



2015-2019 CHILD AND FAMILY SERVICE PLAN (CFSP)
FINAL PROGRESS REPORT
STATE OF MISSISSIPPI



STATE OF MISSISSIPPI: 2015-2019 CFSP FINAL REPORT

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I. GENERAL INFORMATION

A. 2015-2019 ORGANIZATIONAL OVERVIEW

From the onset of the 2015-2019 CFSP, Mississippi Department of Child Protection Services (MDCPS) operated under the umbrella of the Mississippi Department of Human Services (MDHS), as the Division of Family and Children Services (DFCS). The agency functioned as a division within MDHS's overall agency structure. The division's administrative structure consisted of the following: Deputy Administrator of DFCS, Administrative Office Director of DFCS and one (1) Director of Field Operations. The Deputy Administrator provided oversight to the entire operations of DFCS. The division's structure consisted of the following:

- Deputy Administrator of Family and Children's Services
- Special Projects Unit
- Council on Accreditation Coordinator
- Bureau Director of Special Investigations
- Director of Family and Children's Services
- Director of Field Operations
- Director of Continuous Quality and Improvement
- Bureau Director of Budget and Financial Planning
- Bureau Director of Administration
- Bureau Director of Child Welfare Professional Development
- Bureau Director of Resource Development
- Bureau Director of Permanency/Planning and Placement
- Bureau Director of Prevention/Protection
- Bureau Director of Policy

During the 2016 regular legislative session, Governor Phil Bryant signed Senate Bill 2179 into law on May 13, 2016 creating the Mississippi Department of Child Protection Services. This legislation began the process of separating MDCPS from MDHS and establishing itself as an independent agency with its own commissioner who serves as a member of the Governor's cabinet. The two agencies continued to work together to execute a successful transition plan. MDCPS progressed in building structural capacity statewide and with this separation came a revision of the agency's vision, mission and values to reflect the transition.

MDCPS had more accomplishments throughout the 2017 legislative session. That year, MDCPS was granted statutory authority to take children into custody through HB 652. Additionally, during an emergency placement situation when a child must be placed in home care due to the absence of parents or custodians, MDCPS had the authority to request that a criminal

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justice agency perform a federal name-based criminal history records check of each adult residing in the home. Many other statutory references in the Mississippi Code were changed from MDHS to MDCPS in SB 2342 and SB 2680. SB 2342 clarified the procedure for terminating parental rights. Courts could also terminate parental rights if a parent has committed, against the other parent, a sexual act that is unlawful, and the child was conceived as a result of the unlawful sexual act. Human trafficking of a child is another ground for terminating parental rights that was established through this bill. SB 2680 changed the time frame for a custodian to petition the court for durable legal custody from one year in the proposed custodian's care, to six months.

HB1109 and HB1213 were other bills that affected MDCPS. HB 1109 created the Public Procurement Review Board (PRB) and abolishes the Personal Service Contract Review Board. The Public Procurement Review Board will monitor personal services contracts and contracts for Information Technology (IT) services. The board is not authorized to disapprove any of MDCPS' proposed personal or professional services contracts; However, MDCPS must give notice of proposed personal or professional service contracts to the Board for any recommendations. Upon receipt of a notice, the Board shall post it on its website and on the procurement portal website. If the Board does not respond within seven calendar days after receiving the notice, MDCPS may enter the proposed personal or professional service contract. If the Board responds within seven (7) calendar days, the Board has seven calendar days from the date of its initial response to provide any additional recommendations. After the end of the second seven-day period, MDCPS may enter the proposed personal or professional service contract. HB 1213 authorizes the Youth Court to utilize a trained court-appointed special advocate (CASA) volunteer, with authority equal to guardian ad litem, in abuse and neglect cases. Although MDCPS accomplished much during the 2017 legislative session, legislative and administrative changes for the current reporting period greatly impacted the agency as well.

Besides the many legislative progresses in the 2017 legislative session, it was through the 2018 regular legislative session that Governor Phil Bryant signed Senate Bill 2675 into law on April 13, 2018. This law provided that MDCPS shall be a sub agency within MDHS and provided that the MDCPS's commissioner shall maintain complete and exclusive operational control over the functions of MDCPS, except functions that were shared with MDHS. Under this law, MDCPS continues to be the agency authorized to promulgate regulations, policies, and procedures necessary to implement the State's child welfare system and to ensure the safety, permanency, and well-being for Mississippi's families and children. MDCPS is responsible for providing the services under Title IV-B Subpart 1 (Child Welfare Services), IV-B Subpart 2 (Promoting Safe and Stable Families), Title IV-E (Foster Care and Adoption

Assistance), Child Abuse Prevention and Treatment Act (CAPTA), Chafee Foster Care Independence Program (CFCIP), and Educational Training Voucher (ETV).

B. 2019 LEGISLATIVE OVERVIEW

The 2019 legislative session made more substantive changes to the State's laws and regulations which impacted MDCPS during the final reporting period. The following bills affecting child welfare and the agency were passed during the 2019 Legislative Session:

- **HB 571** - This bill takes effect 7/1/19. It revises the elements for the crime of prostitution to include a person must be 18 years of age or older to commit the misdemeanor crime of prostitution. It also authorizes a law enforcement officer who encounters a minor engaging in the acts of prostitution to take the minor into emergency protective custody within the requirements of the Youth Court Act. MDCPS was added as a contact for law enforcement and investigation of such cases. Other substantive changes include:
 - References to the MDHS were changed to MDCPS.
 - The definition for "commercial sexual exploitation" is defined as any sexual act or crime of a sexual nature, which is committed against a child for financial or economic gain, to obtain a thing of value, for quid pro quo exchange of property or any other purpose. The bill also added references to "commercial sexual exploitation and human trafficking of children" in the responsibilities of MDCPS to administer plans, provide counseling services, other support services and distributing services to foster children and the foster parents.
 - Regulation of multidisciplinary teams to coordinate efforts to intervene with physically abused children now includes references to "commercial sexual exploitation and human trafficking of children" in the goals and expertise of the teams, adds the statewide Human Trafficking Coordinator to the team, authorizes MDCPS to initiate creation of a team, and requires MDCPS to be included on a team when the department is not the initiator of the team.
 - MDCPS was added as an option to be contacted for mandatory reporting of child trafficking. An agency receiving reports under these provisions is required to begin an initial investigation into the suspected abuse or neglect. The statewide Human Trafficking Coordinator and MDCPS are required to provide an annual report to the Speaker of the House, the Lieutenant Governor and the Chairperson of the House and Senate Judiciary Committees concerning services MDCPS provided to children. The bill also revises the provisions which regulate mandatory reporting to include victims of commercial sexual exploitation and human trafficking in the list of abused children for reporting purposes. It further adds MDCPS to the list of agencies which may

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- receive a report and investigate such report. Note that the definition of "abused child" in prior law included a trafficked child.
- Definitions for youth court provisions were revised to add the phrases "commercial sexual exploitation," "abused child" and "commercial sexual exploitation."
 - The bill revised the provisions of law that list sex crimes against a minor to include procuring the sexual services of a minor and sexual battery of a vulnerable person who is a minor.
 - The bill requires existing minimum training standards for local public safety and 911 communicators to include at least two hours of training related to receiving and managing calls regarding sexual exploitation of children and human trafficking.
 - Requires the minimum educational and training standards for field and investigative law enforcement officers to include at least two hours of training related to handling complaints and victims of commercial sexual exploitation and human trafficking. This two-hour requirement is also included in the curriculum for schools providing basic and advanced courses for officer training.
 - Revised training standards for family protection workers and specialists by requiring training to include at least two hours related to handling complaints and victims of commercial sexual exploitation and human trafficking.
 - Reallocated monies from the fund to the Bureau of Investigation of the Department of Public Safety.
 - Moved the office of the statewide Human Trafficking Coordinator to the Mississippi Bureau of Investigation of the Department of Public Safety.
 - Clarified the duty of the statewide Human Trafficking Coordinator to provide annual reports and perform other duties required by law to conform to the requirements of the bill.
 - Revised the provisions concerning crimes against a vulnerable person to require the report of abuse against a minor to be made to MDCPS.
- **HB 1117-** This bill requires MDCPS to notify the applicable military installation family advocacy program when reports of child abuse or neglect are made if MDCPS determines a parent or other person responsible for the care or welfare of an abused or neglected child maintains active duty status within the military.
 - **SB 2196-** This bill establishes the Mississippi Foster Care Fund within MDCPS and authorizes expenditures for the support of foster family/foster children. The purpose of the fund shall be for supporting services directly provided to foster families and foster children by programs, persons or entities pursuant to contracts and grants complying with Mississippi law, and for other related purposes. Monies in the fund shall be expended by the department, upon appropriation by the Legislature, only for the purposes stated

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in this subsection, and only in such amounts as then exist in the fund. The fund shall be a continuing fund, not subject to fiscal-year limitations, and shall consist of:

- Monies appropriated by the Legislature for the purposes of funding the Mississippi Foster Care Fund;
 - The interest accruing to the fund;
 - Monies received under the provisions of Section 99-19-73 for the Mississippi Foster Care Fund, 90% of which shall be used directly for supporting services directly provided to foster families and foster children by programs, persons or entities pursuant to contracts and grants complying with Mississippi law, and no more than 10% of which shall be used for administrative purposes;
 - Monies received from the federal government;
 - Donations; and
 - Monies received from such other sources as may be provided by law.
- **SB 2840-** The Supreme Court's Commission on Children's Justice impaneled a legislative task force in 2018 to address issues and make recommendations. Representatives from MDCPS, the Supreme Court, local youth court judges, the Office of the State Public Defender, a parent representative, prosecutors, and the Attorney General's Office constituted the task force. This bill is the outcome of the recommendations proposed by the task force and was supported by the Chief Justice of the Mississippi Supreme Court.
 - Youth court and MDCPS confidentiality was addressed:
 - By designating that the forensic interview of a child conducted by a Child Advocacy Center (CAC) is defined as a record involving children and thus protected under the confidentiality laws; it also provides for those records to be accessible to chancery courts without further order if the forensic interview is ordered by the chancellor.
 - To authorize disclosure of records to guardian ad litem.
 - To authorize disclosure of records relevant to a matter before the youth court -- there may be exculpatory records that are relevant and should be made available for trial preparation.
 - To allow MDCPS to share confidential information about a child with certain people or entities (foster family, service providers, schools, etc.) to further the treatment plan of the child or family.
 - To authorize MDCPS to report fraudulent reports: MDCPS is inundated with reports of abuse or neglect believed to be false, which can occur during divorce and child custody proceedings and has more recently been used to harass public officials; the department may report those calls they believe fraudulent to law enforcement and to share records necessary to assist law enforcement in investigation.

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- To waive confidentiality and allow MDCPS to release information as to the cause and circumstances regarding a fatality or near fatality, including previous reports and investigations, services provided by the State and other actions on behalf of the child.
- Provisions charging guardian ad litem: amends present law by adding that the youth court judge shall by order direct the guardian ad litem and provide authority.
- The bill addresses when the use of controlled substances by a parent is grounds for loss of custody: the positive test of a parent or newborn for controlled substances is not dispositive grounds for removal of the child; the child must be endangered or the parent unable to provide proper care and supervision, and there is no reasonable alternative to loss of custody.
- Changes made to improve youth court practice:
 - All hearings to be on the record.
 - Oral orders be reduced to writing within 48 hours.
 - Existing law provides that a review shall be had at least every 180 days; the bill allows a request by the child or parent for an earlier hearing subject to the discretion of the court to prevent frivolous requests.
 - If a child abuse or neglect case arises in a county where the family does not reside, the youth court judge may transfer disposition to the county of residence.
- Child Death and Near-Death Reporting: Under existing law, a report of a child's death is made to the medical examiner who is to report the death to MDCPS. The bill creates a new category of mandatory reporters that requires all law enforcement, firefighters, medical personnel, coroners and others to make a report of all child deaths and all child near-fatalities directly to MDCPS, so an investigation can be made into the circumstances.
- Other MDCPS-related amendments to improve practice:
 - Central Registry issues: existing law burdens the department with the responsibility to investigate to determine if sexual, felony physical abuse or neglect which is a threat to life is substantiated. There have been serious due process issues with the central registry, so this bill authorizes only convictions and adjudications of abuse or neglect to be added to the central registry.
 - The Mississippi Adoption Supplemental Benefits Law of 1979 is amended to expand the definition of "special circumstances" to include children older than two and a sibling group to be adopted together; this allows for their adoptive families to receive benefits under the act.
 - Medicaid benefits will continue for special needs children adopted through a state-supported adoption agency if the child was receiving the benefits immediately before the adoption.

- Clarifies that MDCPS can provide financial support for nonrecurring adoption expense (attorney, filing fees, etc.).
- Changes were made throughout to change the name of the department from the MDHS or the Department of Public Welfare to MDCPS. This necessitated the addition of immunity language for MDHS to the extent the Office of Youth Services makes a good-faith disclosure of central registry or other confidential information absent a willful or malicious violation of the administrative procedures of the department.
- The Supporting and Strengthening Families Act (Section 93-31-1 et seq.) is amended to require that temporary powers of attorney under the act must be registered with the youth court, entered into the MYCIDS system, and administratively reviewed by the youth court after one year. The act is further amended to provide for revocation of a power of attorney granted under the act and to require agency acceptance of a power of attorney. The chancery clerk may not impose, charge or collect any fees for the filings. The sufficient acknowledgment clauses are updated to reflect the changes.

C. ADMINISTRATIVE STRUCTURE

MDCPS's current administrative structure consists of Commissioner, Jess H. Dickinson, Taylor Cheeseman, the Chief of Staff and three (3) Deputy Commissioners with one (1) Senior Attorney. The current structure of the agency consists of the following predominant areas:

- **Deputy Commissioner of Administration**
 - Centralized Intake, Background Checks, Facility Operations
 - Human Resources/Employee Relations
 - Professional Development
 - Finance
 - Information Technology
- **Deputy Commissioner of Child Welfare**
 - Permanency Support Services
 - Field Operations- East
 - Field Operations- West
 - Field Operations-South
- **Deputy Commissioner Child Safety**
 - Therapeutic Services and CAPTA Coordinator
 - Continuous Quality Improvement (CQI)
 - Licensure
- **Senior Attorney**
 - Policy Bureau

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- Legal Counsel
- Contracts and Procurement
- Refugee Resettlement Services
- Federal Reporting

D. REGIONAL RESTRUCTURING

During the 2015-2019 CFSP timeframe, MDCPS adjusted its regional administration to be compliant with the stipulations of the State’s 2nd Modified Settlement Agreement (2nd MSA) and Stipulated Third Remedial Order (STRO) which was signed on December 19, 2016. These provisions of the STRO stated MDCPS should continue to maintain and staff a second Deputy Director for Field Operations with a position, or equivalent title/position, within MDCPS to ensure adequate management. During the 2016 APSR timeframe, regional operation consisted of the following thirteen (13) Regions:

Region 1 North	Region 4 South
Region 1 South	Region 5 East
Region 2 East	Region 5 West
Region 2 West	Region 6
Region 3 North	Region 7 East
Region 3 South	Region 7 West (2 Regional Directors)
Region 4 North	

In the State’s 2017 APSR reporting timeframe, the State had successfully implemented this provision by having two (2) deputy directors for Field Operations with one (1) deputy residing over the West and the other residing over the East. This restructuring also equipped each region with a leadership team to support each county and staff. By the State’s 3RD annual progress update, restructuring was a continued effort of the State. Marion County was moved from Region VI to Region V-East, Pearl River County was moved from Region VI to Region VII-W, and the State eventually restructured the (9) nine remaining regions.

Coastal regions were also split into Region VII-E, VII-C and VII-W. Because of the coastal restructuring, the State’s regions increased from (13) thirteen to (14) fourteen regions. Each region has a Regional Director and at a minimum (2) two Regional Social Work Supervisors to assist in leading the Region. With the increase in regional operation, MDCPS added a third deputy director for Field Operations to continue with balancing the number of children in care for each region. This additional oversight was accomplished during the State’s 2019 reporting timeframe.

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Presently, MDCPS Field Operations' fourteen (14) regions consists of three (3) operating divisions: East, West and South as designated below:

Western Field Operations Division	Eastern Field Operations Division	Southern Field Operations Division
Region 2 West: Coahoma, West and East Bolivar, Sunflower, Washington, Humphries, Issaquena, Sharkey, Leflore, Carroll, Holmes, Montgomery	Region 2 East: Desoto, Tate, Tunica, Panola, Quitman, Tallahatchie, Yalobusha, Grenada	Region 6: Lamar, Forrest, Perry, Stone
Region 3 North: Yazoo, Madison, Rankin	Region 1 North: Marshall, Benton, Tippah, Alcorn, Prentiss, Tishomingo	Region 7 East: Greene, George, Jackson
Region 3 South: Hinds	Region 1 South: Lafayette, Union, Pontotoc, Lee, Itawamba, Monroe	Region 7-Central Harrison
Region 5 East: Copiah, Lincoln, Lawrence, Simpson, Jeff Davis, Covington, Smith, Marion	Region 4 North: Calhoun, East and West Chickasaw, Webster, Clay, Choctaw, Oktibbeha, Lowndes, Attala, Winston, Noxubee	Region 7-West: Pearl River, Hancock
Region 5 West: Warren, Claiborne, Jefferson, Adams, Franklin, Wilkinson, Amite, Pike, Walthall	Region 4 South: Leake, Neshoba, Kemper, Scott, Newton, Lauderdale, Jasper, Clarke, Jones, Wayne	

E. 2015 -2019 MAPS OF REGIONAL OPERATIONAL STRUCTURE
2015-2016 Map of Field Operations



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2016-2017 Map of Field Operations



2017-2019 Map of Field Operations



F. MDCPS VISION

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

G. MDCPS MISSION

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

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

H. MDCPS VALUES

MDCPS has seven (7) values that will be honored in working with clients, community partners, and each other:

- **Competence:** We have technical skills and knowledge; we use critical thinking skills; we make informed decisions; and we follow through to achieve successful outcomes.
- **Integrity:** We are honest in our interactions; we are accountable for our actions; and we do the right thing.
- **Responsibility:** We do what we say we are going to do; and we take initiative.
- **Respect:** We treat others with kindness, compassion, dignity, and honor differences of those we serve and each other.
- **Personal Courage:** We are loyal to the mission of MDCPS; we advocate for those we serve; we lead by example even when doing so carries risk.
- **Collaboration:** We make decisions for the common good; we share resources based on need; we work together effectively in teams and work with a collective knowledge of all programs and services.
- **Family-centered:** We believe that families are not defined one way; we value all families and their input in decision-making; and we support a family's ability to grow and change.

The agency had also created a mantra for staff and its stakeholders. The MDCPS C-A-R-E-S commitment mantra states:

- **Change - We understand change as an opportunity** - Families have the ability to change, and MDCPS understands the process of change both for the families we serve and as an agency experiencing change.
- **Assessment - Assessment is critical** - Effective safety and risk assessments are a necessity for decision-making when working with children and families.

- **Relationships - We depend on partnerships for our work** - Internal and external relationships are essential to achieving our mission, particularly the partnerships with the courts, community-based organizations, and families.
- **Expertise - We understand trauma** - Being trauma-informed is key for the work that we do to ensure that our involvement is helpful, measured, and does not contribute to additional trauma for a child or family.
- **Service - We are committed to service that meets the needs of children and families** child protection and strengthening families are not efforts in conflict; we can, should, and must do both to achieve our vision for Mississippi's children.

I. 2015-2019 ORGANIZATIONAL GOALS

The state had revised three (3) of the five (5) initial overarching goals. The following revised goals listed below were amended due to changes in administrative leadership which brought about changes in strategic goals and management initiatives.

- **Goal 1:** Implement the Core Components of the Practice Model which focuses on family-centered practice and captures the requirements of the MSA, **COA** and the Child and Family Services Review (CFSR).
 - The state no longer pursued COA accreditation and began pursuing the initiative of emerging as a separate and independent agency of MDHS.
- **Goal 2:** Develop and implement a compliant State Automated Child Welfare Information System (SACWIS.)
 - To move toward better data collection and analysis for children and youth involved in the child welfare system, the state is pursuing the development of a Comprehensive Child Welfare Information System (CCWIS).
- **Goal 4:** Obtain accreditation by improving organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements.
 - As stated the state was no longer seeking accreditation and the goal was amended.

The final primary organizational goals consist of the following:

1. Implement the Core Components of the Practice Model, which focuses on family-centered practice and captures the requirements of the MSA and the Child and Family Services Review (CFSR).
2. Recruit and retain staff by creating a healthy work environment and maintaining manageable workloads.
3. Develop and implement a compliant Comprehensive Child Welfare Information System (CCWIS.)
4. Improve organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements
5. Network and collaborate with stakeholders, clients, and communities to improve the child welfare services delivery system in Mississippi.

II. COLLABORATION

A. CROSS SYTEM COLLABORATION

Over the past (5) five years, MDCPS has continued its' efforts of working with stakeholders for implementation of its goals and objectives for the 2015-2019 CFSP. The agency continues to meet regularly through monthly, bi-monthly, and as needed meetings with its stakeholders which includes: the Administrative Office of the Courts (AOC), Children Advocacy Centers (CAC) of Mississippi, Mississippi Band of Choctaw Indians, (MBCI), representatives from MS State Department of Health (MSDH), Mississippi Department of Health (DMH), Mississippi Division of Medicaid (DOM), Mississippi Department of Education (MDE), state universities, and a host of non-profit organizations. The focal points of these meetings are to discuss the progress and/or barriers to the goals, objectives, interventions identified under the 2015-2019 CFSP. For the development of the state's final progress report, MDCPS's Division of Federal Reporting contacted its' stakeholders to request quarterly and periodic updates about joint initiatives, successes, barriers, and strategies for improvement. Copies of the 2015-2019 CFSP and subsequent APSRs were also provided to stakeholders to help with reviewing and sharing needed information for the development and finalization of the final report. MDCPS also shared the annual reporting program instructions, (PI) with its stakeholders.

These collaborative efforts are integrated throughout the final progress report. As the agency worked toward implementing, revising, and completing its collaborative strategies identified in the 2015-2019 CFSP, the periodic updates from the stakeholders provided valuable insight into the effectiveness of ongoing accomplishments. This method has served as an internal/external feedback loop to ensure joint initiatives were completed by established target dates.

Mississippi Commission on Children's Justice

One of the primary mechanisms for ongoing stakeholder collaboration in Mississippi's child welfare system is the Mississippi Commission on Children's Justice. The Commission, organized by order of the Mississippi Supreme Court, is tasked with "developing a statewide comprehensive approach to improving the child welfare system; coordinating the three branches of government in assessing the impact of government actions on children who are abused or neglected; and recommending changes to improve children's safety, strengthen and support families and promote public trust and confidence in the child welfare system." The Commission's membership, which meets quarterly, includes representatives from MDCPS; the Mississippi Supreme Court; MDHS; the Department of Mental Health; the Office of the Attorney General; the Mississippi Judicial College; the Children's Advocacy Centers; the University of Mississippi Medical Center; the University of Mississippi School of Law; Mississippi College School of Law; the Mississippi Band of Choctaw Indians; private service

providers; circuit courts; chancery courts; youth courts; and others. Commission meetings serve as a forum for the discussion of pressing issues, the proposal of new initiatives, and to keep the membership abreast of changes and progress made in each member's sphere of influence in the child welfare system.

The Legislative Subcommittee of the Commission on Children's Justice-

The Legislative Subcommittee of the Commission on Children's Justice was developed in the months preceding the 2019 Session of the Mississippi Legislature to develop joint legislative agenda for the Commission on Children's Justice. Through this subcommittee, representatives of the Commission's membership—including members of both the executive and judicial branches of government—gathered to discuss proposed legislative action and agree on compromise versions draft amendments to which all or most could agree. By doing so, the membership was positioned to provide a united voice for needed reforms during the session, which ultimately proved successful when the Commission's bill was passed. When legislative action is needed in the future, this subcommittee will continue to provide a venue for effective legislative advocacy.

The Education Subcommittee of the Commission on Children's Justice

This subcommittee of the Commission is focused on developing and implementing multidisciplinary training for professionals who have an effect on the wellbeing of children. The subcommittee is tasked with developing educational programs for Mississippi institutions of higher learning and for continuing education among agencies involved in the child welfare system.

The Community Wraparound Subcommittee of the Commission on Children's Justice

This subcommittee of the Commission is focused on finding ways to better coordinate the delivery of services across systems and agencies, and to foster the development of local resources.

The Faith-Based Subcommittee of the Commission on Children's Justice

This subcommittee was created to find opportunities to integrate faith-based organizations into the Mississippi's child welfare system.

The Family First Initiative of the Commission on Children's Justice

The Family First Initiative is a collaborative effort organized by the Commission on Children's Justice to work towards increased primary prevention of child maltreatment in Mississippi. The Initiative is led by a statewide steering committee that includes a membership similar to that of the Commission itself. It is also led by local steering committees organized in pilot sites around the state. The Initiative works to build on the work of MDHS and Families First for Mississippi—a private provider funded by MDHS to operate family resource centers across Mississippi—to integrate and streamline access to needed family support services before a

report of child maltreatment is made to MDCPS. Local steering committees work to identify resources available in the local community as a supplement to the economic assistance programs available through MDHS, and the family support services available through Families First for Mississippi.

The Commission on Guardianships and Conservatorships

The Commission on Guardianships and Conservatorships is another offshoot of the Commission on Children's Justice focused on modernizing Mississippi law related to guardianships and conservatorships and, more particularly, improving coordination between youth courts and chancery courts, both of whom handle legal issues related to the wellbeing of children and families.

The Mississippi Judicial College

The Mississippi Judicial College provides most of Mississippi's continuing education for sitting judges. The Judicial College hosts an annual youth court judges conference during which the college provides targeted training on pressing issues related to youth court. MDCPS collaborates with the Judicial College in identifying appropriate topics for presentation at the conference, and ordinarily provides some of the training.

CASA

MDCPS is collaborating with CASA in Mississippi to develop training for MDCPS caseworkers that will help them better understand the role of a CASA and facilitate enhanced collaboration in cases where a CASA has been appointed.

Mississippi Association of Child Care Agencies (MACCA)

MACCA is the trade association for private agencies in Mississippi that provide services to children. Most MACCA members are MDCPS contracted providers. MDCPS staff attend most of MACCA's monthly meetings. Those meetings serve as an opportunity for MDCPS to provide updates on current developments to the providers, and for the providers to express concerns, raise ideas, and ask questions for MDCPS's consideration.

Court Collaborations with Administrative Office of the Courts- (AOC)-

- **Parent Representation Court Improvement Program Joint Project Between MDCPS and Administrative Office of the Courts** - The Parent Representation Task Force is a collaborative effort between the judiciary, Child Protection Services, Casey Family Programs, the Kellogg Foundation, University of Mississippi School of Law, Mississippi College School of Law, the American Bar Association, Mississippi Center for Legal Services and the Mississippi Judicial College. The Parent Representation Pilot Projects in Rankin, Forrest and Adams counties began in 2012 and continue to operate in those counties. Harrison County started in 2013. In April 2015, Hancock County matched Casey Family Programs funds to become the fifth pilot county in Mississippi for representation to

indigent parents. DeSoto County (2016), Hinds County (2017), Bolivar (2017), Jackson (2017), and Pearl River (2018) were added. Lafayette County and Madison County provide representation for indigent custodial parents independent of the Parent Representation Task Force sites. Quarterly meetings of the Parent Representation Task Force were held in 2015-2019 to strengthen pilot projects. Standards of Practice were created. Parent attorneys participated in training for their role.

On September 1, 2017, the Quarterly Parent Representation Task Force met to discuss (1) expansion of parent attorney project into Jackson County, (2) to deepen parent attorney project in Forest County by serving all children and not limiting to Zero-to-Three population, and (3) to deepen the project in Rankin County by adding a social worker to the parent attorney project. The transition from to the Office of State Public Defender for existing sites except Rankin and Pearl River was accomplished, and the institutionalization of the Task Force was agreed to by all parties.

Mississippi Dependency Court and Child Welfare Agency data presented by Fostering Court Improvement, a non-profit organization, shows a 17% reduction in children in foster care, and a corresponding reduction in congregate care March 2017-March 2018. This data reverses a five year upward trend of placement of children in foster care. All parent defender sites had decreases in care, with the exception of DeSoto which showed a decrease prior to this data period. Rankin County data shows a 49% safe reduction in children in foster care. Hinds County had a 30% drop in removals in 2018. The number of children in care the most recent eighteen months (March-October) shows a 23% decrease in 2018. In 2016, there was a spike in removals. In 2018, the number of children in care is comparable to the 2008-2009 number. The reduction continues in Hancock and Rankin Counties with 50-55% reduction. Both counties experienced judicial changes. Hancock still has a high removal rate with room to come down more. Marion County had a change in the judiciary. DeSoto had a significant reduction, but already had low removal rates. Hinds County had a significant decrease in removals. Together the story makes a compelling narrative. Mississippi's reduction of children in foster care is an anomaly. In addition to the positive results produced by the Parent Representation Joint Project, MDCPS and AOC have received positive recognition from the public on many other collaborations. Please see accomplishments below for 2018:

- Rankin County and Jackson County celebrated Reunification Day
- Two (2) multidisciplinary trainings were held, first in January with 89 attendees and second in October with 93 attendees.
- Parent Defenders received training for certification and a large number of Parent Defenders attended the National Association of Counsel for Children Conference and Redbook Training as Parent Defenders, as well as the ABA Children and the Law/Parent Representation training in Chicago.

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- Four Quarterly Parent Representation Meetings were held.
 - Parent representation expanded to Pearl River County.
 - A social worker was hired in Bolivar and Rankin Counties as part of the parent representation team.
 - A Resource Counsel was hired at Mission First Legal Aid Office.
 - There was a pay adjustment in salary of parent defenders in Harrison County to what the majority of the parent defenders are paid.
 - Court observations were conducted by the Jurist in Residence and Carolyn Hicks with results and outcomes noted like “daylight and dark” between cases where parents were not represented and cases where parent defenders were present.
 - Mission First provided TA throughout the State and developed forms, papers, motions, etc. for parent defenders.
 - Hinds County and Hancock Parent Defenders presented at the training in Bay St. Louis.
 - More interest and momentum throughout the state to start parent representation in other counties.
- **Court Improvement Workgroup (CIP)**- Beginning in 2010, Court Improvement Workgroup (CIP) met monthly for several years. It was in 2017 that the CIP workgroup changed from monthly meetings to quarterly meetings in 2017. These workgroup meetings were to address legal issues for implementing the requirements of the Modified Settlement Agreement (MSA), identifying training needs for the judiciary, developing plans and goals to affect outcomes through the Youth Court, and identifying the breakdowns/barriers between MDCPS and the court system. Members of the workgroup have included the following: MDCPS State and Regional Staff, MDHS, DYS Community Services Director, attorneys from the Attorney General’s Office and staff from the AOC. The CIP Workgroup has been rolled into CFSR meetings in 2018-2019 to address the status of ongoing CFSP/CFSR/PIP progress and steps moving forward.

Currently, problem-solving groups have grown out of the CIP Workgroup include the following: Indigent Parental Representation Task Force, Juris in Residence meetings with the MDCPS Commissioner, the—Human Trafficking Task Force, the 2018 Judicial Engagement Teams, Three Branch Government Convening, and Family First Initiative to train and implement the Family First Prevention Services Act. Members of the CIP Workgroup were participants in the Mississippi Commission on Children’s Justice, and the Zero-to-Three Quality Improvement Center for Research-Based Infant-Toddler Court Teams in Forrest and Rankin counties. The CIP Workgroup works with AOC to coordinate training with the Department, the Judiciary and the Tribe.

In 2018, CIP was placed under the Mississippi Commission on Justice for Children. A CIP Multidisciplinary Committee was appointed to develop and implement the CIP Strategic Plan. Members of the Committee include MDCPS state and regional staff, Juris in Residence, County Youth Court Judges, the Attorney General's office, Mississippi College School of Law, Mission First Legal Aid Office, staff from the AOC, the Mississippi Band of Choctaw Indians, (MBCI), Children's Advocacy Centers of Mississippi (CAC), and MDHS state office staff from the Division of Child Support. The CIP Multidisciplinary Committee's focus for 2018 was Parent Representation, the Mississippi Family First Initiative and the MDCPS Child and Family Services Review in September. Further, the Committee's focus was to identify training needs for the judiciary, parent attorneys, the Tribe and child welfare staff, to develop plans and goals to affect outcomes through the youth court, and to identify the breakdowns and barriers between MDCPS and the court system. The CIP Multidisciplinary Committee continues to participate in the Program Improvement Plan (PIP) and development of the next Child and Family Services Plan (CFSP).

- **Mississippi Supreme Court Jurist in Residence-** Another significant partnership that the agency has with the courts is the relationship with state's Resident Juris. This is a resource person to the judicial system and to local courts on issues such as child abuse reporting, termination of parental rights, general child protection services issues of competency in court proceedings, indigent parent representation, truancy/education neglect and crossover youth.

The Resident Jurist worked closely with the Mississippi Department of Child Protection services and its commissioner to identify and address emerging issues in child welfare and the courts. He worked with the Legislature to establish an additional judicial post to properly handle the child welfare docket in Lee County. He assisted in training of court staff preparing for the Children and Family Services Review (CFSR), a federal review of the state child welfare system in four counties. The Resident Jurist continued to work to increase federal funding for the support of children in foster care. Title IV-E of the Social Security Act provides for federal reimbursement for a portion of the maintenance and administrative costs of foster care for children who meet specified federal eligibility requirements. Two years ago, Mississippi reported a 28 percent Title IV-E reimbursement rate. Recently, the reimbursement rate has risen to 40 percent. MDCPS instituted several reforms during that period. By increasing the number of children receiving federal dollars for their ongoing support, Mississippi would reduce state tax dollars spent on foster care.

Part of the reason for the low rate was that individual children's IV-E eligibility was not correctly documented in court orders. Judge Hudson worked extensively to train CPS workers and judges in correctly documenting IV-E eligibility requirements. He edited the Jurist in Residence letters to all Youth Court judges addressing the need to properly address all the factors as required by federal law and to include those findings in their orders. He worked with IT personnel at the Supreme Court to draft new court order language in MYCIDS, the statewide youth court data system, to ensure conformity with eligibility requirements and provide instruments for statewide tracking of compliance.

Judge Hudson also provided consultation for individual Youth Court judges, prosecutors, parent attorneys and guardians ad litem across the state. He conducted several court observations of local Youth Courts and issued reports of recommendations for better court practices. He worked with several courts to address challenges and assisted in developing plans to overcome them. Also, the Resident Jurist met with legislators and participated in legislative committee meetings to educate legislators on the needs of Youth Court and child welfare. He created position papers on legislative proposals to advise of the impact of pending legislation. He made presentations regarding Youth Court issues at various conferences including the Youth Court Prosecutors Conference, a multi-disciplinary conference of court and police personnel, multi-disciplinary conferences with parent attorneys, and the Youth Court Judges annual conference. He conducted new judge training for County Judges on Youth Court practice and procedure. He also helped train Arkansas judges on the Family First Prevention Services Act.

Mississippi Department of Human Services- As discussed above, MDCPS is a sub agency operationally independent of MDHS, and MDHS performs certain administrative support services for MDCPS. In addition to that ongoing operational connection, MDCPS and MDHS engage in data sharing related child support, child care vouchers and collaborate in joint planning on an as needed basis.

- **Division of Youth Services (DYS)-** MDHS, DYS is the division that administers probation, aftercare services, and institutional programs for juveniles who have been adjudged delinquent in the Mississippi Youth Courts or are at risk of becoming delinquent. MDCPS and the MDHS, Division of Youth Services (DYS)'s, Community Services Director met to discuss and track the status of youth that have been identified as "cross over" youth. This is a joint effort that targets open protective cases for clients that have been transferred to the state juvenile institution, Oakley Youth Development Center (OYDC). Additionally, the Director of Federal Reporting verifies those cases from the DYS, Community Services' monthly probation/parole caseload report. DYS monthly caseload report identifies the total number youth that are on probation, parole, and institutional commitments. DYS

submits a quarterly report to MDCPS for review to assist with identifying crossover cases and issues. Currently, there is no jointly established policy or procedure for identifying and tracking youth that are considered dual or cross over youth. Presently, MDCPS, MDHS, DYS and A.O.C are working on defining “crossover” youth for the state. MYCIDS would also be utilized for statistical reporting of dually referred youth. Ultimately, data reporting from MYCIDS would replace the spreadsheet tracking.

- **Maternal, Infant, and Early Childhood Home Visiting** – MDHS, Division of Early Childhood Care and Development (DECCD) receives the Maternal Infant and Early Childhood Home Visiting (MIECHV) Grant. This Grant funds the Healthy Families Mississippi program. This is a voluntary comprehensive home visiting support program that provides family support workers to assist families by linking them to the following community services and resources: child development, nutrition, financial and safety education, and referrals for family support services. Healthy Families Mississippi serves pregnant mothers or families with children three (3) months or younger who are low income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration.

Healthy Families Mississippi has implemented the Healthy Families America home visiting model and the Partners for a Healthy Baby parenting curriculum. Healthy Families also serve mothers that are referred by the Comprehensive Addiction and Recovery Act (CARA) program. All services are provided free of charge. The program serves families in Claiborne, Coahoma, Copiah, Holmes, Humphreys, Issaquena, Jefferson, Neshoba, Sunflower, Sharkey, Tallahatchie, Tunica, Washington and Wilkinson counties. MDCPS continues to serve as a representative on the Mississippi Home Visiting Partnership Advisory Group. Due to the limited counties that are served by Healthy Families, enrollment has been very limited and only three (3) families have been served.

- **Division of Economic Assistance (DEA)**- The Division of Economic Assistance is the division that administers the Supplemental Nutrition Assistance Program (SNAP), formerly known as the food stamp program, and the Temporary Assistance to Needy Families (TANF) cash assistance program formerly known as welfare. The State Refugee Coordinator (SCR) collaborates with this division for the Refugee Cash Assistance Program (RCA). RCA is part of the Office of Refugee Resettlement (ORR) Program. It provides financial assistance to people admitted to the United States (U.S.) as refugees. During the month of February 2019, the SRC worked in partnership with DEA to provide the state’s Contractor information on how refugees apply for RCA. The SRC and DEA are in constant communication regarding refugees applying for RCA, the status of their applications, payment amounts, duration of payments, and federal reporting.

Mississippi Youth Voice

The Mississippi Youth Voice is project of First Place for Youth in partnership with the Jim Casey Youth Opportunities Initiative to provide a forum for former foster youth to advocate for change and develop leadership skills. A leader board consisting of eighteen to twenty-six-year-olds meets monthly. This group educates others about issues affecting foster children, advocates for improvements to the foster system, and builds partnership opportunities for youth who have been in care. MDCPS's independent living program coordinates closely with Mississippi Youth Voice, and the members of the Youth Voice Board are invited to provide feedback in various MDCPS forums, including leadership conferences and joint planning sessions.

Foster Parent Focus Groups

MDCPS recently held a foster-parent focus group. A group of experienced foster parents were invited to meet with senior leadership at MDCPS's state office, share their experiences as foster parents, and provide their input about needed improvements and what they would like to see in the future of Mississippi's child welfare system. MDCPS intends to make this a regular practice going forward, though the frequency has not yet been decided. To facilitate this collaboration, MDCPS has created the position of Foster Parent Liaison. This dedicated staff person, in addition to organizing the foster parent focus groups, will travel the state to meet with foster parents, answer their questions, respond to their concerns, and solicit their feedback about MDCPS and the child welfare system.

Parent Focus Groups

In the coming months MDCPS plans to institute a similar practice of focus groups with parents of children who have been in MDCPS custody or who have received in-home services from the Department.

Collaboration with Stakeholders regarding the Well-Being of Children in Foster Care

MS Department of Mental Health (DMH) - DMH continues to provide certification for the agency's licensed group homes and foster care programs that wish to become therapeutic, serving children/youth with serious emotional/behavioral disorders. Both DMH and MDCPS monitor and evaluate therapeutic group homes and therapeutic foster care providers on an annual basis. In Quarter 1, there were 6 providers of Therapeutic Foster Care and 5 providers of Therapeutic Group Homes. Division staff shares and exchanges information with the Bureau of Prevention on new programs and the development of new programs/services and child abuse prevention campaigns. The DMH, Division Director of Children & Youth continues to participate on the Children's Trust Fund Advisory Board and MAP Team meetings. Aside from MAP Team meetings, State and local MDCPS workers along with Community Mental Health

Centers, and DMH staff collaborate regularly via phone to assist and plan appropriate treatment programs for youth with seriously emotionally disturbed (SED) disorder. Representatives from the Therapeutic Placement Division and education liaisons from the Division of Youth Transition Support Services continue to participate on the State Level Case Review Team (SLCRT), which meet monthly.

- Children/Youth are referred from local MAP Teams and discussed at the SLCR Team meetings, including difficult to serve and place youth.
- DMH, C&Y staff, and MDCPS staff discuss barriers and challenges to accessing behavioral health services for children/youth at the SLCR Team meetings. The meetings include DOM, Genpatico, Optum, MDHS, Families as Allies, and the OAG's office.

Additionally, DMH and MDCPS representatives planned monthly phone meetings at the SLCRT meetings with staff at Oak Circle Center, a Specialized Treatment Facility, to discuss the continuity of care of children/youth in MDCPS custody being treated at the facility. These meetings began in October 2018. The goal was to develop a smoother process that would assist a child's transition back into the community. MDCPS representatives and DMH staff met to revise and coordinate training requirements for therapeutic providers and therapeutic foster care parents. DMH and MDCPS agreed to add Youth Mental Health First Aid training to therapeutic foster care parent's requirements beginning in 2019.

MDCPS's Division of Therapeutic Placement- The Therapeutic Placement unit works diligently to improve discharge planning between the agency and treatment facilities. MDCPS, in collaboration with the DMH, was able to engage two therapeutic providers (Oak Circle Center and Specialized Treatment Facility) in the state level case review process for children in MDCPS custody placed in their facilities. This process allows MDCPS and the collaborating agencies to start planning for discharge during admission.

The Director of Therapeutic Placement participates every other Monday in scheduled Specialized Planning, Options to Transition Team (SPOTT) meetings to discuss therapeutic foster children. The specialized team is made up of individuals from DMH, Medicaid providers, The Arc of Mississippi, Community Mental Health Center (CMHC), MDHS, and MDCPS. The therapeutic foster children who are mainly discussed at SPOTT are children with intellectual and developmental disabilities; however, some of the referrals are children who are in need of additional mental health services. The Placement Director also participates in State Level Case Review (SLCR) on the second Thursday of each month. The SLCR is the next level of the MAP Team process which is comprised of a multidisciplinary task force of state level agency representatives. The SLCR team reviews referred therapeutic foster children ages 0-21 who

have serious emotional disorders. The SLCR team is made up of individuals from DMH, Medicaid providers, MDHS, and MDCPS. Emergency SLCR are needed on occasion for foster children due to needs in between the scheduled SLCR.

Therapeutic Placement Unit staff also collaborate with community stakeholders in and out of state who also work with foster children and/or Medicaid. Agencies the Therapeutic Placement Unit utilizes are, but are not limited to, contracted therapeutic providers, DMH, Medicaid providers, local Community Mental Health Centers, FamiliesFirst for MS, South Mississippi Regional Center, Boswell, Mississippi Adolescent Center, North Mississippi Regional Center, Louisiana Coalition Against Human Trafficking: The Free Indeed Home, Specialized Treatment Facility, Brentwood, Diamond Grove, Parkwood, The Crossings, Cares, Youth Villages, Millcreek of Magee, Millcreek of Pontotoc, Oak Circle Center, acute facilities throughout and outside of Mississippi, Chris Kids/Chris 180, and Montgomery Alabama Pediatric Nursing Home. The Therapeutic Placement Unit researches other agencies and placement treatment options, on an as needed basis, to serve therapeutic foster children. The cross-system collaboration for the above listed resources are based on the following factors:

- Community Mental Health Centers (CMHC) assist therapeutic foster children with gaining ongoing therapeutic services in the community. CMHC also work with MDCPS frontline staff to provide foster children with needed evaluations to ensure all needed services are available.
- FamiliesFirst for MS works with Therapeutic Placement Unit staff and MDCPS frontline staff on providing a flexible environment for foster children to obtain an accredited high school diploma.
- The Therapeutic Placement Unit has ongoing work and advocates with South Mississippi Regional Center (SMRC), Boswell, and North Mississippi Regional Center (NMRC) to gain needed evaluations and services for therapeutic foster children with Intellectual and Developmental Disabilities.
- The Therapeutic Placement Unit collaborates daily with Specialized Treatment Facility, Brentwood, Diamond Grove, Parkwood, The Crossings, Cares, Youth Villages, Millcreek of Magee, and Millcreek of Pontotoc to gain and plan treatment for therapeutic foster children.
- Oak Circle Center staff/Executive staff, MDCPS Therapeutic Placement staff, and MDCPS Executive staff participated in a meeting to address treatment concerns and appropriate placement concerns for therapeutic foster children.
- Specialized Treatment Facility, Oak Circle Center, DMH, and MDCPS participate in a monthly meeting to discuss discharges from Specialized Treatment Facility and Oak Circle Center. During this meeting, any concerns an agency may have regarding a placed therapeutic foster child are discussed.

- Louisiana Coalition Against Human Trafficking: The Free Indeed Home collaboration has provided a placement resource for sex-trafficked foster children. The home is a faith-based home dedicated to the rescue and restoration of girls ages 12 to 17 who have been victimized by child sex trafficking.

MDCPS's Nursing Unit- The nursing unit continues to collaborate with Magnolia Healthcare, Medicaid, DMH, and other providers both in and out of state that provide services to children in the Mississippi foster care system. A representative from the nursing unit and the Director of Field Support Services participate in a bi-monthly meeting with Magnolia and Medicaid. The nursing supervisor has also held meetings with Montgomery Pediatric Nursing unit about the services it provides to some of the state's children in care.

MDCPS's Office of Therapeutic and Prevention Services – The Office of Therapeutic and Prevention Services works through Memorandum of Understandings (MOUs) with the DMH, Bureau of Alcohol and Drug Services, MS State Department of Health (MSDH), FamiliesFirst for MS, and Healthy Families of MS for the Comprehensive and Addiction Recovery Act (CARA) referral system. CARA is federally mandated to assist pregnant mothers up and their infants up to the discharge date from the hospital, offering substance use education and treatment options. Weekly conference calls and reports are generated for CARA compliance regarding the number of referrals received and processed. CARA Coordinators continues to provide education to hospitals, clinics, and other community agencies as needed on updated CARA policies.

Mississippi Department of Education (MDE)

MDCPS and MDE work in partnership to promote educational stability for all children in foster care. The Joint Guidance provides clear and concise educational placement procedures by outlining the roles and responsibilities of each agency. The guidance was issued on the June 23, 2017. In accordance with the state policy and procedure, MDCPS and MDE are committed to helping students in foster care remain academically stable while completing courses and advancing to the next grade/level. This partnership is a strength for both agencies to work closely together to monitor and maintain as much educational stability for children in care by implementing Every Student Succeed Act (ESSA). This law was signed, December 10, 2015 and the implementation began in January 2016. The law emphasizes the importance of limited educational disruption of children in foster care. This law has helped to improve the awareness of the unique needs of children in foster care by creating and

increasing meaningful dialogue specifically focusing on what is in the best interest of the child.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee Program) and Education Training Voucher Services (ETV)- The Division of Youth Transition Support Services (YTSS) continues to coordinate efforts by collaborating with the Mississippi Department of Rehabilitation Services, Jim Casey Youth Opportunities Initiative, Methodist Children's Home (Transitional Living Placement for youth with special needs), and the Mississippi Integrated Basic Education and Skills (MI-best) program (GED/High School diploma attainment with progression into post-secondary school opportunities). Additionally, Independent Living has collaborated with governmental and other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking.

Collaboration examples consist of overseeing and implementing the Teen Advisory Board and Youth Alumni Boards to engage government and non-profit agencies in providing needed services to transition-age foster youth. Government agencies, such as MDHS, Institution of Higher learning (IHL), Community Colleges, DMH, MSDH, and DOM are engaged to ensure processes to receive services are clear and manageable for youth transitioning out of custody. Non-profit agencies focusing on education, employment, housing, and various needed services are engaged to ensure youth have connections to community-based organizations that can assist them during transition. Participating non-profit agencies are:

- Methodist Children's Home- Congregate care/ transitional living facilities
- Catholic Charities Unaccompanied Refugee Minors (URM) Program
- First Place for Youth
- Jim Casey
- Open Arms Health Clinic: Health and counseling services; Free STI testing/treatment; and Services for LGBTQ persons.

Memorandums of Understandings (MOU)

The state continued to collaborate with other agencies by establishing Memorandums of Understanding during the 2015-2019 CFSP timeframe. MOU's consisted of the following but were not limited to: DOM, MDHS, Office of the Attorney General (OAG), DMH, MDE, MS Department of Health (MSDH), Mississippi Band of Choctaw Indians, (MBCI) and contractual agreements with Baptist Children's Village, Mississippi State University, Casey Family Programs, and the University of Mississippi Medical Center, (UMMC). Please see the following collaborative service descriptions listed below:

- **ASPHA** – National Electronic Interstate Compact Enterprise system for the real-time electronic exchange of case files between the 52 states and jurisdictions that are members of AAICPC
- **Baptist Children's Village** – Residential Child Care Facility
- **NSPARC** – National Strategic Planning and Analysis Research Center at Mississippi State University (NSPARC) for software development, data warehousing, data analysis, communication, training, strategic planning, project management
- **MDE** – Mississippi Department of Education for the provision of Free Appropriate Public Education (FAPE) in accordance with IDEA for children in the custody of MDCPS
- **MDHS** – To identify blended responsibility services and minimize impact of operations of MDHS and MDCPS
- **Casey Family Program** – Child Welfare Initiative agreement and strategy plan
- **UMMC** – Basic guidelines for the Children's Safe Center and Forensics Division of the Department of Pediatrics
- **MEDE** – allows MDCPS access to Medicaid beneficiary-centric health information
- **MBCI** – MDHS assistance to the Tribe's Children and Family Services
- **OAG** – Legal services provided to MDCPS by the Office of the Attorney General

Additionally, MDCPS and DOM continues to collaborate on Medicaid eligibility for children in foster care which includes health coverage for unaccompanied refugee minors. There is a fully executed Interagency Agreement between MDCPS and DOM for the provision of Medical Assistance for Refugees in Mississippi. The agreement commenced on January 1, 2017 and will expire on December 31, 2019. This agreement may be extended upon agreement for up to two one-year renewals. Additionally, MDCPS and DOM collaborated on an Interagency Agreement to provide immediate Medicaid eligibility for children placed in MDCPS care. The agreement more efficiently assures all eligible children have access to medical services and attain or maintain good physical and mental health by assisting them in securing and using needed healthcare services. MDCPS will benefit in cost savings due to immediate access to Medicaid eligibility. If a child does not have Medicaid coverage when they first come into MDCPS custody, the cost of medical care is the responsibility of MDCPS at the medical provider's standard and customary rate. The medical provider's rate is typically higher than the Medicaid rate.

Mississippi Band of Choctaw Indians (MBCI)-Indian Child Welfare Act (ICWA) Compliance

MBCI, the Choctaw Model Youth Court, the Attorney General's Office at Choctaw, MDCPS and the Administrative Office of Courts, with the assistance of the National Resource Centers for the Tribe and for Legal and Judicial Issues, as well as the National Council of Juvenile and Family Court Judges and Casey Family Programs, developed the First through the Eighth Annual Indian Child Welfare Conferences held in August 2011-2018, to promote cultural awareness, understanding and implementation of the Indian Child Welfare Act. MDCPS and MBCI made great progress in achieving the cooperative goals during the reporting period and continue with a collaborative relationship in 2019.

MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act. MDCPS staff participate in quarterly meetings with Mississippi Band of Choctaw Indians. These meetings provide an opportunity discuss ways to improve collaboration through changes to the memorandum of understanding between the agency and the tribe, and to identify opportunities for joint training.

Children's Advocacy Centers of Mississippi™(CACM),

CACM is a network of 11 Child Advocacy Centers (CACs) which has partnered with MDCPS on several ongoing collaborative efforts over the past five years. A strong partnership between the two agencies has helped support a number of programs and projects that are improving responses to victims of abuse. These programs include, the Multidisciplinary Team (MDT) Enhancement Project, Desoto County School Project, managing the Children's Justice Act and Task Force, Chaplains for Children training, ChildFirst Forensic Interview and Court Preparation Training, One Loud Voice Conference, and initiating the Child Advocacy Studies within institutions of higher learning. Service descriptions for all collaborative efforts are listed below:

- **Multidisciplinary Team (MDT) Enhancement Project:** Multidisciplinary Team (MDT) Enhancement Project provides a greater depth and breadth of service to the local county MDTs, a pilot project was developed between CACM and MDCPS. Recognizing the Child Advocacy Center (CAC) model was born out of a need to facilitate a coordinated approach to child abuse investigations, CACM and member CACs began a discussion on possible solutions which would enable the model to fully accomplish this goal and address challenges. Through ongoing conversations with MDCPS, it was determined that CACs

could more successfully meet their mission if provided greater visibility into the universe of cases which might require a joint investigation. As a result, MDCPS agreed to model a pilot project between the CACs and MDCPS that was established—and since rolled out statewide—in Texas wherein the CAC would receive access to all of the centralized intake hotline reports in their assigned service area. The goal of the pilot is to assist MDCPS and law enforcement with initiating a joint investigation, which would enable CACs to engage children and families with critical services at an earlier point in the investigation. Goals of the MDT Enhancement Program consist of:

- Proactively strengthen and sustain CAC Multidisciplinary Team;
- Fortify overall MDT component within CACs to ensure effective communication, coordination, and collaboration at all stages of child abuse cases; and
- Ensure timely access to the full array of MDT/CAC services for all children within a CAC's official service area and existing protocol case criteria.

By sharing intake notifications with the CAC, the local center can assist in identifying cases within the MDT's defined working protocol (cases fitting a specific criterion wherein the MDT has already determined a CAC/MDT-style joint investigation is necessary). The ultimate beneficiaries are Mississippi's children as this system will allow CACs to engage with children and families at a much earlier point in time, providing critical intervention, family advocacy and therapeutic services more efficiently.

In July 2016, MDCPS and CACM held a joint training in preparation of this project. In August 2016, the three pilot county CACs began receiving access to MACWIS (the computer system for MDCPS) for their respective county and began observing the reports coming into to the Mississippi Centralized Intake. The CAC logged all the reports for their county, observed the number of reports that seemed to meet their MDT's protocol for a collaborative investigation, and observed and logged the responses of their partner agencies regarding these reports. Each of the CACs also met with their respective MDTs to discuss the pilot project and cross-train regarding the MDT process, protocol, and methods of collaboration. From August 1–today, the CAC continues to log all reports coming into their county, engage their MDT members regarding reports that seem to meet the MDTs protocol (in most counties, the team will review all sexual abuse cases, child sex trafficking cases, felony physical abuse cases, child fatalities, and witness to homicides or violence crime cases), and document the results of each case. Of the 38 cases that met the criteria for a collaborative investigation, only 18.4% followed the protocol.

The results of the three pilot CACs (Choctaw, Forrest, and Pike) within one year of the Multidisciplinary Team Enhancement project were impressive. Allowing the CAC the visibility of all child abuse hotline reports within their community allowed for

enhancement of the agreed upon processes of the MDT and allowed opportunities to assist with the administrative burden of both MDCPS and law enforcement to initiate services. Dedicating a CAC staff position to the specific function of facilitating the MDT approach works to improve communication between MDCPS and law enforcement. Due to turnover and workload within MDCPS and law enforcement, identifying their counterpart on a case was not always feasible. The CAC staff position, serving as a single point of contact, offered an effective solution. Most important, throughout the duration of the pilot more children in need of a forensic interview, coordinated joint investigation, advocacy, and case review services were provided these services through the CAC and MDT. From August 2016 – December 2017 the three pilot CACs experienced the following growth in services:

- Forensic interviews increased to 69%.
- The number of victims and non-offending caregivers receiving victim/family advocacy services increased to 105%.
- The number of cases discussed at case review increased to 91%

The results of this pilot project have been staggering. MDCPS and CACM are in support of a continued roll-out of the project. To date, fourteen counties have rolled onto the program with plans to continue the project statewide. The results of the additional eleven counties have been equally impressive.

- **Chaplains for Children:** The Children’s Advocacy Centers of Mississippi, FamiliesFirst for MS, and MDCPS partnered to offer three (3) Chaplains for Children trainings in three (3) regions of the state. The first training prepared attendees to recognize and respond to cases of sexual abuse, physical abuse, emotional abuse, and neglect. Discussions were about the prevalence of child abuse, the impact of abuse on spirituality, the interest offenders have in churches and faith-based camps and schools, and suggestions for working to assist a child in coping with maltreatment. The training also discussed ideal child protection policies for a faith-based institution, including handling a situation in which a convicted sex offender seeks to join a congregation. Since that time, CACM has offered another four trainings across the state. Training topics included:
 - The impact of child abuse on a victim's sense of spirituality and concrete suggestions for working with medical and mental health professionals to assist a child in coping with maltreatment.
 - Ideal child protection policies for a faith-based institution, including handling a situation in which a convicted sex offender seeks to join a congregation.
 - Review of various child abuse case scenarios and appropriate and inappropriate responses.

- **Desoto Schools Pilot Project:** MDCPS, CACM, MDE, OAG, and the Desoto County School System partnered on developing a mandated reporter training for the schools. This training rolled out in November 2016. The hope was that this training would be expanded for schools across Mississippi.
- **Protection of the Forensic Interview:** For many years, Children's Advocacy Centers have experienced challenges with attorneys in criminal, civil, and juvenile court matters who formally or informally attempted to obtain forensic interview materials in video or documentary form. These are all possibly improper methods to obtain these confidential materials. Children's Advocacy Centers pulled together a committee of statewide stakeholders to assist with addressing these issues. MDCPS was a part of this committee and assisted with the development of proposed legislation to protect sensitive forensic interview material. After many years of work, the legislature finally passed legislation to assist in the protection of the forensic interviews. This legislation treats a forensic interview as it would any other youth court record.
- **One Loud Voice Conference Planning Committee:** Children's Advocacy Centers of Mississippi has just hosted the 6th Annual One Loud Voice: A Multidisciplinary Team Approach to Child Abuse Conference. The conference brings together disciplines charged with the responsibility of assessing, investigating, treating, and prosecuting child abuse cases in Mississippi. MDCPS is always a part of the planning committee for this conference and provides valuable input into the quality of the conference itself. MDCPS staff are often included as session speakers at the conference. Each year, CACM and the Children's Justice Task Force sponsor 40-50 MDCPS workers to attend this valuable training opportunity.
- **Child Advocacy Studies:** The Mississippi Child Advocacy Studies is an initiative to engage all Mississippi colleges, universities, and institutions of higher learning to improve the skills of our future workforce. It will allow for professionals who work in various fields of child advocacy and various community members to join forces by learning together about child maltreatment and needed community responses. Students are not prepared to identify, or report child abuse and neglect and they are not prepared in respective disciplines to fulfill their roles and responsibilities to protect children who are being harmed. Faculty members are not prepared to teach students the knowledge and skills they need to be engaged in child advocacy. Students, faculty, and stakeholders have not traditionally valued multidisciplinary work to create a safety net for children in our Mississippi communities. Students and professors are realizing how important it is for the protection of our children to learn to work as a team and be better prepared to respond to the complexities of maltreatment and crimes against children.

CACM rolled out this training through an initial partnership with MDCPS to colleges and universities across the state. This interdisciplinary program is intended to create a better prepared workforce for our state. As a part of this initiative, CACM partnered with the University of Missouri-St. Louis, which received a grant from the National Child Traumatic Stress Network through the Substance Abuse and Mental Health Service Administration to create a workforce that is capable and competent to respond to childhood trauma. The University of Missouri-St. Louis utilize a multidisciplinary approach by targeting collegiate programs in criminal justice, social work, law, medicine, education, sociology, and psychology to name a few. Additionally, this university targets newly hired professionals in the fields of child welfare, education, medicine, law enforcement. The grant will teach university and college professors and community partner/ state agency trainers to utilize Problem Based Learning Simulations in their classrooms and training courses. These simulations use real life experiences in classroom and training environments to teach trauma informed critical thinking skills to professionals in fields where they will meet abused and neglected children. The 5-year project is called FORECAST, and it will teach 5 simulations for agency professionals and Mississippi is also a beneficiary of this grant.

MDCPS sent one staff member from the Training Unit to the Project FORECAST training on February 21-23, 2018 and April 2-3, 2018. Other partner agencies consisted of the Mississippi Law Enforcement Training Academy, OAG, MDE, and DMH. An additional component of this training offered participants the ability to have one-year professional coaching from the University of St. Louis staff. This training allowed staff to have both the training and coaching calls with University of St. Louis staff to ensure they gained the necessary skills and can apply those skills to training new MDCPS employees.

- **Additional Trainings:**

- Twenty (20) MDCPS workers were sponsored by CACM to attend the Child First Forensic Interview and Court Preparation Training in 2017.
- In August 2017, CACM sponsored Human Trafficking training for MDCPS, law enforcement, and CACs to attend with over 59 MDCPS workers attending.
- To address the issue of the lack of child fatalities reported to MDCPS, CACM hosted two trainings in the state on “Responding to an Unexplained Child Death.” The trainings were open to MDCPS workers.

Child Abuse Prevention and Treatment Act (CAPTA) Collaboration

- **Children’s Justice Act (CJA) Grant-** Since October 2016, CACM became the designee to manage the CJA grant and task force. MDCPS had previously been designated lead agency

responsible for administering this grant and providing support services to the CJA Task Force. MDCPS and CACM collaborated on the transition of the Children's Justice Act Task Force from MDCPS to CACM. In August 2016, representatives from the task force, MDCPS, and CACM attended the national conference in Washington DC. MDCPS is serving on the task force in voting capacity as approved by the Governor's Office. CACM and MDCPS worked closely together on the CJA report and application which was submitted to ACF.

The CJA Grant has funded projects related to the development and enhancement of the Multi-Disciplinary Child Abuse Review Team Network (MDT) since 1999. This project was in response to the need for the CJA Grant in Mississippi to address in a more systemic manner the handling of child abuse cases. The multi-disciplinary teams provide a structure throughout the state for collaboration between MDCPS, law enforcement, legal, medical, child advocacy centers, and other community partners regarding investigations of child abuse and neglect.

The CJA task force meets on a quarterly basis on the first Friday of the first month of the quarter. The members continually provide oversight and management of the CJA grant. The task force and is a gubernatorial appointed multi-disciplinary group with primary responsibility for meeting the mandates of Section 107 of CAPTA. Each member was appointed based on the individual's experience and knowledge of the investigation and prosecution of child abuse.

- **Community Based Child Abuse Prevention (CBCAP) Initiatives**

- **Starkville Oktibbeha School District - Starkville Oktibbeha School District** - Starkville Oktibbeha School District Family Centered Programs has two (2) contractual agreements with MDCPS. These agreements consist of Project Care, which is funded by the state's CBCAP Grant, and Families Strengthening Families, which is funded by the Children's Trust Fund. Project Care provides child abuse and neglect prevention services to increase protective factors, including parental resilience, knowledge of parenting, social connections, concrete supports, and social and emotional competence in children of Oktibbeha County families. This is a two-tiered program focusing on parental educational and support services. Services include public awareness about child abuse and neglect prevention which includes identifying and reporting child abuse and neglect.

The Starkville Oktibbeha Consolidated School District subgrant through the Community Based Child Abuse Prevention Grant (CBCAP) provided for the continuation of their Emerson Family Resource Center activities. The program used the Active Parenting curriculum to provide parenting education on a weekly basis to

parents, grandparents, caregivers, and future parents. Temporary respite services were provided Monday– Thursday for children eight (8) weeks through five years old to allow parents time for doctor’s appointments, grocery shopping, adult education, job interviews, training, etc. Staff provided a home visiting program for families with pregnant mothers or families with newborn children. The program provided for support services and parenting education through the Nurturing Parenting curriculum. Additionally, education on child development, breastfeeding, and infant safe sleep were provided. Support Services, such as case management and support groups, were provided to families and parents. Public awareness activities go on throughout the year and consist of interactive activities, public educational opportunities, and radio and television. All these services provided a substantial and increased support to families needing assistance with childcare, parenting skills, concrete support in times of need, and referral services. Starkville Oktibbeha Consolidated School District provided a multitude of resources strengthening and supporting families in the areas served.

From July 1, 2018–March 31, 2019, CBCAP funds targeted intervention services were provided to the general population (346) and the high risk/disabilities population (241). There was a cumulative total of over 525 individuals that benefited from the parenting classed offered. These targeted interventions focused on high-risk families, including those affected by homelessness; adults who were victims of child abuse, neglect, or domestic violence; adults affected by substance abuse, poverty, or single-parenthood. Over 300 individuals participated in the Active Parenting classes and 144 participated in the numerous support groups. From July 1, 2018–April 22, 2019, Families Strengthening Families has conducted 248 Parent Café sessions. There was also a total of 6 Parent Café sessions completed and Parent Cafés are required to have 5 cafés conducted for completion.

On August 30-31, 2018, Starkville facilitated the ACT Raising Safe Kids Workshop in collaboration with Southern Christian Services. Mississippi State University offered continuing education units for those in attendance. The Division Director from MDCPS’ Prevention Unit was present for technical assistance. The MDCPS Prevention Unit plans to collaborate with MDH in coordinating an ACT Raising Safe Kids Workshop in July. This workshop will be facilitated in conjunction with Starkville Oktibbeha Consolidated School District.

- **Child Abuse Prevention and Treatment Act (CAPTA)/ Comprehensive Addiction and Recovery Act (CARA) Collaboration-** MDCPS continues to engage in collaboration by partnering with DMH, FamiliesFirst for Mississippi, and MS Department of Health to maintain the agency's CARA referral process and meet CAPTA and CARA requirements. CARA meetings involving the four partnering agencies were held on August 8, 2018, January 14, 2019, and April 30, 2019. Additionally, a CARA meeting was held on February 28, 2019 with DMH, representatives from each of the Community Mental Health Centers across the state, and other agencies certified to provide substance abuse services. The purpose of this meeting was to discuss possible ways to directly share referrals with these agencies. Currently, the referrals are routed through the central office of DMH. CARA education and outreach has also been provided to hospital staff in both the northern and southern regions of the state. CARA education and outreach is also coordinated through MDCPS county offices and staff have also reached out to medical staff within Labor and Deliver departments in hospitals. CARA coordinators received great participation from hospital staff in Region II- W and Region VII-C during this final reporting period. Guardians Ad Litem serving as Youth Court Personnel and members of Fetal Infant Mortality Review teams have also been provided CARA education. MDCPS also participated on a call with Delaware to learn about their response process for CARA. CARA coordinators and other representatives from MDCPS met with Social Work PRN who currently manages the child abuse reporting hotline in Mississippi. During this meeting, management and members of the Quality Assurance Team within the agency asked questions about the screening process for CARA referrals and any additional questions they had. The current CARA coordinators provide education and outreach in areas of the state as requested.

- **Child Abuse Prevention and Treatment Act (CAPTA)/Citizen's Review Panels**
 - **Mississippi Children's Trust Fund Advisory Council-** The Children's Trust Fund (CTF) of Mississippi provided financial assistance in the provision of direct services, such as educational programs, community awareness, program development, and advocacy, to prevent child abuse and neglect. During the 2018 period under review, the council generally meet four (4) times in a calendar year. The ten (10) member advisory council, which authorizes the disbursement of money from the fund, made recommendations for changes in the state's statutes, policies and standards. The council improves coordination among state agencies providing prevention services and provides for statewide expansion of programs delivering preventive services. MDCPS is the lead agency and is responsible to the Mississippi Legislature for the CTF Advisory Council. There are currently two (2) vacancies on the CTF Advisory Council for Congressional District 1. The Advisory Council will continue to

recommend these positions be filled. Final approval will be given by the Commissioner of MDCPS.

- **Teen Advisory Board** – MDCPS continues to engage youth in the YTSS program design, policy changes and or updates through the monthly and quarterly state level meetings. As of 05/09/2019, YTSS has eight (8) Teen Advisory Boards served by Transition Navigators. Advisory board activities are held in a central location to allow participation from other regions served by the Transition Navigator. A \$25.00 Stipend can be earned for participation in scheduled TAB activities.
- **Mississippi Child Death Review Panel**- Mississippi law creates the Mississippi “Child Death Review Panel, whose primary purpose is to foster the reduction of infant and child mortality and morbidity in Mississippi and to improve the health status of infants and children. The panel’s membership consists of “one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General’s office, the State Sheriff’s Association, the Mississippi Police Chiefs Association, MDCPS, CAC, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children’s Safe Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal’s office. Each year the panel is tasked with creating a report for the Mississippi Legislature outlining “appropriate recommendations to the Legislature on how to most effectively direct state resources to decrease infant and child deaths in Mississippi.

Collaboration with Faith Based and Community Based Stakeholders

Faith Based and Volunteer Services- The Office of Therapeutic Services created the Bureau of Faith Based and Volunteer Services on August 1, 2017. As of March 1, 2018, the Bureau was restructured to provide administrative oversight to the Division of Prevention and Protection and the Interpreter Services Unit. The Bureau of Faith Based and Volunteer Services provides awareness to multi-faith churches and local communities regarding foster and adoptive needs within the foster care system. Awareness areas consist of the following:

- Prevention Services
- Foster Family Recruitment
- Heart Gallery
- Encourage Foster Care Support/Ministry
- Oversee and Coordinate Foster and Adoptive Parent Support Groups

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During the final period of review, the Director continued to engage local churches and communities in regions 3-N, 3-S, 4-S, 5-E, 5-W, 6, 7-E, 7-C, and 7-W. The focus of these meetings was increasing community awareness about the critical need for foster homes, resources for foster families, birth families, and children in custody. Frontline staff in regions were also assisted with physical and basic needs of families and children. These basic items included: beds, mattresses, car seats, and cribs. Additionally, the Director maintains, and schedules foster parent support groups across the state. There are currently thirty-nine (39) foster parent support groups across the state. The current breakdown consists of the following by region: I-N – 4, I-S – 2, II-E – 3, II-W – 3, III-N – 2, IIIS – 2, IV-N – 4, IV-S – 3, V-E – 3, V-W – 4, VI – 3, VII-E – 1, VII-C – 4, and VII-W – 1. Scheduling and notification of support group meetings is done via email. Licensure, Permanency Support Services, and partnering therapeutic foster care agencies are also notified of the scheduled foster parent support group meetings. Sign in sheets are collected and distributed to licensure staff in each region.

During the first quarter, foster parent support groups were led by the director in the following counties across the state: Lauderdale, Yazoo, Oktibbeha, and Marion. Backpacks filled with personal hygiene items were distributed to regions IV-N and V-E. Additionally, presentations were made to the Rotary Club of Bay Springs, Kiwanis Club of Gulfport, Rotary Club of Brookhaven, Harrison and Jefferson Davis Counties, and the Lions Club of Yazoo. More backpack donations were picked up from the law firm of Anderson, Crawley, and Burke in Ridgeland, Ms. In the second quarter, presentations were done at the Kiwanis Club of Biloxi, Capital Area Sunset Rotary Club in Ridgeland, Rotary Club of Gulfport-Orange Grove and Biloxi, Ellisville United Methodist Church, Clinton Rotary Club, Hub City Kiwanis Club in Hattiesburg, Natchez Kiwanis Club, South Hinds County Rotary Club, Hazlehurst Lions Club, Rotary Club of Columbia, Poplarville Kiwanis Club, and the Rankin County Rotary Club.

A meeting was also held with DOM to seek participation in future presentations regarding foster care health care coverage. This helped to continue the education and training of foster parents. Backpacks were also distributed in Harrison and Perry Counties. Additionally, the Director met internally with state office staff to discuss the implementation of the CarePortal in Regions III-N and III-S. Presently, the implementation of the CarePortal has been postponed due to the unavailability of funding. More presentations were provided to Pastors in the Jackson County Baptist Association, Hope Fellowship Church in Brandon, the Downtown Optimist Club in Meridian, the Madison County Rotary Club, the Governor's Faith-Based Council, the Lutheran Church of the Good Shepherd in Biloxi, Pastor Sean Wilkinson of First Baptist Church of Helena, Ronnie Crudup Jr. of New Horizon Ministries of Jackson, Lee Watson with CompaCare in MS, Glynn Chambers Karleigh Wagner with Sunnybrook Children's Home, and Kelly Williams a Parent Representative. Presentations were also made to the Exchange Club of Picayune and more donated backpacks were received and distributed to regions I-S, II-W, & IV-S. Generous

donations of backpacks filled with hygiene items were also received from Clear Branch Baptist Church in Florence. These backpacks were delivered to Region III-S for distribution to children who come into care.

In January 2019, more presentations were made to Exchange Club of McComb, Optimist Club of Jackson, Rotary Club of South Rankin County, Woody Rimes, and Jameson Taylor who both serve on the Governor's Faith-Based Council. In February 2019, presentations were made to West Jackson Rotary Club, Forest Rotary Club, North Jackson Rotary Club, Rotary Club of Picayune, Jay Bonner with Cedar Lake Church in Biloxi, and Dan Estes with Church of the King in Biloxi. The Director also received a generous donation of backpacks from the Junior Auxiliary of Madison County. During the month of March 2019, presentations were made to Sunrise Rotary Club in Hattiesburg, Frank Laws with Belhaven University, Brian Gault with Redeemer Church, Thomas and Brandy Black with Jackson First Church, and Shannon Willis with Harvest Ministries and Columbia Strong. More backpack donations were distributed to regions 1-N, 1-S, 2-E, 4-N, and 4-S. Lastly, in the month of April 2019, meetings were held with MDCPS Prevention staff, Youth Villages, and Canopy about the In-Circle program.

Non- Governmental Organizations (NGO)

- **FamiliesFirst for Mississippi** – Families First for Mississippi is a collaborative effort of two nonprofit entities funded by MDHS to operate family resource centers across Mississippi. MDCPS collaborates with FamiliesFirst to develop and provide training to MDCPS caseworkers on the services available through the resource centers and how those services can be accessed for children and families served by MDCPS. Family First for Mississippi is also currently facilitating contracted provider of the MS PATH training to potential resource parents. Families First provides family life skills classes which include parenting education, healthy relationship educations, life skills, soft skills, drug education classes, youth development, support groups for resource parents and conflict resolution in addition to a co-parent education class. These classes are also provided to help resource parents receive recertification hours for their license.
- **Southern Christian Services for Children and Youth (SCSCY)** – Southern Christian Services for Children and Youth (SCSY) entered into a contractual agreement with MDCPS to provide and support coordinated community-based efforts to develop, operate, enhance, and where appropriate, network initiatives aimed at prevention of child abuse and neglect. To date, there have been 1,053 parents served in Parenting Classes. In February 2019, there were 6 parents who successfully completed the 8-week ACT Raising Safe Kids Program parenting class. Harbor House Chemical Dependency Services and Born Free Residential Treatment Program had a total of 17 parents complete parenting classes; Born Free had 2

mothers and Harbor House had 8 fathers and 7 mothers. Parents have been educated on the concept of protective factors which are the ingredients of a healthy family. Participating parents have learned how to be strong and flexible (Resilience), understand parents need friends (Social Connections) understand everyone needs help at time (Concrete Support In Time of Need), being a parent is part natural and part learned (Knowledge of Parenting and Child Development), and parents need to help their children communicate (Social/Emotional Competence of Children) through educational topics.

SCSCY has expanded prevention services to the Central Mississippi Correctional Facility. Currently, there are two (2) classes for mothers 22 green stripes and 25 red stripe mothers. The stripes are based on behavior assessments which mean the following: red stripes indicate high/risk threatening, green-medium risk behavior, and black good behavior. Both classes started the 8-week ACT Raising Safe Kids Curriculum on April 9, 2019. SCSY have conducted Parent Café's serving 33 parents. SCSY has expressed concerns of barriers for the prevention program. A potential barrier at Harbor House is it has two phases: phase I is a 30-day residential stay and phase II a 60-day transitional stay. Individuals in Phase I will only be able to participate in 4 to 5 sessions; however, in these few sessions' parents are still gaining some knowledge of parenting skills and introduction to protective factors. Phase II participants complete parenting curriculum to entirety. A potential barrier at Central MS Correctional Facility is unpredictable attendance from session to session due to change in release date, transfer to other facilities, and jail policies (lock down; commissary hours); however, at this time there have been no issues.

- **Baptist Children's Village-Dorcas In-Home Family Support Program** - The Dorcas In-Home Family Support Program continues to provide services to families within MDCPS. This is a time-limited support program offering a six (6) month initial course of care with one three (3) month extension, provided progress is sufficient to make established goals attainable in that time frame. One goal of the program is to provide family-driven, youth-guided interventions to improve the stability of enrolled families. The program further seeks to improve enrolled families' ability to provide adequate care for the children they are responsible for. These interventions increase families' access to and utilization of community resources and assistance. Another goal is to reduce the likelihood of removal or other disruption of their living arrangement. The primary function is to facilitate the ability of enrolled families to provide for the safety, permanence, and well-being of their children. The Dorcas program is not a contractual service and MDCPS does not provide funding to Baptist Children's Village (BCV). BCV does not charge any fees for its Dorcas Program services; however, community service providers may charge fees based on the family's household income or enrollment and participation in public assistance programs

intended for such purposes. BCV's Dorcas Program serves Region I-South, II-E, II-W, III-North, and III-South. There were 150 children and 91 adults served through this program. The current data is an increase in the previous year's numbers of 32 cases. The number of children served also increased by 41% from last years, 89 children served. The Dorcas program is expected to serve at least 45 families during this fiscal year.

III. UPDATE ON ASSESSMENT OF PERFORMANCE

This section describes the State's assessment of its performance on child and family outcomes and the agency's systemic factors, including reliable and relevant data on its performance on each of the seven CFSR outcomes and systemic factors.

A. ASSESMENT OF THE SEVEN (7) CHILD AND FAMILY SERVICE REVIEW (CFSR) OUTCOMES

Due to the demands of the Olivia Y Lawsuit's Modified Settlement Agreement (MSA) and Stipulated Third Remedial Order (STRO), the Evaluation and Monitoring Unit, which was one of the primary sources of information for the items below, was temporarily deferred from completing the annual regional on-site case reviews in order to provide continuous quality improvement services in other areas of child welfare practice. As a result of this, the data that will be provided from the Evaluation and Monitoring Unit (EMU) items will be indicative of cases reviewed between September 1, 2017 and May 31, 2018. Since September 2017, the Mississippi Department of Child Protection Services' Evaluation and Monitoring Unit have been conducting regional baseline case reviews utilizing the federal On-Site Review Instrument (OSRI). The use of the Evaluation and Monitoring automated review tool that had been in use from June 2010 to March 2017 was discontinued. Data from the Evaluation and Monitoring instrument is included below but will not be used to determine improvements due to the differences in the two instruments. Instead, the information from the Evaluation and Monitoring instrument will be used in an effort to reflect indications of progress in case practice. The regional reviews utilizing the OSRI have been conducted (to date) in Regions 3-South (includes 2018 CFSR site Hinds County), 4-South, 3-North, 4-North, 5-East, 7-Central (includes 2018 2018 CFSR site Harrison County), 1-South (includes 2018 CFSR sites Pontotoc County and Union County), 2-West, 5-West, and 7-East. These case reviews included 14 foster care and 28 in-home case types (42 total cases) at the time of each review in each region.

- Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect;
- Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate;
- Permanency Outcome 1: Children have permanency and stability in their living situations;
- Permanency Outcome 2: The continuity of family relationships and connections is preserved for children;

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- Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs;
- Well-Being Outcome 2: Children receive appropriate services to meet their educational needs;
- Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

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

Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 54.26% of the cases reviewed rated Substantially Achieved for Safety Outcome 1.

a. **Item 1: Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes?**

Response: Item 1: Timeliness of initiating investigations of reports of child maltreatment: June 2018 – May 2019, 54.26% of 188 applicable cases rated a strength. Reasons for delays in initiation of investigations or assessments and/or face-to-face contact were due to circumstances beyond the control of the agency. Strength indicates the investigations into the reports of maltreatment were initiated in accordance with MDCPS timeframes and requirements for a report of that priority and that face-to-face contact was made with the child(ren) who are the subject of the report was made in accordance with the State's timeframes and requirements for a report of that priority.

Item 1 Report Data Response: MSA data: Timeliness of Investigations for Custody Children: For Quarter 1 2019 (January – March), 99.31% of the investigations of maltreatment in care were initiated timely and approved timely. All reports of maltreatment in care are investigated by a specialized group of staff in the special investigation unit. These reports are initiated within 24 hours of receipt. This structure was determined by the *Olivia Y.* settlement agreement and has proved to be beneficial in that the staff in the unit does not have an ongoing relationship to the case, beyond the investigation, and it allows for a dedicated set of skills to be employed to assess the allegations of maltreatment. Regarding maltreatment in care, Mississippi's data profile for 16AB, FY16 shows 19.66 victimizations per 100,000 days in care against a National Performance of 9.67 and a recurrence of maltreatment of 12.8% for FY16-17 against a National Performance of 9.5%. These data indicators show a need for improvement in this area for the state. Presently, the case review data, MACWIS data, and the state's data profile indicate an area needing improvement in the area of initiating reports of child maltreatment.

2. **Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate.** Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 58.6% of the cases reviewed rated Substantially Achieved for Safety Outcome 2.
 - a. **Item 2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care:** June 2018 – May 2019 utilizing the federal OSRI shows 68.32% of the 101 applicable cases reviewed rated a strength for this item. This item looks at concerted efforts to provide or arrange for appropriate services to the family to protect children and prevent their entry into foster care or re-entry into foster care after a reunification and if removal was necessary to ensure the child's safety if the child was removed without providing or arranging for services.

Item 2 Report Data Response: Mississippi's data profile for 16A-18B reflects a foster care re-entry rate of 4.9% against a National Performance of 8.1%. This data indicator reflects a strength in this area for the state. Case review data and the state's data profile indicate a strength for the area of providing services to families to protect children in the home and prevent removal or re-entry into foster care.
 - b. **Item 3: Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child (ren) in their own homes or while in foster care?**

Response: Item 3: Risk and Safety Assessment and Management: June 2018 – May 2019, utilizing the federal OSRI shows 58.89% of the 343 applicable cases rated a strength for this item. A strength rating indicates that safety and risk were assessed timely initially and on an on-going basis throughout the review period. Risk assessments are qualitatively assessed by reviewers for their timeliness and content, as well as whether or not ongoing assessments (either formal or informal) were made during the review period. This is an area of practice the state needs to strengthen.
3. **Permanency Outcome 1: Children have permanency and stability in their living situations.** Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 23.6% of the 161 applicable cases reviewed rated Substantially Achieved for Permanency Outcome 1.
 - a. **Item 4: Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)?**

Response: Item 4: Stability of Foster Care Placement: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 77.02% of the 161 applicable cases rated a strength for this item. A strength indicates if there was more than one placement, all placement changes during the review period were planned by the agency in an effort to achieve the child’s case plan goals or made in an effort to meet the needs of the child, the child’s placement is stable, the child placement meets their needs for therapeutic, educational, and medical needs if they’ve been assessed with special needs, and the child’s placement is least restrictive.

Item 4 Report Data Response: Mississippi’s data profile for 18A-18B reflects a performance of 3.82 moves which is below the National Performance of 4.44 moves for Placement Stability and represents a strength. Case review data and information from the state’s data profile related to this item reflects this is a strength for the state in that children are remaining in the same least restrictive placement during their episodes in foster care or, if there was more than one placement, all placement changes during the review period were planned by the agency in an effort to achieve the child’s case plan goals or made in an effort to meet the identified needs of the child. MDCPS relates this performance to the practice of seeking out and licensing relatives within 90 days of the initial engagement along with and assessing and addressing any needs identified.

b. Item 5: Did the agency establish appropriate permanency goals for the child in a timely manner?

Response: Item 5: Permanency goal for child: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 49.07% of the 139 applicable cases rated a strength. A strength indicates that the child has a permanency goal specified in the case file and that the plan was developed timely.

c. Item 6: Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child?

Response: Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 40.99% of the 161 applicable cases rated a strength for this item. Of the children in foster care with a permanency goal of Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement, their case rated a strength if the agency and the court are making concerted efforts to achieve the goal in a timely manner, the parental service plans identify services MDCPS deems necessary to address behaviors or conditions resulting in the child’s placement in foster care, if the agency made those services

available through direct or indirect referral. Additionally, data from foster care review used to monitor a provision in the 2nd MSA for January 2019 – March 2019 shows performance on the timeliness of development of the initial FSP along with timeframes and activities to achieve the goal rated as 71% (n=107). The data profile indicated that for the 16A-18B period, permanency within 12 months was 41.0% against a 42.7% national performance. Permanency within 12-23 months (18A-18B) rated as 45.0% against national performance of 45.9%; suggesting the need for an increase and permanency within 24 months or more rated as 31.5% against a 31.8% for the same time period.

4. Permanency Outcome 2: The continuity of family relationships and connections is preserved for children. Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 50.63% of the cases reviewed rated Substantially Achieved for Permanency Outcome 2.

a. Item 7: Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?

Response: Item 7: Placement with Siblings: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 86.92% of 107 applicable cases rated a strength for this item. A strength is evident when children in foster care are placed with all siblings who are in foster care or, if not, there is a valid reason for the child's separation from siblings such as the separation was necessary to meet the needs of one of the siblings or to accommodate a large sibling group.

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

Response: Item 8: Visiting with parents and siblings in foster care: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 48.06% of the 129 applicable cases rated a strength for this item. A strength is identified when visits between the child, parents, and separated siblings in foster care are of a frequency and quality to maintain or promote the continuity of the relationship.

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

Response Item 9: Preserving Connections: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 75.16% of the 157 applicable cases rated a strength for this item. In rating a strength, there is evidence that concerted efforts were made to maintain the child’s important connections to their neighborhood, community, faith, extended family, Tribe, school, and friends. This item also measures if ICWA inquiries were made and actions were taken in the event the child is found to be of Native American ancestry.

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

Response: Item 10: Relative placement: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 67.33% of the 150 applicable cases rated a strength. A strength is evident when the child’s current or most recent placement is with a relative and the placement is stable. If the child is not placed with a relative, efforts to identify, locate, and evaluate maternal and paternal relatives were made before being ruled out as, or were unwilling to be, placement resources. Relative placements are preferred over any other facility type and considerations for the needs of the child. Data from foster care reviews used to monitor provision of the 2nd MSA shows that 96% (n=690) of the cases reviewed, children were in placements that meet their needs and 98% (n=704) were in the least restrictive placement setting.

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

Response: Item 11: Relationship of Child in Care with Parents: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 30.77% of the 104 applicable cases rated a strength. This item rates a strength when there is evidence of concerted efforts to promote, support, and maintain positive relationships for the child in foster care with his mother and father (or other primary caregivers) when safe and appropriate to do so based on case circumstances such as through shared parenting responsibilities between the birth parent and the resource parent. Case review data reflects this as an area needing improvement as more efforts need to be made for shared parenting when safe and appropriate to do so.

5. Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs. Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 20.41% of the cases reviewed rated Substantially Achieved for Well-Being Outcome 1.

- a. **Item 12: Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?**

Response: Item 12 (Overall): Needs and Services of Child, Parents, and Foster Parents:

Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 24.78% of the 343 applicable cases rated a strength. A strength for this item is evident when the strengths and needs of the child, the parents, and the resource parents are assessed formally and/or informally on an initial basis as well as on an on-going basis and that services are provided a timely manner to meet any identified needs. Case review data for this item reflects an area of needed improvement especially in the area of assessing the strengths and needs of children and parents.

Response: Item 12 (Section A): Needs and Services of Child, Parents, and Foster Parents: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 57.43% of 343 applicable cases rated a strength.

Response: Item 12 (Section B): Needs and Services of Child, Parents, and Foster Parents: Case review date from June 2018 – May 2019 utilizing the federal OSRI shows 24.27% of the 309 applicable cases rated a strength.

Response: Item 12 (Section C): Needs and Services of Child, Parents, and Foster Parents: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 78.52% of 149 applicable cases rated a strength.

- b. **Item 13: Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?**

Response: Item 13: Child and family involvement in case planning: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 36.31% of the 325 applicable cases rated a strength for this item. This item is rated a strength when there is evidence concerted efforts were made to involve children and their parents in the case planning process.

- c. **Item 14: Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?**

Response: Item 14: Caseworker visits with child: Case review date from June 2018 – May 2019 utilizing the federal OSRI shows 67.67% of the 343 applicable cases rated a strength for this item. A strength indicates that children were seen, face-to-face, and

the contacts were of a frequency and of quality to address issues pertaining to safety, permanency, and well-being. Foster care review data, used to measure a provision of the 2nd MSA, shows that 85% of the applicable 611 cases reviewed between January and March 2019 were of quality and required frequency to rate as a strength.

- d. Item 15: Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?**

Response: Item 15: Caseworker visits with parents: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 30.2% of the 298 applicable cases rated a strength. A strength indicates that parents (mother and father) were seen, face-to-face, and the contacts were of a frequency and a quality to address issues pertaining to safety, permanency, and well-being of the child and promote the achievement of case plan goals and to assess service delivery. This is an area needing improvement. Foster care review data used to monitor a provision in the 2nd MSA shows that for the period January 2019 – March 2019, the quality of contacts with mother rated as 47% (n=152) and quality of contacts with father rated as 32% (n=78).

- 6. Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.** Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 70.22% of the 178 applicable cases reviewed rated Substantially Achieved for Well-Being Outcome 2.

- a. Item 16: Did the agency make concerted efforts to assess children’s educational needs, and appropriately address identified needs in case planning and case management activities?**

Response: Item 16: Educational Needs of the Child: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 70.22% of the 178 applicable cases rated a strength for this item. Cases where the child’s educational needs were assessed initially and on-going and services were provided to meet their identified educational needs rated a strength. Also, this item rated as a strength.

- 7. Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.** Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 42.34% of the 274 applicable cases reviewed rated Substantially Achieved for Well-Being Outcome 3.

a. Item 17: Did the agency address the physical health needs of children, including dental health needs?

Response: Item 17: Physical Health of the Child: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 58.69% of the 213 applicable cases rated a strength for this item. This item rated a strength if the child’s physical health and dental health were assessed in a timely manner (initially and on-going) and timely services were provided to meet the child’s identified needs.

b. Item 18: Did the agency address the mental/behavioral health needs of children?

Response: Item 18: Mental/Behavioral Health of the Child: Case review data from June 2018 – May 2019 utilizing the federal OSRI shows 47.12% of the 191 applicable cases rated a strength for this item. Cases rated a strength if the child’s mental health needs were assessed initially and on-going and services were provided to meet those identified needs.

B. STATE’S ASSESSMENT OF THE SEVEN (7) SYSTEMIC FACTORS

1. Statewide Information System

Item 19: Statewide Information System- How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

MACWIS is still the statewide information system that is available for staff to input the status, demographic characteristics, location, and goals for the placement of every child who is in foster care. Information is required to be entered in MACWIS within 5-7 days, depending on the type of information. Data entry timeframes vary based on the policy surrounding the item in question. During the period under review changes were made to seven (7) modules to facilitate easier navigation, these updates consist of the following:

Findings from the 2018 CFSR noted that MDCPS was not in substantial conformity with this systemic factor due to varied timeliness of data entry particularly for current placement information even though MDCPS demonstrated that the data was readily available. During stakeholder interviews, it was also shared that caseworker understanding of the elements, workload and turnover contributed to timeliness concerns. MDCPS is currently engaged with the Children’s Bureau to finalize all plans to procure a CCWIS (Comprehensive Child Welfare Information System). Caseloads and

caseworker turnover are addressed in detail in the 2020-2024 Child and Family Service Plan(CFSP).

Mississippi Youth Court Information Delivery System (MYCIDS)- MDCPS continues to utilize MYCIDS as an additional statewide information system. As stated, MYCIDS is the statewide system for real time management of the activities of the Mississippi Youth Court System. Currently, all 82 counties are using MYCIDS and there is no longer a municipal court. AOC and MDCPS ITS department conducted several meetings during the period under review to have the discussions for automating the transfer of data between MACWIS and MYCIDS. The automated interface would enable workers to better meet required reporting timeframes for both systems.

From July 1, 2018 through May 2019, AOC has also provided 33 training sessions to MDCPS workers that were 1.5 hours each within 76 counties. Data input for MYCIDS continue to be the following staff:

- For delinquency cases, information is input by the DYS worker or Intake Officer.
- For truancy and educational neglect, information is input by the School Attendance Officer or Intake Officer.
- For abuse and neglect cases, the MDCPS social worker begins inputting data within 24 hours of the initial investigation and has to submit a completed report within 30 days to the court and the court designee.

2. Case Review System

a. **Item 20: Written Case Plan-How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?**

Family engagement is an ongoing process of involving the family from the initial investigation throughout the life of the case. The caseworker must engage the family, extended family members, and formal and informal support networks through Family Team Meetings. The family should be considered as the experts of their situation and should identify the problems and solutions to these problems with the assistance of the caseworker and their formal and informal support systems. The caseworker will work with the family to develop a Family Service Plan, listing tasks and goals in need of achievement to facilitate the goals of the plan.

MDCPS Foster Care policy (Section D, pages 60-61) states, "To meet the case plan requirements of 42 U.S.C. 675, §§ 471(a)(16), 475(1), 475(5)(A), (D), (H), 475A the following are criteria to help determine the appropriateness of and necessity for placement of a child. The case plan for each child is a written document which is a

discrete part of the case record and which is developed jointly with the parent(s)/ guardian(s) of the child.” To meet the case plan requirements of 42 U.S.C. 675, §§ 471(a)(16), 475(1), 475(5)(A), (D), (H), 475A the following are criteria to help determine the appropriateness of and necessity for placement of a child. The case plan for each child:

- Is a written document which is a discrete part of the case record and which is developed jointly with the parent(s)/ guardian(s) of the child;
- Is developed within thirty (30) calendar days from the date of removal from the home.
- Includes a description of the services offered and provided to prevent removal of the child from the home and to reunify the family;
- Includes a description of the type of home or institution in which the child is placed;
- Includes a discussion of the safety and appropriateness of the placement and how MDCPS will carry out the judicial determination made with respect to the child, in accordance with § 472(a)(2)(A) [42 U.S.C. 675]
- Includes a plan for assuring that the child receives safe and proper care and that services are provided to the parent(s), child and foster parents in order to facilitate the child’s return to his/her own safe home or for the permanent placement of the child;
- Includes a plan for assuring that services are provided to the child and foster parents in order to address the needs of the child while in foster care;
- Includes a discussion of the appropriateness of the services that have been provided to the child under the plan;
- Where appropriate for a child 14 or over, includes a written description of the programs and services to help the child prepare for the transition from foster care to successful adulthood. With respect to a child who has attained 14 years of age, any revision or addition to the plan must be developed in consultation with the child and, at the option of the child, with up to 2 members of the case planning team who are chosen by the child and who are not a foster parent of, or caseworker for, the child. A State/Tribal agency may reject an individual selected by a child to be a member of the case planning team at any time if the agency has good cause to believe that the individual would not act in the best interests of the child. One individual selected by a child to be a member of the

child's case planning team may be designated to be the child's advisor and as necessary, advocate, with respect to the application of the reasonable and prudent parent standard to the child.

- 90-day period immediately prior to the child's 18th birthday, or such greater age as the state may elect under section 475(8)(B)(iii), whether during that period foster care maintenance payments are being made on the child's behalf or the child is receiving benefits or services under § 477, the caseworker provides the child with assistance and support in developing a transition plan that is personalized and includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services, and is as detailed as needed; and
- Includes information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under State/Tribal law to make such decisions, and;
- Provides the child with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under State/Tribal law, and is as detailed as the child may elect.
- Documents the steps to finalize a placement when the case plan goal is or becomes adoption or placement in another permanent home in accordance with §§ 475(1)(E),(5)(E)and 475A(a)(1).
- When the case plan goal is adoption, at a minimum such documentation shall include child- specific recruitment efforts such as the use of tribal, state, regional, and national adoption exchanges including electronic exchange systems to facilitate orderly and timely placements.
- (see 45 CFR 1356.21(g)(1)(2) and (4); 42 U.S.C. 675 §§ 475(1)(A)(B)(D) and 475(5)(H)

Data from the 2018 CFSR found that this was an area needing improved. Information in the statewide assessment showed that although the Family Team Meeting process is used to develop case plans, it does not effectively ensure that parents are engaged in the development of initial and ongoing case plans. Results of a recent statewide case review found that parents were engaged in case planning in a little more than 40% of the cases. The results also showed that a little more than half of mothers and less than half of fathers were actively engaged in case planning. These findings are

also in line with data collected through foster care review from January 2019 – March 2019 used to monitor 2nd MSA provisions. Those data found that 50% of FSPs were developed jointly with the parents, child, caseworker and foster care provider.

- b. Item 21: Periodic Reviews-How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?**

Mississippi has a designated Youth Court Judge or referee for every county within the state. The youth courts are responsible for the oversight of every child that enters state custody. Many of the courts hold a hearing and issue a resulting court order at six and twelve months after the date of custody. Mississippi's Department of Child Protection Services administers periodic reviews for all children who remain in the custody of the state within every six months. The periodic review is referred to in Mississippi as the County Conference. A report is submitted to the Youth Court as a result of each periodic review. That report is entitled "Youth Court Hearing and Review Summary" and it includes the periodic review information as well as other state and federal mandated determinations. The Youth Court can adopt the periodic review and issue a judicial finding. The Foster Care Review Unit is responsible for conducting the periodic review process. Foster Care Review is a subdivision of the larger Continuous Quality Improvement Unit. Oversight of the program, including territory assignments fall under the duties of the Foster Care Review Director. To ensure all children receive a timely review, the FCR Director maintains data to inform of all children who enters and exits custody to ensure the timely completion of the 6-month review.

During the 2018 CFPSR, Item 21 rated as a strength. The case review system is functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review. This systemic factor rating was based on information provided during the statewide assessment. MDCPS continues this case review process.

- c. Item 22: Permanency Hearings-How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?**

MDCPS has had challenges in ensuring that permanency hearings are occurring as required. The agency has and continues to collaborate with the AOC (Administrative Office of Courts), the Jurists in Residence, and local youth court judges in sharing data around timely hearings. Court engagement and collaboration is discussed in detail in the CFSR PIP. Results from a qualitative review conducted for the period January 2019 – March 2019 by the foster care review staff for 2nd MSA monitoring found that 87% (n= 480) of the applicable cases rated as compliant. A child's permanency plan shall be reviewed in a court or administrative case review at least every six months. Foster care reviews shall satisfy this administrative case review requirement. MDCPS will take all reasonable steps, including written notice, to ensure the participation of the child, parents, caregivers, and relevant professionals in court or administrative reviews.

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

Results from a qualitative review conducted for the period January 2019 – March 2019 by the permanency support unit for 2nd MSA monitoring reporting found that 37.97% of the applicable cases rated as compliant. A termination of parental rights (TPR) referral shall be made on behalf of a child before the child has spent more than 17 of the last 22 months in foster care unless an available exception pursuant to the federal Adoption and Safe Families Act ("ASFA") has been documented by MDCPS in the child's case record. Subsequent to the initial ASFA exception, MDCPS may continue the exception for only one additional six-month period unless continued invocation of the exception is reviewed, approved and documented semi-annually by the RD assigned to the county of responsibility for the child.

This quality assurance process has been established within the permanency support unit as part of the *Olivia Y.* CQI plan to ensure proper tracking, reporting and accountability to the relevant 2nd MSA provision. MDPS details a process of leveraging timely termination of parental rights through court engagement and collaboration to ensure timely permanency for all children in care in the CFSR PIP. As of 04/17/2019, 86.39% of children in care for 15 of the most recent 22 months had a request for TPR initiated by their social worker or an ASFA exception recorded. 42.51% of children in care for 17 of the most recent 22 months had their TPR request submitted to the Mississippi Attorney General. 35.99% of children in care for 17 of the most recent 22 months had an ASFA exception recorded.

MDCPS Termination of Parental Rights Process:

STATE OF MISSISSIPPI: 2015-2019 CFSP FINAL REPORT

<p>A TPR referral may be initiated for 1 of 5 reasons:</p> <ul style="list-style-type: none"> • when a child under 3 has been in custody 6 months, primary caretaker has not complied with the family service plan, and there are no compelling reasons to extend the 6-month timeframe • when a child of any age has been in foster care 15 of the most recent 22 months • when a court has determined a child to be abandoned infant • when a parent has been convicted of rape, sexual battery, touching for lustful purposes, etc. • when a court of jurisdiction orders MDCPS to proceed with TPR 	
<p>When either of the aforementioned conditions exist, a recommendation is made to youth court in the permanency hearing. If the judge agrees with TPR recommendation, the child's permanent plan is changed to Adoption, and TPR is ordered.</p>	<p>timeframes vary depending on the situation that warranted TPR</p>
<p>The TPR Packet/Request is initiated and submitted to PSS/TPR Unit at State Office.</p>	<p>within 30 calendar days of the permanent plan becoming Adoption</p>
<p>The TPR Packet is received/reviewed in PSS/TPR Unit, and either 1) the packet is forwarded to the AG's office for processing or 2) or additional information is requested to address deficiencies in the packet. If there are no deficiencies identified, the TPR packet is forwarded to the AG's office.</p>	<p>within 5 business days of receiving the packet in PSS/TPR Unit</p>
<p>The AG's Office reviews the packet and either 1) files a petition for TPR or 2) notifies PSS/TPR Unit of legal deficiencies with the packet.</p>	<p>within 30 calendar days of PSS/TPR Unit submitting the packet to the AG's office</p>
<p>Once the petition has been filed, the AG's office requests a court hearing date.</p>	<p>timeframes vary from county to county</p>

After the court hearing is held, the AG’s office provides PSS/TPR Unit with the judgment terminating parental rights.	timeframes due to judgments not being readily available in some counties
Once judgment is received, PSS/TPR Unit requests a legal clearance from the AG’s office.	within 3 business days of receiving the judgment in PSS/TPR Unit
The legal clearance is sent to the PSS/TPR Unit and distributed to adoption and frontline staff.	timeframes vary, usually within 10 business days

Disposition of Children in Custody 15 of 22 Months:

In comparison, of all children in custody on 04/17/2019, of those children who had been in custody at least 15 of the past 22 months, 42.25% have had a TPR Packet submitted by the social worker seeking termination of parental rights, 38.06% have not had a TPR packet submitted but do have an ASFA Exception recorded in the case file, and 19.68% have not had a TPR packet submitted and do not have an ASFA Exception recorded in the case file.

Recent Events Impacting Termination of Parental Rights:

MDCPS operated under existing Termination of Parental Rights (TPR) statute since 2007. House Bill 1240- 2016 Regular Session changed existing statutes extensively. Changes included the process, grounds for termination, forms, and the court in some instances. Additionally, there was no stipulation for retroactivity. HB 1240 became law immediately upon Governor’s signature, and it essentially halted all TPR activity that was in-process at that time. Due to concerns voiced by attorneys, judges, MDCPS, and families, Senate Bill 2342 - 2017 Regular Session was passed and signed into law. This bill opened avenues that were closed by HB 1240 to move children to TPR. As a direct result of the amended statute, both Court and MDCPS systems have been overwhelmed by the influx of TPR cases that need to be processed and heard. As of August 2017, MDCPS had approximately 1500 children with a permanent plan of Adoption, pending TPR. As of May 2019, this number has decreased to 1151. In efforts to manage, monitor, and ensure movement of these cases, the Permanency Support Services Unit (PSS) has implemented a number of tracking mechanisms:

- o An electronic tracking process called “Footprints” has been instituted that tracks the process from submission of the TPR packet to the filing of the petition in court, and throughout the adoption process. This tracking software includes functionality that allows frontline workers to be automatically notified of

- additional information that is needed or important events such as court dates being scheduled.
- Quarterly, regional conference calls have been implemented to have the staff report to PSS where each individual child is in the process and what steps can be taken to move the case forward,
 - A new “TPR” Unit has been developed in the PSS with the express responsibility of processing TPR packets and ensuring that they are correct and ready for advancement to the Attorney General’s office for review and filing. Two program managers were hired to closely work with frontline workers in each county to assist them in correctly compiling and preparing TPR packets and submitting them to PSS in a timely manner. Upon request, TPR Unit staff are available to travel to county offices and provide training and Q&A assistance as needed.
 - PSS is working closely with MACWIS Systems Analyst and are monitoring data through regular reporting to ensure progress.

Efforts to Improve Performance:

In August of 2017, in an effort to improve statewide performance on the filing of Termination of Parental Rights proceedings in order to facilitate more timely adoptions, the MDCPS Adoption and Licensure unit initiated a process of review for children with case goals of ‘Adoption’. Routine conference calls with the MDCPS regions responsible were held, and for each child where TPR had not occurred: the current status of the TPR filing, barriers to progress, and next steps were clarified. These quarterly calls were continued during the past year. For each child where TPR had occurred and child was legally free for adoption the current status of adoption proceedings, barriers to progress, and next steps were clarified. In these calls, MDCPS has coordinated with the Attorney General’s office to ensure that TPR filings are complete and accurate and that these requests are filed with the court in a timely manner. Diligent Search Requests: The TPR Unit no longer receives and completes Diligent Search Requests. As of February 2019, Diligent Searches are completed at the county level.

Rapid Permanency Supports:

Rapid Permanency Supports were initiated January 2017 to review children who had been in custody at least two years, in a family-based placement at least one year, and who had a permanent plan of adoption or custody with a relative. RPSs were implemented in four regions and eventually lead to the development of a homegrown reviewing method initiated by the Bureau Director of Permanency Support Services. Quarterly conference calls take place with the Region Directors across the state to provide updates on children who are in the process of TPR and adoption.

ASFA Exception Review:

The Data Unit will compile information regarding all children with a permanent plan of adoption who have been in MDCPS custody for at least 14 of the last 22 months and who also have a documented ASFA exception. This information will be provided to Permanency Support Services on a quarterly basis. Conference calls will be held quarterly by Permanency Support Services staff and Regional Directors to determine if these ASFA exceptions are still present in each child's case and whether these exceptions should be continued an additional six months. If ASFA exceptions are no longer present in a child's case, necessary action steps will be determined to insure a TPR referral is made to the Attorney General's office before that child reaches 17 of the last 22 months in MDCPS custody. Statistics for the period of July 1, 2018 - May 30, 2019:

- TPR packets submitted to State Office - 850 (individual children)
- TPR packets submitted to the AG's Office by State Office - 723 (individual children)
- Children legally freed for adoption - 753

e. Item 24: Notice of Hearing and Reviews to Caregivers-How well is the case review system functioning to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Mississippi Code of 1972 Section 43-21-603(5)(e) states that if a child has been adjudicated a neglected child or an abused child, before entering a disposition order, the youth court shall consider, among others, relevant testimony and recommendations, where available, from the foster parent of the child, the grandparents of the child, the guardian *ad litem* of the child, representatives of any private care agency that has cared for the child, the family protection worker or family protection specialist assigned to the case, and any other relevant testimony pertaining to the case.

MDCPS policy directs staff (county of responsibility worker) to invite parents and/or legal guardians, foster, adoptive or relative-care parents, and grandparents to the review hearings, and any proceedings held with respect to the child in foster care pursuant to Miss. Code Ann. Section 43-21-603(5)(e), and others who may have relevant testimony may be invited. Depending on local court rules, MDCPS may be required to provide the following types of notice: telephone calls, letters, summons and/or subpoena or face-to-face notification. MDCPS should provide documentation

to the court regarding who provided notice and what type of notification was used. Supervisors and direct service workers are trained on the duty to notify all persons who have a right to present information in hearings through the Pre-Service Training.

Results from a qualitative review conducted for the period January 2019 – March 2019 by the foster care review staff for *Olivia Y.* reporting found that 53% (n= 384) of the applicable cases rated as compliant. A child's permanency plan shall be reviewed in a court or administrative case review at least every six months. Foster care reviews shall satisfy this administrative case review requirement. MDCPS will take all reasonable steps, including written notice, to ensure the participation of the child, parents, caregivers, and relevant professionals in court or administrative reviews. This item also rated as an area needing improvement during the 2018 CFSR because reviewers found that caregivers are not routinely notified of reviews and court hearings and that their right to be heard in these proceedings is not always guaranteed. Stakeholders reported that practice varies across the state and that in some jurisdictions, caregivers are not allowed to remain in the courtroom or offer information during hearings.

3. Quality Assurance System

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

Continuous Quality Improvement (CQI), was formalized during the inception of the 1st *Olivia Y.* Settlement agreement. The agency began implementing CQI activities to identify strengths as well as areas needing improvement in case practice. These activities were developed to monitor and inform practice in such a way as to lead to timely services to clients, improved outcomes for Mississippi families and to inform agency leadership and stakeholders of the well-being of the agency. Today, the Mississippi Department of Child Protection Services Continuous Quality Improvement activities have grown significantly from its early roots, yet the mission remains the same: to see improved outcomes for Mississippi Families who are involved with MDCPS.

To meet the periodic administrative determination AFCARS element, staff in the Quality Assurance Unit facilitate county conferences every six months for children in foster care and who remain applicable for such reviews. Annually, regional reviews are held in each of the 14 regions to assess case practice. These reviews yield findings from 350 cases (foster care and In-home). The cases are critically reviewed and documented in the Children's Bureau electronic database by Quality Assurance Unit staff. Information from those reviews helps inform case practice, performance on the Child and Family Services Review and subsequently using the CQI process will establish the CFSR PIP baseline and performance on the PIP through the first two years of the CFSP.

In July 2018, MDCPS Services reorganized its agency structure to create two parallel areas of focus and operation: Child Welfare and Child Safety. Under the new organizational structure, the CQI unit is positioned under the Deputy Commissioner of Child Safety while the day to day tasks of the staff are managed by one bureau director. This structure has created a larger pool of reviewers under the leadership of one director. This change has better aligned skills and resources to the work required. What was previously known as the Foster Care Review unit and the Evaluation and Monitoring unit are now consolidated into the Quality Case Review unit. This arrangement increases staff capacity to perform the functions of quality case reviews with consistency and integrity of the process.

The Continuous Quality Improvement/Quality Assurance system within the Mississippi Department of Child Protection Services seeks to be an institution of learning that operates in a non-punitive manner while monitoring and informing practice. This organizational structure offers a more diplomatic approach to providing CQI activities throughout the agency. The CQI unit now benefits from direct leadership of executive management who are always mindful of data trends and the need for training or policy considerations as it relates to CQI findings. Although CQI is an identified program unit, its activities and processes are intentionally embedded throughout the fabric of the agency in collaboration with and, in some instances, led by other program units.

While the CQI processes and activities are functioning as designed, the agency must stay up to date with changes in federal and state programs. As such, CQI will continue their core functions already imbedded in the agencies work and will also lend itself, as applicable, to any new programs introduced and implemented under the CFSP and 2nd MSA. MDCPS notes that this systemic factor rated in substantial conformity and related item rated as a strength during the 2018 CFSR.

4. **Staff and Provider Training**

- a. Item 26: Initial Staff Training-How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions?**

MDCPS's initial staff training was rated as a strength during the 2018 CFSR. Information from the statewide assessment and collected during interviews with stakeholders showed that the state has a training system in place that ensures that staff are trained in a timely manner, and the training prepares staff with the skills and knowledge required for their positions. Stakeholders reported that once a new hire completes the preservice training, on-the-job supervision begins with trainer and professional development support. Stakeholders said that the on-the-job training is the most beneficial component of initial training because it provides coaching and mentoring and allows staff to demonstrate what they have learned.

Beginning January 1, 2018, MDCPS implemented Cornerstone as a Learning Management System to track all attendance and registration as well as deliver online training. This system allows us the opportunity to survey staff on their training as well as pull data for determining next steps. Historically, surveys have been in written format which made it difficult to gather solid reports. The Pre-Service training program will all be delivered by the Office of Professional Development following the merge. All newly hired frontline and supervisory staff are required to attend 270 hours of Pre-Service Training prior to obtaining a caseload. Only staff who successfully complete pre-service training can continue employment with MDCPS. Any former MDCPS caseworker or supervisor who returns to the agency within five years does not have to repeat Pre-Service as their training requirement is waived. Pre-Service training is currently delivered in a model that is a combination of on-the-job training and classroom instruction.

- b. Item 27: Ongoing Staff Training-How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?**

Mississippi received an overall rating of Area Needing Improvement for Item 27 during the 2018 CFSR based on information from the statewide assessment and stakeholder interviews. Information from the statewide assessment and collected during interviews with stakeholders showed that the state has requirements for

ongoing training and a process to ensure that staff have access to relevant ongoing training to support them in carrying out their duties. However, the state's ability to track ongoing training hours was insufficient until recently when the agency moved to a new training platform. In addition, the state does not have necessary data or information about the effectiveness of ongoing training to inform decisions about training needs. As of now, the reporting functions in cornerstone are fully operational and MDCPS is now able to collect information regarding training hours for all staff and the effectiveness of trainings.

- c. Item 28: Foster and Adoptive Parent Training-How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children?**

Mississippi received an overall rating of Area Needing Improvement for Item 28 during the 2018 CFSR based on information from the statewide assessment and stakeholder interviews. During the process, it was determined that initial and ongoing training requirements are in place for foster and adoptive parents and staff in facilities state licensing staff track training hours to ensure training requirements are met. All foster and relative homes receive the same basic training, with additional training provided for homes that provide varying levels of therapeutic care. The state, however, does not have information or data to demonstrate the effectiveness of initial and ongoing training to inform decisions about the training needs of current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities. MDCPS now has an online learning system that allows user feedback. With this, the effectiveness of the trainings can be tracked and reported on. MDCPS also is putting in place a dedicated foster parent liaison who will be able to field feedback from foster parents.

5. Service Array and Resource Development

- a. **Item 29: How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (CFSP)?**
- b. **Item 30: How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?**

Overall, this systemic factor rated as not in substantial conformity and each item rated as an area needing improvement during the 2018 CFSR. Specifically, information in the statewide assessment and collected during interviews with stakeholders showed that the state does not have an adequate array of services accessible to children and families statewide. Gaps and waitlists for services exist for substance abuse treatment for parents and children, transportation, mental health services for parents and children, Independent Living Services, and housing. Availability and accessibility of services are further restricted for parents without medical insurance. Additionally, information in the statewide assessment and collected from stakeholders during interviews showed that services are not consistently being individualized across the state. Although Mississippi has interpreter services for Spanish, American Sign Language (ASL), Arabic, Chinese, and Vietnamese languages, there are barriers to individualization of services, which include limited services, a lack of flexible funding, and funding approval delays. Both of these items are discussed in detail in the CFSP.

6. Agency Responsiveness to the Community

- a. **Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR-How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?**

As stated within state's 2018 CFSR final report, this systematic factor overall was rated a strength for the agency. MDCPS continues to meet regularly through monthly, bi-monthly, and as needed meetings with its stakeholders including the Administrative Office of the Courts, Children Advocacy Centers of Mississippi, Tribal

partners, representatives from mental health, education, state universities, and others to discuss the progress and/or barriers to the goals, objectives, interventions identified under the 2015-2019 CFSP. For the development of the state's 2015-2019 CFSP final progress report, MDCPS Division of Federal Reporting contacts its stakeholders to request quarterly and periodic updates about any joint initiatives, service delivery information, successes, any perceived barriers, and strategies for improvement. These collaborative efforts are integrated throughout the APSR narrative. As Mississippi works toward implementing and completing the collaboration strategies identified in the 2015-2019 CFSP, the periodic updates provide valuable insight into the effectiveness of each strategy. This also serves as an internal/ external feedback loops to ensure that these activities were actually joint activities, each entity fulfilled their obligations, and initiatives were completed by established target dates. Lastly, MDCPS also shares the annual Program Instructions, (PI), and subsequent APSRs with the Mississippi Band of Choctaw Indians (MBCI) and its stakeholders.

Mississippi Supreme Court Jurist in Residence- is a resource person to the judicial system and to local courts on issues such as child abuse reporting, termination of parental rights, general child protection services issues of competency in court proceedings, indigent parent representation, truancy/education neglect and crossover youth. The Resident Jurist worked closely with MDCPS and its commissioner to identify and address emerging issues in child welfare and the courts. He worked with the Legislature to establish an additional judicial post to properly handle the child welfare docket in Lee County. He assisted in training of court staff preparing for the Children and Family Services Review (CFSR), a federal review of the state child welfare system in four counties. The Resident Jurist continued to work to increase federal funding for the support of children in foster care. Title IV-E of the Social Security Act provides for federal reimbursement for a portion of the maintenance and administrative costs of foster care for children who meet specified federal eligibility requirements. Two years ago, Mississippi reported a 28 percent Title IV-E reimbursement rate. Recently, the reimbursement rate has risen to 40 percent. MDCPS instituted several reforms during that period. By increasing the number of children receiving federal dollars for their ongoing support, Mississippi would reduce state tax dollars spent on foster care.

Part of the reason for the low rate was that individual children's IV-E eligibility was not correctly documented in court orders. Judge Hudson worked extensively to train MDCPS workers and judges in correctly documenting IV-E eligibility requirements. He edited the Jurist in Residence Letters to all Youth Court judges addressing the need

to properly address all the factors as required by federal law and to include those findings in their orders. He worked with IT personnel at the Supreme Court to draft new court order language in MYCIDS, the statewide youth court data system, to ensure conformity with eligibility requirements and provide instruments for statewide tracking of compliance.

Judge Hudson provided consultation for individual Youth Court judges, prosecutors, parent attorneys and guardians ad litem across the state. He conducted several court observations of local Youth Courts and issued reports of recommendations for better court practices. He worked with several courts to address challenges and assisted in developing plans to overcome them. The Resident Jurist met with legislators and participated in legislative committee meetings to educate legislators on the needs of Youth Court and child welfare. He created position papers on legislative proposals to advise of the impact of pending legislation. He made presentations regarding Youth Court issues at various conferences including the Youth Court Prosecutors Conference, a multi-disciplinary conference of court and police personnel, multi-disciplinary conferences with parent attorneys, and the Youth Court Judges annual conference. He conducted new judge training for County Judges on Youth Court practice and procedure.

Court Improvement Workgroup (CIP)-The Court Improvement Workgroup (CIP) met monthly for several years beginning in 2010, then changed to quarterly meetings in 2017, to address legal issues for implementing the requirements of the Modified Settlement Agreement (MSA), to identify training needs for the judiciary, to develop plans and goals to affect outcomes through the Youth Court, and to identify the breakdowns/barriers between MDCPS and the court system. Members of the workgroup include: MDCPS State and Regional Staff, the Attorney General's Office and staff from the AOC. The CIP Workgroup has been rolled into CFSR meetings in 2018-2019 to address the status of ongoing CFSP/CFSR/PIP progress and steps moving forward.

Problem-solving groups that have grown out of the CIP Workgroup include the Indigent Parental Representation Task Force, Juris in Residence meetings with the MDCPS Commissioner, the—Human Trafficking Task Force, the 2018 Judicial Engagement Teams, Three Branch Government Convening, and Family First Initiative to train and implement the Family First Prevention Services Act. Members of the CIP Workgroup were participants in the Mississippi Commission on Children's Justice, and the Zero-to-Three Quality Improvement Center for Research-Based Infant-Toddler

Court Teams in Forrest and Rankin counties. The CIP Workgroup works with AOC to coordinate training with the Department, the Judiciary and the Tribe.

In 2018, CIP was placed under the Mississippi Commission on Justice for Children. A CIP Multidisciplinary Committee was appointed develop and implement the CIP Strategic Plan. Members of the Committee include MDCPS state and regional staff, Juris in Residence, County Youth Court Judges the Attorney General's office, Mississippi College School of Law Mission First Legal Aid Office, staff from the AOC, the Mississippi Band of Choctaw Indians, (MBCI), Children's Advocacy Centers of Mississippi (CAC), and MDHS state office staff from the Division of Child Support. The CIP Multidisciplinary Committee's focus for 2018 was Parent Representation, the Mississippi Family First Initiative and the MDCPS Child and Family Services Review in September. Further, the Committee's focus was to identify training needs for the judiciary, parent attorneys, the Tribe and child welfare staff, to develop plans and goals to affect outcomes through the youth court, and to identify the breakdowns and barriers between MDCPS and the court system. The CIP Multidisciplinary Committee continues to participate in the Program Improvement Plan (PIP) and development of the next Child and Family Services Plan (CFSP),

Monthly Caseworker Visit through the Center for the Support of Families- Throughout the 2015-2019 CFSP, the Monthly Caseworker Visit Grant has been used to fund vendor services for the Center for the Support of Families (CSF) contractual agreement. CSF has worked with the state to improve the quality of caseworker visits by assisting the state with the development and implementation of the child welfare practice model and the provisions of the Olivia Y Settlement. Tenets of this model included the following, in part; Practice Model Coaching for Continued Practice Model Implementation and Intensive Supervisory Support. Furthermore, CSF continued to support the state by participating in regular leadership meetings with MDCPS centered on training and coaching needs, supporting the MDCPS's initiative Safe at Home, regional implementation of the practice model, supporting the professional development needs of MDCPS, and additional support to MDCPS with meeting departmental goods. Please see the descriptive list of services that CSF has provided during FYs 2015-2019:

- **Olivia Y. Settlement Provisions-**CSF was originally hired to assist MDCPS to help address the concerns outlined in the Olivia Y Settlement Agreement back in 2009. During the 2015-2019 CFSP timeframe, CSF continued to provide support relating to the Department addressing the Settlement Agreement. During this

period in FY 2015, CSF worked with another contractor hired by MDCPS, BCS to make final revisions to data report specifications tied to key Settlement Agreement outcomes, conducted face validity, and produced data quality reports identifying key data entry and data report errors in the developed data reports. Common data entry errors were sent to regional leadership to address with staff to improve the quality of the data reports. CSF also developed training for MDCPS CQI staff on how to conduct data validation of the Olivia Y Settlement Agreement reports. In FY 2016, CSF provided comments and feedback to the court monitor on a case review instrument developed to gather information on Maltreatment in Care cases. Also, during this period, CSF, in conjunction with MDCPS leadership, assisted regions as they developed regional improvement plans and charters for 8 critical Olivia Y data indicators selected by leadership, particularly around caseworker visits and issues of safety. As part of this process, CSF analyzed regional performance and provided leadership with observations and questions to ask of regional leadership through a series of performance management meetings.

- **Practice Model Learning Cycle**-The Mississippi's practice model was developed back in 2010 and was updated in FY 2016 to reflect MDCPS's commitment to a trauma focus. The six components of the practice model are Involving Children and Families in Case Planning, Assuring Safety and Managing Risk, Strengths and Needs Assessment, Individualized Case Planning, Mobilizing Services Timely and Preserving and Maintaining Connections. To support the revamped practice model with a trauma focus, CSF developed and implemented the Mississippi Practice Model Learning Cycle (PMLC) which is a learning model that includes preparation activities, multiple virtual learning modules, and structured practice application opportunities. The preparation activities are geared toward regional leadership and supervisors, giving them an overview of the content of the module and how they should introduce and support their staff for meaningful participation in the module. The virtual learning modules included a virtual learning tutorial, akin to a traditional classroom learning environment, and a virtual practice scenario, where users are given the opportunity to practice the key behaviors they have just learned in the module. The structured application sessions for all staff led by CSF coaches, give opportunities to further practice the key behaviors, how to monitor fidelity to those key behaviors, and how the behaviors can be applied in the field. The PMLC includes content on trauma focused child welfare practice within the context of the six Practice Model competencies. For each Practice Model competency, MDCPS and CSF utilized EMU findings from Calendar Year 2016, MACWIS reports, PAD reports, and CSF

Coaches input to identify selected key behaviors, practice areas, and fidelity measures to be focused upon during the virtual learning modules and structured practice application sessions. CSF worked with MDCPS to implement the PMLC in 2017 in seven regions, three regions in 2018, and the remaining four regions are participating in 2019. Following participation, CSF supported regions in practicing the learned behaviors through coaching activities and reinforced through group coaching and learning labs.

- **Coaching support**-CSF provided coaching support in all 14 regions throughout the 2015-2019 CFSP timeframe focused primarily on the skills that can be built by training and targeted specific coaching that will improve direct practice, including quality visits. Through their work towards the beginning of this period, CSF recognized that more than one strategy was needed to provide the intensive supervisory support needed to supervisors. Therefore, activities evolved to include a combination of individual mentoring for identified supervisors, group coaching, aggregate coaching labs for supervisors on topics directly related to meeting the requirements of the Settlement Agreement and targeted coaching for individual supervisors identified in collaboration with MDCPS and CSF to support the lessons of the PMLC. In addition to individual coaching, group coaching and coaching labs, other onsite activities include participation in regional meetings, observation and feedback in staffings, observation and feedback in unit meetings and shadowing. CSF also provided the regions off site support including routine communication, group coaching via webinar, as well as providing data analysis and other materials as requested to support improvement efforts.
- **Safe at Home Initiative Support** -In support of the MDCPS initiative Safe at Home developed in 2018 and focused on keeping children out of foster care and achieving permanency, CSF assisted the department to develop a theory of change by facilitating planning sessions with state office leadership to develop an initial set of core activities for State Office, Regional and Bureau Leadership, and Supervisors around the five principles that were developed to successfully achieve the goals of Safe at Home: Use of Available Federal Funds, Safety Assessments and Ensuring Services are In Place, In Home and Prevention Services, Partnerships with the Courts and Ensuring Reasonable Efforts, and Promoting Permanency in Foster Care. CSF also helped MDCPS envision a data plan to track implementation of Safe at Home and its impact on children and families in Mississippi, focusing on the work happening within the counties and regions in Mississippi as well as through providers and agencies.

- **Supporting an Annual Statewide Supervisor’s Meeting-** CSF supported MDCPS by sponsoring the annual statewide supervisor’s meeting, aimed at improved consistency, promoting best practice, fostering connections and comradery across the state and regions, and promoting the goals and vision of the department as a whole. The theme of the conferences were: *Trauma-Informed Practice and Adaptive Leadership* (July 21-22, 2015), *New Beginnings* (June 28-30, 2016), *Leading Through Change* (June 21-23, 2017), *Safe at Home* (June 6-8, 2018). As part of this work, CSF assisted MDCPS in developing the agendas to support the themes, identifying keynote speakers, structuring breakout sessions, and evaluating feedback from conference participants.
- **Capacity Assessments and Strategic Planning-**Through coaching efforts at the beginning of the CFSP timeframe, seven regions were identified as being ready to participate in the PMLC, while the remaining seven regions were determined as not ready to participate for a variety of reasons, including inadequate staffing or excessive workloads, as well as poor performance in key indicators. For the seven regions determined not ready for participation, CSF coaches conducted capacity assessments to inform CSF’s coaching support for the remainder of 2017 with the goal of these regions being prepared to participate in the PMLC during a future time period. The capacity assessments contained information on capacity concerns such as shortage of caseworkers, shortage of supervisors, overdue investigations, backlogs of pending resource family applications without home studies, and need for a regional leadership structure prepared to oversee implementation of the PMLC. All seven of these regions took part in a planning process based on a Theory of Change approach to prioritize problems to be addressed, identify root causes, and develop strategies to make improvements. CSF developed a template for these regions to use to monitor their progress in key areas, both through data collection and identifying and implementing strategies to address deficiencies. CSF assisted regional leadership monitoring these plans and refining strategies in their assessments, and in 2018, State Office identified three more regions as ready to participate in the PMLC, with the remaining four regions determined ready to participate in 2019.
- **Performance Based Contracting Support-** CSF supported MDCPS through the creation of their Performance Base Contracting (PBC) Unit to support their efforts to get PBC contracts off the ground and in establishing monitoring practices for the unit. These efforts consisted of assisting the unit in developing a monitoring tool, rating guidance and provider review protocol for MDCPS PBC staff, piloting some case reviews using the newly developed monitoring tool,

assisting the unit with their gathering of data and information to monitor provider performance.

- **Reasonable Efforts Virtual Training**-Between February 2018- June 2018, CSF, at the request of MDCPS, developed a virtual training on Reasonable Efforts to support one of the departments identified priorities. As part of this work, CSF provided technical assistance to state office in ensuring the modules developed in articulate were compatible and functioned smoothly with MDCPS's cornerstone application (learning management system). The training, designed with the adult learner in mind, was centered on three modules (Reasonable Efforts to Prevent Removal and Strengthen the Family, Reasonable Efforts to Return the Child Home, and Reasonable Efforts to Achieve Permanency Swiftly). Each module contained five practice scenarios or activities where users are able to practice five key behaviors associated with the module, as well as find additional supporting materials including policy references, resources for workers on the topics of the activities, and resources for supervisors, including staffing note sheets on how to monitor fidelity to the key behaviors. In addition, the training provides additional overall information on reasonable efforts, including the federal and state statutes; why reasonable efforts are important to the Courts, MDCPS, parents and children; how reasonable efforts connects to MDCPS's Practice Model; general resources and a glossary. CSF also developed one-page guidance for Regional Directors and Supervisors to support and monitor implementation of the Reasonable Efforts Virtual Training. The three-module training was held between July 2018 and November 2018, and CSF also provided coaching assistance as requested by regions to understand and use the principles and key behaviors of the Reasonable Efforts modules.
- **Regional Leadership Training**- To further support supervisors in 2017, CSF developed, in conjunction with MDCPS, a leadership training centered around four leadership behaviors to be developed among supervisors and leadership at the regional level. The four leadership behaviors were Monitoring Performance, Clarity of Expectations, Providing Feedback, and Building a Team. As part of this effort, CSF developed materials, worked with coaches to prepare them on how to present the leadership behaviors to supervisors and how to reinforce the behaviors in practice. Also, as part of this effort, CSF helped develop relevant job aides.
- **State Office Support:** During the CFSP 2015-2019 timeline, CSF staff have participated in regular monthly face-to-face status update meetings with MDCPS

leadership to coordinate work with MDCPS, discuss training and coaching needs, and to identify needs and monitor progress on *Olivia Y* and specific project activities, including:

- working with the MDCPS Continuous Quality Improvement Director to prioritize areas of focus;
- working with MDCPS leadership to hear concerns about child welfare services from the Judiciary;
- assisting with preparation of information to be shared with the Judiciary on current practice and plans moving forward;
- working with the professional development division as they transitioned training activities, including pre-service training, from an outside vendor to an in-house operation;
- assisting MDCPS with their efforts to update their CQI plan; and
- preparation and planning activities for the Safe at Home initiative, helping the department defining the work of the initiative system wide.

Faith Based and Volunteer Services- This Bureau of Faith Based and Volunteer Services provides awareness to multi-faith churches and local communities regarding foster and adoptive needs within the foster care system. Awareness areas consist of the following but is not limited to:

- Prevention Services
- Foster Family Recruitment
- Heart Gallery
- Encourage Foster Care Support/Ministry
- Oversee and Coordinate Foster Parent Support Groups

During the final period of review, the Director continued to engage local churches and communities in regions 3-N, 3-S, 4-S, 5-E, 5-W, 6, 7-E, 7-C, and 7-W. The focus of these meetings was about increasing community awareness about the critical need for foster homes, resources for foster families, birth families and children in custody. Frontline staff in regions III-N & III-S were also assisted with physical and basic needs for families and children. These basic items included: beds, mattresses, car seats, and cribs. Additionally, the Director maintains and schedules the foster parent support groups across the state. There are currently thirty-nine (39) foster parent support groups across the state. The current breakdown consist of the following by region: I-N – 4, I-S – 2, II-E – 3, II-W – 3, III-N – 2, IIIS – 2, IV-N – 4, IV-S – 3, V-E – 3, V-W – 4, VI – 3, VII-E – 1, VII-C – 4, and VII-W – 1. Scheduling and notification of support group meetings is done via email. Licensure, Permanency Support Services, and partnering therapeutic foster care agencies are also notified of the scheduled foster support

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group meetings. Sign In-sheets that documents participation are also collected and distributed to the licensure staff in each region.

During the first quarter, foster parent support groups were led by the director within the following cities across the state: Lauderdale, Yazoo, Oktibbeha, and Marion counties. Backpacks filled with personal hygiene items were distributed to regions IV-N and V-E. Furthermore, more presentations were made to the Rotary Club of Bay Springs, Kiwanis Club of Gulfport, Rotary Club of Brookhaven, Harrison and Jefferson Davis Counties and the Lions Club of Yazoo. More backpack donations were picked up from the law firm of Anderson, Crawley, and Burke in Ridgeland, Ms.

For the second quarter, presentations were continued at the Kiwanis Club of Biloxi, Capital Area Sunset Rotary Club in Ridgeland, Orange Grove Rotary Club of Biloxi, Ellisville United Methodist Church, Clinton Rotary Club, Hub City Kiwanis Club in Hattiesburg, Natchez Kiwanis Club, South Hinds County Rotary Club, Hazlehurst Lions Club, Rotary Club of Columbia, Poplarville Kiwanis Club, and the Rankin County Rotary Club. The Director also met with DOM to get them to participant with future presentations regarding health care coverage and foster care. This helped with the continued education and training for foster parents. Backpacks were also distributed backpacks in Harrison and Perry Counties. Additionally, the Director met internally with state office staff to discuss the implementation of the CarePortal in Region III-N & III-S. Presently, the implementation of the CarePortal has been postponed due to the availability of funding. More presentations were provided to Pastors in the Jackson County Baptist Association, Hope Fellowship Church in Brandon, MS, the Downtown Optimist Club in Meridian, the Madison County Rotary Club, the Governor's Faith-Based Council, the Lutheran Church of the Good Shepherd in Biloxi, MS, Pastor Sean Wilkinson of First Baptist Church of Helena, Ronnie Crudup Jr. of New Horizon Ministries of Jackson, Lee Watson with CompaCare in MS, Glynn Chambers Karleigh Wagner with Sunnybrook Children's Home, and Kelly Williams a Parent Representative. Presentations were also made to the Exchange Club of Picayune with more donated backpacks filled with hygiene for distribution to regions I-S, II-W, & IV-S. Generous donations of backpacks filled with hygiene items were received from Clear Branch Baptist Church in Florence. These backpacks were delivered to Region III-S for distribution to the children who come into care.

In January 2019, more presentations were made to Exchange Club of McComb, Optimist Club of Jackson, Rotary Club of South Rankin County, Woody Rimes and Jameson Taylor individually who both serve on the Governor's Faith-Based Council. In February, presentations were made to West Jackson Rotary Club, Forest Rotary

Club, North Jackson Rotary Club, Rotary Club of Picayune, Jay Bonner with Cedar Lake Church in Biloxi and Dan Estes with Church of the King in Biloxi. The Director also received a generous donation of backpacks from the Junior Auxiliary of Madison County. During the month of March, presentations were made to Sunrise Rotary Club in Hattiesburg, Frank Laws with Belhaven University, Brian Gault with Redeemer Church, Thomas and Brandy Black with Jackson First Church, and Shannon Willis with Harvest Ministries and Columbia Strong. More backpack donations were distributed to regions 1-N, 1-S, 2-E, 4-N, and 4-S. Lastly, in the month of April, meetings were held with MDCPS Prevention staff, Youth Villages, and Canopy about the In-Circle program.

Child Abuse Prevention and Treatment Act (CAPTA)/ Citizens Review Panels

- **Teen Advisory Board**-The state continues to engage youth in the YTSS program design, policy changes and or updates through the monthly and quarterly state level meetings. As of 05/09/2019 YTSS has eight (8) Teen Advisory Boards served by Transition Navigators. Advisory board activities are held in a central location to allow participation from other regions served by the Transition Navigator. A \$25.00 Stipend can also be earned for participation in scheduled TAB activities.
- **MS Children's Trust Fund Advisory Council**- The Children's Trust Fund (CTF) of Mississippi provided financial assistance in the provision of direct services, such as educational programs, community awareness, program development, and advocacy, to prevent child abuse and neglect. During the 2018 period under review, the council generally meets four (4) times in a calendar year. The ten (10) member advisory council which authorizes the disbursement of money from the fund, made recommendations for changes in the state's statutes, policies and standards. The council improves coordination among state agencies that provide prevention services and provides for the expansion of programs statewide that deliver preventive services. MDCPS is the lead agency and is responsible to the Mississippi Legislature for the CTF Advisory Council. There are currently two (2) vacancies in on the CTF Advisory Council for Congressional District 1. The Advisory Council will be continuing to make recommendations for the positions to be filled. Final approval will be given from the Commissioner of MDCPS. Also, the Children's Trust Fund Advisory Council continues to express satisfaction with the Families Strengthening Families and Project Care managed through Starkville Oktibbeha. The Advisory Council would like to see efforts in implementing these two programs statewide. MDCPS issued Request for Proposals (RFP) for other community entities to replicate the programs. Once

awarded, Starkville Oktibbeha will offer training and assistance to assist with the start of the programs.

- **MS Child Death Review Panel-** Mississippi law creates the Mississippi “Child Death Review Panel, whose primary purpose is to foster the reduction of infant and child mortality and morbidity in Mississippi and to improve the health status of infants and children. The panel’s membership consists of one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General’s office, the State Sheriff’s Association, the Mississippi Police Chiefs Association, the Department of Human Services [MDCPS], the Children’s Advocacy Center, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children’s Safe Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal’s office. Each year the panel is tasked with creating a report for the Mississippi Legislature outlining “appropriate recommendations to the Legislature on how to most effectively direct state resources to decrease infant and child deaths in Mississippi.

Child Abuse Prevention and Treatment Act (CAPTA)/Juvenile Justice Transfer Youth- MDHS, DYS is the division that administers probation, aftercare services, and institutional programs for juveniles who have been adjudged delinquent in the Mississippi Youth Courts or are at risk of becoming delinquent. MDCPS and the MDHS, Division of Youth Services (DYS)’s, Community Services Director meet quarterly to discuss and track the status of youth that have been identified as “cross over” youth. This is a joint effort that targets open protective cases for clients that have been transferred to the state juvenile institution, Oakley Youth Development Center (OYDC). Additionally, the Director of Federal Reporting verifies those cases from DYS, Community Services’ monthly probation/parole caseload report. DYS monthly caseload report identifies the total number youth that are on probation, parole, and institutional commitments. DYS submits a quarterly report to MDCPS for review to assist with identifying crossover cases and issues. Currently, there is no jointly established policy or procedure for identifying and tracking youth that are considered dual or cross over youth. Presently, MDCPS, MDHS, DYS and A.O. C are working on defining a “crossover” youth definition for the state. MYCIDS would also be utilized for statistical reporting of dually referred youth. Ultimately, data reporting from MYCIDS would replace the spreadsheet tracking.

- b. **Item 32: Coordination of CFSP Services with Other Federal Programs-How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the Child and Family Services Plan (CFSP) are coordinated with services or benefits of other federal or federally assisted programs serving the same population?**

As stated within state's 2018 CFSR final report, this systematic factor overall was rated a strength for the agency. MDCPS continues to depend heavily on the coordination and integration of services from its stakeholders to help with the development and revision of its policies and programs that supports the agency's vision and mission. MDCPS continues to collaborate with other agencies by establishing Memorandum of Understandings (MOU) that strengthen and aid in coordinating services or benefits with other federally assisted programs that serve the same population. MOU's between the DOM, MDHS, OAG, DMH, MDE, MSDH, MBCI and contractual agreements with Baptist Children's Village, Mississippi State University, Casey Family Programs, and the University of Mississippi Medical Center, (UMMC) are examples how the state is functioning statewide to ensure services, funding, and efforts are not duplicated.

Mississippi Band of Choctaw Indians (MBCI)-Indian Child Welfare Act (ICWA) Compliance

The Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, the Attorney General's Office at Choctaw, MDCPS and the Administrative Office of Courts, with the assistance of the National Resource Centers for the Tribe and for Legal and Judicial Issues, as well as the National Council of Juvenile and Family Court Judges and Casey Family Programs, developed the First through the Eighth Annual Indian Child Welfare Conferences held in August 2011-2018, to promote cultural awareness, understanding and implementation of the Indian Child Welfare Act. The next upcoming training is scheduled for August 13, 2019 on the MBCI Reservation. MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act. Lastly, ICWA training is included in the Child Welfare Professional Development curriculum and this required for all new MDCPS social workers and support staff.

Child Abuse Prevention and Treatment Act (CAPTA)/ Comprehensive Addiction and Recovery Act (CARA) Collaboration

MDCPS continues to engage in a high degree collaboration through partnering with MS Department of Mental Health, FamiliesFirst for Mississippi, and MS Department of Health to maintain the agency's CARA referral process and to meet the CAPTA, CARA requirements. CARA meetings involving the four partnering agencies were held in August 8, 2018, January 14, 2019 and April 30, 2019. Additionally, a CARA meeting was held on February 28, 2019 with MS Department of Mental Health, representatives from each of the Community Mental Health Centers across the state and other agencies certified to provide substance abuse services. The purpose of this meeting was to discuss possible ways to share referrals with these agencies directly. Currently, the referrals are routed through the central office of DMH. CARA education and outreach has also been provided to some hospital staff in both the northern and southern regions of the state. This education and outreach was coordinated through MDCPS county offices in these regions of the state that reached out to staff within Labor and Deliver departments in hospitals in their regions. CARA coordinators received great participation from hospital staff in Region II- W and Region VII-C. Others that have been provided CARA education include Guardian Ad Litem that serve as Youth Court Personnel and members of Fetal Infant Mortality Review teams. MDCPS also participated on a call with Delaware to learn about their response process for CARA. CARA coordinators and other representatives from MDCPS met with Social Work PRN who currently manages the child abuse reporting hotline in Mississippi. During this meeting management and members of the Quality Assurance Team within the agency were allowed to ask questions about the screening process for CARA referrals and present any additional questions they had. The current CARA coordinators provide education and outreach in area of the state as requested.

Resettlement Services Collaboration

MDCPS continues to demonstrate the state's efforts of interagency and cross-system collaboration by partnering with DOM, MSDH, MDHS, and DMH in providing resettlement services to Unaccompanied Refugee Minors (URM) and Adult Refugees. This collaboration helps the state offer more administrative oversight to both of its subgrant agreement providers. There continues to be collaboration through a fully executed Interagency Agreement between MDCPS and DOM for the provision of Medical Assistance for Refugees in Mississippi. MDCPS has had an active Memorandum of Understanding/Interagency Agreement with Medicaid during all five years of the CFSP. The current MOU commenced on January 1, 2017 and will expire on December 31, 2019.

As of today, there are thirty-one (31) youth in the URM program. Fifteen (15) URMs are housed in two group homes run by Catholic Charities, Inc., and sixteen (16) URMs are housed in therapeutic foster homes licensed by Catholic Charities. There was a total of thirty-nine (39) URMs in the program between July 1, 2018 and June 30, 2019. One (1) youth eloped in September 2018, two (2) youths voluntarily left the program—one in October 2018 and one in June 2019—and five (5) youth emancipated between December 2018 and January 2019. A total of eight (8) youth arrived between July 1, 2018 and June 30, 2019; however, one (1) of these youths voluntarily left the program during the same period. MDCPS collaborates with the following additional state entities to ensure services are compliant with state and federal regulations:

- **MDHS** – makes eligibility determinations for Refugee Cash Assistance (RCA), TANF and SNAP, formerly Food Stamps. Refugees seeking RCA must submit required documentation to an MDHS county office. RCA eligibility determinations are based on TANF requirements for income and household size. Adult refugees may qualify for TANF and SNAP benefits by applying for assistance at the county offices. Adult refugees are required to follow all program requirements that apply to non-refugee participants.
- **MS Dept. of Health** – screens refugees for TB, HIV, and other diseases applicable to each refugee’s individual needs. Additionally, MSDH works with MDCPS to identify and track all refugees to ensure vaccination and dates of arrival information are the same for both entities
- **DMH** – licenses Catholic Charities as a provider of therapeutic foster care. DMH shares and discusses monitoring findings and corrective actions plans on the joint-service provider with MDCPS. DMH also notifies the State of the joint-service provider’s certification status as a therapeutic provider.
- **DOM** – MDCPS has an active MOU with DOM to provide Medicaid healthcare coverage to eligible refugees. The healthcare coverage is compliant with the Refugee Assistance Act, and all other applicable state and federal regulations. Additionally, MDCPS participates in periodic calls with DOM to verify medical services claimed for semi-annual reimbursement. Through this collaboration MDCPS is establishing more accurate federal reporting procedures.
- **Office of the Attorney General** - assists MDCPS in obtaining Chancery Orders to extend a youth’s stay in the URM program, if the youth requests to remain. The youth’s county caseworker submits pertinent information to the Attorney General’s Office who then files a petition in chancery court seeking an order extending MDCPS’ custody. If granted, the youth may remain in MDCPS custody until he or she turns twenty-one (21)

Collaboration with Other Federally Funded Programs – John H. Chaffee Foster Care Program for Successful Transition to Adulthood (Chafee Program – assures Chafee services are available to URM participants. Chafee and Education Training Voucher (ETV) program services are provided in-house through the Division of Youth Transition Support Services. All the current URM are fourteen (14) or older, so they are all eligible for youth transition support services. There are currently two (2) URM receiving ETV funds, and two youths (2) have been referred to independent living placements. URM youth have also participated in Independent Living youth conferences in previous reporting periods: ten (10) youth from the current URM caseload participated in a youth conference on 6/19/2018, six (6) youth from the current URM caseload participated in a youth conference on 6/26/17, and two (2) youth from the current URM caseload participated in a youth conference on 4/26/17. A stipend was also created to pay for passport photos and medical fees associated with URM youth adjusting to Lawful Permanent Resident status.

URMs for July 1, 2018 through June 30, 2019	
New youth placed in program	10
Number of youth to Leave /Emancipate from the program	10
Youth in URM funded placement and/or services at end of this reporting period	31
Number of youth to graduate high school	9
Number of youth to attend post-secondary education	5
Number of youth to have been gainfully employed	27

7. Foster and Adoptive Parent Licensing, Recruitment and Retention

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

Mississippi is not in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. Two (items 33 and 34) of the four items in this systemic factor were rated as a strength. MDCPS in conjunction with the court monitors as required by the 2nd MSA created a foster home recruitment and

retention plan where each region/county has specific targets assigned to complete each month toward the development of new non-relative foster homes. In 2018, MDCPS determined a goal for licensing non-relative homes in Mississippi as 400. The state exceeded that goal by 8% and licensed 431 new foster homes. Information provided in the statewide assessment and collected during interviews with stakeholders showed that the state ensures that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds. Monitoring processes are in place for public and private foster homes and institutions to ensure that standards are being met.

b. Item 34: Requirements for Criminal Background Checks-How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Based upon the 2018 CFSR final report, this systematic factor was rated a strength. MDCPS's Division of Background Checks continues its efforts of enforcing the Criminal Background Checks policy for the Foster Care and Licensure Unit and Adoption Unit. State office staff in conjunction with county staff work together to ensure that all criminal history information is accurately processed and is as timely as possible. State office staff from the Criminal Background Unit provide licensure staff the information needed to make the best licensure decisions for the safety and well-being of children. Licensure Specialists and supervisors review the criminal history information in light of The Adam Walsh Act, Mississippi Code Annotated Section 43-15-6 and other information obtained in the licensure process to determine if the applicant is fit to have responsibility for the safety and well-being of children.

This helps to ensure that the state complies with the federal requirements for criminal background clearances to license or approve foster care and adoptive placements. Policy states before an applicant can become licensed, the licensure and adoption specialist are required to conduct a screening of all resource parents and household members 14 years of age and older. The screening process includes a federal, state, and local background check, along with a Child Abuse and Neglect Central Registry Check.

These screenings should be completed in the orientation phase of the licensing process to determine if an applicant can move forward in the licensure process. With relative placements, where the child is already placed in their home before they become licensed, the relative has a local background check completed before leaving the child in the home and fingerprints/Child Abuse Registry check is then completed during the process of being licensed. All applicants or persons residing in the home who have been convicted of a crime or who have a pending indictment of any crime are evaluated in accordance with the Adam Walsh Child Protection and Safety Act of 2006 (P.L. 109-248) and Mississippi Code, Annotated Section 43-15-6, to determine their fitness to provide services as a Resource Parent, prior to being licensed. A monthly report captures Licensure Status of Resource Family Homes (SZRESL). This report does not capture criminal background screening, but it does capture the number of Relative and Non-Relative Resource Homes, according to policy, which must be screened (including a fingerprint background check) prior to being licensed. Starting October 2017, the Criminal Background Checks Unit started monthly reporting to capture the number of Relative and Non-Relative applicants that were processed by the fingerprinting unit.

The screening process for foster care and adoptive placement applicants begins with local licensing staff collecting information on the applicant's identity. This includes the applicant's social security card, driver's license, and written consent for a background check. This process also includes fingerprinting, submitting and identifying information through the Mississippi Criminal Information Center and the National Criminal Information Center. Once this submission has occurred, the local staff notify state office of the submission and the results of these requests for criminal history information are then available for State Office staff to review. Within 24-48 hours, information on applicants without arrests are sent to the local licensing staff for use in licensure decisions. Information on applicants with arrests includes: collection of information from courts, arresting agencies, due process for the applicant to know the criminal history received and the opportunity to provide input in regard to the background results. This also includes guidance to the foster home licensure staff and congregate care licensure staff on compliance with the Adam Walsh Act.

Beginning in July 1, 2017, the state's licensure specialists began conducting social media and internet background searches for foster and adoptive parents. As part of the licensure process, specialists are required to conduct a search on social media and the internet and record any findings of inappropriate behavior, derogatory imagery, and inappropriate sexual content. Fingerprint-based checks are available and conducted statewide via Live Scan systems. The electronic fingerprint live-scan systems are

designed for ease of use and for capturing high quality fingerprint images, helping to ensure superior acceptance rates and accurate criminal history information which increase the timeliness of return. A new process utilizing digital signatures has been implemented to speed up the process of getting criminal history information to those who make the resource home licensure decisions. One struggle is the delay that can occur when scheduling applicants for fingerprinting. This has improved some as fingerprinting has been scheduled at the same time as mass trainings, such as when multiple foster parent applicants attend a Rescue 100 foster parent training event. Even though live-scan laptops are available for a CPS employee to use remotely, the scanned fingerprints and related information previously had to be submitted from a live-scan fingerprint base station strategically located in the region. This has been resolved, as now the fingerprints can be submitted electronically from where they were taken as long as there is an internet connection.

Existing barriers continue to be due to the availability of applicants to schedule the fingerprinting, the applicant has multiple arrests, court or arresting agency doesn't respond timely to request for dispositions, or additional information is needed from an applicant and the applicant hasn't responded, which causes delays in processing criminal history timely. In some cases, more time is needed to obtain dispositions or any information available from other entities such as the police department, prosecutor's offices, and/or other court systems. The Criminal Background Checks Unit has been assisting with fingerprinting individuals and contracted providers. Conducting the fingerprinting on-site for contracted agencies during their scheduled group trainings has been very successful in ensuring the Congregate Care Unit receives background results timely.

In March of 2018, the MDCPS Licensure Policy was updated and disseminated. The policy included basic information related to fingerprinting of foster parent applicants and handling of the resulting criminal history information. A refresher training of proper procedures related to fingerprinting and handling of criminal history information was conducted in October of 2018. It was conducted in three areas of the state and geared to MDCPS staff directly involved with the fingerprinting process. Data collection methods were revised by Criminal Background Checks Division in June 2017 under the leadership of a new Division Director. Data collected on amount of fingerprinting applications processed:

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Month	Non-Relative Resource Applicant	Relative Resource Applicant	ICPC	Adoption	Youth in the home	Total
Jun-17	188	193	4	2	19	406
Jul-17	187	86	3	6	14	296
Aug-17	251	163	5	9	54	482
Sep-17	266	159	3	5	25	458
Oct-17	202	123	7	0	0	332
Nov-17	226	96	7	4	13	346
Dec-17	185	115	5	5	18	328
Jan-18	229	102	0	0	10	341
Feb-18	242	102	5	1	23	373
Mar-18	274	104	2	4	11	395
Apr-18	206	96	5	4	12	323
May-18	200	95	7	9	13	324
June-18	167	84	4	2	18	275
July-18	236	100	13	3	25	377
Aug-18	243	75	4	6	20	348
Sept-18	214	146	3	1	14	378
Oct-18	281	230	2	0	21	534
Nov-18	201	63	0	5	23	292
Dec-18	158	44	6	0	6	214
Jan-19	283	96	4	6	24	413
Feb-19	205	77	4	0	25	311
Mar-19	262	99	3	4	29	397
Apr-19	185	75	2	1	19	282

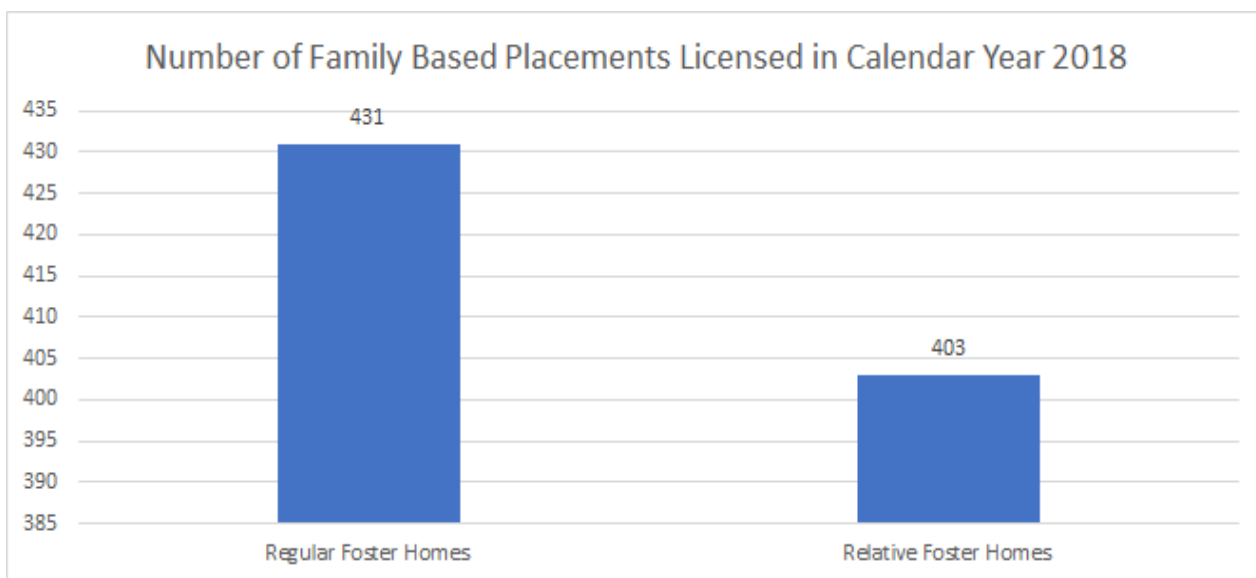
The FBI reviewed the MDCPS Fingerprinting process as part of an audit of the Mississippi Department of Public Safety (MDPS) on Feb. 13, 2019. Significant insight gained during this process is listed below:

- MDCPS was able to locate the information on all but 2 cases, as those two applicants didn't follow through with licensure or employment. It was determined that new policy must include stressing the requirement to licensure staff that all information gathered on an applicant before fingerprinting must be submitted to State Office, even if applicant withdraws the application. There must also be a system implemented by Criminal Background Check staff to discover when this has occurred.
- It was determined that errors made by licensure staff during the fingerprinting process, such as not obtaining the proper permissions, not adequately identifying the applicant, and documenting the wrong reason for fingerprinting, cannot be corrected after fingerprinting, so the agency must hold licensure staff accountable for correct handling of criminal history information, including the processes required before the fingerprinting.
- The FBI indicated that a Privacy Act statement must now be included in the fingerprinting process since fingerprint cards are no longer used and the information was previously conveyed to the applicant on the fingerprint cards. The FBI has recently discovered this issue nationwide and is notifying all states during audits for the first time.
- There is a program (RapBack) potentially available to Mississippi that will continue to provide criminal history information on an applicant to the agency once the applicant has been fingerprinted without the need to fingerprint the applicant again. This will be pursued to determine whether Mississippi can utilize this program, as it would provide criminal history information on an applicant as the conviction occurs, informing more timely safety decisions related to placements of children.
- The "Reason for Fingerprinting" codes need to be clarified with MDCPS staff and MDPS will need to adjust the options available on the equipment.
- Some of the processes causing barriers in processing time were clarified as being unnecessary processes, such as having to travel to another machine in another county for electronic submission and requiring the printing of the fingerprint cards. Removing these requirements will help the state to process the Criminal Background Checks more quickly.
- There is a process available to Mississippi in which the National Criminal Information Center can be checked on all potential relative placements in the

case of emergency placements, with only a requirement to fingerprint the relative who received the approval for placement. MDCPS will pursue this process with MDPS as it would provide more thorough criminal background checks prior to emergency placement and may help to decrease placement disruptions that could occur when national criminal history information received causes a placement to be unsuitable

- c. Item 35: Diligent Recruitment of Foster and Adoptive - How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?**

This item was rated as an area needing improvement in Mississippi's 2018 CFSR. MDCPS's performance during the 2018 CFSR was based on the CB's concern that Mississippi's recruitment of foster and adoptive parents did not ensure that the pool of foster and adoptive parents reflects the racial and ethnic diversity of the foster care population. As the table below demonstrates, MDCPS makes placement with a relative a priority for children entering custody, licenses relative placements as foster parents, has implemented an expedited licensure process for those relatives, and has achieved relative placement for approximately fifty percent of all children in out-of-home placements. Relative placements generally reflect the racial and ethnic background of the children. Mississippi's faith-based foster parent recruitment, Rescue 100, which is described in Section 7, is open to churches whose congregations reflect the racial and ethnic diversity of the state.



d. Item 36: Use of Cross-Jurisdictional Resources for Permanent Placements-How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Although this overall item was rated as an area in need of improvement, much work has been done since the 2018 CFSR onsite review. The 2018 CFSR Final report revealed Mississippi had effectively used its cross-jurisdictional resources to support the permanent placement of waiting children. These resources continue to be through AdoptUSKids, Mississippi Heart Gallery, and inquiries from other sources. Families interested in children in MDCPS custody continue to submit inquiries and are screened as potential placements. Although the usage of cross jurisdictional resources was rated a strength, MDCPS performance regarding the method of tracking the percentage of home studies received from other states within 60 days was rated an area needing improvement.

The ICPC Division has worked to develop more efficient ways to track cases and to improve timeliness by the Safe and Timely Act standards. A smartsheet has been developed to track cases from receipt to closure within the ICPC office. This Smartsheet identifies when the case was received, entered in MACWIS, completed and sent to the receiving state. The state also incorporates the notification alerts from the

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NEICE system with this Smartsheet to improve tracking to meet the Safe and Timely standards. The division continues to work with local offices and other states to adhere to and promote the standards set forth in the Safe and Timely Act of 2006 encouraging timely home studies. An issue that was discovered with the agency's policy was in direct conflict with ICPC policy of processing cases within 60 days. This item needed to be addressed to meet the Safe and Timely requirement. The agency policy allows 90-120 working days for completion. This impedes any success at meeting the Safe and Timely Act of 2006 requirement. As a result, an ICPC Quick Reference Guide was implemented for the training of the licensure staff. The guide specifies the time frame for ICPC cases to be completed in compliance to the Safe and Timely Act of 2006. This requirement was also added to MDCPS' ICPC Policy that was revised in August 2018.

The ICPC Division has collaborated to develop more efficient ways to capture data of the many facets of ICPC cases. Before these additions were incorporated, the majority of data was completed by manual counts of cases. With the addition of NEICE to the ICPC Division, the agency can provide better qualitative data for ICPC cases. ICPC is currently working to put all cases in the NEICE database. During this transition, the ICPC staff conducted a data search to provide better qualitative data from NEICE and a manual count for quantitative data. From the NEICE report, there was a total of 722 cases handled for Regulation 7, parent, foster, public adoptions, private adoptions and residential placements. The breakdown of these cases is: Regulation 7- 22; Parent and Foster-612; public adoptions -49; private adoptions-39; residentials 5. The manual count yielded 1547 cases handled. This number was derived from the current Smartsheet that was created, the Access Mail log that was used during this time. It has now been discontinued, and a manual count of cases. The breakdown of these cases is: Smartsheet-422; Access Log-604; closed cases-395; and residentials-126.

Currently the unit has a staff of four members and a combined total of 31 years of experience with the agency. The unit's structure consists of the following: Division Director, one (1) Program Manager, one (1) Special Projects Officer IV and one (1) Program Specialist. Since the addition and training of staff, ICPC functions have also been realigned as follows:

- The Division Director processes all private adoptions, case inquiries, ICPC email and U.S. & FedEx mail, training, disruptions)
- The Program Manager processes all residential treatment placements, 100B forms for placement; approval/ denial of incoming cases)

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- The Program Specialists processes all incoming ICPC home study request, all supervisory reports and manages the mail through the NEICE database)
- The Special Projects Officer IV processes all Outgoing home study request along with all Outgoing approval/denials. They also process all 100B forms for closure and handles case status updates.

ICPC staff also serve on various committees under the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC). There are fifteen (15) committees under the body of AAICPC. The committees in which the MS ICPC Division participate include: The Annual Business and Conference Planning Committee, Data Collection Committee, New ICPC Committee, Nominations Committee, Parental Placement Committee, Training Committee and NEICE Committee. These committees require meetings in the form of teleconferences and webinars that range from bi-weekly to quarterly. State office has always had at least one ICPC consultant available during business hours to assist field staff as well as outside agencies, attorneys and prospective placement resources with questions on the ICPC process regarding placement in another state.

In 2017, MDCPS entered into a Border Agreement with Alabama Department of Human Resources to effect more timely and efficient movement of interstate placement. The counties in Mississippi are: George, Greene and Jackson. The counties in Alabama are Mobile and Washington. This agreement initiated a more expeditious process of assessing the appropriateness of a prospective caregiver's home within these neighboring counties. The goal is to establish, more border agreements and expedite cross jurisdictional placements. Currently, MDCPS is working with Alabama to expand this agreement to all counties along the Mississippi and Alabama border. Upon review of the final version of the border agreement, the ICPC Division noticed an issue concerning expediting ICPC request if the child/children come into custody.

Under the Compact, "expedited" relates to those cases that would fall under Regulation 7 requests. These requests would have to be completed within 20 working days and excludes requests for foster and adoptive placements because the county offices are unable to meet the 20-day time frame due to MDCPS licensure requirement. The ICPC Division requested for this verbiage be removed from the border agreement. The child/children are already in the home under the border agreement safety study. Although, the department knows that child/children are already in a safe placement, ICPC wants to prevent from having to remove the

child/children, disrupt the placement and wait to place them back with the prospective family once licensure is completed. ICPC Division is proposing to use "provisional placement" (only for the border agreement) for the family until the license is completed in order to be in compliance with MDCPS policy and the ICPC regulations.

Provisional placement: a determination made in the receiving state that the proposed placement is safe and suitable and, to the extent allowable, the receiving state has temporarily waived its standards or requirements otherwise applicable to prospective foster or adoptive parents so as to not delay the placement. Completion of the receiving state requirements regarding training for prospective foster or adoptive parents shall not delay an otherwise safe and suitable placement. ICPC can provide a written notice of provisional placement on agency letterhead with the understanding that the family will work to become licensed in the receiving state. If licensure is not achieved (MS may want to provide a time frame of 60 days), then the child/children will have to return to Alabama or Mississippi. This proposal has been presented during ICPC policy meetings and will need to be presented to the appropriate Alabama administrators collaborating on the border agreement to see if they agree with this proposal. The ICPC Department has not received any request because of the border agreement to date. The department is not aware of any discussions of implementing a border agreement with any other states or counties. As of May 14, 2018, the Border agreement between Mississippi and Alabama is currently being revised. The border agreement is being revised to due to the agency's policy requirement for all relative placements to be licensed and all boarding counties have been included in this agreement.

The ICPC Division has attended the national ICPC Conferences held in Seattle, WA, in 2018 and in Indianapolis, IN, in 2019. MS ICPC staff were designated as trainers for the day and a half session. Attendance to these conferences allow our state to have first-hand knowledge of the amount of time that needs to be dedicated to developing a quality training module, identifying areas of concern and building those cross-jurisdictional relationships with other Compact states. The relationship building works well in the facilitation of permanent placements specifically when problems arise, clarification of a state's laws or to bring a case into compliance when an ICPC violation occurs. Staff continues to spend 10% of an eight-hour work day offering training to county staff or prospective resources on the ICPC process and necessary

documentation needed to process an ICPC request. To improve the processing of ICPC cases in the county, the ICPC Division has worked with various administrative staff in the foster, adoption and IT departments to create a quick reference guide to equip county staff with a concise, uniform procedure for processing incoming ICPC cases. In addition to the Quick Reference Guide, the ICPC and Professional Development Directors collaborated to create an online training source for MDCPS staff. A PowerPoint presentation was submitted to the Office of Professional Development as a training module on the ICPC process. It is located in the Cornerstone training system where all workers have access. In October 2018, the ICPC Division was notified by the Office of Professional Development that the ICPC training module through Cornerstone was completed and sent to all frontline workers and supervisors. The quick reference guide that was created has been updated and revised to add procedures on how to generate a board payment to children placed in another state as well as how to initiate supervision.

The ICPC Division will also work toward holding a training session with the Office of Professional Development trainers so that they are knowledgeable of the ICPC process and regulations to offer guidance to our county staff. This would increase everyone's awareness of cross-jurisdictional processes toward achieving permanency. It would also better prepare county staff when presenting cases in court. Some judges are unfamiliar and frustrated with the ICPC process due to timing. By increasing training, workers will be able to provide more information to the judge on the process. The ICPC Division conducted a training session with the prosecuting attorneys that service the agencies' placement cases during the reported period. The ICPC Division also proposes developing a bench manual for the courts so that judges and attorneys have a quick guide on issues pertaining to ICPC cases. This has not been developed yet, but it is still apart of the Division's plans and will be a great resource for the judicial branch. One of the main functions of the ICPC is to make sure that each state's laws are being adhered as well as the requirements of the Compact. During this period there has been an increase of 3 out of 10 cases where an illegal placement has occurred. This is a violation of the Compact that can leave our state and workers liable for legal action from other Compact states, sometimes resulting in unwanted results. Specifically, if something was to happen to a child in an illegal placement.

ICPC Division continues its partnership with the Mississippi Department of Human Services (MDHS), Division of Youth Services (DYS), Interstate Compact on Juveniles (ICJ), private adoption agencies, and attorneys for processing of private adoptions.

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ICPC also collaborates with Administrative Office of Courts (AOC) Court Improvement Program for educational training as well as collaborating with judges to work through barriers to permanency. ICPC also has been working with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) Training Committee on how to introduce the “New Interstate Compact for the Placement of Children” to the legislative body within the state. This process was also discussed during the AAICPC Annual Training and Child Welfare Conference which was held in May 2017, in Portland, Maine; the conference in Seattle, Washington in April 2018; as well as the April 2019 conference held in Indianapolis, IN. The AAICPC developed a more definitive approach to presenting the new proposed compact to legislators by identifying specific contacts from each state to begin the process to engage with state legislators to adopt the new compact.

The ICPC Division regularly seeks legal advice and assistance from the attorney general’s office when dealing with situations beyond the scope of the division’s daily policies and procedures. ICPC requires legal guidance on what can/ cannot be done on a case to remain in compliance of MDCPS policy, state and federal law. ICPC staff have participated on conference calls and trainings with judges and attorneys to assist in resolving issues that the judicial system may see as barriers to a child being placed. The Division has also collaborated with this office to obtain a clearer interpretation of child welfare law and prevention of any child safety concerns. The ICPC office also collaborates with various adoption attorneys and licensed adoption agencies in Mississippi in order to help facilitate private adoption for permanency. Some of the attorneys and agencies that can be contacted for ICPC services are Young Wells Williams, P.A, Attorney Craig Robertson, New Beginnings, Bethany Christian Services, Acorn Adoption, 200 Million Flowers, Lifeline Children Services and Beacon House Adoptions. The Division also aims to maintain a professional and positive working relationship with private agencies and attorneys as the state works through the ICPC process.

C. METHODS OF DATA COLLECTION

Data denoted by the designation 'Report' are collected, as entered by MDCPS staff, from the MACWIS database application. This data is entered into the system through the course of MDCPS casework. The CQI Review Teams, Foster Care Review, Evaluation and Monitoring Unit, and Safety Review Unit, all collect qualitative data by means of reviewing Case Records, Electronic MACWIS Narratives, and through interviews and conferences with staff, families, children, and other relevant parties. Some of the reviews are held to measure compliance, while others are used to measure quality of service. Data which is collected is shared with field staff for purposes of improving practice overall within the agency.

D. DATA QUALITY/LIMITATIONS

The quality of data denoted by the designation 'Report' is dependent upon correct entry by MDCPS staff. Samples of reports are manually validated for consistency on a rotating six-month schedule. Identified data entry discrepancies are reported to responsible MDCPS staff for correction.

IV. UPDATES TO THE 2015-2019 CFSP FOR IMPROVEMENT

MDCPS uses Continuous Quality Improvement (CQI), program support services, and its' stakeholders to make improvements to the 2015-2019 CFSP / APSR updates.

A. LISTED BELOW ARE THE REVISED ORGANIZATIONAL GOALS TO THE 2015-2019 CSFP:

1. Implement the Core Components of the Practice Model which focuses on family-centered practice and captures the requirements of the MSA, and the Child and Family Services Review (CFSR).
2. Recruit and retain staff by creating a healthy work environment and maintaining manageable workloads.
3. Develop and implement a compliant Comprehensive Child Welfare Information System (CCWIS)
4. Improve organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements.
5. Network and collaborate with stakeholders, clients and communities to improve the child welfare services delivery system in Mississippi.

B. GOALS, OBJECTIVES, AND INTERVENTIONS UPDATE

1. **Over-Arching Goal 1:** Implement the Core Components of the Practice Model which focuses on family-centered practice and captures the requirements of the MSA, and the Child and Family Services Review (CFSR).
 - **Update:** Implementation of the core components of the state's practice model was successfully implemented statewide during the 2017 APSR reporting timeframe. There have been no updates to the state's child welfare practice model. MDCPS's practice model includes six (6) inter-connected categories of activities, all aimed at ensuring the safety, permanency, and well-being of children and families. The implementation of the practice model is continually being reinforced by the Center for the Support of Families (CSF). More details about

the State's practice model being reinforced by CSF can be found under Section V: Update on Service Descriptions, F. Monthly Caseworker Visit Formula Grants.

2. **Over-Arching Goal 2:** Recruit and retain staff by creating a healthy work environment and maintaining manageable workloads.

Office of Professional Development (OPD)

- **Sub-Goal 1:** "90% of newly hired frontline staff and supervisors will complete 270 hours of pre-service training" supports each of the above goals by ensuring the information trained in Pre-Service training fall into compliance with the implementation of the Practice Model. It also supports our staff by ensuring they receive adequate training and skills prior to beginning casework in the field.
 - **Objective 1:** Staff will attend 270 hours of training
 - **Intervention 1:** The training calendar will be published annually for directors to plan start dates for training for newly hired staff.
 - **Benchmarks and Timeframes:** By July 1st of each calendar year the calendar will be published to the MDCPS connection internal site.
 - **Update:** During the 2015-2019 CFSP/APSR reporting, the Office of Professional Development has continued to publish the training calendar through the state's connection site for all directors and staff to view. The training dates were disseminated prior to the upcoming fiscal year. For the 2017-2018 the calendar was disseminated for the entire year on July 1, 2017. MDCPS continued the targeted hire dates of the 1st or 16th of the month as it created a more fluid process. This shift has been very positive in the planning process. In February 2018, MDCPS ended the contract with the university provider who was delivering training. With this shift, the training dates and training dates are now set by the hiring targets.
 - **Intervention 2:** Training hours will be tracked in a manual tracking system by the Professional Development Unit
 - **Benchmarks and Timeframes:** Annual report will be provided to verify the 90% completion
 - **Outcome:** Staff trained in compliance with the agency procedure
 - **Update:** During the 2019 APSR timeframe and the state's final reporting timeframe this target was met at 100%. All staff who completed pre-service training completed all 270 hours and the

development of the pre-service classes as well as test was completed in our learning management system, Cornerstone.

- **Sub- Goal 2:** “80% of staff will pass the test administered at the end of each classroom training session of pre-service training” supports the above goals in the same manner as Goal 1.
 - **Objective 1:** 80% of staff will take a pass (score of 70 or higher) the 4-test given at the end of each classroom training week
 - **Intervention 1:** Test will be administered weekly at the end of each classroom training week session
 - **Benchmarks and Timeframes:** A manual report will be used to track the test scores on an annual basis.
 - **Outcome:** Staff who are knowledgeable of the subject areas that have been taught in pre-service training
 - **Update:** For the 2018-2019 year 100% of staff who completed training and are working as a frontline supervisor or staff member achieved 70 or higher on each of the 4 tests given in pre-service training. These tests are all administered in our online learning management system.

3. Over-Arching Goal 3: Develop and implement a compliant Comprehensive Child Welfare Information System (CCWIS)

- **Sub-Goal 1:** Develop and implement a compliant Comprehensive Child Welfare Information System (CCWIS)
 - **Objective:** Design/Develop/Implement a replacement case management data system to support MDCPS social work practice, MDCPS business rules, MDCPS policy, and MSA requirements.
 - **Update:** MDCPS is currently engaged with the Children’s Bureau to finalize all plans to procure a CCWIS (Comprehensive Child Welfare Information System).
- **Sub-Goal 2:** Develop a CQI process for Performance Improvement Plans (PIP) across all regions based on performance results of yearly Evaluation and Monitoring (EMU) regional reviews.
 - **Objective:** Create a detailed plan for organized performance improvement plans to guide the regions in improvements across data indicator areas in which performance is under the goal. This would be an

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assignment of the CQI sub team in working with the Regional Implementation sub teams across the state.

- **Intervention 1:** Finalize plans that were begun with the development of CQI in MS directed toward regional PIP plans.
- **Benchmarks and Timeframes:** The timeframe for developing this process is during State Fiscal Year 2015 which begins July 1, 2014 and ends June 30, 2015.
- **Intervention 2:** Prepare CQI, field staff, and Regional Implementation Teams to implement program improvement strategies based on the outcomes of CQI review processes.
- **Benchmarks and Timeframes:** Timeframes for preparation and implementation of the PIP strategies will be determined by a regional implementation schedule for this effort drafted by the CQI sub team along with the Regional Implementation sub team.
 - **Update:** During the 2018 APSR period, the CQI unit was under the leadership of the Deputy Commissioner of Information Technology. During that time, the state's CQI director position became vacant. It was during the state's current reporting period that the CQI Directors' position was filled, the unit was reorganized and restructured under the leadership of the Deputy Commissioner of Child Safety. Furthermore, the CQI processes are operational in the state. Annual case record reviews continue to be done in each region annually. In September 2018, the CQI staff held a traditional styled CFSR review along with the Children's Bureau staff. Additionally, the baseline for PIP monitoring begins in July 2019 and will end in June 2020 with these reviews being conducted by CQI staff.
- **Sub-Goal 3:** Build internal capacity for reports development/maintenance.
 - **Objective:** Develop the in-house capacity to produce the many data reports now produced by a contract provider.
 - **Intervention 1:** Provide training and a transition process by contractor to department staff to prepare them to take on the report-production activities.
 - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled for completion end of calendar year 2014.
 - **Update:** Sub goal 3 is no longer applicable to CQI as report development and CCWIS is within MIS/IT. CCWIS is detailed in its

applicable section. However, a CQI plan is developed annually for MSA purposes as it relates to qualitative provisions to be tracked and reported on quarterly. The plans are due by December 1 of every year. The current plan was approved by the court monitors in April of 2019 although activities within the plan commenced in January 2019.

4. Over-Archiving Goal 4: Improve organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements.

Office of Licensure

- **Sub-Goal 1:** Protect and serve the best interest of children in the Mississippi child welfare system by strengthening and preserving families so children can live safely at home with their parents or relatives.
 - **Objective 1:** Provide a safe environment for the well-being of foster children.
 - **Intervention 1:** Monitor the expedited placement process to identify gaps in practice and assure the safety and well-being of children placed accordingly.
 - **Benchmarks and Timeframes:** Develop and implement a means to track and monitor required pre-screenings of expedited relative placements prior to a child being left in the home by December 2016.
 - **Update:** It was during the final progress period that the Foster Care Licensure and Adoption Unit restructured in staff and tasks. These two units are now separately functioning units and licensure staff no longer recruit for adoptive homes. Prior to a child being placed in an expedited relative placement, a home environment checklist is completed to ensure that home meets minimum safety requirements. A local background check is completed on all adults in the home to ensure the child will be safe until the home is licensed. The CQI Unit no longer tracks the progress of licensing an expedited home. Beginning in September 2018, the Licensure Unit begin tracking expediated relative placements. The Foster Care Licensure Unit receive new assignments every week of newly entered expedited

relative placements. The Unit tracks the placements from the time of assignment until there is a licensing decision made on the home or the child is removed. Tracking consists the two Program Specialist tracking the assigned home for all Expedited Relative Placements for the state utilizing Footprints. Program Specialists use tracker forms to communicate with staff that manages the master tracking form for the Expedited Relative Placements. The tracker forms are updated as Footprints is updated to provide the status and most recent information on the licensure process for the placement. The CQI Unit does a quality review on all homes that are expedited to assure that all documentation that is required is uploaded to SharePoint and that all signatures are provided. The CQI Unit also brings any deficiencies to the attention of the Licensure Unit.

- **Benchmarks and Timeframes:** Expedited relative placements will undergo the full licensure process within ninety (90) days of the child being placed in the home. 80% of pending expedited placements will be licensed within ninety (90) days.
 - **Update:** For the first quarter of 2019, in the Disposition Report sent monthly to Public Catalyst, the Licensure Unit had 167 expedited homes to evaluate where children in care were placed. Of those homes, the state was able to license 95 homes. That is 56.89% of homes submitted for licensure. The other 43.11% of homes were unable to be licensed or the child was removed from those homes for some other reason. Of these 167 homes to be licensed, we were timely on 137 homes (82.04%) and untimely on 30 homes (17.96%). The main reason that the state was untimely was due to the placement not being changed timely.
- **Intervention 2:** Increase the number of homes in each region that are qualified to and willing to accept foster children from the most difficult to place populations.
- **Benchmarks and Timeframes:** Increase number of licensed resource homes statewide by 15% or from approximately 1400 licensed resource homes to 1600 by December 2016.
 - **Update:** This benchmark has been met.

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- **Benchmarks and Timeframes:** Increase number of licensed resource homes statewide by 15% from approximately 1600 licensed resource homes to 1800 by September 2019.
 - **Update:** As of 5/1/19, there are 3495 licensed resource homes in the state. There are 917 relative resource homes and 2578 non-relative resource homes. The goal of licensing is to have 400 new non-relative homes in 2019. The state has already licensed 157 homes as of 5/31/19. The state is set to meet our goal of 160 by 6/30/19.
- **Objective 2:** Achieve permanency for foster children in a timely manner.
- **Intervention 1:** Conduct Rapid Permanency Supports (RPS) to review children in custody who have been in care for two years or longer and are stable in their placements with families willing to provide them with legal permanency.
- **Benchmarks and Timeframes:** Develop and implement a tool for RPS to review cases for at least two (2) regions by May 2017.
 - **Update:** As of January 2017, the Permanency Roundtables have been postponed indefinitely. Permanency Roundtables were postponed indefinitely because the concept became ineffective in Mississippi. Rapid Permanency Supports (RPSs) are being completed statewide. More detailed information about the ineffectiveness of Permanency Roundtables and the new quarterly RPS method can be found in section VIII. Update on Service Descriptions, B. Adoption Promotion and Support Services.
- **Sub-Goal 2:** Take care of and provide for the Mississippi foster children in a manner that ensures the safety, permanency, and well-being of each child in foster care for as long as it is necessary for the child to remain in foster care.
 - **Objective:** Maintain a statewide plan for the recruitment of foster and adoptive families for the state's most difficult to place children in foster care.
 - **Intervention 1:** A recruitment manager has been identified in Foster Care-Licensure Unit to coordinate and support foster parent recruitment and retention throughout the state.
 - **Intervention 2:** Maintains statewide and regional recruitment and retention plan as well as weekly/monthly reporting of activities in each county/region to provide to Public Catalyst monthly.

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- **Benchmarks and Timeframes:** Coordinate the development of statewide and regional recruitment and retention plans; Review and monitor recruitment and retention plans from each region, and support recruitment activities throughout the state on an ongoing basis.
 - **Update:** Update: The 2019 Recruitment Plan has been dispersed to the Bureau Director's in Licensure. They are to have their staff report weekly what their regions have done to recruit for foster parents in each county/region.
- **Intervention 3:** Partner with licensed child-placing agencies to complete home studies for newly recruited resource families in order to expedite the licensure process for relative and non-relative resource applicants.
- **Benchmarks and Timeframes:** Partner with private, licensed contractors to complete home studies in order to expedite the licensure process for relative and non-relative resource applicants through September 2019 and ongoing.
 - **Update:** Canopy Children's Solutions (CCS) and Southern Christian Services for Children and Youth (SCSCY) were awarded the Home Study contracts for the FFY 2016. CCS had completed 96 home studies statewide and their contract was extended to December 31, 2017. SCSCY has also completed 50 home studies and their contractual agreement was extended to December 31, 2017. MDCPS is no longer contracting with these agencies to complete home studies for our agency. Presently, MDCPS is currently contracting with individual social workers for home studies who are completing home studies for Rescue 100 events. All the homes that have been completed during the reporting period have been completed by the contract social workers.

Office of Therapeutic and Prevention Services

- **Sub-Goal 1:** Continue providing Family Preservation, Family Reunification and Family Support services to all 82 counties of the state.
 - **Objective 1:** Draft a Request for Proposal (RFP) beginning in 2015 to address the type of services needed in each county across the state;
 - **Intervention 1:** Draft an RFP to indicate the continued need for this service, and the expanded areas needing service prior to the FY 2016, and contract with a qualified subgrantee to provide the services outlined in the RFP.
 - **Benchmarks and Timeframe: (1)** Within 1 year, the number of counties served will increase from 52 counties to 60 counties. **(2)** Within 3 years, the number of counties served will increase from 52 counties to 76 counties. **(3)** Within 5 years, the number of counties served will increase from 52 counties to 82 counties.
 - **Update:** Since October 1, 2017, the CFSSP program changed to *in-CIRCLE* to reflect the new program and expanded scope for our families. The services were provided by Canopy Children's Solutions and Youth Villages. Since October 1, 2017, Canopy Children's Solutions provided coverage in all 82 counties. As a result, the state has met the Year 4 benchmark and exceeded the projected Year 5 timeframe for statewide coverage for the 2020 APSR reporting timeframe. With both vendors providing coverage within the state, MDCPS remained at its Year 5 benchmark of all 82 counties served.
 - **Intervention 2:** At the end of year three (3), if a qualified subgrantee has not performed according to the scopes of services in the contract, MDCPS will make a determination of how best to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state.
 - **Benchmarks and Timeframe: (1)** Within year one (1), if the subgrantee has not performed according to the scopes of services in the contract, a Performance Improvement Plan will be initiated. **(2)** Within year two (2), if the subgrantee has not performed according to the RFP, an evaluation as to the best way to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state will be the focus.

- **Update:** The new program for family preservation and family reunification services is called *in-CIRCLE Family Support Services Program*. The in-Circle Family Support Services Program is provided by two (2) subcontractors: Canopy Children’s Solutions and Youth Villages. A performance improvement plan (PIP) is not needed at this stage. Services are evaluated for quality assurance through an independent contractor, Parham Group. This evaluation started with the new contracts for Family Preservation and Family Reunification Services through *in-CIRCLE* which began October 1, 2017. Evaluation areas are program effectiveness, program satisfaction, and referral process.

Each family served by Canopy and Youth Villages receive a North Carolina Family Assessment Scale/Reunification (NCFAS-R) Report at admission and discharge. The cumulative data provided to the MDCPS external evaluator, Parham Group, reflects the total average difference from intake to closure per category. In both Preservation and Reunification cases, previous yearly average totals showed a consistent increase in family functioning because of services provided. Current documentation, continued to reflect that trend with a 16.70 % positive change overall from October 1, 2018 through the last report received from Parham Group dated April 26, 2019. The current program total was slightly more than the previous reporting period for the FFY 2018, which was 16.0%. Current reporting reflected increases evident in all twelve areas assessed. The lowest point of change was in the “Readiness for Preservation” assessment sector at 8 %, with the highest point of change in the assessment of the “Parental Capabilities” at a 26 % increase.

Family satisfaction rates for Canopy through the external evaluation process through Parham Group within the new *in-CIRCLE* program were 88.41 % positive. Post 12-month follow-up data from families indicated a 94 % satisfaction rate. Parham Group has developed satisfaction questionnaires which were conducted with MDCPS and Provider field staff. The outcome was at 90% positive in the October 31, 2018 report. *In-CIRCLE’s* reporting data as of April 26, 2019, reflected that 94% of families

were able to have the children successfully remain in the home due to Family Preservation Services. The same data reflects a 94.96 % success rate for Family Reunification Services where children avoided a return to foster care.

- **Measure:** 92% of the 82 counties in the state will have Family Preservation/ Family Reunification services by 2018.
 - **Update:** All 82 counties within have Family Preservation and Family Reunification Services since October 31, 2017 and this state-wide coverage has continued through presently. It is expected that the projection will be maintained for statewide services.
- **Sub-Goal 2:** Increase the number of families and children served.
 - **Objective 1:** A Request for Proposal (RFP) will be drafted beginning in 2015 to address the type of services needed in each county across the state.
 - **Intervention 1:** Draft an RFP to indicate the continued need for this service, and the expanded areas needing service due prior to fiscal year 2016. Contract with a qualified subgrantee to provide the services outlined in the RFP, with the projected number of families and children to be served each year.
 - **Benchmarks and Timeframe:** **(1)** Within 2 years, the number of families served will increase from 495 families to 600 families. **(2)** Within 4 years, the number of families served will increase from 495 families to 800 families.
 - **Intervention 2:** At the end of year 5, if a qualified subgrantee has not performed according to the scopes of services in the contract, an evaluation will be conducted to determine how best to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state.
 - **Update:** The state did advertise for Comprehensive Family Support Services through a RFP in the 2015 period of performance. Preservation services were not intensive and were time limited to 4 to 8 weeks and Family Reunification services were only 12 to 16 weeks. It was during May 2017, that the state re-issued its RFP for family preservation and family reunification services which is now the in-Circle Program. The scope of services

was revised to make family preservation and family reunification services more intensive and to include services for pregnant women that were affected by substance abuse. The state selected two (2) qualified contractors to provide family preservation and family reunification services. As of year five (5), a total of 1931 families were served through *in-CIRCLE* services up to May 31, 2019, and. There was an increase of 650 more families from July 1, 2018 to May 31, 2019. In that, MDCPS has exceeded the targeted service goal of 800 families.

- **Benchmarks and Timeframe: (1)** Within year one (1), if the subgrantee has not performed according to the scopes of services in the contract, a Performance Improvement Plan will be initiated. **(2)** Within year two (2), if the subgrantee has not performed according to the RFP, an evaluation as to the best way to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state will be the focus.
 - **Update.** No performance improvement plan (PIP) is indicated as the services requested through the RFP have been provided through both contractual providers.
- **Measure 1:** 75% of the projected 800 families will be served through the Family Preservation and Family Reunification services by 2017.
- **Measure 2:** 100% of the projected 800 families will be served through the Family Preservation and Family Reunification services by 2019.
 - **Update:** During the final reporting period, a total of 1931 of the projected families was served through CFSSP, and with the addition of services through *in-CIRCLE*, through May 31, 2019. This total has exceeded the targeted service goal of 800 families.

5. Over-Arching Goal 5: Network and collaborate with stakeholders, clients, and communities to improve the child welfare services delivery system in Mississippi.

CIP Workgroup (CIP)

- **Sub-Goal 1:** To help strengthen court processes with collaboration and/or cross-training between Mississippi Supreme Court, Administrative Office of the Courts' CIP, Mississippi's Commission on Children's Justice, Youth Court personnel, Tribes, and MDCPS Staff to improve permanency outcomes of children within the child welfare system.

- **Objective 1:** Collaborate with the Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, Administrative Office of Courts, National Council of Juvenile and Family Court Judges, the Mississippi Judicial College, National Resource Centers, and the Attorney General's Office at Choctaw to produce Annual Indian Child Welfare Act Conferences.
- **Interventions:** Request technical assistance from the respective Centers for Capacity Building, National Council of Juvenile and Family Court Judges, Choctaw Model Youth Court, and Mississippi Administrative Office of Courts to sponsor the Annual Indian Child Welfare Act Conference.
- **Benchmarks and Timeframes:** August 2016, and annually thereafter, host the Annual ICWA Conference; develop goals for the next year, evaluate the conference and identify changes based on the evaluations, set date for initial collaboration on the next year's conference.
- **Measure 1:** Compare number attending with prior years to see if conference is reaching the target audience.
- **Measure 2:** Compare type of attendees: (a) number from Tribe; (b) number of out-of-state tribes; (c) Number of MDCPS staff; (d) number of judges, referees and chancellors; (e) number of court personnel; (d) number of service providers; and (f) number of other agency personnel.
 - **Update:** On August 14, 2018, the Eighth Annual Indian Child Welfare Act Conference was held at the Silver Star Convention Center at Choctaw, with approximately 165 participants. The opening ceremony included the National Anthem sung in the Choctaw language and a performance by renowned hoop dancer Lyndon Alec. Rae Nell Vaughn, Chief of Staff to Chief Phyllis Anderson, and MDCPS Commissioner, Jess H. Dickinson, welcomed conference participants and provided comments on the collaborative effort and continuing efforts to protect the rights of Native American children in the child welfare system.

Tribal leaders, attorneys, judges, social workers and other professionals who deal with Native American children in a Youth Court setting attended the ICWA conference. The conference is hosted annually by the Mississippi Band of Choctaw Indians, Mississippi Judicial College and the Administrative Office of

Courts. This was developed nine years ago as a Court Improvement Program project to educate state judges and social workers on the requirements of ICWA. The U.S. Congress in 1978 set requirements which apply to state child custody proceedings involving any Native American child who is a member of or eligible for membership in a federally recognized tribe. ICWA sets out federal requirements regarding removal and placement of Native American children in foster or adoptive homes. ICWA aims to preserve tribal culture and safeguard the rights of Native American children to their heritage.

Minnesota Supreme Court Associate Justice Anne McKeig presented the keynote address, titled “The Intersection of Family Court and Child Protection,” in the first session and outlined the requirements of ICWA in the second session. Justice McKeig, a descendant of the White Earth Nation, is the first American Indian Supreme Court Justice in Minnesota. The Minnesota Supreme Court also became a majority female court when she took office in 2016. She is an adjunct professor at Mitchell Hamline School of Law and St. Thomas School of Law. She previously served for eight years on the Minnesota District Court. She is a former Hennepin County Family Court judge in Minneapolis. She was an assistant county attorney for more than 16 years; handling child protection cases and adoption matters with a specialty in provisions of the Indian Child Welfare Act.

A panel discussion focused on ethical issues and mutual respect for the different roles of judges, social workers, parent defenders, and service providers. Panelists were Youth Court Judge Holly Peters of the Mississippi Band of Choctaw Indians, Jurist in Residence John Hudson, Special Assistant Attorney General Paula Broome of the Bureau of Victim Assistance, and Special Assistant Attorney General Joyce Williams. Cheryl Hamby, Tribal Assistant Attorney General, facilitated the panel discussion. The concluding presentation was the documentary film “Two Tribes, Two Judges, One Goal.” The film, which first aired on PBS a year ago, explores the criminal justice reform efforts of Chief Judge Claudette White

of the Quechan Tribe and Chief Judge Abby Abinanti of the Yurok Tribe. Abinanti and White work to preserve their culture and protect the sovereign independence of California's two largest Native American tribes. Their tribal court approach seeks restorative justice without incarceration for families who struggle with historical trauma and inter-generational addiction.

- **Objective 2:** Include Choctaw Social Services in training opportunities available to MDCPS staff as appropriate and have regular meetings with tribal staff and administration on all levels at least twice a year.
- **Intervention 1:** Provide cross-training between the Tribe and MDCPS and establish regular communication on all levels at least twice a year.
- **Benchmarks and Timeframes:** Notify the Tribe of training opportunities provided by MDCPS.
- **Benchmarks and Timeframes:** In counties with tribal populations, between January-June, schedule one meeting; and between July-December, schedule second meeting.
 - **Update:** The Administrative Office of Courts, MDCPS and the Tribe collaborated to develop Indian Child Welfare Act (ICWA) training during the 2015-2019 CFSP timeframe. The upcoming Ninth Annual Training is currently (scheduled for August 13, 2019 on the MBCI Reservation. ICWA training is included in the Child Welfare Professional Development curriculum that is required for all new MDCPS social workers and support staff. MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act.
- **Objective 3:** Continue collaboration with the AOC to implement the MYCIDS program for MDCPS and court information systems interface.
- **Intervention 1:** Develop and Build a new Child Welfare Information System by 2019.

- **Update:** AOC and MDCPS IT departments conducted several meetings during the period under review to discuss automating the transfer of data between MACWIS and MYCIDS. The automated interface would enable workers to better meet required reporting timeframes for both systems. This goal has not been achieved due to MDCPS in the process of changing platforms and lack of funding to complete. During the 2nd APSR reporting timeframe, Mississippi Youth Court Information Delivery System (MYCIDS) was initiated statewide. MYCIDS is the statewide system for the real time management of the activities of the Mississippi Youth Court System. Currently, all 82 counties and one municipal youth court are in some stage of entering data into the Mississippi Youth Court Information Delivery System. AOC continues to provide MYCIDS training sessions across the state to MDCPS workers which lasts 1.5 hours. County Youth Court Judge or Youth Court Referee is required to sign a Certificate of MYCIDS Compliance annually, which includes any limitations on data entry and plan for full implementation. In 2016, certificates were received for all 83 jurisdictions. A percentage of compliance with MYCIDS report is provided to Judges and Referees periodically. The Juris in Residence and the Senior Analyst for MYCIDS works with individual counties where the compliance percentage is low to determine the cause and to correct the issue(s) or make significant progress toward compliance in specific areas.

- **Objective 4:** Continue to work with the Uniform Rules of Youth Court Practice (URYCP) Task Force to revise and update rules as needed.
- **Intervention 1:** Make revisions, corrections or additions to the URYCP for more efficient movement of cases through the court system.
- **Benchmarks and Timeframes:** As the state or federal laws are revised or new laws implemented, or as conflicts between sections are challenged.
- **Objective 5:** Work with the courts on identified barriers to permanency for children and barriers for recruitment and retention of MDCPS staff.
- **Intervention 1:** Meet with individual judges regarding barriers in their court

- **Update:** This objective has been met during the 2018 reporting period.
- **Intervention 2:** Judicial staff have attended training sessions regarding Title IV-E and MDCPS to work toward resolving these barriers.

Congregate Care and Performance Based Contracting Unit

- **Sub-Goal 1:** Improve private provider accountability for permanency outcomes for children and youth.
 - **Objective 1:** Implement a data driven performance based contracting model and on-site review process with private placement providers that incentivizes providers to increase the number of children exiting to permanency and reduce the number who return to custody.
 - **Intervention 1:** Maintain onsite monitoring for private placement providers.
 - **Benchmarks and Timeframes:** Continue to evaluate placement providers to ensure that services delivered are consistent with the MDCPS family centered practice model.
 - **Update:** In 2018, the state only completed four PBC reviews, due to changes in the unit. In July 2018, the PBC Unit moved under Congregate Care and reviews were halted for a time period. In the January 1,2019- June 26,2019 period, there have been eight (8) PBC reviews completed with a total of twenty (20) cases. Staff is currently completing PBC reviews on any agency being relicensed and are completed within 30 days of the license renewal. All agencies are relicensed yearly so all child placing agencies will be reviewed for Performance Based practices. The agencies reviewed provide emergency shelter, therapeutic group homes and foster care. This office is not completing PBC reviews on any Adoption agency as they do not house or manage children after their one-time service of adoption. Of those reviewed so far this year, deficiencies that were noted were around family team meeting and ongoing medicals for children in care. All of these deficiencies have been corrected.

Office of Therapeutic and Prevention Services

- **Sub-Goal 1:** Increase knowledge of support services for staff in the field and stakeholders who provide direct services to families and children.
 - **Objective 1:** Develop a Resource Guide for frontline staff and stakeholders that describes the support services provided by MDCPS.
 - **Intervention 1:** Develop and distribute a comprehensive Resource Guide with a description of services and a listing of contact names, numbers, and instructions on how to access the services.
 - **Benchmarks and Timeframes:** The Resource Guide for Field Support Programs will be completed by June of 2017, and distribution will begin in August after printing. The Guide will be updated annually to reflect changes in programs and/or staff.
 - **Outcome:** Frontline staff will be made aware of MDCPS support services and how to access them; therefore, more families and children will be referred and receive the available support services.
 - **Update:** As stated in the 2019 APSR, the objective to develop a Resource Guide is no longer applicable. The field supports unit have shifted its focus from developing a resource guide for frontline staff and stakeholders to serving as liaisons between MDCPS, stakeholders and community providers. This Intervention no longer includes distribution of a comprehensive resource guide but does include listing resources that are frequently needed within the Microsoft Office 365 SharePoint Application. This allows Field Support units to update this information as needed. Some of the documents currently available to all MDCPS employees in SharePoint application are:
 - Division of Children and Youth Services Directory compiled by Department of Mental Health
 - Placement Directory with emergency shelters
 - Process for making a therapeutic referral.
 - Acute and Residential Treatment Directory
 - American Academy of Pediatrics Guidelines
 - EPSDT providers across the state

Also to mention, MDCPS Field Support units have visited county offices and held meetings with community providers to increase caseworker, stakeholder and community provider awareness of

both internal and external supports to ensure that children and families have access to and receive available support services.

- **Objective 2:** To partner with the Mississippi Department of Education (MDE) to provide training to MDCPS leadership on the newly implemented Every Student Succeeds Act (ESSA).
- **Intervention 1:** Collaborate with MDE to develop a joint training regarding ESSA's new federal requirements.
- **Benchmarks and Timeframes:** Trainings in strategically identified locations around the state will commence prior to the end of March and end prior to the end of May 2017. In addition, the training materials and power points have been put on the Education link on the MDCPS connection for staff to access as needed.
 - **Update.** This benchmark has been met.
- **Intervention 2:** Provide assistance with educational concerns of our children in foster and adoptive care on the IDEA Law and MDE policies and procedures for regular education, as well as special education students.
- **Benchmarks and Timeframes:** Assistance to our caseworkers for our children's education needs is provided on an as needed basis as concerns or issues arise.
- **Outcome:** Provide consistent and current educational information and assistance to MDCPS staff throughout the state to ensure educational stability, and the best possible educational outcomes for Mississippi's foster children.
 - **Update-** In May 2018, MDCPS restructured its Education Unit from the Office of Therapeutic Services to the Division of Youth Transition Support Services. This is the same division that administers the Chafee services and Education Training Vouchers programs. YTSS will begin having policy work groups to ensure that our procedures and policy directly correlate and are congruent with the ESSA guidelines and 2nd MSA requirements. Workgroups will consist of local school districts, group homes, and treatment facility personnel and our very own agency staff along with First Place for Youth staff. The Education Liaisons will serve as the facilitators for each work group and have a specific section of the policy to review. Once the recommendations are

made by each group, the revisions will be sent to the Executive Team; comprised of Deputy and Bureau Directors of YTSS unit, Education Director, and Mississippi Department of Education (MDE) Bureau Director and/or designee and MDCPS staff attorney for review. The first workgroup will meet in July 2019.

Additionally, to meet the 2nd MSA provisions, several monitoring tools were also implemented effected February 1, 2019. Education liaisons (EDL) will conduct a weekly teleconference review with COR/ASWS who has the case of child that has come into custody within the last 30 days. Action steps are discussed with the worker and documented in Smart sheet and MACWIS. Educations liaisons will also review the weekly report that identifies and tracks children/youth that have experienced a placement change. To ensure and safeguard the continuity of the child/youth's education experience; the EDL will send a follow-up email with proper steps in completing a BID to the COR worker/ASWS and document in MACWIS the date of completion. Lastly, the liaisons can be engaged through the Education Referral Form to assist and support COR Workers with any and all educational needs for children in foster care. In July 2018 the updated Education Referral form was presented to all MDCPS via e-bulletin. The form outlines all types of educational needs that a child in care may have.

- **Objective 3:** To provide services regardless of cultural or linguistic background to all LEP clients involved with MDCPS.
- **Intervention 1:** Provide interpreter services in all languages to serve the needs of our clients.
- **Intervention 2:** Increase awareness of LEP services provided by MDCPS by providing pamphlets to county offices and providers/stakeholders.
- **Benchmarks and Timeframes:** This service is available for LEP clients when they are involved with MDCPS 24 hours a day, seven days a week.
- **Outcome:** All clients will be served that require LEP services. Data will continue to be captured via Excel/Word documents for interpreting

services rendered until our electronic data system is available to process this information.

- **Update.** MDCPS Interpreter Unit provides interpreter services to all MDCPS staff and clients statewide. Our unit provides each county office with the phone number and contact information for the interpreter assigned to their region. This way when an interpreter is needed the FPS or county worker can contact the interpreter directly via phone or email. The assigned interpreter and FPS worker coordinate together to ensure each LEP client receives services in a timely manner. The interpreter unit also helps to provide all interpretation/translation needs for MDCPS client/worker and assist for the life of the MDCPS case. The unit also applies contract interpreters when unit staff is being utilized in other areas of the state. The most recently updated LEP policy is available on the MDCPS website. From July 1, 2018 to April 26, 2019 the interpreter unit has received a total of 969 referral requests for interpreter services and have interpreted for 452 families. On average our interpreters provide translation/interpretation services to 40 families per month.
- **Objective 4:** To improve the physical, dental and mental health services available to foster children throughout the state.
- **Intervention 1:** Nurse Supervisor to facilitate/access services needed by children in the foster system by coordinating local clinics with MDCPS Offices that are in need of medical facilities to see the foster Children in their care.
- **Intervention 2:** Collaborate with agencies coordinating placement of children identified as medically fragile to allow each child to be seen by a MDCPS Nurse, have their needs assessed, and confirm to the best of their capabilities that these children are getting the optimum Care as outlined by their medical provider.
- **Benchmarks and timelines:** Initial 72-hour assessments, comprehensive physical assessments (within 30 days), mental health (within 30 days) and dental assessments (within 90 days) should not be incomplete due to lack of access to appropriate care and care facilities. Medically fragile children should be seen by a MDCPS nurse in their home

setting and their needs assessed. Referrals should be made for additional services as needed.

- **Outcome:** All children in foster care should have adequate access to medical, psychological and dental treatments to meet their needs.
- **Measure 1:** Data will be captured via MACWIS reports for physical and comprehensive assessments. Mental and Dental assessments are captured via CQI, and Foster Care Review.
- **Measure 2:** Data to be maintained by Nurse Manager of medically fragile children placed through coordinating agencies that are seen by MDCPS nurses, treatments observed, and any referral needed. Data to be shared with Congregate Care Division.
 - **Update:** The nursing unit is currently staffed by 3 RN's with one serving as the nursing supervisor. The unit currently has one vacancy that the agency is working diligently to fill. The unit continues to provide support to the county offices. The nursing unit has enhanced procedures to follow up on children entering custody to ensure that they are receiving medicals, dental and mental health exams timely. The process includes email notifications to county worker and ASWS to alert them of due dates and overdue medicals. The Nursing Unit began piloting this process in August and fully implemented the process on October 1, 2018. The Nursing Unit has provided medical information at preservice trainings during this reporting period. Meetings with Magnolia Health for July and September focused heavily on addressing mental health needs for children in foster care and better access to mental health services. Collaboration in this area continues to improve. MDCPS has points of contact at both Magnolia and Medicaid that assist with identifying appropriate mental health services. These points of contact are also available to help resolve issues related to the quality of mental health services being provided to children in Mississippi foster care system as well as inappropriate discharges from acute and residential settings.

Director of Therapeutic Services, held discussions with the Department of Medicaid to discuss actions that can be taken to increase MDCPS access to health records of children in custody. MDCPS continues to take steps to ensure that medical requirements for children in custody are being met to the greatest extent possible. One of the most challenging medical requirements is the initial medical due within 72 hours of a child entering custody. Another challenge that has been identified through monitoring during this reporting period is getting large sibling groups. The Commissioner has charged the Deputy of Safety and the Office Director of Prevention & Therapeutic Services to engage nurse practitioners statewide in assisting MDCPS to provide the 72 hours medical exams. The Office Director is currently working with Medicaid and Magnolia to assist in identifying the nurse practitioner providers in their network to assist with this project. The MSA indicates that by July 1, 2019, 80% of children shall have an initial medical screening within 7 days of the child's entry into foster care. Performance on this measure was recently tracked for the months of January 2019 through March 2019 and MDCPS was at a 90.1 percent performance rate for the quarter. While this area still presents some challenges, MDCPS is making significant progress in this area.

The MDCPS nurses identify and participate in continuing education and training events when possible. Due to the current vacancy in the unit the nursing supervisor has been attending trainings this year and using the information during meetings and in-services with the unit and others as needed. In March of 2019 the nursing supervisor attended training on Diabetic Medication and Physiology and advancements in Diabetic Testing Devices. In April of 2019, the nursing supervisor attended training on Nutritional Counseling for Diabetics and Weight Loss. The nursing unit has also participated in the annual Magnolia/Medicaid training that is provided to MDCPS workers across the state.

The nursing unit continues to collaborate with Magnolia Healthcare, Medicaid and the MS Department of Mental Health and other providers both in and out of state that provide services to children in the Mississippi foster care system. A representative from the nursing unit and the Director of Field Support Services participates in a bi-monthly meeting with Magnolia and Medicaid. The nursing supervisor has also held meetings with Montgomery Pediatric Nursing unit about the services they provide to some children in care. The nursing supervisor also met with the Social Service Director at Truman W Smith Pediatric Care Center in Texas. In the final assessment period, three hundred sixty-two (362) children were visited by Nursing Unit from July 2018 to May 30, 2019.

Interstate Compact on the Placement of Children (ICPC)

- **Sub-Goal 1:** Designated ICPC liaison in each region
 - **Objective 1:** The focus of the ICPC Unit was the designation of regional liaisons in each region in order to be more efficient in distributing and tracking referrals for better, timely processing.
 - **Update:** During the final reporting period, the ICPC Division has worked to develop more efficient ways to track cases and timeliness to completion by the Safe and Timely Act standards. A smartsheet has been developed to track a case from when it was received to closure within the ICPC office. This Smartsheet also identifies when the case was received, entered into MACWIS and when it was completed as well as sent back to the receiving state. The state also incorporates the notification alerts from the NEICE system with this Smartsheet to improve tracking to meet the Safe and Timely standards. Furthermore, the division continues to work with local offices and other states to adhere to and promote the standards set forth in the Safe and Timely Act of 2006 encouraging timely home studies. An ICPC Quick Reference Guide was also implemented for the training of the licensure staff. The guide specifies the time frame for ICPC cases to be completed in compliance to the Safe and Timely Act of 2006. This requirement

was also added to MDCPS' ICPC Policy that was revised in August 2018.

- **Sub-Goal 2:** Improve ICPC training to include web-based options.
 - **Objective 1:** The focus of the ICPC Unit is still to enhance understanding the ICPC process through education and training the child welfare workers, courts and child welfare stakeholders.
 - **Update:** The Office of Professional Development has worked with the ICPC Division to develop an ICPC training and it has been offered through Cornerstone.
 - **Intervention 1:** The ICPC Unit will continue to work with Court Improvement to educate judges on the ICPC process. Judges will be invited to attend AAICPC Conference for national training. The ICPC Unit will also develop a quick reference manual for judges to use throughout the state.
 - **Update:** The ICPC Division Director and Program Manager has collaborated with the Court Improvement Program and participated in the 2018 and 2019 Spring Prosecutors Conference. The ICPC team was invited to both conferences to lead a break out session to provide training on the ICPC program to the state's prosecuting attorneys. These sessions are very informative for the participants as well as the ICPC staff. Additionally, it allows for the ICPC team to have direct feedback regarding the problems that workers experience concerning the ICPC process and how it pertains to the courts. The training pointed out specific federal articles and regulations that affect the ICPC process and daily functions.
 - **Timeframe:** Ongoing, this will be a national training done yearly to address the continuous changes in child welfare. The projected date for completion of the manual is currently ongoing.
 - **Update:** In 2019, the ICPC National Training, Business Meeting and Child Welfare Conference was held in Indianapolis, IN. The attendees from Mississippi were the ICPC Division Director, Program Manager and the Director of the Attorney General's Office. Both ICPC staff members participated on the National ICPC Training Committee.

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- **Outcome:** Educating judges on the ICPC process will enhance their knowledge and limit the number of ICPC violations across state lines. By attending ICPC conferences, judges will receive training on policy, procedures, case management and proper wording of ICPC court Orders for timely processing of ICPC requests.
- **Intervention 2:** The ICPC Division will work with the Professional Development Unit to create an ICPC quick-reference guide for county staff. The ICPC Unit will also collaborate with the Professional Development Unit to designate individuals to provide ICPC training. The ICPC Unit will develop a Power Point presentation for these individuals to use as a training tool. The ICPC Unit will develop protocols for private-independent adoptions for attorneys and child placing agencies.
 - **Update:** In March 2018, a quick reference guide was created for licensure staff on what procedures to take when receiving a new incoming ICPC request. It was updated in March 2019. For outgoing cases, a Quick-Reference guide for procedures on generating a board payment and initiating supervision was created. The ICPC Division collaborated with the Deputy Director of Field Operations, Field Deputy Directors and field staff to develop an ICPC quick-reference guide for the field. The quick reference training has been sent statewide to staff. This training consisted of ICPC procedures for “incoming” cases. At this time no information has been sent to the judges, because they are not involved in the planning and placement of ICPC incoming cases. The ICPC has a Power Point presentation that was used in the national ICPC training conference that was provided to the Professional Development. The ICPC Director and the Director for Professional Development discussed this resourceful information to be used as training for county staff. Currently, this information has been submitted for implementation through Cornerstone as a training module for county staff.
- **Timeframe:** Projected completion of 50% by January 2017
 - **Update:** This task was completed in October 2018.
- **Outcome:** The training information will be integrated into the Professional Development Curriculum for training. Training material will be made accessible to field staff, court personnel, private attorneys and

stakeholders. This will allow for a more uniform approach to the ICPC process.

- **Measure 1:** The ICPC Unit will maintain a list of judges attending annual training conferences and other trainings involving ICPC when invited.
- **Measure 2:** The ICPC Unit will work jointly with the Professional Development Unit to maintain training logs of individuals that participate in ICPC trainings.
 - **Update:** The ICPC training was offered through Cornerstone and the ICPC Division in conjunction with Professional Development will be able to track the progress of workers completing the training module.
- **Sub Goal 3:** Implement critical and procedural changes
 - **Update:** A Special Projects Office IV was added to the ICPC Division in February 2019. This has helped with processing ICPC cases timelier. This worker works on other ICPC cases, but one of the main functions is to process Outgoing ICPC cases so that our local office has a faster turn-around for cases being sent to other states for home study requests.
- **Sub Goal 4:** Continued awareness and implementation of Public Law 109-239
 - **Update:** As stated previously, the ICPC Division has developed better ways of tracking cases from start to finish as well as remaining in compliance with the Safe and Timely Act of 2006. With the addition of new staff, the division is inputting more cases into NEICE to obtain better statistical reporting and a Smartsheet has been developed to provide better case management.

V. UPDATE ON SERVICE DESCRIPTION

A. SERVICE UPDATES

The services that are described in the sections below reflect how the state has used the Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1), and the Promoting Safe and Stable Families Program (title IV-B, subpart 2) federal funds to help families. Listed below are the updates to the programs and services for the following:

- The Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1);
- Services provided in the four areas under the Promoting Safe and Stable Families Program (title IV-B, subpart 2):
 - Family Preservation;
 - Family Support;
 - Time-Limited Family Reunification; and
 - Adoption Promotion and Support Services;
- Monthly Caseworker Visit Formula Grants
- Chafee and ETV

B. FAMILY PRESERVATION, FAMILY SUPPORT, AND TIMELY FAMILY REUNIFICATION SERVICES

Through a contractual agreement with Canopy Children's Solutions, MDCPS offered Comprehensive Family Support Services Program (CFSSP) services from July 1, 2017 through September 30, 2017. During that period of performance, the contractor provided Family Preservation, Family Reunification and Family Support Services through the Comprehensive Family Support Services Program utilizing Promoting Safe and Stable Families (PSSF) funding. CFSSP delivered an array of comprehensive, intensive treatment and wrap-around services to children and families of MDCPS. Service delivery occurred primarily in the family home setting or other locations based on the identified needs of the children and families. Examples included, but were not limited to: relative home, foster home, and school setting. The primary goals were: (1) provided services that would protect children and allow them to safely remain in their own homes, avoiding out-of-home placement, (2) provided services to safely and expeditiously reunite children, who were in out-of-home placement, back with their families, and (3) provided the family support needed to stabilize the families.

Beginning October 1, 2017, CFSSP transitioned to the *in-CIRCLE* Family Support Services Program. Youth Villages and Canopy were the two vendors awarded to provide services for

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this program, however, only Youth Villages provided services funded by PSSF funds. Canopy Children's Solutions utilized state general funds to provide services. Both vendors provide Family Preservation Services as defined in "Title IV-B, SUBPART 2 – Promoting Safe and Stable Families" regarding pre-placement preventative services designed to help children at risk of foster care placement remain safely with their families. However, the expanded definition of Reunification Services within the new in-CIRCLE program and the blended funding provided to each vendor offered different definitions for each vendor, but both fit within the PSSF definition structure. Canopy's definition of Reunification Services and those cases they served meet both the Time-Limited Family Reunification Services definition and the Family Preservation Services definition under PSSF of service programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement. There was no 15-month time limit as in the definition required to meet criteria under the definition for Family Preservation Services and Time Limited Family Reunification Services. No Family Support Services were being provided by either vendor nor under PSSF through the *in-CIRCLE* program.

in-CIRCLE is an intensive, home and community-based family preservation, reunification and support services program for families with children who are at risk of out-of-home placement. It was designed and implemented to help break the cycle of family dysfunction by strengthening families, keeping children safe, and reducing foster care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families.

The target population for this program: (1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option. (2) Families with pregnant mothers who were at high risk of the child being removed due to substance use issues once the child was born. Pregnant mothers are being served through the *Program*; as of October 1, 2018; however, the referral process has been revised to include those mothers who do not have other children in the home and methods to engage these families as well.

Referrals to the program continue to come from the court system or MDCPS staff who identified the family and child(ren) as appropriate for and in need of program services. MDCPS

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currently have two staff serving as in-CIRCLE Program Coordinators, one for the northern part of the state and one for the southern part of the state. Previously, a Division Director provided oversight to the 2 staff coordinators over the program. This position is currently vacant, and interviews are being held to fill this position. The structure has changed whereby the two Coordinators report to the Bureau Director on matters related to *in-CIRCLE*. The duties of the two (2) program coordinators consist of the following:

- Review referrals from CPS, Courts, and Judges' staff to determine eligibility for in-CIRCLE or Dorcas by reviewing the online form (Smartsheet), attachments, etc., and reviewing the case in MACWIS.
- Assess families for alternative services.
- Review current case files to determine if cases are handled appropriately in MACWIS.
- Assist with drafting updated policy.
- Meet with the in-CIRCLE staff; attend home visits as needed.
- Provide technical assistance/training as needed.
- Revise packet for staff on the in-CIRCLE referral process as needed.

The North Coordinator is responsible for managing through tracking and assigning referrals, maintaining programmatic data, correcting and requesting any missing documentation from the providers through Smartsheet. Smartsheet is a web-based software service application that is used for collaborating with providers to manage the in-Circle program. Information is also assessed and compiled from Smartsheet along with the caseload data from the states' two contractual providers to generate weekly and monthly reports to senior and executive leadership for review and feedback. The coordinator is also responsible for reviewing child fatality reports to determine if they had received *in-CIRCLE* services. The referral process for the In-Circle program consists of the following procedures:

- In-Circle referrals are submitted through Smartsheet. Referral sources complete the information on the web-based form and upload it in an in-CIRCLE Participation Form. Smartsheet provides a secure method of distribution of referrals to the providers. All providers have access to their specific referrals via a secure email and password protected process through Smartsheet.
- Applications are reviewed for suitability for the program by the in-state coordinators and then forwarded to providers for consideration for services. Once a valid referral is made, the family is visited by program staff within 48 hours. If deemed an emergency, the family is visited as soon as possible, but within 24 hours. Once a Provider receives the referral, attempts are made to contact the family in order to set a schedule of service delivery. If

after contact are made and it is deemed that the family is not in need of the intensity of services provided by the *in-CIRCLE* program, Providers worked with MDCPS and the family to make a more appropriate referral to a community resource that would better suit the needs of the family. Some alternative referrals include referrals to MYPAC (Mississippi Youth Programs Around the Clock) services, FamiliesFirst for Mississippi Centers, local mental health professionals, and community mental health or substance use disorders treatment facilities.

- **Assessment Phase-** During the initial visit, any immediate crisis will be diffused, and the family functioning assessment process began. The *Program* worker(s) assess family functioning and develop an assessment report within 3 working days of referral. Once the family functioning assessment is completed, a Family Service Plan (FSP) is developed with and for the family within seven (7) working days of referral. During this assessment, however, any needed crisis services deemed necessary to protect the child(ren) is to be provided by appropriately licensed and/or credentialed program staff. Once completed, a copy of the family functioning assessment is submitted to MDCPS. A Family Service Plan (FSP) is developed for each family and includes at a minimum the following:
 - Family outcome goals
 - Strategies and procedures for achieving the goals
 - Specific therapeutic, social, and psychological services to be delivered, including intensity, provider(s), tenure, etc.
 - Specific parenting, social, employment, educational, home economic, and other identified concrete supports to be provided, including method for acquiring, provided by whom, intensity, etc.
 - Responsibility of parties
 - Methods for measuring impact of each service and support, as well as progress toward overall goal
 - Timeframe for completion-once completed, a copy of the FSP is submitted to the MDCPS.

- **Program Components and Strategies-** The primary intervention components of the program is engaging and motivating family members, conducting holistic, functional assessments, developing outcome-based goals, using evidence-based practices and interventions, teaching skills to facilitate behavioral change, and developing and enhancing ongoing community supports and resources. The core strategies to be utilized are:

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- **Crisis Management** – program staff are to intervene as soon as possible (within 24 hours of referral) if family is deemed to be in a crisis situation.
- **Accessibility** – Services are provided in the family’s home and community at times convenient to families. Appropriate staff are available 24 hours a day, 7 days a week for crisis intervention.
- **Flexibility** – Intervention support strategies and methods are tailored to meet the needs, values, and lifestyles of each family, as well as, to provide a wide range of services/supports, such as meeting basic needs of food, clothing, and shelter, home economics and management, job readiness, parent education, substance abuse issues, medical care, and navigating public services system to individual and family therapy, individual and family case management, and crisis intervention.
- **Time limited and low caseload** – Families receive 8-12 weeks of intensive interventions with 8-10 hours of face-to-face contact per week. *Program* staff (teams) served a limited number of families at a time so that at least 80-100 hours of services could be provided per family during this period. The family can continue to receive services and supports up to another 12 weeks (period) with reduced intensity if deemed necessary for child safety and family preservation by program staff and MDCPS. Finally, program staff are able to maintain a casual, professional relationship with families in a soft support stage for up to 1 year from time of entering the program to check on from time to time or to receive a call seeking advice or information. Under certain circumstances, a family can be referred back to a more intense stage if in the opinion of the program and MDCPS staff involved it is necessary for child safety and family preservation.
- **Family-centered assessments and service planning** – Assessments were strengths-based and family-focused. Plans were individualized with measurable goals, developed collaboratively with the family, and in sync with the MDCPS plan for the family.
- **Research-based practices** – Program staff use evidence-based interventions, such as (but not limited to) motivational interviewing, behavioral parent training, cognitive-behavior therapy strategies, wraparound, and relapse prevention. Family members are taught a variety of skills, including child behavior management, effective discipline, positive behavioral supports, communication skills, problem-solving skills, mood management skills, safety planning, and routine daily planning.
- **Community engagement and resource building** – Appropriate program staff encourage and facilitate the family’s involvement and engagement in the community for continued relationships and supports, and help families assess their formal and

informal support system, develop and enhance ongoing resources needed to facilitate and maintain change after program is concluded.

- **Collaboration with FamiliesFirst for Mississippi Programs** – Where available and appropriate, program staff utilize the family-supporting services provided through the FamiliesFirst for Mississippi Centers, or similar entities, throughout the state.
- **Termination of Program Services and Supports**- When the family is ready to function safely on their own, based on family functioning evaluation scores, FSP goal accomplishment, and consensus of MDCPS and program staff, a termination summary report is submitted to MDCPS and to the court, if applicable, providing an assessment of the family functioning and outcomes of FSP goals. Peer support for the family is still accessed at this time, when possible. When convinced that program efforts are not enough to ensure sufficient family functioning and child safety, program staff submits a termination report to MDCPS and court, if applicable, providing evidence of a lack of family effort, capacity, and/or willingness to implement the elements of the FSP which may result in termination of parental rights.

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

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Youth Villages <i>in-CIRCLE</i> PSSF Funding (July 1, 2018-May 31, 2019)				
	Number Individuals served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	307	124	See Geographical Locations	Following counties: Tippah, Alcorn, Prentiss, Tishomingo, Union, Pontotoc, Lee, Itawamba, Monroe, Chickasaw, Clay, Lowndes, Yazoo, Madison, Warren, Hinds, Rankin, Copiah, Simpson, Walthall, Marion, Lamar, Forrest, Perry, Greene, Stone, George, Pearl River, Hancock, Harrison, Jackson
Family Support Services	N/A	N/A	N/A	N/A
Time-Limited Reunification and Family Reunification Services	111	51	See Geographical Location	Following counties: Hinds, Stone, Pearl River, Hancock, Harrison, Jackson

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Canopy <i>in-CIRCLE</i> State General Funds (July 1, 2018-May 31, 2019)				
	Number Individuals served	Number Families served	Population served **	Geographic area served **
Family Preservation Services	844	329	Statewide	Statewide
Family Support Services	N/A	N/A	N/A	N/A
Family Reunification Services	359	146	Statewide	Statewide

With the *in-CIRCLE* Program, MDCPS has been able to serve approximately 650 additional families since the last reporting period (July 1, 2018 – May 31, 2019), which increased families served from 1281 to 1931. As a result of expanding the type of services provided through Family Reunification Services, 197 more families have been provided services to assist in a successful reunification process which were served through the reporting period of July 1, 2018 – May 31, 2019 with 1621 children.

C. ADOPTION PROMOTION AND SUPPORT SERVICES

Permanency Support Services (PSS) responsibilities include certifying adoption assistance for children who are legally free for adoption, preparing legal documentation for adoption finalizations, coordinating adoption related policy changes, and offering guidance to Adoption Units housed in MDCPS' county offices. Effective July 1, 2018, PSS restructured its oversight areas by adding Chafee and Education Training Voucher (ETV) services and reassigning the Foster Care and Licensure Unit to the Office of Licensure. The Adoption Units housed in county offices are still supervised by two (2) Bureau Directors, East and West. The Units are task with identifying and licensing adoptive families, preparing legally free children and youth for adoption, and other duties necessary to finalize adoptions for Mississippi's children in-care. The

PSS/Adoption Unit and Adoption Units in the county work together to achieve timely Permanency for Mississippi's children. PSS consist of the following oversight areas:

- Adoption
- Termination of Parental Rights (TPR)
- Chafee and Education Training Voucher Services (ETV)
- Recruitment

Each of MDCPS' fourteen (14) regions in Mississippi have Licensure Units and Adoption Units composed of specialist and supervisors who focus on the recruitment/retention of foster and adoptive homes at the county and level. Both units work hand-in-hand to provide recruitment, pre-service training, in-service training, and home studies in order to license foster/adoptive homes across the state. Adoption Specialists also work with all children/youth in care whose permanent plan includes adoption.

1. Recruitment of Adoptive Families

MDCPS does recruitment through hosting the Heart Gallery at various locations throughout the state. MDCPS Heart Gallery is a physical photograph displays, card rack with children's photo cards with biographies, and digital picture frames. The displays stay up at the facilities for a week to two weeks depending on facilities events and schedule. The Heart Gallery is reserved through the Recruitment Manager. The Recruitment Manager transports and sets up display for the organizations.

Volunteer photographers from across Mississippi help MDCPS with taking photographers for the companies use. The pictures are used for the online Heart Gallery website and Adoptuskids.org. Children's pictures from the volunteers are also used to make their bio cards. MDCPS took over recruitment and event planning from Southern Christian Services contract expired June 30, 2017. MDCPS partners with Adoptuskids.org to list in children that are legally free and available for adoption to their website. The children's profiles are uploaded and updated by the Recruitment Manager in Permanency Support Services Unit. The Recruitment Manager also serves as point of contact for foster/adoptive families looking for information on becoming a resource parent in Mississippi.

Licensed resource families can send an inquiry about a child that they are interested in through the child's profile. Once an inquiry comes into MDCPS the Recruitment Manager responds requesting a copy of the family home study for a potential match. Once the home study is received the Recruitment Manager forwards the home study to the child's Adoption

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Specialist and Adoption Supervisor for review. Adoptuskids also has a form they call Resource Tracking Tool where unlicensed resource families and fill out a form with their personal information that comes into MDCPS recruitment email adoptms.kids@mdcps.ms.gov. The Recruitment Manager responds to inquiry and informs the family on background information about becoming a resource parent and steps to becoming a resource parent.

MDCPS also uses social media such as Facebook to reach a broader audience and message their children in need of adoptive homes. MDCPS has a Heart Gallery page on the state's website that displays the children that are in need of adoptive homes and posts upcoming events for the Heart Gallery. The Heart Gallery Facebook page has contact information on how to contact the agency for recruitment or questions regarding foster/adoption. Any families interested in a child or contacting MDCPS can also send an email to adoptms.kids@mdcps.ms.gov from the page or send an instant message that the recruitment manager is responsible for corresponding with interested family.

MDCPS Heart Gallery has been on display at the State Capitol for State Capitol Day February 14th through February 28th, First Baptist Church March 5th through March 19th, and New Hope Church April 5th through April 23rd, Keesler Air Force Base May 14th through May 23rd, and Lutheran Church of Good Shepard May 23rd through June 4th. New supplies are in process of being ordered to increase awareness of children in need of permanency and multiple displays can be displayed around the state. The Permanency Support Services has hired a Program Specialist that will specifically focus on the aggressive recruitment for high risk population of children in MDCPS custody. 21 children have had their photos taken to be displayed on the MDCPS Heart Gallery during this quarter. 54 children are currently listed on the MDCPS Heart Gallery, 40 have a status of available, 2 have a status of hold-adoptive placement, and 12 have a status of placement pending. During this current State Fiscal Year 579 adoptions have been finalized. See chart below for adoption finalization numbers over the previous four (4) years.

State Fiscal Year	2015	2016	2017	2018
Adoption Finalizations	327	373	302	649

In SFY 2018, MDCPS double the number of adoptions finalized. The agency attributes this success to the Rapid Permanency Supports, Quarterly TPR/Adoption Calls, a streamlined

adoption process, and a concerted effort by MDCPS and its community partners. MDCPS has received three hundred seventy (370) inquiries for children through its MS Heart Gallery. MDCPS has received two hundred forty-seven (247) inquiries for children through Adopt US Kids website. Currently, the agency is exploring a means to track the number of cross jurisdictional placements as a result of the MS Heart Gallery and Adopt US Kids website.

2. Support Group for Foster and Adoptive Families

During the 2019 APSR timeframe, support groups were coordinated by Southern Christian Services for Children and Youth through the Post Adoption Services contract. MDCPS moved coordination of the support groups in house October 1, 2017 to improve the quality of the groups. Currently, the Bureau of Faith Based and Volunteer Services provides awareness to multi-faith churches and local communities regarding foster and adoptive needs within the foster care system. Awareness areas consist of the following:

- Prevention Services
- Foster Family Recruitment
- Heart Gallery
- Encourage Foster Care Support/Ministry
- Oversee and Coordinate Foster and Adoptive Parent Support Groups

The Director of Faith Based and Volunteer Services continued to engage local churches and communities. The focus of these meetings was about increasing community awareness about the critical need for foster homes, resources for foster families, birth families and children in custody. The Director maintains and schedules the foster and adoptive parent support groups across the state. There are currently thirty-nine (39) support groups across the state and current breakdown consist of the following by region: I-N – 4, I-S – 2, II-E – 3, II-W – 3, III-N – 2, IIIS – 2, IV-N – 4, IV-S – 3, V-E – 3, V-W – 4, VI – 3, VII-E – 1, VII-C – 4, and VII-W – 1. Scheduling and notification of support group meetings is done via email. Licensure, Permanency Support Services, and partnering therapeutic foster care agencies are also notified of the scheduled foster support group meetings. Sign In-sheets that documents participation are also collected and distributed to the licensure staff in each region.

3. Post Adoption Services

Throughout the 2015-2019 CFSP, Promoting and Safe and Stable Families funds were used to fund post adoption services through a contractual agreement with Southern Christian Services for Children & Youth. These services were provided to MDCPS’ adoptive families and consisted of the following: counseling, mental health treatment, family preservation and stabilization, crises intervention and management, peer support, and respite. Services are available to adoptive families eligible for adoption subsidy, and available as needed when issues arise with the child and family.

State Fiscal Year	2015	2016	2017	2018	2019
Families Served	6,562	4,353	1,142	796	844

The numbers of families served over the years decreased due to the program being restructured to focus heavily on clinical post adoption services. The program focus shifted heavily towards counseling services, mental health treatment, family preservation services, crisis stabilization, and respite. Prior to the change, adoptive parent trainings and other events were being calculated in the subgrantee’s numbers.

4. Adoption Collaborations

PSS partnered with the Adoption Clinic at Mississippi College's School of Law to complete adoption finalizations and secure new birth certificates for families adopting through MDCPS. The partnership has been in existence for over ten (10) years, and it continues to be a benefit to the Department. Between July 1, 2017 and January 30, 2018, MC Law's Adoption Clinic finalized approximately eighty-five (85) adoptions on behalf of the MDCPS. Lastly, PSS partnered with the Mississippi State University to assist the agency's foster and adoptive parents in meeting their training requirements. The partnership with MSU begin in February of 2018, and it offers in-person training to the Department’s foster and adoptive parents on a quarterly basis. These trainings are free to the state and its foster and adoptive parents.

5. Feedback Loops

Children that need adoptive homes are presented at placement committee meetings. These meetings are held in each region for regional every month, and multi-regional quarterly throughout the year. There are two State level meetings held in March and

September of each year. State Office Recruitment staff and each region have representatives attending teleconference. Private agencies such as Catholic Charities, Mississippi Families for Kids, Methodist Children's Home, and Southern Christian Services, Youth Villages, also attend these meetings to present families that their agency licensed to help place children in MDCPS custody.

6. Rapid Permanency Supports

Rapid Permanency Supports (RPS) were initiated January 2017 to review children who had been in custody at least two years, in a family-based placement at least one year, and who had a permanent plan of adoption or custody with a relative. RPS were implemented in four regions but this eventually led to the development of a collaborative internal reviewing method initiated by the Bureau Director of Permanency Support Services. The goal of RPS was unlike that of Permanency Roundtables (PRT) in that the caseworkers' actions were reviewed. The goal was to identify, address, and eliminate systematic barriers in the various paths to Permanency. The intended outcome for RPS is to move children that enter MDCPS's care towards Permanency timelier and not allow them to linger in the state's care. Permanency Roundtables became ineffective for several reasons:

- caseworkers not seeing the importance of them and using them as a tool to move their cases forward,
- cases being round tabled were sometimes not the cases caseworkers were struggling with,
- the population size was limited for the time it took to complete the Roundtable process,
- the agency needed the ability to review more cases on a larger scale to determine barriers.

When RPS was implemented in Mississippi, the agency focused its efforts on children who had a permanent plan of adoption. The RPS team along with its partners from the Casey Family Programs reviewed several hundred cases in a relatively short amount of time. Barriers that were identified through the RPS process included timely TPR packet submissions, timely adoption after TPR judgment, various issues with youth courts, and limited providers to complete psychological evaluations for the TPR process. MDCPS' Executive team and State Office and Regional, and the Attorney General Office staff worked together to address the barriers identified. In July of 2017, the agency implemented a quarterly regional conference call to identify, address, and eliminate barriers in the termination of parental rights and adoption processes using techniques gained through the RPS process. This method consists of having quarterly call that provide updates on children

who are in the process of TPR and adoption. These quarterly conference calls consist of the following County and State Level Administrative staff: Regional Directors, Adoptions Directors, Area Social Work Supervisors, Deputy Field Directors, Deputy Director for Field Support Programs, Deputy Director of Field Operations Field Resources and an assigned attorney from the Office of the Attorney General.

Presently, all children who have a permanent plan of adoption are reviewed. The statewide number of children who have a permanent plan of adoption is generally between thirteen hundred (1300) and fifteen hundred (1500). An updated list of children with a permanent plan of adoption is run every quarter and provided to regional frontline and adoption staff up to a month in advance. Regional staff gather updates on the cases in preparation for the conference calls. Regions submit their updates by close of business before their respective conference calls, and the information is reviewed on the calls. Additionally, deadlines are set for task to be completed that maybe preventing cases from moving forward.

These calls have been very effective in that they inevitably foster a level of accountability having all parties at the table. Also, the agency saw a drastic increase in the number of termination of parental rights judgments (SFY 17 = 392, SFY 18 = 605) and adoption finalizations (SFY 17 = 302, SFY 18 = 647). Finally, adoption status meetings are very effective in moving the adoption cases forward. The child's case worker, adoption worker, and supervisors are present for this meeting. Tasks needing completion are identified and assigned to staff responsible, pertinent information is gathered, and TPR statuses and hearing dates are discussed. The goal of the adoption status meetings is to move the child towards adoption timely by ensuring that barriers are eliminated. This process has been very valuable to case and adoption workers as it is another means of case evaluation.

7. Inter-Country Adoptions

During the 2015-2019 CFSP timeframe, the agency had only one (1) child adopted internationally and entered state custody due to dissolution of the adoption. This child was adopted from Ukraine through a private adoption agency. The adoption dissolved due to the child attempting to harm his adoptive mother. His current plan is APPLA with a concurrent plan of Adoption. He is currently in a foster home with therapeutic services.

D. INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN (ICPC)

The ICPC Unit continues to maintain compliance with MDCPS policy and practice. The unit works with local offices and other states to adhere to and promote the standards set forth in the Safe and Timely Act of 2006 encouraging timely home studies. The ICPC Unit continues to track data collected through Microsoft Excel spreadsheets. With the addition of NEICE to the ICPC Division, the state is able to provide better qualitative data for ICPC cases. Staff is working to put all cases in the NEICE. ICPC staff also conducted a data search to provide better qualitative data from NEICE and a manual count for quantitative data. From the NEICE report, there was a total of 722 cases handled for Regulation 7, parent, foster, public adoptions, private adoptions and residential placements. The breakdown of these cases are: Regulation 7- 22; Parent and Foster-612; public adoptions -49; private adoptions-39; residential 5. The manual count yielded 1547 cases handled. This number was derived from the current Smartsheet that was created, the Access Mail log that was used during this time. It has now been discontinued, and a manual count of cases. The breakdown of these cases are: Smartsheet-422; Access Log-604; closed cases-395; and residential-126.

ICPC continues its partnership with the Mississippi Department of Human Services (MDHS), Division of Youth Services (DYS), Interstate Compact on Juveniles (ICJ), private adoption agencies, and attorneys for processing of private adoptions. ICPC also collaborates with Administrative Office of Courts (AOC) Court Improvement Program for educational training as well as collaborating with judges to work through barriers to permanency. ICPC also has been working with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) Training Committee on how to introduce the “New Interstate Compact for the Placement of Children” to the legislative body within the state. Currently, MDCPS is working with Alabama to amend this agreement to include all bordering counties along the Mississippi and Alabama border.

E. MONTHLY CASEWORKER VISIT FORMULA GRANTS

Throughout the 2015-2019 CFSP, the Monthly Caseworker Visit Grant has been used to fund vendor services for the Center for the Support of Families (CSF) contractual agreement. CSF has worked with the state to improve the quality of caseworker visits by assisting the state with the development and implementation of the child welfare practice model and the provisions of the Olivia Y Settlement. Tenets of this model included the following, in part; Practice Model Coaching for Continued Practice Model Implementation and Intensive Supervisory Support. Furthermore, CSF continued to support the state by participating in regular leadership meetings with MDCPS centered on training and coaching needs, supporting the MDCPS’s

initiative Safe at Home, regional implementation of the practice model, supporting the professional development needs of MDCPS, and additional support to MDCPS with meeting departmental goods. Please see the descriptive list of services that CSF has provided during FYs 2015-2019:

1. Olivia Y. Settlement Provisions

CSF was originally hired to assist MDCPS to help address the concerns outlined in the Olivia Y Settlement Agreement back in 2009. During the 2015-2019 CFSP timeframe, CSF continued to provide support relating to the Department addressing the Settlement Agreement. During this period in FY 2015, CSF worked with another contractor hired by MDCPS, BCS to make final revisions to data report specifications tied to key Settlement Agreement outcomes, conducted face validity, and produced data quality reports identifying key data entry and data report errors in the developed data reports. Common data entry errors were sent to regional leadership to address with staff to improve the quality of the data reports. CSF also developed training for MDCPS CQI staff on how to conduct data validation of the Olivia Y Settlement Agreement reports. In FY 2016, CSF provided comments and feedback to the court monitor on a case review instrument developed to gather information on Maltreatment in Care cases. Also, during this period, CSF, in conjunction with MDCPS leadership, assisted regions as they developed regional improvement plans and charters for 8 critical Olivia Y data indicators selected by leadership, particularly around caseworker visits and issues of safety. As part of this process, CSF analyzed regional performance and provided leadership with observations and questions to ask of regional leadership through a series of performance management meetings.

2. Practice Model Learning Cycle

The Mississippi's practice model was developed back in 2010 and was updated in FY 2016 to reflect MDCPS's commitment to a trauma focus. The six components of the practice model are Involving Children and Families in Case Planning, Assuring Safety and Managing Risk, Strengths and Needs Assessment, Individualized Case Planning, Mobilizing Services Timely and Preserving and Maintaining Connections. To support the revamped practice model with a trauma focus, CSF developed and implemented the Mississippi Practice Model Learning Cycle (PMLC) which is a learning model that includes preparation activities, multiple virtual learning modules, and structured practice application opportunities. The preparation activities are geared toward regional

leadership and supervisors, giving them an overview of the content of the module and how they should introduce and support their staff for meaningful participation in the module. The virtual learning modules included a virtual learning tutorial, akin to a traditional classroom learning environment, and a virtual practice scenario, where users are given the opportunity to practice the key behaviors they have just learned in the module. The structured application sessions for all staff led by CSF coaches, give opportunities to further practice the key behaviors, how to monitor fidelity to those key behaviors, and how the behaviors can be applied in the field. The PMLC includes content on trauma focused child welfare practice within the context of the six Practice Model competencies. For each Practice Model competency, MDCPS and CSF utilized EMU findings from Calendar Year 2016, MACWIS reports, PAD reports, and CSF Coaches input to identify selected key behaviors, practice areas, and fidelity measures to be focused upon during the virtual learning modules and structured practice application sessions. CSF worked with MDCPS to implement the PMLC in 2017 in seven regions, three regions in 2018, and the remaining four regions are participating in 2019. Following participation, CSF supported regions in practicing the learned behaviors through coaching activities and reinforced through group coaching and learning labs.

3. Coaching support

CSF provided coaching support in all 14 regions throughout the 2015-2019 CFSP timeframe focused primarily on the skills that can be built by training and targeted specific coaching that will improve direct practice, including quality visits. Through their work towards the beginning of this period, CSF recognized that more than one strategy was needed to provide the intensive supervisory support needed to supervisors. Therefore, activities evolved to include a combination of individual mentoring for identified supervisors, group coaching, aggregate coaching labs for supervisors on topics directly related to meeting the requirements of the Settlement Agreement and targeted coaching for individual supervisors identified in collaboration with MDCPS and CSF to support the lessons of the PMLC. In addition to individual coaching, group coaching and coaching labs, other onsite activities include participation in regional meetings, observation and feedback in staffings, observation and feedback in unit meetings and shadowing. CSF also provided the regions off site support including routine communication, group coaching via webinar, as well as providing data analysis and other materials as requested to support improvement efforts.

4. Safe at Home Initiative Support

In support of the MDCPS initiative Safe at Home developed in 2018 and focused on keeping children out of foster care and achieving permanency, CSF assisted the department to develop a theory of change by facilitating planning sessions with state office leadership to develop an initial set of core activities for State Office, Regional and Bureau Leadership, and Supervisors around the five principles that were developed to successfully achieve the goals of Safe at Home: Use of Available Federal Funds, Safety Assessments and Ensuring Services are In Place, In Home and Prevention Services, Partnerships with the Courts and Ensuring Reasonable Efforts, and Promoting Permanency in Foster Care. CSF also helped MDCPS envision a data plan to track implementation of Safe at Home and its impact on children and families in Mississippi, focusing on the work happening within the counties and regions in Mississippi as well as through providers and agencies.

5. Supporting an Annual Statewide Supervisor's Meeting

CSF supported MDCPS by sponsoring the annual statewide supervisor's meeting, aimed at improved consistency, promoting best practice, fostering connections and comradery across the state and regions, and promoting the goals and vision of the department as a whole. The theme of the conferences were: *Trauma-Informed Practice and Adaptive Leadership* (July 21-22, 2015), *New Beginnings* (June 28-30, 2016), *Leading Through Change* (June 21-23, 2017), *Safe at Home* (June 6-8, 2018). As part of this work, CSF assisted MDCPS in developing the agendas to support the themes, identifying keynote speakers, structuring breakout sessions, and evaluating feedback from conference participants.

6. Capacity Assessments and Strategic Planning

Through coaching efforts at the beginning of the CFSP timeframe, seven regions were identified as being ready to participate in the PMLC, while the remaining seven regions were determined as not ready to participate for a variety of reasons, including inadequate staffing or excessive workloads, as well as poor performance in key indicators. For the seven regions determined not ready for participation, CSF coaches conducted capacity assessments to inform CSF's coaching support for the remainder of 2017 with the goal of these regions being prepared to participate in the PMLC during a future time period. The capacity assessments contained information on capacity concerns such as shortage of caseworkers, shortage of supervisors, overdue investigations, backlogs of pending

resource family applications without home studies, and need for a regional leadership structure prepared to oversee implementation of the PMLC. All seven of these regions took part in a planning process based on a Theory of Change approach to prioritize problems to be addressed, identify root causes, and develop strategies to make improvements. CSF developed a template for these regions to use to monitor their progress in key areas, both through data collection and identifying and implementing strategies to address deficiencies. CSF assisted regional leadership monitoring these plans and refining strategies in their assessments, and in 2018, State Office identified three more regions as ready to participate in the PMLC, with the remaining four regions determined ready to participate in 2019.

7. Performance Based Contracting Support

CSF supported MDCPS through the creation of their Performance Base Contracting (PBC) Unit to support their efforts to get PBC contracts off the ground and in establishing monitoring practices for the unit. These efforts consisted of assisting the unit in developing a monitoring tool, rating guidance and provider review protocol for MDCPS PBC staff, piloting some case reviews using the newly developed monitoring tool, assisting the unit with their gathering of data and information to monitor provider performance.

8. Reasonable Efforts Virtual Training

Between February 2018- June 2018, CSF, at the request of MDCPS, developed a virtual training on Reasonable Efforts to support one of the departments identified priorities. As part of this work, CSF provided technical assistance to state office in ensuring the modules developed in articulate were compatible and functioned smoothly with MDCPS's cornerstone application (learning management system). The training, designed with the adult learner in mind, was centered on three modules (Reasonable Efforts to Prevent Removal and Strengthen the Family, Reasonable Efforts to Return the Child Home, and Reasonable Efforts to Achieve Permanency Swiftly). Each module contained five practice scenarios or activities where users are able to practice five key behaviors associated with the module, as well as find additional supporting materials including policy references, resources for workers on the topics of the activities, and resources for supervisors, including staffing note sheets on how to monitor fidelity to the key behaviors. In addition, the training provides additional overall information on reasonable efforts, including the federal and state statutes; why reasonable efforts are important to the Courts, MDCPS, parents and children; how reasonable efforts connects to MDCPS's Practice Model; general resources

and a glossary. CSF also developed one-page guidance for Regional Directors and Supervisors to support and monitor implementation of the Reasonable Efforts Virtual Training. The three-module training was held between July 2018 and November 2018, and CSF also provided coaching assistance as requested by regions to understand and use the principles and key behaviors of the Reasonable Efforts modules.

9. Regional Leadership Training

To further support supervisors in 2017, CSF developed, in conjunction with MDCPS, a leadership training centered around four leadership behaviors to be developed among supervisors and leadership at the regional level. The four leadership behaviors were Monitoring Performance, Clarity of Expectations, Providing Feedback, and Building a Team. As part of this effort, CSF developed materials, worked with coaches to prepare them on how to present the leadership behaviors to supervisors and how to reinforce the behaviors in practice. Also, as part of this effort, CSF helped develop relevant job aides.

10. State Office Support

During the CFSP 2015-2019 timeline, CSF staff have participated in regular monthly face-to-face status update meetings with MDCPS leadership to coordinate work with MDCPS, discuss training and coaching needs, and to identify needs and monitor progress on *Olivia Y* and specific project activities, including:

- working with the MDCPS Continuous Quality Improvement Director to prioritize areas of focus;
- working with MDCPS leadership to hear concerns about child welfare services from the Judiciary;
- assisting with preparation of information to be shared with the Judiciary on current practice and plans moving forward;
- working with the professional development division as they transitioned training activities, including pre-service training, from an outside vendor to an in-house operation;
- assisting MDCPS with their efforts to update their CQI plan; and
- preparation and planning activities for the Safe at Home initiative, helping the department defining the work of the initiative system wide.

F. JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD (CHAFEE PROGRAM) OVERVIEW

Chafee Independent Living Services helps adolescents acquire basic life skills in their journey toward self-sufficiency. All youth ages 14-21 have the opportunity participate in Chafee services regardless of the youth's permanent plan. Refusal by the youth to participate is not a valid reason for non-participation. These services are mandatory and not optional for all youth in care who are at least 14 years old or less than 21 years old. Youth in care ages 14 to 21 are eligible to receive Independent Living Services, based on the youth's individual Transitional Living Plan (TLP). Youth who are members of The Mississippi Band of Choctaw Indians are also eligible for Independent Living Services based on the same criteria for MDCPS youth in care. Youth are eligible for Independent Living Services based upon the following criteria:

- Youth in care, ages 14 until their 21st birthday, are eligible for all independent living services except for the criteria placed on the Education and Training Voucher program;
- Youth who leave custody, ages 18 to their 21st birthday have access to a Transition Navigator and are eligible for community-based referral services until their 21st birthday;
- Youth who enroll in post-secondary education and vocation program are eligible to receive Education and Training Voucher (ETV) services until their 26th birthday or for 60 consecutive months.

Independent Living services were provided through a contractual agreement with Southern Christian Services for Children and Youth (SCSCY). SCSCY provided life skill training, retreats, youth conferences, and other services deemed appropriate based on the collective needs of youth in care. SCSCY continued to provide contracted independent living services until June of 2018 to allow MDCPS to plan and re-structure the Division of Independent Living. As the state began transitioning from its contractual agreement, the Division of Independent Living shifted its scope of services for youth to be more individualized and strength-based. As a result of this shift, all Independent Living Services are presently offered directly by state level staff. Program planning and re-structuring started in January 2018 through a partnership with Mainspring Consulting from Long Island City, New York, Jim Casey from Baltimore, Maryland and First Place for Youth from Oakland, California. Through this partnership the Division of Independent Living Services changed its name to Youth Transition Support Services (YTSS). This was created with a focus to provide individualized supports and resources to youth as they transition out of care. During the 2018 APSR, YTSS functioned under the Office of Field Support Services before transitioning to the Office of Permanency Support Services in June 2018. To continue improving services and practice to independent

living age youth, YTSS expanded its scope of services to include Education Services for all school age youth starting in May 2018. YTSS employ both office based and telecommuter staff. Office based and telecommuter staff are strategically placed in regions throughout the state. June 01, 2018, MDCPS officially launched Youth Transition Support Services. Youth Transition Support Services is the home for Independent Living Services Program, Educational Services and Human Trafficking policy and training work.

1. YTSS Vision

We envision a future where all youth transitioning from foster care in Mississippi have the support they need to successfully transition to adulthood. We work to increase the well-being of young people 14-21 years old as evidenced by stable housing, educational success, financial stability, safety, and permanency and supportive connections.

2. YTSS Guiding Principles

- a. We achieve positive results for youth through purposeful, high quality services;
- b. We promote youth voice by engaging young people in the development, implementation and refinement of our work and practicing a youth-driven approach to service delivery;
- c. We cultivate collaborative relationships within and among our partner organizations and with other community organizations to maximize our ability to collectively support youth;
- d. We use data to measure progress and improve services; and
- e. We foster a culture of accountability throughout the organization for providing high-quality services that produce results for young people.

3. YTSS Structural Oversight

YTSS staff capacity consists of the following: One (1) Bureau Director, two (2) Division Director II (Director of Field Transition Support Services), Eight (8) Transition Navigators, one (1) Director of Education and five (5) Education Liaisons. Currently, the Education Unit has three (3) Education Liaison positions with two (2) of those positions being vacancies. The state is aggressively working to fill these vacancies. Administrative and programmatic oversight consist of the following:

- a. **YTSS Bureau Director-** YTSS Bureau Director is responsible for overseeing the operation of Youth Transitions Support Services. The Directors of Field Transition Support Services and Director of Education are directly under the Bureau Director's leadership. Other responsibilities include but are not limited to overseeing the Chafee

budget, service contact management, policy development and implementation, data analysis for program/service improvement, Modified Settlement Agreement (2nd MSA) reporting, federal reporting, community/provider engagement, and other duties as assigned.

- b. **YTSS Director of Field Transition Support Services-** Directors of Field Transition Support Services are responsible for overseeing daily operations of the Independent Living Program. Each director supervises four (4) Transition Liaisons. In their role, YTSS Field Directors provide training and coaching to Transition Navigators, collect program/service data for review, develop training curricula to improve program practices, work closely with field supervisory staff to assist Transition Navigators training/coaching case workers in the area of Independent Living.
- c. **Transition Navigators-** Transition Navigators are responsible for ensuring case workers integrate independent living specific services into practice with youth, provide technical assistance around developing youth engagement strategies, offer technical assistance to case managers around completing the Youth Appraisal (New Youth Assessment) and assisting workers with crafting youth focused family team meeting agendas based on results from the Youth Appraisal. Other duties include but are not limited to providing direct independent living services to youth ages 14-21, completing monthly reporting requirements, attend case manager staff meetings, attend family team meetings, make independent living stipend request, build community resources and make referral to community resources based on a youth's identified needs.
- d. **Director of Education-** Director of Education is responsible for ensuring the agency makes reasonable efforts to address the education needs of school age children/youth in custody. The Director of Education supervises a total of three (3) education Liaisons. Other duties include but are not limited to acting as the MDCPS/YTSS Education Point of Contact (POC) to the Mississippi Department of Education and state's school districts, monitor Education Record Reviews (ERR), monitor Custody Placement Reviews (CPR), ensuring youth are enrolled in school within seven (7) days of being placed in a foster home or facility, meet Every Student Succeeds Act (ESSA) mandates and provide training and coaching to Education liaisons.
- e. **Education Liaison-**Education Liaisons are responsible for assisting case managers with addressing the educational needs of youth in care. Other duties are, but are not

limited to conducting ERR, conducting CPR, connecting youth to education resources to fit their identified need(s), providing Best Interest Determination (BID) consults to case managers, acting as an education advocate for youth in care and meeting education monthly reporting requirements.

4. YTSS Objectives for Independent Living

YTSS started using the Youth Appraisal to identify needs of all youth ages 14-21 in care. The Youth Appraisal was co-developed by MDCPS/YTSS, First Place for Youth and Jim Casey and adopted by MDCPS as the new Independent Living assessment tool. The Youth Appraisal was implemented statewide on 05/15/2019. The initial assessment will be completed at a youth's next scheduled Family Team Meeting. On the ground coaching and training FOR MDCPS field staff consist of YTSS Directors and Transition Navigators offering technical assistance on administering the Youth Appraisal, using data from assessments to inform practice, assist case workers in completing Transitional Living Plans (TLP) and youth engagement. Coaching activities with case workers started in June 2018.

MDCPS/YTSS is working to implement internal policies around administering the Youth Appraisal, and the expansion of ETV. Additionally, there will be work around expanding community partnership to include representatives from the Mississippi Department of Education, Institution of higher learning and partners with connections to living wage employment. This partnership will also help to start with the development of YTSS policy workgroups. The first workgroup will meet in July 2019.

Another objective of the state will be to implement new youth-driven transition planning process. Training focused on youth engagement was made available to case managers 10/15/2018. Additional face to face regional training to reinforce youth engagement principles started on 05/01/2019. Currently, YTSS does not have a baseline for the data because this information will be collected from the Youth Appraisal.

STATE OF MISSISSIPPI: 2015-2019 CFSP FINAL REPORT

It is the plan of the State to collect the following baseline data six (6) months post Youth Appraisal rollout:

Permanency	<ul style="list-style-type: none"> • # & % with a TLP that identifies supportive relationships • # & % with supportive connections who are engaged in the TLP process • # & % discharged before 21 disaggregated by age
Housing	<ul style="list-style-type: none"> • # & % not experiencing homelessness at their 1st NYTD survey post-discharge from foster care (age 19) • # & % who have a TLP identifying stable housing at discharge that has been updated within the last 90 days
Pregnancy Prevention	<ul style="list-style-type: none"> • # & % who have a child (14 – 21) at age 17, 19, 21 • # & % who report having a child on NYTD that report not having another child by the next survey • # & % who exit care who enrolled in Medicaid
Education and Employment	<ul style="list-style-type: none"> • # & % reporting HS diploma at 19 and 21 • # & % reporting GED at 19 and 21 • # & % enrolled in post-secondary education or vocational training • # & % completing post-secondary education or vocational training • # & % accumulating appropriate credits for age/grade level or # & % of young people passing required tests • # & % who report being employed consistently for 6 months and for 12 months • For youth not in school - # & % earning a livable wage • For youth in school, # & % having sufficient income to meet their needs • # & % depositing dollars in a savings account • # & % purchasing an asset

5. YSS Policy Initiatives

- a. Develop standardized guidelines for recommending discharge to judges, including what housing supports need to be in place;
 - i. **Status:** YTSS in coordination with First Place for Youth is developing bench cards for youth court judges, GALs and other county court representatives. Bench cards will be introduced to all Youth Court Judges by January 2020.
- b. For young people discharging to reunification – use trial home placement;
 - i. **Status:** Youth discharged from custody to reunification are placed with their family on a trial prior to being released from care. This is supported by the MDCPS Foster Care Policy.
- c. Streamline the way ETV dollars are administered and young people are enrolled and extend ETV services to youth until age 26 or for five (5) years;
 - i. **Status:** YTSS/ETV policy to support youth receiving ETV funds until age 26 or five (5) years has been updated and implemented on 10/26/2018.
- d. Exercise Room and Board Funds to assist youth ages 18-21 with community based transitional living placements.
 - i. **Status:** Room and board funds are being used to support youth participating in the Independent Living Apartment Placement Program. This program is offered to youth ages 18-21 enrolled in post-secondary education and working part-time or youth working full-time jobs.

6. Goals for preserving permanent connections consisted of the following:

- a. Provided all current and newly hired MDCPS field staff with hands on technical assistance by providing more county level training and support services to strengthen practice of Independent living placement services provided to eligible youth. During the 2017-18 reporting timeframe, five (5) Transition Navigators were added to the YTSS team. In addition to Transition Navigators, an Education Director and three (3) Education Liaison staff were also added to YTSS staff.
- b. Streamlined community partnership efforts to include First Place for Youth and the Anne E. Casey Jim Casey Initiative. This partnership is focused on increasing the continuity of Independent Living Services provided in-house by MDCPS/YTSS. Additional partners in the areas of education and employment will be added to this partnership as our service array expands.
- c. Developed and released Independent Living training modules to MDCPS staff through Cornerstone. Workers have been assigned the following training modules: Adolescent Brain Development; Healing Comes First; Permanence; Stable Housing; Successful Connections; Young Parents; Family Team Meetings; MDCPS Foster Youth

Needs; Population Needs; Transition Planning; Youth Assessment; and Youth Engagement. YTSS is working to develop a plan to offer the training listed above to foster parents, community partners, and resource parents.

- d. Worked to recruit a minimum of 10 youth per sub-grantee period for ILP apartment placement. Currently, two (2) youth meet the minimum criteria for apartment placement. To help meet this objective, ILP staff would promote Independent Living Apartment Placement program to youth through the Teen Advisory Board (TAB) and field staff.
- e. Developed and implemented a process to conduct annual credit checks on youth in care starting at age 14. Independent living staff already conduct credit/identity theft checks annually. Presently, all youth are asked to sign a written acknowledgement form giving MDCPS permission to submit their personal information to the credit bureaus (Equifax, Experian and Transunion). A copy of the signed acknowledgement is maintained in the youth's County of responsibility (COR) case file. Upon receiving the acknowledgement form, the Division of Independent Living proceeds with contacting the three (3) major credit reporting bureaus to obtain a credit report.

7. YTSS Annual Planned Activities

YTSS annual activities consist of providing more community awareness of the needs of youth in and out of care by participating in local forums and focus groups that openly express and advocate for their services and resources. YTSS in partnership with former foster youth are co-facilitating regional training with MDCPS field staff. The training is focused on youth engagement, family team meetings for older youth in care and youth rights and responsibilities. Current training dates consisted of the following:

- a. Region IV staff were given the choice of attending a training scheduled on May 23 or May 30.
- b. Regions IV-N and IV-S: May 01, 2019
- c. Regions III-N, III-S, V-E, V-W and VI: May 23, 2019
- d. Regions II-E and II-W: May 29, 2019
- e. Regions VI, VII-C, V-E and VII-W: May 30, 2019
- f. Regions I-N and I-S: June 03, 2019

Another annual activity offered by YTSS is Independent Living training for MDCPS staff and Licensed Resource Parents. These training activities consist of the following: quarterly Independent Living training which made be offered at conferences and foster/resource parent trainings. The training priority has shifted from training resource parents to training direct service workers. State is building capacity with its direct

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services workers by enhancing the knowledge and expertise in the area of independent living before training stakeholders. MDCPS staff have received the following ILS training through cornerstone:

- i. **Healing Comes First:** Healing Comes First addresses the trauma of children/youth who enter foster care.
- ii. **Permanence:** Permanence addresses the importance of a youth's need to be connected to family, peers and the community supports.
- iii. **Successful Connections:** Successful Connections discusses how MDCPS Workers can support youth in developing, maintaining and preserving connections to family, peers and community supports.
- iv. **Family Team Meetings:** Discusses the importance of a youth's involvement in family team meetings and how to structure family team meetings for older youth in care.
- v. **MDCPS Foster Youth:** Discusses the rights and responsibilities of youth in foster care.
- vi. **Population Needs and Services:** Discusses needs and services provided by Youth Transition Support Services to address the unique individual plans of foster youth ages 14-21.
- vii. **Adolescent Brain Development:** Discusses the different stages of adolescent development.
- viii. **Stable Housing:** Discusses permanent solutions to affordable and safe housing for youth transitioning out of custody.
- ix. **Young Parents:** Discusses the barriers and additional needs of parenting youth.
- x. **Transition Planning:** Discusses how to effectively develop a realistic plan for youth transitioning out of care.
- xi. **Youth Assessment/Appraisal:** Guides the development of the transitional living plan and explains how to complete each area of the assessment/appraisal.
- xii. **Youth Engagement:** Discusses how to effectively engage youth in all aspects of their case planning.

8. Additional planned activities consisted of the following:

- a. **Module Training Workshops-** Module Training workshops will occur throughout the state. All six identified curriculum areas will be covered twice (2) in each region.
 - i. **Status:** Module Training workshops are facilitated by FamiliesFirst for MS Resource Centers around the state. Youth are referred to FamiliesFirst to

strengthen skills the youth, case worker or Transition Navigator identified as a weakness.

- b. **Independent Living Weekend Retreats-** In addition to recreational and social activities designed to improve interpersonal skills, a variety of skills training will be offered at the Life Skills retreats. Retreats will be based on the Independent Living curriculum, which will teach both hard and soft life skills. Independent Living retreat were suspended due to YTSS program re-structuring.
 - i. **Status:** YTSS will not offer weekend retreat for FFY 2019. Weekend retreats are not part of the new program design.
- c. **Aftercare Services-** Aftercare services shall be offered to youth age eighteen (18) to twenty-one (21).
 - i. **Status:** YTSS aftercare will function as an assessment/community-based program to youth out of care ages 18-21. Transition Navigators will administer the Youth Appraisal to youth seeking aftercare assistance to identify needs and make soft referral recommendations.
- d. **Additional Transitional Living Services-** Provide additional transitional services to youth age seventeen (17) to twenty-one (21) years old as they leave MDCPS. Services rendered will assist youth in making a successful transition to adulthood. A successful transition includes the following: Maintaining stable and suitable housing; remaining free from legal involvement; Participating in an educational/vocational program; developing life skills; building social and financial capital; building community connections; and connecting youth to needed community-based resources necessary to pave the path to self-sufficiency.
 - i. **Status:** All eligible youth are encouraged to participate in community-based life skill learning opportunities offered through FamiliesFirst for MS and other community-based organizations. Youth ages 17-21 will be strongly encouraged to strengthen life skills through participation in life skill classes offer by FamiliesFirst for MS and one on one coaching from their Transition Navigator.
- e. **Individual Development Accounts (IDA)-** Encourage youth enrolled in the Aftercare program to obtain an IDA. Leveraged funding from the Jim Casey initiative will be used to start accounts and match IDA fund for an identified asset.
 - i. **Status:** The Jim Casey Initiative financial literacy/asset matching (Opportunity Passport Program) is being implemented to encourage youth to obtain bank accounts. The Jim Casey program offers participating youth a series of financial literacy classes and the opportunity to start a checking and savings account with a local financial institution. Youth can participate in this program for two (2) years. After the two years, Jim Casey will match up to \$5000.00 youth save.

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Youth must identify an asset before Jim Casey will match funds. Youth commonly use match funds for car. Currently six (6) youth have participated and received a match through the Opportunity Passport Program.

Type of Match	Amount of Match
Health	\$70.00
Vehicle, insurance, tag	\$1,627.07
Vehicle	\$2,000.00
Vehicle Insurance	\$100.00
Computer for Education	\$264.50
Vehicle	\$1,250.00
Total	\$5,311.57

- f. **Teen Advisory Boards (TAB)**- Continue to engage youth in independent living program and policy changes/updates through monthly regional meetings and quarterly state level meetings.
- i. **Status:** As of 05/09/2019 YTSS has eight (8) Teen Advisory Boards in the areas served by Transition Navigators. Advisory board activities are held in a central location to allow participation from other regions served by the Transition Navigator. YTSS hosted the SPEAK UP 2019! Technology Based Entrepreneurial Youth Conference on June 10-13, 2019. The focus of Speak-up Youth Conference 2019 was technology exploration through coding and software design, ABCs of post-secondary education and authentic youth engagement. Furthermore, the use of technology was exercised to offer youth the tools to explore ideas, put their ideas into action, develop a product, and overall help develop resilient, confident youth who will be better equipped for the challenges of today and tomorrow. Participating youth received an Acer tablet/computer with a protective case. MDCPS provided technology-based entrepreneurial services to youth in care age fifteen (15) to eighteen (18). A total of eight-one (81) youth participated in this year's conference.

9. Independent Living Support Services and Stipends:

YTSS has made changes to stipends to compliment the new program/services. The Pre and Post Assessment stipend is no longer available. Both Pre and Post Assessments have been replaced with the Youth Appraisal.

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- a. **Life Skills Training Stipend:** A \$25.00 stipend can be earned for the completion of six (6) Skills Hours. These skills groups are available through the Transition Care Coaches (TCC). The Specialist will document earned skills hours and will notify the COR Worker that the youth has accumulated the required hours. The Worker will submit the request to the Independent Living Coordinator through MACWIS under State Funds. Youth will receive hour for hour credit for skills group participation. This stipend will be issued directly to the youth. Teen parents shall receive six (6) hours for completion of parenting classes.
- b. **Teen Advisory Board (TAB) Participation Stipend:** A \$25.00 stipend can be earned for participation in scheduled TAB activities. These trainings are planned through the Transition Care Coaches (TCC). The Specialist will document satisfactory participation in the training and will notify the COR Worker. The Worker will submit the request through MACWIS under State Funds. This stipend will be issued directly to the youth.
- c. **Youth Conference Stipend:** A youth will receive a \$40.00 cash stipend for successful completion of participation in the annual conference. This stipend will be requested in MACWIS by the COR Worker.
- d. **Senior Year Stipend:** A \$600.00 stipend is available to help defray senior/final year expenses for youth receiving a diploma, GED or a Certificate of Attendance at the close of the school/program year in which the stipend is requested. The youth shall also be a participant in Independent Living Program activities. This stipend should be requested during the youth's senior year, in MACWIS, by the COR Worker under State Funds. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. A statement from the youth's school verifying enrollment, as a senior/final year with anticipated graduation/completion being that same academic/program year, must be filed in the paper case record in the county. Typical senior/final year expenses include, but not limited to, pictures, invitations, cap and gown, prom attire, senior trip expenses. All purchases must be receipted, and all receipts kept in the COR office.
- e. **High School Graduation/GED Stipend:** A \$200.00 Graduation Stipend is available to all youth in custody who receive a high school diploma or successfully completing a

GED program. A copy of the diploma or GED Certificate must be filed in the paper case record in the COR office. This stipend can be accessed from the appropriate MACWIS screen. This one-time stipend should be issued to the youth as a graduation gift to spend as the youth wishes. A signed receipt from the youth must be sent to the bookkeeper in the COR.

- f. **College Stipend:** A \$600.00 (1st year of college) College Bound Stipend is available to youth in care who plan to attend a post-secondary education program. A \$250.00 College bound stipend can be requested each year thereafter until their senior year to assist youth with initial college registration needs. This stipend is requested through the appropriate MACWIS screens after the COR Worker receives verification that the youth has been accepted in a post-secondary education program. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. All purchases must be receipted, and all receipts kept in the COR office. Allowable purchases are items needed to furnish a residence (on or off campus) such as, but not limited to bedspread, curtains, rugs, refrigerator, microwave, trunk, bookcase, small appliances, computer, furniture items, and books/resource materials.
- g. **Start-Up Stipend:** A \$1500.00 Start-Up Stipend is available to youth who leave care after turning age sixteen (16) and who have participated in the available Independent Living Program activities. The youth must have been in care for a minimum of six (6) months. This stipend may be requested during the six months prior to release from custody and up to the six months following release from custody. Youth who have been approved for the Independent Living Placement, shall have the option to utilize this one-time stipend upon approval. This stipend must be issued directly to the vendor(s). A reimbursement payment may be issued to an individual/party including the youth in the event a purchase was made and proof of payment was rendered. An itemized receipt must be given to the COR bookkeeper before a check can be issued. All purchases must be receipted, and all receipts kept in the COR office. Acceptable purchases may include any items associated with the establishment of a home such as, but not limited to: dishes, cooking utensils, appliances, linens, furniture, cleaning supplies, curtains, and rugs. The COR Worker should request this one-time stipend through the appropriate MACWIS screens. A youth released from custody at age 17 or older and already has a job may use a portion of this stipend to assist in the

purchase or repair of a vehicle, if the vehicle is needed in the youth's job and if the youth already has the minimal essential items needed to live independently. This youth must show proof of having a driver's license and State required liability insurance.

- h. **Personal Enhancement Stipend:** The Personal Enhancement Stipend is available to youth who need additional financial assistance with secondary educational needs, extracurricular activities, and college prep activities. Education needs include but are not limited to tutoring; GED prep; ACT prep; and/or additional academic opportunities beyond school curricula. Extra-curricular activities include but are not limited to fees for sports; fees for school clubs; participation in other extracurricular activities. College prep activities include but are not limited to housing fees; college/post-secondary education application fees; or college/postsecondary education registration fees. This stipend was developed to fill the financial gaps for youth needing additional funds to participate in school activities and to continue their education beyond high school or GED. The amount of this stipend is based on the need. A maximum of \$500.00 will be allowed per request. Youth are allowed two (2) request per FFY.
- i. **Peer Mentoring Stipend:** A \$25.00 Peer Mentoring Stipend is available to young people participating as a program peer mentor to younger youth in care. A peer mentor must see their mentee in-person at least twice a month to earn the stipend. Mentors are identified through the Teen Advisory Board. Mentor/mentee interaction happens as a part of Teen Advisory Board activities. This stipend was developed to encourage youth participating in Teen Advisory Board to become mentors.

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Support Service/Stipend	FY 17 # Youth	FY 18 # Youth	#Youth +/-	FFY 17: Amount Disbursed	FFY 18: Amount Disbursed	Disbursed +/-
I.L. Aftercare	215	53	-162	200,000.00	42,754.28	-157,245.72
I.L. College Bond Stipend	34	37	+3	\$19,825.73	\$21,467.14	+\$1,641.41
I.L. College Graduation Stipend	0	1	+1	\$0.00	\$100.00	+\$100.00
I.L. Contract Services	546	455	-91	\$0.00	\$0.00	\$0.00
I.L. Educational Training Voucher (ETV)	114	123	+9	\$227,559.10	\$288,029.52	+\$60,470.42
I.L. GED/Certificate of Attendance Stipend	12	16	-4	\$2,600.00	3,120.00	+\$520.00
I.L. High School Graduation Stipend	37	37	0	\$7,500.00	7,364.80	-\$135.20
Initial Pre-Assessment Stipend	14	11	-3	\$390.00	\$290.00	-\$100.00
I.L. Personal Enhancement Stipend	6	21	+15	\$3,264.53	\$5,213.87	+\$1,949.34
I.L. Senior Year Stipend	60	74	+14	\$29,036.02	\$31,675.06	+\$2,639.04
I.L. Skill Stipend	552	569	+17	\$50,220.00	\$46,885.00	-\$3,335.00
I.L. Start-up Stipend	47	78	+31	\$57,600.71	\$98,554.71	+\$40,954.00
I.L. Youth Conference Allowance	80	29	-51	\$3,440.00	\$1,120.00	-\$2,320.00
Youth Conference Clothing allowance	74	6	-68	\$15,825.05	1,200.00	-\$14,625.05
I.L. Youth Trainer Stipend	0	0	0	\$0.00	\$0.00	\$0.00
Total	1,731	1,510	-155	\$617,261.14	547,774.38	-\$69,486.76

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Support Service/Stipend	FY 17/18 # Youth	FY 18/19 # Youth	#Youth +/-	FFY 17/18: Amount Disbursed	FFY 18/19: Amount Disbursed	Disbursed +/-
I.L. Aftercare	53	1	-52	\$42,754.28	\$600.00	\$-42,154.28
I.L. College Bond Stipend	37	41	+4	\$21,467.14	\$27,062.77	+\$5,595.63
I.L. College Graduation Stipend	1	1	1	\$100.00	\$100.00	\$100.00
I.L. Contract Services	455	301	-154	\$0.00	\$0.00	\$0.00
I.L. Educational Training Voucher (ETV)	123	157	+34	\$288,029.52	\$371,250.94	+\$83,221.42
I.L. GED/Certificate of Attendance Stipend	16	5	-11	\$3,120.00	\$1000.00	\$-2,120.00
I.L. High School Graduation Stipend	37	29	-8	\$7,364.80	\$5,800.00	\$-1,564.80
Initial Pre-Assessment Stipend	11	6	-5	\$290.00	\$130.00	\$-160.00
I.L. Personal Enhancement Stipend	21	17	-4	\$5,213.87	\$7,626.28	+\$587.59
I.L. Senior Year Stipend	74	62	-12	\$31,675.06	\$27,138.22	\$-4,536.84
I.L. Skill Stipend	569	199	-370	\$46,885.00	\$9,200.00	\$-37,685.00
I.L. Start-up Stipend	78	130	+52	\$98,554.71	\$188,840.59	+\$90,285.88
I.L. Youth Conference Allowance	29	10	-19	\$1,120.00	\$1,040.00	\$-80.00
Youth Conference Clothing allowance	6	0	-6	\$1,200.00	\$0.00	\$-0.00
I.L. Youth Trainer Stipend	0	0	0	\$0.00	\$0.00	\$0.00
Total	1,510	959		\$547,774.38	\$639,788.80	268,091.44

10. Justifications for Independent Living (I.L.) support services/stipends disbursed to eligible youth for FY 18 and 19:

- a. **I.L. Aftercare:** I.L. Aftercare has experienced a decreased in funds disbursed by \$42,154.28 due to restructuring program and services components. Aftercare services will be provided to youth who exit care age 18-21. Plans to address aftercare needs identified through the Youth Appraisal will make connections to community-based resources.
- b. **I.L. College Bond Stipend:** The I.L. College Bond Stipend has increased by \$5,595.63. This increase is due to both the I.L and Education staff encouraging high school diploma attainment through providing needed educational services to youth, Youth Transition Support Services, Transition Navigators providing MDCPS social workers with information about stipends youth are eligible to receive and placement stability.
- c. **I.L. College Graduation Stipend:** The I.L. college graduation stipend did not increase or decrease. A \$100.00 stipend was received by one (1) youth that completed a post-secondary education program.
- d. **I.L. Contract Services:** There are not contracted I.L. services. I.L. services are operated within MDCPS.
- e. **ETV:** ETV increased by \$83,221.42 This increase is due to MDCPS disbursing ETV funds to youth timely, clearly defining the enrollment process and the Transition Navigators providing onsite coaching/support to youth and MDCPS workers. New policy around how ETV is disbursement has been drafted and implemented.
- f. **I.L. GED Stipend:** Youth receiving the I.L. GED stipend has decreased by \$2,120.00 due to the endless campaign for youth to meet education goal and graduate high school.
- g. **I.L. High School Graduation Stipend:** The I.L. High School Graduation Stipend decreased by \$1,564.80. This decrease is due to extracting financial data prior to youth finishing high school and receiving the stipend.
- h. **I.L. Pre-Assessment Stipend:** The I.L. Pre-Assessment Stipend decreased by \$160.00. This stipend is no longer available.
- i. **Personal Enhancement Stipend:** The Personal Enhancement Stipend increased by \$587.59 due to allowing this stipend to be used to help youth meet education goals through tutoring and taking additional or advanced courses.
- j. **Senior Year Stipend:** The Senior Year Stipend has decreased by \$4,536.84 due to extracting financial data prior to fulfilling all Senior Year Stipend request to meet APSR deadlines.

- k. **I.L. Skill Stipend; I.L. Startup Stipend; I.L. Youth Conference Stipend; and I.L. Youth Conference Allowance Stipend:** The I.L. Skill Stipend has decreased by \$37,685.00. I.L. Startup Stipend has increased by \$90,285.88, the I.L. Youth Conference Clothing Allowance is no longer available, and the I.L. Youth Conference Allowance Stipend has decreased by \$80.00.
- l. **I.L. Youth Trainer Stipend:** No youth assisted in facilitating I.L. training.

11. Collaboration with Youth and Other Programs

For FY 2019 APSR, the state continued to collaborate with youth by selecting them to represent their peers in foster care as members of the Teen Advisory Board (TAB). TAB meetings are youth driven and co-facilitated by Transition Navigators. The Mississippi Youth Alumni Board also assist MDCPS/YTSS with program structure and policy development. The Teen Advisory Board and Youth Alumni Board are engaged in the CFCIP, CFSR, NYTD and other related agency efforts through regular scheduled meetings.

As stated previously, the state has shifted its focus to a smaller partnership board that consist of MDCPS/YTSS, First Place for Youth and Jim Casey. Through this collaboration, this partnership has worked together to restructure Independent Living program and services.

The Independent Living program continues to coordinate efforts by collaborating with the Mississippi Department of Rehabilitation Services, Jim Casey Youth Opportunities Initiative, Methodist Children's Home (Transitional Living Placement for youth with special needs) and the Mississippi Integrated Basic Education and Skills (MI-best) program (GED/High School diploma attainment with progression into post-secondary school opportunities). Additionally, Independent Living has collaborated with governmental or other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking.

Collaboration examples consist of ILP implementing Teen Advisory Board and Youth Alumni Boards to engage government and non-profit agencies to assist in providing needed services to transition age foster youth. Government agencies such as the Mississippi Department of Human Services, Institution of Higher learning (IHL), Community Colleges, Mental Health, Health and Medicaid are engaged to ensure processes to receive services are clear and manageable for youth transitioning out of custody.

Non-profit agencies that focus on education, employment, housing and various needed services are engaged to ensure youth have connections to community-based organizations that can assist them during transition. Participating non-profit agencies are:

- a. Methodist Children's Home: Congregate care/ transitional living facilities;
- b. Catholic Charities (ORR/URM);
- c. First Place for Youth
- d. Jim Casey
- e. Open Arms Health Clinic: Health and counseling services; Free STI testing/treatment; and Services for LGBTQ persons.

12. Additional Partnerships that Offer Intensive Support

- a. **Southern Christian Services for Children and Youth:** Southern Christian Services for Children and Youth was the contract Independent Living provider for 2017/2018 FFY. The agency provides life skill training, mentoring services, aftercare program services and apartment placement services.
- b. **Status:** MDCPS/YTSS ended the contract with Southern Christian Services in June 2018. The services provided in the contract are being provided in-house or through community-based partnerships.
- c. **First Place for Youth:** First Place for Youth, based in Oakland California, is an agency that focused on best practices for transition age youth. First Place has partnered with MDPCS to assist in creating the Youth Transition Support Services program design, youth centered training modules and practice guides for MDCPS workers and building capacity for the Jim Casey Youth Opportunities Initiative.
- d. **Status:** First Place for Youth is continuing to partner with MDCPS/YTSS to improve data collection, policy development/implementation, and program design.
- e. **Jim Casey Youth Opportunities Initiative:** Jim Casey, based in Baltimore, Maryland, is a youth initiative driven agency that focused on youth development based on brain science research and youth empowerment. The agency has partnered with MDCPS and First Place for Youth to implement Race Equity and Inclusion work, the Opportunity Passport Match Savings program and assist MDCPS with building capacity around education and employment resources.
- f. **Status:** Jim Casey is invested in Mississippi's foster care system. The foundation is continuing to provide financial support implement the Opportunity Passport Program.
- g. **Mississippi United to End Homelessness (MUTEH):** MUTEH is a Mississippi based program that offers housing to youth with a mental health diagnosis. MUTEH

provided rent free housing along with intensive case management for up to 24 months. Intensive case management includes but is not limited to: connecting youth to education and employment opportunities, assisting youth make manageable transitions into community settings, and assist youth with managing daily life stressors to ease transition difficulties.

- h. **Status:** MUTEH continues to serve foster youth based on referrals from MDCPS/YTSS staff.
- i. **Mississippi Integrated Basic Education and Skills Training (Mibest):** Mibest, a Mississippi based program, quickly teaches students literacy, work, and college-readiness skills so they can move through school and into living wage jobs. Mibest has dedicated staff and funding to youth who have experienced foster care in Mississippi. This partnership allows MDCPS to connect current and former foster youth to a non-traditional education setting that leads to a living wage job.
- j. **Status:** Mibest continues to look for opportunities to serve older youth in care seeking post-secondary education achievement. MDCPS/YTSS make referrals to Mibest sites based on youth's education goals.

13. Collaboration with Other Federal Programs

Unaccompanied Refugee Minor Programs (URM) for Chafee Services and Education and Training Vouchers: MDCPS works closely with unaccompanied refugee minors in the Education and Training Vouchers Program. MDCPS staff works closely with Catholic Charities' Unaccompanied Refugee Program to ensure that youth are aware of the program and application process. In 2018-2019, six (6) youth from the unaccompanied refugee minors were awarded Education and Training Vouchers and only one youth received apartment services.

14. Consultation with Tribes (SECTION 477(B)(3) (G) of the Act

MDCPS consults with the Mississippi Band of Choctaw Indians (MBCI) about the programs, services and activities to be carried out under the CFIP through written communication. Through meeting with the tribe, the tribe has communicated that there have been no youth to meet Independent Living Services eligibility criteria. Although no youth meet the criteria for Independent Living Services, MDCPS continues its efforts to coordinate program and activities with the tribe. Phone calls, e-mails, and traditional forms of written communication are done to encourage tribal participation. The MDCPS Youth Transition Support Services unit invites Choctaw Child Welfare staff to independent living events and program related meetings. When invited, YTSS will attend Choctaw Child welfare trainings and staff meetings to coordinate services for youth in

this population. Within Mississippi, Choctaw Child Welfare operates outside of MDCPS as its own functioning agency. Although MDCI functions as a separate entity, programs and services continue to be available to youth in the custody of Choctaw Child Welfare. The tribe is constantly made aware of this through email communication. Normally, all youth who are determined to be members of the Choctaw tribe are fully serviced through their child welfare system without assistance from MDCPS. Additionally, MDCPS has a Memorandum of Understanding (MOU) with Choctaw Child Welfare Services that outlines how the state shall proceed in administering and supervising services provided by MDCPS. This MOU guides the procedures in place for both MDCPS and Choctaw Child Welfare to provide needed services to families and youth. Lastly, there have been no concerns for accessing Chafee services.

G. EDUCATION TRAINING VOUCHERS (ETV) AND EDUCATIONAL SERVICES

1. Educational Policy Change and Workgroups

According to our Education Policy, effective June 25, 2018, MDCPS must make all reasonable efforts to ensure continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood when this is in the child's best interests and feasible, and by eliminating the number of school changes the child experiences. Therefore, any child that comes into MDCPS custody or placement changes while in custody, a Best Interest Determination (BID) must take place with the local education agency (LEA)/ district of origin or facility. The custodial agency must notify the LEA within one day that the child has come into care or their placement has changed. All factors should be considered as part of evaluating the appropriateness of the current educational setting, to make a holistic and well-informed determination. In July 2018, a BID form and guide was presented to all MDCPS staff. To further ensure educational stability, our policy dictates that the state designate a point of contact (POC) to support and represent each child. At present, the MDCPS COR workers serve as the POC for every compulsory school-aged child on their caseload. Each LEA has a staff member that serves as POC for their school district.

Although the Education Policy and Procedures final copy was released in June 2018, this unit has started creating policy work groups to ensure that our procedures and policy directly correlate and are congruent with the ESSA guidelines and 2nd MSA requirements. Our workgroups will consist of local school districts, group homes, and treatment facility personnel and our very own agency staff along with First Place for Youth staff. The Education Liaisons will serve as the facilitators for each work group and have a specific

section of the policy to review. Once the recommendations are made by each group, the revisions will be sent to the Executive Team; comprised of Deputy and Bureau Directors of YTSS unit, Education Director, and Mississippi Department of Education (MDE) Bureau Director and/or designee and MDCPS staff attorney for review. The first policy work group will be July 1, 2019.

2. Collaboration with Mississippi Department of Education (MDE)

MDCPS and MDE work in partnership to promote the educational stability for all children in foster care. MDCPS/ MDE Joint Guidance provides clear and concise educational placement procedures to ensure educational stability by outlining the roles and responsibilities of each agency. The guidance was issued on the 23rd of June 2017. In accordance with the state policy and procedure, MDCPS and MDE are committed to helping students in foster care remain academically stable while completing courses and advancing to the next grade/level. This partnership is a strength for both agencies to work closely together to monitor and maintain as much educational stability for children in care by implementing Every Student Succeed Act. This law was signed, December 10, 2015 and the implementation began in January 2016. The law emphasizes the importance of limited educational disruption of children in foster care. This law has help to improve the awareness of the unique needs of children in foster care by creating and increasing meaningful dialogue specifically focusing on what is in the best interest of the child.

3. Modified Settlement Agreement (2nd MSA) Updates

- a. To respond accordingly to the 2nd MSA requirements for Education Services; effective February 1, 2019 several monitoring tools were implemented.
- b. 8.2a. MDCPS shall review the educational record of each child who enters custody for the purpose of identifying the child's general and, if applicable, special educational needs and shall document the child's educational needs within 30 calendar days of his/her entry into foster care.
- c. 8.2b. MDCPS shall take reasonable steps to ensure that school-age foster children are registered for and attending accredited schools within seven (7) calendar days of initial placement or any placement change, including while placed in shelters or other temporary placements.
- d. 8.2c. MDCPS shall make all reasonable efforts to ensure the continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood, when this is in the child's best interest and feasible, and by limiting the number of school changes the child experiences.

- e. **8.2a Education Records Review:** EDLs will conduct a weekly teleconference review with COR/ASWS who has the case of child that has come into custody within the last 30 days. Action steps are discussed with the worker and documented in Smart sheet and MACWIS.
- f. **8.2b.2c. Child Custody Placement Change Report:** EDL will review the weekly report that identifies and tracks children/youth that have experienced a placement change. To ensure and safeguard the continuity of the child/youth's education experience; the EDL will send a follow-up email with proper steps in completing a BID to the COR worker/ASWS and document in MACWIS the date of completion.
- g. In addition, EDLs can be engaged through the Education Referral Form to assist and support COR Workers with any and all educational needs for children in foster care. In July 2018 the updated Education Referral form was presented to all MDCPS via e-bulletin. The form outlines all types of educational needs that a child in care may have.

4. Education and Training Vouchers (ETV)

Youth Transition Support Services (YTSS) is responsible for enrolling, approving and tracking current and former foster youth receiving Educational Training Voucher (ETV) funds. This number may increase or decrease from year to year based on the following factors:

- a. Youth attending accredited post-secondary educational programs
- b. Youth's ability to maintain a 2.0 GPA necessary for eligibility
- c. Youth completing the enrollment process required to receive funds
- d. Youth who are eligible to receive ETV funds based on the federal guidelines

The 2018/2019 school year has the highest number of youth receiving ETV since the state began offering the ETV Program. The state has identified an increase in the number of youth entering post-secondary educational programs. YTSS provides support services to assist with youth achieving educational success based on each youth's identified individual needs.

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Yearly Educational Training Voucher (ETV) Enrollment

	2016 / 2017	July 1, 2017 to June 30, 2018	July 1, 2018 to June 30, 2019
NEW (First Time Enrollees)	48	53	67
TOTAL (All Youth Receiving Funds)	96	97	164

5. ETV Policy Updates

MDCPS/YTSS policy has been updated to extend eligibility to youth who experienced custody based on the following criteria:

- a. Youth who have left custody at the age of 16 year or older, and no yet reached 21 years of age;
- b. Youth who were reunified on or after reaching age 16 and have not yet attained 21 years of age;
- c. Youth who were adopted on or after reaching age 16 and have not attained 21 years of age; and
- d. Youth who participated in the ETV Program prior to their 21st birthday.

Youth participating in the ETV Program prior to their 21st birthday are eligible to continue receiving ETV funds until their 26th birthday or for a maximum of 60 months. A month is calculated at 30 calendar days. The months of enrollment so not have to be consecutive. Failure of a class or semester will still be counted for use of ETV funds. Youth who have not participated in the ETV program prior to their 21st birthday will not be eligible for ETV funds.

6. ETV Financial Disbursements

Youth are eligible to receive up to \$5000.00 per federal fiscal year for post-secondary education advancement. Payment of tuition takes priority over non-tuition post-secondary cost. Youth must present proof of tuition payment or loan approval before ETV funds are released. Youth who apply for ETV funds during the enrollment period specified by MDCPS/YTSS will be eligible to the maximum ETV amount. Youth who enroll

after the specified enrollment period ends may receive a decreased amount of ETV funds, based on Chafee ETV availability.

7. 2019 National Youth in Transition Database (NYTD)

MDCPS began offering independent living services to youth age 14 and up in-house through the newly developed Youth Transition Support Services (YTSS) on June 1, 2018. This will allow the agency to improve the outcomes for youth transitioning out of care and broaden the service array available to youth based on individualized needs. NYTD outcomes will directly affect our ability to indicate any gaps in services for youth while in care, during their transition out of care, and once they are out of care by implementing updated policy and procedures identified through the completion of the NYTD survey. The NYTD 2019 reporting period began on October 1, 2018. The NYTD 2019 A data file will be submitted to Administration for Children and Families (ACF) by May 15, 2019 and the NYTD 2019 B file will be submitted to ACF by November 15, 2019.

The Mississippi NYTD 2018 A Served Population and Follow Up Population files were submitted to ACF on April 29, 2018. The Served Population A file contained 913 records and the Follow Up Population A file contained 37 records. The files were compliant and error free. The NYTD 2018 B Served Population and Follow Up Population files were submitted to ACF on November 9, 2018. The Served Population B file contained 844 records and the Follow Up Population B file contained 52 records. The files were compliant and error free. In collaboration with the MACWIS Data Unit and our federal partners, we were able to identify and remap the following data elements allowing us to capture and report more accurate information on youth receiving Independent Living services:

- **Data Element 31:** Room and board financial assistance is a payment that is paid for or provided by the state agency for room and board, including rent deposits, utilities and other household start-up expenses.
- **Data Element 32:** Education Financial Assistance is a payment that is paid for or provided by the State agency for education or training, including allowances to purchase text books, uniforms, computers, and other educational supplies; tuition assistance; payments for educational preparation and support services. This financial assistance also includes vouchers for tuition, vocational education or tuition waiver program paid for or provided by the state agency.

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In 2015, it was reported that the Independent Living Unit was working with MACWIS, MIS and the Policy Unit to address the observations made by Miguel Vierya at ACF concerning the zeros captured in data elements 21,22,29,30,31, and 32. The Independent Living Unit began providing one on one training in each region to address correct documentation for data elements 21,22,29, and 30. The 2016 report reflected our request to remap the following data elements to where the information is currently located:

- **Data Element 31:** Room and board financial assistance is a payment that is paid for or provided by the state agency for room and board, including rent deposits, utilities and other household start-up expenses.
 - Room and board financial assistance is provided by the state through the youth's title IV-E board payment.
 - **Data Element 31** is currently mapped to Supervised Independent Living placement, but after further review and ACF clarification, this data element should be mapped to the youth's Board payment.

- **Data Element 32:** Education Financial Assistance is a payment that is paid for or provided by the State agency for education or training, including allowances to purchase text books, uniforms, computers, and other educational supplies; tuition assistance; payments for educational preparation and support services. This financial assistance also includes vouchers for tuition or vocational education or tuition waiver program paid for or provided by the state agency:
 - Education Financial Assistance is provided by the state though the ETV.
 - Data Element 32 is currently mapped to GED, but after further review and ACF clarification, this data element should be mapped to the youth's ETV payments.

The update for 2017 outlined the data mapping changes that led to more accurate data reporting which was a more correct representation of the services provided by the Independent Living Unit. The state was also able to report the 2010 NYTD launch, the state has informed its partners and stakeholders about NYTD data and also involved them in the analysis of the results of the NYTD data collection or NYTD Review. The NYTD data is shared with partners and stakeholders through various onsite trainings and a compilation of each reporting period's outcomes is shared during those ILP trainings. These outcomes are also made available online, via monthly reports and yearly updates through the Independent Living Program. The

Independent Living Program involves youth and young adults through the Teen Advisory Board by sharing NYTD data outcomes with the youth to develop youth driven plans to offer services identified by youth. Youth are also an integral part of the field staff training as youth trainers to promote accurate documentation. Youth who attend retreats, conferences and module training events give feedback and suggestions about the Independent Living Services offered and how the state can better serve their specified needs. Mississippi's Independent Living Program involves the public and private sectors through the development of Community Partnership Boards comprised of Independent Living staff, youth, contractor staff, local and state representatives, and people representing community businesses to assist youth with accessing local resources surrounding employment, education, transportation, housing, and mental health services. The boards are provided with information gathered from NYTD data collection and youth's feedback in order to develop and identify resources available at a local level for youth aging out of custody in their communities. A list of all youth along with their responses for the data elements was generated in order to verify the information being extracted from MACWIS and submitted to ACF. Furthermore, YTSS provides on-going training to all MDCPS staff which focus on YTSS policy, services and NYTD specific documentation instructions and data requirements. As a direct result of the ongoing training and remapping, the state's data reporting numbers nearly doubled from previous file submissions.

H. ADDITIONAL SERVICE UPDATES

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

Post-Adoption Services in Mississippi remain available through a sub-contract with Southern Christian Services for Children and Youth (SCSCY). These post-adoption services consist of counseling, mental health treatment, family preservation and stabilization, crises intervention and management, peer support, and respite. There is also a public awareness component of this sub-grant which requires that SCSCY raise awareness of the availability and accessibility of these services throughout the state. These public awareness avenues consist of: meeting with the county adoption staff, creating a Facebook and a brochure which identifies their services. These services are available to children adopted from other countries.

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Based upon reviewing the data reported for the AFCARS adoption data elements #33 and #34, the state did not have any adoptive placements from other countries during the 2015-2019 CFSP reporting timeframe. The department, in conjunction SCSCY, intends to raise awareness about the availability of these services through networking with private agencies who provide international home study and adoption services, and other entities accessed by this population of families/children for services.

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

Presented below are the tabled Zero to Five Children Custody Reports during the 2015 - 2019 CFSP/APSR timeframes:

Table 1: Zero to Five Children Custody Report for FY 2020:

As of June 26, 2019, the total number of children 0-5 in custody was 1754: 911 males and 843 females.

	White	Black	American Indian	Asian	Hawaiian	American Indian/ White	Asian/ White	Black/ White	Hawaiian/ White	Un-deter-mined	Total
Male	536	315	1	1	2	1	2	29	1	23	911
Female	466	306		1				38	1	31	843
Total	1002	621	1	2	2	1	2	67	2	54	1754

Table 2: Zero to Five Children Custody Report for FY 2019:

As of June 15, 2018, the total number of children in custody was 5231; 2616 males and 2615 females. Of that total, 1604 were children zero to five years of age

	White	Unknown Race	Asian	American Indian	Black	Hawaiian	Total
Male	497	28	3	0	311	2	841
Female	446	21	0	0	296	0	763
Total	943	49	3	0	607	2	1604

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Table 3: Zero to Five Children Custody Report for FY 2018:

The total number of children in custody as of May 5, 2017 was 6,076; 3,021 males and 3,055 females.

	White	Unknown Race	Asian	American Indian	Black	Hawaiian	Total
Male	749	33	1	3	463	4	1253
Female	725	28	0	2	457	0	1212
Total	1474	61	1	5	920	4	2465

Table 4: Zero to Five Children Custody Report for FY 2017:

The total number of children in custody for the period July 1, 2015 – June 14, 2016 was 8,319; 4,115 males and 4,204 females. Of that total, 2,764 were children zero to five.

	White	Unknown Race	Asian	American Indian	Black	Hawaiian	Total
Male	772	36	3	4	575	4	1394
Female	773	31	0	2	564	0	1370
Total	1545	67	3	6	1139	4	2764

Table 5: Zero to Five Children Custody Report for FY 2016:

The total number of children in custody for the period October 1, 2013 – September 30, 2014 was 7,152; 3538 males and 3614 females. Of that total 2,259 were children aged zero to five.

	White	Unknown Race	Asian	American Indian	Black	Hawaiian	Total
Male	646	18	3	3	486	2	1158
Female	588	33	3	5	472	0	1101
Total	1234	51	6	8	958	2	2259

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Year one (1) of the states' 2015-2019 CFSP/APSR timeframe, MDCPS had a total of 7,152 children in custody with 2,259 children under the age of five. Year 2 of the 2015-2019 was the state's highest number of children in care with a total of 8,319. Of that total for Year 2, 2,764 children were under the age of five. From Year 3 to presently, MDCPS and its stakeholders have increased its efforts to improve policy and practice to significantly reduce the length of time that children are in foster care. As of June 26, 2019, the state had a total of 4,539 children in custody with a total of 1,754 children in foster care under the age of five which is significantly lower than Year 1 and Year 2 custody summaries. Please see the following targeted services and activities directly or through contractual agreements for children under the age of five (5) that positively impact their overall safety, well-being, and permanency:

- i. **Permanency and Concurrent Planning-** Caseworkers engage in permanency and concurrent planning regardless of the age of the child to facilitate permanency for children in foster care. Mississippi's family centered practice uses an approach to permanency and concurrent planning that involves the immediate and ongoing implementation of strategies designed to assure the healthy development of children through a sense of continuity and connectedness.

Adoption is also added to a child's permanent plan when all other plans are no longer appropriate. When this happens, an adoption specialist is assigned to the case to hold regular adoption status meetings. Weekly adoption status meetings are required for infants up to twelve months of age until permanency is achieved. MDCPS continue to have adoption status meeting for children who are free for adoption, but without an identified adoptive placement. These meetings are held monthly for children over twelve months of age. Typically, by the time a child under the age of five is freed for adoption, the adoption finalization can take place within 60-90 days. The state also has quarterly calls that provide updates on children who are in the process of TPR and adoption. This process is known as Rapid Permanency Supports (RPSs).

- ii. **Parent-Child Visitation-** Caseworker visits to families are essential to engaging families and assessing safety and well-being. It is the policy of MDCPS that all families, with whom the agency is engaged, be seen at a minimum twice a month. A successful, purposeful visit ensures a worker develops a connection with a parent/guardian/child, identifies the parent/guardian/child's needs and engages each family member in case planning decisions. During contacts with

- parent(s)/guardian, the worker should assess and document progress on case plans, address the safety and well-being of all children involved and problem-solve situations that are identified.
- iii. **Safety and Risk Assessment and Child and Family Assessments-**The Safety and Risk Assessment is completed during all open investigations. This tool is used to help assess the safety and risk of children and to determine if ongoing services are needed with the family. If it is determined that ongoing services are needed, an In-Home services case is to be opened or appropriate referrals are made for the identified services. When an ongoing service case is opened, the Child and Family Assessments (CFA) are completed. This tool helps to identify areas to be addressed within the family to mitigate harm and/or risk factors and is listed as tasks/goals in the Family Service Plan (FSP). Together the CFA's and FSP's are jointly developed with the family, within 45 days of case opening, and updated every 90 days thereafter as long as the case remains open.
- iv. **Health and Developmental Screenings-** Children entering foster care receive an EPSDT or other comprehensive medical exam within 30 days of entering foster care. EPSDT is Early and Periodic Screening, Diagnostic, and Treatment (EPSDT). The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services. EPSDT is:
- **Early:** Assessing and identifying problems early
 - **Periodic:** Checking children's health at periodic, age-appropriate intervals
 - **Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
 - **Diagnostic:** Performing diagnostic tests to follow up when a risk is identified, and
 - **Treatment:** Control, correct or reduce health problems found
- v. **Family, Preservation, Family Support and Family Reunification-** *in-CIRCLE* is an intensive, home and community-based family preservation, reunification and support services program for families with children who are at risk of out-of-home placement. It was designed and implemented to help break the cycle of family dysfunction by strengthening families, keeping children safe, and reducing foster

care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families. The target population for this program: (1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option. (2) Families with pregnant mothers who were at high risk of the child being removed due to substance use issues once the child was born.

Pregnant mothers are being served through the Program; as of October 1, 2018; however, the referral process has been revised to include those mothers who do not have other children in the home and methods to engage these families as well. Referrals to the program may come from the court system or MDCPS staff who identified the family and child(ren) as appropriate for and in need of program services. MDCPS currently have two staff serving as in-CIRCLE Program Coordinators, one for the northern part of the state and one for the southern part of the state.

- vi. **Maternal, Infant, and Early Childhood Home Visiting** – MDHS, Division of Early Childhood Care and Development (DECCD) receives the Maternal Infant and Early Childhood Home Visiting (MIECHV) Grant. This Grant funds the Healthy Families Mississippi program. This is a voluntary comprehensive home visiting support program that provides family support workers to assist families by linking them to the following community services and resources: child development, nutrition, financial and safety education, and referrals for family support services. Healthy Families Mississippi serves pregnant mothers or families with children three (3) months or younger who are low income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration. Also, Healthy Families Mississippi has implemented the Healthy Families America home visiting model and the Partners for a Healthy Baby parenting curriculum. Healthy Families also serve mothers that are referred by the Comprehensive Addiction and Recovery Act (CARA) program. All services are

provided free of charge. The program serves families in Claiborne, Coahoma, Copiah, Holmes, Humphreys, Issaquena, Jefferson, Neshoba, Sunflower, Sharkey, Tallahatchie, Tunica, Washington and Wilkinson counties. MDCPS continues to serve as a representative on the Mississippi Home Visiting Partnership Advisory Group. Due to the limited counties that are served by Healthy Families, enrollment to Healthy Families have been very limited and only three (3) families have been served.

- vii. **Project Care and Families Strengthening Families**-Starkville Oktibbeha School District Family Centered Programs has two (2) contractual agreements with MDCPS. These agreements consist of Project Care which is funded by the state's CBCAP Grant and Families Strengthening Families which is funded by the Children's Trust Fund. Project Care provides child abuse and neglect prevention services to increase protective factors that include parental resilience, knowledge of parenting, social connections, concrete supports, and social and emotional competence in children for Oktibbeha County families. These services are administered through a two-tiered program focusing on parental educational and support services. Universal services include alerting the public about child abuse and neglect prevention to include identifying and reporting child abuse and neglect.

- viii. **Emerson Family Resource Center activities** -The Starkville Oktibbeha Consolidated School District sub-grantee through the Community Based Child Abuse Prevention Grant (CBCAP) provides services through their Emerson Family Resource Center activities. The program used the Active Parenting curriculum to provide parent education on a weekly basis for parents, grandparents, caregivers, and future parents. Temporary respite services are provided Monday through Thursday for children eight (8) weeks through five (5) years old to allow parents time for doctor's appointments, grocery shopping, adult education, job interviews, training, etc. Staff administers a home visiting program for families with pregnant mothers or families with newborn children. The program provides for support services and parenting education through the Nurturing Parenting curriculum. In addition, education on child development, breastfeeding and infant safe sleep education is provided. Support Services in the way of case management and support groups are also provided to families and parents in need of support.

- ix. **Infant Safe Sleep**- Beginning in February 2018, the MDCPS Prevention Unit began an Infant Safe Sleep Campaign Initiative with the distribution of prevention gift

packages. This campaign is available to community programs that serves families with expectant or post-partum mothers in high risk categories such as substance abusing mothers, low-income households, teen parents, infants with disabilities, and other high-risk groups. The safe sleep gift package includes a “This Side Up” onesie educating on the suggested sleeping position, a baby wipe case noting the ABC’s of safe sleep, plastic child abuse & neglect/MS Child Abuse reporting hotline bags, a reusable bandage case, and other educational material. During engagement with participants, the program representative reviews the safe sleep brochure and video produced by the National Institutes of Health’s (NIH) Safe to Sleep® Campaign with the parent and then ensures the parent completes the checklist form. Once complete, the program representative provides the gift package to the mother/caregiver. The following providers have partnered with MDCPS in this campaign; Starkville Oktibbeha Consolidated School District, Fairland Treatment Center, Healthy Families Mississippi, Vicksburg Family Development Services, and Southern Christian Services.

Additionally, the Prevention Unit in partnership with Mississippi SIDS and Infant Safety Alliance offers a statewide program for Infant Safe Sleep Practices. The program includes Media Campaigns, direct training and education on safe sleep practices and the provision of Infant Safe Sleep items to new parents or infants. The Infant Safe Sleep Initiative Prevention Program is covered by the Children’s Trust Fund of Mississippi. The effective start date of the program was on June 1, 2018 and it will end on April 30, 2020.

- x. **IDEA (Individuals with Disabilities Act)** - Individuals with Disabilities Education Act (IDEA), seeks to ensure services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities. Infants and toddlers with disabilities (birth-2 y/o) and their families receive early intervention services under IDEA Part C. Children and youth (ages 3-21) receive special education and related services under IDEA Part B.
- xi. **Comprehensive Addiction Recovery Act (CARA) referral services** – As defined in the program instruction, MDCPS is in compliance with the federal requirements for CARA. The agency receives and accepts referrals from medical staff regarding infants born and testing positive for substance use by their mothers. The calls are received by MCI (Mississippi Centralized Intake) and in addition to an ANE

screening, a CARA screening is completed to inform if the criteria are met for a CARA referral versus an ANE referral. The Office of Therapeutic and Prevention Services staff will receive MACWIS tickler notification when a referral is determined to be a CARA intake and then reviews and screens the referral to an appropriate collaborating partner for services. MDCPS therapeutic and prevention services staff works, through Memorandum of Understandings (MOUs), with the Department of Mental Health's bureau of Alcohol and Drug Services, MS State Department of Health (MSDH), Families First of MS, and Healthy Families of MS to refer children and their caregivers for appropriate CARA related services to include a single or combination of addiction services (in and our patient), home visiting services, and healthy parenting learning opportunities.

- xii. **Professional development to foster and adoptive parents regarding the care of children zero (0) to five (5)**- The state requires its foster and adoptive parents to complete pre-service training prior to being licensed, and regular ongoing training on an annual basis. Currently, MDCPS is contracting with two providers to offer pre-service training to its foster and adoptive parents. MDCPS collaborates with Family Resource Center of North Mississippi (FRC) who provides the training in North Mississippi, and Mississippi Community Education Center (MCEC) who provides the training in Central and South Mississippi. Training timeframes consists of three (3) sessions per quarter per region. Training topics include the following:
- Characteristics of Children Served
 - Separation and Attachment
 - Developmental Stages
 - Behavior Management
 - Adoption Issues
 - Blood Borne Pathogens
 - Child Safety Course
 - First Aid/CPR
 - Travel and Finance

3. Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act)

MDCPS continues to see the following underlying conditions contributing to abuse or neglect:

- Substance abuse by caregiver
- Untreated mental illness
- Domestic Violence
- Unrelated caregivers in the home
- Unsafe sleep environments
- Lack of a good, personal support system, including single caregivers, caregivers estranged from extended families, or living in environments not conducive to safe care of children, lack of informal, positive role models

i. **Unsafe Sleep Environments-** There were 37,928 infant births in 2016 in the state of Mississippi and total infant deaths in 2016 were 327. The Mississippi infant mortality rate (IMR) decreased by 6.5% from 2015 to 2016, from 9.2 to 8.6 deaths per 1,000 live births. The Mississippi Infant Mortality 2017 Report recently released by the Mississippi State Department of Health cites the following top three trends as the leading causes of death among newborns and infants between 1 to 4 months in 2016:

- Preterm birth (delivery before 37 weeks of pregnancy) is the leading cause of infant death. In 2016, 13.6% of infants were born preterm and Mississippi experienced an increase in preterm births by 4.3 % from the 2015 rate of 13%. The national preterm birth rate is 9.8%, which makes Mississippi the number one state that has the highest preterm birth rate in the United States.
- Sudden Unexpected Infant Death (SUID) is the second leading cause of death for infants between 1 and 4 months of age. There were 61 SUID caused deaths in 2016: Accidental Suffocation/Strangulation in Bed 33, Unexplained Unspecified 17, and SIDS 6.
- Birth Defects is the third leading cause of infant deaths. In 2016, there were a total number of 39 infant deaths due to congenital malformations.

These numbers comprise 82% of infant deaths out of the SUID category. (Data made available by Mississippi State Department of Health, Office of Vital Records and Office of Health Data and Research.) This equates to the death of approximately

one child each week. An unsafe sleep environment can be a contributing factor (i.e. items in sleeping area, adult beds, and couches).

The Mississippi Child Death Review Panel 2016 Annual Report released by the Mississippi State Department of Health cites the following findings as the leading cause of death for children aged 0-17 years in 2015:

- Of the cases reviewed, accidents were the leading cause of death (63%) with motor vehicle accidents comprising 38% of all non-natural deaths
- Unknown cause of death was the second most frequently recorded category with 15%
- Asphyxia, which is usually associated with infant deaths due to an unsafe sleep environment and practices, was the now the third leading cause of death (14%)
- Firearm injuries (10%) was fourth leading cause of death
- Drowning (8%) was the fifth leading cause of death

The Mississippi Infant Mortality Rate 2017 Report and the 2016 Mississippi Child Death Review Panel Annual Report cite unsafe sleep environments as a continuous common dominator in many of the deaths of infants under one year of age. The MDCPS Prevention Unit utilized prevention resources to combat sleep-related risks to children with public awareness and by educating professionals serving families with children of this age. Further efforts consisting of posters and flyers promoting Safe Sleep practices were used regularly throughout the state by MDCPS and collaborative partners to educate the public.

Also, MDCPS collaborated with the Mississippi Child Death Review Team to assess fatalities related to unsafe sleep practices and explored ways to educate medical staff, law enforcement, and the public. Additionally, MDCPS continued to utilize the Special Investigations Unit to investigate child fatalities in order to provide consistency and expertise. The investigators in this unit tailored their training opportunities to increase their knowledge and skill in specialized areas, including fatalities. The Unit collaborated with law enforcement and medical staff to improve these investigations and to inform ways the agency and the public can benefit from the sorrow of these deaths to prevent others from the same. To combat these preventable deaths, MDCPS has introduced an expanded Infant Safe Sleep Initiative (ISSI). The goal of the program is to make infant safe sleep practice

a norm in Mississippi through targeted evidenced-based programs and messages tailored toward parents and infant caregivers. The ISSI is a multi-faceted initiative that covers public awareness, education and safe sleep related products. All messages and services are consistent with the American of Pediatrics recommendations for safe infant sleeping.

Beginning in February 2018, the MDCPS Prevention Unit began an Infant Safe Sleep Initiative Prevention Gift Package program. This program was available to community programs that served families with expectant or post-partum mothers in high risk categories such as substance abusing mothers and low-income households. MDCPS is partnering with programs that serve teen parents, women with substance use disorders, infants with disabilities, and other high-risk groups. The safe sleep gift package includes a “This Side Up” onesie, a baby wipe case with the ABC’s of safe sleep on the front, plastic child abuse & neglect/ MS child abuse reporting hotline bags, a reusable bandage case, and educational material. The program representative is to review the brochure and safe sleep video produced by the National Institutes of Health’s (NIH) Safe to Sleep® Campaign with the parent and then make sure the parent completes the checklist form. The program representative then provides the gift package to the mother. The program representative is responsible for submitting the previous month completed checklists to the prevention email by the first of every month. The prevention coordinator keeps track of the program’s data: inventory and checklists. The following providers have partnered with MDCPS: Starkville Oktibbeha Consolidated School District, Fairland Treatment Center, Healthy Families Mississippi, Vicksburg Family Development Services, and Southern Christian Services.

Starkville Oktibbeha Consolidated School District- Emerson Family Resource Center entered into a partnership with MDCPS, Prevention Unit on the Infant Safe Sleep Initiative (ISSI) Prevention Program on February 13, 2018. Dr. Joan Butler is the designated program organizational authority and the originally assigned organizational contact is no longer with the school district. Nakesha Weaver is now the newly the designated organizational contact. The organizational contact received 150 gift packages. Thus far, Mrs. Weaver issued 1 gift package on September 13, 2018. The prevention coordinator collected the following demographics on the mother that received the gift package:

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- first time mother
- mother resides in Webster County
- 13 years old

From November 1, 2018 through January 31, 2019 the organizational contact did not issue any safe sleep gift packages. She will begin teaching safe sleep courses in February 2019. This is a new way for her to reach mothers in the area and to gather completed safe sleep checklist forms. In the month of February 2019, the organizational contact issued a total of 11 gift packages. During March 2019, the organizational contact issued a total of 7 gift packages. The prevention coordinator collected the following demographics on the 18 mothers that received the gift packages:

- 13 first time mothers
- 16 mothers reside in Oktibbeha County
- 2 mothers reside in Webster County
- Ages range between 22 to 48 and 29 & 30 are the most reached ages

In the month of May 2019, the organizational contact issued a total of 6 gift packages. The prevention coordinator collected the following demographics on the mothers that received the gift packages:

- 4 first time mothers
- 6 mothers reside in Oktibbeha County
- Ages range between 24 to 44 and the 30-age group the most reached ages

According to the 2017 Mississippi Department of Health Infant Mortality Report, Oktibbeha is one of the most populated counties in the state and from 2012-2016 the infant mortality rate was 9.7. In addition, across the span of 2012-2016 there were 8.8-10.1 infant deaths per 1,000 live births. The Infant Safe Sleep Initiative Prevention Program is continuously striving to double the current amount of reached and targeted mothers in Oktibbeha County, which is battling a highly concentrated number of infant deaths as it relates to the underlying cause of infant unsafe sleep environments.

Fairland Treatment Center is a substance abuse rehabilitation center located in Tutwiler, Mississippi. The organization entered into a partnership with MDCPS, Prevention Unit on the Infant Safe Sleep Initiative (ISSI) Prevention Program on February 8, 2018. Angie Kent is the designated program organizational authority

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and LuAnn Stevenson is the designated organizational contact. Mrs. Stevenson was given a new position within the organization and is no longer the organizational contact. The head nurse was then assigned the position of organizational contact but soon decided to end her employment with the organization. The organizational authority is currently conducting interviews to fill the head nurse position and he or she will be assigned the position of the organizational contact. The original organizational contact received 60 gift packages but due to the organizational contact position currently being vacant there were no safe sleep packages issued during July 1, 2018 through October 31, 2018. There were no safe sleep gift packages issued to mothers in the area from November 1, 2018 through January 31, 2019. The organization has yet to fill the head nurse position and there were no updates from March 1, 2019 to May 30, 2019.

The Mississippi State Department of Health 2017 MS Infant Mortality Report stated from 2012 to 2016 Coahoma County had a total of 8.8-10.1 infant deaths per 1,000 live births. Fairland Treatment Center will continue to uphold the Infant Safe Sleep Initiative Prevention program requirements and assist mothers in gaining infant safe sleep education to continue to fight to eliminate any unsafe sleep caused newborn and infant mortalities. Healthy Families Mississippi entered into a partnership with MDCPS, Prevention Unit on the Infant Safe Sleep Initiative (ISSI) Prevention Program on May 16, 2018. The organizational contact received 200 gift packages. Twenty-five (25) gift packages were issued from July 9, 2018 to October 18, 2018. The prevention coordinator collected the following demographics on the 25 mothers that received gift packages:

- 11 first time mothers
- 15 mothers reside in Wilkinson County
- 5 mothers reside in Tallahatchie County
- 5 mothers reside in Humphreys County
- Ages range between 17 to 40 and 24 is the most reached age

From November 1, 2018 to January 31, 2019 the organizational contact issued 16 gift packages and the prevention coordinator collected the following demographics:

- 5 first time mothers
- 8 mothers reside in Holmes County
- 3 mothers reside in Wilkinson County

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- 2 mothers reside in Copiah County
- 2 mothers reside in Humphreys County
- 1 mother resides in Tallahatchie County
- Ages range between 19 to 36 and 24 is the most reached age

February 2019, the organizational contact issued a total of 15 gift packages. March 2, 2019 to April 30, 2019 6 packages were issued. The prevention coordinator collected the following demographics on the 21 mothers that has received gift packages:

- 7 first time mothers
- 16 mothers reside in Copiah County
- 2 mothers reside in Washington County
- 1 mother resides in Sharkey County
- 1 mother resides in Tallahatchie County
- 1 mother resides in Wilkinson County
- Ages range from 18 to 30 and 28 is the most reached age

May 2019, the organizational contact issued a total of 5 gift packages. The prevention coordinator collected the following demographics on the mothers that has received gift packages:

- 4 first time mothers
- 5 mothers reside in Copiah County
- Ages range from 18 to 28 and the 20-age group was the most reached

The 2017 MS Infant Mortality Report highlights from 2012 to 2016 Copiah County had one of the highest infant deaths per 1,000 live births at a rate of 12.4-20.0. Healthy Families Mississippi will actively focus on targeting more mothers in this county to implement the Infant Safe Sleep program to help to decrease the high number of infant deaths. Vicksburg Family Development Services provides parenting education for first or second-time parents and their children. These services include prenatal classes, home visits, and a preschool education program to provide parents of children prenatal to age four with the knowledge, skills, and support needed to promote positive outcomes for both parent and child. Vicksburg Family Development Service entered into a partnership with MDCPS, Prevention Unit on the Infant Safe Sleep Initiative (ISSI) Prevention Program on May 24, 2018. Kay Lee is the designated program organizational authority and Claudia Taylor is the designated organizational contact. The organizational contact received

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100 gift packages. Mrs. Taylor has issued 19 gift packages from July 3, 2018 through October 12, 2018. The prevention coordinator collected the following demographics on the 19 mothers that has received gift packages:

- 10 first time mothers
- All mothers reside in Warren County
- Ages range between 15 to 35 and 21 is the most reached age

From November 1, 2018 to January 28, 2019 the organizational contact issued 11 gift packages to mothers and the prevention coordinator collected the following demographics:

- 5 first time mothers
- 11 mothers reside in Warren County
- Ages range between 17 to 37 and 23 and 27 are the most reached ages

From March 1, 2019 to April 30, 2019 the organizational contact issued a total of 5 gift packages. The prevention coordinator collected the following demographics on the 5 mothers that has received gift packages:

- 3 first time mothers
- 5 mothers reside in Warren County
- Ages range from 21 to 34 and 27 is the most reached age

During May 2019, the organizational contact issued 2 gift packages. The prevention coordinator collected the following demographics on the mothers that has received gift packages:

- 1 first time mother
- 2 mothers reside in Warren County
- Ages range from 19 to 31

The 2017 MS Infant Mortality Report lists Warren County as one of the 20 most populated counties in the state and from 2012-2016 the total infant mortality rate was 8. In addition, Warren County had 7.1 to 8.7 infant deaths per 1,000 live births in 2012-2016. The Infant Safe Sleep program will continue to make contact with new mothers in the area in order to promote infant safe sleep practices. Southern Christian Services provides children and family services throughout the State of Mississippi and is located in the city of Jackson. The organization entered into a

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partnership with MDCPS, Prevention Unit on the Infant Safe Sleep Initiative (ISSI) Prevention Program on September 10, 2018. The organization also collaborates with the following organizations and or programs: Catholic Charities- Born Free & New Beginnings and Harbor House Chemical Dependency Services. Jaime Himes is the designated program organizational authority and Tenicka Gibson is the designated organizational contact. The organizational contact received 100 gift packages. Mrs. Gibson has issued 6 gift packages from September 27, 2018 through October 18, 2018. The prevention coordinator collected the following demographics on the mothers that has received gift packages:

- 0 first time mothers
- 2 mothers reside in Hinds County
- 1 Rankin County
- 1 Lamar County
- 1 Harrison County
- 1 Lawrence County
- Ages range between 21 to 38 and 31 is the most reached age
- Catholic Charities- Born Free & New Beginnings- 5 mothers served
- Harbor House Chemical Dependency Services- 1 mother served

From December 13, 2018 to January 24, 2019, the organizational contact issued 5 gift packages and the prevention coordinator collected the following demographics:

- 1 first time mother
- 3 mothers reside in Rankin County
- 1 mother resides in Hinds County
- 1 mother resides in Harrison County
- Ages range between 18 to 26 and 18 is the most reached age
- Catholic Charities- Born Free & New Beginnings- 3 mothers served
- Southern Christian Services- 2 mothers served

During February 2019 a total of 3 gift packages were issued and March 1, 2019 to April 30, 2019 a total of 4 gift packages were issued. The prevention coordinator collected the following demographics on the mothers:

- 1 first time mother

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- 3 mothers reside in Hinds County
- 1 mother reside in Sunflower County
- 1 mother reside in Lamar County
- 1 mother reside in Rankin County
- 1 mother reside in Neshoba County
- Ages range between 21 to 30 and 21 is the most reached age
- Catholic Charities- Born Free & New Beginnings- 4 mothers served
- Southern Christian Services- 3 mothers served

During May 2019, the organizational contact issued a total of 3 gift packages. The prevention coordinator collected the following demographics on the mothers that has received gift packages:

- 0 first time mothers
- 2 mothers reside in Hinds County
- 1 mother reside in Harrison County
- Ages range from 28 to 37 and 28 is the most reached age
- Southern Christian Services- 3 mothers served

From 2012-2016, Hinds County has been reported by the 2017 Mississippi Infant Mortality Rate Report as the highest populated county in the state from 2012-2016, Hinds County has been reported by the 2017 Mississippi Infant Mortality Rate Report as the highest populated county in the state and has a total infant mortality rate of 10. Hinds County had 8.8-10.1 infant deaths per 1,000 live births in 2012-2016. The Infant Safe Sleep program will continue to contact new mothers in this particular area in order to promote infant safe sleep practices and further educate mothers on SUIDS and SIDS that the organizational contact reaches. More providers are expected to join the program in the new state fiscal year.

- ii. **Safe Sleep Initiative Promotional Items-** Mississippi SIDS and Infant Safety Alliance was selected to provide a statewide program for Infant Safe Sleep Practices, which is centered on executing The Infant Safe Sleep Initiative (ISSI) Prevention Program. The program includes Media Campaigns, direct training and education on safe sleep practices and the provision of Infant Safe Sleep items to new parents or infants. The Infant Safe Sleep Initiative Prevention Program is covered by the Children's Trust Fund of Mississippi. The effective start

date of the program was on June 1, 2018 and it will end on April 30, 2020. The Prevention Unit issued a total of 3 boxes of MDCPS logo embossed wet wipes, three boxes of wet wipes ABC themed Safe Sleep cases, and ten boxes of safe sleep onesies to MS SIDS Alliance on February 2, 2019, to include in the Baby Basic kits. The MDCPS Hinds County Office also received two boxes of wet wipes, and two boxes of ABC safe sleep-themed cases to distribute during child abuse and awareness month and give to families in need on Social Worker's caseloads. The following community organizations and MDCPS county offices received a subtotal of 18 boxes of wet wipes, 18 boxes of wet wipe cases, and 19 safe sleep onesies to distribute to attendees at events during April, which is national Child Abuse Prevention month:

- United Methodist Women
 - Jackson County Coalition for Families and Children
 - Statewide community outreach to churches and pastors
 - Holmes County CPS
 - Montgomery County CPS event with Winona Public Library
 - Coahoma County CPS
 - East & West Bolivar County CPS
 - Issaquena, Humphrey, & Sharkey County CPS
 - Sunflower County CPS
 - Washington County CPS
 - Holmes County CPS
 - Leflore County CPS
 - Scott County CPS
 - MS Band of Choctaw Indians, Department of Children & Family Services
 - Clarke County
 - Wayne County CPS
 - Tunica County CPS
- iii. **Public Awareness-** The Community-Based Child Abuse Prevention (CBCAP) and Children's Trust Fund of Mississippi funds were used to provide training for MDPCS staff, items for the Safe Sleep campaign and other prevention activities. The PSAs, posters and educational information was provided at conferences and public events for the Safe Sleep Program, Hot Car, and general child abuse and neglect prevention information. MDCPS state office and Prevention Unit staff also attends the annual Choctaw, Mississippi Child Abuse Prevention parade and ICWA conference. MDCPS Prevention Unit continues to exhibit and sponsorship various conferences

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throughout the state. The Prevention Unit has been present as an exhibitor or sponsor at the following conferences:

MS Association of Addiction Professionals	2/28/2018 - 3/2/2018
Municipal Court Judges	6/13/2018 - 6/15/2018
Chief of Police	6/26/2018 - 6/28/2018
Opioid Conference	7/12/2018 - 7/13/2018
Juvenile Justice Symposium	8/1/2018 - 8/3/2018
MS Indian Child Welfare Conference	8/9/2018
MS Gulf Coast Conference on Domestic Violence, Sexual Assault, & Human Trafficking	8/14/2018-8/16/2018
MS Drug Court Conference	8/22/2018 - 8/24/2018
MS Conference on Social Welfare	9/13/2018
Trauma Informed Conference	9/18/2018 - 9/21/2018
MS Psychological Association Conference	9/20/2018 - 9/22/2018
MS Coalition for Citizens with Disabilities Picnic	9/24/2018
MS Justice Court Fall Conference	10/3/2018-10/5/2018
Imagine Conference	10/11/2018
MS Crime Stoppers Conference	10/16/2018 - 10/19/2018
MS Public Health Conference	10/18/2018-10/19/2018
MS Nurses Association Convention	10/23/2018-10/26-2018
Court Administrators Conference	10/25/2018 - 10/26/2018
Hinds Behavioral Health Services Holiday Health Fair	12/5/2018
MS Gulf Coast Social Work Conference	1/31/2019-2/1/2019
MS Addiction Conference	3/6/2019-3/8/2019
National Association of Social Workers	3/7/2019 - 3/9/2019
MS Head Start Conference	3/26/2019 - 3/29/2019
MS Justice Court Spring Conference	4/3/2019-4/5/2019
One Loud Voice	4/16/2019 - 4/17/2019

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MDCPS Hinds County CPS – Child Abuse Awareness event at Jackson Medical Mall	4/19/2019
MS Band of Choctaw Indians Child Abuse Prevention Parade	4/26/2019

4. FY 2018 Kinship Navigator Funding (title IV-B, subpart 2)

The Kinship Navigator Program is being created to help relatives who are caring for an absent relative's child or children. Due to MDCPS not having any previous experience operating kinship navigator programs, the agency is utilizing the FY 2018 title IV-E funding to assess the viability of successful implementation throughout the state. MDCPS will assess the primary needs of kinship care families in the state and determine which kinship navigator model aligns best with the state's needs and goals while fulfilling the requirements of 4287(a)(1) of the Social Security Act. The state submitted its application for the Kinship Navigator funding on August 2, 2018. It was on September 7, 2018 that MDCPS received the grant award notification. The Kinship Navigator Feasibility Study Services RFP was released February 8, 2019. A proposer was selected from that solicitation and MDCPS executed a subgrant contract on May 21, 2019. On June 3, 2019, a meeting was held at the state office with its contractor to discuss next steps and plan for preparing the feasibility study.

5. Child Welfare Waiver Demonstration Activities

The state does not have a child welfare waiver demonstration project.

I. ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS

For the 2015-2019 CFSP timeframe, the Adoption Incentive Payments Program allowed MDCPS to enhance the state's adoption program in several ways. These funds were used for the following:

1. Provide Structured Analysis Family Evaluation (SAFE) Home Study training, materials, and support for all Adoption staff within MDCPS and private child placing agencies in Mississippi; Within the period of performance, SAFE Home Study trainings were held on a continual basis since the implementation of the model in Mississippi. A total of three (3) trainings were held during the current fiscal year. These trainings continue to be open to MDCPS licensure and adoption staff, private contractors and child placing agencies, and others in Mississippi. SAFE Home Study trainings ended on June 30, 2017 due to the state creating its own home study model. This was implemented as a pilot model during the July 1, 2017 through June 30, 2018 timeframe. As a result of the pilot model

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implementation, the state did review all feedback and address those concerns prior to implementation. The state is using two different home study models that have been approved by Public Catalyst. The Non-Relative Home Study format closely aligned with the nationwide standards for fostering. The Relative Home Study format is used for homes where a relative child is already placed in that home. The state does offer exceptions for a relative wanting to be licensed when they are not yet 21 years of age or not legally divorced or married. These final MDCPS home study models were implemented on July 1, 2018 and is currently in use.

2. Hired support staff for state office adoption Unit; Adoption Incentive Funds were used to hire support staff for the Permanency Support Services/Adoption Unit to assist with the drastic increase in children achieving permanency through adoption. Two (2) contract workers were hired from June 1, 2018 through May 31, 2019.
3. Provide Life Book kits in each MDCPS county office for use with all children entering foster care; Life Book kits were provided on a continual basis to county offices during the 2019 APSR reporting period.
4. Fund recruitment activities and adoption on matching events across the state; MDCPS awarded the Adoption Recruitment and Retention grant for targeted recruitment throughout Mississippi. Southern Christian Services for Children and Youth (SCSCY) was awarded the grant. Through this partnership, updated professional photos and bios of MDCPS's children were gathered and used for recruitment activities in Mississippi. Recruitment efforts included information sessions for potential foster/adoptive parents, matching events where children free for adoption were presented, and through various websites. As of July 1, 2017, Southern Christian Services for Children and Youth no longer provided these services. These services are offered internally. On January 2017, MDCPS hired a recruitment coordinator who manages recruitment services for children who are free for adoption and in need of a permanent home. Since moving these services in-house, several children have received updated photographs and bios that have been featured on various sites as well as the physical gallery that travels throughout the State of Mississippi.
5. Maintained the Resource Parent Pre-Service Curriculum that enhances the training provided to Foster and Adoptive parents across the state of Mississippi. MDCPS staff and private contractors still utilize this curriculum throughout Mississippi to ensure foster/adoptive parents are prepared to foster and/or adopt. PATH trainings were held throughout the state on a continual basis. Also, funds were used to improve the timeliness of licensing resource homes and to increase the number of resource homes available in Mississippi by contracting with private providers to provide SAFE Home Study and pre-service training services. MDCPS is exploring options to have online and more face to face

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trainings while using the PATH training curriculum. MDCPS's Licensure Unit updated and reformatted the PATH curriculum for resource parent pre-service training to an in-person and online format. During the implementation period to the new format, private contractors will continue to provide in-person preservice training for foster parents. Funds were used to renew these contracts Family Resource Center of North MS and MS Community Education Center.

6. MDCPS continued to designate a position in the Bureau of Permanency Support Services, Termination of Parental Rights (TPR) Unit to conduct diligent searches and family findings. This position still supports the field workers by conducting these searches to locate family members when children come into custody and achieve permanency for children who are free for adoption and in need of permanent placement/connections. MDCPS was able to secure a search engine through MDCPS and Adoption Incentive Funds will not be utilized to secure this search engine. Diligent Searches are currently conducted at the district/regional level. This new process was implemented January 10, 2019. The position previously used to conduct these searches was repurposed to support adoption paperwork processing in the Bureau of Permanency Support Services. Additionally, Adoption Incentive funds were used to fund MDCPS' new search engine for diligent searches – Transunion TLOx.
7. Enhanced the state's post-adoption services by identifying and developing foster and adoptive parents as leaders to build stronger support groups linked by a statewide association in conjunction with identifying and developing leadership for a state foster care association; Currently, these services remain but are provided in a different MDCPS program area.
8. Developed a foster and adoptive parent mentoring program where newly licensed foster and adoptive parents are connected to more experienced parents; These services remain but are provided in a different MDCPS program area.
9. Provide more training opportunities and easier access to training for both resource parents and MDCPS staff through online training programs such as fosterparentcollege.com; MDCPS has an active contract with Northwest Media/Foster Parent College, an entity that provides online training to adoptive parents. The contract's period of performance is December 1, 2018 through November 30, 2019.
10. Provided MDCPS staff and resource parents from across the state with opportunities to attend adoption-related, permanency focused training both in-state and out-of-state;
11. Expanded child-specific recruitment activities such as printing and distributing materials, hosting Heart Gallery-like events, and working with private adoption agencies to recruit adoptive families for children lingering in foster care. MDCPS will continue its

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targeted recruitment activities by working with private partners to recruit families for children who are harder to place.

Lastly, MDCPS has not encountered any challenges in expending funds in a timely matter.

VI. 2015-2019 PROGRAM SUPPORT

A. SUMMARY OF TRAINING AND TECHNICAL ASSISTANCE

During the 2015-2019 CFSP/ASPR goals and objectives, the state has provided the following training and technical assistance to its' counties and other local or regional entities that operate state programs:

1. Workforce Development

The Office of Professional Development (OPD) has continued growth and improvement during the 2015-2019 reporting period. At the beginning of the reporting period MDCPS was partnered with the University of Mississippi for the Child Welfare Training Academy (CWTA). The CWTA delivered all classroom training and agency staff supported the classroom deliver with on the job training (OJT) in the field. This partnership ended due to the agency building capacity to carry out the duties of the CWTA. This shift has been extremely positive and continues to grow the work in the field for staff.

The 270 hours of required Pre-Service training for all frontline staff and supervisory staff shifted from a nine-week program to an 8-week program due to a desire to mesh hands-on MACWIS training with the classroom weeks as opposed to it being a standalone week. This shift has received rave reviews and better trained staff to be prepared to work within the system upon completion of training. In addition, the goal of 80% of staff passing the competency-based tests delivered each week was achieved. 100% of staff who work for the agency passed all tests that were administered. In addition, online training was added to Pre-Service training to provide a multi-delivery approach to training our staff. They now receive training by classroom, OJT and online training.

Beginning 2018 all frontline staff were required to received 24 hours of ongoing training and supervisory staff 12 hours of ongoing training. This was a one-year shift and in 2019 will return to 40 hours of ongoing training for frontline and 20 for supervisory staff. A major improvement to this area of professional development is the implementation of a learning management system, Cornerstone. Cornerstone has allowed MDCPS to deliver online trainings, post, register and track classroom training as well as create a digital transcript of training for all agency staff. In addition to keeping this information digitally, MDCPS is also able to report on various aspects of training much more efficiently. In 2018, 100% of frontline and supervisory staff completed their annual requirement.

Collaboration with partners has been a long-standing tradition with MDCPS as well as the Office of Professional Development. Through this reporting period MDCPS has partnered with various universities, private agencies, as well as other state agencies for training purposes. A few of the highlights include partnering with the tribe, MDCPS sits on the planning committee for the annual ICWA conference as well as works closely with the development of materials delivered to ensure continuing education hours are assigned where appropriate for attendees. Professional development partnered with the Children's Advocacy Centers of Mississippi (CAC), Mississippi Highway Patrol and the Fusion Center for development and delivery of Human Trafficking training to various agency partners. The purpose of this training is to bring awareness and education to those patrolling our state's highways and interstates so they are aware of this growing epidemic. The Center for Support of Families continues to work in partnership with OPD to advance the Mississippi Practice Model to improve practice in Mississippi. Partnership with the courts for the delivery of court training both to agency staff as well as the judiciary has been a solid partnership as well.

2. Office of Licensure and Foster Care

The Deputy Director of Licensure and the Foster Care Licensure Director provided training and updates to all Licensure Specialists, Licensure Area Social Work Supervisors, Regional Areas Social Work Supervisors, and Bureau Directors. The training consisted of the following topics: Recruitment, ICPC, Expedited and Non-Expedited Licensure Process, Foster Parent Pre-Certification training updates, and Foster Parent file management. Training was provided on the following dates listed below:

- Regions II East and II West-April 9, 2019
- Regions II North and III South- April 11, 2019
- Regions IV North and IV South- April 22, 2019
- Regions I North and I South- April 23, 2019
- Regions VI, VII East, VII Central, and VII West- April 25, 2019
- Regions V East and V West- May 2, 2019

The agency revised the MS PATH (Parents and Tender Healers) curriculum as of March 2018 for its foster parents. Licensure and Adoption staff selected by their Bureau Directors were provided training in May 2018 on the changes to the training and the process in which training will be provided. The revised version of MS PATH and Pre-Service Training was piloted April and June. The implementation of the new MS PATH and Pre-Service Training went into effect July 2018. MS PATH and additional Pre-Service

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training was modified to provide certain portions online through Parental Roles in Establishing Permanency (P.R.E.P.), a portal through Cornerstone. Other training modules of MS PATH are provided in the classroom. The Resource Parent Training Group in SharePoint was created to provide access to the updated training material to all Licensure and Adoption Staff. The Foster Care Licensure Director manages that site.

Trainers from FamiliesFirst for Mississippi were also provided training in July 2018 after receiving another six-month contract from MDCPS. The contract trainers along with MDCPS Licensure and Adoption staff co-trained foster parents on the revised training through the end of December 2018. Since the contract ended, MDCPS Licensure staff has been providing in classroom Foster Parent training monthly. The online portion of Pre-Service Training through P.R.E.P. is a self-registration process initiated by the Licensure ASWS. A registration email including steps on how to register for training is sent to each applicant's email address. The Foster Care Licensure Director at State Office approves the request after verifying that a walkthrough and backgrounds checks have been cleared by checking the Foster Parent Training Tracking Smart Sheet. Training information is provided by the Licensure ASWS with dates to reflect the applicant's attendance to Orientation, in classroom training, when a walkthrough was completed, backgrounds were cleared, and the disposition. The Foster Care Licensure Director provides dates when the applicant was approved for online training and completed. The Foster Care Licensure Director provides technical assistance to staff and applicants who may have outshooting issues by managing the FPTraining@mdcps.ms.gov email account.

The agency also utilizes a website, www.fosterparentcollege.com so foster parents may obtain online training hours for license renewal. This is a pre-paid account where Licensure Staff, who are also Foster Parent Administrators, registers foster parents so that they can access a variety of training topics. The Foster Care Licensure Director, is the State Office Administrator for the site. Should staff need assistance with online training, they are to contact the Foster Care Licensure Director. Lastly, the Home Study Model training was also provided to the following three (3) private agencies: Catholic Charities in February 2019, Southern Christian Services for Children and Youth in April 2019, and Apelah in May of 2019.

3. Interstate Compact for the Placement of Children

ICPC continues to work with local offices and other states to adhere to and promote the standards set forth in the Safe and Timely Act of 2006 encouraging timely home studies. The ICPC Unit has developed an ICPC Quick Reference Guide for training licensure staff on how to handle ICPC cases according to the Safe and Timely Act of 2006. Outside of the quick reference guide, staff continues to spend 10% of an eight-hour work day offering training to county staff or prospective resources on the ICPC process and necessary documentation needed to process an ICPC request. ICPC also collaborates with Administrative Office of Courts (AOC) Court Improvement Program for educational training as well as collaborating with judges to work through barriers to permanency. ICPC also has been working with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) Training Committee on how to introduce the “New Interstate Compact for the Placement of Children” to the legislative body within the state. This process was also discussed during the AAICPC Annual Training and Child Welfare Conference which was held in May 2017, in Portland, Maine; the conference in Seattle, Washington in April 2018; as well as the April 2019 conference held in Indianapolis, IN. The AAICPC developed a more definitive approach to presenting the new proposed compact to legislators by identifying specific contacts from each state to begin the process to engage with state legislators to adopt the new compact

4. John H. Chafee Foster Care Program for Successful Transition to Adulthood

Youth Transition Support Services offers coaching and training to field staff on administering the Youth Appraisal, using data from assessments to inform practice, assist case workers in completing Transitional Living Plans (TLP) and youth engagement.

B. FY 2015 -2019 TECHNICAL ASSISTANCE AND CAPACITY BUILDING EFFORTS

For the FY 2015-2019 CFSP/APSR timeframe, MDCPS received capacity building services and technical assistance from Capacity Building Center for the States (CBC), Annie E. Casey Foundation, and Center for the Support of Families. These entities assisted the agency with the following: achieving and streamlining the identified 2015-2019 CFSP goals and objectives, MS SB 2179, Olivia Y Consent Decree, and Chafee Services.

1. Capacity Building Center for the States-During the 2016-2017 APSR, MDCPS requested technical assistance from the Capacity Building Center’s to assist with streamlining the agency goals and integration of the CFSP, MS SB 2179, and the Olivia Y consent decree. For FY 2018, MDCPS continued to work with the Capacity Building Center.

CBC served as a conference speaker for the “Leading Through Change” conference. This conference was held on June 21st–23rd, in Jackson, MS and was comprised of 250 social work superiors. MDCPS’s Commissioner and executive leadership, and the Governor for the State of Mississippi was also in attendance to provide support and enlightenment about the agency’s transition to a stand-alone agency. CBC also assisted the agency with revising its vision and mission statements and facilitating the agency in creating a new mantra as well. Through FY 2019 APSR, the Capacity Building Center for States (CBC) provided expert consultation and support around strengthening the agency’s approach to collection, analysis and synthesis of data. Mississippi had identified four areas in which the CBC would provide support:

- a. Finalize statewide assessment - CBC consultants would support the state with strategy development and analysis of information received
- b. Prepare and plan for the PIP based on the statewide assessment - as the State plans for its upcoming results meeting and PIP, the CBC consultants provided access to lessons learned, best practices, expert consultation and guidance approaching PIP preparation from a strategic lens
- c. Data analytic support
- d. Development of data metrics

The CBC had identified a data subject matter expert who would support the state through expert consultation and facilitation of activities intended to increase capacity around data analytics and identification and utilization of key data metrics. In January 2019, MDCPS engaged the Capacity Building Center for States and the Capacity Building Center for Courts in the development of its Round 3 CFSR PIP. This included three days of stakeholder meetings at which Mississippi’s CFSR results were presented, and strategies were discussed that influenced the development of the CFSR PIP and CFSP.

2. Center for the Support of Families (CSF)

Throughout the 2015-2019 CFSP, CSF has worked with the state to improve the quality of caseworker visits by assisting the state with the development and implementation of the child welfare practice model and the provisions of the Olivia Y Settlement. Tenets of this model included the following, in part; Practice Model Coaching for Continued Practice Model Implementation and Intensive Supervisory Support. Furthermore, CSF continued to support the state by participating in regular leadership meetings with MDCPS centered on training and coaching needs, supporting the MDCPS’s initiative Safe at Home, regional implementation of the practice model, supporting the professional development needs of

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MDCPS, and additional support to MDCPS with meeting departmental goods. Please see the descriptive list of services that CSF has provided during FYs 2015-2019:

- a. **Olivia Y. Settlement Provisions**-CSF was originally hired to assist MDCPS to help address the concerns outlined in the Olivia Y Settlement Agreement back in 2009. During the 2015-2019 CFSP timeframe, CSF continued to provide support relating to the Department addressing the Settlement Agreement. During this period in FY 2015, CSF worked with another contractor hired by MDCPS, BCS to make final revisions to data report specifications tied to key Settlement Agreement outcomes, conducted face validity, and produced data quality reports identifying key data entry and data report errors in the developed data reports. Common data entry errors were sent to regional leadership to address with staff to improve the quality of the data reports. CSF also developed training for MDCPS CQI staff on how to conduct data validation of the Olivia Y Settlement Agreement reports. In FY 2016, CSF provided comments and feedback to the court monitor on a case review instrument developed to gather information on Maltreatment in Care cases. CSF, in conjunction with MDCPS leadership, assisted regions as they developed regional improvement plans and charters for 8 critical Olivia Y data indicators selected by leadership, particularly around caseworker visits and issues of safety. As part of this process, CSF analyzed regional performance and provided leadership with observations and questions to ask of regional leadership through a series of performance management meetings.

- b. **Practice Model Learning Cycle**-The Mississippi's practice model was developed back in 2010 and was updated in FY 2016 to reflect MDCPS's commitment to a trauma focus. The six components of the practice model are Involving Children and Families in Case Planning, Assuring Safety and Managing Risk, Strengths and Needs Assessment, Individualized Case Planning, Mobilizing Services Timely and Preserving and Maintaining Connections. To support the revamped practice model with a trauma focus, CSF developed and implemented the Mississippi Practice Model Learning Cycle (PMLC) which is a learning model that includes preparation activities, multiple virtual learning modules, and structured practice application opportunities. The preparation activities are geared toward regional leadership and supervisors, giving them an overview of the content of the module and how they should introduce and support their staff for meaningful participation in the module. The virtual learning modules included a virtual learning tutorial, akin to a traditional classroom learning environment, and a virtual practice scenario, where users are given the opportunity to practice the key behaviors they have just learned in the module. The structured application sessions for all staff led by CSF coaches, give opportunities to further practice the key behaviors, how to monitor fidelity to those key behaviors, and how

the behaviors can be applied in the field. The PMLC includes content on trauma focused child welfare practice within the context of the six Practice Model competencies. For each Practice Model competency, MDCPS and CSF utilized EMU findings from Calendar Year 2016, MACWIS reports, PAD reports, and CSF Coaches input to identify selected key behaviors, practice areas, and fidelity measures to be focused upon during the virtual learning modules and structured practice application sessions. CSF worked with MDCPS to implement the PMLC in 2017 in seven regions, three regions in 2018, and the remaining four regions are participating in 2019. Following participation, CSF supported regions in practicing the learned behaviors through coaching activities and reinforced through group coaching and learning labs.

- c. **Coaching support**-CSF provided coaching support in all 14 regions throughout the 2015-2019 CFSP timeframe focused primarily on the skills that can be built by training and targeted specific coaching that will improve direct practice, including quality visits. Through their work towards the beginning of this period, CSF recognized that more than one strategy was needed to provide the intensive supervisory support needed to supervisors. Therefore, activities evolved to include a combination of individual mentoring for identified supervisors, group coaching, aggregate coaching labs for supervisors on topics directly related to meeting the requirements of the Settlement Agreement and targeted coaching for individual supervisors identified in collaboration with MDCPS and CSF to support the lessons of the PMLC. In addition to individual coaching, group coaching and coaching labs, other onsite activities include participation in regional meetings, observation and feedback in staffings, observation and feedback in unit meetings and shadowing. CSF also provided the regions off site support including routine communication, group coaching via webinar, as well as providing data analysis and other materials as requested to support improvement efforts.
- d. **Safe at Home Initiative Support** -In support of the MDCPS initiative Safe at Home developed in 2018 and focused on keeping children out of foster care and achieving permanency, CSF assisted the department to develop a theory of change by facilitating planning sessions with state office leadership to develop an initial set of core activities for State Office, Regional and Bureau Leadership, and Supervisors around the five principles that were developed to successfully achieve the goals of Safe at Home: Use of Available Federal Funds, Safety Assessments and Ensuring Services are In Place, In Home and Prevention Services, Partnerships with the Courts and Ensuring Reasonable Efforts, and Promoting Permanency in Foster Care. CSF also helped MDCPS envision a data plan to track implementation of Safe at Home and its

impact on children and families in Mississippi, focusing on the work happening within the counties and regions in Mississippi as well as through providers and agencies.

- e. **Supporting an Annual Statewide Supervisor's Meeting-** CSF supported MDCPS by sponsoring the annual statewide supervisor's meeting, aimed at improved consistency, promoting best practice, fostering connections and comradery across the state and regions, and promoting the goals and vision of the department as a whole. The theme of the conferences were: *Trauma-Informed Practice and Adaptive Leadership* (July 21-22, 2015), *New Beginnings* (June 28-30, 2016), *Leading Through Change* (June 21-23, 2017), *Safe at Home* (June 6-8, 2018). As part of this work, CSF assisted MDCPS in developing the agendas to support the themes, identifying keynote speakers, structuring breakout sessions, and evaluating feedback from conference participants.
- f. **Capacity Assessments and Strategic Planning-**Through coaching efforts at the beginning of the CFSP timeframe, seven regions were identified as being ready to participate in the PMLC, while the remaining seven regions were determined as not ready to participate for a variety of reasons, including inadequate staffing or excessive workloads, as well as poor performance in key indicators. For the seven regions determined not ready for participation, CSF coaches conducted capacity assessments to inform CSF's coaching support for the remainder of 2017 with the goal of these regions being prepared to participate in the PMLC during a future time period. The capacity assessments contained information on capacity concerns such as shortage of caseworkers, shortage of supervisors, overdue investigations, backlogs of pending resource family applications without home studies, and need for a regional leadership structure prepared to oversee implementation of the PMLC. All seven of these regions took part in a planning process based on a Theory of Change approach to prioritize problems to be addressed, identify root causes, and develop strategies to make improvements. CSF developed a template for these regions to use to monitor their progress in key areas, both through data collection and identifying and implementing strategies to address deficiencies. CSF assisted regional leadership monitoring these plans and refining strategies in their assessments, and in 2018, State Office identified three more regions as ready to participate in the PMLC, with the remaining four regions determined ready to participate in 2019.
- g. **Performance Based Contracting Support-** CSF supported MDCPS through the creation of their Performance Base Contracting (PBC) Unit to support their efforts to get PBC contracts off the ground and in establishing monitoring practices for the unit. These efforts consisted of assisting the unit in developing a monitoring tool, rating

guidance and provider review protocol for MDCPS PBC staff, piloting some case reviews using the newly developed monitoring tool, assisting the unit with their gathering of data and information to monitor provider performance.

- h. **Reasonable Efforts Virtual Training**-Between February 2018- June 2018, CSF, at the request of MDCPS, developed a virtual training on Reasonable Efforts to support one of the departments identified priorities. As part of this work, CSF provided technical assistance to state office in ensuring the modules developed in articulate were compatible and functioned smoothly with MDCPS's cornerstone application (learning management system). The training, designed with the adult learner in mind, was centered on three modules (Reasonable Efforts to Prevent Removal and Strengthen the Family, Reasonable Efforts to Return the Child Home, and Reasonable Efforts to Achieve Permanency Swiftly). Each module contained five practice scenarios or activities where users are able to practice five key behaviors associated with the module, as well as find additional supporting materials including policy references, resources for workers on the topics of the activities, and resources for supervisors, including staffing note sheets on how to monitor fidelity to the key behaviors. In addition, the training provides additional overall information on reasonable efforts, including the federal and state statutes; why reasonable efforts are important to the Courts, MDCPS, parents and children; how reasonable efforts connects to MDCPS's Practice Model; general resources and a glossary. CSF also developed one-page guidance for Regional Directors and Supervisors to support and monitor implementation of the Reasonable Efforts Virtual Training. The three-module training was held between July 2018 and November 2018, and CSF also provided coaching assistance as requested by regions to understand and use the principles and key behaviors of the Reasonable Efforts modules.
- i. **Regional Leadership Training**- To further support supervisors in 2017, CSF developed, in conjunction with MDCPS, a leadership training centered around four leadership behaviors to be developed among supervisors and leadership at the regional level. The four leadership behaviors were Monitoring Performance, Clarity of Expectations, Providing Feedback, and Building a Team. As part of this effort, CSF developed materials, worked with coaches to prepare them on how to present the leadership behaviors to supervisors and how to reinforce the behaviors in practice. Also, as part of this effort, CSF helped develop relevant job aides.
- j. **State Office Support:** During the CFSP 2015-2019 timeline, CSF staff have participated in regular monthly face-to-face status update meetings with MDCPS leadership to coordinate work with MDCPS, discuss training and coaching needs, and

to identify needs and monitor progress on *Olivia Y* and specific project activities, including:

- i. working with the MDCPS Continuous Quality Improvement Director to prioritize areas of focus;
- ii. working with MDCPS leadership to hear concerns about child welfare services from the Judiciary;
- iii. assisting with preparation of information to be shared with the Judiciary on current practice and plans moving forward;
- iv. working with the professional development division as they transitioned training activities, including pre-service training, from an outside vendor to an in-house operation;
- v. assisting MDCPS with their efforts to update their CQI plan; and
- vi. preparation and planning activities for the Safe at Home initiative, helping the department defining the work of the initiative system wide.

3. John H. Chafee Foster Care Program for Successful Transition to Adulthood

MDCPS is receiving capacity building services from the following two (2) non-profit agencies: First Place for Youth out of Oakland, California and the Jim Casey Foundation. These two entities have restructured the state's Independent Living Program by offering technical assistance with the state's program structure, name (Division of Independent Living Services to Division of Youth Transition Support Services), policy development, youth centered training modules and practice guides for MDCPS staff. YTSS in coordination with First Place for Youth has also developed bench cards for youth court judges, GALs and other county court representatives. Bench cards will be introduced to all Youth Court Judges by January 2020. The Jim Casey Foundation is helping the state to build capacity by assisting the state with implementing Race Equity and Inclusion work, the Opportunity Passport Match Savings program and with building capacity around education and employment resources.

C. 2015-2019 CFSP ACTIVITIES REGARDING-RESEARCH, EVALUATION, MIS AND/OR QUALITY ASSURANCE SYSTEMS

Parham Group, Independent Contractor, evaluates the quality of services provided to in-CIRCLE children and families participating in the program. The services are Family Preservation and Family Reunification Services which began October 1, 2017 and the providers are Youth Villages and Canopy. The Evaluation covers the areas of program effectiveness, program satisfaction, and referral process. Each family are assessed using the North Carolina Family Assessment Scale/Reunification (NCFAS-R) tool at admission and

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discharge. The cumulative data provided by the Parham Group, reflects the total average difference from intake to closure per category. In both Preservation and Reunification cases, previous yearly average totals showed a consistent increase in family functioning because of services provided. Current documentation, continued to reflect trends with a 16.70 % positive change overall from October 1, 2017 through the last report received April 26, 2019. The current program total was slightly more than the previous reporting period for the FFY 2018, which was 16.0%. Current reporting reflected increases evident in all twelve areas assessed. The lowest point of change was in the “Readiness for Preservation” assessment sector at 8 %, with the highest point of change in the assessment of the “Parental Capabilities” at a 26 % increase.

Family satisfaction rates for Canopy and Youth Villages through the external evaluation process through Parham Group within the new in-CIRCLE program were 88.41 % positive. Post 12-month follow-up data from families indicated a 94 % satisfaction rate. Parham Group developed satisfaction questionnaires in collaboration with MDCPS and the service providers. The outcome of the in-CIRCLE program data was at 90 % positive in the October 31, 2018 report. in-CIRCLE’s reporting evaluation data as of April 26, 2019, reflected 94% of families were able to have the children successfully remain in the home due to Family Preservation Services. The same data reflects a 94.96 % success rate for Family Reunification Services where children avoided returning to foster care.

VII. CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

MDCPS and the Mississippi Band of Choctaw Indians (MBCI) have continued to achieve the cooperative goals during this reporting period. MDCPS maintained a collaborative relationship with the MBCI. MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services.

The tribes of affiliation, as well as Indian parents, are notified any time MDCPS is involved with a child or family that meets tribal membership requirements. The MBCI is available to assist MDCPS with tribal identification and notification as needed. MDCPS and Choctaw Social Services continue making cooperative efforts to identify potential Native American resource parents. MBCI is notified of any state proceedings involving tribal children and given the opportunity to assume jurisdiction or authority at any point in the proceedings. ICWA posters are placed on the door or near the entrance to the Youth Court courtroom. The poster instructs persons with Native American heritage to let the court know so that their rights under ICWA can be protected. The posters were created by the MBCI to include clearly identifiable Native American designs.

Active case planning is pursued to maintain or reunite Native American families as soon as safely feasible when safety concerns are identified. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act. MDCPS Workers continue to ask any family the following questions to gain knowledge in deciding what is in the best interest of the child, and document the discussion in the narrative section of the Mississippi Automated Child Welfare Information System (MACWIS):

1. Is parent or child of Native American heritage?
2. Is parent eligible for tribal membership?
3. Is parent registered with Native American tribe?
4. Is child eligible for tribal membership?
5. Has child been registered with Native American tribe?
6. Does the family live on tribal land?

The Mississippi Band of Choctaw Indians or any other Native American tribe to which the child belongs, has the right to accept or deny jurisdiction of the child and to help with placement resources. A tribal court may assume jurisdiction over any Native American child whether the

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child is living on or off a reservation at any time. The tribe is notified of any court hearings involving an Indian child. Notification is provided immediately, by telephone and certified letter, to the tribe when a Choctaw child, or other Indian child, is taken into MDCPS custody. If services are being provided by MDCPS and the child holds membership in a tribe or is eligible for tribal membership the tribe may assume jurisdiction at any point in the service provision process, including the investigation process and foster care services.

The tribal lands of the Mississippi Band of Choctaw Indians are found in eight counties in Mississippi: Neshoba, Attala, Jones, Kemper, Leake, Newton, Scott and Winston. Information about children who are determined to be members of a tribe other than Choctaw is provided to the District Worker, Bureau of Indian Affairs, Eastern Area Office, and Washington, D.C. If the tribe is unknown, MDCPS shall contact the Mississippi Band of Choctaw Indians who is willing to help identify the child's tribe and refer appropriately. (See <http://www.neshoba.org/community/ms-band-choctaw-indians.php>)

Furthermore, a copy of the state's 2015-2019 Final Report, 2020-2024 CFSP, and other state plans will be available on MDCPS's website. The MDCPS website is: <https://www.mdcps.ms.gov/reports/>. Additionally, an electronic copy of the 2015-2019 final report and new five-year plan will be emailed to MBCI Children and Family Services staff by MDCPS Director of Federal Reporting.

A. MEASUREMENT OF ICWA CONTACT

As of December 2012, documentation of the ICWA contact questions became a required step in completing the Family Service Plans located in MACWIS. The FSP is developed and submitted to the supervisor within thirty (30) calendar days of the custody date, unless the court determines otherwise. This process ensures ICWA contact is made in every case. For the current reporting period, the ICWA Compliance detailed report indicates: 105 contacts with the parent or child of Native American heritage; 46 contacts with the parent eligible for tribal membership; 38 contacts with the parent registered with Native American tribe; 43 contacts with child eligible for tribal membership; 20 contacts with child registered with Native American tribe; and 5 contacts with the family living on tribal land. MDCPS will look to continue to improve its data collection within its Statewide Automated Child Welfare Information System in order to assess ongoing compliance with ICWA. Consultation with tribes will continue to address the following:

- Notification of Indian parents and tribes of state proceedings involving Indian children and their right to intervene;

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- Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes;
- Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption; and
- Tribal right to intervene in state proceedings, or transfer proceedings to the jurisdiction of the tribe.

MDCPS has and will continue to receive reports of abuse/neglect regarding Native American children whether they live on or off tribal lands. Should Mississippi Centralized Intake (MCI) receive such a report, a determination shall be made as to whether:

- The child is a member of a Native American Tribe and falls under the purview of ICWA;
- The child resides on designated tribal lands where an Indian tribe has jurisdiction.

If a child is identified at intake as a member of the Choctaw tribe or another Native American tribe and lives on tribal land, an MCI Worker sends the report to the county where the child resides. The County of Responsibility Intake Supervisor notifies the Mississippi Band of Choctaw Indians or any other tribal court and provides them with the allegations and all identifying information. If they do not wish to retain jurisdiction and request the county to investigate the allegations, the county will follow normal investigative procedures.

B. ANNUAL ICWA CONFERENCES

The Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, the Attorney General's Office at Choctaw, MDCPS, Administrative Office of Courts, with the assistance of the National Resource Centers for the Tribe and for Legal and Judicial Issues, National Council of Juvenile and Family Court Judges and Casey Family Programs, developed the First through the Eighth Annual Indian Child Welfare Conferences held in August 2011-2018, to promote cultural awareness, understanding and implementation of the Indian Child Welfare Act. MDCPS and MBCI made great progress in achieving the cooperative goals during the reporting period and continue with a collaborative relationship in 2019. MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act.

MBCI Chief Justice Kevin Briscoe (formerly Senior Youth Court Judge) and Youth Court Judge Holly Peters are actively involved with MDCPS. In 2019, both were appointed to the Mississippi

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Commission on Children's Justice. The Administrative Office of Courts, MDCPS and the Tribe collaborated to develop Indian Child Welfare Act (ICWA) training in 2011-2019. The next upcoming training is scheduled for August 13, 2019 on the MBCI Reservation. ICWA training is included in the Child Welfare Professional Development curriculum and new curriculum being developed that is required for all new MDCPS social workers and support staff. In addition, the State of Mississippi is in the process of improving collaboration with the MBCI Social Services in coordinating protective service cases related to children of Choctaw families who are not covered or eligible for services through the Mississippi Band of Choctaws or their Social Services. Please see the annual ICWA trainings during the 2015-2019 timeframe:

- **Fifth Annual ICWA Conference- August 13, 2015-** The fifth annual Indian Child Welfare Conference convened at Choctaw, Mississippi. The new guidelines for working with tribes from the Department of Justice were discussed. Tribal-State Collaboration was presented by Michael Petoskey, Chief Judge, The Tribal Court Judiciary Pokagon Band of Potawatomi and Timothy Connors, Judge, Washtenaw County Trial Court, Ann Arbor, Michigan. Withelma "T" Ortiz Walker Pettigrew shared her life story regarding the impact of human trafficking on a person's life. There were 170 conference attendees, 35 Elders, and approximately 10 vendors present. There were 55 MDCPS employees in attendance. All regions of the state were represented at this conference.
- **Sixth Annual ICWA Conference – August 10, 2016-** The sixth annual Indian Child Welfare Conference convened at Choctaw, Mississippi. Conference attendance grew by 50 attendees this year due to the inclusion of additional court staff, law enforcement professionals and educators who are involved in the child welfare system. This year there were 220 conference attendees; 40 were Tribe elders and children. Of the 220 attendees, 170 included judges, attorneys, Guardians Ad Litem, educators, law enforcement, and tribal social workers. There were approximately 10 vendors present, and 40 MDCPS employees in attendance. MDCPS and the Mississippi Band of Choctaw Indians (MBCI) continue to collaborate to promote cultural awareness, understanding, and implementation of the Indian Child Welfare Act (ICWA). Tribal Social Services, MDCPS, out of state Tribal representatives and speakers, as well as service providers. The focus of the conference was an introduction to the new ICWA regulations, ICWA Basics and Ethics, Perspective on Raising Native American Children, Child Endangerment, and How ICWA Cases Proceed in Court.

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- **Seventh Annual ICWA Conference - August 10, 2017**- The seventh annual ICWA Conference was convened and attended by Tribal and State Judiciary, Tribal Social Services, MDCPS, out-of-state Tribal representatives and speakers, as well as service providers. There were 160 conference attendees including 43 MDCPS employees. There were 43 attendees from the Tribe; this number includes two Tribal Court judges and two attorneys from the Tribal Attorney General's Office. There were two judges and multiple attorneys from across the state present as well. The focus of the conference was an introduction to the new ICWA regulations, ICWA Basics and Ethics, Perspective on Raising Native American Children, Child Endangerment, and How ICWA Cases Proceed in Court.
- **Eighth Annual ICWA Conference - August 14, 2018**-The Eighth Annual Indian Child Welfare Act Conference was held at the Silver Star Convention Center at Choctaw, with approximately 165 participants. The opening ceremony included the National Anthem sung in the Choctaw language and a performance by renowned hoop dancer Lyndon Alec. Rae Nell Vaughn, Chief of Staff to Chief Phyllis Anderson, and MDCPS Commissioner, Jess H. Dickinson, welcomed conference participants and provided comments on the collaborative effort and continuing efforts to protect the rights of Native American children in the child welfare system.

Tribal leaders, attorneys, judges, social workers and other professionals who deal with Native American children in a Youth Court setting attended the ICWA conference. The conference, hosted annually by the Mississippi Band of Choctaw Indians, Mississippi Judicial College and the Administrative Office of Courts was developed nine years ago as a Court Improvement Program project to educate state judges and social workers on the requirements of ICWA. The U.S. Congress in 1978 set requirements which apply to state child custody proceedings involving any Native American child who is a member of or eligible for membership in a federally recognized tribe. ICWA sets out federal requirements regarding removal and placement of Native American children in foster or adoptive homes. ICWA aims to preserve tribal culture and safeguard the rights of Native American children to their heritage.

Minnesota Supreme Court Associate Justice Anne McKeig presented the keynote address, titled "The Intersection of Family Court and Child Protection," in the first session and outlined the requirements of ICWA in the second session. Justice McKeig, a descendant of the White Earth Nation, is the first American Indian Supreme Court Justice in Minnesota. Also, a panel discussion focused on ethical issues and mutual respect for the different roles

of judges, social workers, parent defenders, and service providers. Panelists were Youth Court Judge Holly Peters of the Mississippi Band of Choctaw Indians, Jurist in Residence John Hudson, Special Assistant Attorney General Paula Broome of the Bureau of Victim Assistance, and Special Assistant Attorney General Joyce Williams. Cheryl Hamby, Tribal Assistant Attorney General, facilitated the panel discussion.

The concluding presentation was the documentary film “Two Tribes, Two Judges, One Goal.” The film, which first aired on PBS a year ago, explores the criminal justice reform efforts of Chief Judge Claudette White of the Quechan Tribe and Chief Judge Abby Abinanti of the Yurok Tribe. Abinanti and White work to preserve their culture and protect the sovereign independence of California’s two largest Native American tribes. Their tribal court approach seeks restorative justice without incarceration for families who struggle with historical trauma and inter-generational addiction. The Ninth Annual ICWA Conference is currently scheduled August 13, 2019.

C. MOU BETWEEN THE MBCI AND MDCPS

Following the first ICWA conference on June 22, 2011, negotiations reopened toward a Memorandum of Understanding between the MBCI and MDCPS. Representatives from the MBCI judiciary, Tribal Attorney General’s Office and MDCPS drafted the Memorandum and presented it to the Tribal Counsel April 10, 2012. The MOU was signed October 25, 2012 and remains in force as of 2019. The objectives of the MBCI and MDCPS are to promote the safety and proper placement of Choctaw children. The MOU sets forth the respective duties for cases involving Choctaw children as described below:

MBCI agrees to respond to any allegation of abuse or neglect within the Reservation; determine whether the child is an “Indian child” subject to the authority of MBCI; to assist with placement of Choctaw children with Choctaw families; to aid the State in identifying Choctaw families and other tribal families living off-Reservation who may be eligible to serve as State “MDCPS Resource Families”; to establish procedures to assist all State caseworkers when conducting monthly in-home assessments of Choctaw children on-Reservation; to jointly provide training once a year related to Choctaw culture and established protocols; to testify in State court proceedings involving Choctaw children living off-Reservation, whether or not they have assumed authority over the child; to report criminal charges in the appropriate jurisdiction if MBCI is the investigating agency; to accompany MDCPS workers when visiting Choctaw children on-Reservation.

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MDCPS agrees to respond to any allegation of abuse or neglect, including families of Choctaw heritage; to determine if a child is an “Indian child” and contact MBCI immediately so they can assume authority; to jointly train annually these protocols; to testify in Tribal Court proceedings involving Choctaw children living on and off-Reservation; to make every effort to place Choctaw children living off reservation with Choctaw families; to report criminal charges in the appropriate jurisdiction if they are the investigating agency; to comply with agreed procedure for monthly in-home assessments of Choctaw children on-Reservation; to provide MBCI with the Mississippi Central Intake phone number for all reports of abuse or neglect involving Choctaw children off-reservation; and to accompany Tribal workers, if requested, to visit Choctaw children off-reservation.

VIII. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN REQUIREMENTS AND 2020 ANNUAL UPDATES

- Describe substantive changes, if any, to state law or regulations, including laws and regulations relating to the prevention of child abuse and neglect, that could affect the state's eligibility for the CAPTA State Grant (section 106(b)(1)(C)(i) of CAPTA). The state must also include an explanation from the State Attorney General as to why the change would, or would not, affect eligibility.

No significant changes were made to legislation that affects the state's eligibility. The state is aware that on January 7, 2019, the President signed the Victims of Child Abuse Act Reauthorization Act of 2018 (P.L. 115-424), which includes an amendment to CAPTA. This amendment expands the scope of the assurance found at section 106(b)(2)(B)(vii) of CAPTA related to legal immunity for good faith reports of child abuse and neglect, to include professionals who are called upon to consult in a child abuse case or provide a medical diagnosis. However, MDCPS did not have the opportunity to present this new legislation during the State's 2019 Regular Legislative Session. This legislation will be submitted during the 2020 Regular Legislative Session.

- Describe any significant changes from the state's previously approved CAPTA plan in how the state proposes to use funds to support the 14 program areas enumerated in section 106(a) of CAPTA. (See section 106(b)(1)(C)(ii) of CAPTA).

CAPTA Section 106(a) 1. To improve the intake, assessment, screening, and investigation of reports of abuse and neglect.

Mississippi Centralized Intake (MCI) is responsible for answering calls to the hotline and electronic reports made through the agency website or by mobile app. Other duties also consist of completing the initial assessment and screening of information provided at intake and entering this collected information into the Mississippi Automated Child Welfare System (MACWIS). This information is also submitted to respective MDCPS staff for response. MCI services are currently provided by a contractor with oversight by the state office MCI Unit. The state has entered into its final contractual renewal option with the current MCI provider with services ending on September 13, 2019. The state has also issued a new RFP for MCI Services with services to begin in September 2019.

- **Sub Goal 1:** Maintain and enhance the daily operations of Mississippi Centralized Intake.

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- **Objective 1:** MDCPS will maintain centralized intake services and support the operations with MDCPS state office staff. This unit will consist of three positions: Division Director II, Program Manager and a Program Specialist. These staff will provide support to MCI and facilitate communication with county and regional field staff as needed for MCI operations.
- **Intervention 1:** Train and provide continuous education to the MCI State office staff on the processes and policies instituted for maintaining and monitoring the contracted provider according to the agreed scope of services.
- **Benchmarks and Timeframes:** On going.
- **Outcome 1:** MCI State office staff will have the capacity to educate the contracted provider and field staff on intake policies and procedures.
- **Outcome 2:** Communications related to MCI performance and specified administrative services will be received by MCI State Office Unit.
- **Measure 1:** MCI State Office staff will also provide proof of attendance at any trainings held interagency and externally.
 - **Update:** The position of Division Director for MCI State Office became vacant on June 15, 2018. The Program Manager and Program Specialist for MCI State Office continued providing program support for daily MCI operations and reported directly to the Office Director during the time the position was vacant. The vacancy was not filled immediately due to the need to first determine how the role would fit into the new MCI contract to begin September 2019. The Division Director position will be filled by September 2019. The Program Manager and Program Specialist utilized the opportunity of the vacancy to increase their knowledge, skill, and experience in solving daily operational issues directly while continuing to review screen-outs, track data and perform continuous quality improvement activities. The contractor has been responsible for training new intake staff on policy and procedures, with information provided by CPS. Intake Volume for federal fiscal years 2015-2019:

Time Frame	Intakes processed from Hotline calls and electronic reports
October 1, 2014 – September 30, 2015	30,959
October 1, 2015 – September 30, 2016	31,068

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October 1, 2016 – September 30, 2017	33,698
October 1, 2017 – September 30, 2018	36,027
October 1, 2018 – May 11, 2019	22,716 (partial year)

Data reviewed from State Fiscal Year 2018 (July 1, 2017 – June 30, 2018) revealed significant decreases in intake volume during state holidays and school closings, such as Thanksgiving, Christmas, Spring Break, and Summer.

- **Sub Goal 2:** To increase public awareness on mandatory reporting and the process for reporting child abuse, neglect, and exploitation.
 - **Objective 2:** Enhance ongoing collaborations with MDCPS prevention unit, MDCPS frontline staff, parents, law enforcement, schools, and community organization to educate and disseminate information on policies and procedures related to reporting, assessing, and screening allegations of child/ vulnerable adult abuse, neglect and exploitation.
 - **Intervention 1:** Provide mandatory reporter education to inner agency staff, interagency partners and community partnerships in compliance with CAPTA requirement.
 - **Benchmarks and Timeframes:** October 2016 and ongoing.
 - **Outcome 1:** Mandatory reporters will understand their role in reporting child abuse, neglect and exploitation and they will have a clear understanding of the reporting process.
 - **Intervention 2:** Update policy and provide additional guidelines regarding intake handling to Hotline staff as needed to improve services delivered.
 - **Benchmarks and Timeframes:** By October 2015 and ongoing.
 - **Outcome 2:** There will be a decrease in intake reports that conflict with Section B of the intake policy.
 - **Measure 1:** A pre-test and post-test will be administered at each training to assess the participants understanding of the information provided. Trainings will include a sign-in sheet which will serve as proof of attendance and will be used to collect MCI training data.
 - **Measure 2:** Updates to policy and policy guidelines shall serve as documentation for the implementation of intervention 2.

- **Update:** Information for Mandatory Reporters is available on the public MDCPS website. Advertisements posted during Child Abuse Prevention Month and throughout the year by Prevention Staff direct the public to the toll-free number and website for child abuse reporting. A brochure developed jointly with the Children’s Advocacy Center, Department of Education, and Attorney General’s Office address specific frequently asked questions about reporting from an educational perspective. Another brochure addresses specific questions frequently asked about reporting by church staff or church members.

A presentation was made to the Children’s Justice Act Task Force on August 31, 2018 to inform new members and update others on the operations of Mississippi Centralized Intake. This feedback was given to the Task Force one year after they had been invited to participate in the User Acceptance Testing for the release of the revised online reporting tools. Statistics were given related to the volume, timing, and methods of intake reports. Strengths and areas needing improvement were described. The electronic, web-based methods of reporting were presented. The Task Force was especially interested in the mobile reporting app for mobile phone users and encouraged the use of it for mandatory reporters. They recommended continued awareness activities for professional mandated reporters and especially suggested the mobile app for police officers. The following feedback from users was presented:

- The total number of electronic reports received in first year was 9371, with 614 of those received on the mobile application.
- The majority of reporters using e-reporting tools are medical and education professionals.
- Changes were made related to which fields would be requiring, aiming for balance between ease of use for reporter and sufficient information for investigation.
- The new website is much easier to use than the former website.
- Adult Services reports can still get through on the electronic system, so these have to be relayed to Adult Services.
- If a reporter leaves off a digit in SSN or DOB, the reporter can’t be seen until IT Customer Support deletes the field. MCI is alerted that this has occurred when there is a gap in report sequence numbers.

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- The system allows for limited information and does not encourage details. If the report is anonymous, the investigator will not be able to contact the reporter for more details. Anonymous reports with limited information may not have the same outcome as if more information was obtained.
- A type of abuse or neglect must be selected, so a reporter making a referral other than abuse or neglect is required to select a type or call the report in to the hotline instead. Sometimes abuse or neglect will be selected as report type, with no supporting information in the description.
- Information on substance affected newborns is sometimes limited, affecting the routing and screening of CARA Referrals. If reporter information is given, the reporter can be contacted for more information to determine the screening.

In January 2019, MCI program staff began serving on the advisory board for the National Child Abuse Hotline's grant from ACF called Prevent Abuse of Children Text and Chat Hotline (PACTECH). This provides input from a public child welfare hotline for the advisory board and benefits the state by exploring the dynamics of reaching out to teens to connect them with resources for their own safety and well-being as a form of primary prevention. It also helps MCI staff to explore ways to reach various mandatory reporters.

- **Sub Goal 3:** To enhance the receipt, screening, and delivery process of intake reports handled by MCI.
 - **Objective 3:** Regular monitoring and review of call recordings, programmatic reports, and quality assurance data to identify trends and provide continuous quality improvement feedback to contracted provider and state office administrative staff to facilitate continual improvement of services.
 - **Intervention 1:** Collaborate with MDCPS Special Investigation Unit and county staff to identify and resolve inaccuracies in intake reports.
 - **Benchmarks and Timeframes:** On going.
 - **Outcome 1:** A baseline will be identified to determine at which stage of the intake process are most inaccuracies occurring.

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- **Intervention 2:** Work with contracted provider to establish a plan for identifying, tracking and eliminating barriers that prevent accurate report screenings and the delivery of quality customer service.
- **Benchmarks and Timeframes:** October 2015 to September 2019.
- **Outcome:** Reduction in the number of intake reports that contain inaccurate reporting types, screening levels, and assignment to county of service.
 - **Update:** Feedback from CQI and Special Investigation Unit indicates that incident dates, relationship of alleged perpetrators to victims, and confirmation of participants are the most common errors made. The specific errors are brought to the attention of MCI Contract management, so the matter can be addressed with the intake worker who made the error. The contract management was advised to provide accountability for these errors and to educate staff in order to prevent the errors. In April 2019, the contractor was required to change the CQI Review Instrument used by the contract supervision in order to facilitate improvement with these errors. Also, MCI staff have participated in the Capacity Building Center for States' Hotline/Intake/Screening Managers Constituency Group (HISM) via conference calls. This has been immensely helpful to hear of the struggles and success of other states in similar programs. This connection has also led to one-on-one discussions with the staff of some states to gain more detail and peer assistance.
- **Intervention 3:** Collaborate with SACWIS Development Team to ensure that the new MACWIS system contains critical updates needed to improve the functionality of MCI.
- **Benchmarks and Timeframes:** October 2015 to September 2019.
- **Outcome:** The new MACWIS system will encompass key requests made by the MCI State office staff. Intake workers will be able to add post allegations to exiting intake reports.
- **Measure 1:** Document staffing's held with Special Investigation Unit (SIU) and/or county staff to resolve errors found in intake reports.
 - **Update:** The Quality Assurance Department at MCI continues to randomly evaluate 7% of all calls received and entered MACWIS (daily) by the MCI Intake Workers. This data has been instrumental in providing professional development to intake staff and determining the performance of the contractor in relationship to the Scope of Services. SIU continues to be an influential part of improving deliverables set for MCI, by providing valuable

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feedback regarding intake reports received on children in custody. As a result, MCI leadership has redirected the focus of key QA staff persons to address and eliminate concerns identified through this process. Which in contract year 2017, led to major improvements in writing proficiency, call handling, program outcomes, and the availability of real-time supervision.

- **Measure 2:** Provide a sign-in sheet and minutes from the meetings held with contract provider.
 - **Update:** Monthly meetings with the contracted provider have been valuable in helping the provider to assess and meet the needs of MDCPS for intake & screening. Because of the monthly meetings, the overall quality of intake reports entered in MACWIS continue improve. In addition, quality assurance scores have increased overall, the length of time taken to handle incoming calls has decreased, and the number of feedback forms submitted by SIU and field staff have greatly decreased.
- **Measure 3:** Collect agendas from SACWIS Development Team meetings and provide updates on changes related to MCI.
 - **Update:** A MACWIS Technical Bulletin issued June 13, 2015 affected MCI in many ways:
 - Fatality and Near -Fatality Indicators were added to capture this information at intake
 - Human Trafficking Indicators were added to capture this information at intake
 - Adoption Indicators, such as previous adoptions, whether adoption was from another country, and adoption date were added to capture this information at intake
 - Post Screening Narrative option was added to allow additional information received to be relayed to assigned staff without being counted as a duplicate report and without requiring duplication of documentation when an investigation was already underway.
 - Closed Without Findings was added as an option for closing investigations when appropriate
 - Changes were made to route Maltreatment in Care reports to the Special Investigations Unit.

A policy change was made on 08-10-2018, in which all reports screened in initially by MCI but screened out at the county level would be sent to the Youth

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Court for review. This allows the Youth Court the opportunity to provide input if the Youth Court disagrees with the screen-out decision. When the intake is sent to the Youth Court, it is also sent to a higher level of supervisory review within MDCPS. Because of this extensive review of screened out intakes by the Youth Court and Field Operations Directors, it became unnecessary for the MCI State Office staff to continue their extensive review of screen-outs. The MCI State Office staff now limit their review to ensuring that Out-of-Home Intakes have been properly routed to the appropriate officials as well as providing to the MDCPS Prevention staff information received on unborn children at risk with no other children in the home so that voluntary services can be offered to those families. Screen-outs of children maltreated while in custody of MDCPS are still reviewed for quality assurance.

- Describe how CAPTA State Grant funds were used, alone or in combination with other federal funds, in support of the state's approved CAPTA plan to meet the purposes of the program since the state submitted its last update on June 30, 2018 (section 108(e) of CAPTA).

CAPTA funds have been used to fund the Mississippi Centralized Intake Program. The funds are being utilized in this way to help Mississippi improve the child welfare system for intake, assessment, screening, and investigation of reports of child abuse or neglect per section 106(a)(1) of CAPTA.

- The state's three citizen review panels consist of the following: Teen Advisory Board (TAB), Children's Trust Fund (CTF) Advisory Council, and the Mississippi Child Death Review Panel. Copies of the three (3) annual citizen review panel reports are submitted as attachments to the 2015-2015 CFSP Final Report and Annual CAPTA update.
- Provide an update on the state's continued efforts to support and address the needs of infants born and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder (see section 106(b)(2)(B)(ii) - (iii) of CAPTA), including information on:

Presently, no significant changes have been made to the CARA referral process since the implementation. Some of the lessons learned is that more education is needed in the area of drug use, due to many of the mothers contacted by partnering agencies for THC or marijuana

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use indicated that smoking marijuana is not a problem and does not pose any risk to their infants or other children. Another valuable lesson MDCPS has learned through the implementation of the CARA referral process is that entering in memorandum of understandings with partnering agencies was a great step. MDCPS currently has MOU's with MS Department of Health, MS Department of Mental Health, Healthy Families and Families First MS for sharing information and linking infants and caregivers to recommended services. The MOU's increased communication between the partnering agencies around the needs of infants born affected by substance abuse. The first stages of implementation required a large number of meetings between MDCPS and the partnering agencies. Once implementation began, MDCPS was able to reduce the number of meetings. Meetings are currently held quarterly and as needed to discuss strengths, weakness and areas identified as needing improvement. CARA meetings involving the four partnering agencies were held in August 8, 2018, January 14, 2019 and April 30, 2019. A CARA meeting was also held on February 28, 2019 with MS Department of Mental Health, representatives from each of the Community Mental Health Centers across the state and other agencies certified to provide substance abuse services. The purpose of this meeting was to discuss possible ways to share referrals with these agencies directly.

Currently, the referrals are routed through the central office of DMH. CARA education and outreach has also been provided to some hospital staff in both the northern and southern regions of the state. This education and outreach was coordinated through MDCPS county offices in these regions of the state that reached out to staff within Labor and Deliver departments in hospitals in their regions. CARA coordinators received great participation from hospital staff in Region II- W and Region VII-C. Others that have been provided CARA education include Guardian Ad Litem that serve as Youth Court Personnel and members of Fetal Infant Mortality Review teams. MDCPS also participated in a call with Delaware to learn about their response process for CARA. CARA coordinators and other representatives from MDCPS met with Social Work PRN who currently manages the child abuse reporting hotline in Mississippi. During this meeting management and members of the Quality Assurance Team within the agency were allowed to ask questions about the screening process for CARA referrals and present any additional questions they had. The current CARA coordinators provide education and outreach in area of the state as requested. The MDCPS CARA coordinators have also attended the Drug Court Conference, The Trauma Conference and the One Loud Voice conference to both share and collect information that may contribute to the state's efforts in addressing the needs of infants born affected by substance abuse and their

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caregivers. MDCPS does not have a formal plan for monitoring plans of safe care to determine whether and in what manner local entities are providing referrals to and delivery of appropriate services for substance exposed infants and affected caregivers. MDCPS does discuss plans of safe care with the partnering agencies during quarterly meetings. During these meetings partners have the opportunity to share the number of infants and caregivers they have been able to engage in service delivery once the plan of safe care was developed. This time is also used to allow the partnering agencies to present any successes they have experienced as well as barriers or challenges that have been identified. MDCPS continues to work with organizations, hospitals and other state agencies to address the needs of infants born and identified as being affected by substance abuse. One of the major avenues MDCPS uses to address this need is through the agency's current CARA referral process.

Providers	Number of Referrals	Number of Twins	Metrics
MS Dept. of Health	289	2	46%
MS Dept. of Mental Health	135	1	21%
FamiliesFirst for MS	113	1	18%
Healthy Homes	5	0	08%
CARA reverted to ANE	83	1	13%

Total Number of Referrals Received between July1, 2018 and May 28, 2019 including ANE: 625

Multiple Agency Referred: 99

- 46 %of the referrals were made to MS Department of Health
- .21% of the referrals were made to MS Department of Mental Health
- .18% of the referrals were made to FamiliesFirst for MS
- .08% of the referrals were made to Healthy Homes
- .13% of the referrals were reverted to MCI for county assessment of ANE

Marijuana/THC Report by provider:

- MS Dept of Health- 165
- Healthy Families- 4

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- FamiliesFirst- 106
- MS Dept of Mental Health- 58

Total: 333 referrals

CARA Questionnaire (must be answered to determine if the case should be CARA or ANE).

1. Did the infant have a confirmed positive urine, meconium or cord segment drug screen?
2. Did the infant's mother have a medical evaluation, including history and physical or behavioral health assessment indicative of an active substance use disorder, during the pregnancy or at the time of the child's birth?
3. Are there clinical concerns for the infant's exposure to prenatal drugs and/or alcohol, based on current evaluation and assessment?
4. Does the infant manifest clinically relevant drug or alcohol withdrawal? If yes, what is the nature of the withdrawal (based on clinical diagnosis)?
5. Are there immediate safety concerns for the infant? If yes, what are the concerns?
6. Have any actions been implemented for the safety of the child?
7. What are the care needs of the infant(s)?
8. What are the care needs of the caregiver?

Types of care needs identified in referrals:

1. Caregiver- Parenting education, education and treatment on active substance use disorders and/or treatment, well-baby care, health education, safe environment and patient education and support for the infant, risk assessments and other services, counseling, and assessments as identified by provider.
2. Infant- Well baby care and fetal development. Safe sleep environment for infant and other assessments as identified by the provider.

MDCPS has identified that technical assistance is needed with engaging healthcare professionals and caregivers who refuse to participate in the voluntary services. This assistance would greatly support the continued implementation of the state's CARA referral process.

- The Governor's Assurance Statement has not been signed at this time.

IX. CAPTA STATISTICAL AND SUPPORTING INFORMATION

A. INFORMATION ON CHILD PROTECTION SERVICE WORKFORCE

The section identifies the requirements for child protection personnel responsible for intake, screening, assessment, and investigation of child abuse and neglect reports in the state. Please see the descriptive information below regarding the education, qualifications, and training requirements that are established by the state for child protection service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions:

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

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Position	Function	Minimum Qualifications	Training Requirements
		field + 4 years of experience	
DCPS- Adoption Specialist I	Adoption Caseworker	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Adoption Specialist II	Adoption Caseworker	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Adoption Specialist III	Adoption Caseworker	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Adoption Specialist IV	Adoption Caseworker	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Licensure Specialist I	Licensure Caseworker	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually

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Position	Function	Minimum Qualifications	Training Requirements
DCPS- Licensure Specialist II	Licensure Caseworker	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Licensure Specialist III	Licensure Caseworker	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Licensure Specialist IV	Licensure Caseworker	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Quality Assurance Coordinator I	Continuous Quality Assurance	BS/BA in related field	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Quality Assurance Coordinator II	Continuous Quality Assurance	BS/BA in related field year + 1 year of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Quality Assurance Coordinator III	Continuous Quality Assurance	MS/MA in related field or BS/BA in related	Pre-service Training – 270 hours

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Position	Function	Minimum Qualifications	Training Requirements
		field + 2 years of experience	Ongoing Training – 40 hours annually
DCPS- Quality Assurance Coordinator IV	Continuous Quality Assurance	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Investigation Specialist I	Continuous Quality Assurance	MS/MA in related field or BS/BA in related field + 2 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Investigation Specialist II	Continuous Quality Assurance	MS/MA in related field + 2 years of experience or BS/BA in related field + 4 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually
DCPS- Investigation Specialist III	Continuous Quality Assurance	MS/MA in related field + 4 years of experience or BS/BA in related field + 6 years of experience	Pre-service Training – 270 hours Ongoing Training – 40 hours annually

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Position	Function	Minimum Qualifications	Training Requirements
OP/MGMT Analyst Principle (OMAP)	County or unit level supervisor	MS/MA in a related field + 4 years of experience or BS/BA in related field + 5 years of experience	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually
DHS Area Social Work Supervisor	County or unit level supervisor	LSW +4 years of experience or LSW and in graduate school + 3 years of experience or LSW and MSW +2 years of experience	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually
DHS Regional Social Work Supervisors	Regional level supervisor	LSW + 6 years of experience OR LSW and MSW + 3 years of experience	Pre-Service Training – 270 hours Clinical Supervisory Training – 40 hours Ongoing Training – 24 hours annually

In accordance to the state's 2ND MSA, which went into effect this calendar year: MDCPS caseworkers shall receive a minimum of 20 hours of in-service training, and all supervisors shall receive a minimum of 12 hours of in-service training. Also, beginning in 2019, MDCPS caseworkers shall receive a minimum of 40 hours of in-service training each year, and all supervisors shall receive a minimum of 24 hours of in-service training each year. MDCPS

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caseworker supervisors, within 90 days of hire or promotion, shall receive a minimum of 40 hours of training, directed specifically at the supervision of child welfare case workers. Also, to mention, as of July 10, 2018, the workforce demographic information of MDCPS consisted of the state having employed total of 1589 individuals. Please see the available demographic information below on our service personnel:

Race	Number of MDCPS Employees	Percentage of MDCPS Workforce
American Indian	1	Less than 1%
Caucasian	406	27%
Hispanic	4	Less than 1%
African American	1093	72%
Asian	4	Less than 1%
Other	5	Less than 1%
Sex	MDCPS Employees	Percentage of MDCPS Workforce
Male	91	6%
Female	1422	94%

According to 2nd MSA and STRO, 90% of MDCPS caseworkers will have caseloads which do not exceed the caseload standards set forth below. Individual MDCPS caseworkers with generic caseloads shall not carry a mixed caseload that exceeds 100% capacity. Also, 85% of MDCPS supervisors shall be responsible for no more than five (5) caseworkers. Please see the calculated weights per case type described in the chart below:

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MDCPS Caseload Standards:

Role	Standards	Weight Per Case - 100% Capacity
Child Protection (Investigations Level 2 and 3)	14 Investigations	0.0714
Ongoing Foster Care (Placement Responsibility & Service)	14 children	0.0714
Ongoing Foster Care (Placement County of Responsibility)		0.0357
Ongoing Foster Care (Placement County of Service)		0.0357
In-Home Cases (Protection Responsibility & Service, Prevention Responsibility & Service and Interstate Compact on the Placement of Children (ICPC Incoming))	17 families	0.0588
In-Home Cases (Protection or Prevention County of Responsibility)		0.0294
In-Home Cases (Protection or Prevention County of Service)		0.0294
Adoption (Adoption County of Service)	15 Children	0.0667
New Application Licensing (Resource Inquiry, Interstate Compact on the Placement of Children (ICPC) and Foster Home Study)	15 Homes	0.0667
Renewal Licensing (Foster Home Supervision and Foster Home Renewal)	36 homes	0.0278

Also, to mention, Intake staff are employed through a contract which provides centralized intake services for MDCPS. Intake staff responsibilities include receiving, screening, documenting, and disseminating reports of child abuse and neglect called in to the hotline or received through electronic web reporting. The requirements for the intake staff are described below from the state's current scope of services:

- Contractor will ensure that all crisis line social workers for the MDCPS Centralized Intake and 24-Hour Hotline and Disaster Preparedness Plan have a master's degree in social work or a bachelor's degree in social work with two years of related experience.
- Contractor's hiring requirements consist of all degrees in social work from a social work program accredited by the Council on Social Work Education (CSWE). The contractor will retain the responsibility of recruiting, interviewing, and extending offers to candidates for hire through MCI Program.
- Contractor will agree that applicants must be approved by MDCPS before reporting to duty.
- Contractor will retain the control and direction of the MCI workforce in regard to operational and personnel issues with the exception that Contractor will comply fully with any inquiries, orders, or directives from the court. Responses to MDCPS feedback forms will include details from growth and development with worker along with any corporate corrective action. At the request of MDCPS, Contractor will agree to replacement of an employee.
- Contractor will require MDCPS Centralized Intake social workers to complete the following training/education requirements: 40 hours/year for all new employees; 20 hours/year for experienced (over 1 year) employees. Supervisors will receive a minimum of 20 hours of training per year. Training and education will be coordinated with MDCPS administrative staff.

B. JUVENILE JUSTICE TRANSFER

Data sources for this information come from MYCIDs and the MDHS, Division of Youth Services (DYS)'s Oakley Youth Development Center (OYDC) and the Community Services Monthly caseload report. DYS monthly caseload report contains the total number youth that are on probation, parole, and institutional commitments. Data input for MYCIDs consists of the following staff:

- For delinquency cases, information is input by the DYS worker or Intake Officer.
- For truancy and educational neglect, information is input by the School Attendance Officer or Intake Officer.

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- For abuse and neglect cases, the MDCPS social worker begins inputting data within 24 hours of the initial investigation and has to submit a completed report within 30 days to the courts and the court designee.

Based upon the review for this reporting period, there was only one (1) child that was in the custody of MDCPS and were transferred into the custody of the MDHS/DYS juvenile institutional facility. In addition, there were a total of nine (9) on probation through DYS with an open prevention case by MDCPS. Youth released from the custody of OYDC are placed on parole for 6 months; however, the parole can be extended for an additional 6 months regardless of foster or adoptive placement. Currently, there is no jointly established policy or procedure for identifying and tracking youth that are considered dual or cross over youth. Presently, MDCPS, MDHS, DYS and A.O.C are working on defining a “crossover” youth definition for the state. MYCIDS would also be utilized for statistical reporting of dually referred youth. Ultimately, data reporting from MYCIDS would replace the spreadsheet tracking.

C. EDUCATION AND TRAINING VOUCHERS

Youth Transition Support Services (YTSS) is responsible for enrolling, approving and tracking current and former foster youth receiving Educational Training Voucher (ETV) funds. This number may increase or decrease from year to year based on the following factors:

- Youth attending accredited post-secondary educational programs
- Youth’s ability to maintain a 2.0 GPA necessary for eligibility
- Youth completing the enrollment process required to receive funds
- Youth who are eligible to receive ETV funds based on the federal guidelines

The 2018-2019 school year has the highest number of youth receiving ETV since the state began offering the ETV Program. We have seen an increase in the number of youth entering post-secondary educational programs. YTSS provides support services to assist with youth achieving educational success based on each youth identified individual needs.

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Annual Reporting of Education and Training Vouchers Award

Fiscal Period	Total ETVs Awarded	Number of New ETVs
Final Numbers: 2017-2018 School Year (July 1, 2017 to June 30, 2018)	97	53
2018-2019 School Year* (July 1, 2018 to June 30, 2019)	164	67

D. INTER-COUNTRY ADOPTIONS

During the 2015-2019 CFSP timeframe, the agency had only one (1) child adopted internationally and entered into state custody due to dissolution of the adoption. This child was adopted from Ukraine through a private adoption agency. The adoption dissolved due to the child attempting to harm his adoptive mother. His current plan is APPLA with a concurrent plan of Adoption. He is currently in a foster home with therapeutic services.

E. MONTHLY CASEWORKER VISIT DATA

MDCPS will be reporting the monthly caseworker data for FY 2018 to the Children's Bureau by December 16, 2019 in a separate document from the 2015-2019 final progress report.

X. PUBLICATION

A. PUBLIC REVIEW

A copy of the state's 2015-2019 CFSP Final Report, 2020-2024 CFSP, and other required documents will be available on MDCPS's website. The MDCPS website is: <https://www.mdcps.ms.gov/reports/>. Additionally, an electronic copy of the 2015-2019 final report and new five-year plan will also be emailed to its stakeholders by MDCPS, Director of Federal Reporting.

B. STATE CONTACT FOR 2015-2019 CFSP FINAL REPORT

The state contact for the 2015-2019 Final Report and other plans is Cerissa Eubanks, Director of Federal Reporting. Email address is cerissa.eubanks@mdcps.ms.gov and telephone number is 601-359-4974.

XI. ATTACHMENTS

- A. TEEN ADVISORY BOARD (TAB) ANNUAL REPORT
- B. CHILDREN'S TRUST FUND (CTF) OF MISSISSIPPI ADVISORY COUNCIL ANNUAL REPORT
- C. CHILD DEATH REVIEW PANEL ANNUAL REPORT
- D. ATTACHMENT F-ETV ANNUAL REPORTING

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