement have a good working relationship and will conduct joint interviews on reports. South Central Area Office stakeholders pointed out that the timeliness of investigations may be impacted when families speak languages other than English.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS tracks the timeliness of the completion of investigations and reports that information in the 1<sup>st</sup> quarter of the State Fiscal Year (SFY) 2007. The statewide average for timely completion of investigations was 80 percent, and the regional percentage rate ranged from 77 percent to 90 percent. The Statewide Assessment also indicates that there has been an increase in reports of maltreatment with 67,366 reports in 2002 and 71,900 reports in 2006. The Statewide Assessment attributes this increase in maltreatment reports to focused efforts on public collaboration and public education with regard to mandated reporting. All area offices reportedly conduct ongoing training programs on mandated reporting of child abuse and neglect for local pediatricians, police, clergy and school systems. The Statewide Assessment also indicates that from 2002 to 2006 there was an increase of 580 maltreatment reports specifically associated with children who had no prior report history.

**Item 2. Repeat maltreatment**

Strength       ANI

**Case Review Findings**

The assessment of item 2 was applicable for 29 (45 percent) of the 65 cases. Cases were not applicable for this item if there was no substantiated or indicated maltreatment report during the period under review. For all applicable cases, reviewers were to determine whether there had been a substantiated or indicated maltreatment report on the family during the period under review, and if so, whether another substantiated or indicated report involving similar circumstances had occurred within a six-month period before or after that identified report. Information regarding the ratings is provided below.

| <b>Item 2</b>                 | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|-------------------------------|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                      | 7                           | 10            | 6                    | 23                  | <b>79</b>      |
| ANI                           | 2                           | 2             | 2                    | 6                   | <b>21</b>      |
| <b>Total Applicable Cases</b> | <b>9</b>                    | <b>12</b>     | <b>8</b>             | <b>29</b>           |                |
| Not applicable                | 8                           | 19            | 9                    | 36                  |                |
| <b>Total Cases</b>            | <b>17</b>                   | <b>31</b>     | <b>17</b>            | <b>65</b>           |                |

Item 2 was rated as a Strength when there was no indication of two or more substantiated or indicated maltreatment reports on the family within a six-month period (21 cases), or when there were two or more substantiated reports, but they involved the same maltreatment circumstances (2 cases). Item 2 was rated as an ANI in six cases. In four cases, there were two substantiated maltreatment reports within six months, in one case there were three substantiated maltreatment reports within six months and in one case there were four substantiated reports within six months. These reports involved various circumstances of child neglect as well as child neglect specifically related to domestic violence in the home. There was also one allegation associated with substance abuse and one allegation involving sexual abuse.

Although reports occurring prior to the period under review are not included in the ratings, it was noted that for many of the cases reviewed, there were multiple maltreatment reports on families during the life of the case. Many of these reports were screened out or not substantiated or indicated. More specifically, throughout the case histories there were 17 cases with between 3-5 maltreatment allegations, 18 cases with between 5-10 maltreatment allegations, 10 cases with between 11-20 maltreatment allegations, and two cases with more than 25 maltreatment allegations.

### **Rating Determination**

Item 2 was assigned an overall rating of ANI. In 79 percent of the cases reviewed, reviewers determined that there was no recurrence of maltreatment. This percent is less than the 90 percent required for a rating of Strength. In addition, the State did not meet the National standard for the data indicator for absence of recurrence of maltreatment. In the State's first CFSR, this item was rated as an ANI because the State did not achieve the National standards for repeat maltreatment and maltreatment in foster care.

### **Stakeholder Interview Information**

Stakeholders in the Boston Region indicated that there is a system in place to review cases with multiple reports and also mentioned that the family stabilization team has reviewed a small sample of cases with multiple reports in order to determine what services were provided and whether or not they were effective. Stakeholders from the Boston Region and the South Central area indicated that despite efforts to check with service providers and other collaterals before closing cases, they do experience some of the same families re-entering the system. Various stakeholders attributed this to the complex nature of a family's needs and the short-term nature (three months) of the services that are provided.

**Statewide Assessment Information**

According to the Statewide Assessment, as of the end of the CFSR 12-month reporting period on 3/31/06, Massachusetts’ rate of repeat maltreatment was 10.9 percent. The Statewide Assessment estimates that approximately 70 percent of open cases involve substance abuse, and the agency identifies substance abuse as a contributing factor in repeat maltreatment. In addition, the DSS domestic violence specialists conducted a study of repeat maltreatment cases and found that in a six month period, domestic violence was present in 69.9 percent of the cases. According to the Statewide Assessment, the agency has conducted the following activities in an effort to reduce instances of repeat maltreatment:

- Established a mandatory management review of cases, in which a third report of abuse/neglect (51A) is filed on a family, to evaluate DSS practice and to ensure the needs of the family are being appropriately assessed;
- Hired a substance abuse specialist for each regional office to provide consultation on cases involving substance abuse and worked with the Department of Public Health (DPH) to increase the availability of substance abuse services and to enhance family engagement practices of existing substance abuse services;
- Continued to have domestic violence specialists work out of the regional offices and assist area office caseworkers in determining levels of risk to victims and children;
- Instituted a child exploitation workgroup in the Boston Region that has focused efforts on responding to child sexual exploitation through, a) trainings, outreach events and a prevention program for youth, and b) trainings for social service providers;
- Undertook special efforts in many area offices to educate families and communities on Shaken Baby Syndrome; and,
- Enhanced community partnerships with law enforcement in two area offices to improve identification and responses to child abuse and neglect.

**Safety Outcome 2**

| <b>Safety Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.</b> |                             |               |                      |                     |                |
|--|-----------------------------|---------------|----------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b>                    |                             |               |                      |                     |                |
|  | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved:  | 13                          | 22            | 12                   | 47                  | <b>72.3</b>    |
| Partially Achieved:  | 3                           | 2             | 1                    | 6                   | <b>9.2</b>     |
| Not Achieved or Addressed:   | 1                           | 7             | 4                    | 12                  | <b>18.5</b>    |
| <b>Total Applicable</b>  | <b>17</b>                   | <b>31</b>     | <b>17</b>            | <b>65</b>           |                |

**STATUS OF SAFETY OUTCOME 2**

Massachusetts did not achieve substantial conformity with Safety Outcome 2. The outcome was determined to be substantially achieved in 72.3 percent of the cases reviewed, which is less than the 95 percent or higher required for a rating of substantial conformity.

### **2001 CFSR Findings**

The State did not achieve substantial conformity for Safety Outcome 2 in the 2001 CFSR. Case reviewers found issues with the Department's practices in a) assessing needs of family members and b) providing appropriate and timely services to address these needs in order to keep children safely at home and to reduce the risk of harm for children both at home and in out-of-home care. To address these concerns, the State included the following strategies in four of DSS' seven broad PIP goals:

- Redesign of the intake, assessment, case planning and family engagement processes;
- Development and piloting of a shared approach to case management called "Teaming;"
- Re-procurement and redesign of DSS' contracted services system;
- Targeting of services to meet the specialized needs of adolescents, including expansion of the outreach and tracking program for youth transitioning out of foster care; and,
- Development and implementation of family team meetings.

In addition, the State's PIP included several strategies to increase the ability of staff to assess substance abuse and to assist families in gaining access to needed services including a) staff training and consultation with substance abuse experts, b) service coordination with the Department of Public Health programs, c) prioritized attention given to DSS families in need of substance abuse services, and d) statewide drug screening services.

### **2007 CFSR Findings**

In the 2001 CFSR, services to protect children in their home and to prevent removal (item 3) was rated as an ANI, and it remains a concern in the 2007 CFSR. The 2007 CFSR found some of the same concerns noted in the 2001 CFSR including inconsistencies in ensuring that children receive appropriate services in order to minimize risk of harm and prevent their removal from the home. While in the majority of cases reviewed children did receive appropriate services to support them at home, there were instances in which children remained in unsafe situations without their service needs being appropriately assessed or addressed.

Stakeholders agreed that the agency regularly provides a wide variety of services to children and families although there are also some basic service gaps across the State including transportation options, psychiatric services, post-adoption services, and foster homes. While the Boston Region is reportedly well-resourced in terms of crisis stabilization services, there is a need for additional crisis stabilization services in some areas of the State.

In the 2001 CFSR, risk of harm (item 4) was rated as a Strength, yet in the 2007 CFSR, there were inconsistencies identified in ensuring that adequate safety and risk assessments were conducted and that risk of harm was adequately addressed for children. There were also some inconsistencies identified in assessing risk for children in foster care as well as for children who are reunified with their families.



Stakeholders generally indicated that the agency utilizes Family Group Conferencing, Teaming, Multi-Disciplinary Assessment Teams (MDAT) and clinical review teams to assess and minimize risk to children. However, some stakeholders attributed the State’s inconsistency in assessing risk to the lack of a standardized risk assessment tool. Stakeholders indicated that the Boston Region is finding it particularly challenging to manage risk for children who run away or who are involved with gangs and prostitution.

The findings pertaining to the specific items assessed under Safety Outcome 2 are presented below.

**Item 3. Services to family to protect child(ren) in home and prevent removal**

Strength      ANI

**Case Review Findings**

An assessment of item 3 was applicable in 45 (69 percent) of the 65 cases. Cases were excluded from this assessment if the children entered foster care prior to the period under review, and there were no other children in the home or if there was no substantiated or indicated maltreatment report or identified risk of harm to the children in the home during the period under review. For this item, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families to prevent placement of children in foster care while ensuring their safety. The results of this assessment are shown in the table below.

| Item 3                        | Lawrence Area Office | Boston    | South Central | Total Number | Percent   |
|-------------------------------|----------------------|-----------|---------------|--------------|-----------|
| Strength                      | 12                   | 17        | 7             | 36           | <b>80</b> |
| ANI                           | 2                    | 3         | 4             | 9            | <b>20</b> |
| <b>Total Applicable Cases</b> | <b>14</b>            | <b>20</b> | <b>11</b>     | <b>45</b>    |           |
| Not applicable                | 3                    | 11        | 6             | 20           |           |
| <b>Total Cases</b>            | <b>17</b>            | <b>31</b> | <b>17</b>     | <b>65</b>    |           |

Item 3 was rated as a Strength when reviewers determined the following:

- Services were provided to the parents and child to prevent removal (21 cases). Three of these cases were foster care cases in which the services were provided to children who remained at home in order to prevent their removal.
- The children were appropriately removed from the home because the removal was necessary to ensure the child’s safety (10 cases). In nine of the 10 cases, the child was removed from the home due to the need for protection from abuse and neglect, and in one of these cases, the removal was due to the child’s need for substance abuse treatment.
- The family received post-reunification services to prevent the child’s reentry into foster care (5 cases).

Case-review information indicates that a range of services was offered or provided to families. These included (but were not limited to) the following: youth tracking services, individual and family mental health services, educational coordination, day care, early intervention, parent aides, parenting support groups, recreational and after school programs, domestic violence services, SPARKS (rapid stabilization and reunification congregate care program), and anger management.

Item 3 was rated as an ANI when reviewers determined the following:

- Services were not provided and children remained in unsafe situations in the home (7 cases).
- The child's placement in foster care could have been prevented if services had been provided (1 case).
- No services were provided after reunification to ensure the child's ongoing safety and to prevent re-entry (1 case).

### **Rating Determination**

Item 3 was assigned an overall rating of ANI. In 80 percent of the cases, reviewers determined that DSS had made concerted efforts to maintain children safely in their own homes. This percent is less than the 90 percent required for a rating of Strength. This item was also rated as an ANI in the 2001 CFSR.

### **Stakeholder Interview Information**

The majority of stakeholders commenting on this item indicated that the State engages in efforts to provide services to children and families although there are service gaps that exist in the State. Stakeholders in Boston and the South Central area indicated that the agency has made improvements in engaging families through family team meetings and through service provision. In addition, a few stakeholders from the Boston Region indicated that the region has the capability to mobilize resources to stabilize families, and the agency connects many families to early intervention and child care services. However, a few South Central Area Office stakeholders reported that there are gaps in community-based services, there may be waiting time for agency purchased services, and there is a general lack of transportation available to families in the area. A few Boston Region stakeholders also noted that there is a lack of resources for mothers with substance abuse problems.

In addition, a few State-level stakeholders described the agency's plans for a differential response system which has evolved through statewide discussions. According to stakeholders, the alternative response model is based on a family engagement approach and will include longer investigation periods in order to discern whether reports should be routed to a child protective track, a family stabilization services track or an agency assisted track that links families to community supports. State-level stakeholders also indicated that there are current efforts in the State to reform the Child in Need of Services (CHINS) system, as it was indicated that parents lose custody temporarily when they seek services for their children through the court. According to stakeholders, the agency and legislature have been crafting legislation that will create an alternative system for children in need of services which would not require families to petition the court for such services.

### **Statewide Assessment Information**

According to the Statewide Assessment, the percent of CPS cases that have resulted in placement has decreased from 25 percent in CY 2002 to 23 percent in CY 2004 to 22 percent in CY 2006. Through Child in Need of Services petitions (CHINS), courts are able to order DSS involvement and out-of-home placements for children. The Statewide Assessment notes that of those children who become involved with the Department through CHINS, 33 percent end up being placed out of their homes. The Statewide Assessment also reports that in the metro region, approximately 43 percent of CHINS cases include out-of-home placements. According to a 2007 study by the Juvenile Rights Advocacy Project at Boston College Law School, an analysis of a five year entry cohort of children in the DSS system revealed that 25 percent of children were in custody as the result of a CHINS proceeding, and 20 percent of all children in placement during CY 2005 were CHINS (n=3,603).

According to the Statewide Assessment, DSS perceives family engagement, family stabilization services, and access to key community supports as important aspects of preventing maltreatment recurrence. To support maintaining children in their homes, DSS utilizes the Family Networks system, an integrated system of DSS-purchased and community support services that are coordinated by 29 Area Lead Agencies and six Regional Resource Centers across the State. Family Team Meetings are used in all area offices in conjunction with Family Networks in order to meet the unique service needs of families. DSS also uses the Community Connections and Patch programs to incorporate family support principles into case practice, to facilitate more community-based interventions, to support resident-driven support networks in high risk communities, and to advocate for needed services in local communities. The Statewide Assessment also reports that initiatives such as Teaming, Family Group Conferences, service coordination from lead agencies, and enriched support and stabilization services are important practices in ensuring that children do not return to foster care upon achievement of the permanency goal.

The Statewide Assessment also reports that DSS has engaged in the following efforts to support families:

- Worked with the legislature to allow for the transfer of funds from residential accounts to community-based services;
- Expanded the provision of family support and education through additional Family Nurturing Center programs;
- Created 12 community-based child witness to violence programs throughout the State;
- Engaged in a number of strategies to promote family-centered practices through extensive training opportunities;
- Implemented Connecting Families, a voluntary, alternative response program for families with children under age 12 who have an unsupported abuse and neglect allegation;
- Engaged in efforts to reform the current CHINS legislation to divert children in crisis to a community-based crisis intervention system;
- Engaged in local efforts to educate judges about alternatives to out-of-home-placements associated with CHINS cases; and,
- Area offices engaged in a number of unique practice initiatives and/or collaborative responses to identified issues in their local service populations. For example, some area offices have developed respite services for parents to help maintain the safety and stability of the home.

**Item 4. Risk of harm to child**

\_\_\_ Strength     X  ANI

**Case Review Findings**

An assessment of item 4 was applicable for all 65 cases. The results of this assessment are shown in the table below.

| <b>Item 4</b>                 | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|-------------------------------|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                      | 14                          | 22            | 12                   | 48                  | <b>74</b>      |
| ANI                           | 3                           | 9             | 5                    | 17                  | <b>26</b>      |
| <b>Total Applicable Cases</b> | 17                          | 31            | 17                   | 65                  |                |

As shown in the table, performance on this item was similar across two of the sites. The item was rated as a Strength in 82 percent of the Lawrence Area Office cases and 71 percent of the Boston Region and South Central Area Office cases. The item was rated as a Strength in 72.5 percent of the foster care cases and 76 percent of the in-home services cases.

Item 4 was rated as a Strength when reviewers determined that the risk of harm to children was appropriately addressed by the agency through (1) conducting initial and ongoing assessments of risk and safety either in the children’s home or in children’s foster home and (2) addressing all safety-related concerns identified through the assessment. In the review of cases, reviewers also noted that the State does not currently use a standardized tool to assess risk. Item 4 was rated as an ANI when reviewers determined the following:

- Adequate safety and risk assessments were not conducted, and the risk to the child was not addressed (11 cases).
- There was risk of harm to the child in the foster care setting and the services necessary to reduce that risk were not provided (3 cases).
- The child was reunified, and services necessary to reduce risk were not provided (2 cases).
- Although risk assessments were adequate, the services necessary to reduce risk to the child were not provided (1 case).

**Rating Determination**

Item 4 was assigned an overall rating of ANI. In 74 percent of the applicable cases, reviewers determined that DSS had appropriately addressed the risk of harm to the children. This percent is less than the 90 percent or higher required for an overall rating of Strength. In the State’s first CFSR, conducted in 2001, this item was rated as a Strength.

### **Stakeholder Interview Information**

Stakeholders commenting on this item were in general agreement that the agency seeks to address safety issues and minimize risk of harm through the provision of services. Various stakeholders reported that across the State, area offices use some combination of Family Group Conferencing, Teaming, Multi-disciplinary Assessment Teams (MDAT), and clinical review teams to address risk of harm. In addition, stakeholders mentioned that there are domestic violence protocols and domestic violence and substance abuse specialists who consult with area offices on these types of risks for children and families.

Some stakeholders also identified certain safety issues that are of particular concern to them. For example, many stakeholders in the Boston Region identified children running away as a particularly challenging risk factor for the agency to manage. Boston Region stakeholders also indicated that child sexual exploitation and gang violence are putting children in the metro area at risk. Stakeholders in the South Central area reported that DSS and the courts appear to make decisions about reunification without enough consideration of the safety concerns expressed by foster parents.

Stakeholders also shared information with regard to investigation standards for reports of abuse and neglect in congregate care and foster care settings. State-level stakeholders indicated that the incidence of 51A maltreatment reports has dropped since the agency instituted new behavior management and restraint regulations, and the incidence of restraint complaints has also decreased. State-level and Boston Region stakeholders reported that the agency has a low threshold for accepting 51A's in foster care, and some foster parents have expressed frustration with this.

### **Statewide Assessment Information**

In order to minimize risk of harm to children, DSS has undertaken the following efforts since the 2001 CFSR:

- “The Family Resource Policy”, revised in 2006, ensures that foster and pre-adoptive family resources support the health and well being of the children in these homes.
- Additional foster care and adoption support staff were hired to increase routine monitoring of family resource standards.
- The Family Networks model of service delivery was implemented and standards associated with congregate care and intensive foster care were improved.
- DSS is in the process of developing a differential response model and a standardized risk assessment.
- In some area offices, Teaming was adopted as a case management practice that involves teams of case managers who share clinical and casework decision-making.

According to the Statewide Assessment, residential treatment programs are required to file maltreatment reports on behalf of children from other States who reside in their programs, and these programs are also required to file reports on behalf of children when maltreatment has occurred in settings outside the program site. The Statewide Assessment reports that this impacts the State's rate of maltreatment in foster care.

## II. PERMANENCY

### Permanency Outcome 1

| <b>Outcome P1: Children have permanency and stability in their living situations.</b>   |   |                                |                                |                     |                |
|---|---|--------------------------------|--------------------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b> |   |                                |                                |                     |                |
|   | <b>Lawrence Area Office</b>             | <b>Boston</b>                  | <b>South Central</b>           | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved  | 4                                       | 10                             | 4                              | 19                  | <b>47.5</b>    |
| Partially Achieved  | 6                                       | 7                              | 5                              | 18                  | <b>45</b>      |
| Not Achieved or Addressed   | 0                                       | 2                              | 1                              | 3                   | <b>7.5</b>     |
| <b>Total Applicable Foster Care Cases</b>   | <b>10</b>                               | <b>19</b>                      | <b>10</b>                      | <b>40</b>           |                |
| <b>Conformity of Statewide data indicators with National standards:</b>                 |   |                                |                                |                     |                |
|   | <b>National Standard (Scaled Score)</b> | <b>State's Composite Score</b> | <b>Meets Standard (Yes/No)</b> |                     |                |
| Composite 1: Timeliness and permanency of reunification                                 | 122.6 +                                 | 118.4                          | NO                             |                     |                |
| Composite 2: Timeliness of adoptions  | 106.4 +                                 | 78.3                           | NO                             |                     |                |
| Composite 3: Permanency for children in foster care for extended time periods           | 121.7 +                                 | 116.6                          | NO                             |                     |                |
| Composite 4: Placement stability  | 101.5 +                                 | 77.4                           | NO                             |                     |                |

### STATUS OF PERMANENCY OUTCOME 1

Massachusetts did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following findings:

- The outcome was substantially achieved in 47.5 percent of the cases, which is less than the 95 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for the 12-month CFSR period ending 03/31/06, the State did not meet the National standards for the four Composite measures including:
  - Composite 1: Timeliness and permanency of reunification
  - Composite 2: Timeliness of Adoptions
  - Composite 3: Permanency for Children in Foster Care for Extended Periods of Time
  - Composite 4: Placement stability

Massachusetts' performance on Permanency Outcome 1 varied across sites. The outcome was found to be substantially achieved in 53 percent of the Boston Region cases, compared to 40 percent of the Lawrence Area Office and South Central Area Office cases.

Performance on the individual measures included in all composites is presented in the discussion of the items related to each measure.

### **2001 CFSR Findings**

The State did not achieve substantial conformity for Permanency Outcome 1 in the 2001 CFSR. The CFSR identified the following key concerns with regard to achieving permanency for children in foster care: The State did not meet the required performance level for any of the four National standards associated with this Outcome. In addition, the case review identified delays in achieving permanency which were found to be a result of the following legal or procedural obstacles:

- The child's permanency goal was not clearly agreed upon by involved parties and/or there was a lengthy period before the goal was appropriately changed.
- Alternative, appropriate permanency goals were not explored before another planned permanent living arrangement (APPLA) was established as a goal.
- There were delays in scheduling, hearing and reaching a decision in TPR trials.
- Appropriate permanency/transition services were not provided.
- There was incomplete and/or untimely submission of paperwork to the Courts or through the Interstate Compact on the Placement of Children (ICPC) Unit.

Some of the Massachusetts' PIP goals were focused on lessening delays in achieving permanency, increasing efforts to find permanent families for older youth in particular, and supporting both substitute care and permanent placements. In successfully achieving these PIP goals, the Department and the Courts implemented the following strategies:

- Permanency planning policies were updated.
- Practices for making permanent connections for adolescents were developed and implemented.
- Foster Care Review staff were trained on adolescent issues and resources.
- Career and work opportunities for adolescents were developed.
- Increased collaboration between DSS and the Courts was initiated and judicial resources were more effectively utilized.
- An enhanced permanency hearing model for youth with APPLA as a goal was developed and implemented.

In addition, other PIP goals contained strategies for improving permanency outcomes related to foster care reentries, placement stability, and reunification and adoption. To improve outcomes related to these areas, DSS undertook a) the redesign of the intake, assessment, service planning systems, b) the redesign and implementation of an invigorated service array with lead agencies having the ability to individualize services and the capacity to strengthen linkages to the community, and c) the development and implementation of family group conferencing and teaming.



### **2007 CFSR Findings**

Similarly to the 2001 CFSR, foster care re-entries (item 5), stability of foster care placements (item 6) permanency goal for the child (item 7), adoption (item 9), and permanency goal of APPLA (item 10) remain challenging areas for DSS as indicated by the 2007 CFSR. Related and additional key findings of the 2007 CFSR are presented as follows:

- The case review and the Data Profile for the Composite 1 individual measure on foster care re-entries indicate that Massachusetts has challenges in preventing foster care re-entries within a 12 month period (item 5).
- The case review indicates that there are inconsistencies in maintaining stable placements for foster children particularly as relates to a) meeting their mental and behavioral needs, b) ensuring that their placements are safe and well-supported, and c) addressing the behaviors of children who run away. In addition, the State did not meet any of the National standards for Composite 4: Placement Stability for the 12-month CFSR period ending 3/31/06 (item 6).
- Massachusetts continues to experience inconsistencies with regard to the establishment of timely and appropriate permanency goals for children in foster care, and the State is not consistently meeting ASFA requirements and filing for TPR in a timely manner. Also, the State did not meet the National standard for data Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time (item 7).
- Information from the case reviews and data from Composite 2: Timeliness of Adoptions indicates that the State is not consistently completing adoptions in a timely manner (item 9).
- The case review findings also suggest that the State is not consistently assisting youth in achieving the goal of permanent placement or a permanent foster care placement. In particular, there were inconsistencies with regard to ensuring that there were formal agreements between youth and their caregivers (item 10).

Despite these challenges, the case review findings indicate that Massachusetts is effective and timely in achieving reunifications and guardianships for children. However, the State did not meet the National standard for data Composite 1: Timeliness and Permanency of Reunification (item 8).

Stakeholders expressed the following concerns relevant to this outcome:

- There are disruptions in adoptions and guardianships, and there is a need for more post-permanency services in the State.
- There is a lack of resource homes available for adolescents in the State.
- There are children who are staying in night-to-night placements, and spending time in local offices awaiting placements; and while the agency searches for the appropriate placement for the child, multiple placement changes are occurring.
- There are delays in timely filing for TPR when an adoptive resource or another permanent placement option has not been identified for a child; and although there are provisions for expedited appeals, the appeals process remains lengthy.

Despite these concerns, stakeholders also expressed the following with regard to this outcome:

- The agency consistently uses the Permanency Planning Conferences (PPC) to address children’s permanency goals at nine months after entry into foster care and the Foster Care Reviews to address the child’s case plan goals at six-month intervals.
- The Boston Region is reportedly effective in engaging in concurrent planning.
- Adolescent Outreach Services are effective and reportedly helpful to youth who wish to find jobs, complete school and go to college.

Findings pertaining to the specific items assessed under Permanency Outcome 1 are presented below.

**Item 5. Foster care re-entries**

Strength  ANI

**Case Review Findings**

An assessment of item 5 was applicable for 15 (37.5 percent) of the 40 foster care cases. Cases were not applicable for assessment if the child did not enter foster care during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The results of this assessment are presented in the table below.

| Item 5                                    | Lawrence Area Office | Boston   | South Central | Total Number | Percent |
|---|----------------------|----------|---------------|--------------|---------|
| Strength                                  | 4                    | 5        | 3             | 12           | 80      |
| ANI                                       | 2                    | 1        | 0             | 3            | 20      |
| <b>Total Applicable Foster Care Cases</b> | <b>6</b>             | <b>6</b> | <b>3</b>      | <b>15</b>    |         |
| Not Applicable Foster Care Cases          | 4                    | 14       | 7             | 25           |         |

State performance for the 12-month CFSR period ending 03/31/06 on the individual measure of foster care reentry (Measure C1.4) included in Composite 1: Timeliness and Permanency of Reunification was as follows: 15.7 percent of the children exiting foster care reentered foster care in less than 12 months. For the data set used to establish the National standards for the data composites, the median performance on this measure was 15 percent, and the 25<sup>th</sup> percentile was 9.9 percent. For this measure, lower percentages are associated with higher levels of performance. These data indicate that Massachusetts performed below the median performance for the data used to establish the National standards.

Item 5 was rated as a Strength when the entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode. Item 5 was rated as an ANI when the entry into foster care during the period under review occurred within 12 months of the child's discharge from a prior foster care episode.

### **Rating Determination**

Item 5 was assigned an overall rating of ANI. The item was rated as a Strength in 80 percent of the cases, which is less than the 90 percent or higher required for a rating of Strength. In the 2001 CFSR, this item was rated as an ANI based on the State not meeting the National standard for foster care reentries.

### **Stakeholder Interview Information**

Stakeholders commenting on this item were of mixed opinion with regard to foster care re-entries. Stakeholders in Boston and the South Central area indicated that the agency generally attempts to facilitate reunifications with wrap-around services. However, state-level and South Central Area Office stakeholders also said that expedited legal timeframes under ASFA may result in children reunifying too quickly with parents who have substance abuse histories, and this may result in children reentering foster care as a result of parental relapses. Stakeholders across the sites indicated that there are disruptions in adoptions and guardianships, and they attributed this to premature case closures and the need for more post-permanency services in the State.

### **Statewide Assessment Information**

According to the Statewide Assessment, the 1<sup>st</sup> quarter SFY 2007 statewide average for re-entries into out-of-home care within six months was seven percent. The Statewide Assessment reports that better outcomes in the area of foster care re-entries are tied to a) engagement of families in case planning, b) increased individualization of services and availability of informal community supports, and c) increased availability of services to support a child's transition home.

DSS also established the Housing Stabilization Unit in 2004 in order to provide consultation to caseworkers and direct services to families involved with DSS who are experiencing housing instability. This Unit works with other state agencies to address family issues of poverty and homelessness particularly in cases where child protection issues have been resolved.

The Statewide Assessment also reported various efforts specific to local area offices, including the following:

- Increased extracurricular activities available for youth who are returning home;
- Provision of six months of post-reunification services through the FIRST Team (Family Intensive Reunification and Stabilization Team);
- Provision of after-care and support and stabilization services for a minimum of three months upon a child's return home;
- Provision of life enhancement opportunities for youth with adult mentors;
- Implementation of a Nurturing Program for Birth and Foster Families;
- Development of a program partnership which supports caseworkers and foster care providers working with the child and parents during reunification;

- Institution of the Early Intervention Visitation Model which has proved successful in preventing foster home reentries;
- Resources directed toward increasing the number of Family Group Conferencing facilitators and services to parents of adolescents who are returning home (based efforts on Continuous Quality Improvement findings with regard to reentries); and,
- Increased financial incentives for foster parents to support biological parents with youth returning home.

**Item 6. Stability of foster care placement**

\_\_\_ Strength     X  ANI

**Case Review Findings**

All 40 foster care cases were applicable for an assessment of Item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child's permanency goal or meet the child's service needs. Reviewers also assessed the stability of the child's current placement setting. The findings of this assessment are presented in the table below.

| Item 6                                    | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 6                    | 15        | 5             | 26           | 65      |
| ANI                                       | 4                    | 5         | 5             | 14           | 35      |
| <b>Total Applicable Foster Care Cases</b> | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |         |

Performance on this item varied across review sites. The item was rated a Strength in 75 percent of the Boston Region cases, compared to 60 percent of the Lawrence Area Office cases and 50 percent of the South Central Area Office cases.

Massachusetts' performance for the 12-month CFSR period ending 3/31/06 was below the National performance standards on all three individual measures of placement stability included in Composite 4: Placement Stability, as presented below.

- 74.1 percent of the children in foster care for less than 12 months experienced two or fewer placement settings. The State scored below the National median (83.3 percent) for the data set used to establish the National standards for the data composites.
- 48.6 percent of the children in foster care for at least 12 months but less than 24 months experienced two or fewer placement settings. The State scored below the National median (59.9 percent) for the data set used to establish the National standards for the data composites.
- 22.5 percent of the children in foster care for at least 24 months experienced two or fewer placement settings. The State scored below the National median (33.9 percent) for the data set used to establish the National standards for the data composites.

Item 6 was rated as a Strength when reviewers determined the following:

- The child did not experience a placement change during the period under review, and either the current placement was stable, the child was discharged from foster care or the child was adopted during the period under review (17 cases).
- The placement changes experienced were in the child's best interest and were intended either to promote achieving the child's permanency goal or to provide specialized services to the child (9 cases). For example, in five cases placement changes were made to move the child into a less restrictive setting.

Item 6 was rated as an ANI when reviewers determined the following:

- The child experienced multiple placements, and at least one placement change was not in the child's best interest (10 cases). For example, in two cases the child was removed from a foster home due to safety concerns in the child's foster home. In two other cases, the child experienced multiple placements because the child's mental and behavioral health needs were not being appropriately addressed by the agency.
- The child's current placement was not stable (4 cases). For example, in one case the child was on runaway status five times during the period under review. In another case there was a lack of services provided, and a guardianship was disrupted.

Additional findings of the case review were the following:

- Children in 18 cases experienced only one placement during the period under review.
- Children in 13 cases experienced two placements during the period under review.
- Children in 9 cases experienced three or more placements during the period under review.

### **Rating Determination**

Item 6 was assigned an overall rating of ANI. In 65 percent of the applicable cases, reviewers determined that children experienced placement stability or that changes in placements were in the best interests of the child. This percent is less than the 90 percent or higher required for a rating of Strength. Item 6 was also rated as an ANI in the 2001 CFSR because the State did not meet the National standard for placement stability.

### **Stakeholder Interview Information**

Stakeholders across the sites who commented on this item consistently reported challenges associated with placement stability for adolescents in the State. Various stakeholders indicated a number of reasons for this, including:

- There is a lack of resource homes for adolescents.
- Many temporary placements occur during the time period when a child first enters foster care until the time at which the child is placed in an appropriate setting that meets his/her needs.
- In some regions, the agency uses "hotline" homes to place children (usually youth) until an appropriate placement is established. In many of these homes, children do not have the option of being there during the day, so they spend time at the area offices

awaiting confirmation of their next placement. For some youth, this pattern of “night-to-night” placement may occur with regularity.

- Children may be placed wherever there is a bed, and this may result in poor matches.

Stakeholders in the South Central area and the Boston Region also described agency efforts that support placement stability. For example, Boston Region stakeholders indicated that resource staff are increasing supports to unstable placements in an effort to minimize disruptions, and there is an increased use of planned respite care services. Resource staff in the South Central Area Office are reportedly utilizing adolescent assessments for youth coming into foster care, and there are enhanced rates available for adolescent foster parents in the area.

A few stakeholders also commented on the State’s use of the new STARR model of short-term out-of-home care and the shift to more placements in community-based settings in place of institutions. Stakeholders from the state-level and the Boston Region reported that the STARR program provides enhanced diagnostic care for youth in need of a temporary placement. A few stakeholders indicated, however, it is sometimes difficult to transition youth from the STARR placement to a less structured setting. Also, a few stakeholders from the Boston Region noted that more youth are being placed in intensive family foster care which increases the availability of beds at group homes resulting in group home providers accepting referrals for youth with higher end needs. Stakeholders noted that in some cases, these group homes are not appropriate settings for such youth.

#### **Statewide Assessment Information**

The Statewide Assessment indicates that the following may be influencing factors with regard to placement stability for foster children in Massachusetts:

- Ineffective matches between children and resource homes;
- Foster parents who have not been adequately trained or supported in caring for the child;
- Assessment of children’s placement needs in a STARR program results in an additional placement; and,
- Inadequate information provided to family foster care and congregate care providers during emergency placement of children.

In addition, the Statewide Assessment reports findings from a review of AFCARS data based on children who had been in placement for 12 months or less as of 12/31/06. These data show that 75 percent of these children had two or fewer placements and that greater numbers of younger children (ages 0 to 2, 3 to 5, and 6 to 11) had two or fewer moves while adolescents (ages 12-17) had the most moves.

According to the Statewide Assessment, the agency has undertaken the following efforts to address placement instability for foster children:

- Standards have been established for intensive foster care providers to ensure adequate support for foster parents.

- A database has been developed which will allow the agency to track the placement stability of the child through the child, the resource provider, the service provider as well as the area, regional and statewide offices.
- The agency increased its focus on obtaining kinship placements, and this has led to the creation of kinship units, kinship breakthrough series training, and additional efforts to identify kin for children in the child welfare system.
- Various local offices have undertaken site-specific efforts to provide additional supports for foster parents and children through a) training and foster family support groups, b) informational booklets that offer a balanced picture of youth strengths and needs, interests and challenges for foster parents, and c) kinship surveys to identify the needs of DSS kinship providers.

**Item 7. Permanency goal for child**

Strength  ANI

**Case Review Findings**

Thirty-nine (97.5 percent) of the 40 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established a permanency goal for the child in a timely manner and whether the most current permanency goal was appropriate. The results of this assessment are shown below.

| Item 7                                    | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 7                    | 13        | 6             | 26           | 67      |
| ANI                                       | 3                    | 6         | 4             | 13           | 33      |
| <b>Total Applicable Foster Care Cases</b> | <b>10</b>            | <b>19</b> | <b>10</b>     | <b>39</b>    |         |

Performance on this item varied across sites. The item was rated as a Strength in 68 percent of the Boston Region cases, compared to 70 percent of the Lawrence Area Office cases and 60 percent of the South Central Area Office cases.

Massachusetts’ performance for the 12-month CFSR period ending 3/31/06 on the individual measures incorporated in Permanency Composite 3: Achieving Permanency for Children in Foster Care for Long Periods of Time is presented below.

- 23.7 percent of the children in foster care for 24 months or longer at the start of the fiscal year were discharged from foster care to a permanent home (i.e., adoption, reunification with parents or other relatives, or guardianship) by the end of the fiscal year. This percent is below the National median (25 percent) for the dataset used to establish the National standards.
- 98.1 percent of the children exiting foster care who were legally free for adoption at the time of exit were discharged to a permanent home. This percent is better than the National median (96.8 percent) and equal to the 75<sup>th</sup> percentile (98 percent) for the data set used to establish the National standards for this measure.



- 46.4 percent of the children who were discharged from foster care with a discharge reason of emancipation had been in foster care for three years or longer at the time of discharge. This percent is better than the National median of 47.8 percent but below the 25<sup>th</sup> percentile (37.5 percent) for the data set used to establish the National standards. For this measure, lower scores indicate more positive performance.

Item 7 was rated as a Strength when reviewers determined that the child's permanency goal was appropriate and had been established in a timely manner. The case was rated as an ANI when reviewers determined one of the following:

- The child's permanency goal was not established in a timely manner nor was it appropriate to the needs of the child (5 cases).
- The child's permanency goal was not established in a timely manner (4 cases).
- The permanency goal is not appropriate to the needs of the child (2 cases).
- TPR was not sought in accordance with ASFA timelines (2 cases).

Case review findings pertaining to case plan goals were as follows:

- 15 children had a single goal of APPLA.
- 11 children had a single goal of adoption.
- 10 children had a single goal of reunification (including living with other relatives).
- 1 child had a goal of guardianship
- 1 child had concurrent goals of reunification with parents and reunification with relatives
- 1 child had concurrent goals of guardianship and reunification with parents

Case review findings pertaining to termination of parental rights (TPR) were as follows:

- At the time of the onsite review, 25 of the children in the 40 foster care cases had been in foster care for 15 of the most recent 22 months.
- In 11 of the cases, a TPR petition had been filed in a timely manner.
- In six of the 14 cases for which TPR had not been filed at 15-months, a reason for not filing for TPR was noted. In the eight remaining cases, there was no reason identified for not filing for TPR, although the 15-month criterion had been met.

### **Rating Determination**

Item 7 was assigned an overall rating of ANI. Case reviewers found that in 67 percent of the applicable cases, the agency had established an appropriate permanency goal for the child in a timely manner. This percent is less than the 90 percent or higher required for a rating of Strength. In the State's 2001 CFSR this item was also rated as an ANI.

**Stakeholder Interview Information**

Stakeholders commenting on this item consistently identified the Permanency Planning Conference (PPC), held at nine months of a child's entry into a foster care, and the foster care review system, held every six months, as effective and timely mechanisms for ensuring appropriate and timely achievement of permanency goals. A few stakeholders from the Boston Region identified Family Group Conferencing and the "Casey Breakthrough Series on Adolescent Permanency" as having a positive effect as well. Alternatively, Boston Region stakeholders indicated that the number of substance abuse cases in the area inhibit timely adherence to ASFA, and South Central Area Office stakeholders noted that while the agency works well at timely achievement of permanency goals, the court often postpones cases, causing delays.

Stakeholders also commented on post-permanency outcomes. Boston Region stakeholders indicated that there are disruptions in placements for children and suggested that additional post-permanency services are needed to prevent these. State-level stakeholders also indicated that there are problems which lead to permanency disruptions and that there is a need for additional data to more accurately characterize the problem.

**Statewide Assessment Information**

According to the Statewide Assessment, the State monitors performance in the area of permanency for children by a) ensuring that case plans identify permanency goals, b) ensuring that case plans are completed in a timely manner, and c) reviewing permanency goals at the six-month foster care reviews. The Statewide Assessment indicates that the agency tracks the timeliness of service plans and the circumstances of goal changes through child welfare and managerial outcome reports in the Continuous Quality Improvement (CQI) Data Book. The Statewide Assessment reports that the type and number of goal changes are usually affected by a) the length of time the child has been in foster care and the extent of progress made toward the goal, particularly on cases involving substance abuse, b) the quality of the relationship between the caseworker and the family, and c) the degree to which judges in certain areas of the State are reluctant to set the goal of adoption without an identified pre-adoptive resource.

In addition, the Statewide Assessment reports that teams from all 29 area offices participated in the "Massachusetts Breakthrough Series Collaborative on Adolescent Permanency" in 2005 and tested different approaches to working with adolescents, families, and community partners to improve youth and family involvement and timely achievement of permanency goals. The Statewide Assessment reports that promising practices were disseminated via the web. As a result of participating in the Breakthrough Series, one area office, for example, began including youth in their Permanency Planning Conferences (PPC).

**Item 8. Reunification, Guardianship, or Permanent Placement with Relatives**

  X   Strength         ANI

**Case Review Findings**

Item 8 was applicable for 13 (32.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the permanency goals of reunification, guardianship, or permanent placement with relatives in a timely manner or, if the goals had not been achieved, reviewers were to determine whether the agency had made, or was in the process of making, diligent efforts to achieve the goals. The results of this assessment are shown in the table below.

| Item 8                                    | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 6                    | 5         | 1             | 12           | 92      |
| ANI                                       | 0                    | 1         | 0             | 1            | 8       |
| <b>Total Applicable Foster Care Cases</b> | <b>6</b>             | <b>6</b>  | <b>1</b>      | <b>13</b>    |         |
| Not Applicable Foster Care Cases          | 4                    | 14        | 9             | 27           |         |
| <b>Total Foster Care Cases</b>            | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |         |

Massachusetts’ performance in the 12-month CFSR period ending 3/31/06 on the National indicators for timeliness of reunification measures included in Data: Timeliness and Permanency of Reunification were as follows:

- 70.4 percent of the reunifications occurred in less than 12 months of the child’s entry into foster care. This percent is better than the median of 69.9 percent for the data set used to establish the National standards.
- The median length of stay in foster care for children discharged to reunification was 6.5 months. This length of stay is equal to the National median of 6.5 months but below the 25<sup>th</sup> percentile (5.4 months) for State performance on this measure for the data set used to establish the National standards for composite 1. (Note that lower number of months means higher performance.)
- 49.4 percent of children entering foster care in the last six months were discharged from foster care to reunification within 12 months of entry into foster care. This percent exceeds the 75<sup>th</sup> percentile (48.4 percent) for State performance on this measure for the data set used to establish the National standards.

Item 8 was rated as a Strength in 12 cases when reviewers determined that the goal had been achieved in a timely manner or that the agency was making concerted efforts to achieve the goal in a timely manner. Item 8 was rated as an ANI in one case with a goal of reunification in which reviewers determined that the agency had not made concerted efforts to achieve the goal in a timely manner.

### **Rating Determination**

Item 8 was assigned an overall rating of Strength. Case reviewers found that in 92 percent of the applicable cases, the agency had made diligent efforts to attain the goals of reunification or permanent placement with relatives in a timely manner. This percentage is higher than the 90 percent or higher required for a rating of Strength. In the State's 2001 CFPSR, there was no comparable item. At that time, item 8 pertained to independent living services. The change for item 8 from an assessment of independent living services to an assessment of timeliness of achieving goals of reunification, guardianship and permanent placement of relatives was not made until FFY 2002.

### **Stakeholder Interview Information**

Stakeholders from Boston and Lawrence indicated that post-reunification, wrap-around and transitional services are available through Family Networks. Although both current policy and the case plan goal format do not specifically support concurrent planning, stakeholders in the Boston Region reported that the agency engages in concurrent planning with dual goals of reunification and adoption. Stakeholders from the State indicated that guardianship is a common goal for children, and guardianship subsidies are available, but there were some difficulties noted with guardianship disruptions.

### **Statewide Assessment Information**

According to the Statewide Assessment, in the first quarter of SFY 2007, 58 percent of children exiting foster care returned home to their families, and 58 percent of children who had the goal of guardianship had their guardianship finalized within 24 months of out-of-home care. The Statewide Assessment sites a number of factors that impact reunification performance, including domestic violence, substance abuse, the quality and frequency of visitation between children and their families, the proximity of the placement to the child's family, and the severity of emotional disturbance of the child. The Statewide Assessment reports that the permanency exits of 368 youth, aged 16 and 17, were recently reviewed by the agency, and DSS found that girls were four times more likely to be reunified than boys. In this review, 60.4 percent of the adolescents were reunified, 9.4 percent had guardianships, 1.4 percent were adopted, and 28.8 percent exited as runaways (girls were twice as likely to be runaways).

The Statewide Assessment also cites the following strategies as having a positive impact with regard to reunifying families:

- Six-week placement reviews have been instituted in a number of area offices.
- There has been an increased reliance on strengths-based service planning, post-reunification services, and use of community supports and informal resources.
- Training on family-centered practice and solution-focused case management has been provided to DSS staff.
- Various area offices have undertaken specific initiatives such as the creation of a Family Assisted Rapid Reunification (FARR) model, the expansion of transportation options that support visitation, a fathers' reunification support group, and enforcement of intensive foster care standards related to children's weekly visits with their families.

**Item 9: Adoption**

\_\_\_\_ Strength     X  ANI

**Case Review Findings**

Item 9 was applicable for 11 (27.5 percent) of the 40 foster care cases. In assessing this item, reviewers were to determine whether diligent efforts had been made or were being made to achieve finalized adoptions in a timely manner. The results are shown in the table below.

| Item 9                                    | Lawrence Area Office | Boston    | South Central | Total Number | Percent   |
|---|----------------------|-----------|---------------|--------------|-----------|
| Strength                                  | 1                    | 3         | 3             | 7            | <b>64</b> |
| ANI                                       | 1                    | 2         | 1             | 4            | <b>36</b> |
| <b>Total Applicable Foster Care Cases</b> | <b>2</b>             | <b>5</b>  | <b>4</b>      | <b>11</b>    |           |
| Not Applicable Foster Care Cases          | 8                    | 15        | 6             | 29           |           |
| <b>Total Foster Care Cases</b>            | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |           |

The following information describes Massachusetts’ performance on the individual measures included in the CFSR Data Composite 2: Timeliness of Adoptions:

- 25.5 percent of the children exiting to adoption were discharged in less than 24 months from the time of entry into foster care. This percent is lower than the National median of 26.8 percent for the data set used to establish the National standards for the composite.
- The median length of stay in foster care for children adopted was 34.8 months. This median length of stay is greater than the National median of 32.4 months for the data set used to establish the National standard for the composite. (Note that for this measure the lower the number of months, the higher the performance).
- 15 percent of children in foster care for 17 months or longer on the first day of the year were discharged to a final adoption by the last day of the year. This percent is below the National median of 20.2 percent for the data set used to establish the National standard for this measure.
- 5.7 percent of children in foster care for 17 months or longer on the first day of the year became legally free for adoption (i.e., there was a TPR for both mother and father) within the first 6 months of the year. This percent is less than the National median (8.8 percent) for the data set used to establish the National standard for this measure.
- 45.2 percent of children who were legally free for adoption were adopted within 12 months of becoming legally free. This percent is close to the National median (45.8 percent) for the data set used to establish the National standard for this composite.

Item 9 was rated as a Strength when reviewers determined that the State had made diligent efforts to achieve finalized adoptions in a timely manner. Item 9 was rated as an ANI in four cases when reviewers determined that the State had not made diligent efforts to achieve a finalized adoption in a timely manner. In each of the four cases, adoptions were not completed in a timely manner as indicated by the following:

- A pre-adoptive home was not identified for the child who had been in out-of-home care for more than two years.
- The court took 18 months to initiate the TPR appeal, and the child's attorney was not a consistent participant in the process.
- Although the child had been in foster care for 15 months and the goal was adoption, the agency had not yet filed for TPR.
- Although the child was in a pre-adoptive home and services were provided to support the pre-adoptive home, the child was free for adoption for 29 months before the child was adopted.

Case review findings pertaining to the goal of adoption were as follows:

- There were 11 cases with a goal of adoption.
- Adoption was finalized in five of the 11 cases, and three of the five cases were finalized within 24 months of the child's entry into foster care.
- Of the remaining six children, two were placed in pre-adoptive homes.

### **Rating Determination**

Item 9 was assigned an overall rating of ANI, and the State did not meet the National standard for Composite 2: Timeliness of Adoptions. Case reviewers determined that DSS had made diligent efforts to achieve adoptions in a timely manner in 64 percent of the cases. This percent is less than the 90 percent or higher required for a rating of Strength. In the State's 2001 CFSR, this item was also rated as an ANI.

### **Stakeholder Interview Information**

The majority of stakeholders commenting on this item indicated that the length of time to completing adoptions has improved over the years. State-level stakeholders indicated that there is a much smaller pool of children awaiting adoption finalization than was typical in the past. Stakeholders in the South Central area were in general agreement that adoptions are pursued in a timely manner. They attributed this to an appropriate staffing pattern and a good infrastructure to appropriately address timelines. Stakeholders in the Boston Region indicated that there have been improvements in timely completion of adoptions, and they attributed this in part to the nine-month Permanency Planning Conferences (PPC) and earlier attention to identifying children who are likely have goals of eventual adoption.

Stakeholders also identified barriers to timely achievement of adoption finalizations. State-level stakeholders indicated that some judges are reluctant to pursue TPR when there is not an identified pre-adoptive home. Stakeholders from the Boston Region identified both the court's reluctance to move to TPR and the lengthy appeals process as inhibiting timely adoptions. However, they also noted

that there are provisions to expedite appeals. South Central Area Office stakeholders reported that challenges associated with timely adoptions typically relate to delays in court proceedings and the need for additional attorneys and paralegals.

Additional information on stakeholder perceptions of the adoption process is provided under items 27 and 28 in the Systemic Factors section of the report.

### **Statewide Assessment Information**

According to the Statewide Assessment, in the first quarter SFY 2007, 13 percent of the children exiting foster care exited to adoption. The Statewide Assessment reports that when computing the number of adoptions using the legalization date rather than the AFCARS end-date of the child's home removal episode, the State percentage for children adopted within 24 months from placement was 28.6 percent rather than 25.5 percent when using the data for the 12-month CFSR period ending 3/31/06. The Statewide Assessment also reports that across the State various area offices have had difficulty in scheduling permanency and TPR hearings in a timely manner and that this has adversely impacted the timely completion of adoptions.

The Statewide Assessment also reports the following efforts to improve the timeliness of adoptions:

- There are corporate partnerships with special initiatives to recruit foster and adoptive homes and to honor and appreciate foster parents.
- PPCs are conducted at nine months of placement.
- The Boston Region utilizes concurrent planning and engages in the Boston Adoption Coalition, a partnership between adoption supervisors and the private sector to improve adoption case practice.
- The State has hired additional staff to recruit and retain adoptive families.
- Various area offices have engaged in specific activities such as a) a monthly judge's roundtable which includes discussion on adoption decision-making, b) a permanency board within the adoption unit which charts each child's progress, c) increased staff to work on adoption cases, and c) expedited PPCs held at six months when reunification is not imminent.

### **Item 10. Permanency goal of other planned permanent living arrangement**

Strength  ANI

### **Case Review Findings**

Item 10 was applicable for 15 (37.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to alternative planned permanent living arrangements. The results are presented in the table below.



| <b>Item 10</b>                            | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|---|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                                  | 0                           | 4             | 3                    | 7                   | 47             |
| ANI                                       | 2                           | 4             | 2                    | 8                   | 53             |
| <b>Total Applicable Foster Care Cases</b> | <b>2</b>                    | <b>8</b>      | <b>5</b>             | <b>15</b>           |                |
| Not Applicable Foster Care Case           | 8                           | 12            | 5                    | 25                  |                |
| <b>Total Foster Care Cases</b>            | <b>10</b>                   | <b>20</b>     | <b>10</b>            | <b>40</b>           |                |

Item 10 was rated as a Strength when reviewers determined the following:

- The child was in a long-term, stable placement and was receiving the necessary services and supports to promote a successful transition from foster care to independent living once the child reaches the age of emancipation (5 cases).
- The child had long-term special needs that were being adequately addressed in a specialized setting, and the State was planning to transition the child to a supervised living arrangement at the age of majority (2 cases).

Item 10 was rated as an ANI when reviewers determined the following:

- There was no formal agreement that the current foster parent would care for the child until the age of majority (4 cases).
- The agency was not providing the child with sufficient services to assist in transitioning to independent living (2 cases).
- The agency had not established a permanent living arrangement for the child (2 cases).

Case review findings pertaining to the age of children with the goal of APPLA at the beginning of the period under review were as follows:

- 6 of the 15 cases assessed for this item involved children who were 16 or older.
- 7 of the 15 cases assessed for this item involved children who were at least age 13 but younger than age 16.
- 2 of the 15 cases assessed for this item involved children who were younger than age of 13.

### **Rating Determination**

Item 10 was assigned an overall rating of ANI. In 47 percent of the cases, reviewers determined that the goal of alternate planned living arrangement was being addressed in an appropriate way. This percent does not meet the 90 percent or higher required for a rating of Strength. In the 2001 CFSR, this item was also an ANI.

### **Stakeholder Interview Information**

The State-level, Boston Region, and South Central Area Office stakeholders commenting on this item generally agreed that the agency provides effective independent living services. Youth are reportedly eligible for services at age 14, and they can receive services through age 21. ILP services are reportedly available across the State. In addition, local area offices coordinate with the Adolescent

Outreach staff to enroll youth in these services. However, only a limited number of youth may be served by the Adolescent Outreach Program at any give time. Stakeholders across the sites did note that many youth have indicated that the independent living services have helped them to complete their high school education and to enroll in post-secondary education. A few stakeholders reported, however, that the services may be less effective in helping youth who are seeking jobs as opposed to education.

Various stakeholders also identified the following areas of strong practice with regard to youth:

- The agency uses the PAYA curriculum and ensures that caseworkers, foster parents and congregate care providers are certified across the State to teach the curriculum.
- The State offers a PAYA module incentive of \$300 toward driver's education to encourage youth to attain this life skill.
- The teen parenting programs are strong and well coordinated with the independent living services.
- There is an internship program funded by Chafee that assists youth with job finding and often results in longer term mentoring relationships for these youth.
- There has been an increase in funding for college tuition for older youth in the foster care system.
- The Casey Breakout Series on Adolescent Permanency was very effective in that many area offices have reexamined and enhanced their current practices and have begun to use new strategies in working with youth on identifying family connections.

### **Statewide Assessment Information**

According to the Statewide Assessment, 59 percent of all youth in out-of-home care are age 12 and older. DSS provides services to requesting youth who have discharged from agency care at or after age 18 but who are younger than age 21. The DSS Adolescent Outreach program assists youth with housing support, job search, financial aid/ college applications, Mass Health applications, and referral/resource information. The Statewide Assessment reports that of the youth receiving Adolescent Outreach program services as of June 2006, 66 percent were employed and an additional 12 percent had summer jobs identified. Also, 16 percent were participating in apprenticeships, paid internships or volunteer positions in preparation for paid employment, and seven percent were involved in WIA funded programs/ Career Centers. In addition, the Statewide Assessment reports that the College Mentoring Initiative took place at two community colleges and two four year colleges with 25 students participating. In addition, the Adolescent Services Unit, which consists of staff who oversee the Chafee Programs, has developed a format for Transitional Planning Meetings in which the fundamental components of all youth discharge plans are identified.

The Statewide Assessment also reports that various area offices initiated new practices as a result of the Breakthrough Series on Adolescent Permanency. One area office established a team-based practice and partnership with adolescents to comprehensively assess the progress of achieving youth self-sufficiency and permanency goals. Another area office conducted an adult self-sufficiency permanency hearing project in which prior to a court hearing, youth turning 17 met with their case workers and legal counsel to prepare to meet with the judge.

The Statewide Assessment also reports that the adolescent outreach staff have developed relationships with local career centers which have helped some youth identify alternative funding sources for their post secondary education. The Pathways to Success by 21 initiative was also cited as effective in coordinating services for youth. This initiative involves the Department of Labor, the Commonwealth Corporation, the regional workforce boards, community service providers and several state agencies.

## Permanency Outcome 2

| <b>Outcome P2: The continuity of family relationships and connections is preserved for children.</b> |                             |               |                      |                     |                |
|--|-----------------------------|---------------|----------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b>              |                             |               |                      |                     |                |
|  | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved:  | 6                           | 16            | 8                    | 30                  | <b>75</b>      |
| Partially Achieved:  | 3                           | 3             | 2                    | 8                   | <b>20</b>      |
| Not Achieved   | 1                           | 1             | 0                    | 2                   | <b>5</b>       |
| <b>Total Applicable Foster Care Cases</b>  | <b>10</b>                   | <b>20</b>     | <b>10</b>            | <b>40</b>           |                |

### STATUS OF PERMANENCY OUTCOME 2

Massachusetts did not achieve substantial conformity with Permanency Outcome 2. The outcome was rated as substantially achieved in 75 percent of the cases, which is less than the 95 percent or higher required for substantial conformity. The outcome was determined to be substantially achieved in 80 percent of the Boston and South Central Area Office cases, and 60 percent of the Lawrence Area Office cases.

### 2001 CFSR Findings

The State substantially achieved Permanency Outcome 2 in the 2001 CFSR. All of the items associated with this outcome were rated as Strengths and the State was not required to address any of these areas in the PIP.

### Key findings from the 2007

Similarly to the 2001 CFSR, item 11 (proximity of foster care placement) was rated as a Strength in the 2007 CFSR. While item 13 (visitation with parents and siblings), item 14 (preserving connections), item 15 (relative placement) and item 16 (relationship of child in care with parents) were all rated Strengths in the 2001 CFSR, they are rated as Areas Needing Improvement in the 2007 CFSR. Additionally, item 12, with a rating of 87.5 percent, is rated as an ANI in the 2007 CFSR because federal regulations require a higher threshold for rating achievement in the 2007 CFSR than the 2001 CFSR (95 percent for Outcome ratings and 90 percent for item ratings). Additional findings were as follows:

- In the cases reviewed, the most consistent pattern of visitation frequency for mothers was weekly visits, the most consistent pattern of visitation frequency for siblings was less than once a month, and the most consistent pattern of visitation frequency for fathers was no visits during the period under review (item 13).
- There was a lack of consistency with regard to supporting children’s connections with extended family, siblings, school, and community connections (item 14).
- There were inconsistent efforts made to search for maternal and paternal relatives as placement resources for children (item 15).
- The support of the parent’s relationship with their children while the children were in foster care was generally inconsistent; however, less attention was given to promoting children’s bonds with fathers than mothers (item 16).

Despite these concerns, the case reviews also found the following:

- Children were routinely and consistently placed in proximity to parents or potential permanent caregivers (item 11).
- In the majority of cases children were consistently placed with their siblings, unless there was a valid reason for separating siblings (item 12).

Stakeholders expressed the following opinions relevant to this outcome.

- In some areas of the State there are not enough resource homes or more intensive placement resources located in children’s home communities.
- In the Boston Region, some parents and the courts want children placed out of the metro region in order to minimize harmful influences.
- The agency makes efforts to place siblings together, and when they can not be placed together, the agency makes efforts to ensure that they have visits.
- The agency typically meets the standards of minimum visitation for families; however, foster parents across the State were of mixed opinion about the value of working with biological parents and assisting with visitation.
- The State is not consistently identifying the heritage of tribal children and therefore, not always linking children with their tribes. When notification occurs, it may often be well after DSS’ initial involvement with the child and family.
- There is a perception of inconsistent decision-making around what kinds of CORI findings can be waived for relative placements.

The findings pertaining to the specific items assessed under Permanency Outcome 2 are presented and discussed below.

**Item 11. Proximity of foster care placement**

Strength     ANI

**Case Review Findings**

Item 11 was applicable for 29 (72.5 percent) of the 40 foster care cases. Cases determined to be not applicable were those in which (1) TPR had been attained prior to the period under review, (2) contact with parents was not considered to be in the child's best interest, and/or (3) parents were deceased or whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child's most current foster care setting was in close proximity to the child's parents or close relatives. The results of this assessment are presented in the table below:

| <b>Item 11</b>                            | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|---|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                                  | 9                           | 12            | 8                    | 29                  | <b>100</b>     |
| ANI                                       | 0                           | 0             | 0                    | 0                   |                |
| <b>Total Applicable Foster Care Cases</b> | <b>9</b>                    | <b>12</b>     | <b>8</b>             | <b>29</b>           |                |
| Not Applicable Foster Care Cases          | 1                           | 8             | 2                    | 11                  |                |
| <b>Total Foster Care Cases</b>            | <b>10</b>                   | <b>20</b>     | <b>10</b>            | <b>40</b>           |                |

In all of the cases reviewed for item 11 reviewers determined that children were placed in the same community or county as their parents or that the children’s placements were not in the same community or county, but were still geographically close to their parents.

**Rating Determination**

Item 11 was assigned an overall rating of Strength. In 100 percent of the cases, reviewers determined that DSS made concerted efforts to ensure that children were placed in foster care placements that were in proximity to their parents’ or relatives’ homes, or that were necessary to meet special needs. This percent exceeds the 90 percent required for a rating of Strength. In the State’s 2001 CFSR, this item also was rated as a Strength.

**Stakeholder Interview Information**

Stakeholders commenting on this item identified region-specific challenges in placing children in close range to their families. Stakeholders from the South Central area and Boston Region reported that a lack of foster homes, particularly for adolescents, often forces children to be placed outside their communities. Boston Region stakeholders indicated that this is not necessarily a negative thing in cases where parents want their children out of the city or where the juvenile courts order a child out of the area for safety and stabilization reasons, particularly in instances where children are gang-involved or prostituting. However, South Central Area Office stakeholders agreed that placement is more dependent upon where available foster homes are located rather than parent’s proximity. As relates to placement availability, stakeholders in Lawrence indicated that a local congregate care provider tries to prioritize services to children in the region in order to facilitate children staying close to their home communities.

**Statewide Assessment Information**

According to the Statewide Assessment, the agency conducted a CQI review in one of the more rural area offices of the State in which it was determined that only eight of sixty-six children who were placed in intensive foster care (IFC) were placed in the area office’s catchment area. The Statewide Assessment notes that on average these children were placed over 35 miles from their home communities. With this information, the area office was able to coordinate with providers and increase the number of children placed within the catchment area to 50 percent. According to the Statewide Assessment, several of DSS’ regional offices are also undertaking a review of all children in placement who are placed outside of the region and are working with their provider networks to return these children to facilities closer to their home communities.

**Item 12. Placement with siblings**

\_\_\_\_ Strength  ANI

**Case Review Findings**

Item 12 was applicable for 16 (40 percent) of the 40 foster care cases. Cases were not applicable if the child did not have a sibling in foster care at any time during the period under review. In assessing item 12, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether the separation was necessary to meet the service or safety needs of one or more of the children. The results of this assessment are presented in the table below:

| Item 12                                   | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 2                    | 7         | 5             | 14           | 87.5    |
| ANI                                       | 0                    | 1         | 1             | 2            | 12.5    |
| <b>Total Applicable Foster Care Cases</b> | <b>2</b>             | <b>8</b>  | <b>6</b>      | <b>16</b>    |         |
| Not Applicable Foster Care Cases          | 8                    | 12        | 4             | 24           |         |
| <b>Total Foster Care Cases</b>            | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |         |

Item 12 was rated as a Strength when reviewers determined the following: (sample categories):

- The child was in a placement with all siblings (7 cases).
- The child was not placed with any siblings, but the siblings were separated due to the special needs of one or more of the siblings (4 cases).
- The child was not placed with any siblings due to the special needs of the child (2 cases).
- The child was not placed with any siblings, but placement with siblings was not in the child’s best interest (1 case).

Item 12 was rated as an ANI when reviewers determined the following:

- There was a shortage of placement resources for a sibling group of three (1 case).
- Children were not placed with siblings, and the separation was not deemed to be in the best interests of the siblings (1 case).

### **Rating Determination**

Item 12 was assigned an overall rating of ANI. In 87.5 percent of the applicable cases, reviewers determined that the agency placed siblings together in foster care whenever possible and appropriate. This percent does not meet the 90 percent or higher required for a rating of Strength. In the State's first CFSR, this item was rated a Strength.

### **Stakeholder Interview Information**

Stakeholders across the sites agreed that the agency is making increased efforts to ensure that a) there are foster homes available for siblings and b) siblings are placed together. Some stakeholders noted that youth have had inconsistent experiences in being placed with their siblings. Various stakeholders identified the following barriers to placing siblings together:

- Foster homes are more likely to accept placement of younger sibling groups than adolescent-aged groups.
- Where siblings have different paternity, kin providers may only wish to care for their biological family members. Although when siblings are placed separately, efforts are made to ensure that they have consistent sibling visits.
- There may not be enough foster homes available, particularly homes that are set up to take both genders.

### **Statewide Assessment Information**

The Statewide Assessment reports that while the State does not maintain sibling placement data, some regional offices do track data on sibling placement outcomes. For example, the Statewide Assessment reports that in 2005, the Boston Region successfully placed 70 percent of siblings. The Statewide Assessment indicates that the following practices enhance DSS efforts to place siblings together:

- A new rate structure offers foster parents financial incentives for taking sibling groups.
- The waiver policy which allows foster homes to go over capacity was revised.
- In 2006, the Treehouse model was initiated in one community. With this model, families commit to adopting children who do not return home, and seniors in the community commit to supporting the adoptive child and family.

### **Item 13. Visiting with parents and siblings in foster care**

Strength     ANI

### **Case Review Findings**

Item 13 was applicable for 29 (72.5 percent) of the 40 foster care cases. Cases were not applicable for an assessment of this item if the child had no siblings in foster care and if one of the following conditions was met with regard to the parents: (1) TPR was established

prior to the period under review and parents were no longer involved in the child’s life (or parents were deceased), or (2) visitation with a parent was considered to not be in the best interests of the child. In assessing this item, reviewers were to determine (1) whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care, and (2) whether these visits occurred with sufficient frequency to meet the needs of children and families. The findings of this assessment are presented in the table below:

| <b>Item 13</b>                            | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|---|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                                  | 7                           | 8             | 7                    | 22                  | <b>76</b>      |
| ANI                                       | 2                           | 2             | 3                    | 7                   | <b>24</b>      |
| <b>Total Applicable Foster Care Cases</b> | <b>9</b>                    | <b>10</b>     | <b>10</b>            | <b>29</b>           |                |
| Not Applicable Foster Care Cases          | 1                           | 10            | 0                    | 11                  |                |
| <b>Total Foster Care Cases</b>            | <b>10</b>                   | <b>20</b>     | <b>10</b>            | <b>40</b>           |                |

Performance on this item was varied somewhat across sites. The item was rated as a Strength in 80 percent of the Boston Region cases, 78 percent of the Lawrence Area Office cases and 70 percent of the South Central Area Office cases.

Item 13 was rated as a Strength when reviewers determined that the frequency and quality of visitation with parents and siblings met the needs of the children. Item 13 was rated as an ANI when reviewers determined the agency did not make concerted efforts to promote visitation with mothers, fathers and/or siblings.

The frequency of visitation with mothers, fathers, and siblings during the period under review is presented in the table below. As indicated in the table, for cases in which visitation was applicable, the most consistent pattern of visitation frequency for mothers was weekly visits, the most consistent pattern of visitation frequency for siblings was less than once a month, and the most consistent pattern of visitation frequency for fathers was no visits during the period under review.

| <b>Visitation Frequency for Children in Foster Care<br/>(During the period under review)</b> | <b>Mother<br/>(Number of cases)</b> | <b>Father<br/>(Number of cases)</b> | <b>Siblings in Foster Care<br/>(Number of Cases)</b> |
|--|-------------------------------------|-------------------------------------|--|
| Visits occurred at least on a weekly basis   | 10 (37 %)                           | 5 (22 %)                            | 5 (29 %)   |
| Visits occurred less than weekly, but at least twice a month                                 | 2 (7 %)                             | 1 (5 %)                             | 3 (18 %)   |
| Visits occurred less than twice a month, but at least once a month                           | 6 (22 %)                            | 4 (17 %)                            | 1 (6 %)  |
| Visits occurred less frequently than once a month  | 8 (30 %)                            | 4 (17 %)                            | 7 (41 %)   |
| There were no visits during the period under review  | 1 (4%)                              | 9 (39 %)                            | 1 (6 %)  |
| <b>Total cases for which item 13 was applicable</b>  | <b>27</b>                           | <b>23</b>                           | <b>17</b>  |



**Rating Determination**

Item 13 was assigned an overall rating of ANI. In 76 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the family. This percent is less than the 90 percent required for a rating of Strength. In the State's first CFSR, this item was rated as Strength.

**Stakeholder Interview Information**

Stakeholders across the sites indicated that the agency tries to meet the minimum standards for parent visitation, and that most visitation occurs in the local offices. Stakeholders from across the sites also indicated that there are inconsistencies in practice with regard to youth visits with siblings. Stakeholders from the Boston Region and the South Central area both indicated that the agency does a good job of facilitating visits, although the Boston Region stakeholders indicated that court ordered visits are particularly adhered to, while the South Central Area Office stakeholders indicated that the court system does not approve of the current DSS visitation standards. In addition, while stakeholders from Lawrence and South Central area indicated that foster parents often engage in facilitating visits, stakeholders in the Boston Region reported that foster parents perceive involvement with children's biological parents as causing tension and potentially leading to placement disruptions.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS policy requires that for all children in placement, a visitation schedule must be outlined in the families' case plan. The minimum visitation contact for parents and children is once a month, although visitation should occur once a week or once every other week where warranted. The Statewide Assessment reports that two area offices have undertaken special initiatives to improve visitation. One area office has instituted CQI activity that focuses on supervised visitation, and another area office has established a visitation center to improve the quality of visitation. In addition, the Statewide Assessment notes that several area offices have focused on improving access to transportation, improving the proximity of children's placements to their families, and providing training to foster parents on working with children's biological families.

**Item 14. Preserving connections**

\_\_\_ Strength    X ANI

**Case Review Findings**

Item 14 was applicable for 37 (92.5 percent) of the 40 foster care cases. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, cultural heritage, extended family, faith, and friends while the child was in foster care. This item is not rated on the basis of visits or contacts with parents or siblings in foster care. The results of the assessment are provided in the table below.

| Item 14                                   | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 7                    | 14        | 8             | 29           | 78      |
| ANI                                       | 3                    | 3         | 2             | 8            | 22      |
| <b>Total Applicable Foster Care Cases</b> | <b>10</b>            | <b>17</b> | <b>10</b>     | <b>37</b>    |         |
| Not Applicable Foster Care Cases          | 0                    | 3         | 0             | 3            |         |
| <b>Total Foster Care Cases</b>            | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |         |

Performance on this item varied across sites. This item was rated as a Strength in 82 percent of the Boston Region, 80 percent of the South Central Area Office cases and 70 percent of the Lawrence Area Office cases.

Item 14 was rated as a Strength when reviewers determined *one or more* of the following:

- The agency made concerted efforts to preserve the child’s connections with extended family members and siblings not in foster care through phone contact and visits (23 cases).
- The agency made concerted efforts to preserve the child’s connections with the school, friends and community (18 cases).
- The agency made concerted efforts to preserve the child’s connections with the child’s religious or cultural heritage (2 cases).

Item 14 was rated as an ANI when reviewers determined *one or more* of the following:

- The agency did not facilitate the child’s connections to extended family members and siblings who are not in foster care (7 cases).
- The agency did not facilitate the child’s connections to friends and community (4 cases).
- The agency did not facilitate the child’s connections to cultural and religious heritage (1 case).
- The agency did not facilitate the child’s connections to a tribal affiliation (1 case).

### Rating Determination

Item 14 was assigned an overall rating of an ANI. Reviewers determined that in 78 percent of the applicable cases, DSS made concerted efforts to ensure that children in foster care maintained their connections to extended family, communities, schools, and cultural heritage. This percent does not meet the 90 percent required for a rating of Strength. In the 2001 CFSR, this item was rated as a Strength.

### Stakeholder Interview Information

Stakeholders from the state-level indicated that there are particular challenges associated with preserving connections for tribal children. Although tribes are typically contacted upon placement of a known Native American child, the agency is reportedly inconsistent in identifying Native American children who enter foster care, and as a result, tribes may not be properly notified. For example, stakeholders reported that notification of court hearings is consistent with the Mashpee Tribe but inconsistent with the

Wampanoag Tribe. Stakeholders also indicated that there is a lack of tribal foster homes for children and that it would be helpful if Native American children were identified prior to a situation requiring a child’s removal so that tribal representatives could provide support and assist with the preservation of tribal connections.

Stakeholders in the South Central area indicated that it is difficult to preserve connections for children placed into foster care because the service area is large, and there are not enough foster homes in the region. However, one state-level stakeholder noted that there have been initiatives in some communities to establish foster homes around school communities in order to help maintain children in their schools.

**Statewide Assessment Information**

According to the Statewide Assessment, the Family Networks system emphasizes the importance of maintaining connections to community and schools. In addition, the Statewide Assessment reports that the Family Advocates who work within the Community Coalitions are instrumental in ensuring that families are actively involved in planning and supporting connections to community.

**Item 15. Relative placement**

Strength  ANI

**Case Review Findings**

Item 15 was applicable for 26 (65 percent) of the 40 foster care cases. Cases were not applicable if relative placement was not an option during the period under review because: (1) the child was in an adoptive placement at the start of the time period, or (2) the child entered foster care needing specialized services that could not be provided in a relative placement. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The results of this assessment are presented in the table below.

| Item 15                                   | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|---|----------------------|-----------|---------------|--------------|---------|
| Strength                                  | 3                    | 11        | 6             | 20           | 77      |
| ANI                                       | 3                    | 2         | 1             | 6            | 23      |
| <b>Total Applicable Foster Care Cases</b> | <b>6</b>             | <b>13</b> | <b>7</b>      | <b>26</b>    |         |
| Not Applicable Foster Care Case           | 4                    | 7         | 3             | 14           |         |
| <b>Total Foster Care Cases</b>            | <b>10</b>            | <b>20</b> | <b>10</b>     | <b>40</b>    |         |

Performance on this item varied across the three sites. The item was rated as a Strength in 86 percent of the South Central Area Office cases, 85 percent of the Boston Region cases, and 50 percent of the Lawrence Area Office cases.

Item 15 was rated as a Strength when reviewers determined the following:

- The child was placed with relatives (7 cases).
- In these cases, despite diligent efforts made by the agency, the children were not placed with relatives for reasons including the relative's inability or unwillingness to care for the children (4 cases), the relative's criminal records or history of substantiated child maltreatment (3 cases), the relative's residence in another country (2 case), domestic violence in the relative's home (1 case), or the relatives were too young to care for the child (1 case).
- The agency made diligent efforts to place the child with relatives, but the child's intensive needs required a more specialized setting (1 case).
- The agency made diligent efforts to place the child with relatives, but relative information was not available at the time of the emergency removal, and the child was in foster care for only four days (1 case).

Item 15 was rated as an ANI when reviewers determined the following:

- The agency did not make diligent efforts to search for either maternal or paternal relatives (4 cases).
- The agency did make efforts to search for maternal relatives but did not make efforts to search for paternal relatives (2 cases).

### **Rating Determination**

Item 15 was assigned an overall rating of ANI. In 77 percent of cases, reviewers determined that the agency had made diligent efforts to locate and assess relatives as potential placement resources. This percent is less than the 90 percent or higher required for a rating of Strength. In the State's 2001 CFSR, this item was rated as a Strength.

### **Stakeholder Interview Information**

The majority of stakeholders commenting on this item agreed that the agency has increased its efforts and focus on identifying relative placements for children. However, stakeholders also highlighted barriers to approving relative placements. Relatives with certain CORI findings are not eligible to become foster parents, and although there is a waiver process for some of these circumstances, stakeholders perceived that there are inconsistencies in the waiver approval process.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS policy requires that when a child is removed from the home, non-custodial parents must first be considered as caregivers and then the child's other relatives are considered as a priority for placement. According to DSS policy, the child is placed in an unrestricted (non-relative) foster home when there are no kinship or community options for the child.

The Statewide Assessment reports that DSS has increased the percentage of kinship placements for children in foster care, and since 2003, the number of kinship placements has exceeded the number of unrestricted foster homes. The Statewide Assessment reports that of the 2,042 youth ages 14 – 23 in DSS foster care in December 2005, 23 percent were in kinship placements and 17 percent were in

child specific homes (fictive kin). The Statewide Assessment also notes that during the first quarter of SFY 2007, 18 percent of children requiring foster care were placed with relatives.

According to the Statewide Assessment, DSS has begun to utilize “Family Search” which includes concerted efforts to locate the child’s paternal relatives even in cases when the child’s father may be absent. The DSS is also revising the criminal background check policy in order to both ensure child safety and to facilitate a timelier waiver process for kinship placements. DSS also worked with the Department of Early Education and Care to change the standard for square footage space requirements to allow more flexibility for willing kinship caregivers.

**Item 16. Relationship of child in care with parents**

Strength  ANI

**Case Review Findings**

Item 16 was applicable for 31 (77.5 percent) of the 40 foster care cases. A case was not applicable if (1) parental rights had been terminated prior to the period under review and parents were no longer involved with the child, or (2) a relationship with the parents was considered to be not in the child’s best interests throughout the period under review. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers through efforts other than arranging visitation. The results of this assessment are provided in the table below:

| <b>Item 16</b>                            | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|---|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                                  | 6                           | 7             | 7                    | 20                  | <b>64.5</b>    |
| ANI                                       | 3                           | 5             | 3                    | 11                  | <b>35.5</b>    |
| <b>Total Applicable Foster Care Cases</b> | <b>9</b>                    | <b>12</b>     | <b>10</b>            | <b>31</b>           |                |
| Not Applicable Foster Care Cases          | 1                           | 8             | 0                    | 9                   |                |
| <b>Total Foster Care Cases</b>            | <b>10</b>                   | <b>20</b>     | <b>10</b>            | <b>40</b>           |                |

Item 16 was rated as a Strength when reviewers determined that the agency made concerted efforts to support and/or strengthen the bond between parents and children. Examples of DSS efforts to promote bonding between the child and parents included a) providing opportunities for therapeutic situations to help the parent and child strengthen their relationship, b) encouraging the parent’s participation in school activities and extra curricular activities, c) providing or arranging for transportation so that the parent could attend the child's medical appointments, d) facilitating contact with incarcerated parents, and e) encouraging foster parents to provide mentoring to parents.

Item 16 was rated as an ANI when reviewers determined the following:

- The agency did not make concerted efforts to support positive relationships with the mother or father (5 cases).
- The agency did not make concerted efforts to support the relationship with the child’s father (4 cases).
- The agency did not make concerted efforts to support the relationship with the child’s mother (2 cases).

**Rating Determination**

Item 16 was assigned an overall rating of ANI. In 64.5 percent of the cases, reviewers determined that the agency had made concerted efforts to support the parent-child relationships of children in foster care. This percent is less than the 90 percent or higher required for a rating of Strength. In the State’s 2001 CFSR, this item was rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, in the 2006 re-procurement for intensive foster care (IFC), DSS included specifications around training foster parents on how to work with biological families. In addition, the MAPP pre-service training for DSS foster parents includes a session on working with biological parents.

**III. CHILD AND FAMILY WELL-BEING**

**Well Being Outcome 1**

| <b>Outcome WB1: Families have enhanced capacity to provide for their children’s needs.</b> |                             |               |                      |                     |                |
|--|-----------------------------|---------------|----------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b>    |                             |               |                      |                     |                |
|  | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved:  | 8                           | 14            | 7                    | 29                  | <b>44.6</b>    |
| Partially Achieved:  | 8                           | 13            | 8                    | 29                  | <b>44.6</b>    |
| Not Achieved or Addressed:   | 1                           | 4             | 2                    | 7                   | <b>10.8</b>    |
| <b>Total Applicable Cases</b>  | 17                          | 31            | 17                   | 65                  |                |

**STATUS OF WELL-BEING OUTCOME 1**

Massachusetts did not achieve substantial conformity with Well-Being Outcome 1. This outcome was rated as substantially achieved in 44.6 percent of the cases reviewed, which is less than the 95 percent required for a determination of substantial conformity. Performance on this outcome was consistent across the sites, and there was little variation in the ratings based on whether the case was a foster care case or an in-home.

### **2001 CFSR Findings**

The State did not achieve substantial conformity for Well-Being Outcome 1 in the 2001 CFSR. Key concerns were predominantly related to needs assessment, service provision and family involvement in case planning as follows:

- Assessments of the child's and family's service needs were not completed or were inadequate.
- Services provided did not address the identified needs.
- Service needs of fathers were not addressed in case plans.
- Families were not consistently involved in case planning.

Several of the State's PIP goals were broad-based systemic reforms and as such, were intended to address cross-cutting issues related to not only the safety of children but also to the well-being of children and their families. As noted under Safety Outcome 2, these reform efforts included:

- Major redesign of DSS' intake, assessment, and service/case planning system.
- Redesign and re-procurement of services with a local lead agency approach.
- Several strategies to increase the ability of staff to assess substance abuse in families and assist families in gaining access to needed services. Strategies included a) staff training and consultation with substance abuse experts, b) service coordination with the Department of Public Health programs, and c) the implementation of statewide urine drug screenings.

Massachusetts successfully completed their PIP activities, however as noted earlier in this report, the significant changes planned for the "front-end" of the system (i.e. intake, assessment, and service planning) have not yet been fully implemented.

### **2007 CFSR Findings**

Similarly to the 2001 CFSR, the needs and services of children, parents, and foster parents (item 17) and family involvement in case planning (item 18) remain as Areas Needing Improvement in the 2007 CFSR. However, concerns were identified with regard to caseworker visits with children (item 19) and caseworker visits with parents (item 20), both of which were strengths in the 2001 CFSR.

The following concerns surfaced in the case review in the 2007 CFSR:

- There continues to be a lack of consistency in assessing and meeting the services needs of parents (particularly fathers) and children. In the cases reviewed, the agency is more consistently assessing and addressing the needs of mothers and children and less effectively assessing and meeting the service needs of fathers. Efforts to locate and/or engage fathers at the outset have improved but overall efforts remain inconsistent (item 17).
- There also continues to be inconsistencies in adequately involving families (particularly fathers) in case planning (item 18).
- Caseworkers regularly visited with children in the foster care cases, but there were inconsistencies in caseworker visits with children in the in-home cases (item 19).

- The 2007 CFSR specifically differentiated between mothers and fathers in evaluating the frequency and quality of caseworker visits. In general, there were insufficient caseworker visits and challenges associated with the quality of visits with both parents. However, these findings were more pronounced for fathers, as evidenced by inconsistent, concerted efforts to visit or engage fathers in either case planning or services (item 20).

Stakeholders expressed the following opinions relevant to this outcome.

- The Family Networks system offers a broad service array of family stabilization services and community-based services to families. However, there are reported gaps in residential substance abuse services for parents and their children, psychiatric services, post-permanency services, and foster homes for adolescents.
- The degree of supports and services for foster parents is inconsistent across the State.
- While there has been an increased emphasis on family engagement and strength-based case planning with families, the degree to which these approaches are utilized in case practice varies not only across the State but among staff in local offices.
- Caseworkers see children on a monthly basis. Adolescent Outreach workers see youth on a weekly basis which is reportedly very helpful to these youth.

The findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.

**Item 17. Needs and services of child, parents, foster parents**

\_\_\_ Strength \_\_X\_\_ ANI

**Case Review Findings**

Item 17 was applicable for all 65 cases. In assessing this item, reviewers were to determine whether the agency had: (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. This item excludes the assessment of children’s (but not parents’) needs pertaining to educational, physical health, and mental health needs. These are addressed in later items. The case review results were the following:

| Item 17            | Lawrence Area Office | Boston | South Central | Total Number | Percent   |
|--------------------|----------------------|--------|---------------|--------------|-----------|
| Strength           | 9                    | 15     | 8             | 32           | <b>49</b> |
| ANI                | 8                    | 16     | 9             | 33           | <b>51</b> |
| <b>Total Cases</b> | 17                   | 31     | 17            | 65           |           |

Performance on this item was consistent across the sites, and there were no differences in the ratings based on the type of case.



Item 17 was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. Item 17 was rated as an ANI when reviewers determined that there was either inadequate assessment of needs or inadequate services to meet identified needs.

Specific case review findings for item 17 are shown in the table below. These data suggest that the agency is more consistently assessing and addressing the needs of mothers and children in the in-home and foster care cases, and the agency is less effectively assessing and meeting the service needs of fathers (48 percent Strength in the in-home cases and 46 percent Strength in the foster care cases).

| <b>Item 17: Assessment Needs and Services</b> |                        |            |                         |
|---|------------------------|------------|-------------------------|
| <b>In-Home Cases</b>                          |                        |            |                         |
| <b>Assessment and Services Evaluations</b>    | <b>Number of Cases</b> |            |                         |
|   | <b>Strength</b>        | <b>ANI</b> | <b>Total Applicable</b> |
| Mother's needs assessed and met               | 20 (80 %)              | 5 (20 %)   | 25                      |
| Father's needs assessed and met               | 11 (48 %)              | 12 (52 %)  | 23                      |
| Child's needs assessed and met                | 21 (84 %)              | 4 (16 %)   | 25                      |
| <b>Foster Care Cases</b>                      |                        |            |                         |
| <b>Assessment and Services Evaluations</b>    | <b>Number of Cases</b> |            |                         |
|   | <b>Strength</b>        | <b>ANI</b> | <b>Total Applicable</b> |
| Mother's needs assessed and met               | 23 (72 %)              | 9 (28 %)   | 32                      |
| Father's needs assessed and met               | 13 (46 %)              | 15 (54 %)  | 28                      |
| Child's needs assessed and met                | 36 (90 %)              | 4 (10 %)   | 40                      |
| Foster parents' needs assessed and met        | 27 (90 %)              | 3 (10 %)   | 30                      |

### **Rating Determination**

Item 17 was assigned an overall rating of ANI. In 49 percent of the cases, reviewers determined that the State had adequately assessed and addressed the service needs of children and parents. This percent is less than the 90 percent or higher required for a rating of Strength. This item also was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders across the sites were of mixed opinion regarding the efficacy of the State in assessing and meeting service needs for parents, children, and foster parents. Although stakeholders identified some effective practices in this regard, they also identified inhibiting factors. For example, there was some agreement amongst stakeholders that the initial DSS assessment may not be adequately identifying the needs of families. Some stakeholders indicated that DSS staff may refer for services without identifying which needs are the most pressing and practical for the family to address first. However, stakeholders also noted that the State has

begun to use family team meetings and CANS assessments to identify the child's as well as the family's needs. In addition, stakeholders across the sites mentioned that children and families are assessed and have access to family stabilization and community-based services through Family Networks. Stakeholders across the sites also reported that youth are generally receiving a range of independent living services with a predominant emphasis on life skills training with the PAYA curriculum. A few stakeholders indicated that they would like to see more youth outreach workers.

While stakeholders generally agreed that there is a wide array of services available across the State, gaps in services and delays in accessing services in some areas were identified. Stakeholders generally cited the need for additional post adoption services, foster homes in certain areas of the state, non-traditional substance abuse services, and both transportation and psychiatric services in the South Central area of the State. State-level and Boston Region stakeholders noted that there are some programs which specifically aim to serve fathers, but these are not sufficient to meet the need. In addition, some stakeholders noted that foster parents experienced difficulties in obtaining funding for specialty care items such as eyeglasses and orthodontics for the children in their care.

In addition, stakeholders indicated that foster parents are of mixed opinions about the adequacy of the services available to them. Lawrence Area Office stakeholders reported that many foster parents' service needs are met through KidsNet, a network of support services that is coordinated by the Massachusetts Society for the Prevention of Cruelty to Children. While a few stakeholders across the sites noted that the family resource workers are helpful in supporting foster families, stakeholders in the South Central area mentioned that the degree of support foster parents receive is inconsistent and relates to the worker's knowledge of available services. In addition, stakeholders in the Boston Region indicated that foster parents find it difficult to access funds for childcare.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS policy requires that initial family assessments are completed within 45 days of a supported report. The Statewide Assessment reports that in the first quarter of SFY 2007, timely completion of these assessments ranged from 49 percent in the Lawrence Area Office to 75 percent in the Boston Region. The Statewide Assessment indicates that the following strategies are efforts to improve assessment and service provision practices:

- Family Group Conferences are used in all area offices in order to strengthen the assessment and identification of service needs with families.
- Family Teams are also used across the State to engage families in the case planning process, and the CANS Assessment instrument is a strengths-based, standardized approach that is used to identify family strengths and needs.
- The Quality Service Review process, initiated in 2007, will evaluate the effectiveness of the Family Team in comprehensively assessing child and family needs on an on-going basis.
- The Family Networks system was developed to provide a coordinated system and to facilitate access to a wide array of services for children and families.
- Two new web-based applications have been developed to monitor the placement moves of children and to monitor the performance on the treatment progress of children receiving services through Family Networks.

- The South Central Area Office has created the Worcester Communities of Care to enhance the availability of wraparound and support services to intact families.

**Item 18. Child and family involvement in case planning**

\_\_\_ Strength \_\_X\_\_ANI

**Case Review Findings**

Item 18 was applicable for 63 (97 percent) of the 65 cases. A case was not applicable if parental rights had been terminated prior to the period under review and parents were not involved with the child in any way **and** the child was too young or had cognitive delays or other conditions that were barriers to participation in case planning. In assessing this item, reviewers were to determine whether parents and children (if age-appropriate) had been involved in case planning, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that a parent or child had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:

| Item 18                       | Lawrence Area Office | Boston    | South Central | Total Number | Percent   |
|-------------------------------|----------------------|-----------|---------------|--------------|-----------|
| Strength                      | 5                    | 17        | 9             | 31           | <b>49</b> |
| ANI                           | 12                   | 12        | 8             | 32           | <b>51</b> |
| <b>Total Applicable Cases</b> | <b>17</b>            | <b>29</b> | <b>17</b>     | <b>63</b>    |           |
| Not Applicable Cases          | 0                    | 2         | 0             | 2            |           |
| <b>Total Cases</b>            | 17                   | 31        | 17            | 65           |           |

Performance on this item indicates challenges across all three sites, but particularly so in the Lawrence Area Office. The item was rated as a Strength in 59 percent of the Boston Region cases, 53 percent of the South Central Area Office cases, and 29 percent of the Lawrence Area Office cases. However, performance on the item did vary somewhat based on the type of case. The item was rated as a Strength in 53 percent (20 cases) of the 38 applicable foster care cases and 44 percent (11 cases) of the 25 in-home services cases.

Item 18 was rated as a Strength when reviewers determined that all appropriate parties had actively participated in case planning or that the agency had made concerted efforts to involve them in the case planning. The item was rated as an ANI when reviewers determined that the agency had not made concerted efforts to involve the mother, father, and/or child (when age appropriate) in the case planning process. Key findings with regard to this item are shown in the table summary below:

| <b>Item 18 Summary: Families Involved in Case Planning</b> |                 |                     |                         |
|--|-----------------|---------------------|-------------------------|
| <b>Family Member</b>                                       | <b>Involved</b> | <b>Not Involved</b> | <b>Total Applicable</b> |
| <b>Mother</b>  | 40 (73 %)       | 15 (27 %)           | 55                      |
| <b>Father</b>  | 22 (44 %)       | 28 (56 %)           | 50                      |
| <b>Child</b>   | 32 (73 %)       | 12 (27 %)           | 44                      |

### **Rating Determination**

Item 18 was assigned an overall rating of ANI. In 49 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to involve parents and/or children in the case planning process. This percent is less than the 90 percent or higher required for a rating of Strength. This item was also rated as an ANI in Massachusetts' 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders across the sites noted increased efforts by DSS to more actively engage families in case planning. However, most stakeholders noted that the system to support this fuller engagement of families has not yet been implemented statewide and that practice across the State is inconsistent. For example, stakeholders indicated that Family Group Conferencing is a successful means of involving families in case planning, but this practice is still limited to a small number of families served by the agency. In addition, some stakeholders identified cultural differences between caseworkers and families as a barrier to effective family engagement. Some Boston stakeholders indicated that youth are involved in case planning, while others reported that youth are inconsistently asked to give their input. In Boston, it was noted that youth were included in Permanency Planning Conferences (PPC's) until it was determined that they could not be permitted to participate without their attorneys present.

Stakeholders at the state-level indicated that the agency does not make consistent, concerted efforts to work with parents who are difficult to locate or who are not cooperative. Boston Region stakeholders attributed this to a) concerns of domestic violence in the family, b) multiple fathers some of whom may no longer be involved with the children, and c) mother's requests that fathers not be involved. State-level stakeholders indicated, however, that the Court Improvement Program's work on improving data and reporting for the courts will also improve the court's ability to locate absent fathers.

### **Statewide Assessment Information**

According to the Statewide Assessment, the agency has recently included a data element in FamilyNet which will allow for the tracking of family involvement in case planning. The Statewide Assessment indicates that a number of area offices track parental involvement in case planning, and one area office reportedly achieved a 76 percent parental participation rate from July 2006 to March 2007. In addition, DSS tracks parent participation in foster care reviews, and the Statewide Assessment cites that for the first quarter of SFY 2007, the statewide average for parent participation was 39 percent. The Statewide Assessment identifies transportation, geographic distances, and scheduling issues as factors that impact the agency's performance in this area.

The Statewide Assessment reports that the agency places a high level of importance and focus on the family engagement model and family-centered practice. According to the Statewide Assessment, the State has provided training throughout the agency on family-centered practice, engaged in the Adolescent Breakthrough Series, and displayed family-centered messaging in offices around the State. In addition, the agency has instituted Family Group Conferencing, teaming practices, and family nurturing programs across the State. The Statewide Assessment also highlights the following practices which serve to strengthen parent and child involvement in case planning:

- The Quality Service Review process will be evaluating family involvement, and interviews will be conducted with parents and children to determine their level of involvement.
- DSS is conducting a satisfaction survey to determine the family’s perceptions of engagement.
- The Family Networks RFR for lead agencies outlined specifications for involving families in assessment and service planning.
- Area offices are offering more flexible times and locations for case planning conferences and visitation and making efforts to provide child care, transportation vouchers, conference call options, and family advocate or family partner assistance to support family involvement.
- Various area offices have established monthly teen night support groups and a father’s support network, and focus groups have been held with parents, foster parents and adolescents.

**Item 19. Worker visits with child**

\_\_\_ Strength  ANI

**Case Review Findings**

Item 19 was applicable for all 65 cases. In conducting the assessment of this item, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child's safety and well-being and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment are presented in the table below:

| <b>Item 19</b>     | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|--------------------|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength           | 15                          | 27            | 14                   | 56                  | <b>86</b>      |
| ANI                | 2                           | 4             | 3                    | 9                   | <b>14</b>      |
| <b>Total Cases</b> | 17                          | 31            | 17                   | 65                  |                |

This item was rated as a Strength in 88 percent of the Lawrence Area Office and Boston Region cases, and 82 percent of the South Central Area Office cases. Performance on the item did vary based on the type of case. The item was rated as a Strength in 92.5 percent (37 cases) of the 40 foster care cases and 76 percent (19 cases) of the 25 in-home services cases.

Item 19 was rated as a Strength when reviewers determined that the frequency and quality of visits between caseworkers and children were sufficient to ensure adequate monitoring of the child's safety and well-being and promote attainment of case goals. Item 19 was rated as an ANI when reviewers determined the following:

- The frequency of caseworker visits was not sufficient to meet the needs of the child, and the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (6 cases).
- The frequency of caseworker visits was sufficient, but the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (3 cases).

Specific information from the case reviews is presented in the table below.

| <b>Typical Frequency of Caseworker Visits with Child</b>           | <b>Foster Care Cases<br/>(Number and Percent)</b> | <b>In-Home Services Cases<br/>(Number and Percent)</b> |
|--|---|--|
| Visits occurred on at least a weekly basis                         | 1 (2.5 %)   | 0  |
| Visits occurred less than weekly, but at least twice a month       | 6 (15 %)  | 3 (12 %)   |
| Visits occurred less than twice a month, but at least once a month | 31 (77.5 %)                                       | 18 (72 %)  |
| Visits occurred less frequently than once a month                  | 2 (5 %)   | 4 (16 %)   |
| Visits never occurred  | 0   | 0  |
| <b>Total cases</b>   | <b>40</b>   | <b>25</b>  |

### **Rating Determination**

Item 19 was assigned an overall rating of ANI. In 86 percent of the cases, reviewers determined that caseworker visits with children were of sufficient frequency and/or quality. This percent is less than the 90 percent or higher required for a rating of Strength. In the 2001 CFSR this item was rated as a Strength.

### **Stakeholder Interview Information**

The majority of stakeholders commenting on this item agreed that caseworkers see children consistently on a monthly basis. Stakeholders indicated that youth see their outreach workers weekly and that this type of consistent contact is very helpful to them. Stakeholders also indicated that some youth see their caseworkers once a month while others see their caseworkers less frequently. A few stakeholders from the Boston Region indicated that due to caseloads, caseworkers are not always available to see children as often as a particular situation may warrant.

### **Statewide Assessment Information**

According to the Statewide Assessment, the minimum standard for caseworker visits with children is once per month, however caseworkers are expected to engage in more frequent visits in cases where it is warranted, such as in placement cases during important

case transitions. The Statewide Assessment reports that in the first quarter SFY 2007, 70 percent of children received a monthly visit from their caseworker, and the percentages across the regions ranged from 68 percent to 73 percent. According to the Statewide Assessment, the agency monitors caseworker contacts with children through a monthly management report. The Statewide Assessment also notes that alternative contact schedules are case-specific and agreed upon by caseworkers and their supervisors. In addition, the Statewide Assessment notes that the agency is engaging in a new initiative to promote caseworker safety during home visits.

**Item 20. Worker visits with parents**

\_\_\_ Strength    X ANI

**Case Review Findings**

Item 20 was applicable for 56 (86 percent) of the 65 cases. Cases were not applicable for this assessment if parental rights had been terminated prior to the period under review and parents were no longer involved in the lives of the children. All cases that were not applicable were foster care cases. Reviewers were to assess whether the caseworker’s face-to-face contact with the children’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and/or ensure the children's safety and well-being. The results of this assessment are presented in the table below:

| <b>Item 20</b>                | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
|-------------------------------|-----------------------------|---------------|----------------------|---------------------|----------------|
| Strength                      | 8                           | 11            | 9                    | 28                  | <b>50</b>      |
| ANI                           | 8                           | 12            | 8                    | 28                  | <b>50</b>      |
| <b>Total Applicable Cases</b> | <b>16</b>                   | <b>23</b>     | <b>17</b>            | <b>56</b>           |                |
| Not Applicable Cases          | 1                           | 8             | 0                    | 9                   |                |
| <b>Total Cases</b>            | <b>17</b>                   | <b>31</b>     | <b>17</b>            | <b>65</b>           |                |

Performance on this item was consistent across the sites. The item was rated as a Strength in 53 percent of the South Central Area Office cases, 50 percent of the Lawrence Area Office cases, and 48 percent of the Boston Region cases. There was also some variation based on the type of case. The item was rated as a Strength in 58 percent (18 cases) of the 31 applicable foster care cases and 40 percent (10 cases) of the 25 in-home cases.

Item 20 was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children **and** that visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 20 was rated as an ANI when reviewers determined *one or more* of the following:

- There were not concerted efforts made by the agency to contact or engage the father or fathers (12 cases).

- Visits with the father or fathers were not of sufficient frequency or quality (11 cases).
- Visits with the mother were not of sufficient frequency or quality (7 cases).
- Visits with the mother were of sufficient frequency, but not quality (5 cases).
- Visits with the father were of sufficient frequency, but not quality (2 cases).
- Visits with the child’s guardian were not of sufficient frequency or quality (1 case).
- Visits with the father were not of sufficient frequency, although the visits were of sufficient quality (1 case).

Additional information from the case reviews is provided below for frequency of contact based on the type of case:

| Typical Frequency of Caseworker Visits with Parents                | Foster Care Cases |        | In-Home Services Cases |        |
|--|-------------------|--------|------------------------|--------|
|  | Mother            | Father | Mother                 | Father |
| Visits occurred on a weekly basis                                  | 1                 | 1      | 0                      | 0      |
| Visits occurred less than weekly, but at least twice a month       | 1                 | 0      | 2                      | 1      |
| Visits occurred less than twice a month, but at least once a month | 23                | 8      | 18                     | 5      |
| Visits occurred less frequently than once a month                  | 4                 | 9      | 4                      | 6      |
| There were no visits during the period under review                | 1                 | 7      | 0                      | 9      |
| <b>Not Applicable</b>  | 10                | 15     | 1                      | 4      |
| <b>Total Applicable Cases</b>                                      | 40                | 40     | 25                     | 25     |

**Rating Determination**

Item 20 was assigned an overall rating of ANI. In 50 percent of the applicable cases, reviewers determined that the frequency and/or quality of caseworker visits with parents were sufficient to monitor the safety and well-being of the child or promote attainment of case goals. This percent is less than the 90 percent or higher required for a rating of Strength. In the State’s first CFSR, this item was rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS requires that caseworkers see parents in the home a minimum of one time per month. The Statewide Assessment indicates that in the first quarter of SFY 2007, 50 percent of parents received monthly visits from caseworkers, and the percentage across the regions ranged from 48 percent to 55 percent.



## Well-Being Outcome 2

| <b>Outcome WB2: Children receive appropriate services to meet their educational needs.</b> |                             |               |                      |                     |                |
|--|-----------------------------|---------------|----------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b>    |                             |               |                      |                     |                |
|  | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved:  | 11                          | 21            | 16                   | 48                  | <b>96</b>      |
| Not Achieved   | 0                           | 2             | 0                    | 2                   | <b>4</b>       |
| <b>Total Applicable Cases</b>  | <b>11</b>                   | <b>23</b>     | <b>16</b>            | <b>50</b>           |                |
| Not Applicable Cases   | 6                           | 8             | 1                    | 15                  |                |
| <b>Total Cases</b>   | 17                          | 31            | 17                   | 65                  |                |

### STATUS OF WELL-BEING OUTCOME 2

Massachusetts is in substantial conformity with Well-Being Outcome 2. Reviewers determined that 96 percent of the cases reviewed were rated as substantially achieved for this outcome. This percentage meets the required 95 percent or higher required for substantial conformity. The outcome was substantially achieved in 100 percent of the 37 applicable foster care cases and in 85 percent (11 cases) of the 13 applicable in-home cases.

### Key findings of the 2001 CFSR

In addition to the lack of documentation of the Department's efforts to respond to the educational needs of children, the 2001 CFSR found that case workers were not consistently addressing issues such as school failures and truancy. The State's PIP included revision of the tools and strengthening of processes used for assessing the educational needs of children. In addition, a number of PIP activities focused on addressing the particular needs of special populations, including high-risk adolescents.

### Key Findings in the 2007 CFSR

Although the State was not in substantial conformity in ensuring that children's educational needs were met in the 2001 CFSR, the State achieved substantial conformity with this outcome in the 2007 CFSR. In the cases reviewed, DSS ensured that children's educational needs were met in a variety of ways. Caseworkers ensured that children were in the right educational settings to meet their needs, maintained consistent contact with children's schools, and regularly attended children's IEP meetings. Also, Educational Surrogate Parents and GAL educational advocates were consistently representing children's educational needs. In addition, the agency promoted higher education opportunities and assisted children with college applications and college tuition.

Stakeholders indicated that there are systemic problems associated with a) children receiving adequate education assessments and getting their special education needs met b) children receiving residential services when they need them, and c) the prevention and attention to issues such as truancy, substance abuse, and lack of school completion in the Boston Public Schools.

**Item 21. Educational needs of the child**

Strength  ANI

**Case Review Findings**

Item 21 was applicable for 50 (77 percent) of the 65 cases reviewed. Cases were not applicable if any of the following applied: (1) children were not of school age; or (2) children in in-home cases did not have service needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment are provided below.

| Item 21                       | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|-------------------------------|----------------------|-----------|---------------|--------------|---------|
| Strength                      | 11                   | 21        | 16            | 48           | 96      |
| ANI                           | 0                    | 2         | 0             | 2            | 4       |
| <b>Total Applicable Cases</b> | <b>11</b>            | <b>23</b> | <b>16</b>     | <b>50</b>    |         |
| Not applicable                | 6                    | 8         | 1             | 15           |         |
| <b>Total Cases</b>            | <b>17</b>            | <b>31</b> | <b>17</b>     | <b>65</b>    |         |

Item 21 was rated as a Strength when reviewers determined that the child’s educational needs were appropriately assessed and services were provided, if necessary. Examples of ways in which DSS ensured that children’s educational needs were met include a) the agency maintained consistent contact with the child’s school through phone calls and meetings in order to monitor the child’s school performance b) caseworkers regularly attended the child’s IEP meetings, c) Educational Surrogate Parents and GAL educational advocates consistently represented children’s educational needs, d) the agency ensured that the child was in the right educational setting to meet their needs, and e) the agency promoted higher education opportunities and assisted children with college applications and college tuition.

Item 21 was rated as an ANI in one case when the agency had not addressed educational issues related to truancy and oppositional behavior and in a second case when the agency did not ensure follow up with the school when a child was not receiving services specified on the IEP.

### **Rating Determination**

Item 21 was assigned an overall rating of Strength. In 96 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children. This percent is more than the 95 percent or higher required for a rating of Strength. In the 2001 CFSR, this item was rated as an ANI.

Note: The requirements for rating this item are different because there is only one item assessed under the outcome. For the other outcomes, an item rating of 90 percent is considered sufficient for a strength rating because there are multiple items within the outcome, and they involve fewer cases than those incorporated in the overall outcome rating. This is not the case for Item 21. Therefore, for this item, the rating of either a Strength or an ANI is based on the same criteria as the rating of Substantial Conformity.

### **Stakeholder Interview Information**

Stakeholders expressed varied opinions with regard to the State's efficacy in meeting children's educational needs. Stakeholders across the sites indicated that children are receiving educational advocacy through foster parents, GALs and educational surrogates. More specifically, stakeholders across the sites indicated that foster parents are persistent in supporting the educational needs of children, despite the fact that in the Boston Region, it was reported that foster parents are particularly challenged in ensuring the special education needs of children. A few other stakeholders mentioned, however, that DSS and the organization of Special Education Administrators have forged a partnership to address the special education needs of foster children, and this has led to a stronger network as well as more consistency in the school enrollment process for children who require special education services.

Stakeholders also reported strengths related to school enrollment and college enrollment for foster children. In Lawrence, a few stakeholders indicated that children entering foster care are enrolled in school quickly and that transportation services are provided so that children can remain in their home schools. State-level stakeholders reported that a high percentage of youth who receive adolescent outreach services go on to technical school or college and that DSS has recently received more funding to support college tuition for youth.

Alternatively, stakeholders expressed a number of difficulties with regard to the educational system and the educational needs of children. First, a few stakeholders noted that children are not consistently attending school when they are in night-to-night placements or transitional placements, and there are reportedly problems with children receiving appropriate credits when changing schools in the South Central area.

Second, stakeholders indicated that there are statewide issues with providing appropriate educational services for children in residential settings. This is attributed to challenges with cost-sharing between DSS and the Department of Education and is particularly problematic for children placed in communities with limited education budgets.

Third, stakeholders at the state-level and the Boston Region indicated that there are challenges in acquiring educational assessments along with appropriate IEP's for children with special needs, and that it is helpful to have the Family Networks lead agencies' staff

assisting with this. Stakeholders also indicated that in the Boston Public Schools system, there are large-scale problems with truancy, substance abuse and school completion, and the State is not addressing truancy early enough in the child's school years.

### **Statewide Assessment Information**

The Statewide Assessment indicated that DSS has several joint initiatives with the educational system such as, the School and Community Support Collaborative and the MA Administrators of Special Education Partnership to foster active conversations between the Department and the schools. In the Family Network system, the lead agencies each have an educational liaison to assist with education issues, and many area offices have innovative partnerships with schools in their locale. For example, the Statewide Assessment indicates that three area offices have stationed caseworkers in local school systems in order to facilitate improved educational outcomes. The following are examples of various area offices' efforts to address children's educational needs as reported in the Statewide Assessment:

- CQI efforts have tracked youth progress in school, how far children are placed from their home school, and the appropriateness of the school setting for the child. These efforts have led to education for foster children and increased focus on improved practice in these areas. In some areas, local school officials have participated in CQI activities.
- DSS staff have obtained grants to foster collaborative efforts with local schools and to improve after-school and summer activity options in local schools.
- One area office has a) held trainings on the McKinney Vento Homeless Assistance Act, b) worked on CHINS truancy and school offender issues with school districts, c) participated in a Healthy Schools initiative, d) helped with the development of a residential day provider for schools and DSS, and e) collaborated with the Department of Employment and Training to improve educational and training opportunities for older youth.
- Area offices have provided training on educational surrogate advocacy and increased the local pool of educational surrogate parents.
- One region a) established the 0-5 initiative to improve early childhood health education and more effectively prepare children for first grade and b) established a Truancy Project with a local school to improve children's attendance in school.
- One area office established an Adolescent Team that meets monthly with schools and probation officers to identify children at risk of becoming involved with DSS through a CHINS petition and to offer voluntary services. The Statewide Assessment attributes a decrease in residential services in the area to this type of practice.

### Well-Being Outcome 3

| <b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs.</b> |                             |               |                      |                     |                |
|--|-----------------------------|---------------|----------------------|---------------------|----------------|
| <b>Number of cases reviewed by the team according to degree of outcome achievement:</b>                |                             |               |                      |                     |                |
|  | <b>Lawrence Area Office</b> | <b>Boston</b> | <b>South Central</b> | <b>Total Number</b> | <b>Percent</b> |
| Substantially Achieved:  | 14                          | 22            | 10                   | 46                  | <b>75.4</b>    |
| Partially Achieved:  | 2                           | 3             | 4                    | 9                   | <b>14.8</b>    |
| Not Achieved or Addressed:   | 1                           | 3             | 2                    | 6                   | <b>9.8</b>     |
| <b>Total Applicable Cases</b>  | <b>17</b>                   | <b>28</b>     | <b>16</b>            | <b>61</b>           |                |
| Not Applicable:  | 0                           | 3             | 1                    | 4                   |                |
| <b>Total Cases</b>   | <b>17</b>                   | <b>31</b>     | <b>17</b>            | <b>65</b>           |                |

#### STATUS OF WELL-BEING OUTCOME 3

Massachusetts did not achieve substantial conformity with Well-Being Outcome 3. The outcome was determined to be substantially achieved in 75.4 percent of the applicable cases, which is less than the 95 percent required for substantial conformity. Performance on this outcome varied across the sites. The outcome was determined to be substantially achieved in 82 percent of the Lawrence Area Office cases, 79 percent of the Boston Region cases, and 62.5 percent of the South Central Area Office cases. There was little variation based on the type of case reviewed. The outcome was determined to be substantially achieved in 74 percent (29 cases) of the 39 applicable foster care cases and 77 percent (17 cases) of the 22 applicable in-home services cases.

#### Key Concerns from the 2001 CFSR

The 2001 CFSR noted the following key findings with respect to the State's ability to meet the physical and mental health needs of children:

- The State was more consistent in providing the required initial screenings of children's physical health than their mental health.
- Mental health providers sometimes failed to submit adequate progress reports on children, and DSS staff were not consistent in following-through with health care providers.
- In a few cases, children's health conditions were not treated.
- Children's health records were not consistently provided to foster parents.

The State's PIP addressed issues with the identification of children's health needs as part of the intake, assessment, and case planning system revisions. In particular, this system includes new tools for the early and accurate identification of mental health issues. However, as previously noted, this system has not been fully implemented.

**Key Findings of the 2007 CFSR**

Similarly to the 2001 CFSR, the physical and dental health of children (item 22) and the mental health of children (item 23) remain areas needing improvement in the 2007 CFSR. In terms of meeting the physical and dental health needs of children, there were inconsistencies in the provision of health assessments and health records. In particular, comprehensive assessments of children’s physical and dental health and medical information were not completed. There were also inconsistencies identified in assessing and addressing the mental health needs of children.

Stakeholders expressed the following with regard to physical and mental health services:

- There is a lack of dental providers that accept Mass Health coverage in various areas of the State.
- The State has mental health specialists available to assist local offices, but across the State, children do not have timely access to needed psychiatric and residential services.

Findings pertaining to the specific items assessed under Well-Being Outcome 3 are presented and discussed below.

**Item 22. Physical health of the child**

\_\_\_ Strength \_\_X\_\_ ANI

**Case Review Findings**

Item 22 was applicable for 48 (74 percent) of the 65 cases reviewed. Cases that were not applicable were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether (1) children's physical health needs (including dental needs) had been appropriately assessed, and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment are presented in the table below:

| Item 22                       | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|-------------------------------|----------------------|-----------|---------------|--------------|---------|
| Strength                      | 11                   | 21        | 6             | 38           | 79      |
| ANI                           | 1                    | 4         | 5             | 10           | 21      |
| <b>Total Applicable Cases</b> | <b>12</b>            | <b>25</b> | <b>11</b>     | <b>48</b>    |         |
| Not Applicable Cases          | 5                    | 6         | 6             | 17           |         |
| <b>Total Cases</b>            | 17                   | 31        | 17            | 65           |         |

Performance on this item varied considerably across sites. The item was rated as a Strength in 92 percent of applicable Lawrence Area Office cases and 84 percent of applicable Boston Region cases, compared to 55 percent of South Central Area Office cases.

There was little variation based on the type of case. The item was determined to be a Strength in 79 percent (31 cases) of the 39 applicable foster care cases and 78 percent (7 cases) of the 9 applicable in-home services cases.

Item 22 was rated as a Strength when reviewers determined that children's health needs (medical and dental) were routinely assessed and services provided as needed. Item 22 was rated as an ANI in 10 cases where the agency did not meet the medical or dental needs of the child. In nine of these cases, there was no record of a comprehensive assessment of the child's physical or dental health nor any documentation of the child's medical information. In two of these cases, despite the lack of documentation, there was no verification that the child's health and dental needs were being met. In one case, the child was overdue for a dental check-up, and there was no appointment scheduled.

### **Rating Determination**

Item 22 was assigned an overall rating of ANI. In 79 percent of the applicable cases, reviewers determined that the agency was adequately addressing the health needs of children in foster care and in-home services cases. This percent does not meet the 90 percent or higher required for a rating of Strength. In the State's 2001 CFSR this item was rated an ANI.

### **Stakeholder Interview Information**

Stakeholders commenting on this item reported that the State provides medical and dental coverage through Mass Health for all foster children until age 21 and that there is proposed legislation to extend this coverage through age 22. In terms of oversight of children's medical needs, various stakeholders reported that a) children are required to receive health checks within seven days of entering foster care, b) the health and dental needs of children are discussed in foster care reviews, and c) the court reviews and retains jurisdiction of children who are on anti-psychotic medication until they are 18 years of age. In addition, stakeholders in Lawrence and the South Central area indicated that foster parents typically ensure that children's medical needs are taken care of, although stakeholders in the South Central area reported that there are challenges for foster parents in acquiring up-to-date health histories for the children in their care.

Stakeholders at the state-level and Boston Region reported that there are many health providers available to meet the needs of youth and children and that Mass Health covers most of their needs. However, Boston Region stakeholders indicated that many dental providers do not take Mass Health, and this can make it difficult to find providers, particularly for specialty care. Stakeholders in the South Central area indicated that there is generally a lack of vision, dental and medical specialty providers in the area.

In addition, stakeholders pointed out that while the State had lost funding for nurses, the most recent State budget has included funds to hire medical professionals for the local DSS offices. Some state-level stakeholders indicated that the State needs legislation as well as agency protocols for determining if, and when, to end life support for a child whose medical condition requires this extreme level of medical care. There are plans for DSS to hire a medical director to advise the agency on medical issues.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS policy requires that all children who enter foster care must have a health care screening within seven calendar days. The Statewide Assessment reports that DSS has increased coordination efforts with other state agencies and medical professionals to improve the provision of medical services to children in foster care. The Statewide Assessment identifies a number of initiatives that have been undertaken in various area offices across the State and the following are a few of the reported endeavors:

- Partnerships with the local clinics to ensure that children receive seven-day screenings and thirty-day medical examinations upon entering foster care and as well as ongoing physical examinations.
- The development of a medical records center which is managed by a staff person in an area office who a) enters all medical information for children in the area and b) has developed relationships with pediatric nurses county-wide. The office worked on dental care access issues and disseminated information of two new dental providers to foster parents and others.
- One area office has added a pediatrician to the office's MDAT
- Another area office participates in the Massachusetts Early Childhood Linkages Initiative which ensures that children who enter foster care are screened for Early Intervention eligibility.

**Item 23. Mental health of the child**

\_\_\_ Strength  ANI

**Case Review Findings**

Item 23 was applicable for 50 (77 percent) of the 65 cases reviewed. Cases were not applicable if the child was too young for an assessment of mental health needs or if there were no mental health concerns. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed and (2) appropriate services to address those needs had been offered or provided. The findings of this assessment are presented in the table below:

| Item 23                       | Lawrence Area Office | Boston    | South Central | Total Number | Percent |
|-------------------------------|----------------------|-----------|---------------|--------------|---------|
| Strength                      | 13                   | 17        | 13            | 43           | 86      |
| ANI                           | 2                    | 4         | 1             | 7            | 14      |
| <b>Total Applicable Cases</b> | <b>15</b>            | <b>21</b> | <b>14</b>     | <b>50</b>    |         |
| Not Applicable Cases          | 2                    | 10        | 3             | 15           |         |
| <b>Total Cases</b>            | 17                   | 31        | 17            | 65           |         |

The item was rated as a Strength in 93 percent of the South Central Area Office cases, 87 percent of applicable Lawrence Area Office cases, and 81 percent of applicable Boston Region cases. This item was rated as a Strength in 90 percent (27 cases) of the 30 applicable foster care cases and 80 percent (16 cases) of the 20 applicable in-home services cases.



Item 23 was rated as a Strength when reviewers determined that children’s mental health needs were appropriately assessed and the identified mental health needs were addressed. Item 23 was rated as an ANI when reviewers determined one or more of the following:

- Mental health needs were assessed but not properly addressed (5 cases).
- Mental health needs were neither assessed nor addressed (1 case).
- Services were provided but they were not appropriate to the child’s needs (1 case).

### **Ratings Determination**

Item 23 was assigned an overall rating of ANI. In 86 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to address the mental health needs of children. This percent is less than the 90 percent or higher required for a rating of Strength. This item was also rated as an ANI in Massachusetts’ 2001 CFSR.

### **Stakeholder Interview Information**

According to stakeholders, children receive most of their mental health care through a carve-out of the Massachusetts Behavioral Health Partnership (MBHP) system of care. Stakeholders indicate that collaboration with MBHP allows for ongoing attention to the mental health needs of children in the child welfare system. A few state-level stakeholders also indicated that children who are on psychotropic medications are monitored through the court and through an MBHP tracking system. The new DSS Chief Medical Officer will reportedly be taking the lead on addressing issues of medication management for children in the State’s custody. In addition, some stakeholders pointed out that the Rosie D lawsuit found Massachusetts not to be in compliance with the federal EPSDT program, and that the resolution of this lawsuit requires that every Medicaid eligible child receiving services through the State must have a mental health assessment and access to needed mental health services.

Stakeholders commenting on this item generally indicated that there are services available across the State, and while there are some areas with particularly strong and/or specialized mental health services, there is a lack of consistency in service accessibility and availability. For example, stakeholders from the Boston Region indicated that the area has many mental health services available, but there are delays in accessing these services for children, including waits of up to two to three months for psychiatric care. Stakeholders in the Boston Region and South Central area indicated that funding issues with regard to residential treatment can also impede a child’s access to these services. Stakeholders across all three sites indicated that there are limited services for autistic children as well as a lack of providers with expertise in this area.

In addition, a few South Central Area Office stakeholders also indicated that there is some confusion regarding how much of a child’s health information can be communicated to foster parents and providers. Stakeholders pointed out that his lack of clarity sometimes results in children’s health needs either not being identified or not being appropriately addressed.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Division of Medical Assistance has required that a behavioral health screening be done in conjunction with the EPSDT screening. In addition, the Statewide Assessment reports that DSS uses the CANS assessment to identify the mental and behavioral needs of children in case planning, and a web application will assist the agency in collecting data and conducting related analysis. The Statewide Assessment also reports that in 2003, the agency hired a mental health specialist in each regional office to provide consultation to area offices on cases with complex mental and behavioral health issues. In addition, DSS re-established regional clinical managers who provide technical assistance on clinically challenging cases, and psychiatric consultation services are available to DSS area offices through an inter-agency agreement with the Department of Mental Health.

According to the Statewide Assessment, DSS has engaged in a number of additional activities associated with improving mental and behavioral health outcomes for children:

- Seven DSS supervisors have participated in a trauma treatment training and certification program through a partnership with Boston University.
- DSS participates in a Collaborative Assessment Program (CAP) with the Department of Mental Health (DMH) and the Division of Medical Assistance (DMA) to provide a single point-of-entry for children who may be seriously emotionally disturbed and who may need residential placement. The CAP provides comprehensive child assessments, case management and intensive community-based services.
- Various area offices have partnered and/or contracted with mental health service providers, utilized local mental health specialists for consultation, established clinical review teams and coordinated child-specific efforts through interagency meetings.

**SECTION B: SYSTEMIC FACTORS**

This section of the CFSR Final Report provides information regarding the State’s substantial conformity with the seven systemic factors examined during the CFSR. Information for the items included in each systemic factor comes from the Statewide Assessment and from interviews with stakeholders held during the onsite CFSR. A score for substantial conformity is established for each systemic factor. In addition, information is provided regarding the State’s performance on each systemic factor for the State’s first CFSR. If the systemic factor was part of the State’s PIP, the key concerns addressed in the PIP and the strategies for assessing those concerns are noted, as well as any changes in ratings that occurred as a result of the State’s second CFSR.

**I. STATEWIDE INFORMATION SYSTEM**

| <b>Rating of Review Team Regarding Substantial Conformity</b> |                                      |   |                               |    |
|---|--------------------------------------|---|-------------------------------|----|
| <b>Rating</b>   | <b>Not in Substantial Conformity</b> |   | <b>Substantial Conformity</b> |    |
|   | 1                                    | 2 | 3                             | 4X |
|   |                                      |   |                               |    |

**STATUS OF STATEWIDE INFORMATION SYSTEM**

Massachusetts is in substantial conformity with the systemic factor of Statewide Information System. FamilyNet, Massachusetts’ Statewide Automated Child Welfare Information System (SACWIS), can readily provide the federally required data on every foster child’s status, demographic, characteristics, location and goal. This systemic factor was also in substantial conformity in the initial CFSR, and the State was not required to address it in the PIP. Findings for the item assessed for this factor are presented below.

**Item 24. State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.**

Strength     ANI

Item 24 is rated as a Strength because FamilyNet has the minimum federally-required functionality, and it is a comprehensive, highly automated system. In addition, the State has continued to increase the functionality and use of the system to better manage child welfare cases. In the State's first CFSR, this systemic factor was also rated as a Strength.

#### **Statewide Assessment Information**

According to the Statewide Assessment, DSS uses FamilyNet to maintain demographic data and to address information and placement data for children and families who are involved with the agency. The Statewide Assessment notes that paid placement data is accurate and that DSS added address validation software to FamilyNet to help ensure the accuracy of family and placement addresses. The Statewide Assessment also reports that a recent AFCARS review found no problems with the demographic data for the placement population.

According to the Statewide Assessment, FamilyNet supports reporting functionality through real-time (on-line queries) and weekly, monthly and quarterly reports. The Statewide Assessment indicates that on-line queries are used by field staff to track caseload, caseworker visits, work reminders, court schedules, foster care review and fair hearing schedules, child placement, and resource management. Spreadsheets are reportedly created from these reports and used for tracking financial management, case management trends, placement trends, resource licensing and service utilization. According to the Statewide Assessment, DSS also generates statistical reports to track federal outcome measures and to conduct trend analysis on data such as, child abuse/neglect reporting and disposition levels. There are also reports available that analyze children's placements with regard to levels of care, and upon request, the DSS IT Unit can provide ad hoc reports to any DSS office.

According to the Statewide Assessment, FamilyNet also supports two collaborative efforts. The first effort is between the DSS Division of Quality Improvement and the Office of Management, Planning and Analysis and it has resulted in the production of a CQI Data Book to facilitate and support the use of data by DSS staff and CQI teams. The Statewide Assessment reports that the data book is updated quarterly and includes reports that are relevant to 11 key indicators for clinical practice, seven key indicators for managerial practice, and eight key indicators for child permanency outcomes. Because statewide data is provided by regional and area offices, the data book allows for interoffice comparisons and other types of trend analysis. According to the Statewide Assessment, the second collaborative effort supported by FamilyNet is between DSS, hospitals and placement service providers and it uses the automated system to track movement of children from hospital settings to less intensive treatment settings. This collaboration has led to

improvements in documentation of unpaid placements, although timely data entry of psychiatric hospitalizations reportedly remains a challenge.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 17 stakeholder interviews, many of which involved multiple participants. The majority of stakeholder comments on this item were consistent with what was reported in the Statewide Assessment. Stakeholders agreed that FamilyNet, which has been in operation since 1998, tracks the demographic characteristics, goals, locations and legal information associated with all foster children across the State. According to stakeholders, all but one of the SACWIS mandatory requirements have been met by the Family Net system, with the only remaining requirement being the Title IV-D interface. In addition, a few stakeholders noted that system-wide reports and local issue-specific reports are available for management and analysis purposes.

Some stakeholders also noted the following challenges associated with FamilyNet:

- Racial and ethnic categories of the information system are too limited, and as a result, the data is not as useful as they could be in accurately identifying disproportionate representation of certain groups in the child welfare system.
- The system does not support the development of strengths-based service plans because the language is pre-programmed, and it does not accurately reflect the kinds of goals and activities that are tailored to meet the family’s needs.
- While the system has a lot of capability, the data entered by caseworkers is not always timely or accurate.
- It is difficult to enter and locate medical and dental information in the system.
- The State is working to resolve a data entry issue that has historically made it difficult for DSS to accurately track children’s hospitalizations or other non-paid DSS placements.

**II. CASE REVIEW SYSTEM**

| Rating of Review Team Regarding Substantial Conformity |                               |    |                        |   |
|--|-------------------------------|----|------------------------|---|
| Rating   | Not in Substantial Conformity |    | Substantial Conformity |   |
|  | 1                             | 2X | 3                      | 4 |
|  |                               |    |                        |   |

## **STATUS OF CASE REVIEW SYSTEM**

Massachusetts is not in substantial conformity with the factor of the Case Review System. Case plans are not routinely developed jointly with parents and youth, and there are ongoing concerns about the effectiveness of permanency hearings and notification of foster caretakers about reviews and hearings. This systemic factor was also found not to be in substantial conformity in the 2001 CFSR, and the State was required to address it in the PIP (PIP). Findings with regard to the specific items assessed for this factor are presented below.

### **Key Findings from the 2001 CFSR**

Key concerns identified during the 2001 CFSR were the following:

- There was a lack of family involvement in case planning in many of the cases reviewed.
- The design and automation of the case/service plan in the FamilyNet system hindered parental involvement in the planning process.
- Permanency hearings were brief and perfunctory and did not adequately address the ASFA requirements for these hearings.

The State implemented the following PIP strategies to address concerns related to family involvement in case planning:

- Developed a new service planning process that is strengths-based, child-centered, family-focused and community-connected;
- Assessed the level of family involvement in case planning by a) internally reviewing case practices, b) conducting a survey of families involved with the Department, and c) by forming a Parent Advisory Committee to represent the diverse groups served by DSS; and
- Implemented Family Group Conferencing.

In addition, the State implemented the following strategies to address concerns with the quality of permanency hearings:

- Explored barriers to high quality permanency hearings and identified methods to present quality information to the court for evaluation by involved parties;
- Explored the roles of the participants in permanency hearings; and
- Piloted a new design for permanency hearings in cases with a goal of “alternative permanent plan.”

### **Key Findings from the 2007 CFSR**

During the 2007 CFSR review, most stakeholders noted the agency’s efforts (during and after the PIP period) to improve family engagement in the case planning process. These efforts included the implementation of a standing Parent Advisory Committee that meets quarterly with the Commissioner of DSS and the conducting of Family Group Conferencing on a limited number of cases in all area offices. In addition, although the Family Engagement system has not been fully implemented, stakeholders across the sites agreed that the agency emphasizes greater participation by parents and age-appropriate children in case planning and reviews.

While the 2007 CFSR found that stakeholders acknowledged improvements in some courts, they also reported that barriers to quality permanency hearings still exist. Stakeholders reported that a) some courts still docket numerous permanency hearings on the same day which does not allow sufficient time for a meaningful review of the permanency plan, b) some courts conduct pro forma hearings, and c) there is inconsistent involvement of parents, youth and caregivers in permanency hearings.

**Item 25. Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions.**

\_\_\_ Strength    X ANI

Item 25 is rated as an ANI because although parents are generally aware of the content of the case plan, there is wide variation regarding the extent to which parents are involved in developing and updating their case plan. This variation was found within and among area offices. In the State’s first CFSR, this item was also rated as an ANI. In addition, Item 18 in the case review, which examines child and family involvement in the case planning process, was also assigned an overall rating of ANI. Reviewers determined that the agency had made diligent efforts to involve parents and/or children in the case planning process in 49 percent of the cases reviewed.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS policy requires that service plans must be developed within 55 working days for all cases that will remain open once assessments are completed. DSS service plans are reportedly time-limited agreements between DSS, parents, children, service providers and foster parents in which goals, tasks and goal achievement indicators are outlined. The Statewide Assessment indicates that families and providers are involved in service plan development and that service plans are written in a family’s preferred language wherever possible. According to the Statewide Assessment, DSS monitors service plan completion rates and reports that approximately 80 percent of all service plans are completed within the mandated timeframe.

The Statewide Assessment also reports that DSS has prioritized the development of a Family Engagement Model. The Family Engagement Model reflects the agency’s core practice values which include strengths-based, child-driven, family-centered and community-focused practice with a commitment to cultural diversity/cultural competency and continuous learning. The Statewide Assessment reports that the main objectives of the Family Engagement Model are to a) achieve child safety by “frontloading” DSS responses to the unique circumstances of families and b) eliminate disproportionate representation of children and families of color in the State’s child welfare system. According to the Statewide Assessment, the Family Engagement Model includes an emphasis on the following:

- Community connected practice through local DSS and community partnerships;
- Expanded use of “teaming” practices in which teams of caseworkers, rather than individuals, are responsible for working with a family;

- Improved initial engagement of families who become involved with the child welfare system regardless of the nature of their involvement (CPS, CHINS or voluntary);
- Alternative responses which include the use of protective services, DSS support and stabilizing services, and community resources;
- Improved practices for assessing safety and risk; and,
- A new approach to assessing the family's ability to achieve safety, well-being and permanency.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 37 stakeholder interviews, many of which involved multiple participants. In general, stakeholders explained that service plans are required to be developed within 55 days of the case being assigned for assessment, although emergency service plans and interim service plans can be developed in the investigation phase as well. According to stakeholders, service plans are routinely revised every six months and should also be updated whenever the case goal is changed.

Several stakeholders across the sites pointed out that in the past five years there has been an increased emphasis on family engagement, family strengths, and the improvement of client perceptions of DSS. Stakeholders pointed out that while the degree to which these approaches are utilized in case practice varies across the State, many stakeholders specifically noted the focus on the strengths-based model in case planning. Some stakeholders also identified various team planning meetings which are happening in a limited manner across the State but which provide forums for family involvement in case planning. For example, some stakeholders mentioned that Family Group Conferencing is an effective means of involving families in case planning, and other stakeholders reported that there are contracted services team meetings that involve families in identifying their service needs.

The majority of stakeholders commenting on this item were of the opinion that service plans are developed in a timely manner. However, stakeholders were not in agreement that parents are involved in the development of their case plans, and there were inconsistent comments with regard to how often youth are involved in the development of case plans. Some stakeholders across the three sites suggested that while parents consistently sign service plans, they have not always been included in their development. Some stakeholders pointed out that the creation of the service plan in FamilyNet has hindered the family engagement process, and several stakeholders agreed that the FamilyNet service plan does not systematically facilitate strength-based case planning. Some caseworkers said that they amend plans by hand in order to address family needs adequately. In addition, a few stakeholders in each of the sites noted that there are challenges for caseworkers in keeping case plan goals and associated tasks current.

**Item 26. Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.**

Strength     ANI



Item 26 is rated as a Strength because the periodic Foster Care Reviews (FCR) are reportedly held on a timely basis, and data provided in the Statewide Assessment support this finding. While FCRs may vary in quality, they are highly regarded as a practice that facilitates case progress. In the State's first CFSR, this item was also rated as a Strength.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS uses an administrative review process, called the Foster Care Review, to ensure that cases involving children in foster care are reviewed every six months. The Statewide Assessment reports that these reviews are coordinated and facilitated by an employee from the Foster Care Review Unit, however, each review is conducted by a panel which includes not only the DSS Foster Care Reviewer but also an area office manager and a community volunteer. According to the Statewide Assessment, all family members, children age 14 and older, foster parents, group care providers, child attorneys, and parent attorneys must be invited to the review and receive notice of the review at least 14 days prior. The Statewide Assessment points out that reviews are typically held in area offices but may be held off site in order to accommodate incarcerated parents, for example.

According to the Statewide Assessment, case selection and six-month review schedules are automated, and more than 90 percent of these reviews are held in a timely manner. The Statewide Assessment also reports that the purpose of the review is to examine the appropriateness of the permanency goal, the safety and stability of the child's placement, the sufficiency and appropriateness of the service plan, and the extent of the family's progress in achieving case plan goals. The foster care reviewer, the area office manager, and the volunteer participant reportedly vote upon determinations in these areas. Parents, youth, foster parents, and children's attorneys may appeal panel decisions with regard to the permanency goal for the child through an administrative fair hearing process. The Statewide Assessment also notes that when area offices disagree with goal determinations, goals may be reviewed through a regional clinical conference. In addition, the Statewide Assessment reports that the Foster Care Review Unit uses an alert system to track any safety/risk, administrative, and/or legal issues that are identified in these reviews and that require action.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 32 stakeholder interviews, many of which involved multiple participants. Stakeholders generally echoed the explanations of the review process described in the Statewide Assessment, and in addition, the dominant opinion was that the State conducts six-month administrative Foster Care Reviews that function in an efficient and timely manner. A few stakeholders reported that ticklers alert caseworkers and supervisors two months prior to a scheduled foster care review, and there are also ticklers that identify the list of invitees for each case to be reviewed. In addition, many stakeholders reported that the foster care reviews are quality reviews that help to move children toward permanency by examining children's case plan goals and by flagging areas that will require DSS consideration and action.

**Item 27. Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.**

Strength  ANI

Item 27 is rated as an ANI because although permanency hearings are being held in a timely manner, the time afforded to these hearings by some local juvenile court judges is often insufficient, and this adversely impacts hearing content. While the Court Improvement Program and DSS have given attention to improving the quality of permanency hearings since the prior review, there are remaining ongoing issues with the quality of these hearings and with the level of participation of parents, caretakers, and youth in these hearings. In the State's first CFSR, this item was also rated as an ANI.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS has a monitoring system in FamilyNet that determines due dates for permanency hearings for all children in placement, and the dates from that system are compared with the courts scheduling of permanency hearings. The Statewide Assessment reports that DSS legal and clinical staffs coordinate the filing of permanency hearing reports thirty days prior to the permanency hearing.

The Statewide Assessment noted two challenges associated with permanency hearings. First, according to the Statewide Assessment, there was a significant reduction in DSS legal staff in 2002-2003 and a subsequent lack of staff available to monitor the timeliness of hearings. Also according to the Statewide Assessment, this led to an increase in court continuances and overdue hearings. However, since 2006, DSS has reportedly been able to increase the number of agency attorneys and has begun to address problems with the timeliness of these hearings. Second, the Statewide Assessment points out that although CHINS cases are reviewed every six months, the substance of these hearings does not always focus specifically on the child's permanency needs.

According to the Statewide Assessment, the Court Improvement reassessment was conducted in 2005, and the assessment revealed that 70 percent of hearings occur in a timely manner with some counties averaging 80 percent timeliness and some counties averaging well below 70 percent. For the South Central Area Office and Boston Region which averaged better in timeliness of permanency hearings, the Statewide Assessment notes promising strategies, respectively, in a) utilizing the same Judge for permanency hearings and special trial assignment sessions and b) scheduling permanency hearings at the 11-month mark.

The Statewide Assessment also reported on a successful pilot associated with the 2001 CFSR PIP in which permanency hearings were held during after school hours, and youth ages 16 and older were given the opportunity to speak directly with judges. This pilot was expanded to other courts, and there are plans to implement this positive youth development approach statewide by 2008.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 31 stakeholder interviews, many of which involved multiple participants. Many stakeholders across the sites reported that permanency hearings are occurring every 12 months and that these hearings are particularly timely in Worcester Juvenile Court. Stakeholders across the sites were of mixed opinion, however, regarding the quality of these hearings. Some stakeholders across the sites indicated that while the focus is on the appropriateness of the child’s permanency goal, these hearings are largely “pro forma” without enough attention paid to child permanency outcomes. Several stakeholders across the sites pointed out that hearings are typically held on one day during the month, and on that day it is customary for judges to hear 20-30 cases.

Alternatively, some stakeholders reported that the DSS Permanency Planning Conferences (PPCs) are frequently held at the nine-month mark for custody cases and that these conferences do indirectly support the quality of twelve-month permanency hearings. According to stakeholders, PPCs are held in a timely manner, and both PPC reports and standard court reports are submitted to the court prior to the permanency hearing.

In terms of youth engagement in the hearing process, several stakeholders pointed out that the State has changed its approach to more consistently involve youth in their permanency hearings. However, some stakeholders indicated that youth have neither heard of permanency hearings nor participated in these hearings. In addition, the Worcester Juvenile Court’s recent consolidation of permanency hearings for all child welfare cases from the South Central Area Office is viewed by some stakeholders as hindering the participation of family members in these reviews due to the increased time it takes to travel and the lack of transportation in the large geographic area encompassed by this Region.

**Item 28. Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.**

Strength  ANI

Item 28 is rated as an ANI because of delays in TPR filings and hearings due to the lack of consistency in the Department’s approach to parent and child evaluations and some local courts’ processes for the scheduling and hearing of the TPR petitions. In addition, lengthy delays in the TPR appeals process were identified in some sites. In the State’s first CFSR, this item was rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, the administrative office of the courts monitors established standards for the management of child protective cases, including timeframes for major court events such as time from petition filing to case disposition and TPR. In addition, the Statewide Assessment indicates that FamilyNet generates reports that identify those children who have been in foster care for 12 months, and a Permanency Planning Conference (PPC) is held for children prior to the 15<sup>th</sup> month to determine if compelling reasons exist or if TPR should be filed. According to the Statewide Assessment, some regions hold these conferences at

nine months, and DSS has plans to adopt this timeline statewide. In addition, the Boston Region holds quarterly review meetings for children with goals of adoption.

According to the Statewide Assessment, the 2005 CIP Reassessment found that the average length of time from the filing of the Care & Protection Petition to the filing for TPR was 315 days. The Statewide Assessment reports that on average TPR cases are resolved by final order within 16-17 months.

The Statewide Assessment also reports challenges associated with the timeliness of TPR court hearings. According to the Statewide Assessment, most of the State courts utilize “rolling” trial dates rather than a day-to-day trial schedule, and this process may extend trials over a number of months. In addition, the Statewide Assessment notes that most juvenile courts have only one judge who hears CHINS, care and protections, emergency temporary custody and termination cases which results in TPR trials being delayed or postponed. Although there are attempts to support individual courts by recalling retired judges to help with trial backlogs, the number of judges available to do this is limited. In addition, the Statewide Assessment noted that the decrease in legal staffing in 2002-2004 resulted in insufficient monitoring of the timeliness of the appeals process.

Aside from the challenges noted, the Statewide Assessment also reported the following promising practices:

- The Supreme Court on Child Welfare Delays meets on a quarterly basis and has been active in a) attending CIP conferences and National Court Administrator and Chief Justice Meetings, and b) in guiding the development of the CIP strategic plan.
- The Worcester Juvenile Court has a dedicated trial session with one judge assigned.
- Massachusetts has a statewide permanency mediation program, and increased community education about the program has led to additional program referrals and a slight increase in program funding for SFY 2007.
- An alternative dispute resolution process, known as the Triage Project, is being piloted in the Western Region and being used on new care and protection cases which reportedly creates additional time for TPR cases.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 26 stakeholder interviews, many of which involved multiple participants. The majority of stakeholders commenting on this item reported while there is a process in place that supports timely TPR filing and documentation of compelling reasons across the State, ongoing issues associated with delays were also identified. For example, stakeholders in Lawrence indicated that PPCs and court hearings may be delayed while DSS staff and child and parent attorneys await information from child and parent evaluations. These stakeholders also noted that a lack of funding for evaluations may further postpone decision-making. In addition, a number of South Central Area Office stakeholders noted that there is a lack of agreement between DSS attorneys and caseworkers on what constitutes appropriate filing, with attorneys more often determining that TPR should be filed when the case for termination can most likely be won.

Some stakeholders in the Boston Region reported that the entire TPR process, including appeals, can take two to three years. Transcription of the TPR hearing can take two or three months to complete, and judges generally need an additional 30 days to prepare their findings. In addition, attorneys need time to prepare their findings once they receive the transcription. A few stakeholders did note that a) there have been efforts made to decrease time spent on transcriptions by using digital equipment rather than traditional taping methods, and b) parents are now required to sign appeal filings to minimize instances in which attorneys do not first speak with parents about the filing.

Alternatively, stakeholders also identified useful practices that facilitate more timely TPRs. Stakeholders across the sites identified DSS “ASFA reports” as a good tracking method for determining which cases need Permanency Planning Conferences (PPC) in order to determine the appropriateness of permanency goals and to identify and document compelling reasons for not filing for TPR. Some stakeholders from Boston and Lawrence pointed out that compelling reasons are most often discussed in PPCs, rather than in Court, and that compelling reasons are documented in FamilyNet. Various stakeholders also noted the following as facilitating timelier adherence to ASFA:

- DSS and the courts have the ability to structure open adoptions.
- The CIP grant has been used to facilitate recalls of retired judges in regions where courts have a backlog of TPR cases.
- A new CIP data grant will be used to develop and implement a statewide court scheduling and case tracking system.

**Item 29. Provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.**

Strength  ANI

Item 29 is rated as an ANI because while foster, pre-adoptive and relative caregivers are receiving notice and are encouraged to participate in the six-month foster care reviews, there are inconsistencies in court reviews and hearings with regard to a) the provision and receipt of notice to caregivers, b) the provision of information to caregivers on their right to be heard in hearings, and c) judicial handling of caregiver involvement in court hearings. In the State’s first CFSR this item was rated as a Strength.

#### **Statewide Assessment Information**

According to the Statewide Assessment, DSS must provide foster parents, pre-adoptive parents, and relative caregivers notice of Foster Care Reviews, trials on the merits, and permanency hearings that involve children in their care. According to the Statewide Assessment, the State Appeals Court determined that foster parents, pre-adoptive parents and relative caregivers should be heard in court when they are testifying under oath, and as such they are not usually heard unless they are testifying. The Statewide Assessment reports that the Foster Care Review Unit and the legal department utilize FamilyNet to generate the appropriate notification letters. The Statewide Assessment indicated that due to the decrease in DSS legal staff, the notification of foster parents about court hearings and trials has been inconsistent, and as such there has been an increased reliance on caseworkers and attorneys to verbally notify

caregivers. The Statewide Assessment reports that with the rehiring of legal and support staff, the regions have been working on bringing DSS into compliance with this requirement.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 29 stakeholder interviews, many of which involved multiple participants. Stakeholder comments on this item were consistent with the Statewide Assessment regarding notice of the six-month foster care review. Stakeholders across the sites reported that DSS has an effective system for ensuring that foster and pre-adoptive parents receive invitations to Foster Care Reviews. Some stakeholders reported that foster parents will attend reviews when they do not conflict with work schedules, and that their input is valuable to the process.

Stakeholders expressed varied opinions in terms of how effective the procedure is for notification of foster, relative and pre-adoptive parents about court hearings. Stakeholders in the Boston Region, Lawrence and at the state level reported that foster parents will typically receive notice of hearings either verbally or in written form. Stakeholders in the South Central area and at the state level reported that the process for notifying foster parents of court hearings is not clear and that notice is not consistently received by caregivers, although a few state-level stakeholders noted that pre-adoptive families are more consistently receiving notification.

Stakeholders from across the sites reported that foster parents are typically allowed to be heard in court either directly as witnesses or indirectly through attorneys and GALS. However, it was also reported by some stakeholders that it is up to each judge whether or not he/she wants to hear directly from the foster parent. In addition, some stakeholders at the state-level noted that foster parents receive little information about their right to be heard in court hearings and that there are no printed materials that explain these rights or the court hearing process.

**III. QUALITY ASSURANCE SYSTEM**

| Rating of Review Team Regarding Substantial Conformity |                               |   |                        |    |
|--|-------------------------------|---|------------------------|----|
| Rating   | Not in Substantial Conformity |   | Substantial Conformity |    |
|  | 1                             | 2 | 3                      | 4X |
|  |                               |   |                        |    |

## STATUS OF QUALITY ASSURANCE SYSTEM

Massachusetts is in substantial conformity with the factor of Quality Assurance because State standards for foster homes and congregate foster care have been enhanced and standardized, and the State has developed and begun to implement a statewide quality assurance system. In addition, although data are more readily available to managers, these data are not consistently used to determine the effectiveness of services or outcomes for children. In the initial CFSR, the State was in substantial conformity with this systemic factor and was not required to address it in the PIP. Findings with regard to the specific items assessed for this factor are presented below.

### **Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children.**

Strength     ANI

Item 30 is rated as a Strength because the State has strengthened regulations for congregate foster care and issued Family Resource Policy that governs family foster homes throughout Massachusetts. This item was also rated as a Strength in the first CFSR, and the State has continued to enhance its standards and policies for out-of-home care facilities.

#### **Statewide Assessment Information**

According to the Statewide Assessment, in 2006, DSS implemented the Family Resource Policy which outlines the process and standards required to ensure that children in the foster care system receive the appropriate care to meet their health and safety needs. The Statewide Assessment reports that the policy outlines the requirements for foster care provider eligibility as related to the physical characteristics of homes, caregiver abilities, and other licensing standards. The Statewide Assessment points out two specific examples of guidelines included in the policy such as the “Enhanced Safety Assessment Guidelines” and “Waivers for Placements of Children in Homes with Presumptively Disqualifying Dog Breeds and Other Potentially Dangerous Pets/Animals”.

In addition, the Statewide Assessment details increased DSS staffing associated with Family Resource efforts. DSS has reportedly staffed the Central Office Foster Care and Adoption Support Services Unit with a director, two additional foster care specialists, and two foster care managers who in their various capacities provide increased oversight of family resource policy compliance across the State. According to the Statewide Assessment, staff from this Unit meet regularly with regional and area office staff to review standard compliance reports, provide technical assistance, and support field staff in family resource efforts. The Statewide Assessment also points out that the State has additional key collaborating groups that represent regional and area offices. These include the Family Resource Information Committee and the Family Resource Supervisors, and these groups work with central office foster care support staff to ensure family resource functionality on FamilyNet.

According to the Statewide Assessment, in 2006, when DSS procured a new contract for congregate care services, new contract performance standards were incorporated. The Statewide Assessment reports that these performance standards are intended to promote positive youth development and are designed to a) reduce incidents resulting in child injury in the placement setting and b) to shorten the time period that children are placed in congregate care. In addition, DSS developed standardized clinical documentation forms, treatment plans, and critical incident forms to be used by all providers beginning in 2007. The Statewide Assessment also reports that for children placed in these settings, there are monthly caseworker visits and Foster Care Reviews. In addition, DSS also conducts the following:

- Program site visits to assess contract standard compliance;
- Desk audits of written materials supplied by FamilyNet;
- Investigations of reports of maltreatment of children in foster care and complaints from the field;
- Thorough site evaluations/reviews; and,
- Reviews of annual financial reporting of these programs.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 18 stakeholder interviews, many of which involved multiple participants. Several stakeholders across the sites noted that DSS has rewritten the regulations that govern the care of children in congregate care settings, and there are extensive regulations that guide the use of restraints for managing behavior in these settings. In addition, state-level stakeholders indicated that DSS developed a web application that is used to track critical incidents involving children in licensed residential and group care settings. While stakeholders from the State, the Boston Region and Lawrence acknowledged that there is greater attention being paid to standards in congregate care, a few stakeholders in Lawrence noted that there is not enough attention yet paid to the implementation of these standards amongst providers.

Some stakeholders across the sites pointed out that DSS has its own licensing process for DSS foster homes and that each area office has a family resource unit that is responsible for the licensing and re-licensing of foster homes. Staff from the family resource units reportedly visit with foster parents every other month. In addition, a DSS centrally-located unit investigates institutional reports of child abuse and neglect, and 51As that are filed on foster homes are investigated by an area office that does not serve the same catchment area.

In addition, state-level stakeholders noted the Department of Early Education and Care (DEEC) licenses child placement agencies who in turn approve their own specialized foster homes. However, as of July 2006, all child-placing agencies under contract to DSS must have their foster homes meet the same licensing standards as DSS foster homes. Stakeholders from the Boston Region pointed out that while the State has increased reliance on community-based care over institutional settings, the standardizing of requirements for specialized foster care has led to more consistency across the State amongst these providers.



Stakeholders in Boston and the South Central area reported that there have been various quality assurance efforts since the last CFSR. However, these stakeholders noted that area offices may do appreciative inquiry on particular practice issues associated with Family Network services or caseworkers may be asked to complete evaluation forms for particular services, but at this point, there is no evidence of a centralized QA process as relates specifically to the evaluation of service providers. In general, most area offices have their own mechanisms for evaluating service providers.

**Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.**

Strength     ANI

Item 31 is rated as a Strength because there is now a Continuous Quality Improvement (CQI) Unit in the Central Office and the State has begun to implement Quality Service Reviews (QSRs). In addition, the State's information system generates robust QA reports which local managers and supervisors can use to manage case activities and outcomes. However, while these reports are used by local managers and supervisors to manage case activities and outcomes, this is not done on a consistent basis.

In the State's first CFSR, this item was rated as an ANI. During the initial CFSR, stakeholders clearly emphasized the need for a centralized, independent QA System/Unit to better inform the policy and practice of the Department on a regular basis. Many stakeholders also saw the need for data to be more readily and systematically available for use in the State's ongoing efforts to improve the quality and effectiveness of services for children and their families. These issues were successfully addressed during and after the PIP.

#### **Statewide Assessment Information**

According to the Statewide Assessment, there is a Central Office CQI Unit, and each of the 29 area offices across the State developed a CQI Team that includes representatives from the area office, the local community, district attorneys offices, and other state agencies. According to the Statewide Assessment, the State has worked with Human Systems & Outcomes, Inc to develop the QSR as the mechanism for conducting quality assurance in key practice areas across the State. A number of review design strategies related to goals, team selection, orientation and training were conducted in 2006, and six area offices were chosen as pilot sites for the newly developed QSR. According to the Statewide Assessment, the QSR Teams are comprised of DSS staff at various levels of practice as well as community partners, and these teams will review case records and conduct case-related interviews. Information collected from the reviews will be shared with local stakeholders and in regional and statewide "Learning Forums." According to the Statewide Assessment, "Learning Forums" will provide opportunities to determine how to integrate QSR findings into more effective practices, and results from these forums will be disseminated statewide. The Statewide Assessment reports that the first six pilot QSRs were completed in May 2007, and the next six area offices are scheduled for reviews in the fall of 2007.

In addition, DSS has instituted a CQI Leadership Program in which twelve managers from DSS area offices are receiving professional development training in organizational development and systems change. The purpose of the Leadership Program is to support CQI efforts by creating area office organizational cultures that emphasize strong supervisory practices and environments of continuous learning. The Statewide Assessment notes that managers from other area offices across the State will also have the opportunity to participate in the CQI Leadership Program in the fall of 2007.

The Statewide Assessment also reports that a newly developed CQI Data Book has been provided to DSS managers and CQI Teams to support their exploration and understanding of key indicators and outcomes related to clinical, managerial and systemic practices. According to the Statewide Assessment, the Central Office CQI Unit can provide technical assistance to area and regional offices that wish to use the information contained in the Data Books in order to support local management practices.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 13 stakeholder interviews, some of which involved multiple participants. Stakeholders at the State-level, Lawrence and the Boston Region mentioned various elements of the State’s QA approach which were similarly outlined in the Statewide Assessment. These elements include a) local CQI Teams that target specific topics for analysis, b) recent implementation of the Quality Service Review process in six area offices, c) recent implementation of the CQI Leadership Program and d) planned post-QSR Learning Forums. Stakeholders in Boston and Lawrence reported that there was an emphasis on the CQI Teams during the CFSR PIP period, and the degree to which local offices use these teams varies.

Stakeholders from the state-level and the South Central area indicated that there are a number of data reports available to managers that identify caseload data and local trends and that there are regional-level data books with practice, managerial and outcome metrics also available. Some of these stakeholders also pointed out, however, that managers need more assistance in effectively working with the data that are provided. In terms of court data, state-level stakeholders indicated that the courts are now reporting on case outcomes in a court data system, and there are plans to link Court Improvement Program (CIP) data indicators with Child and Family Service Review (CFSR) data indicators.

**IV. TRAINING**

| <b>Rating of Review Team Regarding Substantial Conformity</b> |                                      |   |                               |    |
|---|--------------------------------------|---|-------------------------------|----|
| <b>Rating</b>   | <b>Not in Substantial Conformity</b> |   | <b>Substantial Conformity</b> |    |
|   | 1                                    | 2 | 3                             | 4X |
|   |                                      |   |                               |    |

## STATUS OF TRAINING

Massachusetts is in substantial conformity with the Training systemic factor because the State has continued to invest in the development of new curricula and the enhancement of existing curricula for both pre-service and in-service training of staff, providers, and foster caregivers. This systemic factor was also determined to be in substantial conformity in the initial CFSR. Findings with regard to the specific items assessed for this factor are presented below.

**Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.**

Strength       ANI

Item 32 is rated as a Strength because the State is operating an effective pre-service training program for staff. In the State's first CFSR, this item was also rated as a Strength.

### Statewide Assessment Information

According to the Statewide Assessment, DSS initial staff training is structured around the Core Competency Training for new caseworkers, Investigations Training for staff who conduct child abuse investigations, Core Supervisors Training for new child welfare supervisors, and Core Manager Training for new area program managers.

The Core Competency pre-service training for new caseworkers includes 16 days of classroom instruction and four days of on-the-job training in the first month of employment. According to the Statewide Assessment, once new workers have completed their first three months, they are required to attend a one-day "New Worker Follow-up" training, and once they have completed their first six months, they are required to attend two days of legal training. The Statewide Assessment reports that the initial Core Competency Training is run on a monthly cycle throughout the year, and on average there are approximately 21 trainees who participate in each class. Training takes place at the Central Office, and the Statewide Assessment reports that the initial training achieves full participation.

According to the Statewide Assessment, the Investigation Training is a six-day training that caseworkers must complete prior to conducting child abuse and neglect investigations. Training participants, who are sponsored by their area director, include DSS staff and contracted providers who conduct child abuse and neglect investigations and work on the 24-hour Hotline. Over time, the curriculum has been revised to include topics related to a) management of situations in which parents or caregivers are not capable of ensuring child safety, b) working with families to resolve immediate safety needs, and c) effective use of community supports where no further DSS involvement is warranted. According to the Statewide Assessment, attendance rates are high and participant surveys routinely rate this training as excellent.

The Statewide Assessment reports that the Core New Supervisor training must be completed by new supervisors within their first year of employment. This training consists of four days of training on basic supervision principles and skills, and it supports the development of supervisory professional development plans. The Statewide Assessment notes that training completion rates are influenced by varied hiring rates across the State. According to the Statewide Assessment, a supervisor training needs assessment was conducted in 2004, and the findings have laid the groundwork for the development and implementation of the child welfare supervision certificate program in 2007. The program will offer formal training, facilitated supervisor Learning Circles, professional portfolios, and professional development credit for service on advisory committees and for developing best practice presentations.

According to the Statewide Assessment, the Core New APM training is offered annually, and the content includes topics related to leadership, appreciating diversity, building staff capacities, and effective team-building. Although this training is utilized for small numbers of hires, the Statewide Assessment reports that it is augmented with mandatory bi-annual statewide conferences designed to promote reflective management skills, appreciative inquiry and change management skills.

According to the Statewide Assessment, the DSS Training Unit currently utilizes a computerized Learning Management System, called Pathlore, to track registration and attendance and to run statistical reports used for a) program monitoring, b) assessment of training needs, c) developing marketing strategies, and d) generating staff training transcripts. The Statewide Assessment indicates that DSS is transitioning to a Web-based Learning Management System to provide web-based training information, on-line registration, individualized professional development plans, resources and literature to support classroom learning, and to eventually provide on-line workshops.

#### **Stakeholder Interview Information**

During the onsite CFPSR, this item was a topic of discussion in 21 stakeholder interviews, many of which involved multiple participants. According to stakeholders, the CORE training for new caseworkers consists of 16 classroom days and four field days. Some training topic examples include family engagement, identification of service plans, assessment, domestic violence, and diversity. New workers shadow experienced workers in doing investigations, assessments, and ongoing casework during their field work training days, and there are three-month and six-month follow-on trainings for new workers. Stakeholders commenting on this item agreed that caseworkers must complete the CORE training before they receive cases, and caseworkers typically receive six cases once they have completed the training. Stakeholders across the three sites reported that the content of the CORE training provides a good orientation and has improved over time, but many stakeholders indicated that the most important aspect of the training, the on-the-job training, should be further developed. Stakeholders across the three sites suggested that the most effective training for new caseworkers revolves around what they learn from their peers and supervisors, and as such, more on-the-job skills need to be incorporated into the pre-service training.

**Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.**

X   Strength           ANI

Item 33 is rated as a Strength because the State operates an effective on-going training program for staff. In the State's first CFSR, this item was rated as an ANI. Since the 2001 CFSR, the State has enhanced its in-service training through training partnerships with additional universities and institutes. The State has also given much attention and support to enhancing the skills and knowledge of staff through the DSS Professional Development Program.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS offers continuous learning and professional development opportunities for DSS staff through the In-Service Professional Development Program. This program consists of an expansion of training opportunities that are offered through DSS, child welfare training organizations, and specialized conferences. The Statewide Assessment reports that over the last few years the agency has increased efforts to deliver quality trainings that emphasize evidence-based concepts in child welfare. More specifically, the Statewide Assessment notes that the workshops are more focused on family-centered practice approaches. The Statewide Assessment outlines a number of in-service training topics such as child development, facilitating family group conferencing, integrated social work practice, interviewing techniques, family-centered practice for caseworkers and supervisors, and many other topics. In addition, the Statewide Assessment reports that staff can also a) attend external conferences and seminars, b) apply for tuition remission and paid educational leave programs to further their education, and c) apply to the MSW Fellows programs through Salem State and Simmons College.

In addition, the Statewide Assessment reports that DSS and the Center for Adoption Research (CAR) at the University of Massachusetts Medical School have co-developed a six module training series called *Supervisory Training to Enhance Permanency Solutions* (STEPS). The goal of STEPS is to reportedly increase the knowledge of DSS supervisors on positive youth development concepts by teaching strategies that will assist staff to help youth develop permanent connections and life skills for self-sufficiency. The Statewide Assessment points out that STEPS has evaluation components and an associated website that details information about adolescents in foster care. In addition, the Statewide Assessment points out that STEPS will be incorporated into the Supervisory Certification Program and the MSW Fellowship program at Salem State College.

According to the Statewide Assessment, the State has also developed the following training partnerships in order to support the ongoing professional development needs of DSS staff:

- DSS and the Institute for Health and Recovery offer a training series that focuses on the skills needed to effectively work with families who are impacted by some combination of domestic violence, mental illness and/or substance abuse.
- DSS and the Family Institute of Cambridge offer a 12-day, year long course, called Partnering with Families, which focuses on the development of family-centered practice skills. This partnership has also yielded a training series related to sustaining effective collegial relationships, a one-day workshop on effective assessment of child safety, and supervisory training curriculum components.

- DSS and the Family Center of Somerville partnered to develop a nine-month training program on family-centered practice skills.
- DSS partnered with the New England Adolescent Research Institute to develop an on-line training program for child welfare professionals who work with adolescents who have exhibited sexual offender behaviors.
- DSS and the Community Program Innovations partnered to provide a range of human service related trainings.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 17 stakeholder interviews, many of which involved multiple participants. The majority of stakeholders commenting on this item pointed out that there are trainings coordinated by the Massachusetts Child Welfare Institute (MCWI) which are centered on the core values that the agency is trying to promote. Stakeholders reported that MCWI offers trainings in regional offices and makes efforts to ensure that training opportunities are well marketed to DSS employees. In addition, some stakeholders across the sites indicated that they assess the needs of their staff and provide relevant in-service training on topics that are encountered in their service population. Stakeholders across the sites also noted that there are funds available to support staff attending external conferences and workshops, although some stakeholders pointed out that it is difficult for caseworkers to attend ongoing training due to their schedules. A few stakeholders indicated that there has been much work done in developing supervisory curriculum for DSS supervisors and that UMASS offers incentives for DSS supervisors to attend ongoing supervisory training.

Many stakeholders commenting on this item indicated that ongoing training is not required of caseworkers as outlined in the Collective Bargaining Agreement, although some area offices mandate staff meetings which may incorporate in-service training material. As such, ongoing training attendance is not typically monitored unless employees are simultaneously participating in related degree programs. Through the Child Welfare Institute partnerships with Simmons College and Salem State, some stakeholders noted that DSS employees can work toward their MSWs, however, these opportunities are only available in the eastern part of the State at this time.

**Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.**

  X   Strength           ANI

Item 34 is rated as a Strength because Massachusetts provides a defined curriculum and requires prospective foster and adoptive parents to participate in training prior to licensing. The State also provides a number of training opportunities, an array of in-service training courses, and as part of re-licensing requirements, the State determines whether the level of foster parent participation in training is in compliance with their professional development plan. In the State’s first CFSR, this item was also rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, the Massachusetts Approach to Partnership in Parenting (MAPP) is the mandatory pre-service foster and adoptive parent education program used by DSS. The MAPP framework emphasizes DSS core practices values, and utilizes master trainer, family trainer and the MAPP participant curricula to ultimately deliver the pre-service training. In addition, MAPP will be revised by the Center for Adoption Research (CAR), and the curriculum will be further grounded in adult learning theory and best practices. According to the Statewide Assessment, it will include information on cultural competency, legal issues, and physical and behavioral health. The Statewide Assessment also notes that the revised curriculum will include web-based training components and competency-based evaluations for each training level.

According to the Statewide Assessment, all unrestricted, licensed foster homes and all Intensive Foster Care (IFC) providers must complete the MAPP curriculum. The Statewide Assessment notes that DSS developed the Child Specific Training Resource Guide in English and Spanish to respond to an increase in kinship/child-specific foster and pre-adoptive families. The Statewide Assessment also pointed out that geographic distance and a lack of child care continue to be barriers to foster and pre-adoptive parent attendance at MAPP. As such, the Statewide Assessment reports that there are some funds available to provide child care at training locations and that DSS is exploring teleconference and on-line training options.

According to the Statewide Assessment, DSS contracted with the Massachusetts Society for the Prevention of Cruelty to Children (MSPCC) to provide family resource post-approval training, and to track attendance, develop curriculum, and identify training needs for foster and pre-adoptive families. In addition, the Statewide Assessment reports that MSPCC has conducted a foster parent satisfaction evaluation, and the MAPP training was rated highly.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 18 stakeholder interviews, many of which involved multiple participants. According to stakeholders across the sites, the State requires that foster and pre-adoptive parents complete the MAPP pre-service training over a period of eight weeks, and the trainings are regularly conducted in local offices. Stakeholders across the sites indicated that relative foster parents are not required to attend MAPP, although they are encouraged to participate in trainings and support groups. As mentioned in the Statewide Assessment, it was noted by stakeholders that a special guide for child specific homes and relative providers is offered to these caregivers.

State-level stakeholders indicated that there have been new efforts to involve youth as presenters in MAPP training and to train foster parents on PAYA, the independent living curriculum. Lawrence Area Office stakeholders reported that MAPP is most often conducted in Spanish, and there is ongoing training for foster parents in working with adolescents. Boston Region stakeholders, however, reported that the MAPP training is generally ineffective in preparing foster parents to work with adolescents and in particular to work with high-risk adolescents who are involved with gangs, drugs or prostitution.

Stakeholders across the sites reported that there are foster parent liaisons, foster parent support groups and ongoing trainings that are coordinated through six Regional Directors of KidsNet, the DSS contracted support program for foster, relative and pre-adoptive parents. Some stakeholders noted particular challenges associated with ongoing training. For instance, stakeholders in the Boston Region reported that while there is ongoing training and support available, it is difficult for foster parents who work during the day and take care of children during the evening to attend these trainings. A few stakeholders in the South Central area also reported that ongoing training is not held in convenient locations and not offered frequently enough, and foster parent participation is not strong at ongoing trainings and support groups.

In terms of requiring ongoing training for foster parents and licensed facility staff, a few state-level stakeholders noted that private foster care providers mandate ongoing training for their licensed homes, and residential provider staff are required to complete annual training hours. Stakeholders also indicated that DSS encourages agency foster parents to participate in 10 hours of annual training, but this is not a requirement for licensure.



**V. SERVICE ARRAY**

| Rating of Review Team Regarding Substantial Conformity |                               |   |                        |   |
|--|-------------------------------|---|------------------------|---|
| Rating   | Not in Substantial Conformity |   | Substantial Conformity |   |
|  | 1                             | 2 | 3X                     | 4 |
|  |                               |   |                        |   |

**STATUS OF SERVICE ARRAY**

Massachusetts is in substantial conformity with the Service Array systemic factor. The State has put in place a system of locally-based lead agency and regional resource center contracts for the provision of a wide array of community-based services, including child abuse and neglect prevention, family preservation and support, intensive foster and congregate care, and rehabilitative services for children and families. These contracted agencies have the flexibility to develop new services based on local needs and the capacity to tailor services to address the particular needs of children and families. While the statewide service delivery system is in place, service gaps do exist and were identified in some key service categories including substance abuse, housing, and post-permanency. In addition, some areas of the State were identified as not having sufficient services to meet demand, resulting in delayed access to particular services such as behavioral and mental health. Also, a lack of transportation reportedly affects service accessibility in some regions of the State. In the 2001 CFSR, the State was also in substantial conformity and was not required to address this factor in the PIP. Findings with regard to the specific items assessed for this factor are presented below.

**Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.**

  X   Strength         ANI

Item 35 is rated as a Strength because the DSS’ services system has been redesigned with extensive input from stakeholders across the State. The redesigned system, Family Networks, has a mix of categorical and individualized services and employs purchased services as well as non-DSS funded services. The newly designed system increased funding to in-home support and stabilization services while developing new out-of-home service models. Aware that there is some disparity in service levels across the State, DSS structured Family Networks for continued development of the service array based on locally assessed service needs. In the State’s first CFSR, this item was rated as a Strength.

### **Statewide Assessment Information**

According to the Statewide Assessment, Family Networks is an integrated system of DSS-purchased and community support services that are coordinated by 29 Area Lead Agencies and six Regional Resource Centers across the State. According to the Statewide Assessment, Area Lead Agencies serve as coordination centers for DSS-purchased and non-purchased community supports for each of the 29 area offices across the State, and Regional Resource Centers primarily work with Area Lead Agencies to strengthen the residential service array. Additionally, the Statewide Assessment notes that the State engaged in a great deal of community partnership and coordination in order to design the Family Networks system.

The Statewide Assessment reports that Area Lead Agencies convene Family Team Meetings with family members, DSS staff, and other family supports and develop a plan that integrates the network services needed to achieve family case plan goals. According to the Statewide Assessment, one of the goals of Family Networks is to decrease DSS reliance on institutional programs and increase the number of community-based placements. The Statewide Assessment reports that since July 1, 2005, community-based group home placement rates have increased by 13 percent and intensive foster care placement rates have increased by 4 percent. The Statewide Assessment reports that cost savings from the decrease in use of “campus-based” care have been redirected into increased in-home services.

In addition, the Statewide Assessment reports that DSS-purchased services include support and stabilization, intensive foster care, and congregate care. DSS has also established the following program models within the Family Networks services design:

- The STARR (Stabilization, Assessment, and Rapid Reunification) program was developed to comprehensively address the needs of children and youth in one short-term setting (rather than addressing needs in distinct shelter and residential diagnostic settings)
- To address the needs of youth with intensive needs who attend public schools, Behavioral Treatment Residences (BTR) were created to provide community-based structured living environments.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 52 stakeholder interviews, many of which involved multiple participants. Stakeholders across the sites indicated that DSS has structured Family Networks, as described in the Statewide Assessment, to both deliver services and identify service needs throughout the State. Stakeholders also acknowledged the role of the 22 statewide Community Connections Coalitions in identifying local service gaps and in providing leadership to address these gaps.

Stakeholders across the sites indicated that there is a wide array of services including family based in-home support and stabilization services, parent aides and mentors, youth tracking, traditional and specialized foster care, and congregate care including group homes and the STARR rapid stabilization and reunification program. Examples of parent-specific programs include parent support groups, a statewide 24-hour parent hotline for parents in crisis, and a hospital-based program aimed at preventing shaken baby syndrome (SBS). Several stakeholders spoke about the effectiveness of the SBS program. Stakeholders also reported that independent living services are offered through DSS caseworkers and Independent Living outreach workers and that the PAYA independent living skills curriculum

is utilized in group homes and foster homes. There are also voluntary independent living support services for those youth who age out of foster care including monthly stipends and housing.

In addition, stakeholders reported that each region of the state has a domestic violence specialist to assist offices with child and family safety assessments, a mental health specialist to assist offices with mental health consultation, and a community development liaison to assist local offices in service mapping and local service development. Each area office also has a Family Group Conferencing coordinator who facilitates Family Group Conferences, and each area office has a family resource specialist (an experienced foster parent) who is available to assist other foster parents. In addition, there is a help line available for foster parents through KidsNet. Respite care is also available, although a few stakeholders reported that there is a need for more respite care for foster parents who are caring for adolescents.

Stakeholders also indicated some areas where there are service gaps. Several stakeholders noted, in particular, that there is a need for residential substance abuse programs where parents and their children can stay together. In addition several stakeholders noted that DSS did not renew a contract to obtain drug screens for parents with substance abuse problems, and this has made it difficult to assess the progress of parents with substance abuse histories. While there are some housing programs available, there is not enough housing assistance to meet the needs, and while there are state and federal adoption subsidies and guardian subsidies available, there are not enough post-adoption services statewide to meet the post-permanency needs of families. In addition, stakeholders across the sites identified poverty as a major issue for families, and as such, they cited the need for employment and employment supports.

A number of stakeholders spoke about the need for dual-diagnosis treatment programs for adults and adolescents, and stakeholders across the State pointed out that there is a lack of services for children with autism and other developmental disabilities. Stakeholders cited the need for certain child-specific services to be more widely available including after school programs, youth mentoring, adolescent substance abuse services, and child witness to violence programs.

In addition, the school systems in Boston and Lawrence were cited as not adequately meeting the needs of children involved with DSS. Furthermore, a number of stakeholders pointed out that DSS has become the default agency to provide services to children with severe mental health problems. A few stakeholders attributed this to the more flexible eligibility criteria ascribed to accessing these services through DSS versus the Department of Mental Health (DMH), and expressed frustration with the narrow criteria that is legislated for the DMH.

**Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP.**

Strength     ANI

Item 36 is rated as an ANI because although the child welfare services system has recently been re-designed to better address local needs, there are still areas of the State that report a lack of particular types of services and/or insufficient levels of services which result in access issues for children and families needing such services. In the State's first CFSR, this item was also rated as an ANI.

### **Statewide Assessment Information**

According to the Statewide Assessment, the implementation of a new web-based DSS Treatment Planning Process will provide real time information for lead agencies and DSS area offices on service providers and available services. The Statewide Assessment reports that this system will facilitate both greater access to services and more efficient use of services.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in approximately 28 stakeholder interviews, many of which involved multiple participants. Stakeholders commenting on this item indicated that while there is a broad service array across the State, there are particular services that are not currently available to the extent that they are needed in certain communities. Across the sites, stakeholders identified the need for additional psychiatric services. In addition, a number of stakeholders indicated that there is a lack of foster homes for adolescents and that in certain areas of the State this is resulting in children staying in night-to-night placements and spending time in area offices during the school day while awaiting their next placement.

Stakeholders also identified site-specific challenges with regard to accessing certain services. Stakeholders in the South Central area pointed out that transportation is a major issue that hinders families' ability to access services in the area. While the Boston Region is reportedly a resource rich environment, the area is struggling to meet the needs of children who are prostituting and children who are gang involved, and there are reportedly no services for sex offenders. Stakeholders in this region also noted that there are few services for GLBT youth and that the stipend for foster parents is inadequate, particularly for those who are caring for adolescents. Stakeholders in Lawrence reported that while there are many services available such as therapeutic day schools, a GED program taught in Spanish, and a continuum of services for children who are considered SED, there is not enough intensive foster care or community supports for adolescents.

Stakeholders also identified service areas in particular communities where waiting lists exist. Stakeholders in the South Central area reported that there are waiting lists for counseling services, and the South Central Area and Lawrence Area Offices' stakeholders reported that there are waiting lists for certain Family Network services and for mental and behavioral health services. Finally, some stakeholders noted that children are still entering foster care to gain access to residential services because of a waitlist for these services in the mental health system.

Alternatively, some stakeholders at the state level noted that the recent services re-procurement process increased efforts to identify local needs and capacities. In addition, some stakeholders expressed the belief that once fully implemented, Family Networks would facilitate service coordination. Finally, State-level, Lawrence Area Office and South Central Area Office stakeholders spoke about the

use of asset mapping to keep the workforce of both public and private agencies informed about available resources and to identify gaps in service.

**Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.**

  X   Strength             ANI

Item 37 is rated as a Strength because although providing sufficient culturally relevant services is a challenge, DSS and its contracted service providers have the ability and willingness to tailor services to meet the needs of children and families. In the State’s first CFSR, this item was rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, services can be individualized in the following ways:

- All DSS-purchased services can be individually tailored.
- Lead agencies are tasked with the responsibility of individually tailoring services to child and family needs and ensuring that the service array adequately supports the population served by each area office.
- The DSS Treatment Planning Process focuses on treatment domains, goals and activities which can be individualized to meet the needs of children and families.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 16 stakeholder interviews, many of which involved multiple participants. The general consensus amongst stakeholders commenting on this item is that DSS and contracted service providers make consistent efforts to individualize services for children and families. According to stakeholders, family-based services and the Family Network model are structured in a way that incorporates opportunities to customize services. Stakeholders across the sites reported that there are flexible funds through DSS area offices as well as funding that can be used flexibly by the Family Networks’ lead agencies and Resource Centers to help families with concrete needs and to provide children in foster care with enrichment activities.

While stakeholders across the sites identified culturally specific services, they also identified existing gaps in these services. Stakeholders in Boston and Lawrence pointed out that there are culturally and linguistically competent services available through schools and service providers, but there are not enough of these services to meet the need. In Lawrence, stakeholders pointed out that while there are services available for Spanish speakers, there are not enough services for clinicians who speak Spanish. Stakeholders in the South Central area also indicated that it is difficult to match individuals with culturally relevant services due to the lack of these services. State-level stakeholders reported that there is a service array that can meet the needs of tribal parents and children but that the services are not culturally specific.

**VI. AGENCY RESPONSIVENESS TO THE COMMUNITY**

| Rating of Review Team Regarding Substantial Conformity |                               |   |                        |    |
|--|-------------------------------|---|------------------------|----|
| Rating   | Not in Substantial Conformity |   | Substantial Conformity |    |
|  | 1                             | 2 | 3                      | 4X |

**STATUS OF AGENCY RESPONSIVENESS TO THE COMMUNITY**

Massachusetts is in substantial conformity on the Agency Responsiveness to the Community systemic factor. In the initial CFSR, this systemic factor was also determined to be in substantial conformity. Since the prior CFSR, the State has taken affirmative steps to reach out to both the public and private sectors as well as to ensure representation of DSS consumers (parents and youth), providers, staff and partners in the development and implementation of systemic reforms that were part of the PIP. The State’s efforts to engage the community and to include their input in PIP activities are also reflected in the goals, objectives, and activities associated with the Child and Family Services Plan (CFSP). Findings with regard to the specific items assessed for this factor are presented below.

**Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.**

  X   Strength           ANI

Item 38 is rated as a Strength because as part of their major reform efforts over the past few years, DSS has undertaken an extensive process to consult with and to engage broad-based groups of stakeholders in the planning and implementation of major goals, objectives and activities of the PIP. Many of these same goals and objectives are carried forward in the CFSP. In the State’s first CFSR, this item was also rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, the Department employs a broad array of strategies to ensure that stakeholders are engaged in consultation with the State to implement the provisions of CFSP. The Statewide Assessment reports that the State engages parents, youth, community members, and service providers in a number of different ways in order to inform new and ongoing DSS funding priorities, programs, and policies. The Statewide Assessment reports that DSS seeks parent and youth input on DSS practice and service provision through formal committees responsible for advising DSS on family engagement and placement transition processes

for children and youth. Examples of these Committees reported on the Statewide Assessment include the Family Advisory Committee (FAC) to the Commissioner, the Youth Advisory Committee, and the Parent Panel for CORE training for new hires. According to the Statewide Assessment, DSS also involves parents and other community members in the selection of service providers by including them on service proposal review teams. DSS will also reportedly be hiring community representatives to conduct Family Centered/Strength-based Surveys with 50 families per quarter. In addition, DSS hired a full-time family representative as part of the Family Support Team to promote partnership between DSS and community members and to ensure that parent perspectives are included in DSS practice designs. The State has involved community representatives in the design of initiatives such as Family Networks, the Family Engagement Model, and domestic violence services, for example.

According to the Statewide Assessment, Community Connections neighborhood coalitions have been in existence for the past 10 years, and they promote family supports in local communities in order to prevent the need for DSS involvement. The Statewide Assessment reports that the Family Involvement Initiative was an expansion of the Community Connections approach to child abuse prevention. As these coalitions evolved, opportunities for joint planning with DSS increased, and Patch Teams were eventually formed. According to the Statewide Assessment, Patch Teams are family serving teams represented by DSS, Department of Youth Services (DYS), and local providers who engage families in supportive services in order to prevent child placements.

According to the Statewide Assessment, in preparation for the re-procurement of congregate care, intensive foster care and community-based services, DSS organized forums of providers, parents, family advocates and state agencies to assist in the design of the Family Networks system-of-care. In addition, the State conducted a number of activities in preparation for the re-procurement of DSS-funded domestic violence services including a) focus groups with domestic violence and sexual assault programs, b) surveys with WIC recipients, c) coordinated planning and design of intake and assessment forms statewide, d) ongoing coordination meetings with other state agencies that are closely involved with the delivery of domestic and/or sexual assault services, and e) new efforts to implement a work group of DSS staff and regional representatives from domestic violence programs.

According to the Statewide Assessment, DSS seeks service provider feedback through various committees responsible for advising or providing recommendations on procurements, residential care, decision-making authorities in the Family Networks system, service provider and DSS coordination, Regional Resource Center operation issues, lead agency operation issues, quality assurance across DSS, Education and Early Education and Care, family centered practices, behavioral health services, and EPSDT requirements.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 12 stakeholder interviews. Stakeholders are in general agreement that the State has engaged in a wide variety of consultations with stakeholder groups on various initiatives. Various stakeholder groups referred to the following collaborative planning and implementation activities identified in the CFSP:

- DSS coordinates with Salem State University, Simmons College and UMASS in the ongoing development of statewide child welfare training plan strategies.

- DSS engaged in consultation with the courts by participating on the Court Improvement Program re-assessment steering committee, working with the courts to involve youth in permanency hearings, and by working on the alternative dispute resolution pilot.
- Local Community Connection coalition meetings were held with consumer and provider representatives to solicit input on DSS RFRs and initiatives including the Family Engagement initiative and family nurturing programs.
- Local forums with nearly 1000 stakeholders were held on how to provide more effective domestic violence prevention and intervention services.
- The CHINS initiative and proposed CHINS legislation has included input from DSS consumers, court representatives, legislators, and the Department of Youth Services.
- DSS consults with DMH and DPH on annual planning, and new funding will allow for the hiring of a chief psychiatrist and a chief medical officer to work with DSS staff.
- DSS and DPH worked to fund a substance abuse coordinator position within DSS, and DSS and DMH have funded mental health specialists in the six regional offices who meet regularly with a DMH child psychiatrist.

In addition, several state-level stakeholders noted joint efforts by Department of Early Education and Care (DEEC) and DSS to prevent and assess maltreatment in foster homes. These efforts include cross-reporting of institutional child abuse and neglect reports, investigation of critical incidents in institutions and non-DSS foster homes, and consultation on a DSS web application that tracks residential and congregate care providers licensed by DEEC. Some stakeholders also discussed a DSS/DOE initiative with special educational organizations that led to improved communication and relationships in local communities.

A few state-level stakeholders did note that while there is a state-tribe agreement for the Aquinnah Wampanoag Tribe, there is no written agreement yet with the more recently federally-recognized Mashpee Wampanoag tribe. Although a representative from the Aquinnah Wampanoag Tribe indicated that the tribe is not involved in IV-B planning, the tribe was involved in the Working With Families Right From The Start (WWFRFS) design group which made contributions to the development of the Family Engagement model. While stakeholders from Martha’s Vineyard indicated that the local collaboration with DSS has remarkably improved, stakeholders indicated that state-level consultation has not been an effective means of improving problems with the identification of tribal children at intake.

**Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.**

Strength       ANI

Item 39 is rated as a Strength because the agency has an effective process for developing annual reports of progress and services with these representatives and other relevant stakeholders. In the State’s first CFSR, this item was also rated as a Strength.



### **Statewide Assessment Information**

According to the Statewide Assessment, this information is reported in item 38.

### **Stakeholder Interview Information**

Stakeholder information for item 39 is included in item 38.

### **Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.**

Strength       ANI

Item 40 is rated as a Strength because DSS has made significant efforts to reach out to and coordinate with other State agencies. In the State's first CFSR, this item was rated as an ANI. However, since the prior CFSR, DSS has collaborated with other federally funded/assisted agencies both at the State and local levels. This has resulted in cross-agency input on service needs and service provision, streamlining of eligibility requirements, and joint funding of several programs and services.

### **Statewide Assessment Information**

According to the Statewide Assessment, DSS coordinates with other Federal or federally assisted programs in support of Massachusetts children and families. Examples include DSS coordination with:

- The Department of Public Health on the Maternal and Child Health Bureau grant;
- Head Start/the Massachusetts Head Start Advisory Committee on coordination of state funded child care and Head Start for eligible families;
- The Interagency Coordinating Council on coordination with parents, providers and community partners on the Early Intervention system;
- Early Intervention service providers on CAPTA funded efforts to refer more children with supported child abuse reports to Early Intervention assessments and services;
- The Department of Public Health on CAPTA funded efforts to improve outcomes for newborns exposed to substances;
- The Massachusetts District Attorney's Association on improving child interviewing practices for prosecuting child abuse;
- The Court Improvement Program on the State's court improvement plan;
- The Department of Education on systematically addressing the education needs of DSS children;
- The Massachusetts Children's Trust Fund on statewide parent support and child abuse prevention efforts;
- Transitional Living Programs on coordination of independent living services for youth in DSS custody; and,
- Workforce Investment Boards and their providers on work readiness services to youth and young adults.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in approximately 21 stakeholder interviews, many of which involved multiple participants. Stakeholders commenting on this item cited a number of collaborations with federally funded or federally assisted programs. State-level and South Central Area Office stakeholders stated that there is coordination in Court Improvement Project planning. State-level stakeholders indicated that there is an MOU with the Department of Public Health (DPH) related to substance abuse services and an interagency agreement with the Department of Transitional Assistance (DTA) that provides residential programs for adolescent mothers and their babies. State-level stakeholders also indicated that DSS partners with higher education on child welfare related training and with Medicaid in resolving issues related to EPSDT. In addition, DSS has worked with a) DPH to fund a substance abuse coordinator position within DSS, b) DEEC to provide supportive child care vouchers for at-risk children, c) Transition Living Programs to reach out to dads, and d) DTA to prevent homelessness for youth aging out of the child welfare system.

Several state-level stakeholders spoke about collaborative efforts among DSS, DMH, DBH and MassHealth to focus attention and resources on finding a solution for children who remained in hospitals and could not go home because of a dearth of community mental/behavioral outpatient supports and complex eligibility requirements for program services. Stakeholders also noted that the work of various agencies that are involved in planning implementation strategies in response to the requirements of the Rosie D lawsuit. A few stakeholders said that this work should result in improvements in the State's mental health service array.

In addition, each of the sites indicated a number of local collaborative efforts involving federally assisted systems or programs. First, Lawrence Area Office stakeholders identified effective community partnerships between DSS and the Department of Education. According to these stakeholders, the Center for Family Connections (CFFC) is reportedly effective in holding meetings for coordination amongst DSS, the courts, schools and child serving providers. The CFFC has also facilitated coordination between DSS and the courts to resolve CHINs related issues. Second, Boston Region stakeholders reported that there is a congregate care network that consults with lead agencies on how to effectively service children, and there are effective relationships between DSS and Boston Public Schools as well as DSS and Child Care. In addition, stakeholders in this same region noted that DSS has worked effectively with the City of Boston and the Massachusetts Bay Transit Authority (MBTA) to strategize on gang-related issues. Third, South Central Area Office stakeholders reported that there is local coordination with Medicaid through the Massachusetts Behavioral Health partnership and a local interagency meeting represented by Mental Health, Education, DTA, and the Department of Mental Retardation.

**VII. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION**

| <b>Rating of Review Team Regarding Substantial Conformity</b> |                                      |   |                               |   |
|---|--------------------------------------|---|-------------------------------|---|
| <b>Rating</b>   | <b>Not in Substantial Conformity</b> |   | <b>Substantial Conformity</b> |   |
|   | 1                                    | 2 | 3X                            | 4 |
|   |                                      |   |                               |   |

**STATUS OF FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION**

Massachusetts is in substantial conformity for the systemic factor Foster and Adoptive Parent Licensing, Recruitment, and Retention. The State continues to make significant investments in more effectively licensing, recruiting and supporting foster and adoptive parents. In the initial CFSR, this systemic factor was also determined to be in substantial conformity, and the State was not required to address it in the PIP. However, the lack of foster homes for adolescents, which was also identified as a need in the prior review, has become an ongoing issue. Findings with regard to the specific items assessed for this factor are presented below.

**Item 41. The State has implemented standards for foster family homes and child care institutions which are reasonably in accord with recommended National standards.**

  X   Strength         ANI

Item 41 is rated as a Strength because the State has implemented and enhanced standards, in accordance with recommended National standards for all foster family homes and child care institutions. In the State’s first CFSR, this item was also rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS implemented the “Family Resource Policy” which outlines a) standards for foster and pre-adoptive families, b) regulations that oversee the placement of children in foster and pre-adoptive homes c) on-going monitoring of licensing standards by family resource staff, and d) standards for regular home visits, annual re-assessments and bi-annual license renewals. According to the Statewide Assessment, DSS conducts local and statewide trainings on the “Family Resource Policy” for DSS staff and child-placing agency staff.

The Statewide Assessment also reports that DSS increased staffing for the central office Foster Care and Adoption Support Services Unit to provide increased monitoring of family resource standards and increased technical support to field staff on

family resource practices. Also, according to the Statewide Assessment, the DSS division charged with oversight of intensive foster care (IFC) was moved to the DSS division that manages all other foster care placement settings in order to assure consistency in applying standards.

In addition, the Statewide Assessment reports that DSS complies with the Department on Early Education and Care (DEEC) licensing regulations in addition to DSS regulations and policies. IFC contracted agencies are also required to adhere to the DEEC and DSS regulations that govern child placements.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 10 stakeholder interviews, some of which involved multiple participants. The majority of stakeholders commenting on this item reported that the State revised resource standards in 2004 and that the standards for foster homes and child care institutions are effective in protecting the safety and health of children. A few State-level stakeholders noted that DEEC and DSS licensing standards for foster homes, congregate care and residential facilities have both provider and facility criteria that address the health, sanitation, and safety of children.

Stakeholders across the sites reported that DSS licenses restricted (relative and child specific) and unrestricted (traditional) foster homes by conducting home studies and background checks and monitoring compliance with licensing requirements through regular monthly visits and random checks. Stakeholders across the sites also reported that foster homes are re-assessed annually and re-licensed every two years. Stakeholders from the South Central area indicated that licensing is now completed and monitored at the area office level rather than the regional level. Stakeholders in the Boston Region indicated that 51A reports on foster homes are handled by the CPS unit and are subject to a central office review and potential foster home re-evaluation.

State-level stakeholders and stakeholders in Lawrence also reported that residential facilities have separate licensing regulations which include standard health and safety inspections and approval of rooming arrangements and staff/child ratios. Stakeholders in Lawrence reported that complaints of institutional abuse are investigated by the DSS central office.

### **Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.**

Strength       ANI

Item 42 is rated as a Strength because State licensing standards are applied to all family foster homes and child care institutions irrespective of the source of funding for these facilities or the licensing agency. In the State's first CFSR, this item was rated as a Strength.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Massachusetts Office of Early Education and Care (DEEC) is responsible for licensing and monitoring child care institutions and child placing agencies. The Statewide Assessment also notes that child placing agencies are responsible for approving their own (intensive/specialized) foster homes. In addition, the Statewide Assessment reports that DSS licenses all its resource families, and this includes unrestricted (traditional/non-relative) homes, pre-adoptive homes, kinship homes, and child-specific (restricted) foster homes. Foster homes that provide respite care and other temporary care for children must also be licensed. In addition, the Statewide Assessment reports that Intensive Foster Care agencies must also assure that their foster families are in compliance with DSS standards and policy.

According to the Statewide Assessment, all foster homes are annually re-assessed, and all homes must be re-licensed every two years. The Statewide Assessment reports that the consistency of these practices does vary amongst field staff and that the agency provides training and technical assistance to address this. In addition, the Statewide Assessment reports that DSS is implementing a tracking system in FamilyNet that will capture the licensing/approval and placement information of all foster families.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in seven stakeholder interviews, some of which involved multiple participants. The majority of stakeholders across the sites reported that that the licensing standards for foster homes (unrestricted) and kinship homes (restricted) is the same. All prospective resource families (unrestricted, kinship and child specific foster and adoptive parents) are required to participate in pre-service training although the number of required hours varies based on the experience and skill of the resource parents, and waivers are available for kinship homes in certain circumstances. Unless the relative foster parent applies and is approved as an unrestricted home, the license expires when the child is no longer placed with the relative, while unrestricted foster homes can be re-assessed and re-licensed indefinitely. Stakeholders also reported that beginning in 2006, DSS began requiring that the foster homes of child placing agencies adhere to the same licensing standards as DSS licensed homes. A few stakeholders across the sites noted that waivers are available for relative providers with criminal background check findings, but it is not always clear in which circumstances these waivers are being approved.

### **Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.**

Strength       ANI

Item 43 is rated as a Strength because the State has a rigorous in-state screening process for any current or past criminal offenses for all foster and adoptive placements. In addition, although licensing is required every other year, the family is annually reassessed for its ability to care safely for children in their home. In the State's first CFSR, this item was rated as a Strength.

### **Statewide Assessment Information**

According to the Statewide Assessment, Massachusetts opted out of the federal criminal background check requirement since the State's system for Background Record Checks (BCR) is viewed as more exacting and includes a check of the Criminal Offense Records Index and a DSS history check. DSS has a Criminal Offender Record Information (CORI) Unit which works with area, regional and central office staff to complete background checks for new and existing resources. According to the Statewide Assessment, the CORI Unit utilizes reports to track compliance with criminal background checks for both DSS family foster homes and contracted family resource homes. The CORI Unit also monitors children who are placed in unapproved homes to ascertain whether the reason the resource is unapproved is due to an outstanding BRC. According to the Statewide Assessment, the only case in which a negative result on criminal background check results in an automatic denial or termination of a family resource is when a family member has an outstanding criminal warrant. All other findings allow for further review.

In addition, the Statewide Assessment reports that DSS was found to perform criminal background checks on all foster parents prior to licensing/approval and annually thereafter in a secondary IV-E eligibility review. According to the Statewide Assessment, title IV-E foster care review findings recommended that increased attention be given to the licensing and re-licensing of child placing agency foster homes. The Statewide Assessment reports that the State plans to require child placement agencies to enter all home study information in FamilyNet.

#### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in nine stakeholder interviews, some of which involved multiple participants. State-level stakeholders reported that all parties age 14 and older who reside in a prospective foster home are subject to a criminal background check by the CORI Unit in the DSS central office. Stakeholders indicated that in addition to the CORI check, these individuals are screened through the child abuse registry, FamilyNet, the Department of Youth Services, and domestic violence records. Some stakeholders from Lawrence commented on issues with the scope of DSS background checks since currently, Massachusetts does not conduct criminal background checks in other states. In addition, a few stakeholders mentioned that some CORI findings can be waived. In order to do this, caseworkers must submit detailed information regarding the case circumstances to a regional clinical review team, and the Regional Director must approve a waiver.

#### **Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.**

Strength       ANI

Item 44 is rated as an ANI because although the State has a multi-faceted approach that incorporates traditional and customized strategies for the recruitment of ethnic and racially diverse foster and adoptive families, the dearth of foster homes for adolescents is resulting in unstable, inadequate living situations, such as night-to-night placements, for some of these youth. In the State's first CFSR, this item was rated as a Strength.

### **Statewide Assessment Information**

The Statewide Assessment reports that the State conducts a number of recruitment activities for prospective foster and adoptive parents. According to the Statewide Assessment, DSS uses Massachusetts Adoption Resource Exchange (MARE), AdoptUSKids, the Heart Gallery, and National Adoption Day as recruitment mechanisms. DSS conducts targeted recruitment for children of color through adoption parties, Univision special features, and through Spanish translation of recruitment materials such as the MARE resource guide. Foster and adoptive parents are sought for adolescents through the Child and Family Today cable program which is shown in 133 outlets across the State. In addition, DSS conducts recruitment activities through community-and faith-based initiatives, a newly developed gay and lesbian foundation, and through the Family Search for Permanency Project which is being tested in six sites.

The Statewide Assessment also reports that DSS engages in the following recruitment and retention efforts:

- Provision of stipends to foster parents willing to act as recruitment ambassadors for the area offices
- The hiring of recruitment supervisors in each of the six DSS regions to work with recruitment staff in area offices on local strategies.
- Enhancement of partnerships amongst DSS family resource unit staff, administrators, Kid's Net Directors, family resource liaisons and foster parent recruitment ambassadors through approaches such as training on the Building Effective and Enduring Partnerships. This training is also being provided statewide to foster parents and DSS recruiters.
- Establishment of corporate partnerships that support activities that honor foster and adoptive parents and provide meeting venues for children waiting to be adopted and families interested in adopting.
- Collaboration and co-sponsoring of recruitment events with child placing agencies.

### **Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 24 stakeholder interviews, many of which involved multiple participants. Stakeholders commenting on this item not only identified strategies used by DSS to recruit foster and adoptive parents, they also reported that there are shortages of foster homes for adolescents as well as for children with certain racial and ethnic backgrounds.

Stakeholders cited several strategies used by DSS to recruit foster and adoptive parents, including the State's hiring of additional recruitment staff, the use of the Adoption Resource Exchanges and various public/private partnerships. Stakeholders across the sites pointed out that the partnership with Jordan's Furniture has been beneficial to overall recruitment efforts, particularly through the Plus One Challenge. In addition, stakeholders across the sites reported that the State conducts general recruiting, for example, through community events and promotions, print advertising, and informational meetings in private homes, libraries, schools and churches. A few stakeholders in Lawrence and the Boston Region indicated that many foster families are recruited through "word of mouth." The foster parent ambassador program is reportedly helpful in the recruitment and support of foster and adoptive parents, and the foster parent liaisons were noted for the support and advocacy that they provide to foster parents. In addition, state-level stakeholders

reported that there has been continued use of targeted recruitment strategies such as Wednesday’s Child and expanded efforts to recruit relative providers as permanent resources for children and youth. Also, a few state-level and Lawrence Area Office stakeholders mentioned that the agency has targeted faith-based organizations to recruit minority families.

Despite these reported efforts to recruit foster and adoptive homes, a few Boston Region stakeholders indicated that there are not enough foster homes that reflect the racial and ethnic diversity of children of color in the Boston area. Additionally, the Wampanoag Tribe noted the need for additional tribal homes. While the Lawrence Area Office has enough Hispanic foster homes, stakeholders noted that there is a need for more English speaking foster homes in this locale.

In addition, stakeholders from the state-level as well as in Lawrence and Boston also reported an ongoing shortage of foster homes to meet the needs of a diverse group of adolescents. In certain areas of the State, the lack of foster care for adolescents is reportedly resulting in children staying in night-to-night placements and spending time in area offices during the school day while awaiting their next placement. In addition, stakeholders in Lawrence reported that many adolescents are in congregate care because there are not enough intensive foster homes, and stakeholders in the Boston Region reported that the shortage of foster parents who care for adolescents leads to inappropriate placement matches for these youth. A few Boston Region stakeholders also mentioned that foster parents stipends do not adequately provide for adolescent needs.

**Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.**

Strength     ANI

Item 45 is rated as a Strength because Massachusetts continues to use various approaches to recruiting permanent homes across geographic areas both within and outside of the State. To address delays in the processing of home study requests from other States, DSS has contracted with private agencies to facilitate the timely completion of these studies. In the State’s first CFSR, this item was also rated as a Strength.

**Statewide Assessment Information**

According to the Statewide Assessment, DSS uses the Massachusetts Adoption Resource Exchange (MARE) and AdoptUSKids for recruiting foster homes for children statewide. In addition, children who are awaiting adoption are featured in a photographic display known as the Heart Gallery which can be seen at certain Jordan’s Furniture stores in Massachusetts and New Hampshire. DSS also worked with the corporate sponsor of Jordan’s Furniture on the “Plus One Challenge” in which foster and adoptive families are challenged to recruit at least one prospective family. The Statewide Assessment reports that DSS sponsors nine to ten matching events annually in which prospective adoptive parents and children awaiting adoption are invited to interact with one another in a fun, social environment. According to the Statewide Assessment, DSS also hosts adoption coalition meetings with private adoption agencies across the state to discuss issues related to recruitment for children awaiting adoption.



According to the Statewide Assessment, the DSS Interstate Compact for the Placement of Children (ICPC) Unit assists with all out-of-state ICPC requests and with ICPC policy and procedure questions regarding child-specific situations across the State. According to the Statewide Assessment, out-of-state requests are processed centrally and sent to the appropriate DSS area office for home study and ongoing placement monitoring. More recently, DSS has begun contracting out all incoming ICPC requests for foster care and adoption home studies to private child placing agencies. The ICPC Unit continues to monitor these requests and to make all final placement decisions.

**Stakeholder Interview Information**

During the onsite CFSR, this item was a topic of discussion in 13 stakeholder interviews, some of which involved multiple participants. Stakeholders across the sites indicated that the ICPC process is well utilized, however, there are long delays in this system that impact timely placement of children. A few stakeholders also mentioned that the State uses the Massachusetts Adoption Resource Exchange and the AdoptUsKids websites which can be accessed by other States.