

# Louisiana



Department of  
**Children &  
Family Services**

*Building a Stronger Louisiana*

2022  
Annual Progress and Service Report  
(APSR)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

<b>TABLE OF CONTENTS</b>	
SECTION	PAGE
<b>SECTION 1: COLLABORATION AND VISION</b>	4
Committees, Workgroups and Partnerships with Public Agencies/Entities	4
Private Not for Profit Organizations	13
Child Welfare Vision	24
<b>SECTION 2: ASSESSMENT OF CURRENT PERFORMANCE IN IMPROVING OUTCOMES</b>	26
Data Sources and Data Analysis	26
Systemic Factors	34
<b>SECTION 3: PLAN OF ENACTING THE STATE’S VISION</b>	104
Goals, Objectives and Overall Strategy for Improvement	104
CFSR/PIP Goals	104
Update on Assessment of Outcomes/Plans for Improvement	108
Activities Planned for FFY 2022 Assessment of Outcomes/Plans for Improvement	121
Measure of Progress	125
Staff Training, Technical Assistance and Evaluation	127
Implementation Supports	127
<b>SECTION 4: SERVICES CHILD AND FAMILY SERVICE CONTINUUM</b>	129
Service Coordination	154
Service Description	155
Stephanie Tubbs Jones Child Welfare Services Program, Title IV-B, Sub-Part 1	156
Marylee Allen Promoting Safe and Stable Families (PSSF). Title IV-B, Sub-Part II	162
Monthly Caseworker Visits	169
Additional Services	173
Adoption Savings	174
Family First Prevention Services Act Transition Grants	175
Family First Transition Act Funding Certainty Grants	175
<b>SECTION 5: CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES</b>	176
<b>SECTION 6: JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRADITION TO ADULTHOOD</b>	180
Education and Training Vouchers	187
Collaboration with Tribes	187
<b>SECTION 7: UPDATES ON TARGETED PLANS WITHIN THE 2020-2024 CFSP</b>	187
Foster and Adoptive Parent Diligent Recruitment Plan	187
Health Care Oversight and Coordination Plan	190
Disaster Plan	190
Coronavirus Aid, Relief, and Economic Security Act (CARES Act) (Title IV-B, Subpart 1)	196
Training Plan	197
Child Abuse Prevention and Treatment Act (CAPTA)	217
<b>SECTION 8: COVID-19 PANDEMIC STATE RESPONSE</b>	270

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

<b>APPENDICES</b>
APPENDIX A: DCFS ORGANIZATIONAL CHART
APPENDIX B: TRAINING CHART
APPENDIX C: BUDGET INFORMATION / SF 425 FORMS
APPENDIX D: DISASTER PLAN
APPENDIX E: COVID-19 PLAN
APPENDIX F: ANNUAL REPORTING OF EDUCATION AND TRAINING VOUCHERS AWARDED

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**SECTION 1 – COLLABORATION AND VISION**

**A. INTRODUCTION:** The Department of Children and Family Services (DCFS) is the state agency designated to administer and supervise the administration of child welfare services in Louisiana. DCFS provides comprehensive social services and child welfare programs:

- Centralized Intake (receipt of reports of child abuse and/or neglect)
- Child Protective Services
- Family Services (in home preventive and preservation services)
- Foster Care
- Services to Parents (for parents of children in foster care)
- Home Development (services to foster and adoptive parents including recruitment, certification and retention of foster/adoptive families)
- Adoption
- Adoption Subsidy
- Extended Adoption Subsidy
- Adoption Petition
- Guardianship Subsidy
- Extended Guardianship Subsidy
- Interstate Compact on the Placement of Children
- Kinship Navigator
- Transitioning Youth/Independent Living
- Extended Foster Care

The services are provided through administration of several federal programs and grants:

- Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B subpart 1)
- Mary Lee Allen Promoting Safe and Stable Families (Title IV-B subpart 2)
- Title IV-E of the Social Security Act
- Chafee Foster Care Independence Program
- Education and Training Voucher Program
- Child Abuse Prevention and Treatment Act Grant (P. L. 104-235)

The organizational structure of DCFS includes an administrative office in Baton Rouge, 9 regional offices and 48 parish offices. Services are available in all 64 parishes of Louisiana, with some parish offices covering more than one parish.

**B. COLLABORATION:** The DCFS remains committed to the involvement of stakeholders in the development and improvement of service delivery. To demonstrate this commitment, the department will continue to engage in collaborative processes, and some of the most significant stakeholders are as follows:

1. **Committees, Workgroups and Partnerships with Public Agencies and Entities:** (Please refer to the Quality Assurance and Agency Responsiveness to the Community Systemic Factor sections of this plan for additional stakeholder involvement and activities.)

a) **The Louisiana Court Improvement Project (CIP),**

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The Pelican Center for Children and Families (Pelican Center) administrates the Louisiana Court Improvement Program (CIP) on behalf of the Louisiana Supreme Court. (Please refer to the training portion of this plan for additional information on the Pelican Center). Louisiana has a decentralized court system consisting of independent court districts with elected judges. An enormous cooperative effort among local courts and state and parish agencies is required to comply effectively with state and federal child welfare mandates. The CIP, DCFS, and other legal and child welfare stakeholders are partnering together on multiple strategies, including:

Enhance Collaboration: The CIP supports best practice and collaboration among child welfare and legal stakeholders serving families and children. The CIP, Court Appointed Special Advocates (CASA), alliance of state universities, and DCFS have collaboratively developed a multi-disciplinary training academy that provides a vehicle for exchange of data, identification of challenges, recognition of promising practices, and strategies for statewide improvement. The annual “*Together We Can*” Conference and other multi-disciplinary and joint trainings provide interdisciplinary education and training to DCFS and child welfare and legal stakeholders.

Increase Support for Children and Families: The CIP and DCFS continue efforts to prevent the need for removal of children from their homes, decrease the number of children entering foster care, decrease the number of children experiencing repeat maltreatment; increase the number of children who have permanency and stability in their living situations; and improve engagement of the entire family, extended family members, fictive kin, and foster parents.

Provide High Quality Legal Processes: The CIP and DCFS promote due process in legal proceedings; assure timely, thorough, and complete court hearings; and improve judicial performance in courts presiding over Child in Need of Care (CINC) cases.

Improve Safety Decision-Making: The CIP and DCFS train child welfare and legal stakeholders on Louisiana’s Child Welfare Assessment and Decision Making Model (CWADM) to ensure concerted efforts are made to assess and manage the risk and safety concerns that bring children to the attention of the DCFS.

**CIP Update FFY 2021:** Continuous Quality Improvement (CQI) CIP meetings were held quarterly, which concentrated on the CFSR data and PIP implementation. The CIP CARE Advisory Committee met quarterly to ensure the timely implementation of PIP deliverables that CIP was responsible for implementing as well as the CIP Strategic Plan.

CWADM: The CIP partnered with DCFS to create a training for legal stakeholders on CWADM.

Training: The CIP provided the following trainings: (1) Fundamentals of Child Welfare; (2) Culture S.M.A.R.T.; (3) Safety: Continuous Quality Assessment in Child Welfare Cases through Child Welfare Assessment & Decision-Making; (4) Trial Skills Building; and (5) State in the Interest Of.”

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Title IV-E Funding: The CIP partnered with DCFS and the parent and child representation programs and district attorney's office to establish a procedure for programs to claim Title IV-E funding for representation in CINC cases.

Multi-Disciplinary Representation Program: Attributes of a High-Quality Multi-disciplinary Parent and Child Representation Model were developed for Louisiana. The CIP is currently working with four parishes to implement the models. The CIP is providing technical support to the parishes with regard to roles of team members, funding options, benefits to the model, and successful programs in other jurisdictions. The CIP is helping the parishes identify and overcome barriers to implementation of the model. The CIP has provided information to all legal stakeholders in the pilot parishes about becoming a national Family Justice Initiative (FJI) "demonstration site," which would bring peer support, assistance with data collection, and national expertise to child and parent representation programs in one or more parishes who agree to become a site. Recently, one of the parishes, Caddo Parish, hired a social worker to work with parents in Child in Need of Care (CINC) cases. The CIP has connected this social worker to national experts and the Orleans Parish Parent Representation Project to provide training. Mental Health Advocacy Service (MHAS) is in the process of hiring social workers for their child representation team in one or more of the pilot parishes. The technical support provided to MHAS is outlined above.

Civil Legal Services: The CIP has hosted a number of meetings with key legal and child welfare stakeholders to develop a strategy to provide collateral civil legal services to families. These legal services will help prevent children from entering foster care and stabilize families that have been involved with DCFS. To date, the CIP has met with the Louisiana Bar Foundation, DCFS, the child representation programs, and the public defenders who represent parents. The CIP has solicited input and expertise from other civil legal service programs in New Jersey, Oklahoma, and Iowa, and the ABA Center on Children and the Law to strategize the referral process and discuss best practices. In addition, the CIP consulted with a national expert on commissioning an Economic Impact Study to analyze and report on the social value return on investment.

Quality Legal Representation: A multi-pronged strategy to increase the quality of representation at the Continued Custody Hearing (CCH) was created. The Louisiana Supreme Court agreed to issue a directive to judges statewide to appoint attorneys at the earliest point possible in CINC cases; and work with court staff to email pleadings to attorneys in advance of the CCH. The CIP has determined how to provide parent contact information to parent attorney programs in advance so that they are prepared for the CCH. An MOU was drafted between DCFS and the child representation programs setting forth a method for consistently providing contact information for the child and their placement to the children's attorneys. The MOU is in the process of being finalized.

An MOU was created among the Louisiana Supreme Court, the public defenders, and the child representation programs that require parent and children's attorneys to adhere to specific performance standards. The performance standards include practices that have

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

been identified by the Family Justice Initiative (FJI) in the “Attributes of High-Quality Legal Representation for Children and Parents in Child Welfare Proceedings” and Louisiana legal stakeholders. The MOU has been written and the CIP will be meeting soon with the signatories to the agreement to complete the document.

Foster Caregiver Project: A Foster Parent Progress Form was created for foster caregivers to complete and submit to DCFS to provide valuable information to DCFS, CINC parties, CASA, and the court regarding the care and treatment of the child in their care. “Foster caregiver” includes foster parents, pre-adoptive parents, and relatives caring or a child involved in a CINC case. A procedure for foster caregivers to submit the Foster Caregiver Progress Form prior to any CINC hearing regarding a child in their care has been created. Foster caregivers will submit the form to their DCFS foster care case worker, who will ensure that it is submitted to the court, counsel of record, and CASA (if appointed) prior to and/or at each CINC hearing. Foster caregivers will receive instructions and a legal rights guide along with the form. DCFS policy is currently being updated to align with these new procedures

Alternatives to Removal: A workgroup was formed to ensure a common understanding among DCFS and legal stakeholders of the legal options available (Instant Safety Plan Orders, Protective Orders, Informal Adjustment Agreements, etc.) to manage safety and prevent children from entering foster care.

Louisiana Child In Need of Care Bench Book for Juvenile Judges: A workgroup was formed to create and publish the Louisiana Child In Need of Care Bench Book for Juvenile Judges, which included template court documents and Bench Cards that reinforce CWADM to ensure sound and reasonable inquiries by judges and attorneys and the importance of timely permanency. The Bench Book is available on multiple online platforms for judges, child welfare, and legal stakeholders to utilize.

My Community Cares (MCC): The CIP partnered with DCFS to continue to implement MCC in four pilot parishes, East Baton Rouge, Rapides, Caddo, and Livingston, to improve service array as well as prevent entries of children in foster care. The CIP expanded MCC to Lafayette and Orleans Parish. The CIP is partnering with DCFS to create a sustainability plan including a plan to expand MCC to all parishes.

**CIP Activities Planned for FFY 2022:** Collaborative efforts will continue between DCFS and CIP to complete the deliverables outlined above. Additionally, the CIP is currently drafting its new five-year strategic plan due June 30, 2021, and those strategies will build upon those initiated in the PIP. These strategies will include, but will not be limited to:

- The CIP will continue to collaborate with DCFS to create a sustainability plan for MCC, including expanding MCC to all parishes.
- Work will continue to ensure consistent use of all available legal options (court ordered safety plans, protective orders, informal or formal FINS, informal adjustment agreements, etc.) to manage safety and prevent children from entering foster care. These efforts will include linking families with legal services to address legal challenges families may be experiencing apart from abuse and neglect.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The CIP will continue to train and implement the use of the Bench Book, court documents, and bench cards developed to support the CWADM. Ongoing CQI assessment of court documents and bench cards by DCFS and legal stakeholders will occur. The CIP will collaborate with legal stakeholders to support consistent application of the newly developed affidavit forms, court reports, and orders.

- b) **Louisiana Department of Education (LDE)** and the DCFS collaborate on the following issues:

Improving educational outcomes for children in foster care through developing mechanisms for data sharing and local-level collaboration. LDE and DCFS have designated educational points of contact in each school district for improved communication with the local education authorities. These points of contact will continue to address issues specific to the individual school systems and children they serve.

Every Student Succeeds Act (ESSA): LDE and DCFS have done extensive work in developing mechanisms to track and match data to obtain a clearer picture of the educational status of children in foster care. The LDE and DCFS legal teams have been involved in implementation of ESSA to ensure compliance with state laws. Shared training for LDE and DCFS staff continue to be explored and provided as the opportunity arises.

Special Education Advisory Panel (SEAP): LDE and DCFS have gained greater understanding of needs of students eligible for special education through this collaborative effort. A DCFS Manager is an active participant in SEAP to support advocacy and change for children in Foster Care with special needs. SEAP has participants from other state agencies, community/advocacy organizations, families, and past recipients of services from the state's public school special education programs.

Childcare Services for DCFS Clients: Child Welfare (CW) staff work with LDE staff to access childcare services for DCFS clients through the Child Care Development Fund (CCDF) of the Child Care Block Grant (CCBG). The fund provides temporary protective care to children in Child Protective Services (CPS), Family Services (FS) and Service to Parents (SP) programs to prevent removal. It provides childcare for children in foster care and non-custody children of minor children in foster care to promote placement stability. The partnership in provision of these services for child welfare clients will be an ongoing collaborative.

Early Child Care and Education Commission: DCFS Child Welfare participates in a multidisciplinary legislative commission facilitated by the Louisiana Department of Education. This commission is studying the services provided to children from birth to age three to improve the early development of children in Louisiana.

**LDE Update FFY 2021**: DCFS continues to work with LDE on education stability. DCFS and LDE remains in contact with the LDE Foster Liaison and the Education POC (Point of Contacts) within each Region to discuss education issues as they arise with children who are in foster care. DCFS met with Lafayette and Vermillion Parish to assist with services for a deaf foster child and his continued enrollment in deaf services within the school system. DCFS collaborated with LDE to provide services to children in foster care through the federally funded national initiative, "Louisiana Gaining Early Awareness and Readiness for Undergraduate Programs" (LA GEAR UP). This program, supported by the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

U.S. Department of Education, is operational in East Baton Rouge Parish. It provides grants to states or institutions of higher learning to create partnerships with high-poverty middle or high schools. DCFS and LDE collaborated to ensure children in foster care have access to the Jobs for America's Graduates (JAG) program. DCFS continued to conduct State Central Registry Child Abuse background clearances for childcare employees as requested by LDE. LDE and DCFS liaisons continued to communicate between the local education authorities and CW offices; work through challenges in serving children in foster care and develop resources to meet the unique needs of these children. Efforts continue to refine the data tracking process and assess the educational performance and needs of children in foster care.

**LDE Activities Planned for FFY 2022:** LDE and DCFS liaisons will continue to facilitate local meetings between the local education authorities and CW offices; work through challenges in serving children in foster care and develop resources to meet the unique needs of these children. Efforts will continue to refine the data tracking process and assess the educational performance and needs of children in foster care. DCFS will use the information to plan strategies to improve outcomes for children in foster care. DCFS will continue to conduct State Central Registry Child Abuse background clearances for childcare employees as requested by LDE.

- c) **Louisiana Department of Health (LDH)** and the DCFS collaborate on the following issues:

**Medicaid Managed Care Plans:** LDH and DCFS work together on contract development and amendments to hold the Medicaid managed care plans and their providers accountable for network sufficiency and positive outcomes for the medical, dental and behavioral health of children and families.

**Building Bridges:** LDH and DCFS continue to implement the Building Bridges approach in treatment and discharge planning for youth in residential care through weekly meetings to strategize for family finding and family engagement for youth in residential treatment.

**Office of Citizens with Developmental Disabilities (OCDD) and Human Services Districts:** LDH and DCFS staff coordinate at the state level and with local Human Services Districts to obtain services for developmentally/ intellectually challenged children and youth.

**Interagency Service Coordination Council (ISCC):** LCH and DHH jointly participate in the ISCC, which provides a forum for collaborative service delivery for children and youth with developmental and/or intellectual challenges. A DCFS Program Consultant remains an active participant in the State Interagency Coordination Council (SICC) to support advocacy and change for children under the age of three receiving developmental services through the Early Steps Program.

**LDH and DCFS FFY 2021:** DCFS continued collaboration with LDH through Medicaid Managed Care Plans, Building Bridges, OCDD and ISCC. Joint staffings were held for children in foster care with extreme circumstances to assure oversight, and safe, effective use of psychotropic medications for these children. LDH and DCFS provided webinar trainings with assistance of a board certified child psychiatrist for foster care staff.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**LDH and DCFS for FFY 2022:** Collaboration will continue between LDH and DCFS. Efforts to establish managed care medical providers for children in foster care and development of electronic medical records through the managed care organization (MCO) for more effective medical care management are continuous. Joint staffings will be held as needed for children in foster care with extreme circumstances to assure oversight and to assure safe, effective use of psychotropic medications for these children. LDH and DCFS will provide webinar trainings with assistance of a board certified child psychiatrist for foster care staff.

- d) **Comprehensive Addition and Recovery Act of 2016 (CARA):** Quarterly meetings are held with appropriate stakeholders in each region to monitor ongoing efforts and services for substance-exposed newborns, and to monitor compliance with the Plans of Safe Care (POSC). Systemic issues identified in regional meetings are addressed in state level meetings. This work will continue during the next few years.

**CARA Update 2021:** DCFS continues to hold quarterly meetings with CARA Liaisons for each region, Family Service Consultants, and community stakeholders (OPH, PBH, Law Enforcement, Early Steps, Kid-Med, hospital health, Early Education staff, and other substance abuse providers. The My Community Cares (MCC) parish coordinators have been added to quarterly meeting. Quarterly regional CARA meetings were documented to ensure the needs of the drug and/or alcohol affected infants, and their families were addressed and include discussions of Early Steps referrals and potential barriers. The agency improved tracking of drug affected, and alcohol affected newborns in Family Services by adding individual case open reason codes for each (code 85 and 88), and monitored the requirements put forth by CARA to ensure the needs of families with drug, and alcohol affected newborns are met.

**CARA Activities Planned for FFY 2022:** DCFS will continue to participate in quarterly meetings with appropriate stakeholders in each region to monitor ongoing efforts and services for substance-exposed newborns, and to monitor compliance with the Plans of Safe Care (POSC).

- e) **Heroin, Opioid Prevention and Education Council (HOPE):** The state legislature established the HOPE Council to advise the Governor on the opioid epidemic. DCFS Child Welfare serves on HOPE. The HOPE Council developed a website that captures statewide data on the opioid epidemic and provides a comprehensive list of all related initiatives in the state. The council submitted a report to the legislature with recommendations to improve the response including the formation of a subcommittee.

**HOPE Update FFY 2021:** DCFS continued to serve on the HOPE Council and contributed to its' annual report to the legislature. An Advisory Council on Heroin and Opioid Prevention and Education meeting was held on March 4, 2020 and on September 23, 2020.

**HOPE Activities Planned for FFY 2022:** The DCFS will continue all activities currently in place, and will continue to submit annual reports to the legislature with

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

recommendations to improve responses to the opioid epidemic. The HOPE Council plans to collaborate to work towards the following goals within the new year:

- Continue Community of Caring Workgroup dialogue,
- Improve access to alternatives to opioids for management of chronic and severe pain,
- Educate public and providers relative to dangers of synthetic opioids, opioid misuse, stigma, alternatives to opioid pain management, opioid addiction-related trauma, early recognition of symptoms, as well as education on availability of services,
- Incentivize providers to care for those with opioid use disorders, especially those in specialized populations,
- Work to expand access to Medication-Assisted Treatment in emergency departments, hospitals and substance use residential facilities,
- Enhance harm reduction strategies,
- Increase access to, affordability of and utilization of Naloxone,
- Continue development of Care Coordination, Peer Support Services, and Peer-to-Peer Consultation.

f) **Office of Juvenile Justice (OJJ)** and the DCFS collaborate as follows:

IV-E Eligibility: DCFS Foster Care and the Federal Programs and Grants unit work with OJJ to assure IV-E eligibility is determined accurately for children in the custody of the Department of Corrections. This work is ongoing.

Life Skills Training: Foster Care/Transitional Living Program staff and OJJ staff work together to assure eligible youth receive the life skills training needed to function independently as adults. The Department has worked to implement some of the recommendations from the Youth Aging out Task Force, which includes expanding Chafee Foster Care Independence Providers (CFCIP) services to operate as a one-stop transition center for DCFS and OJJ youth.

Interstate Compact: The OJJ Interstate Compact on Juveniles collaborates with DCFS to manage youth runaway situations for youth in foster care both from Louisiana and from other states found in Louisiana.

**OJJ and DCFS Update 2021:** DCFS and OJJ continued to collaborate regarding providing better wrap around services for families and identifying and providing services that were most appropriate to meet client needs.

**OJJ and DCFS Activities Planned for FFY 2022:** Ongoing integrated case management collaboration for dually involved youth.

g) **Federal Recognized Tribes** and the DCFS collaborate as follows:

Title IV-B and IV-E Eligibility: DCFS Foster Care and Federal Benefits Programs work with the federally recognized tribes in Louisiana to assure Title IV-B and Title IV-E eligibility is determined accurately for children served in Child Welfare programs within the tribes. This work is ongoing.

Life Skills Training: DCFS Transitioning Youth Program staff and tribal liaisons work together to assure eligible youth receive the life skills training needed to function independently as adults. The Department has worked to implement some of the recommendations from the Youth Aging out Task Force, which includes expanding Chafee

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Foster Care Independence Providers (CFCIP) services to operate as a one-stop transition center.

Please refer to Section 5: Consultation and Cooperation between States and Tribes for updates and activities planned.

- h) **Foster Parents** and the DCFS collaborate as follows:
- Quality Parenting Initiative (QPI): DCFS implemented QPI statewide as of May 2017. Partnerships Agreement Plans were developed. Foster parents and DCFS staff signed the agreements during FFY 2018 as evidence of commitment to QPI. Annual planning and performance documents include QPI expectations for DCFS staff at all levels.
- Initial Client Services: DCFS has developed and implemented processes for initial client service provision such as Comfort Calls and Icebreaker Meetings to foster relationship development between birth parents and foster caregivers.
- Foster Parent Support Organization: DCFS finalized the contract for the provider organization for the Foster Parent Support Organization and services began effective July 1, 2019.

**Foster Parents and the DCFS Update 2021:** DCFS continued development of QPI to emphasize the importance of collaboration among DCFS, biological and foster parents. DCFS worked diligently to engrain the QPI philosophy into the organizational culture and strived to provide all stakeholders an opportunity to provide feedback on an ongoing basis. DCFS is fully committed to strengthening partnerships with families and stakeholders by working with them in a respectful, transparent manner. Relationships with foster caregivers is critical to meeting the needs of children in foster care.

Effective February 1, 2021, DCFS implemented monthly email surveys for stakeholders statewide. The surveys solicit feedback about the department's success in collaborating with others. Each month a specific stakeholder group (foster parents; biological parents and older youth in foster care) are surveyed in the Foster Care, Adoptions and Home Development programs. The results of the surveys are compiled and shared monthly with the Area Directors and Regional Administrators as well as with staff in regional CQI meetings.

**Foster Parents and the DCFS Activities Planned for FFY 2022:** DCFS will continue monthly surveys for stakeholders statewide. This information will be used to improve engagement skills and determine the best service provisions available for clients.

- i) **Temporary Assistance to Needy Families (TANF)** and the DCFS collaborate as follows: DCFS Family Support Division administers the TANF program in Louisiana. As two divisions within the same organization, collaboration between Child Welfare staff and TANF staff is frequent and ongoing. Collaboration between the two entities occurs in two significant areas:
- Financial Assistance When Children are in the Home: DCFS Child Protective Services (CPS), Prevention/Family Services (FS) and Foster Care (FC) Program staff work with

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

TANF staff to ensure Child Welfare clients have access to financial assistance programs administered by TANF including food and cash assistance.

Financial Assistance for Non-Certified Relative Caregivers: Foster Care staff frequently collaborate with TANF staff to assist non-certified relative caregivers of children in foster care access the Kinship Care Subsidy Program.

Substance Abuse Treatment: The Residential Care for Pregnant Women and Women with Dependent Children Program serves TANF-eligible women with dependent children currently using addictive substances or with a history of use and are at risk for relapse. This program provides assessment, individual, group and family counseling, trauma informed services, drug education, relapse prevention, case coordination and collateral consultations, as well as a continuum of evidenced-based curriculum designed to help get families back to their best individual level of functioning. It provides residential treatment services to women and their dependent children up to age 12. Services include assessment, individual, group and family counseling, trauma informed services, drug education, relapse prevention, case coordination and collateral consultations, as well as a continuum of evidenced-based curriculum designed to help families function at their highest level.

TANF Update 2021: Collaboration continued between Child Welfare and TANF staff.

TANF Activities Planned for FFY 2022: Child Welfare staff will continue collaboration with TANF staff.

- j) **Citizens' Review Panels (CRP):** For additional information on CRPs, please refer to the CAPTA portion of this plan.

**Federal Partners:** DCFS collaborates with **ACF Region VI** on the compilation and submission of various reports and other documents, and receives ongoing support from the regional office on matters of practice and policy as well as support from the **Capacity Building Center for States**.

Federal Partners and DCFS Update 2021: DCFS continued collaboration with federal partners.

Federal Partners and DCFS Activities Planned FFY 2022: DCFS will continue collaboration with federal partners.

## **2. Private Not for Profit Organizations:**

- a) **Casey Family Programs (CFP):** DCFS collaborates with CFP for Judicial engagement and policy and practice improvements to support safety, permanency and well-being for children in their own homes or in foster care. Specific collaborative efforts undertaken with the support of CFP include judicial involvement, planning for implementation of My Community Cares, and development of a training curriculum for supervisors.

CFP Update 2021: The Department continued collaboration and work on the 2020 Work Plan and Progress Report with Casey Family Programs.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Legal representation: DCFS met with CIP, Child Focus, and the American Bar Association (ABA) regarding implementation of interdisciplinary representation, including adding a parent mentor to the legal team in Rapides Parish.
- Family Engagement: The Pelican Center for Children and Families hosted a listening circle with birth parents in Caddo parish.
- My Community Cares (MCC): DCFS has collaborated with the Pelican Center, Community Build Ventures and CFP Technical Assistance to develop a plan to implement MCC in 2020. DCFS provided talking points to the Pelican Center, has met with juvenile court judges in Baton Rouge and with the Urban League of Louisiana to garner support for this initiative. The Pelican Center developed a toolkit called “How to Host a Community Conversation” for distribution to teams promoting MCC.
- Supervisor Curriculum and Training: CFP provided technical assistance and consultation to operationalize the Principles of Practice, to support development of a curriculum for supervisor training. The team introduced the curriculum to staff in a kickoff meeting that provided an opportunity for staff to provide feedback. The team consulted with Anthony Ellis, Baton Rouge Regional Administrator, to identify training needs of regional staff to support improve engagement with families.

**CFP Activities Planned for FFY 2022**: DCFS will continue collaboration with CFP in the following areas:

- Strengthen legal representation for all parties involved in child welfare to assure fair outcomes;
- Engage First Lady on policies to reduce abuse and neglect and support permanency and well-being;
- Enhance capacity to prioritize and manage high impact strategies in one or more of Casey’s Five Outcome areas, the Family First Prevention and Services Act (FFPSA) Implementation.
- Advance engagement efforts to initiate and accelerate community conversation and collaboration with the child welfare system and multiple stakeholders.
- Inform and educate community members and leaders on addressing child and family needs to reduce child abuse and neglect safely.
- Continue support of Quality Parenting Initiative (QPI) integration into practice to improve foster care in Louisiana improving engagement between birth and foster parents.
- Professionalize the child welfare workforce by promote identifying best practices, training needs and key competencies (knowledge, skills and abilities) for front-line staff and supervisors.

b) **Annie E. Casey Foundation (AECF)**: Focuses on strengthening families, building stronger communities and ensuring access to opportunity. AECF advances research and solutions to overcome the barriers to success, help communities demonstrate what works and influence decision makers to invest in strategies based on solid evidence. DCFS established five workgroups in collaboration with AECF:

- **The Family and Youth Voice Involvement Workgroup** had three primary goals:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Evaluation of certified foster homes – This workgroup revised the certified foster homes evaluation document to allow birth parents and youth to provide information regarding Quality Parenting Initiative practices and the foster parent’s efforts to achieve the case plan goal. The workgroup submitted revision recommendations to the Home Development Unit for finalization.
- Racial equity and inclusion - This workgroup reviewed and updated two foster care policies and two CPS policies to ensure consideration of racial equity and inclusion. DCFS staff continues to work with stakeholders and birth parents to ensure the policies consider racial equity and include QPI language. The workgroup identified needed changes plans to complete a thorough policy review.
- Placement stability – This workgroup revised preservation staffing policy to include family and youth voice and involvement. The workgroup conducted a WebEx to introduce the changes to specialized youth workers and youth consultants. The group continues to monitor field staff’s ability to conduct preservation staffings and assure that child welfare consultants are available to lead or participate in preservation staffings. The group plans to develop a report identifying children and youth who experience three or more placements in a given month. The group continues to explore issues and develop strategies to reduce placement moves for youth in foster care.
- **Enhanced Use of Data (EUD) Workgroup** was responsible for identifying valid and reliable data sources to support outcomes-based performance management for older teens in foster care.
  - Data – The workgroup identified available data and areas where data was needed but unavailable. The workgroup collaborated with other workgroups to identify appropriate outcomes for measurement. The collaborating workgroups decided that the outcome reports should focus on how the children and youth are functioning rather than on compliance. The workgroup developed an outcome data report for teens that is to be reviewed and updated every six months. The workgroup circulated the report and finalization is expected soon.
  - Apply performance management principles to improve youth permanency – the workgroup analyzed data to determine where children and youth most frequently get ‘stuck’ in foster care and prevent youth from aging out of foster care without a permanent home. The workgroup considered factors such as age, time in foster care, race, reason for foster care entry, etc.
  - The workgroup, with feedback from the Extended Foster Care (EFC) workgroup, used the data to identify the population of youth to be served by the new youth specialists under the EFC Program. The team developed individualized performance management reports for each workgroup. Workgroup leads provide information to AECF and the DCFS CW Data Unit. The data unit completes and distributes the reports monthly.

The goals of the workgroup have been met, but the workgroup is available to reconvene if necessary.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- **Extended Foster Care (EFC) Workgroup** is responsible for implementing the EFC statute (Act 400) which was signed into law on June 19, 2019. Achievements and activities are described below.
  - Participation - EFC staff are currently serving 144 youth (127 who have aged out of foster care and 17 youth aged 17.5 but not yet 18 in foster care).
  - Adult adoptions – The first 2 adult adoptions are underway and staff are receiving additional referrals.
  - Housing: DCFS has secured 25 housing vouchers from Louisiana Housing Corporation (LHC). DCFS and LCH have entered into memorandum of understanding regarding housing assistance for young adults, parents and families served by DCFS. A person involved in LCH negotiations left the department, causing a delay. To date, DCFS has made one housing referral and two others are pending. Policy is in draft and almost complete to provide the process to secure and approve Host Homes. DCFS continues to meet with multiple housing programs to develop housing resources throughout the state.
  - Staffing: DCFS has hired a WWK recruiter who began work in late September. A recommendation has been made for hiring for an administrative review position. DCFS has held interviews for a Child Welfare Services Assistant position and a Statewide Manager but recommendations have not yet been made. A new supervisor and worker have been hired in Shreveport to become the fifth team.
  - Management: The Youth Villages (YV) Lifeset model continues to be implemented and this supportive model has been well received by the staff and youth. The initial Program Model Review has been completed with favorable results. DCFS is developing the Program Improvement Plan.
  - Youth Advisory Board: The second Youth Advisory Board retreat was held in November and was successful. Work Plans were developed for the year. The Work Plans focus on strengthening and structuring the board, placement instability and legislative efforts. The board and DCFS collaborated to develop a Foster Youth Bill of Rights. AECF arranged for DCFS to get training from Jim Casey regarding group dynamics, ‘managing your own trauma’, and becoming a change leader.
  - Community Involvement: AECF assisted with visual tools for the board, and helped develop a guide and training (ongoing) to share with community organizations or groups that want to have a youth participate on boards or serve in other positions. The training teaches how community organizations can appropriately incorporate the youth’s voice and necessary considerations.
- **Families First Workgroup** collaborated with AECF to develop ways of preventing removal of children and reducing the inappropriate use of group care with a focus on requirements of the Family First Prevention Services Act.
  - Preventing removal – the workgroup studied how to identify the target for Family First Prevention Services based on review of data that informs the definition of candidacy, defining reasonable candidates, deciding what services will help keep families together and children out of foster care. The work centered on identifying evidence based services to prevent removal and understanding procedures for claiming Title IV-E and financial implications.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Group care – The Families First Act requires that group care be used only when the child or youth has a specific treatment need that families cannot meet. The residential workgroup developed a comparison of Non-medical group homes (NMGH) and Therapeutic group homes (TGH) with Qualified Residential Treatment (QRTP) Facilities that identified and analyzed data to understand the population of children in residential care and developed a fiscal analysis of the impact Title IV-E funding changes for group care.
- **Management of Group Care Workgroup** disbanded in July 2019.
- **Resource Development Workgroup** focused on AECF assistance to Home Development (HD) in the following areas:
  - Outsourcing duties - a work effort analysis was completed to determine which, if any, HD responsibilities could be considered for outsourcing so that HD staff would have additional time to focus on recruitment and retention.
  - Foster home needs – foster caregiver data of open homes, available placements, homes with no placement in 12 months, and placement needs in each region were provided to the regions. Regions did a clean up to determine actual needs for targeted recruitment.
  - Recruitment plans: AECF provided recruitment plan training to all HD staff across the state and assisted all of the regions in developing targeted recruitment plans. AECF is assisting HD in developing a recruitment program enlisting current foster caregivers to assist with recruitment.
  - Targeted recruitment: trained HD consultants in strategies to assist regions with targeted recruitment. AECF provided quarterly consultation to regions on targeted recruitment efforts.
  - Resources for teens: AECF assisted HD in developing a statewide resource listing for foster caregivers of teens, which was provided to all regions to share with caregivers.
  - Pre-service orientation: AECF began work to assist HD in revising pre-service orientation to focus more on needs of homes for teens.
  - Foster Parent Handbook: AECF is assisting HD in revising the Foster Parent Handbook.

**AECF Update 2021:** Partnership continued with Annie E. Casey to improve services to youth in care. AECF was to continue assisting HD in developing a statewide-targeted recruitment campaign for homes for teens and older youth scheduled to launch in the fall of 2020; however, Home Developments (HD) work with AECF was postponed due to COVID and hurricanes in 2020.

AECF completed work assisting HD in revising pre-service orientation to focus more on needs of homes for teens. The completion date was delayed due to COVID; however, implementation took affect January 2021. AECF consultants trained HD staff in the revised orientation presentation and provided training in presenting information through virtual format. Due to COVID pre-service orientation is now virtual.

The AECF work is completed at this time with the EFC unit.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**AECF Activities Planned for 2022:** The AECF work is completed at this time with the Home Development unit and the Extended Foster Care unit.

- c) **Quality Improvement Center for Workforce Development (QIC-WD):** QIC-WD selected DCFS for a five-year workforce development grant in 2017 to improve the child welfare workforce in Louisiana. The improvement efforts focus on recruiting and selecting applicants who possess the knowledge, skills and abilities needed by child welfare workers, and retaining qualified employees to assure quality service delivery and improved outcomes for children and families. The work continues with exploration and data collection. The QIC-WD leads a team to develop a plan of intervention.

**QIC-WD Update 2021:** QIC-WD continued implementation of the Workforce job redesign, which entailed implementing the prevention and permanency teams to include the new Team Specialist role. Full implementation of the rollouts of the three experimental areas (Calcasieu Parish, East Baton Rouge Parish and Lafayette Parish) were completed in February 2020. After full implementation, the QIC-WD team worked together on the evaluation design, testing the theories of how the job redesign will improve child welfare practice, family outcomes and employee retention. The evaluation design includes surveys, time studies, case record reviews, and anecdotal information by the experimental group as well as for the controlled areas (Bossier Parish, Caddo Parish, Ouachita Parish, Rapides Parish, St. Tammany Parish, West Jefferson Parish, Lafourche Parish and Terrebonne Parish).

**Significant findings or events during this reporting period:** The project improvised its practice during the Phase 1 quarantine period in April 2020 until May 15, 2020. Although under restrictions of quarantine, the model design was followed as much possible from a remote distance (huddles, staff meeting, planning etc. via virtual mechanisms). Following the quarantine, DCFS transitioned into Phase 2 with limited, but in-person visits resumed and more compliance with the model design (e.g. in-person parent-child resumed, resource availability increase).

**OID-WD Activities Planned 2022:** The project is in its last phase and is scheduled to end on September 30, 2021. A project extension has been requested but this has not been approved as of this reporting period. The overall plan for the Job Redesign is to explore the outcome measures based on the theories of change. If the evidence is favorable to child welfare practice and family outcomes, we would like to expand this practice across Louisiana child welfare.

- d) **Braveheart Foundation:** by serving on the Board of Directors and meeting with the organization monthly. Braveheart is a Baton Rouge based organization that raises awareness of foster care by enlisting the assistance of many community organizations, church groups, businesses and individuals to develop Braveheart's plan for supporting children entering foster care. DCFS staff serve on the Board for Braveheart and meet with the foundation monthly.

**Children entering care:** Braveheart provides backpacks to local DCFS offices statewide for children entering care. The backpacks contain comfort items and some essentials.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Life books: Braveheart provides life books for children and youth in foster care.

Christmas gifts: Braveheart provides Christmas gifts that are meaningful to children and youth.

Older youth in foster care: Braveheart is working with DCFS to develop options for supporting work with older youth preparing for independence, and collecting items more specific for youth in need such as a microwave oven for a youth transitioning to college.

**Braveheart Foundation Update 2021:** DCFS continued to meet monthly with the Braveheart Foundation. Braveheart continued to provide backpacks, life books and Christmas gifts for children in foster care. Braveheart took steps to assure that the items purchased for children in foster care were meaningful and specific to the individual child's desires and needs. Braveheart hosted an event in Baton Rouge Saturday, May 15, 2021 to benefit foster children and raise money for their programs. This event was a family fun day with multiple activities and tickets were available for the public to attend.

**Braveheart Foundation Activities Planned for 2022:** Braveheart will work with DCFS to revamp life books so that the process of creating a life book is more therapeutic for the children and youth.

- e) **Crossroads NOLA (New Orleans, LA):** Crossroads is a faith-based organization affiliated with the Louisiana Baptist Association. The following collaborative activities are ongoing:

Training: Crossroads offers an annual statewide training for foster parents, community partners and DCFS staff through an Empowered to Connect Training simulcast. In partnership with the Louisiana Child Welfare Training Academy (CWTA), Crossroads was instrumental in the initiation, organization and dissemination of Trust Based Relational Intervention (TBRI) training. Crossroads offers TBRI training around the state for foster caregivers, residential providers, DCFS staff, legal partners, and other stakeholders.

Foster Caregiver Support: Crossroads assists with a wide variety of recruitment, training and support efforts for foster/adoptive parents including orientation and support groups for foster caregivers.

Community Outreach: Crossroads works with the community to develop supports for foster caregivers, and is developing plans for outreach in the New Orleans area to support current caregivers and exploring other opportunities to be a community resource for families involved with the child welfare continuum of services.

**Crossroads NOLA Update 2021:** The Foster Parent Pre-Services Training was contracted with CR NOLA for 2021 and DCFS-CW staff as well as new foster parents will be able to attend this training. Efforts by Crossroads NOLA were delayed including support, in person support efforts and support groups due to the effects of COVID. Many activities hosted by Crossroads including fun days for families were postponed or delayed due to the pandemic. Crossroads NOLA was able to convert to virtual support including orientation and support groups.

**Crossroads NOLA Activities Planned for 2022:** DCFS plans to continue with the Crossroads contract. DCFS will continue the partnership with Crossroads in recruitment,

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

training and supportive services to foster parents in the Orleans and Covington regions. Crossroads plans to continue work with DCFS implementing pre-service training for foster families recruited by Crossroads. Crossroads will continue to provide TBRI training statewide.

- f) **Louisiana Baptist Children’s Home (LBCH):** LBCH is a faith-based organization affiliated with the Louisiana Baptist Association. The following collaborative activities are ongoing:

Foster home development: LBCH recruits basic and specialized foster homes to meet the unique care needs of children in foster care for DCFS. LBCH has a foster care community of individual foster homes in Monroe that provide placements for children in DCFS custody. LBCH is a licensed child-placing agency, and it licenses and maintains these foster homes. LBCH does training and licensing for both DCFS homes as well as private foster homes for the Baptist faith community.

Training: LBCH presents pre-service orientation for the families they recruit. LBCH and Crossroads NOLA offered training to foster parents, community partners and DCFS staff statewide through an Empowered to Connect Training simulcast.

Home Studies: LBCH completes home studies on the families they recruit, and DCFS makes the certification decision and certifies as appropriate for homes that are not in the LBCH licensed community.

Support to Foster Families: LBCH provides ongoing support to foster families through individual support and monthly support group meetings. LBCH works with faith-based and community organizations throughout the state to develop support services for foster caregivers and children in foster care.

**LBCH Update 2021:** DCFS continued collaboration with the LBCH. LBCH met the needs of over 2,200 children in 2020. LBCH will host a virtual faith based support collaborative meeting in May 2021. Orientation and trainings were delayed due to COVID. The pandemic affected the number of foster homes recruited through the LBCH; however, recruitment appears to be back on track as LBCH has adjusted to the pandemic.

**LBCH Activities Planned for 2022:** DCFS plans to continue collaboration with the LBCH for recruitment, retention, training and supportive services to foster parents.

- g) **Empower 225:** Empower 225 is a faith-based organization affiliated with Healing Place, a Baton Rouge non-denominational church. Healing Place Serve changed the name to Empower 225 and created a website <https://empower225.org>. The organization’s mission is to empower youth in the capital region who are at-risk of homelessness and dependency to reach their highest potential through educational support, life-skills training (Empower 225 is an Independent Living contract provider), career preparedness, housing and mentorship. The following collaborative activities are ongoing:

Human trafficking: Empower 225 provides services to human tracking survivors and provides training to other organizations that provide services to human tracking survivors.

Leadership and life skills: The Empower 225 Leadership Academy has a goal of help youth have a career with a livable wage through job training and secondary education. It assists

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

youth to achieve a high school diploma or equivalent. The academy teaches life skills to help youth succeed relationally and professionally.

Housing: Empower 225 provides housing for males age 16 to 21 who are at risk of homelessness through Anchor House, an eight bed family-style home.

Foster Care/Adoption Initiative: Empower 225 provides awareness and advocacy for youth in care and available for adoption. The organization recruits foster and adoptive parents through the traveling Louisiana Heart Gallery (LHG) display, a collection of pictures and information about youth available for adoption.

Training and support: Empower 225 provides training and support for foster caregivers and birth parents. DCFS has trained Empower 225 volunteers to present 'A Journey Home' pre-service training. The volunteers are working with DCFS to present pre-service training to the families they recruit.

**Empower 225 Update 2021:** All efforts mentioned above were continued through FFY 2021. Empower 225 has assisted with the trainings presented by Crossroads and continued to provide housing.

**Empower 225 Activities Planned 2022:** DCFS plans to continue collaboration with Empower 225. DCFS plans to contract with Empower 225 for a youth ambassador position. The purpose of this ambassador position is to ensure youth voice is incorporated throughout all aspects of the child welfare system through the development of youth leadership and advocacy at the local, state and national level. The duties of the new ambassador position include assisting in leading the State Youth Board, assisting in advocacy efforts at the Capitol, assisting in organizing youth testimony, providing coaching and support to peer support staff, training peer support staff and organizing youth participation on activities and workgroups.

- h) James Samaritan (JS):** A non-profit organization in the Covington Region. It has been supporting the foster care system for eight years, and works with churches, volunteers, foster families, children in foster care and youth who have aged out of foster care. Collaboration between James Samaritan and DCFS includes the following areas:

Resources: JS provides appropriate beds to support placements of children in foster care and necessities for foster parents who lack financial resources.

Recreation: JS provides sports uniforms and fees so children in foster care can participate in extracurricular activities.

Transitioning youth: JS has implemented Open Table, a relationship building program to transform how youth transition by helping them identify and achieve their goals.

Family visitation and event venue: JS has opened a Family Center to create a safe environment for family visits, parties and other events.

**JS Update 2021:** James Samaritan (JS) continued to provide services for transitioning youth and center for Foster Care. JS provided resources as needed and requested by DCFS. James Samaritan assisted in opening up visitation centers around the state to help biological parents stay in contact with their children, adhering to the social distancing. JS was able to provide Easter baskets for these families and gift cards. JS hosted a back to school drive gathering school supplies for children and youth in July. JS continues to support the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Louisiana Elite Advocacy Force (LEAF) and hold open tables creating more open tables (support circles for older youth) in Louisiana than anywhere in the United States. The family center was used three times more than last year (2019) and JS was able to serve over 350 children this Christmas season. JS provided donations to children, youth and young adults during the holiday season and held a Christmas event. DCFS identified more than 200 families across the state that did not have the financial means to comply with requirements that were mandated by courts, schools and DCFS because of the COVID-19. Access to these communication resources became critical to the health and safety of at-risk children. JS collaborated with the Pelican Institute to work with vendors to design a very cost-saving technology package. JS gave out over 250 phones/devices to children in need for online learning. JS continues with a vehicle program and donated six vehicles to youth/young adults in transition during 2020. Due to the effects of the COVID-19, JS fast-tracked the launch of Community Connections across the State. Community Connections is an online platform that connects the needs of foster children, families, and transitioning youth to church and community members who are willing to fill these critical needs.

**JS Activities Planned for 2022:** DCFS will continue collaborating with JS to serve children, youth and families involved with the foster care system.

- i) **Louisiana Heart Gallery (LHG)** and DCFS collaborate to recruit adoptive homes for children who available for adoption in Louisiana by providing professional portraits and videos. Children throughout the state attend events to have a portrait and video. The videos and portraits are placed on AdoptUSKids, DCFS, social media and LHG websites, and are featured on America’s Kids Belong.

LHG has started ‘Mom’s Coffee Break’ support groups in East Baton Rouge, Ascension and Livingston parishes.

**LHG Update 2021:** Opportunities for displaying the heart gallery were minimal due to COVID; however, LHG was able to maintain a virtual display providing professional digital pictures and videos. The videos and portraits were placed on AdoptUSKids, DCFS, social media and LHG websites, and are featured on America’s Kids Belong.

**LHG Activities Planned for 2022:** DCFS will continue collaboration with LHG. DCFS plans to collaborate with LHG in supplying birthday baskets to the Baton Rouge regions children and youth within the adoption unit.

- j) **One Heart NOLA (OHN):** A faith-based, 501c3, non-profit organization serving the Greater New Orleans area. The OHN mission is to demonstrate the love of God by providing necessary resources to children and families in crisis. DCFS and OHN collaborate on the following projects:

**Placements:** OHN locates placement resources that allow siblings in foster care to remain together, and provides beds for children who need them.

**Reunification:** OHN provides necessities that might delay reunification without items provided by OHN.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Education: OHN assists with senior high school expenses, provides college scholarships and other support to help children in foster care graduate from high school and post-secondary education.

Foster Care Alumni: OHN provides financial assistance to youth from age 18 to 24 who have aged out of the foster care.

**OHN Update 2021:** DCFS continued collaboration with OHN. In June 2020, OHN stocked the “snack shack” in each office for family visits providing snacks, water, juice, baby wipes, sanitation wipes and other necessities. OHN hosted the Front Porch Fest VIII, and X which was streamed live for entertainment for children, youth and families. OHN provided school supplies to local children. OHN partnered with DCFS to care for 1,336 local evacuees staying in the area by collecting and distributing toiletry items, hair care and underwear to all sheltering. OHN provided baby bottles, baby clothing and other items for infants, and young children of evacuees. OHN provided over 1000 toys and Christmas presents to more than 200 families. DCFS collaborated with OHN to provide 350 Easter baskets to children and young adults in April 2021.

**OHN Activities Planned for 2022:** DCFS will continue to collaborate with OHN to keep siblings together, provide necessities for to support reunification for families, offer college scholarships for youth cover senior high school expenses and assist children and families as needed.

- k) **[www.AdoptUSKids.org](http://www.AdoptUSKids.org) website:** Provides photo listing of children who are available for adoption and have no identified adoptive resource. The website features certified adoptive families. A contract with the Adoption Resource Exchange Network makes this website available. A program manager at the state level serves as liaison between families who have expressed interest in a child and the child’s adoption worker.

**AdoptUSKids Update FFY 2021:** Adoption staff continued work with AdoptUSKids to ensure pictures were taken of all appropriate children and posted on the AdoptUSKids website. Exploration of additional services available through the AdoptUSKids website continued. A plan for registered certified caregivers interested in adoption on the website was developed. DCFS contacted the website about Public Service Announcements (PSA) to increase awareness of the need for families. DCFS continued to work with the Louisiana Heart Gallery and update them on children and youth needing forever homes. DCFS collaborates with the Louisiana Heart Gallery and AdoptUSKids in keeping children and youth needing forever homes current on the AdoptUsKids website.

**AdoptUSKids Activities Planned for FFY 2022:** Formalize a plan with the website to develop a Louisiana Speaker’s bureau to assist in recruitment of adoptive caregivers for sibling groups and older youth. DCFS plans to collaborate with AdoptUSKids regarding post adoption services.

- l) **Louisiana Adoption Advisory Board (LAAB):** A long-time partner of DCFS in providing a mechanism for networking among professionals involved in various aspects of the adoption continuum.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**LAAB Update 2021:** DCFS continues to collaborate with the LAAB in providing a mechanism for networking among professionals involved in various aspects of the adoption continuum. LAAB hosted a virtual webinar titled *An Adoptee's Search for Birthparents: A Challenging Journey* on November 18, 2020 and this webinar was recorded and available on their website.

**LAAB Activities Planned for FFY 2022:** Continue to collaborate with LAAB.

- m) **Wendy's Wonderful Kids (WWK)** of the Dave Thomas Foundation. WWK is a grant program funds specialized recruiters in each region to find child specific placements for hard-to-place populations of children.

**WWK Update 2021:** Partnership continued with the Dave Thomas Foundation. A new WWK recruiter position was created and filled for Extended Foster Care (EFC) within the Covington and Baton Rouge area as a piolet program. There are nine total WWK recruiters. WWK recruiters provided services for 12 young adults and are in the process of finalizing two young adult adoptions. WWK finalized 17 adoptions and 2 guardianships from July 1, 2020 – December 2020 for children and youth. WWK staff presented the WWK model to Adoptions supervisors and managers as a refresher course for some staff and an initial training for new supervisors and managers. (Please see the Service Array and Foster Home Recruitment section for more detail.)

The stakeholders mentioned are only some of the core groups with whom DCFS regularly collaborates in serving the children and families touched by the department. Throughout the plan, you will find additional information regarding other key stakeholders such as the Family Resource Centers funded through the Promoting Safe and Stable Families Grant and the Independent Living Skills providers funded through the Chafee Grant. Collaboration with these stakeholders is discussed within areas of the plan focused on those grants.

**WWK Activities Planned for 2022:** The WWK program will continue to recruit in each region using all recruiters and supervisor. WWK data and trends will continue to be analyzed to improve outcomes for children and youth. DCFS along with WWK are looking at expanding the new WWK EFC recruiter position to the Orleans area pending the need of a recruiter within that location.

- C. **CHILD WELFARE VISION STATEMENT:** The Division of Child Welfare within DCFS has many guiding principles, which influence the way Louisiana citizens are served. Provided below are the mission, vision and values statements guiding both DCFS overall and Child Welfare. All of these principles are synthesized in the six Principles of Child Welfare Practice, which most directly influences the daily actions of Child Welfare staff. The prioritization of work efforts within the Child Welfare programs and management of staff activities is guided by the four Child Welfare Priorities. Additionally, both state and federal data are utilized in Child Welfare decision-making processes.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**DCFS Mission Statement:** DCFS is working to keep children safe, helping individuals and families become self-sufficient, and providing safe refuge during disasters.

**DCFS Values:**

1. Quality – Providing individualized services with highly skilled staff.
2. Efficiency – Ensuring accurate services in a timely manner.
3. Respectfulness – Treating others with dignity, compassion and respect.

**Child Welfare Mission Statement:** Caring for the well-being and safety of Louisiana’s people.

**Child Welfare Values:** Treating all people with dignity, compassion and respect while providing services with integrity.

**Principles of Child Welfare Practice:** Our focus in providing child welfare services is entered on the following six principles:

- Practice focuses on the physical safety and emotional well-being of children.
- Families are strengthened to care for their children, in their homes whenever possible.
- A permanent family is vital to a child’s well-being.
- Decision-making is guided by the voice of children, young adults and their families.
- Everyone who supports children and families is treated as an important partner.
- The knowledge and well-being of our staff and partners is valued.

**Child Welfare Priorities:**

- A competent, stable workforce invested in carrying out the Child Welfare Principles of Practice;
- A family willing and able to meet the unique needs of any child who must be brought into foster care;
- Improved outcomes for older youth in foster care, especially regarding permanent connections; and
- Improved technology for maximum efficiency and effectiveness in practice.

**D. LINK TO THE LOCATION OF THE STATE’S APSR:** Louisiana’s past federally approved Annual Progress and Service Reports (APSR) and Child and Family Service Plans (CFSP) are posted on the DCFS website and can be located at the following link:

<http://www.dcf.la.gov/index.cfm?md=pagebuilder&tmp=home&nid=210&pnid=184&pid=315>

The 2020-2024 CFSP and the 2021 APSR were posted on the DCFS website after approval by the Administration for Children and Families / Children’s Bureau.

A public notice regarding the 2022 APSR was published in the Louisiana Register on March 20, 2021. The APSR was made available in hard copy when requested as well as on-line. A public hearing was held on May 6, 2021 at 10:00 a.m. No members of the community were present at the hearing; however, several DCFS staff were present.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**SECTION 2 – ASSESSMENT OF CURRENT PERFORMANCE IN IMPROVING OUTCOMES:**

The department has demonstrated the following seven federal outcomes indicators are being positively impacted by implementation of the activities in the Louisiana Program Improvement Plan (PIP), which became effective May 31, 2019. The department has taken the action steps outlined in the plan based on an analysis of the data collection/received during the PIP process to include Louisiana’s Data Profile reports provided by the Children’s Bureau, the Continuous Quality Improvement (CQI) case review process, DCFS information systems reports and stakeholder input.

**A. RELATED FEDERAL OUTCOME MEASURES**

- **Safety Outcome 1:** Children are first and foremost, protected from abuse and neglect; and
- **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 is preserved for children.
- **Wellbeing Outcome 1:** Families have enhanced capacity to provide for their children’s needs.
- **Wellbeing Outcome 2:** Children receive appropriate services to meet their educational needs.
- **Wellbeing Outcome 3:** Children receive adequate services to meet their physical and mental health needs.

**B. DATA SOURCE AND DATA ANALYSIS**

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

**Case Review Item 1:** Were the agency’s responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren), within the timeframes established by agency policies or state statutes:

Item 1	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	20	27	24	29	16	23
Number of Total Applicable Cases	29	33	31	36	30	31
Performance (%)	69.0% Baseline 80.0% (Goal)	81.8%	77.4%	80.6%	53.3%	74.2%

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Item 1 Progress:** Louisiana experienced a decline in performance of timeliness with at least one victim or caregiver on initiating investigations of Reports of Child Maltreatment and fell below the PIP goal of 80% by 5.8% with 23 of the 31 applicable cases reviewed rated as a strength in reporting period five. The state experienced a decline in reporting period four of the targeted goal of 80% by -26.7%, which indicates 16 of the 30 applicable cases reviewed, were rated a strength. Louisiana is still exploring why the Agency experienced a decline in Reporting Period 4. Although we saw significant improvement in reporting period 5, we still did not meet the PIP goal of 80%.

**Safety Outcome 2 – Children are safely maintained in their homes whenever possible.**

**Case Review Item 2:** Did the agency make concerted efforts to provide services to the family to prevent children’s entry into foster care or re-entry after reunification?

Item 2	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018- Sept 30, 2018	Oct 1, 2018- March 31, 2019	April 1, 2019- Sept 30, 2019	October 1, 2019- March 31, 2020	April 1, 2020- Sept 30, 2020	October 1, 2020- March 31, 2021
Number of Cases Rated as a Strength	3	8	13	16	17	27
Number of Total Applicable Cases	37	37	41	38	40	40
Performance (%)	8.1% Baseline 13.9% (Goal)	21.6%	31.7%	42.1%	42.5%	67.5%

**Item 2 Progress:** Louisiana improved performance in providing services to the family to prevent children’s entry into foster care or re-entry after reunification and exceeded the PIP goal by 13.5% in reporting period four with 17 out of the 40 applicable cases reviewed rated a strength. The state continued progress with this item in reporting period five with 27 of the 40 applicable cases rated a strength and a 25% increase from reporting period four. Louisiana experienced an overall improvement of 53.6% from the target goal through reporting period five and continues to experience growth in this area.

**Case Review 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?

Item 3	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018- Sept 30, 2018	Oct 1, 2018- March 31, 2019	April 1, 2019- Sept 30, 2019	October 1, 2019- March 31, 2020	April 1, 2020- Sept 30, 2020	October 1, 2020- March 31, 2021
Number of Cases Rated as a Strength	9	9	26	27	31	37

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Number of Total Applicable Cases	65	65	72	72	73	72
Performance (%)	13.8% Baseline 19.3% (Goal)	13.8%	36.1%	37.5%	42.4%	51.4%

**Item 3 Progress:** Louisiana’s performance continues to improve in making concerted efforts to assess and address the risk and safety concerns related to the child(ren) in their own homes or while in foster care in reporting period one. The state exceeded the PIP goal in reporting period four by 23.1% with 31 of the 73 applicable cases reviewed rated a strength. The state continued to exceed the PIP goal in reporting period five with a 32.1% increase from the PIP goal and 37 of the 72 cases rating a strength.

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

**Case Review Item 4:** Is the child in foster care in a stable placement and were any changes in the child’s placement in the best interest of the child consistent with achieving the child’s permanency goal(s)?

Item 4	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	35	29	34	31	43	42
Number of Total Applicable Cases	40	40	44	43	45	45
Performance (%)	87.5% Baseline 94.2% (Goal)	72.5%	77.3%	72.1%	95.5%	93.3%

**Item 4 Progress:** The state has experienced continued progress with regard to ensuring the child in foster care is in a stable placement and any changes in the child’s placement were in the best interests of the child and consistent with achieving the child’s permanency goal. There was an 8% increase from the baseline for reporting period four. Louisiana’s performance rating for the reporting period was 95.5% with 43 of the 45 applicable cases rating a strength. However, the state experienced a slight decrease of 2.2% in reporting period five with 42 of the 45 applicable cases rating a strength (93.3%). Through reporting period five, Louisiana is 5.8% over the baseline and slightly below the PIP goal by 0.9%.

**Case Review Item 5:** Did the agency establish appropriate permanency goals for the child in a timely manner?

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Item 5	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	25	26	27	22	37	36
Number of Total Applicable Cases	39	40	44	43	45	43
Performance (%)	64.1% Baseline 73.9 (Goal)	65%	61.4%	51.2%	82.2%	83.7%

**Item 5 Progress:** Louisiana has increased efforts with establishing appropriate permanency goals for the child in a timely manner. Louisiana experienced an increase in reporting period four and exceeded the baseline goal by 18.1% with 37 of the 45 applicable cases reviewed rated a strength. The state continued progress in reporting period five with an additional increase from the baseline of 19.6% with 36 of the applicable cases reviewed rated a strength. Louisiana has reached the goal in this area through reporting period five.

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

Item 6	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	10	11	19	12	24	22
Number of Total Applicable Cases	40	40	44	43	45	45
Performance (%)	25% Baseline 33.8% (Goal)	27.5%	43.2%	27.9%	53.3%	48.9%

**Item 6 Progress:** Louisiana has consistently exceeded the baseline with progress towards making concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child. There was an increase in reporting period four of 28.3% from the baseline; however, a decrease occurred in reporting period five with a difference of 4.4% from the baseline goal with a rating of 48.9%. The state has met the goal through reporting period five.

**Permanency Outcome 2 – The continuity of the family relationships and connections is preserved for children.**

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Case Review 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?

Item 7	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	30	20	26	31	23	24
Number of Total Applicable Cases	16	29	32	25	31	29
Performance (%)	53.3% Baseline	68.9%	81.3%	80.7%	74.2%	82.8%

**Item 7 Progress:** Placement with Siblings – Louisiana scored 74.2% in efforts to ensure siblings in Foster Care are placed together through reporting period four. There were 25.8% of cases with an area needing improvement. In reporting period five 24 of the 29 cases received a strength rating. However, reporting period five, Louisiana exceeded the baseline by 29.5%. Louisiana has reached the goal in this area.

**Case Review 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 relationship with these close family members?

Item 8	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	13	11	20	12	26	23
Number of Total Applicable Cases	38	34	37	30	37	33
Performance (%)	34.2% Baseline	32.3%	54.1%	40.0%	70.3 %	69.7%

**Item 8 Progress:** Louisiana has consistently exceeded the baseline since reporting period 2 for visiting with parents and siblings in foster with 26 of 37 applicable cases receiving a strength rating (70.3%) for reporting period four. There were 29.7% with an area needing improvement rating. In reporting period five, 23 of the applicable cases received a strength rating (69.7%) and the overall strength rating improved.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Case Review 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?

Item 9	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	23	26	27	27	28	34
Number of Total Applicable Cases	39	39	42	41	44	43
Performance (%)	59% Baseline	66.7%	64.3%	65.9%	63.6%	79.07%

**Item 9 Progress:** Preserving connections – Louisiana made an effort to maintain the child’s connection with a strength rating of 63.6% for the applicable cases in reporting period four. There were 36.4% with an area needing improvement. The overall strength rating improved by 4.6% from baseline. In reporting period five, 34 of 43 (79.07%) applicable cases rated a strength and increasing by 20.1% of baseline. Louisiana improved in making concerted efforts to maintain children’s important connections.

**Case Review Item 10:** Did the agency make concerted efforts to place the child with relatives when appropriate?

Item 10	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	24	25	31	31	28	38
Number of Total Applicable Cases	40	38	43	43	44	45
Performance (%)	60% Baseline	65.8%	72.1%	72.1%	63.6%	88.4%

**Item 10 Progress: Relative Placement** – Louisiana scored 63.6% for the applicable cases in its efforts to ensure children in foster care are placed with relatives in reporting period four. The state received a 36.4% in area needing improvement. The overall strength rating improved by 3.6% of baseline for reporting period four. During reporting period four, 16 cases were rated as area needing improvement. Louisiana showed improvements in reporting period five and exceeded the baseline by 28.4%. There were seven instances where efforts were not made to

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

identify, locate, inform and evaluate maternal relatives as potential placements and nine instances in regards to paternal relatives.

**Case Review 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 has been removed through activities other than just arranging for visitation?

Item 11	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	10	14	17	11	16	17
Number of Total Applicable Cases	33	33	29	23	29	24
Performance (%)	30.3% Baseline	42.4%	58.6%	47.8%	55.2%	70.8%

**Item 11 Progress:** Relationship of child in care with parents – Louisiana received a 55.2% strength rating for promoting and, maintaining the child and parent relationship in reporting period four. The state received 44.8% area needing improvement rating. Thirteen cases were rated as area needing improvement in reporting period four. In this item, 17 of 24 applicable cases received a strength rating in reporting period five (70.8%).

**Wellbeing Outcome 1 – Families have enhanced capacity to provide for their children’s needs.**

**Case Review Item 12:** Did the agency make concerted efforts to assess the needs of and provide services for Child, Parents and Foster Parents?

Item 12	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	9	7	21	28	29	36
Number of Total Applicable Cases	65	65	72	72	73	72
Performance (%)	13.8% Baseline 19.3 (Goal)	10.8%	29.2%	38.9%	39.7%	50%

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Item 12 Progress:** Louisiana made 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. The state experienced an increase of 25.9% from baseline in reporting period four; the state exceeded the PIP goal for this item by 20.4% in reporting period four with 29 of the 73 applicable cases reviewed rated a strength. In addition, the state continued to exceed the PIP goal through reporting period five with an overall increase of 30.7% from the PIP goal with 36 of the 72 cases reviewed rated as a strength.

**Case Review Item 13:** Did the agency determine whether concerted efforts were made to involve parents and children in the case planning process on an ongoing basis?

Item 13	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	10	8	22	27	37	38
Number of Total Applicable Cases	61	63	69	67	72	69
Performance (%)	16.4% Baseline 22.5% (Goal)	12.7%	31.9%	40.3%	51.3%	55%

**Item 13 Progress:** Louisiana made concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis. Louisiana consistently increased from the baseline since reporting period two. Louisiana experienced an increase in reporting period four with 37 of the 72 cases rating a strength and an increase of 28.5 from PIP goal. Louisiana continued to make concerted efforts to involve parents and children in the case planning process through quarter five by achieving a rating of 55% and further exceeded the PIP goal by 32.5%.

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

Item 14	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	30	32	45	46	49	53
Number of Total Applicable Cases	65	65	72	72	73	73

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Performance (%)	46.2% Baseline 54.1% (Goal)	49.2%	62.5%	63.9%	67.1%	73.6%
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**Item 14:** Caseworker visits with children in Louisiana rating experienced improvement in reporting period four by 20.9% of baseline. The trend continued in reporting period five with an increase of 27.4% of the baseline. The overall rating through reporting period five of 73.6%% exceeds the PIP goal by 19.5% with 53 of the 73 applicable cases rated a strength.

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

Item 15	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4	Reporting Period 5
Data Period (insert date or range)	April 1, 2018-Sept 30, 2018	Oct 1, 2018-March 31, 2019	April 1, 2019-Sept 30, 2019	October 1, 2019-March 31, 2020	April 1, 2020-Sept 30, 2020	October 1, 2020-March 31, 2021
Number of Cases Rated as a Strength	9	9	15	19	29	28
Number of Total Applicable Cases	56	62	61	60	65	56
Performance (%)	16.1% Baseline 22.4% (Goal)	14.5%	24.6%	31.7%	44.6%	50%

**Item 15:** Louisiana exceeded the PIP goal for 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. Louisiana successively increased in this goal through reporting period five. In reporting period 4, 29 of 65 cases (44.6%) received a strength rating and exceeded the PIP goal by 22.2%. The trend continued in reporting period five with Louisiana exceeding baseline by 33.9% and the PIP goal 27.6%.

**C. SYSTEMIC FACTORS**

a) **INFORMATION SYSTEMS** – DCFS utilizes a number of information systems to track data for Child Welfare (CW). The primary system of record is the Tracking, Information and Payment System (TIPS).

TIPS is an on-line, statewide interagency information management and payment system capable of tracking client information and generating payments on behalf of the Department’s clients and providers. The system tracks all placement services for foster children and tracks all supportive services paid for through the TIPS system. TIPS is used for maintaining a record of all foster child placements (regardless of the placement type) whether the placement resource receives payment through TIPS, through other sources such as Medicaid, or is a non-paid placement. TIPS does not track all services. Using TIPS, the Department is able to collect and report required data elements for federal reporting as

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

well as for any ad hoc reporting needed. Louisiana is a state based CW system including information systems. The federally mandated Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS) data elements are captured in TIPS and reported using a well-defined extraction process through the federal submission portals.

TIPS currently interfaces with other systems providing information on Medicaid Eligibility as well as Supplemental Nutritional Assistance Program (SNAP) and Temporary Assistance for Needy Families (TANF) participation. Additionally, for data sharing purposes, Memoranda of Understanding have been developed with LDE and LDH for data matching in relation to educational outcomes for children in foster care, and psychotropic medication monitoring of children in foster care. Using the identified interfaces and data sharing agreements, users are able to review and verify information to correct TIPS data when errors are discovered as well as collaborating to serve children and families more effectively.

A Comprehensive Enterprise Social Services System (ACCESS) was developed by DCFS as the statewide system for intake and investigation of all reports of suspected child abuse and neglect. This information management system contains Centralized Intake (CI) reports. The accepted reports are assigned to the Child Protection Services (CPS) program. All CPS investigative activities (interviews, staffings, collateral contacts, etc.) are documented in ACCESS. Specific data from ACCESS is migrated to the TIPS system for establishing related service records and for NCANDS reporting.

CAFÉ is the department's Common Front End Access system is a unified portal for entry into case files related to all programs of the department. It allows for a comprehensive search of department records to identify previous client records and prevent duplication of case numbers. Additionally, it can allow for verification of client demographic data such as birthdates, race, etc. There is capacity for client and provider information data-collection through separate portals of the system. Confidential information regarding program specific information is protected so that Family Support staff cannot view Child Welfare information.

Family Assessment Tracking System (FATS) is a smaller web-based system for developing family assessments, case plans and tracking caseworker visits in the Foster Care and Family Services programs. FATS is an electronic forms application. Assessment and case plan forms as well as documentation of case activities are completed in the FATS system. The documents have to be printed and placed in paper case records. FATS is not a database for long-term storage of information. The system is housed on an SQL server and is available to staff on the agency's intranet. Since the implementation of CAFÉ, staff can access FATS via the CAFÉ worker portal home page. There is no integration or sharing of data between the two systems. FATS has not historically been a reporting system; however, DCFS is able to provide the data essential for reporting compliance with the Federal Monthly Caseworker Visitation (MCV) report that is reported annually through a data extraction from the FATS system.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Structured Decision Making (SDM) is another smaller web-based system that provides electronic risk and reunification assessment forms. This system is hosted by the Children’s Research Center on a yearly subscription basis. SDM is not integrated into CAFÉ but is accessible through a link on the worker portal home page.

Quality Assurance Tracking System (QATS) provides quality assurance tracking and reporting of specific case review instruments as part of the state’s continuous quality improvement process.

ACF Children’s Bureau Online Monitoring System (OMS) is a Web-based online application consisting of the Onsite Review Instrument and Instructions (OSRI), the Stakeholder Interview Guide, and reporting tools. It is used for both federal and state conducted case reviews.

Juvenile Electronic Tracking System (JETS) tracks client status, legal status, demographics, location, and goals for youth in the custody of the Department of Public Safety and Corrections, Office of Juvenile Justice (DPSC/OJJ). JETS is not linked to any DCFS information system. Foster children in OJJ custody are given a TIPS number and integrated into the AFCARS reports through a data transfer from OJJ to DCFS.

DCFS contracted with a company called CITI in June 2019, to begin development of a CCWIS system, which will improve CW data collection and reporting capacity.

**Information System Update FFY 2021:** Initially, the CCWIS Project was scheduled for completion in December 2020. However, due to the amount and complexity of the work involved, it was realized the Project would take additional time to complete. In order to add additional time, the CCWIS Leadership Team is leveraging the Task Order Pool from the original contract to extend the timeframe. Currently, the projected “go-live” ready date of the Project is scheduled for March 2022. Training and last minute activities will occur between March and June 2022, with a “go-live” in June 2022.

The Team implemented additional strategies to compensate for the delayed timeline. The Discovery Team was brought on board in June 2020 to participate in pre-configuration activities for the Case Module. Additionally, the Scope Control Board (SCB) was implemented in December 2020 to determine which features were required for “go-live” and which features could be considered an enhancement to the CCWIS System. The SCB process will be on going through the remainder of the Project in order to control the scope of each module and remain within the projected timeline.

Development Sprints continue to occur every two weeks, as per agile processes. Regular demonstrations of work accomplished are held for program staff and executives in order to receive feedback. Investigation and Intake Modules have a projected end date of March 16, 2021 after 32 Sprints. The Case Management Module is scheduled to begin development on March 17, 2021 and is scheduled for nine (9) Sprints. After Case Management is completed, the Dev Teams will focus on Provider and Financial/Eligibility Modules.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The Data Quality Scrum Team (Data Stewards), led by Sherry White, completed a comprehensive analysis of data on multiple TIPS Client screens in alignment with the development modules. Through ongoing meetings with Program Managers/ OTS/Systems, Business Required Documents (BRD) have been submitted to ensure that the correct data will be converted to Unify. These meetings are designed to explain to management where the data errors are occurring in the system and propose solutions/recommendations for correct the errors and to ensure that the error corrections are in line with policy. The data stewards assist with testing these change requests and create Standard Operation Procedures (SOP) to ensure consistency in the clean-up effort. The team utilizes the SOP to manually cleanup data errors to ensure the most accurate data is available. The team is currently working on developing a new manual for all SOP's to include detailed steps and screenshots to assist the field in how to correct errors throughout TIPS and ACESS using the resources available to the agency. They will maintain any future revisions that may be needed for the SOP Manual.

The team continues to develop and revise the Integration Audit Manual to ensure accurate data within the ACESS 2.0 system. This manual assists staff in how to prevent errors in the system as well as how to correct these errors. This manual will continue to be revised as new issues are identified to avoid data errors and ensure accurate conversion of case data in the CCWIS System.

The Data Stewards play an integral part in identifying duplicate clients in the legacy systems. The team is currently working with Program Managers on devising a plan as to how duplicates will be managed/recognized in the legacy system. Data Stewards developed a flow chart for Program Managers to approve the flow process. The goal will be to not only work with Unify staff to ensure that the process of identifying the duplicates will be recognized in conversion; but will implement a plan to identify and ensure that all duplicate clients and their history will be grouped together as one.

Data Stewards continue to provide assistance to the field to ensure compliance of data quality through the Data Steward and Unify Newsletters. Trainings continue to be devised for field staff to ensure that the proper data is entered and maintained in the systems.

Additionally, the data stewards monitor and provide daily reports to CW Managers, Supervisors and Workers to ensure that important case level data is corrected and errors are resolved prior to case closure. They participate and provide feedback in various meetings with DCFS Stakeholders and other CCWIS project teams. This ensures that all systems data is being maintained to a quality standard. It provides an opportunity to ensure sustainability of the data quality, not only in the legacy system but in the development of the new Unify system.

The Data Migration (DI) Team developed and began executing the End-to End Migration Plan to extract, transform, cleanse and migrate client data from the State's legacy systems to relevant Unify modules for use by DCFS employees. They completed monthly extractions of source data (ACESS Intake and Investigation) for migration preparation to

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

the target (Unify) database; prepared regular error reports for Data Stewards to analyze and assess to determine resolutions for cleansing data in preparation for migration; generated Exception Logs with migrated data which is researched/analyzed to determine the cause and then assessed for recommendations and presented by DI BAs to Child Welfare Program Management for decisions on default values to be used to successfully migrate data; and completed demonstration of target database (Unify) application loaded with migrated data from source (ACCESS) with DI team BAs, testers and Change Champions for Unify User Interface data validation.

The Organizational Chart Management (OCM), Training and User Acceptance Testing (UAT) Team, led by Karen Austin, developed Change Communications, Training Guides, Quick Reference Guides, Training Material, Unify Connections Newsletter, and the CCWIS-Unify Intranet Website. One of the team's major accomplishments of this team was collaboration with 43 CCWIS Change Champions across nine regions and State Office to deploy Change Management activities; and UAT strategies to drive Unify change adoption and ensure testing of the Unify functionality. The goal of this team for the beginning of 2021 is to complete a full User Acceptance Testing of the Intake and Investigation Modules, finalize the training materials for Intake and Investigations, and conduct Train-the-Trainer to Change Champions. The team will begin Change Management activities related to Case Management and Provider Modules.

Louisiana was added to the National Electronic Interstate Compact Enterprise (NEICE) System on October 4, 2020. Training began in August 2020. All CW Case Management staff received training from Tetras via Zoom and Computer Based Training. Staff were provided a training environment/sandbox to explore the system. Ongoing collaborations will be held with Administration for Children and Families (ACF), Tetras, and Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC) to ensure full implementation and transition to the National Electronic Interstate Compact Enterprise (NEICE) system with ongoing training provided at multiple levels to staff statewide.

**Information System Activities Planned FFY 2022:** DCFS has a vision to create a Comprehensive Child Welfare Information System (CCWIS) to modernize outdated legacy systems that currently support the child welfare programs. DCFS will work towards implementation of this system. The CCWIS is being called Unify, and it will serve as the integrated case management system for all child welfare programs. It will include the following modules: Administration, Intake, Investigation, Case Management (Foster Care, Family Services, Adoptions, Extended Foster Care, etc.), Eligibility and Financial, Provider Management, and Court Processing. Unify will provide child welfare staff with information to make informed decisions while being mobile, facilitate communication with courts and providers, and promote continuous quality improvement.

Unify will replace all Child Welfare Systems and tools including:

- Tracking Information and Payment System (TIPS)
- Louisiana Adoption Resource Exchange (LARE)
- ACCESS 2.0

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Family Assessment Tracking System (FATS)
- Interstate Compact for the Placement of Children (ICPC) Database
- Family Resource Center (FRC) Database
- National Youth in Transition Database (NYTD)
- Quality Assurance Tracking System (QATS)
- Trauma Based Health tool (TBH)
- Child Abuse Neglect System (CANS)

Benefits of Unify include:

- One integrated case management system – DCFS Child Welfare employees will use one integrated system, ensuring accuracy of records.
- Mobility - Offline system access and synchronization - DCFS Child Welfare employees will be able to access Unify offline, and data is automatically synced when the employee reconnects. It enables DCFS employees to provide more face time with clients and increase productivity.
- Case assessment and history are maintained in one repository.
- Court information and records will be documented throughout the Unify System based on the specific area that is being addressed.
- To reduce time and paperwork, DCFS child welfare employees may use the ‘Talk to Text’ feature to record, upload, and edit notes to reduce manual data entry. Google Application Programming Interface (API) - DCFS child welfare employees will authenticate client addresses at intake. This will allow employees to schedule their workday by mapping addresses by group for more effective time management.
- Real-time Compliance Assessment - Data entered into Unify will be automatically reported to the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting System (AFCARS). This will ensure data documentation is captured in real-time for assessment of compliance at the federal level.
- Elimination of Duplicate Client Entries – Unify will automatically flag duplicate client entries to eliminate multiple sources of fact and assist staff by merging duplicated client profiles to ensure case history is available for case decisions.
- Scalability – The new case management system is easily customized and upgraded to align with industry compliance changes.
- Provider Management – When managing cases within Unify, DCFS child welfare employees will be able to access forms required to request information from agency approved providers and view documents received from participating providers.

Unify will have innovational features to support the DCFS child welfare workforce with greater technological functionality and efficiency. All users will receive computer based, in-class training by role to effectively adopt and integrate Unify into their daily job functions. As part of training, users will receive workbooks, quick-reference guides, and user guides. Executive approval of the proposed March 2022 launch date of Unify is pending.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

b) **CASE REVIEW SYSTEM**

**Written Case Plan:** The foster care worker and the family must initiate a case plan for each child in DCFS custody by at least the thirtieth day after foster care entry. The initial case plan must be finalized within 45 days of the date the child was placed in the custody of DCFS. The worker and family must review and update the case plan at a minimum of every 6 months from the date of foster care entry. The worker and family may review and update the case plan more frequently if necessary to meet the needs of the child and family.

Case plans are developed through worker preparation with parents, children, foster caretakers and other stakeholders who come together as a team in Family Team Meetings (FTMs). The purpose of the FTM is to offer the parents support in achieving their goals for their family. The following policies and procedures are in place to assure case plans are developed for each child in foster care and the case plan is developed jointly with the child's parent(s):

- Written case plans must be presented to the court for review and approval a minimum of every six months;
- Completion of case plans must be documented in the case events of the Tracking and Information Payment System (TIPS); Upcoming and overdue case events generate alerts to the assigned caseworker, which can be monitored through CAFÉ by the worker's supervisor;
- A sample of case plans are reviewed by CQI staff every six months to assess quality, involvement of parents and adherence to required provisions;
- Written case plans are completed through the teaming process which involves including family, stakeholders, legal partners as team members in the planning process to support the family in defining goals, establishing action steps, and implementing the case plan;
- The case plan template is held in the Family Assessment and Tracking System (FATS), which makes it easy for any involved staff members statewide to pull up the case plan and review or document family progress;
- The Assessment of Family Functioning (AFF) is integrated into the electronic case planning template to allow for immediate review of family strengths, needs for improvement, parental caretaking capacities, risk level for the family, specialized assessment of runaway or trafficked youth and transitional needs of youth to guide the case planning process;
- For youth ages 14 and older, DCFS policy and the written case plan template include provisions for the involvement of a minimum of two individuals as requested by the youth unless there is good cause to believe the individuals would not act in the best interest of the youth;
- DCFS policy requires that the tribe be notified and included in case planning for any child who is a member of or eligible for membership in a federally recognized tribe.

DCFS uses data from the Continuous Quality Improvement (CQI) case review process to determine if case plans are developed for all children in care and if they were developed jointly with the child's parents. Through QPI, DCFS has established a core philosophy of

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

ensuring quality parenting for the children served. This includes the relationships with stakeholders, work with the legal system, support and development of foster caretakers, and building partnership through our teaming process.

CQI reviewers conduct consultations with workers and supervisors on every CQI review held. An individual report of each CQI review is prepared prior to a consultation (consultations may be held face to face, by telephone conference or by other technology such as ZOOM or SKYPE). The individual report summarizes the areas of “strength” and “needing improvement” based on the case review. CQI reviewers use the information to provide mentoring on best practice, discuss missing documentation, and conduct policy review or provide policy clarification.

The assessment processes used by the department for identifying client needs and the skill of staff in managing the teaming process with families through better engagement are core areas of focus in the state’s Program Improvement Plan which will improve the case review system process.

**Case Review System Update FFY 2020:** Child Welfare managers in Foster Care and Family Services continue to participate in the initial Family Team Meeting (FTM) on all cases. The managers are required to complete a case review instrument prior to the FTM capturing key tasks in the case required prior to the FTM. The second evaluation required by the manager takes place during or after the initial FTM. This evaluation captures the quality of engagement with the team. The results of the case review and the evaluation of the FTM are entered into an electronic database so that results can be compiled. The results will be used to identify high performance areas and areas that need improvement. The requirement to have CW managers attend the first FTM has allowed staff to begin engagement early in the case, ensure FTMs are held timely and allow for oversight of staff during the FTM. Managers are tasked with providing valuable feedback to their staff about their engagement with the clients and developing case plan goals.

DCFS continued developing written case plans through worker preparation with parents, children, foster caregivers and other stakeholders who came together as a team in Family Team Meetings (FTMs). DCFS has updated the case plan to include conditions for return, conditions for case closure and the risk assessment. These elements being added to the case plan will allow the agency to be more transparent with families on what needs to be done in order for their children to return home. This information will be provided in case review hearings and in court reports.

**Case Review System Activities Planned FFY 2022:** DCFS plans to continue having Child Welfare managers participate in the initial FTM, provide valuable feedback and allow managers to evaluate engagement of staff. The assessment of engagement will encourage open communication with staff and assist in case plan development.

- c) **Periodic Reviews:** In compliance with Louisiana law, DCFS has policies and procedures in place to ensure each child receives a case review hearing by the court every six months. DCFS staff must provide the court a report summarizing progress in the case and an

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

updated written case plan a minimum of 10 working days prior to each case review hearing. DCFS staff is required to notify the child's foster caretakers of the case review hearings held by the court and the right of the foster caretaker to be heard. All other involved parties are notified of case review hearings by the court.

Completion of case plan review meetings and court case review-hearings must be documented in the case events of TIPS. Upcoming and overdue case events generate alerts to the assigned caseworker, which can be monitored through CAFÉ by the worker's supervisor.

A sample of case plans are reviewed by CQI staff every six months. Part of this process involves determining the number of court case review-hearings occurring timely and noting these hearings as an administrative review in the database. If a court case review hearing did not occur timely during the six-month timeframe, an administrative review is scheduled according to an established protocol within the region to ensure compliance.

If the safeguards for judicial review fail to ensure a periodic review of every child's case, the Administrative Reviews (AR) process provides monthly compliance reports that are issued to field staff and monitored by CQI staff.

In the AR process, first line supervisors in the field are required to capture the following information through TIPS reviews/and or case record reviews:

- Review of and updates to the TIPS case event 3130 for all cases in which the judicial review is held every six months;
- The number of instances in which the TIPS 3130 case event was not updated for the month under review, by child name;
- The number of internal ARs (by family) which are due for the month (because a judicial review was not held within the Period under Review; and,
- The number of internal ARs (by family) which were needed for the month but were not held by conclusion of the month.
- The number of DCFS case plan review meetings that were due for the month. The number is reported by family in Foster Care cases and by child in Adoption cases. Adoption cases are counted by child because parental rights have been terminated and children freed for Adoption are tracked as their own family in TIPS;
- The number of DCFS case plan review meetings not held by the close of the month in which the meeting was due;
- Review of and updates to the TIPS case events 3100 and 3110 to assure and document initial and ongoing case planning meeting completion.

Cases for which judicial reviews were due but not held (for various reasons such as court continuances) are reviewed through the AR process. Field supervisors have the responsibility of ensuring a judicial review or an AR occurs on each case before the deadline. When the judicial review is held, information is updated in the TIPS case events. If a judicial review is not scheduled by the court to be held timely, it is the responsibility of field staff to work with the court to get the review scheduled and completed before the end of the month it is due. When it is not possible to schedule or hold the judicial review

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

timely, it is the responsibility of the field supervisor to get the case assigned for an internal AR.

**Periodic Reviews Update FFY 2021:** Continued periodic reviews as stated above. Comprehensive Child Welfare Information System (CCWIS) development will ensure improvement in tracking of the periodic reviews.

**Periodic Reviews Activities Planned FFY 2022:** Continue periodic reviews as stated above. Continued CCWIS development.

- d) **Permanency Hearings:** Louisiana law requires that each child in foster care have a permanency hearing by the court every 12 months. It is common in Louisiana courts to use the periodic review hearing and permanency hearings interchangeably or a combination of both hearings. DCFS policy requires an initial permanency staffing within nine months of foster care entry. This staffing assesses the potential for the family to achieve reunification within 12 months. The staffing identifies unaddressed needs of the family, determine any compelling reasons for not pursuing termination when the child has been in foster care 12 months, and/or determining steps necessary to pursue termination at the permanency hearing when the child has been in foster care for 12 months. After an initial permanency staffing has been held, each case staffing held every three months thereafter serves as an ongoing assessment of the appropriateness of the child's permanency plan. Permanency hearings continue to be held every 12 months from the date the child entered foster care until permanency is achieved. These permanency hearings are held in conjunction with the case review hearings that are held at 6-month intervals. DCFS staff providing provides the court a report with the DCFS recommendations for permanency for the child. The court report summarizes progress in the case and is submitted to the court along with an updated written case plan a minimum of 10 working days prior to the permanency and case review hearing. DCFS staff is required to notify the child's foster caretakers of the permanency hearings and case review hearings and their right to be heard at those hearings. All other involved parties are notified of permanency and case review hearings by the court.

CQI is responsible for collecting and distributing data to regions. CQI supports the regions in providing technical assistance and training on the AR process. Regional management is responsible for using the tools provided by CQI to ensure timely completion and TIPS documentation of case activities. TIPS case events are required for all court hearings.

**Permanency Hearing Update FFY 2021:** The Chief of the Louisiana Supreme Court has agreed to issue a directive to all juvenile judges in letter form. The directive will address the appointment of attorneys and notice for all CINC Continued Custody Hearings (CCH) to ensure effective legal representation for children and parents at these hearings. Specifically, the letter will direct judges to appoint counsel at the earliest possible time for the CCH and work with the Clerk of Court and staff to ensure notice (including the affidavit and instanter order) is delivered to the attorneys as early as possible. The revised Juvenile Judges Bench Book Section on instanter orders highlights the importance of attorney appointment. It explains that the programs approved to represent children and parents in that jurisdiction should be appointed if the court grants an oral or written instanter order. It

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

emphasizes that the court should arrange for copies of the documents to be emailed as soon as possible and in advance of service so that due process is afforded to the families. The revised template instant order has a section for appointing parents and children's attorneys and orders that they be served with a signed copy of the pleadings. The revised affidavit for instant contains a line for providing the parent email address and telephone number. In this way, parent attorneys will have contact information for their clients in advance of the CCH, which should increase their ability to meet with the clients before the hearing. Finally, the Pelican Center is exploring ways to ensure that the child's contact information is consistently provided to the children's attorneys so that the attorneys are better able to prepare for the CCH.

Policy 6-835: Judicial Hearing for Foster Children was revised. Permanency Hearings are to be conducted within nine months after the Disposition Hearing if the child was removed prior to disposition or within 12 months if the child was removed at disposition but in no case more than 12 months after removal. The Foster Care case worker shall address in-state and out-of-state placement considerations, as applicable, in the court report prepared for the 12-month Permanency Hearing. A Permanency Hearing shall be conducted at least once every 12 months thereafter for the duration of the jurisdiction of the court over the child.

If reasonable efforts to reunify the child and family are not necessary because the case situation meets the criteria of Ch. C. Art. 672.1(C), the Department may file for immediate termination of parental rights. However, even if a case meets the criteria for immediate termination of parental rights, it can only be pursued if the court makes a judicial determination per Ch. C. Art. 672.1(C) or other applicable law.

At least 20 days prior to each Permanency Hearing, the Department shall give a Notice Letter using the same method as the case review hearing.

**Permanency Hearing Activities Planned FFY 2022:** DCFS will continue Permanency Hearing process improvement as described above and continued CCWIS development. The case review and permanency court report has been updated to provide more information about the family in regards to risk, safety and permanency. The court report has been developed and used by four pilot regions to ensure the court report is user friendly and contains all of the information the court is requesting. The final court report will be completed and required for the entire state by May 31, 2021. The case review and permanency judgements have been updated in conjunction with the Pelican Center. During this process, judges, attorneys and DCFS staff met to provide the information in the court reports that will be used by all court jurisdictions. A review of the court judgments will be held on May 13 for all agency staff.

- e) **Termination of Parental Rights:** DCFS has multiple processes and safeguards in place to ensure the timely filing of termination of parental rights (TPR) proceedings in accordance with federal requirements. DCFS policy requires a permanency staffing within nine months of foster care entry. The purpose of the staffing is to ensure everything is in place to proceed with TPR if appropriate at the 12-month permanency hearing. When the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

decision is made to proceed with termination, a TPR packet is prepared and submitted to staff attorneys. The staff attorney assigned to the case has 30 days from receipt of the TPR packet to file the petition for termination. After the petition is filed, TPR proceedings follow the court process, which is guided by the Louisiana Children's Code legal requirements.

The DCFS Bureau of General Counsel (BGC) provides data regarding the number of TPR petitions filed. This data is shared with the Executive Management Team and Regional Administrators to assist in decision-making regarding improving permanency outcomes.

The TPR data reports and CQI case review reports are shared with the Court Improvement Program (CIP). In the CIP CQI process, this data has been used in discussions on court timeliness measures. DCFS and CIP sharing data and collaborating between the organizations' CQI committees has strengthened the case review system monitoring the functionality of TPR filings.

CQI case reviews provide data on the number of cases that are rated as "strength", or "area needing improvement" regarding filing TPR petitions and assuring proceedings occur in accordance with federal requirements. Specifically, item six of the case review instrument measures the following: "Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement".

**TPR Update FFY 2021:** There continues to be difficulty getting TPR dates. Staff continue to work with the court system to expedite and make this process more efficient for families and children.

Policy 6-835: Judicial Hearing for Foster Children was revised. If reasonable efforts to reunify the child and family are not necessary because the case situation meets the criteria of Ch. C. Art. 672.1(C), the Department may file for immediate termination of parental rights. However, even if a case meets the criteria for immediate termination of parental rights, it can only be pursued if the court makes a judicial determination per Ch. C. Art. 672.1(C) or other applicable law.

**TPR Activities Planned FFY 2022:** DCFS will continue TPR scheduling efforts. Staff will continue to work with the court system to expedite and make this process more efficient for families and children.

- f) **Notice of Hearings and Reviews to Caregivers:** The federal compliance portion of the case plan document in FATS captures the date written notification was provided to foster caretakers informing them of the date, time, location of hearings and their right to attend and be heard. The worker records notification of hearings to the foster caretakers. This documentation is in a narrative format with no capacity for rolling up the data. DCFS is working to develop a case event in TIPS to allow the capacity to roll up data on whether notification of the foster caretakers and their right to be heard occurred in each case due for case review each month, regardless of whether it is an initial or ongoing case review. It

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

will be possible to develop a report to display in WEBFOCUS regarding the percentages of cases where this occurred by region to allow field staff managers to plan for improvement on a regular basis. It will be possible to monitor from a state level to initiate higher level planning for improvement.

CQI staff review a sample of case plans every six months. This process includes consideration of fulfillment of all federal case planning requirements, including notification of foster caretakers regarding any review or hearing held with respect to the child and their right to be heard. CQI and program staff will work together to assess how efforts can be coordinated to develop informative data and improve outcomes.

The form 98A form includes a statement for the caseworker to read to the caregiver at placement notifying the caregiver of the right to receive notice, be present, and provide information at hearings. The caregiver must initial the form in the designated space acknowledging they were provided this notice. A copy of the form is filed in the case record. DCFS policy states the child's assigned CASA worker shall be notified and given the opportunity to participate in the DCFS Administrative Reviews to review the case plan document and consider the appropriateness of planning for safety, permanency, and well-being of the child.

**Notice of Hearings and Reviews to Caregivers Update FFY 2021:** DCFS continued to provide notice of hearings and reviews to caregivers. A model "Care and Treatment" report was created. The form is called the "Foster Caregiver Progress Form". The foster caregiver completes this form and this is one way that foster caregivers can exercise their right to be heard at all CINC hearings. The form is completed prior to scheduled court hearings and provided to the caseworker at least 20 days in advance of a hearing. The caseworker will ensure the information is sent to the court. In May 2021, all foster caregivers were notified via a mailed letter about the form and were provided the location on the DCFS website to complete and submit the form electronically; <http://www.dcf.la.gov/relatives> or <http://www.dcf.louisiana.gov/page/foster-parenting>. "Foster caregiver" includes foster parents, pre-adoptive parents, and relatives caring for a child involved in a CINC case.

Policy 6-835: Judicial Hearing for Foster Children was revised. The Department shall give notice of any court hearing regarding the child to the child's parents and other parties of the CINC case. The notice shall state the date, time, and place of the hearing and inform the receipt of his right to attend and be heard. This notice shall be provided by certified mail at least two weeks prior to the scheduled hearing.

Ch. C. Arts. 623, 624, 679, 695, 698, 705, and 708, state that foster caregivers providing care for a child have the right to be present and heard regarding the care and treatment of the child at any court hearing involving a child in their care. DCFS shall give a Notice Letter via mail or hand delivery to the foster caregiver(s) before each court hearing involving a child in their care.

The Notice Letter should be provided to the foster caregiver(s) per the following:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Continued Custody Hearing (CCH): Prior to the CCH and within 24 hours of the child’s placement in the foster caregiver’s home, the foster care case worker will provide the foster caregiver(s) with the Notice Letter (with upcoming hearing information), Foster Caregiver Progress Form, and Court Process and Legal Rights Guide for Foster Caregivers. The foster care case worker will ensure that the foster caregiver understands the purpose of the documents and how and when to submit the form if they choose to do so before the CCH. The documents may be attached to the 98A Form (which serves as an agreement between DCFS and the foster caregivers with regard to that placement) that the foster care case worker gives to the foster caregiver. At least six copies of the Foster Caregiver Progress Form should be provided to the foster caregiver so that they have enough printed copies for subsequent hearings. The foster care case worker should ensure the foster caregiver knows where to access the form on the DCFS website. If the foster care case worker does not know the date and time of the CCH when they provide the foster caregivers with the documents, they must provide that information when they acquire it.
- Answer and Adjudication and Answer Hearings: At least 10 days prior to the Answer and Adjudication Hearings, the foster care case worker will provide a Notice Letter (with upcoming hearing information) to the foster caregiver. If the foster caregiver chooses to submit the Foster Caregiver Progress Form for the Answer and/or Adjudication Hearings, it must be scanned, emailed, or provided (i.e., physically given at a visit, etc.) to the foster care case worker at least 10 days prior to the hearing.
- Disposition Hearing, Case Review Hearings, and Permanency Hearings: At least 20 days prior to the Disposition Hearing, Case Review Hearings, and Permanency Hearings, the foster care case worker will provide a Notice Letter (with upcoming hearing information) to the foster caregiver. If the foster caregiver chooses to submit the Foster Caregiver Progress Form, it must be scanned, emailed, or provided (i.e., physically given at a visit, etc.) to the foster care case worker at least 15 days prior to the hearing

The Department shall provide notice of any changes in the scheduled hearing to the child’s parents, other parties, and the child’s foster caregiver(s). If the hearing will be held via Zoom, the Zoom link should be sent to the child’s parents, other parties, and the child’s foster caregiver(s) prior to the hearing. Court reports shall include efforts to notify the child’s parents, other parties, and the child’s foster caregivers. All parties to the hearing shall be notified of the next court date in open court, if present, and if not, by subpoena. However, this does not relieve the Department of their responsibility to provide notice by mail.

**Notice of Hearings and Reviews to Caregivers Activities Planned FFY 2022**: DCFS will continue to provide notice of hearings and reviews to caregivers.

**D. QUALITY ASSURANCE(QA) SYSTEM/CONTINUOUS QUALITY IMPROVEMENT (CQI)**

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Strengths:** A notable strength is that the DCFS Secretary and Executive Management Team fully endorse and support the Continuous Quality Improvement (CQI) process. CQI is committed to assuring the validity and inter-rater reliability of case reviews. Another effort to improve validity and reliability of case reviews is the second and third level review process. This, combined with ongoing training, serves to improve the validity and reliability of case reviews. The establishment of bi-directional feedback is vital in any CQI process to ensure everyone who supports children and families is treated as an important partner (*CW Principles of Practice*).

**Areas Needing Attention:** Areas requiring attention include maintaining and providing enhancement of the QA/CQI system to support progress, and assisting the Department in the development, implementation and monitoring of its program improvement efforts.

**Updated Assessment:** The DCFS QA/CQI System continues to operate in all jurisdictions of the state. The system is based on the CQI functional components as outlined in ACYF-CB-IM-12-07 issued on August 27, 2012. (*Refer to CW CQI Manual, 1.4 Foundational Administrative Structure, p. 4-5*)

CQI staff are housed in all nine regions of the state to provide local support to field staff regarding consultation on practice in addition to completing case reviews. The CQI Team is divided into three clusters, which correspond with the geographical regions of the state. The northern cluster includes three regions: Shreveport, Alexandria and Monroe. The central cluster includes the regions of Lake Charles, Lafayette and Baton Rouge. The regions of Covington, Orleans and Thibodaux comprise the southern cluster.

The CQI Team is comprised of 3 managers and 19 case review staff who hold various roles within the CQI process. Most CQI staff have experience in multiple Child Welfare programs and field experience, front line supervisory and/or managerial experience. A CQI manager provides CQI oversight in each of the three clusters.

Managers, online training resources, and Department Program staff who orient staff when there are role adjustments provide training for case reviewers. Ongoing trainings, conference calls, and webinars will be held with the entire CQI team to discuss CQI matters, case review items and standards, and provide training on changes to state and federal policy and procedures. In-person statewide trainings are held at least once annually for all involved in case reviews to review the CQI review process through a mock case review and discussion of Onsite Review Instrument (OSRI) guidelines and to review any updates to either.

Quality Assurance (QA) staff, CQI managers, and second level staff meet quarterly to review the QA processes and case review standards. Case review items and mock cases are reviewed and discussed to provide guidance and instruction to improve inter-rater reliability. Information is passed on to reviewers. In addition, QA staff, CQI managers, and second level staff meet by phone bi-weekly to discuss any case review items or needs, and debrief case review and process specifics. (*Refer to CW CQI Manual, 1.6 CQI Training Requirements, p. 5-6, para. 3-4 for additional details*).

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Louisiana continues to conduct its own Child and Family Services Review (CFSR) and uses the same sampling plan and case review process outlined for Round 3 to report ongoing progress on the Program Improvement Plan (PIP). Such reviews are aligned with the ongoing statewide CQI monitoring approach. The State intends to use a 6-month review period with a minimum number of 65 cases reviewed: 40 out-of-home cases and 25 in-home services cases. The state will use a statewide simple random fixed sample to select the 65 cases. Reviewers will conduct review cases and interviews across the state simultaneously based on the statewide random sample with no stratification. Reviewers will cross-regions as necessary to control for the randomness of the sample.

The State is divided into nine regions: Orleans, Baton Rouge, Covington, Thibodaux, Lafayette, Lake Charles, Alexandria, Shreveport, and Monroe. The sampling frame includes all geographic areas of the state and is representative of the child welfare population served and the major metropolitan area identified as New Orleans. The expected number and percent of cases to be included for the major metropolitan area is seven cases (10%) of the sample. (*Refer to CW CQI Manual, Appendix A: Child Welfare CQI Sampling Plan, p.34-39*).

The CQI team uses the Onsite Review Instrument (OSRI) to conduct CFSR case reviews during a 6-month reporting period, aligned with the FFY timeframes. Louisiana inputs data regarding the OSRI into the Online Monitoring System (OMS). In addition to using the OSRI, Louisiana has implemented all five case related interviews to include the child, parent, caregiver, caseworker or supervisor, and service provider.

The CQI Team completes Child and Family Service Reviews (CFSR) bi-annually from October 1 through March 30 and then from April 1 through September 30. Review periods are identified as RP1 and RP2 for each federal fiscal year. Louisiana accomplishes case reviews with a team approach and by using the model for reviews within the CFSR Procedures Manual at <https://training.cfsrportal.org/resources/3105>.

The entire Case Review process and CFSR Process Guide can be found in the Child Welfare CQI Manual. (*Refer to CW CQI Manual, Section 2.4 Child and Family Services Reviews, p. 9-17*)

Feedback loops have been established at all levels to disseminate data and information. At the conclusion of the case review process, reviewers hold individual CQI exit meetings with managers, supervisors and caseworkers for every participating case in the CFSR review and the targeted reviews. The case reviewer discusses the purpose of each item of the OSRI, rating results and recommendations on how to strengthen practice. The goal of the meetings is to educate staff on how the rating results are linked to their individual casework, and can result in an overall improvement in practice.

DCFS continues to communicate information to internal and external stakeholders through a well-established State Level CQI Committee that meets quarterly. The committee

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

includes DCFS staff from all levels, court representatives, a tribal representative, CASA, foster parents and youth.

In addition, the CQI Team continues to conduct regional exit meetings to present data results from case reviews. The CQI Regional Case Review Exit meetings are incorporated into the Regional CQI Committee meetings (formerly regional PQI meetings). Regional case review exits are conducted during the April and October meetings. The CQI case-review team members along with the regional committee leader and co-leader are responsible for attending subcommittee meetings to interpret data and to monitor the subcommittee’s progress in using data for problem solving and developing solutions.

Data is reported bi-annually to the statewide leadership team and stakeholders. Discussions are held with regard to the statewide findings, issues/concerns or best practice in specific regions, regional trends and aligning plans for improvement in the regions with the state’s overall success metrics.

The CFSR Round 3 Review was held in Louisiana from April 1, 2018 through September 30, 2018. Louisiana, in consultation with the Children’s Bureau, elected to conduct a State led review. The results determined that Louisiana did not pass any of the outcomes or associated items. The following outcomes were targeted for improvement through a Program Improvement Plan (PIP): Safety Outcome 1, Safety Outcome 2, Permanency Outcome 1 and Well-Being Outcome 1.

<b>YEARS 1-5: FFY 2020 - 2024 Action Steps</b>	
Maintain and enhance the QA/CQI system.	<ul style="list-style-type: none"> <li>• Maintain Louisiana CQI foundational structure by:               <ul style="list-style-type: none"> <li>○ Continuing the use of a CQI team to complete case reviews.</li> <li>○ Continuing a case review process that meets all requirements as set forth by the Children’s Bureau.</li> <li>○ Continuing the use of state and regional level CQI committee.</li> </ul> </li> <li>• Maintain a quality, data collection system that meets all requirements for the case review process.</li> <li>• Continue on an ongoing basis to enhance interrater reliability in the case review process through mock exercises, trainings and biweekly support calls.</li> <li>• Continue to provide analysis and dissemination of quality data through:               <ul style="list-style-type: none"> <li>○ Providing data presentations and holding discussions during state level and regional CQI meetings</li> <li>○ Continuing to conduct consultations with workers and supervisors on cases immediately following the case review process</li> </ul> </li> </ul>

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

	<ul style="list-style-type: none"> <li>○ Exploring and creating opportunity to create bi-directional feedback loops in an effort to facilitate open communication.</li> <li>○ Maintain bi-directional feedback loops that have been established through meetings with internal and external stakeholders</li> <li>○ Continue to provide aggregate data to internal and external stakeholders upon request.</li> <li>● Continue to promote the use of data in meetings and presentations to encourage discussions and solicit feedback from stakeholders to be used in efforts to improve practice and outcomes.</li> <li>● Monitor the CQI process in Louisiana and make any changes necessary to maintain the integrity of the process.</li> </ul>
<p>Assist in the development, implementation and monitoring of program improvement efforts.</p>	<ul style="list-style-type: none"> <li>● Assist the department in the development, implementation and monitoring of its Program Improvement Plan (PIP) to ensure bi-directional feedback loops are included that will allow for the dissemination of information to internal and external stakeholders.</li> <li>● Assist in the development of Ad hoc/targeted case review processes, surveys and work groups for interventions outlined in the DCFS Program Improvement Plan (PIP).</li> <li>● Assist in the development of data reports for interventions outlined in the DCFS PIP that can be used by DCFS, internal and external stakeholders to assist in decision-making.</li> <li>● Monitor ad hoc/targeted reviews to assist programs in obtaining additional data to be used for problem exploration.</li> <li>● Assist the Court Improvement Program (CIP) in operationalizing the CQI process in interventions outlined in the DCFS PIP.</li> </ul>

To develop the improvement plan, Louisiana participated in a PIP development pilot led by the Children’s Bureau and the Capacity Building Centers for States and Courts. During a four-day planning session held March 25 through 28, 2019, a group of 68 individuals including representatives from DCFS, DCFS CQI, Louisiana Department of Health, service providers, individual court systems, parents, foster parents, relative caregivers, and youth reviewed the results of the CFSR outcomes, examined root causes, conducted data analysis and developed a theory of change and logic model. The entire planning session was rooted in the principals of the CQI process and allowed those who participated to learn the effectiveness of problem exploration, root cause analysis and bi-directional feedback

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

loops. This collaboration resulted in the development of a program improvement plan including five cross cutting themes: safety and assessment, engagement, workforce development, service array and quality legal representation. Louisiana's PIP was submitted for approval on April 11, 2019 and was given final approval on May 31, 2019.

**Planned Enhancements for FFY 2020-2024:** DCFS will take measures to sustain its ability to conduct state lead case reviews by continuing to enhance interrater reliability among reviewers, build capacity in team members to serve in QA roles which will allow flexibility in case assignment, and by developing workgroups to explore and recommend improvements to the overall case review process.

The CQI Team will have a strong presence in the implementation and monitoring of the PIP. In addition to conducting case reviews, CQI team members will participate in work groups to assist in the development of surveys and targeted review instruments that will assist the Department in measuring progress in the five cross cutting themes. CQI will play a vital role in assisting the Department in establishing and maintaining bi-directional feedback loops which will be used to disseminate information to internal and external stakeholders regarding the Department's progress in achieving the goals of the PIP.

**QA/CQI FFY 2021:** DCFS continues to maintain a CQI foundational structure that includes a case review process with secondary oversight by the Children's Bureau, quality data collection and dissemination as well as active inclusion of internal and external stakeholders to inform feedback loops.

In FFY2021, DCFS continued to utilize the Online Management System (OMS) to conduct cases reviews and to ensure the process meets requirements set forth by the Children's Bureau. The CQI team conducted quality case reviews, meeting all deadlines during this period despite COVID-19 restrictions for in-person contact and remote work environments. CB Guidance, "CFSR/CQI Processes during the COVID-19 Pandemic" issued May 12, 2020 was used to inform and maintain the quality of the Louisiana case reviews.

The efforts to maintain interrater reliability among reviewers and build capacity in team members continue by conducting quarterly CQI meetings and mock case reviews. The meetings are virtual due to the pandemic. In addition, the CQI team continues to conduct bi-weekly support calls with all CQI team members to share general information regarding case reviews and new policies and procedures as well as holds bi-weekly meetings with its Quality Assurance Team. Bi-weekly meetings provide an opportunity to conduct interrater reliability activities to ensure consistency in case reviews.

The analysis and dissemination of quality data continued during state and regional CQI meetings, through worker and supervisor consultations immediately following case reviews, and through bi-directional feedback loops established through meetings with internal and external stakeholders.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

DCFS continued to collect and analyze quality data in FFY. Dissemination continued without any changes in the areas of Case Review exit meetings with workers and supervisors immediately following cases reviews. However, State and Regional CQI Exit meetings change to virtual platforms due to the pandemic did not produce meaningful engagement and information to inform feedback loops. Although DCFS has continued its efforts to maintain bi-directional feedback loops, efforts will continue in the upcoming year to explore ways to improve engagement of internal and external stakeholders to solicit sufficient information from State and Regional CQI Exit meeting to maintain feedback loops.

The DCFS CQI Team continues to assist the department in the development, implementation and monitoring of its Program Improvement Plan. The agency collaborates with the Capacity Building Center, Court Improvement Project/Pelican Center to monitor program improvement efforts. In addition, feedback loops from staff, youth and stakeholders are utilized to ensure information is obtained and disseminated internally and externally. The CQI Team continued to assist in the development of targeted case reviews and surveys for sections of the PIP. In FFY 2021, the CQI Team developed and implemented the case review process for the Child Welfare Assessment and Decision Making (CWADM) initiative. Case Reviews began in PIP Quarter 6 with members of the CQI Team and State Office Program Consultants conducting reviews. Data collected will determine the effectiveness of tasks and strategies that implemented through the improvement plan. In addition to CWADM case reviews, the CQI Team disseminated survey data during Regional Exit meetings to fulfill a PIP Engagement goal of informing staff and soliciting feedback.

As previously reported, Louisiana met the PIP goal of developing workgroups for Louisiana's identified interventions outlined in the PIP (Quality Assessments, Workforce Development, Engagement, Service Array and Quality Legal Representation) in November 2019. The workgroups continue to meet to assist in developing processes, interventions and data reports to assist with the internal and external decision making for DCFS. In addition, data collection from the case review process continues to be used to assist in exploring areas needing improvement and operationalizing the CQI process in interventions outlined in the PIP.

DCFS in conjunction with the CB conducted stakeholder interviews with internal and external stakeholders on August 14-15, 2020. The interview groups included Home Development, Legal, Residential Providers and Child Welfare Assessment and Decision Making (CWADM). The interviews afforded stakeholders opportunities to provide feedback on DCFS functioning in the aforementioned area as well as to provide suggestions for program improvement.

The DCFS CQI Team internal workgroups developed to inform the PIP work groups, monitor functions of the CQI unit and determine needed improvements continued to function in FFY 2021. The workgroups along with their purpose and achievements in FFY 2021 are as follows:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- CQI Exit Meetings: To review the procedures for conducting exit meetings with assigned caseworkers and supervisors at the completion a CFSR cases review. To explore ways to strengthen the feedback loop regarding case practice along with promoting quality casework. In FFY 2021, the workgroup revised the forms used in the exit meetings to include space for policy references and to include space for CPS risk and safety discussions consistent with CWADM model.
- CQI Manual: To review all sections of the current CQI manual and determine possible addendums to the manual to be revised at the conclusion of the current PIP. In FFY 2021, the group proposed revisions to the current CQI Manual that would clarify specific items in the case review process. The group recommended the revisions are made at the conclusion of the current PIP.
- CQI Regional Exit Meetings: To explore ways to strengthen the bi annual CQI Regional exit meetings where data and practice trends from CFSR case reviews and targeted case reviews are disseminated to field staff and regional external stakeholder. This workgroup explored and made recommendations for exit meeting presentation formats and well as suggests for case review item for presentation during FFY 2021.
- CQI Reviewer Support Calls: To review the structure of bi weekly support calls and explore ways to ensure the continuation of good interrater reliability discussions and exercises. In FFY 2021, the work group facilitated the support calls by scheduling, developing agenda and leading interrater reliability discussions during bi weekly calls.
- Data: To review data from CFSR cases reviews, lead discussions regarding data during bi-weekly QA/Support calls and disseminate data upon request from various agency programs. In FFY 2021, the Data workgroup facilitated a special case review project and disseminated data to the My Community Cares to explore service provision in specific ZIP codes in the pilot parishes.
- Engagement: To support the PIP Engagement workgroups through participation and providing feedback from engagement surveys conducted by Case Reviewers. To explore ways to improve engagement with field staff in an effort to improve feedback loops. In FFY 2021, the workgroup analyzed and prepared data reports for inclusion in Regional Exit meetings.
- Policy: To review new and updated agency policies regarding practice changes. To conduct policy presentations with the CQI Team. In FFY 2021, the workgroup conducted monthly policy presentations during CQI Team meetings.
- Safety Assessment: To support the PIP Assessment workgroup through participation and the development of the new PIP safety assessment. To serve as a liaison with the PIP Assessment workgroup and the CQI Team in an effort to ensure the CQI Team is knowledgeable of all portions of the initiative and in preparation of conducting safety assessment targeted case reviews. In FFY 2021, members of this workgroup served as Change Champions for the CQI Team and members of the CWADM workgroup.
- Service Array: To support the PIP Service Array, My Community Cares projects in the four pilot parishes. To serve as internal stakeholders during community meetings by attending meetings, conducting surveys, providing CFSR data presentations and to develop and maintain the feedback loop with external stakeholders. To assist the Court Improvement Program in the development of tools to measure the effectiveness of the My Community Cares projects in each region. Members of this work group continued to attend and participate in community activities in the assigned pilot parishes during

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

FFY 2021. DCFS collected analyzed and disseminated data monthly for discussion at the four MMC meetings.

- **Supervisor Consultation:** To review the current consultation modules used by CQI consultants in the Supervisor Consultation program. To rewrite all modules to reflect implementation of PIP strategies, CFSR data trends and policy changes when appropriate. In FFY 2021, the work group revised the Safety module to include the new CWADM model. The group provided training of all six modules to the CQI Team during this period.

**QA/CQI Activities Planned FFY 2022:** DCFS will continue efforts to enhance the QA/CQI system and further assist in the development, implementation and monitoring of the program improvement process. In FFY 2022, emphasis will be placed on exploring new ways to engage staff on all levels as well as external stakeholders in an effort to increase active participation in CQI State and Regional Exit Meetings.

CQI workgroups will continue to share information, monitor the functions of the CQI unit and to provide feedback regarding areas needing improvement. DCFS/CQI will continue to be an instrumental part of the PIP process in assisting with the development of processes, interventions and data reports to assist in the DCFS decision making.

**E. STAFF AND PROVIDER TRAINING:**

The Louisiana Department of Children and Family Services (DCFS) is committed to supporting a competent, stable workforce as a top priority. Through the Louisiana Child Welfare Training Academy (LCWTA) strategic partnership involving DCFS, the Louisiana Universities Alliance, and the Pelican Center for Children and Families, Louisiana continues to expand the resources available to support child welfare training and workforce development. The LCWTA is committed to aligning and maximizing human, fiscal, technological, and programmatic resources to support high quality training and professional development of students, staff, foster parents, kinship caregivers, adoptive parents, providers, legal stakeholders, and other key community partners and working closely with DCFS staff to advance critical child welfare workforce investments. This includes supporting initial and on-going training and professional development of DCFS child welfare staff, foster and adoptive parents and providers as well as expanding training and professional development opportunities for legal stakeholders, law enforcement, students, and other key partners.

Two contributing factors altered the way training was conducted and evaluated during the 2019-2020 fiscal year. During this period of time, DCFS and LCWTA staff began the process of conducting registration and evaluation of training through the LCWTA online learning management system (LMS) regardless of training course format. This was done to ensure consistent and reliable reporting of participation and evaluation data. Secondly, training formats were shifted dramatically from previous years due to the COVID-19 pandemic. Prior to March of 2020, trainings were conducted through in-person formats for specific trainings, and self-paced trainings through the online LMS system for others. Beginning in March of 2020, all in-person trainings were cancelled or postponed. DCFS and LCWTA staff began moving all in-person courses to synchronous virtual courses

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

hosted through the LCWTA LMS utilizing Zoom sessions. Training numbers decreased in some categories from previous years due to cancellations and postponements, however DCFS and LCWTA staff were able to successfully convert all courses to virtual synchronous and asynchronous formats by June 30<sup>th</sup>.

Due to this conversion of training, evaluations were standardized to increase the ability to compare current and future training outcomes. In past years, evaluations differentiated between user types (staff, foster/adoptive caregivers, and community partners) in terms of wording. Beginning in July of 2019, evaluations were differentiated by training type, either in-person or online trainings. The format of the evaluations are five (5) questions for online trainings and ten (10) questions for in-person trainings, termed instructor led trainings.

Some highlights illustrating the functioning and expanded investments in Louisiana's child welfare training and workforce development system in the last year include:

- 175 new staff who confirmed the training provided them with knowledge and skills needed to meet their responsibilities.
- Participation in the Program Improvement Plan (PIP) development and implementation, resulting in additional training programs being developed and implemented in SFY's 2019-2020 and 2020-2021 including multiple Child Welfare Assessment and Decision Making courses, Elements of Engagement Simulation, and New Supervisors Capacity Building Program. This included development of in person courses/programs and virtual adaptations.
- As a result of the pandemic, DCFS and LCWTA staff quickly acquired additional skills in offering virtual, interactive online trainings and worked quickly to convert trainings so that necessary trainings could still be offered. To date, all mandatory PIP and new worker orientation trainings have been provided and the same number of trainings were offered last year despite a brief period of time that trainings were not offered. In the first quarter of calendar year 2021, over 300 trainings have been provided.
- Multiple additional programs/courses adapted and/or created and offered virtually to meet learning and development needs. The learning and development team's knowledge and skills in providing interactive learning experiences in multiple formats expanded exponentially in SFY's 2019-2020 through SFY 2020-2021.

**The University Alliance (UA)**: in partnership with the LCWTA, the Pelican Center and DCFS, has greatly expanded its capacity to carry out the mission of supporting a competent, stable workforce as it relates to recruitment, retention, learning, and infrastructure. The UA made additional key personnel investments. In June of 2020, Jennifer Luna, MPA resigned from her position as the Project Operations Coordinator. The position was re-conceptualized as the Project Support Specialist. Polly Boersig, MA was hired in the conceptualized position. Northwestern State University, the lead university, is expanding its research capacity by collaborating with DCFS for the distribution and analysis of statewide surveys. Three initial surveys were conducted, and findings were disseminated through technical reports. In SFY 2020-2021, NSU hired a Research Coordinator to help carry out research and evaluation projects throughout the state.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- The UA has gathered and completed initial analysis of data on Child Welfare Scholars from the last 10 years to inform recruitment and retention efforts. They are examining data to inform the goal of developing targeted scholar positions for key regions and parishes. With the assistance of UA statewide staff and DCFS Human Resource partners, the first validated and dynamic data set pertaining to stipend recipients was developed and set up for bi-weekly updates. This has allowed statewide staff the ability to begin data analysis of the effectiveness of the Scholars program.
- UA staff began assisting DCFS with conducting PIP related surveys including engagement surveys with various DCFS stakeholders and staff. UA staff initiated the Community of Practice model with scholars due to the COVID-19 stay-at-home orders. This allows for a focus on retention and training strategies to better prepare students to become child welfare professionals.
- Louisiana continues to utilize a competency-based screening and selection process to select Title IV-E Child Welfare Scholars and new child welfare employees. Scholars for 2020-2021 were screened to determine if they could perform the essential duties of the child welfare specialist position. Additional screening measures are being developed to increase goodness-of-fit. In SFY 2019, 33 scholars were recruited into the program and completed internships with DCFS; 27 were hired by DCFS. In SFY 2020, 35 scholars were recruited and completed internships with DCFS, however only 26 were hired. Three students declined a position due to COVID-19 related fears. SFY 2021 is projected to have 44 students completing internships with DCFS. In all three years, the recruitment goal of a five percent increase in the number of scholars was met.
- UA and LCWTA leadership began planning investments towards expanding the Employee Educational Support Program, which provides tuition dollars for employees wanting to work towards the MSW. Decisions were made to fund 11 continuous employee scholar spots at LSU, 8 at GSU, and 5 at SUNO. GSU notified University Alliance staff that they had been approved for and were developing an Online MSW program, which will allow more employees across the state with opportunities to work towards the MSW degree.
- GSU developed the first University Alliance invested certificate program by creating an 18 hour (for college credit) Advanced Supervisory Certificate Program. The certificate program was submitted to the Louisiana University System for approval in July of 2020.
- Southern University at Baton Rouge created a child-welfare simulation lab and developed curriculum to be offered for training new and existing workers.
- Work has begun to realign university child-welfare course offerings for greater continuity and development of the Louisiana Child Welfare workforce.
- The scholars program continues to support and refine the Child Welfare Employee MSW Educational Support Program. Since its initiation in 2017, 16 employees have obtained their MSW's through the program as of June 30, 2020. Through May 2021, 22 employees total will have obtained their MSWs through the program.
- DCFS staff facilitated greater participation of employees in Title IV-E Child Welfare Scholar (aka Stipend) Support Groups. Participants report finding great value in the groups and often seek to participate beyond their first three years of employment.
- UA staff initiated Child Welfare Scholar Community of Practice groups in spring 2020, using Zoom and Microsoft Teams to connect child welfare scholars across the state in

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- shared learning and support, particularly in response to the COVID-19 stay at home orders. To ensuring learning continued during the COVID-19 pandemic, LCWTA staff worked with University Alliance staff to incorporate the Community of Practice sessions into the Learning Management System, as well as to set up accounts for scholars and university BSW and MSW students to utilize training courses to support learning in field settings. This led to an increase in the number of LMS users (376).
- Southern University of New Orleans is developing an Intra-professional Certificate Program to support effective practice with children and families across multiple disciplines.
  - The LCWTA initiated a restructuring process to improve the ability of the training academy to meet the growing needs of the child welfare system and to ensure the resources are in place to achieve the overall strategic plan goals. This restructuring included revising job descriptions for the positions of Digital Media Manager, Learning and Instructional Development Specialist, and Associate Director of Learning and Development. The new Associate Director of Learning and Development began in the Summer of 2020. The Title IV-E Program Manager and new Research Associate at Northwestern State University have assumed the data and analytics functions of LCWTA and will work closely with the Associate Director to expand evaluative capacities of the Academy and support transfer of learning. Specialized learning and instructional development expertise, leadership, and support are currently being provided by an experienced team of people collaborating with LCWTA through contract.
  - With support from LCWTA/University Alliance, DCFS added three On the Job/Transfer of learning consultants to facilitate on-boarding, on the job training, shadowing, and support of new staff.
  - The LCWTA and DCFS continues with a partnership with the Center for Adoption and Support (C.A.S.E.) and the Children’s Bureau to be a part of The National Adoption Competency Mental Health Training Initiative (NTI). This partnership will enable child welfare staff to participate in a state of the art, web-based adoption training program. The training includes eight interactive learning modules and additional modules for supervisors. The initiative was designed to enhance the worker’s skills in trauma informed care, addressing behavioral and mental health needs of children in care, ability to promote stability and permanency for children and increasing understanding of the complexities of adoption, kinship care arrangements and guardianships. The LCWTA worked with NTI to get the training modules formatted to fit with the academy’s Learning Management System (LMS) so that workers can register, take pre/post-test and be tracked through the system. Louisiana is collaborating with N.T.I. and C.A.S.E. to initiate implementation of the promising evidence-based Training in Adoption Competency (TAC) for the mental health provider community, with Louisiana lead trainers being identified to participate in TAC Train the Trainer sessions in May 2021 and preparing to launch first cohort by September 2021.
  - The Pelican Center Board of Directors and Community Partners participated in a three-day training “Undoing Racism/Community Organizing” an international training facilitated by the People’s Institute for Survival and Beyond. This workshop helped the participants develop a common definition of racism and an understanding of its different forms: individual, institutional, linguistic and cultural, all with an intent of

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

informing the board leaders and community partners of our obligation and opportunity to create an “anti-racist” child welfare system.

- Post-” Undoing Racism”, the Pelican Center Training and Education Committee and LCWTA have developed training curricula around topics of disproportional minority representation in child welfare, culturally affirming care of foster children, cultural consciousness and more.
- The Pelican Center and DCFS under the Program Improvement Plan have created *My Community Cares* programs in each of the four pilot parishes. This program is grassroots and community based. Community leaders partner with service providers, members of the judiciary, business community leaders, etc. to help respond to the needs of the families in the zip codes where the child welfare data is most problematic. The response and engagement from the members of each *My Community Cares* team has been encouraging, as they have been empowered to become part of the solution building that our children and families need.
- External partners, including Plummer and Annie E. Casey, have complimented the DCFS/LCWTA team on its exceptional level of professionalism, customer service, and quality in creation and support of quality learning experiences.

**LMS Users:** The following chart shows a breakdown of users by type coded by the LMS system. DCFS staff, Foster/Adoptive Caregivers, and Foster Pre-Service users are automatically enrolled into the LMS system by region. All other users are self-enrolled or are staff assisted with enrollment into the LMS system. Enrollments during 2019-2020 increased due to changes in legislation for mandatory reporters as well, an increase in the number of trainings and potential trainees, as well as the COVID-19 pandemic, which caused an influx in the number of students who self-enrolled.

<b>Completion of Trainings by User Type</b>		
<b>Classification</b>	<b># of Users by Type</b>	<b>Trainings Completed by User Type</b>
Foster/Adoptive Caregiver	4,476	19,122
Mandatory Reporter	4,307	4,308
Other	2,791	2,878
DCFS Staff	1,306	8,754
Students	361	366
CASA	124	192
Community Partner	91	124
Law Enforcement	72	70
Foster Pre-Service	68	68
Non-Staff Employee	19	19
Judicial	11	11
WAE	2	2
University Alliance	1	1
<b>Total</b>	<b>13,629</b>	<b>35,915</b>

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

*For the purpose of analysis, all user types are considered community partners except for DCFS staff and Adoptive/Foster Caregivers.*

Overall of Trainings Provided 2019-2020 (Captured by the LMS)								
Overall Training by Course and Classification								
Category	Training	Hours	Total Participants	Total Completed	Louisiana DCFS Staff	Louisiana Foster/ Adoptive Caregivers	Community Partners	Total Hours Awarded
A Journey Home	Journey Home Pre-Service Kinship Training	6.00	N/A*	131	0	131	0	786
	Regular Certification A Journey Home	3.00	7	1	0	1	0	3
Bullying	Bullying 101	0.75	801	718	98	576	44	538.5
	Bullying 201	0.75	341	333	0	333	0	249.75
Legal/ Courtroom Simulation	Child Welfare Legal	5.00	15	12	12	0	0	60
	How to Give Effective Courtroom Testimony	1.00	176	148	148	0	0	148
	Courtroom Simulation Lecture	6.00	30	17	17	0	0	102
	Courtroom Simulation Lab	6.00	25	13	13	0	0	78
Child Welfare Supervisor Support and Capacity Building Program	Child Welfare Support and Capacity Building Kickoff and Orientation for Managers	5.00	71	51	51	0	0	255
	Child Welfare Support and Capacity Building Program Module 1- Preparing for Supervision-Transit	11.00	43	35	35	0	0	385
	Child Welfare Support and Capacity Building Program Module 2-Building Your Team	12.00	43	0	0	0	0	0
	Child Welfare Support and Capacity Building Program Module 6- Supervising as Leaders in the Age	12.00	38	0	0	0	0	0
	Manager & Supervisor Training Information	9.50	9	8	8	0	0	76
	It's a Wonderful Team 0 Supervisor/Manager Training	9.50	8	4	4	0	0	38
DCFS Caseworker		0.75	82	60	60	0	0	45

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Drug Screening and Testing	Training – Drug Screening & Testing Process							
	DCFS Clerical and Admin Training – Drug Screening & Testing Process	0.75	23	14	14	0	0	10.5
Engagement	Engagement in the Family Team Meeting Process	.5.00	1006	969	969	0	0	503
	Engaging Families for Co-Parenting	2.00	276	184	184	0	0	368
General Trainings	Care Setting Preservation	0.75	123	96	96	0	0	72
	Indian Child Welfare Act	1.50	195	178	163	0	15	267
	Integration Audits for Access	2.00	301	168	168	0	0	336
	Keeping Youth TECHnically Connected	1.00	21	20	0	20	0	20
	Kids and Substance Abuse	1.00	782	729	171	523	35	729
	Louisiana Kinship Navigator	1.00	339	318	111	207	0	318
	Maximizing the Power of Adolescence	1.50	810	737	186	516	35	1105.5
	Opening Doors: Working With LGBTQ Children, Youth, and Families in Child Welfare	1.00	364	327	155	144	28	327
	One Heart can Make a Difference: Impacting Lives through Dynamic Service Excellence	1.75	432	285	200	0	85	498.75
	Permanency Training	12.50	41	37	37	0	0	462.5
	Prevention Training	4.50	46	10	10	0	0	45
	Removed: Part 1	0.50	N/A*	784	59	106	619	392
	Removed: Part 2	0.50	N/A*	497	45	80	370	248.5
	Social Work Ethics	3.00	333	265	265	0	0	795
	The Connected Child	3.00	1081	695	17	678	0	2085
	The Developmental Disabilities Service System	0.50	374	300	77	197	26	150
The Power of Connection: How Resources Families can Support Adolescents	1.25	159	149	36	113	0	186.25	

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

	through COVID-19							
	Transportation Assistance	0.25	64	54	54	0	0	13.5
	Thrive: A normalcy Training	3.00	N/A	58	58	0	0	174
	TBRI-Intro and Overview	5.00	75	75	75	0	0	375
	Trauma Behavioral Health Screen	0.75	67	58	58	0	0	43.5
	Trauma Informed Care	9.25	45	29	29	0	0	268.25
	Understanding and Managing Behavior: An ABA Approach	0.50	961	842	65	654	37	421
	Understanding Girls: Attachment	1.00	416	324	0	303	21	324
	Understanding Girls: Girls and Emotion	1.00	99	94	0	91	3	94
	Understanding Girls: Impact to the Caregiver	1.00	69	66	0	64	2	66
	Understanding Girls: Relational Aggression	1.00	59	58	0	56	2	58
	Understanding Girls: Sexuality	1.00	43	43	0	42	1	43
	Using Media Effectively with Young Children & Virtual Visualization Part 1: Virtual Communication with Youth Children	1.00	223	203	47	156	0	203
	Using Media Effectively with Young Children & Youth Visitation Part 2: Using Media Play with Youth Children	1.00	142	127	36	91	0	127
Mandatory Trainings	Assessing Safety in Child Welfare	1.00	1188	1167	1167	0	0	1167
	Caring for LGBTQ+ Youth	3.00	64	54	54	0	0	162
	Cultural Compassion: Addressing Implicit Bias Part 1	0.50	1209	1002	170	753	79	501
	Cultural Compassion: Addressing Implicit Bias Part 2	0.50	226	215	42	158	15	107.5
	Culturally Affirming Care	3.00	77	58	58	0	0	174
	Culture Clash	1.50	499	431	59	348	24	646.5

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

	Domestic Violence and Child Welfare	5.00	193	104	104	0	0	520
	Instructor-Led Blood borne Pathogens	1.00	62	52	52	0	0	52
	CPR Refresher	0.50	4630	2664	49	2496	1	1332
	Family Search and Engagement	5.75	N/A*	109	109	0	0	626.75
	Human Trafficking 101	0.75	1282	1173	185	943	45	879.75
	Human Trafficking in Louisiana: Arm Yourself with the Facts	3.00	51	51	51	0	0	153
	Mandatory Reporter Training	1.50	12460	10466	227	2803	7306	15699
	Medication Management	0.50	4579	2735	0	2609	0	1367.5
	Physical Indicators of Child Maltreatment	6.00	143	96	96	0	0	576
	Planful Transitions	6.00	279	207	207	0	0	1242
	Quality Matters: Quality Contacts	2.50	262	184	184	0	0	460
	Separation and Placement	12.00	131	88	88	0	0	1056
	Working with LGBT Youth	1.50	399	373	193	141	39	559.5
	Worker Safety	6.00	59	42	42	0	0	252
QPI	Icebreakers	0.50	279	254	0	240	14	127
	Parent Perspective	1.75	457	390	39	341	10	682.5
	Putting Parenting First	2.00	119	96	96	0	0	192
Safety	Car Seat Safety	0.75	499	470	51	411	8	352.5
	Infant Tragedy in the Backseat	0.50	265	247	49	189	9	123.5
	Safe Sleep, Reducing the Risk of SIDS and SUDS	0.75	4749	2861	81	2606	48	2145.75
Support Groups	CENLA Foster Parent Support Group	2.00	19	19	0	19	0	38
	Child Welfare and COVID 19	1.00	308	174	174	0	0	174
	Foster Parent Grief	2.00	15	11	0	11	0	22
	IV-E Stipend Support Group	6.00	101	65	65	0	0	390
Child Welfare Assessment and Decision Making	Child Welfare Assessment and Decision Making Overview	1.50	988	941	941	0	0	1411.5
	Child Welfare Assessment and Decision Making	2.00	438	293	293	0	0	586
	Child Welfare Assessment and Decision Making Trainers & Practice Champions	6.00	60	44	44	0	0	264

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

	Train the Trainer: CWADM Advanced	8.25	31	30	30	0	0	247.5
New Worker Training	New Child Welfare Worker Orientation Week 1	24.00	73** (173)	62	62	0	0	1488
	Structured Activities Week 1	20.00	231	20	20	0	0	400
	New Child Welfare Worker Orientation Week 2	25.00	74** (153)	60	60	0	0	1500
	Structured Activities Week 2	20.00	242	15	15	0	0	300
	New Child Welfare Worker Orientation Week 3	25.00	92** (163)	78	78	0	0	1950
	Structured Activities Week 3	20.00	236	12	12	0	0	240
	New Child Welfare Worker Orientation Week 3 Program Transfer	18.00	61**	44	44	0	0	792
	Structured Activities Transfer Week 3	20.00	158	2	2	0	0	40
QIC-WD	QIC-WD: Case Review Instrument	0.75	25	21	21	0	0	15.75
	QIC-WD: Teaming Specialists Week 1 Orientation	16.00	3	1	1	0	0	16

*\*Due to an unknown issue, participation statistics were not recorded for some trainings. During the 2019-2020 time-period, participation statistics (participation and pre-/post-test data) and evaluation data were recorded in separate files. This was modified for the 2020-2021 fiscal year to improve accuracy of recording data. While participation statistics do not occur for three (3) trainings, evaluation data was recorded. For evaluations to be completed, the course must first be passed with a minimum passing score on a post-test which means the course was complete.*

*\*\*Due to an unknown issue, some participation statistics were not recorded for some participants. While participation statistics do not occur for some participants, evaluation data was recorded. For evaluations to be completed, the course must first be passed with a minimum passing score on a post-test which means the course was completed. The participation statistics were manually corrected to match the number of evaluations. The number noted in parentheses is the higher of the two numbers.*

<b>Overall of Trainings Provided 2019-2020 (Not Captured by the LMS*)</b>				
Training	Hours	Total Participants	Total Completed	Total Hours Awarded
FATS/ACCESS/TIPS	5	11	11	55
Fundamentals of CINC 101	6	11	11	66
Journey Home Pre-Service Kinship Training	6.00	508	508	3048
Journey Home: Regular Certification	3.00	829	829	2487
Knowing Who We Are	**	89	89	**
Prevention Training Team - BR	4.5	11	11	49.5
LA State/Regional QPI	6.5	60	60	390
Safety Decision Making	6	74	74	444

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Supervisors Support Group	3	16	16	48
Supporting Transition	**	26	26	**
Targeted Recruitment Plans	3.5	21	21	73.5
TBRI: Correcting Principals	5	59	59	295
Understanding Our Secrets	3	43	43	129

*\*Trainings marked with an asterisk for those not captured in the LMS system denote in-person trainings that took place between July 1, 2019 and March 15, 2020 prior to the COVID-19 stay-at-home orders. Trainings were facilitated by DCFS staff and outside partners. While attendance documentation was consistent, pre-/post-test and evaluation data was not captured or provided to the assessment team compiling this report in a reportable manner. Some data was entered into the LMS system however others were not. Additionally, the courses are now facilitated through the LMS system for accurate data collection in the 2020-2021 fiscal year. For this reason, evaluation data from these trainings are excluded from analysis below in this report.*

*\*\*Trainings marked with a double asterisk for those not captured in the LMS system denote in-person trainings that took place between July 1, 2019 and March 15, 2020 for which this information was unavailable at the time of reporting.*

**Initial Staff Training:** All New DCFS Child Welfare employees are required to complete 64 hours of training in the first year. All New DCFS Child Welfare employees are assigned to New Child Welfare Worker Orientation (NCWWO) Cohorts upon notice of hire from the Human Resources section prior to the assignment of cases. Between July 1, 2019 and June 30, 2020, 223 new workers went through the New Child Welfare Worker Orientation.

**Evaluation of Trainings:** Most evaluations completed in the 2019-2020 fiscal year were completed through the online LMS system. The system allows for data to be captured and held in secured digital locations. While the system was effective for capturing most data, there were issues where statistics related to participation were not gathered for three trainings (noted with an asterisk (\*) in the participation chart) and missing for some participants in the New Worker Training courses (noted with two asterisks (\*\*)) in the participation chart). Evaluations are not required to show completion of a training as mandating the evaluation would potentially skew the results and de-anonymize the results. With the evaluations being anonymized, the results are considered closer to the participants' true perceptions. The format of the two evaluations are as follows:

**Five (5) question evaluations:**

1. In my opinion, the content of this training provided me with knowledge and skills I need for my role.
2. In my opinion, children and families will benefit from knowledge and skills participants gained during this training.
3. Overall, I am satisfied with my online training experience.
4. How confident are you that you will be able to apply the information you learned in this training? (0= cannot do at all, 5=moderately certain I can do, 10= highly certain I can do)
5. Please provide any additional feedback (training activities, training video, training topics, content, etc.)

**Ten (10) question evaluation format:**

1. I felt the trainer(s) demonstrated expertise related to the training topic through knowledge, skills and practice.
2. I felt like the trainer(s) maintained an atmosphere of courtesy and respect in this training.
3. I felt actively engaged throughout this training.
4. I felt like the trainer(s) encouraged me to relate course content to real life situations and/or practice.
5. I felt the training materials and the in-class activities were helpful to building knowledge and skills in this topic.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

6. In my opinion the content of this training provided me with knowledge and skills I need for my role.
7. In my opinion children and families will benefit from knowledge and skills participants gained during this training.
8. How did you hear about this training?
9. What suggestions do you have for additional training topics?
10. Do you have any additional feedback?

All questions above are on a scale of 1-5 unless noted in the question with 1 being the highest and 5 being the lowest rating on a Likert scale. For analysis, all five-point scales were reverse coded for ease of interpretation. All qualitative questions answers are recorded and analyzed for necessary changes in programming but are excluded from this report due to the volume of responses. Most responses are categorized as the training being “great” or positive. For this reason, quantitative analysis found on page (#) looks only at questions 1-4 of the five-question evaluation and 1-7 of the ten question evaluation.

During the COVID-19 pandemic, trainers who developed courses were required to make decisions regarding which evaluations to use. While some trainings were considered instructor-led, the trainers chose to use the five-question evaluations as they were occurring through the online learning management system. The majority of evaluations (34,486) utilized the short format. Only 2140 evaluations used the longer format. On a construct level, the evaluations are similar.

**Evaluation Results:** Below are the results of the trainings recorded in the online LMS. For each question, the top number represents the mean score, and the numbers in parentheses represent the number of individuals rating a 5 and 4, respectively, on a scale of 1-5 (1 being the lowest rating and 5 being the highest).

Evaluation of Trainings Using Short Survey Format					
Training	Total Participants	Q1	Q2	Q3	Q4
Journey Home Pre-service	131	4.66 (93/34)	4.76 (100/31)	4.66 (90/39)	9.07 (70/27)
Regular Certification Journey Home	12	4.92 (11/1)	4.92 (11/1)	4.83 (10/2)	9.42 (8/1)
Bulling 101	529	4.52 (322/170)	4.54 (330/166)	4.51 (321/166)	8.85 (267/84)
Bulling 201	364	4.61 (245/103)	4.61 (246/102)	4.59 (246/98)	9.17 (222/47)
How to Give Testimony	118	4.52 (70/43)	4.49 (69/42)	4.52 (71/40)	8.70 (58/25)
CWADM Overview	790	4.25 (347/342)	4.36 (378/343)	4.20 (324/352)	7.60 (217/110)
CWADM	126	4.37 (61/51)	4.54 (73/48)	4.30 (60/44)	8.02 (40/23)
DCFS Caseworker Clinical Training Drug Screening	14	4.48 (48/28)	4.46 (46/30)	4.46 (46/30)	8.93 (41/16)
DCFS Clerical and Admin Training Drug Scree	81	4.86 (12/2)	4.86 (12/2)	4.86 (12/2)	9.31 (9/2)
Engagement in the FTM Process	808	4.37 (388/354)	4.45 (415/344)	4.37 (384/356)	8.57 (382/126)
Care Setting Preservation	87	4.47 (46/36)	4.54 (48/38)	4.49 (48/35)	8.59 (38/14)
Indian Child Welfare Act	173	4.53 (106/58)	4.55 (108/56)	4.45 (104/54)	8.40 (73/24)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Integration Audits for Access	11	4.73 (8/3)	4.82 (9/2)	4.64 (8/2)	8.70 (6/0)
Kids and Substance Abuse	581	4.57 (367/183)	4.58 (372/180)	4.55 (364/180)	8.95 (304/98)
Louisiana Kinship Navigator	269	4.63 (179/80)	4.60 (175/83)	4.60 (173/85)	9.09 (159/37)
Maximizing the Power of Adolescence	623	4.51 (376/209)	4.54 (387/204)	4.49 (372/206)	8.83 (309/113)
Opening Doors: Working with LGBTQ+ Youth	368	4.61 (255/94)	4.62 (251/102)	4.57 (242/103)	8.86 (178/70)
One Heart can Make a Difference	286	4.64 (199/78)	4.66 (210/65)	4.65 (205/72)	8.94 (162/45)
Removed Part 1	784	4.57 (506/236)	4.58 (508/234)	4.56 (501/237)	9.04 (467/108)
Removed Part 2	497	4.57 (321/154)	4.57 (318/158)	4.56 (319/152)	8.99 (297/53)
Social Work Ethics	283	4.44 (157/107)	4.48 (165/101)	4.32 (145/102)	8.75 (138/53)
The Connected Child	580	4.57 (393/145)	4.57 (395/149)	4.53 (377/158)	9.09 (355/81)
The Developmental Disabilities Service System	283	4.47 (163/99)	4.52 (171/97)	4.46 (165/95)	8.62 (134/41)
The Power of Connection	143	4.44 (87/40)	4.41 (83/44)	4.40 (80/47)	8.95 (81/20)
Transportation Assistance	49	4.57 (31/15)	4.55 (30/16)	4.55 (31/14)	9.02 (26/7)
Thrive	6	4.83 (5/1)	4.67 (4/2)	4.67 (4/2)	8.83 (3/0)
Trauma Behavioral Screen	53	4.62 (35/16)	4.60 (34/17)	4.60 (34/17)	8.18 (19/9)
Understanding and Managing BX	684	4.53 (406/245)	4.54 (410/243)	4.48 (383/258)	8.76 (310/135)
UG: Attachment	281	4.56 (175/93)	4.57 (179/89)	4.50 (170/91)	8.63 (134/42)
UG: Girls and Emotions	97	4.63 (67/27)	4.62 (67/26)	4.59 (65/28)	9.10 (55/17)
UG" Impact to the Caregiver	82	4.68 (59/20)	4.68 (59/20)	4.63 (57/20)	9.12 (48//12)
UG: Relational Aggression	74	4.73 (55/18)	4.70 (53/20)	4.65 (52/18)	9.16 (42/10)
UG: Sexuality	56	4.63 (38/15)	4.55 (34/19)	4.54 (33/20)	8.98 (31/5)
Using Media Effectively p 1	148	4.55 (95/44)	4.55 (92/48)	4.48 (87/50)	9.03 (85/20)
Using Media Effectively p 2	99	4.46 (57/36)	4.48 (57/37)	4.42 (54/37)	8.77 (47/15)
Assessing Safety	993	4.43 (554/360)	4.50 (575/358)	4.19 (470/354)	8.37 (401/185)
Cultural Compassion Bias M1	904	4.54 (584/252)	4.55 (579)	4.51 (569/268)	8.88 (505/130)
Cultural Compassion Bias M2	215	4.59 (139/65)	4.58 (137/67)	4.55 (135/67)	9.03 (122/28)
Culture Clash	369	4.53 (231/109)	4.52 (228/113)	4.47 (217/120)	8.85 (191/59)
CPR Refresher	2899	4.65 (2066/714)	4.66 (2095/687)	4.62 (2009/738)	9.25 (1937/383)
Human Trafficking 101	1053	4.61 (716/292)	4.62 (723/290)	4.59 (693/312)	9.03 (602/169)
Mandatory Reporter	10675	4.65 (7512/2671)	4.65 (7546/2734)	4.55 (6927/2997)	9.11 (6582/1689)
Medication Management	3024	4.60 (2044/816)	4.62 (2075/806)	4.56 (1991/834)	9.43 (2277/296)
Quality Matters	68	4.43 (38/25)	4.50 (42/22)	4.44 (39/23)	8.80 (34/11)
Working with LGBT Youth	382	4.61 (264/69)	4.61 (261/102)	4.59 (261/94)	8.87 (210/55)
Ice Breakers	220	4.55	4.56	4.54	8.97

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

		(140/65)	(140/67)	(139/66)	(126/27)
Parent Perspective	333	4.57 (219/92)	4.56 (220/91)	4.57 (217/96)	9.00 (194/48)
Putting Parenting First	83	4.66 (58/22)	4.72 (62/19)	4.67 (60/20)	9.19 (43/19)
Car Seat Safety	388	4.62 (269/101)	4.63 (272/98)	4.61 (266/101)	9.24 (255/52)
Infant Tragedy in the Back Seat	201	4.74 (153/43)	4.73 (153/43)	4.71 (150/46)	9.32 (137/29)
Safe Sleep, SIDS	3048	4.63 (2168/715)	4.66 (2205/713)	4.61 (2108/766)	9.48 (2365/256)
QIC-WD: Case Review Inst.	12	4.25 (6/4)	4.33 (6/4)	4.33 (6/4)	7.92 (3/2)
<b>Total Evaluations</b>	<b>34486</b>				

Evaluation of Trainings Using Long Survey Format								
Training	Completion	Q1	Q2	Q3	Q4	Q5	Q6	Q7
Child Welfare Legal	12	4.92 (11/1)	4.83 (10/2)	4.42 (8/1)	4.67 (8/3)	4.50 (9/2)	4.75 (9/3)	4.75 (9/3)
Courtroom Sim Lecture	21	4.81 (/19/0)	4.76 (18/1)	4.81 (19/0)	4.67 (16/0)	4.76 (18/1)	4.71 (17/2)	4.71 (17/2)
Courtroom Sim Lab	6	5.00 (6/0)						
CW Support and Capacity MI	34	4.88 (30/4)	4.91 (31/3)	4.85 (30/4)	4.88 (30/3)	4.79 (27/7)	4.85 (30/3)	4.79 (28/5)
Manager & Supervisor Training Info	8	4.88 (7/1)	4.88 (7/1)	4.75 (6/1)	4.88 (7/2)	4.88 (7/1)	4.88 (7/1)	4.75 (6/2)
It's a wonderful team	1	5.00 (1/0)						
Engaging Families Co-parenting	41	4.73 (33/7)	4.73 (33/7)	4.66 (31/7)	4.66 (30/8)	4.66 (31/8)	4.59 (29/9)	4.66 (31/8)
Integration Audits for Access	150	4.51 (82/65)	4.52 (84/62)	4.19 (62/65)	4.39 (71/61)	4.39 (70/71)	4.41 (72/69)	4.27 (63/67)
Permanency Training	37	4.76 (30/5)	4.84 (32/4)	4.73 (28/5)	4.78 (30/8)	4.73 (30/4)	4.70 (29/5)	4.76 (29/7)
Prevention Training	25	4.72 (18/7)	4.84 (21/4)	4.72 (18/7)	4.80 (20/7)	4.76 (19/6)	4.76 (20/4)	4.72 (19/5)
TBRI-Intro	226	4.83 (194/30)	4.88 (205/19)	4.63 (161/30)	4.74 (176/53)	4.70 (170/49)	4.69 (171/46)	4.81 (190/32)
Thrive	58	4.83 (48/10)	4.88 (51/7)	4.84 (49/10)	4.86 (50/9)	4.86 (50/8)	4.76 (47/8)	4.86 (50/8)
Trauma Informed Care	29	4.93 (27/2)	4.90 (26/3)	4.93 (27/2)	4.90 (26/2)	4.83 (25/3)	4.76 (24/4)	4.83 (24/5)
Caring for LGBTQ+ Youth	59	4.86 (51/8)	4.85 (50/9)	4.75 (45/8)	4.78 (46/13)	4.73 (45/12)	4.83 (49/10)	4.85 (50/9)
Culturally Affirming Care	54	4.81 (47/6)	4.80 (46/7)	4.76 (46/6)	4.81 (47/6)	4.78 (46/6)	4.76 (44/9)	4.76 (44/9)
Domestic Violence	86	4.79 (68/18)	4.83 (71/15)	4.73 (65/18)	4.77 (66/19)	4.79 (69/16)	4.80 (69/17)	4.79 (68/18)
Family Search and Engagement	109	4.67 (78/28)	4.72 (84/22)	4.68 (81/28)	4.67 (81/23)	4.67 (83/20)	4.67 (80/25)	4.71 (83/22)
Human Trafficking in LA	3	4.67 (2/1)						
Physical Indicators	95	4.89 (85/10)	4.87 (83/12)	4.79 (80/10)	4.85 (83/11)	4.86 (82/13)	4.86 (82/13)	4.85 (81/14)
Planful Transitions	186	4.69 (139/39)	4.73 (144/35)	4.60 (132/39)	4.70 (142/39)	4.69 (140/39)	4.66 (136/42)	4.69 (139/38)
Quality Matters	78	4.71 (57/19)	4.74 (60/16)	4.56 (52/19)	4.68 (55/20)	4.62 (51/24)	4.56 (51/23)	4.65 (53/23)
Separation and Placement	89	4.87 (78/10)	4.87 (78/10)	4.85 (77/10)	4.87 (78/11)	4.85 (77/11)	4.80 (75/11)	4.81 (75/11)
Worker Safety	40	4.58 (29/6)	4.70 (31/6)	4.35 (24/6)	4.60 (29/9)	4.45 (26/8)	4.48 (29/5)	4.48 (27/7)
CENLA Foster Support	6	4.67 (5/0)	4.67 (5/0)	3.33 (1/0)	4.50 (4/1)	5.00 (6/0)	4.67 (5/0)	4.83 (5/1)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Child Welfare and COVID 19	133	4.73 (108/20)	4.73 (107/22)	4.62 (95/20)	4.68 (100/28)	4.55 (90/30)	4.68 (100/27)	4.63 (95/13)
Foster Parent Grief	10	4.90 (9/1)	4.70 (7/3)	4.80 (8/1)	4.70 (7/2)	4.90 (9/1)	4.80 (8/2)	4.90 (9/1)
IV-E Support Groups	3	5.00 (3/0)						
CWADM Trainers and Practice Champ.	21	4.62 (16/4)	4.67 (17/3)	4.48 (15/4)	4.48 (15/3)	4.52 (14/6)	4.48 (15/3)	4.62 (16/4)
New CW Worker Week 1	175	4.89 (159/14)	4.89 (161/11)	4.82 (150/14)	4.89 (156/20)	4.85 (153/18)	4.87 (154/20)	4.82 (150/22)
New CW Worker Week 2	153	4.75 (122/27)	4.76 (121/29)	4.61 (113/27)	4.70 (118/27)	4.65 (113/30)	4.75 (122/24)	4.74 (118/31)
New CW Worker Week 3	163	4.72 (126/31)	4.74 (127/32)	4.65 (117/31)	4.71 (123/38)	4.71 (123/33)	4.74 (126/32)	4.69 (121/36)
New CW Worker Transfer Week 3	28	4.86 (24/4)	4.82 (23/5)	4.71 (22/4)	4.75 (22/4)	4.86 (24/4)	4.79 (23/4)	4.79 (23/4)
QIC-WD: Teaming Specialists	1	5.00 (1/0)	5.00 (1/0)	5.00 (1/0)	4.00 (0/0)	4.00 (0/1)	4.00 (0/1)	4.00 (0/1)
<b>Total Evaluations</b>	<b>2140</b>							

The following table shows the number of cohorts that attended the New Worker Orientation and enrollment throughout the three weeks of training:

New Child Welfare Worker Orientation Training:									
Group/ Session	Week 1			Week 2			Week 3		
	DCFS	IVE <sup>a</sup>	Total	DCFS	IVE <sup>a</sup>	Total	DCFS	PT <sup>b</sup>	Total
2019-2020*	140	35	175	118	35	153	163	61	163

*Note. Only participants that completed the whole week of training are included. Due to a coding issue in the LMS system, users are not reportable by cohort. Overall statistics are the only numbers available.*

*IVE: Title IV-E Stipend students/graduates.*

*PT: DCFS Staff that are transferring programs. Only required to take three days of week three's training.*

**Ongoing Staff Training:** All DCFS CW employees are required to complete 20 hours of in-service training annually. In-service training hours are documented within a state fiscal year, which runs July 1, 2019 through June 30, 2020. One thousand one hundred nine (1306) staff continued with their in-service training. 1,246 staff completed trainings (95%) whereas 60 staff did not complete trainings (5%).

The Louisiana Child Welfare Training Academy LMS hosted the following table displays the accumulated training hours earned by each DCFS region.

Statewide Child Welfare Staff's Completion Rates of Required Training SFY 2019:			
Region Name	Total # Staff	Staff Completions by Region	Staff Incompletions by Region
New Orleans	111	94% (104)	6% (7)
Baton Rouge	135	93% (126)	7% (9)
Covington	162	99% (160)	1% (2)
Thibodaux	97	94% (91)	6% (5)
Lafayette	171	96% (165)	4% (6)
Lake Charles	86	94% (81)	6% (5)
Alexandria	100	95% (95)	5% (5)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Shreveport	132	98% (129)	2% (3)
Monroe	112	95% (106)	5% (6)
State Office	200	94% (188)	6% (12)
Total	1306	95% (1246)	5% (60)

*Note: Some included staff members may have resigned or completed their trainings after the cutoff date. This could account for the inflation in training hour requirement incompletions. Due to COVID-19 stay-at-home orders, there was a higher percentage of staff completing trainings then in previous years.*

**Community Partner Trainings Update for SFY 2020:** LCWTA is a partnership between DCFS, the Pelican Center for Children and Families, and the University Alliance comprised of seven university partners within the public schools of Social Work in Louisiana. The University Alliance members include Southeastern Louisiana University (lead), Northwestern State University, Southern University Baton Rouge, Southern University New Orleans, Grambling University, Louisiana State University, and the University of Louisiana at Monroe.

The Pelican Center remained a partner in the LCWTA. Through this sustained partnership, the Pelican Center has been able to act as coordinator in providing multi-disciplinary educational training for child welfare legal stakeholders as well as DCFS staff and partners. The Global pandemic, COVID-19 created a unique challenge of continuing its training and education in an environment when the world was forced to stay home. Training staff and consultants had to pivot and modify live training to virtual platforms to meet the need of continuing education for child welfare stakeholders in the “new normal”. During the SFY 2020, the Pelican Center conducted 6 in-person and 6 virtual training. Three hundred, seventy-one (371) participants completed the trainings with 278 registered as DCFS staff.

Training Session for SFY 2020:							
Training	Total Trainings	Total Participants (DCFS Staff)	Total Evaluations Completed	Question 1 <sup>a</sup>	Question 2 <sup>b</sup>	Question 3 <sup>c</sup>	Question 4 <sup>d</sup>
Mosaic Dimension 2.0	1	15	No Evaluations Located				
Safety Decision Making	2	71 (61)	No Evaluations Located				
Fundamentals of Child Welfare	3	113 (97)	96	96% (75% 21%)	99% (78% 21%)	100% (84% 16%)	100% (81% 19%)
Culture SMART	4	125(114)	113	98% (83% 15%)	92% (73% 19%)	98% (81% 17%)	98% (74% 24%)
Total	12	371 (298)	209	97% (79% 18%)	95.5% (75.5% 20%)	99% (82.5% 16.5%)	99% (77.5% 21.5%)

*Note. Participants answered questions 1-4 on a 5-point Likert scale (e.g., Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree). The table reflects the percent participants agreed (combining Strongly Agree and Agree) with the question while the numbers in parenthesis break down that percent into its components (Strongly Agree and Agree respectively). Below are the questions asked:*

Question 1: “I felt like the trainer(s) encouraged me to relate course content to real life situations and/or practice.”  
Question 2: “I felt the training materials and the in-class activities were helpful to building knowledge and skills in this topic.”

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Question 3: "In my opinion children and families will benefit from knowledge and skills participants gained during this training."  
Question 4: "In my opinion the content of this training provided me with knowledge and skills I need for my role."

Training Session for SFY 2020:													
Training	Total Trainings	Total Participants	Total Evals Completed	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10
Child Welfare Basics	1	24	24	96 %	98 %	95 %	93 %	93 %	92 %	91 %	93 %	89 %	94%
Cultural Consciousness	1	19	19	99 %	100 %	97 %	99 %	96 %	97 %	97 %	95 %	96 %	97%

*Note. Participants answered questions 1-10 on a 5-point Likert scale (e.g., Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree). The table reflects the percent participants agreed (combining Strongly Agree and Agree) Below are the questions asked:*

- Question 1: Trainer(s) demonstrated expertise related to the training topic through knowledge, skills, and practice.
- Question 2: Trainer(s) maintained an atmosphere of courtesy and respect in this training.
- Question 3: Participants felt comfortable sharing their opinions and asking questions.
- Question 4: Participants felt actively engaged throughout this training.
- Question 5: Trainer(s) encouraged participants to relate course content to real life situations and/or practice.
- Question 6: Participants felt the training materials were helpful to learning.
- Question 7: Participants felt the in-class activities were helpful to building knowledge and skills in this topic.
- Question 8: Participants felt children and families would benefit from knowledge and skills they gained during this training.
- Question 9: Participants felt the content of this training provided them with knowledge and skills they need for their role.
- Question 10: Participants would recommend this training to others.

**Legal Trainings:** The following is a list of the training sessions provided to legal stakeholders as well as current DCFS staff members:

- APLA - Pause Before You Choose
- Changing the Paradigm Through Multi-Systemic Collaboration
- Child Abuse and Neglect = Trauma
- Child Welfare Law Core Training: Child Development Issues Basics of Child Abuse and Neglect
- Child Welfare Law Core Training: Federal and State Legislation
- Child Welfare Law Institute on Serving Older Youth - Part 1
- Child Welfare Law Institute on Serving Older Youth - Part 2
- Child Welfare Law Institute on Serving Older Youth - Part 3
- Child Welfare Research & Evaluation
- Concurrent Planning for Foster Children is Everyone's Job
- Current Issues Within ICWA
- Decision Making Tools for Child Welfare and the Courtroom
- Do No Harm - Part 1
- Do No Harm - Part 2
- Do No Harm - Part 3
- Do No Harm - Part 4
- Educational Advocacy: Benchmark Conferences
- Educational Advocacy: Discipline in Louisiana Schools
- Educational Advocacy: Resources at the Department of Education

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Educational Advocacy: Special Education Laws & Rights
- Fatherhood Engagement
- Focus on Family Engagement
- Healing the Child in Juvenile Court: The Science - Part 1
- Healing the Child in Juvenile Court: The Science -Part 2
- Healing the Child in Juvenile Court: The Science - Part 3
- Human Trafficking of Juveniles - Realities and Myths
- Judicial Expectations on Competency
- Legacy of Reform Court Oversight of Child Welfare
- Louisiana Parents' Attorneys Role in CINC Cases -Part 1
- Louisiana Parents' Attorneys Role in CINC Cases - Part 2
- Managing Secondary Traumatic Stress
- Permanency Options - Part 1
- Permanency Options - Part 2
- Preparing for and Testifying in Court as an Expert Witness
- The Adoptions and Safe Families Act - Part 1
- The Adoptions and Safe Families Act - Part 2
- Understanding the Standards/Ethics of Attorneys and Social Workers
- Unto a Third Generation: A Call to End Child Abuse Within 20 Years
- Working with Child Sexual Assault Victims with Disabilities

279 participants engaged in these online training sessions via the Children’s Law Advocacy Resources Online platform (clarola.org) sponsored by the Court Improvement Program and earned 480.55 continuing legal education hours including 32.2 ethics and 21.0 professionalism specialty hours.

The Pelican Center has continued to collaborate with other community stakeholder agencies to act as coordinator in providing multi-disciplinary educational and/or specified trainings for child welfare legal stakeholders as well as DCFS staff and other partners. The Global pandemic, COVID-19 created a unique challenge as many traditionally national and statewide conferences were canceled. Like the Pelican Center/CIP, some were able to pivot and transition to virtual conferences and community stakeholders welcomed the opportunity to engage in training opportunities in the safety of their homes. During state fiscal year 2020, through this collaborative effort, the Pelican Center conducted more than nine in-person and virtual trainings. Two Hundred, twenty-nine (229) participants completed the trainings earning a total of 568 continuing legal education hours or continuing education units. The following trainings were provided:

- **Fundamentals of CINC 101:** Nineteen (19) ALJ from the Division of Administrative Law attended a daylong training covering topics such as adverse childhood experiences and childhood trauma and its intersection with the CINC legal process. Eighteen (18) participants earned 144 continuing legal education hours including ethics and professionalism specialty credit.
- **Relationships and Intimacy:** Preventing Exploitation Information for People with Developmental Disabilities:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- **Trust-Based Relational Interview (TBRI) Fridays:** A multi-module training curriculum including an introduction and overview session and four separate modules: Understanding Trauma; Connecting and Empowering Principles; Correcting Principles: Proactive and Responsive and Putting it all Together. These mini-sessions were offered statewide with 32 participants earning 160 continuing legal education hours.
- **Complex Trauma Conference:** A multi-disciplinary daylong conference with 159 participants with six earning continuing legal education hours and 124 earning continuing education units.
- **Child Well-Being Summit:** A multi-disciplinary day and one-half long conference with seven participants earning 13.5 continuing legal education hours.
- **Red Book Online Training** with the NACC: Six (6) participants in a seven-week study webinar to prepare for the Child Welfare Law Specialist (CWLS) exam.

**Together We Can Annual Conference:** The 2019 Together We Can conference marked the 18th year of this annual event. The goal for the 2019 conference was to achieve 600 registrations and we reached 104% of the target by enrolling 624 participants. The attendees included a diversity of child welfare staff and stakeholders. CASA represented 36% of those attending; DCFS staff represented 22%; Legal Stakeholders accounted for 11% while the remaining 31% were composed of different classifications and categories. The conference has always served a multi-disciplinary audience, but this year we divided the breakout sessions into five tracks: Legal, Social Work, CASA, Foster Parents & Kinship Caregivers, and All Audience. We partnered with Louisiana CASA Association to provide an intensive pre-conference schedule for their program directors. This was the sixth year to use an online RFP process for soliciting some of the workshops for the annual conference. Fifty-one proposals were submitted online – an increase from 24 received the prior year. Many of the submitted proposals were accepted based on the student reviews. The remainder of the speakers were recruited by TWC staff and steering committee members. We want to thank the Social Work students at Southeastern Louisiana University and their professor Tonyalea Elam, LMSW, for their assistance with review of the proposals submitted online. The students did the initial screening of speaker proposals and then presented their research to the committee in teams.

During the Together We Can Conference 2019 there were a variety of 62 plenary sessions and workshops conducted with a total of 81 faculty members covering topics that addressed issues that were relevant at national and state-wide level such as: Trauma-informed Courtrooms; Family Engagement in the Mosaic: Culturally Responsive Evidence-Based Practice; Intermediate Use of Optima; Street Drugs: New Trends in Substance Abuse; Handle with Care; Assessing Child Safety; Families First: Keeping Focus in the New Normal; Warrior Spirit in Leadership; Bullying: Impact on Children; Initiatives Addressing Sex Trafficking in Louisiana; Extended Foster Care – Transition Planning for Older Youth; Permanency Matters; and Safe Babies Court Teams. The conference planning team gathered training evaluations from 62 sessions and workshops given throughout the conference. In reviewing the session evaluations, the highest rated sessions were:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Open Table and Kinship Navigator - NOW is the Time
- Crossing Borders
- Warrior Spirit in Leadership
- Unaccompanied Immigrant Children: Their Goals and Our Roles
- Optima Training for CASA teams
- Legal Ethics
- Social Work Ethics

During the TWC conference, there were 62 sessions offered with a total of 81 faculty members participating. Among the faculty, several key national speakers were present: Denise Jackson (CASA TX), Maria Gnecco (CASA of Yellowstone), Robert Hahn (Optima), Ellen Souder, LPCC-S and John Burek, MSCJ (Parenting with Love and Limits), Angelique Brown and Kari Kryda (Child Welfare Information Gateway), Lynn Reimer (Act on Drugs), Jamerika Haynes (Clever Jam Communications), D.J. Eagle Bear Vanas (Native Discovery), Carla Carter, (U.S. Dept. of HHS, Office of Civil Rights), Bethany Linville, MA (U.S. Committee for Refugees and Immigrants), Darneshia Bell (Zero to Three – National Infant Toddler Program), Dylan de Kervor, JD (Federal Coordination and Compliance Section – DOJ Civil Rights Division), Margaret Burt, JD, and Dr. Charles Zeanah (Tulane University).

The closing session was of interest to all. It was a panel presentation of four young women who had come from differing backgrounds in Louisiana, but all aged out of foster care. The panel members put together a video of their stories and then answered tough questions about life, goals, transitioning out of care, and where they are now.

The Pelican Center supported the Program Improvement Plan Quality Legal Representation goal by sponsoring subject matter experts to serve as conference and/or workshop presenters at Legal Stakeholder annual, biannual and quarterly training events. Further, the Pelican Center continues to support and promote the capacity of our individual legal practitioners by sponsoring registration and attendance at annual national conferences. During the state fiscal year 2020, the Pelican Center sponsored workshops or participants at the following conferences:

- 2020 City, Family, and Juvenile Judges Seminar: Dr. Rhenda Hodnett, Department of Children and Family Services, Deputy Secretary and S. Mark Harris, Pelican Center for Children and Families, Executive Director presented: Keeping Louisiana's Children Safe a session based upon the department's new safety assessment: Child Welfare Assessment Decision Making Model. This session qualified for 1 hour of continuing legal education.
- 2020 City, Family, and Juvenile Judges Seminar: Judge John Davidson, 9th Judicial District Court; Michelle Gros, JD, The Pelican Center for Children and Families, Special Projects Coordinator and S. Mark Harris, JD, The Pelican Center for Children and Families, Executive Director, presented: Permanent Improvement Plans—Lessons from Four Jurisdictions. This session qualified for 1.5 hours of continuing legal education.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- 2019 Judges Fall Conference: (Louisiana Council of Juvenile and Family Court Judges Business Meeting) S. Mark Harris, JD, Pelican Center for Children and Families, Executive Director- facilitated a roundtable discussion on matters related to the Child and Family Service Review (CFSR) and provided updates on Program Improvement Plan (PIP) initiatives. This session qualified for 4 hours of continuing legal education.
- Louisiana Council of Juvenile and Family Court Judges: (Joint Department Liaison Committee Meeting) A biannual joint executive training with members of the Department of Children and Families. This session qualified for 3 hours of continuing education.
- Summer School for Judges Annual Conference: The Pelican Center sponsored Dr. Krystin Carver as a conference presenter for TBRI in the Courtroom. This session qualified for 1.5 hours of continuing legal education.
- ABA National Conference on Parent Representation: Conference did not occur due to COVID-19.
- NACC 41st National Child Welfare Juvenile Justice and Family Law Conference: Nine children’s attorney’s registration and travel were sponsored for them to attend the National Association of Counsel for Children Conference in Anaheim, California.
- NACC, Child Welfare Law Specialist Certification: support continues for the certification of Louisiana child welfare attorneys. During this reporting period 28 CWLS’ renewal fees were paid, and the registration fees for 4 new applicants were paid.

**Foster and Adoptive Parent Training:** New foster and adoptive parents must complete pre-service training to become certified. Regular foster parents complete required and optional trainings each year (36 in total). Multiple training models were developed specifically for Louisiana through collaboration with partners such as The Annie E. Casey Foundation and Texas Christian University Child Development Center incorporating components of Quality Parenting and Trust-Based Relationship Interventions (TBRI). The Journey Home Precertification training was developed and implemented beginning in 2017. For SFY 2020, training was reduced due to the COVID-19 situation. Four hundred (400) regular foster homes were certified and completed 30 hours of pre-service trainings (24 classroom hours and six hours homework). Three hundred fifty-six (356) child specific or kinship homes were certified and completed 12 classroom hours.

The following table shows a breakdown of the Foster Homes and Child Specific Homes by region that were certified throughout SFY 2020:

Certified foster/adoptive parents are required to complete 15 hours of training per year to maintain certification. Other trainings are taken pertaining to specific initiatives or new requirements. Per licensing regulations, foster families are required to have 15 training hours by June 30 of each year in all nine regions, all foster families had the required 15 training hours before July 31, 2020, or their homes were closed before July 31, 2020.

The following is a table of evaluations regarding training sessions provided to foster/adoptive parents between July 1, 2019 and June 20, 2020.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

SFY 2020 New Certifications					
Region	Foster Homes		Child Specific Homes		Total Homes
	#	%	#	%	
Orleans	46	79 %	12	21%	58
Baton Rouge	26	59%	18	41%	44
Covington	57	42%	80	58%	137
Thibodaux	39	44%	50	56%	89
Lafayette	58	53%	51	47%	109
Lake Charles	35	69%	16	31%	51
Alexandria	51	57%	38	43%	89
Shreveport	55	59%	38	41%	93
Monroe	33	39%	51	61%	84
Other	0	0.0%	2	100.0%	2
Statewide	400	53%	356	47%	756

Foster/Adoptive/Pre-Service Caregiver Ongoing Training Evaluations SFY 2020:			
Training	Total Participants (Overall)	Total Evaluations Completed by Caregivers	Total Hours Awarded to Caregivers
A Journey Home Pre-Service	N/A	131	786
Bullying 101	801	576	432
Bullying 201	333	333	249.75
Keeping Youth TECHnically	21	20	20
Kids and Substance Abuse	782	523	523
Louisiana Kinship Navigator	339	207	207
Maximizing the Power of Adol.	810	516	774
Opening Doors	364	144	144
Removed Part 1	784	106	53
Removed Part 2	497	80	40
The Connected Child	695	678	2034
The Dev. Disability System	300	197	98.5
The Power of Connection	149	113	141.25
Understanding and Managing Behavior	842	654	327
Understanding Girls: M1	324	303	303
Understanding Girls: M2	94	91	91
Understanding Girls: M3	66	64	64
Understanding Girls: M4	58	56	56
Understanding Girls: M5	43	42	42
Using Media Effectively Part 1	203	156	156
Using Media Effectively Part 2	127	91	91
Cultural Compassion: Bias 1	1002	753	376.5
Cultural Compassion: Bias 2	215	158	79
Culture Clash	431	348	522
CPR Refresher	2664	2496	1248
Human Trafficking 101	1173	943	707.25
Mandatory Reporter Training	10466	2803	4204.5
Medication Management	2735	2609	1304.5
Working with LGBT Youth	373	141	211.5

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Ice Breakers	254	240	120
Parent Perspective	390	341	596.75
Car Seat Safety	470	411	308.25
Infant Tragedy in the Back Seat	247	189	94.5
Safe Sleep	2861	2606	1954.5
CENLA Foster Support Group	19	19	38
Foster Parent Grief	114	11	11
<b>Totals</b>	<b>31,301</b>	<b>19,325</b>	<b>18,408.75</b>
		<b>Evaluations</b>	<b>Hours</b>

**Child Placing Agencies/Residential Facility Trainings:** DCFS does not provide direct training to state licensed or approved facilities caring for children in foster care; however, training requirements are outlined in the Licensing Regulations. DCFS Licensing verifies that all licensing requirements, including required training, are met during on-site licensing inspections. During SFY ending June 30, 2020, 16 out of 22 Residential Homes and 2 out of 15 Child Placing Agencies were without training deficiencies following any of their inspections.

The following table summarizes the Child Placing Agencies and Residential Homes, site inspections, dates of first and last inspections, training requirements, and the date when all staff training deficiencies were cleared as reported by DCFS Licensing:

Facility Name	Program Code	Inspection dates during timeframe of 7/1/19-6/30/20	Total # of Staff	Orientation	Annual Training	CPR/FA	Date training deficiencies cleared
MacDonell United Methodist Children's Services, Inc.	Child Residential 1	07/30/2019 11/07/2019 3/3/2020					
Boys Town Louisiana - City Park Family Home	Child Residential 1	09/09/2019 10/21/2019 11/12/2019 1/28/2020 4/22/2020					
Lafourche Parish Juvenile Justice Facility	Child Residential 1	07/31/2019 10/08/2019					
Community Receiving Home Inc. dba Renaissance	Child Residential 1	07/17/2019 09/04/2019 11/27/2019 12/10/2019 2/11/2020 03/20/2020					
Harmony Center, Inc. - Harmony III Group Home	Child Residential 1	08/12/2019 09/17/2019 11/04/2019 12/02/2019 02/27/2020 04/24/2020	8 staff	11/4/2019 1 staff	11/4/2019 5 staff		cleared 12/02/2019
Louis Children's Crisis Center	Child Residential 1	08/20/2019 10/30/2019 3/10/2020	4 staff	08/20/2019 1 staff			cleared 10/30/2019

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Raintree House	Child Residentia 1	09/04/2019 12/10/2019 02/13/2020 06/03/2020					
Ware Youth Center Shelter	Child Residentia 1	08/07/2019 09/10/2019 10/22/2019 12/16/2019 02/19/2020					
Harbour House ETC - Emergency Shelter for Children	Child Residentia 1	08/22/2019 09/23/2019 01/06/2020 03/03/2020 04/24/2020					
Boys Town Louisiana - Magazine Family Home	Child Residentia 1	09/09/2019 10/21/2019 01/29/2020					
Cane River Children's Services, Inc.	Child Residentia 1	07/08/2019 10/07/2019 11/20/2019 12/18/2019 01/22/2020 3/12/2020	17 staff		10/07/2019 16 staff	11/20/2019 1 staff	11/20/2019 cleared 15 staff annual training 12/18/2019 cleared 1 staff CPR/FA
Gulf Coast Social Services	Child Placing Agency	08/28/2019 01/14/2020 03/09/2020					
Christopher Youth Center	Child Residentia 1	10/15/2019 12/17/2019 01/21/2020 03/05/2020 06/10/2020					
Volunteers of America, GBR Client Placing Foster Care / Treatment Foster Care	Child Placing Agency	07/25/2019 09/04/2019 10/09/2019 1/23/2020 03/17/2020					
Jesse Dotey Youth Development Center	Child Residentia 1	07/19/2019 10/03/2019 12/26/2019					
Cane River Children's Services Child Placing Programs	Child Placing Agency	07/09/2019 10/01/2019 11/05/2019 2/3/2020 03/11/2020					
The Agape House	Child Residentia 1	08/01/2019 10/22/2019 01/21/2020					
Nora's House	Child Placing Agency	07/22/2019 08/15/2019 10/03/2019 10/23/2019					
Behrman Treatment Family Home	Child Residentia 1	08/13/2019 09/10/2019 11/20/2019 12/05/2019 03/03/2020					

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Boys Town Louisiana - Bienville Family Home	Child Residential 1	09/09/2019 10/21/2019 11/20/2019 1/28/2020 04/22/2020					
Lighthouse Ranch for Boys	Child Residential 1	11/06/2019 06/17/2020					
Gulf Coast Social Services	Child Placing Agency	07/23/2019 10/17/2019 11/21/2019 05/19/2020					
Gulf Coast Social Services	Child Placing Agency	09/03/2019 12/30/2019 03/17/2020					
Therapeutic Family Services, Catholic Charities Archdiocese of New Orleans	Child Placing Agency	09/19/2019 10/14/2019 02/18/2020 3/9/2020					
The Agape House II	Child Residential 1	08/29/2019 10/28/2019 11/04/2019 01/13/2020 06/24/2020					
Harmony Center, Inc. - A.B. Horn Group Home	Child Residential 1	08/01/2019 08/08/2019 09/19/2019 11/18/2019 01/30/2020 02/13/2020	10 staff	08/01/2019 1 staff 08/08/2019 1 staff (different staff person)		08/08/2019 2 staff	8/08/2019 cleared 1 staff orientation 11/18/2019 cleared 1 staff orientation 09/19/2019 cleared 2 staff CPR/FA
Methodist Foster Care - Monroe	Child Placing Agency	07/10/2019 10/14/2019 11/13/2019 1/29/2020 05/18/2020	16 staff		05/18/2020 1 staff		cleared outside of timeframe for report
Methodist Foster Care - Lafayette	Child Placing Agency	08/08/2019 09/11/2019 10/10/2019 01/29/2020 03/05/2020					
Lighthouse Child Residential Center	Child Residential 1	10/08/2019 11/18/2019 2/11/2020 03/12/2020 05/06/2020	3 staff		10/08/2019 2 staff		10/16/2019 cleared
The Louis Children's Crisis Center - Midland	Child Residential 1	9/10/2019 2/2/2020	15 staff	09/10/2019 1 staff			2/2/2020 cleared
The Kennedy Center of Louisiana, Inc.	Child Placing Agency	07/29/2019 09/25/2019 11/20/2019 01/13/2020 02/26/2020					

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Metanoia Manor	Child Residential 1	09/24/2019 10/24/2019 01/09/2020 03/5/2020 04/17/2020					
Choices Coordinated Care Solutions, Inc.	Child Placing Agency	08/20/2019 09/25/2019 12/02/2019 02/03/2020					
Methodist Foster Care - Covington	Child Placing Agency	11/13/2019 02/11/2020					
LL Brandon Transitional Home	Child Placing Agency	07/26/2019 08/21/2019 09/12/2019 12/03/2019 01/08/2020 03/16/2020 05/20/2020	22 staff	03/16/2020 21 staff			21 staff cleared by 3/20/2020
National Youth Advocate Program	Child Placing Agency	08/15/2019 10/31/2019 01/27/2020 02/10/2020	3 staff	01/27/2020 1 staff			cleared 02/10/2020
Methodist Foster Care - Alexandria	Child Placing Agency	11/01/2019 02/20/2020 04/28/2020					

*Note: An empty cell, under Training Deficiencies, references a lack of deficiencies when inspected (i.e., all staff completed their Orientation trainings at the time of each inspection).*

*Number of Inspections and Date Range<sup>a</sup>: Date range in parentheses is referencing the month and year of the first and last inspection during the 19-20 fiscal year (m/yy).*

*Date Deficiencies Cleared<sup>b</sup>: The date used references when all staff were cleared. Some staff completed their trainings before the mentioned date.*

**F. SERVICE ARRAY**

The Louisiana Department of Children and Family Services (DCFS) Child Welfare (CW) program provides an array of services. These services assess the strengths and needs of children and families, determine other service needs, and address the needs of families as well as the individual children to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.

The state’s CW service continuum/service array includes:

- Centralized Intake (CI) for intake, screening and referral;
- Child Protective Services (CPS) for the assessment of reports of abuse/neglect;
- Family Services (FS) for in-home services when it is safe for a child to remain in the home;
- Foster Care (FC), Services to Parents (SP), Kinship Care (KC), Guardianship Subsidy, Chafee Independent Living Services, Adoption (AD), Education Training Vouchers and Extended Foster Care for out-of-home services;
- Home Development (HD) for the recruitment, certification and retention of foster/adoptive parents;
- Day Care (DC) services are provided in collaboration with LDE:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- To prevent removal and provide for the safety of children served in the CPS and FS cases as well as children remaining in the home with the parents in SP cases where at least one child has entered foster care; and,
- To stabilize placements of children in foster home settings as well as ensuring children of minor parents who are in foster care have the care needed while the minor parents achieve educational goals and seek normalcy.
- Interstate Compact on the Placement of Children (ICPC) for cross-jurisdictional placement services to children in out-of-home placements or being adopted; and,
- Residential and Behavioral Health Care for children who are unable to live in family/home-based settings.

Services are provided in all political jurisdictions throughout the state encompassing 64 parishes divided into nine regions. DCFS has CW offices located in 48 parishes statewide. Individuals who live in parishes where there is no CW parish office are served in their parishes of residence by DCFS staff housed in neighboring parishes. If travel for other services is required, DCFS provides transportation as resources allow.

The service array is provided through a number of specialized services and collaboration with community partners. Some examples include:

- A contract with the Language Line to serve clients with limited English proficiency;
- A drug screening contract allowing for a variety of screening options as needed to identify drug usage by parents;
- Paternity testing contracts utilizing labs across the state to identify fathers;
- Partnership with the Louisiana State Police to provide national, fingerprint based criminal background clearances on children's caregivers and staff.

Additional information on other specialized services is provided in the sections on CPS, Prevention and Intervention, and Chafee within this plan.

Preventive services are provided to families through the DCFS Family Services (FS) program. The philosophy is each child should remain in his or her own home if the family is able to meet the child's safety and other basic needs. The purpose in serving intact families is to prevent the unnecessary separation of the children from their families by identifying challenges to parental protective capacities, assisting families in improving parental protective capacity, and preventing the breakup of families when a child can be cared for safely in the home. FS workers complete a comprehensive assessment of the family identifying the unique needs, strengths and protective capacities of the family.

Foster care is a planned, goal-directed protective service for children and their parents who must live apart because of child abuse, neglect, or special family circumstances necessitating out-of-home care. Foster care services are intended to be an interim process to provide care for a child until he is reunited with his family or until another permanent living situation is provided. The department provides services to parents whose children are in foster care in order to enhance their parental protective capacities and remove the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

safety threats that resulted in the children's removal from the home. This portion of the foster care program is referred to as the Services to Parents (SP) program. The department assists families in the SP program through teaming to develop a network of support through extended family, friends, and their community to sustain family functioning once reunification is achieved. If unable to achieve reunification, the program serves families by maintaining connections with the child until another permanency goal is achieved.

Services offered to children in foster care, regardless of their age, are provided to insure safety, promote permanency and sustain child well-being. Services are provided statewide in 64 parishes through nine regional offices and 48 parish offices. Through concurrent planning, efforts are made to place children with families who can provide permanent placements for them should they be unable to return to their parent's custody. This involves placing children with relatives who are willing to adopt or accept custody or guardianship of the child or with foster parents who are dually certified as adoptive parents and willing to accept legal risk placements.

The goal of the DCFS Adoption Services (AD) program is to provide permanency for children through adoption. Foster care (FC) adoption is a permanency option for children who cannot safely return to their biological families. The goal of adoption is pursued as a permanent plan when the court of jurisdiction determines the child's family is unable or unwilling to resume care of the child, and the child's needs for safety, permanency and well-being are best achieved through adoption.

The Extended Foster Care Program (EFC) seeks to provide young adults with individualized and age-appropriate support needed to successfully transition to adulthood. EFC provides an age-appropriate program that is distinct from the services provided to youth under age 18 and acknowledges that young people in EFC are adults.

The EFC Program includes placement, services, and case management allowing young adults to experience age-appropriate freedom and independence while continuing to receive guidance and support. As young adults are supported in developing the skills and competencies needed to enter adulthood, they will be supported in achieving permanency and solidifying their supportive connections with family and adults. The program seeks to be flexible and responsive to the needs of young adults so they receive the support needed to thrive as they enter adulthood.

The eligibility criteria for EFC is below:

- Adjudicated as a Child in Need of Care (CINC)
- Aged out of foster care on 18<sup>th</sup> birthday
- Currently 18-21 years old.
- Meets one of the following:
  - Enrolled in a secondary educational program or program leading to an equivalent credential
  - Enrolled in an institution providing postsecondary or vocational education

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Participating in a program or activity designed to promote employment or remove barriers to employment
- Employed at least eighty hours per month
- Incapable of educational/employment activities due to a medical condition

Extended Guardianship Subsidies and Extended Adoption Subsidies may be offered to the caregivers of youth who enter a guardianship arrangement or are adopted between ages 16 and 18 from foster care who were eligible and began receiving the Guardianship Subsidy or Adoption Subsidy at the time of the guardianship arrangement or adoption. The extended subsidies may be provided to the youth's guardian or adoptive parent, if they continue to provide financial support to the youth, and continue to provide for the ongoing care of the youth up to the youth's twenty-first birthday. For families to receive the extended subsidies their youth must meet the same criteria as youth eligible for the EFC program.

Primary services for FS and SP clients are provided through the Family Resource Centers (FRC). These services include parenting classes, visit coaching and family skill building. Homebuilders is an Intensive Home Based Service (IHBS) provided to some clients, which offers child safety, placement and prevention services. This includes intensive, short term, crisis intervention and teaching/educational services delivered primarily in the home of the families. These services are provided to the highest risk families where children are at risk of out of home placement; or, families where reunification efforts are underway and the services are needed to support the safe transition home of the children. IHBS services are provided through the Medicaid health plans in collaboration with LDH. Referrals must be made by mental health providers, OJJ or DCFS indicating the services are needed to facilitate reunification of the child with the parent or to prevent out of home care of a child through hospitalization, detention or foster care.

Medical, dental and behavioral health care services are provided through DCFS and LDH collaboration to children and youth in FC, AD, and EFC, primarily through Medicaid and the LDH contracted Managed Care Organizations. A few children have private healthcare coverage, and non-Medicaid covered services are provided through DCFS allocated State General Funds to meet the care needs of the children and youth.

DCFS CW individualizes the service array through an assessment process initiated when the department first becomes involved with children, youth and families. This assessment process is ongoing throughout the life of a case. In the upcoming 2020-2024 plan years, DCFS will be collaborating with stakeholders, including the Capacity Building Center for States, to analyze all the assessment processes utilized by the department. The goals of this analysis include:

- ensuring statewide consistency in use of assessment processes;
- synchronizing the assessment processes for cohesion in service delivery across programs;
- building transparency in the service relationship with families;
- improving decision making regarding appropriateness of services in meeting client needs;

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- partnering more effectively with court systems in guiding families to the best permanency solutions for their unique situation.

DCFS intends to build a Louisiana Assessment model that will be implemented in all CW programs to measure and evaluate the impact on service delivery with changes to the model as needed to improve effectiveness.

DCFS and the Louisiana Department of Education (LDE) have worked together statewide to implement the federal Every Student Succeeds Act (ESSA) requirements. Both departments have developed liaisons to manage communications more effectively to assist children in achieving improved educational outcomes. These efforts and partnerships will continue to ensure children in foster care have coordinated service delivery between DCFS and their school system to maximize access to appropriate educational services.

Early Periodic Screening, Diagnostic, and Treatment (EPSDT) services are provided through the child's Medicaid provider. The LDH, Medicaid managed care programs establish a medical home for all children receiving Medicaid including children in foster care. This ensures coordinated medical care and better access to medical records. The primary care physician is able to monitor the child's developmental needs as well. Through collaboration with LDH and the Office of Citizen's with Disabilities (OCDD), Early Steps screenings are provided to identify early signs of developmental delays and establish appropriate services.

DCFS has specific policy to provide practice guidelines on assessing and working with Substance Exposed Newborns (SEN) and their families. The policy provides guidance on conducting a thorough assessment of the infant, caregivers and the environment in order to determine what services, if any, are appropriate for the family.

An Infant Mental Health/behavioral health screening tool was developed for children age five and under to assist workers with identifying behaviors which indicate further assessment and treatment might be needed. DCFS policy requires that all children be screened unless they are already receiving early intervention such as Early Childhood Support and Services (ECSS) or other developmental/behavioral health services. ECSS is a state program managed by LDH, Office of Behavioral Health (OBH) and provides a coordinated system of screening, evaluation, referral services and treatment for families of children ages 0 through 5 years who are at risk of developmental, cognitive, behavioral and relationship difficulties.

Two infant teams in the Orleans region provide infant mental health services. (For additional information on the Infant teams, please refer to the Promoting Safe and Stable Families [PSSF] section of this plan.) The infant teams provide comprehensive services to children, ages 0-60 months whose families are involved with DCFS due to maltreatment or prenatal exposure to drugs or alcohol. Comprehensive assessments include intake assessment, psychosocial assessment of caregiver and child, infant mental health assessment, developmental evaluation, neurodevelopmental evaluation and school/daycare observations. The infant mental health assessment is used to assess the caregiver-child

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

relationship, develop a plan of intervention and work with the caregiver and child to improve the caregiving relationship.

DCFS provides the necessary care and supervision to promote child well-being while seeking the best permanency option for the child. One of the ways in which the department does this is by limiting the number of children placed in foster/adoptive homes. The placement of a child in a foster/adoptive home is dependent on the type of certification, space within the home, number and ages of biological children within the home and the abilities and responsibilities of the foster/ adoptive parents.

Among the DCFS certified foster/adoptive family homes, there are specialized family homes which are required to meet or exceed the Department's minimum requirements for family foster homes. They are required to possess or develop skills and abilities, which enable them to provide specialized care to a specific category of children. Because of the specialized services required by some children, foster/adoptive parents are required to adhere to certain restrictions regarding the age range, number, and extent of the special needs of the children placed in the home. Except for homes certified to provide care for large sibling groups, specialized family foster homes typically have a maximum capacity of four children. Specialized foster parents certified to provide care for children with medical problems, handicapping conditions and/or developmental disabilities are certified for a minimum capacity of two children and a maximum capacity of four (age range can vary). Specialized recruitment efforts are employed when there is an identified need for a child of a particular age group or with a particular condition or disability.

The department's *A Journey Home* pre-certification training contains a child development component which focuses on separation and attachment, stages of development, impact of placement on children's growth and development; behaviors exhibited by abused/neglected children, discipline and behavior management. The DCFS foster parent handbook is provided to each foster/adoptive parent. Outlined in the handbook are the developmental milestones of a child, starting from infancy. The milestones are broken into the categories of infancy to six months, six to twelve months, twelve to eighteen months, eighteen to twenty-four months, twenty-four to thirty months, thirty to thirty-six months and then age three, four and five years.

Departmental policy requires case staffing reviews quarterly by supervisors and workers on each case in FC to require particular consideration in cases involving children ages five and under to insure the young child's developmental level is reviewed, appropriate services are provided, level of risk is thoroughly assessed, and appropriateness of concurrent planning.

The utilization of Teaming enables case managers and other team members to engage children, youth and parents/caretakers in the assessment and case planning process. Engagement of the family or youth is the most fundamental element of this process and it is critical to support change and achieve case plan goals. The DCFS Teaming approach is a collaboration of the case manager and youth/family team in understanding their situation, recognizing strengths, identifying challenges, making decisions, setting goals and

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

achieving desired outcomes. The parents/youth and their team determine the following for each case plan goal:

- Who will assist the parent(s)/youth;
- What actions are necessary;
- Initiation and completion timeframes for actions;
- How specific care needs of each child will be fulfilled in foster care.

Teaming practice for engagement and case planning with parent(s)/youth is a statewide practice. It is required throughout policy from initiation of casework to closure for every child in foster care. In the upcoming plan period, DCFS will be focusing on building the skill level of staff in Teaming with families, as well as expanding the policy requirements to ensure it is used in all Family Services cases as well as Foster Care. This area of work is part of the department PIP efforts to improve engagement of clients and community partners in achieving the case goals of families. Once the efforts in the two-year PIP are finalized, DCFS will continue to monitor Teaming practice through the CQI process and data review from the CCWIS system, which is expected to be in place within the same timeframe.

An adequate network of behavioral health services and supports is a critical component of the work, which will be occurring in the development of the service array during the next five years. This will be necessary to address the needs of children and their families to provide safe and nurturing home environments to maintain children safely with their parents. DCFS will continue to work closely with the LDH, which maintains responsibility and oversight of the network of behavioral health providers serving the state's Medicaid population. Network development is a recurring topic for ongoing discussion at monthly interdepartmental meetings between DCFS, LDH and the managed care health plans. Discussions focus on identifying barriers to and opportunities for improvement or other needed adjustments.

The department utilizes a variety of congregate care settings and treatment foster homes through private child placing agencies to provide services to children who have a history of and/or current patterns of emotional, behavioral, adjustment problems, family disturbance and may have serious physical and medical conditions. DCFS seeks to utilize programs highly specialized for child treatment, crisis intervention and stabilization. These children often have a history of chronic patterns of aggressiveness and violence against others, delinquency, self-injurious behaviors, non-compliance and depression. Most have experienced multiple unsuccessful out of home placements and may have histories of substance abuse, psychiatric hospitalizations, homicidal and/or suicidal ideation and features of psychosis. They may have cognitive impairments or physical disabilities such as seizure disorder, diabetes, or communicable diseases.

DCFS moved to a two-tiered rate scheme to allow providers to tailor supervision and resources to ensure the safety and well-being of children in Child Residential Care and Therapeutic Foster Care. Children who present with greater needs for supervision and behavior management are referred for care at these levels. Examples of these needs include, but are not limited to, children and youth who present with acute behavioral health

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

challenges, developmental or medical condition(s); aggression towards peers; aggression towards authority; property destruction; elopement risk; tendency to self-harm when unsupervised; actively or history of being sexually aggressive; involvement in human trafficking; and, criminal activity. Providers use the rate adjustment to accommodate adjustments to their staffing and training structures, and to ensure appropriate care for youth with greater needs.

Additionally, DCFS is working with AECF to modify the decision-making processes surrounding congregate care utilization. There have been extensive staffing changes and policy development regarding assessment of each child's network of connections and placement options considering the child's current functioning. It is a stratified process, which is expected to decrease the number of children in congregate care settings, and decrease the number of days spent in congregate care settings when these settings are used to meet a treatment need for a child. As this new process is implemented in the upcoming SFY, there will be evaluative processes put in place to measure the effectiveness of the changes. This evaluative process will be used to guide changes as needed to improve service delivery to children and youth.

DCFS conducts monthly scheduled psychopharmacology consultations with OBH representatives, a Board Certified Child Psychiatrist and DCFS staff on children in foster care identified as being outside of recommended psychotropic medication parameters. This service is provided to meet the individualized needs of children in foster care, statewide. The service provides for the oversight and safe, effective use of psychotropic medications by children in state custody. The service is accessible statewide by phone. Services address individual situations of the referred children. These services are planned for continuation into the new CFSP period.

DCFS has numerous methods to obtain stakeholder feedback and participation in the development and delivery of the service array. These efforts are accomplished in part through the DCFS external advisory board, the DCFS internal advisory committee and the CW CQI process.

The external advisory board advises the Secretary on many issues including operations within the department, service delivery structure and departmental performance. Members of the advisory board include children's advocates, community partners, foster parents, legislators, judges and community leaders. The advisory board has provided recommendations on communications and strategies for advancing DCFS in the community and legislature. They have worked with the department to engage foster parents and make recommendations for assisting youth in care and aging out of foster care.

The internal advisory committee is comprised of advocates, grandparents, foster parents and employees. This committee advises the Secretary on operations within the department, policy, service delivery structure, departmental performance, and employee satisfaction. Within the committee, there is a CW Workgroup meeting regularly to provide on-going specific recommendations to improve employee performance, to enhance morale and create specific policy changes to serve the children and families in Louisiana. These

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

recommendations are provided to the Secretary and executive leadership for consideration and implementation.

DCFS is committed to creating a safe and affirming environment where all young people can thrive, no matter their sexual orientation or gender-identity expression. All offices of DCFS are committed to promoting awareness and helping make sure, all of our services are affirming of LGBTQ (lesbian, gay, bisexual, transgender, and questioning) youth and families.

The Department encourages foster caretakers and residential providers to be sensitive to all of the needs of youth in foster care and to refrain from projecting personal biases onto the youth. Youth who express an interest in purchasing clothing indicative of their identified gender are allowed this choice. Youth who identify as LGBTQ are allowed the same opportunities to participate in age and developmentally appropriate activities as other youth.

DCFS will continue to collaborate with OJJ Interstate Compact on Juveniles to manage youth runaway situations for youth in foster care both from Louisiana and from other states found in Louisiana.

The Dave Thomas Foundation for Adoption awards Wendy's Wonderful Kids (WWK) Child Focused Recruitment Program grants to public and private adoption agencies to hire adoption professionals who implement proactive, child-focused recruitment programs targeted exclusively on moving America's longest-waiting children from foster care into adoptive families. Currently, DCFS has eight full-time recruiters and one supervisor managing all nine regions of the state. Recruiters are allowed to recruit for children with the goal of Another Planned Permanent Living Arrangement (APPLA). This program is targeting increasing adoptions for hard to place children and youth. The model provides for this service to be available to all children in custody, throughout the state. The child focused recruitment model allows for individualizing the child's specific needs to locate a permanent caregiver for the child.

Louisiana Kinship Navigator Program (LA-KNP): In October 2018, Louisiana DCFS was awarded an initial grant from the Administration for Children and Families to develop a Kinship Navigator Program. DCFS is working with stakeholders to develop a sustainable service network to support kinship caregivers. The overarching goal of a kinship navigator program includes assisting kinship caregivers in learning about, finding and using programs and services to meet the needs of the children in their care. It is intended to support accessing services for their own needs and to promote effective partnerships among public and private agencies to ensure kinship caregiver families are served.

To inform the development of our kinship navigator program, a steering committee comprised of DCFS staff, kinship caregivers and other community stakeholders was created. To guide development work, focus groups were held across the state and surveys administered to identify the specific needs and experiences of relative caregivers as well as gather demographic data on the families providing care to relative children.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The greatest needs identified through these processes by kinship caregivers included financial assistance, expedited foster home certification for families with children in state custody, child care assistance (for those with preschool children), assistance in addressing behavioral or mental health needs of the child, access to legal information, and parenting education/child development information. Based upon these findings, the department has prioritized development of the following services and supports to kinship families, which will be underway in the upcoming CFSP plan period:

- 1) Collaborating with LA Methodist Children’s Home, a licensed child-placing agency to train, assess, and expedite certifications of kinship families providing care to children in state custody. As families reported certification timeframes of several weeks to several months during the focus group meetings, this expedited process seeks to complete family certifications within 45 days and provide 90-days of support after initial certification. This strategy will ensure kinship families receive necessary initial training and information soon after placement of the children in their home, as well as, financial assistance through foster care board payments.
- 2) Addressing the cited issue and need for legal information by kinship caregivers, the Pelican Center for Children and Families and DCFS will conduct research and develop legal resource information guides, fact sheets, and a legal training curriculum to be available to kinship caregivers regardless of their involvement or connection to DCFS.
- 3) Developing updated Kinship Caregiver Information Guides. This provides kinship caregivers with basic information on kinship care; available federal and state financial resources for which they may be eligible; and, directs them on how to access local community resources for information or assistance.
- 4) Collaborating with LA 211 to determine services available to expedite access to needed information by kinship caregivers.
- 5) Securing access to national kinship-care resource material and information through the KINCARE Today magazine to provide this information to kinship families and DCFS staff and family resource centers assisting those families.
- 6) Updating the DCFS website to provide additional kinship information to assist families while further exploration of a stand-alone Kinship Navigator website takes place.

**LA-KNP Update FFY 2021:** Louisiana’s Kinship Navigator Program continues to develop and is currently serving kinship families at both targeted and statewide levels. Through contracted services with private, faith-based and non-profit organizations, Louisiana is currently providing the following services:

- Statewide availability to families seeking kinship resource information through a toll free hotline #211 and thru text messaging at 898-211. This resource is available 24 hours a day providing any kinship callers with information and resources available in their area specific to their indicated need or request.
- Kinship caregivers who have recently begun providing care to children in foster care may receive expedited foster home training and certification thru home study and

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

assessment services provided via Louisiana Methodist Children’s Services. Ninety-day post certification support is provided to families to assist them in the short term following placement/certification. Services are available to families in regions seeking to remove delays in timeframe to certification. Currently kinship families in 7 of the 9 regions of the state are receiving expedited foster home assessment and support services.

- Kinship caregivers providing care to children in foster care are eligible to receive needs assessment, referrals, and services statewide thru the Family Resource Centers across the state. Although in its’ infancy, the services available include assessments, short-term services, case management and information and referral services. The goal is to expand to provide access to all kinship families regardless of foster care services within the next two years statewide.
- A legal guide for all Kinship caregivers has been created with hard copies and digital copies available through community support organizations, child welfare offices and the state child welfare website.
- Kinship Caregivers and Stakeholders are able to access information about the Kinship Navigator Program on the DCFS website connecting them with resource information and access to financial assistance programs.

Louisiana’s Kinship Navigator Program is being led by agency personnel as well as contracted staff who provide oversight as well as leading a Kinship Steering Committee. The steering committee is comprised of representatives of community organizations providing kinship services, kinship caregivers, stakeholders representation education, incarcerated families, health services, and more. Efforts continue to expand stakeholder group to include greater kinship caregiver representation and former kinship youth. Through the involvement of these stakeholders in the steering committee, foundations for ongoing collaboration and engagement of community organizations will provide the support to ensure identification, access, and service delivery to families across the state. As a final component in our program, development of an evaluation model continues through consultation with contractor and community organizations. The program is currently seeking out information on other evaluation models to meet the requirement set forth by programmatic instruction.

**LA-KNP Activities Planned FFY 2022:** The Kinship Navigator Program will continue to serve as an information and referral network for kinship caregivers who are providing full time care to children other than their own. The Kinship Navigator Program will continue to expand services and resources and invite community partners, faith based organizations, and other community organizations to collaborate and provide supports to kinship families. 2-1-1 will continue to serve as the statewide toll free number at which relative caregivers can request information or resources to assist their family.

**G. AGENCY RESPONSIVENESS TO THE COMMUNITY**

**State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR:** In implementing the provisions of Louisiana’s Child and Family Services Plan (CFSP) and developing related annual reports, DCFS CW engages in ongoing consultation with the state’s four federally recognized Native American tribes, consumers, service providers, foster care

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

providers, the juvenile court, and other public and private child and family serving agencies. The major concerns of these representatives are reflected in the goals, objectives, and annual updates of the CFSP. The department works closely with management staff, front-line staff and community partners to ensure goals from the CFSP are met. Concerns regarding performance measures and issues brought forth at both the statewide and regional level are addressed in the Improvement CQI meetings or other regularly scheduled meetings. Departmental staff, community partners, and stakeholders work to improve service delivery by assessing current processes to determine the root causes of areas requiring improvement. The achievement of safety, permanency, and well-being is a primary consideration in ongoing efforts to continuously improve, learn, and adjust to accommodate the needs of the children and families of the state. Though not a comprehensive list, the partnerships detailed below represent efforts to be responsive to the community.

**Tribal Representatives:** There are four federally recognized Native American tribes in Louisiana; they are the Chitimacha, Coushatta, Tunica Biloxi and Jean Band of Choctaw Tribes. The DCFS State Office foster care staff provides Annual Progress and Service Report (APSR) documents to the tribal representatives for their input and review. Annual meetings between federal, state and tribal partners are held to discuss collaboration, planning and service delivery between the state and tribes. Local working agreements continue to be in place through tribal contact with the Area Directors. Copies of the agreements are maintained in State Office. DCFS state office Foster Care staff maintain quarterly contacts with all federal tribes in Louisiana. The tribes are made aware of any procedural/policy changes regarding the Indian Child Welfare Act (ICWA) regulations. The department has designated a tribal liaison for the federally recognized tribes. DCFS Child Welfare staff invite the tribal representatives to quarterly Continuous Quality Improvement (CQI) stakeholder meetings. The Department provides the tribes notice of all DCFS trainings statewide, as well as local foster parent recruitment and training activities.

**Louisiana Elite Advocacy Force (LEAF):** DCFS staff facilitates the LEAF, which is comprised of youth in care working toward independent living, and youth who have aged out of foster care. Through ongoing quarterly statewide LEAF meetings, communication is maintained and feedback is obtained from the youth. Regional LEAF meetings are held at least monthly.

**Open Table:** The department implemented a mentorship model, “Open Table”, which offers a long-term relationship and guidance from community based volunteers interested in working with the youth aging out of foster care. Initially, there were two tables serving youth in Monroe and two in Baton Rouge. Currently, there are seven tables serving youth in the Shreveport/ Alexandria/ Monroe regions, and six tables serving youth in the Covington/ Orleans/ Thibodaux regions. Further development of this program in other communities is planned in the upcoming CFSP timeframe.

**Juvenile Courts:** The working relationship between the department and juvenile courts continues to vary by region. An enormous cooperative effort among local courts, juvenile courts and state and parish agencies is required to comply with state and federal mandates. The department’s management level staff maintains ongoing communication and/or collaboration

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

with the juvenile court judges. Some of the judges from the Louisiana Family and Juvenile Court Association meet quarterly with the DCFS Secretary and CW Assistant and Deputy CW Assistant Secretary. The judges set the agenda for the meetings. The program improvement activities and challenges from judges and DCFS are discussed.

**Citizen Review Panels (CRP):** Louisiana has three Citizen Review Panels (CRP). The goal of each panel is to provide an opportunity for citizens to promote positive change for the safety and well-being of children. The panels meet, on a minimum, quarterly to discuss specific policies/procedures and in some instances, specific cases. The panels prepare an annual report, which is submitted within the state's APSR.

**University Alliance:** The DCFS collaborates with public universities' Schools of Social Work through an alliance of Louisiana universities. The members of the alliance include Southeastern Louisiana University (lead), Northwestern State University, Southern University Baton Rouge, Southern University New Orleans, Grambling University, Louisiana State University Baton Rouge and University of Louisiana at Monroe. The University Alliance collaborates with DCFS through the Louisiana Child Welfare Training Academy (LCWTA), as well as the Pelican Center of the CIP to provide training opportunities for DCFS staff, federally recognized tribes and other partners. These community stakeholders work to achieve the following:

- Improving the quality of court hearings to ensure children, foster parents, relative caregivers and pre-adoptive parents participate in court hearings;
- Improving safety decision-making across systems by educating and training stakeholders on the principles of advanced safety decision-making;
- Developing policy to support DCFS CW employees pursuing a Master of Social Work degree;
- Standardizing procedures for recruitment/selection of Title IV-E CW stipend recipients.

**Faith-Based Community Collaboration:**

The department works with the faith based community in a variety of ways:

- Recruiting families willing to foster and adopt;
- Retaining and supporting certified foster/adoptive families; and
- Creating an atmosphere of shared responsibility resulting in, overall, improved child well-being outcomes for children and youth in the foster care system.

As part of this work, DCFS has a cooperative agreement with the *Louisiana Baptist Children's Home (LBCH)* located in the Monroe region. The LBCH recruits, certifies and supports foster/adoptive families statewide. These partners have participated in the new foster parent pre-service work group and assisted in the development of the new orientation presentation, which is based upon the Quality Parenting Initiative (QPI).

*Crossroads NOLA* is a faith-based organization affiliated with the Louisiana Baptist Association. This organization continuously works to help the department bring an awareness of foster care and adoption to the community. They have provided recruitment, training and support services to foster parents in Orleans and Covington regions.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Crossroads NOLA helps DCFS partner with Texas Christian University (TCU) Institute of Child Development to provide Trauma and Trust Based Relationship Intervention (TBRI) training.

*Healing Place (HP) Serve* of Baton Rouge, now known as Empower 225, is a faith-based organization affiliated with Healing Place Church. They collaborate on various projects, such as human trafficking, transitional living for youth aging out of foster care, homeless youth and foster parent recruitment/support. Empower 225 assists with photographing children awaiting adoption and maintaining a statewide Louisiana Heart Gallery (LHG). Children are videoed by America's Kids Belong (AKB) in partnership with the LHG. The videos are posted on AdoptUsKids, DCFS and LHG's websites. Empower 225 hosts the Statewide Adoption Exchange meeting. The exchange meeting allows Adoption and Home Development staff (statewide) an opportunity to meet in one place to present certified families and children awaiting adoption in hopes of making potential matches.

*Louisiana Methodist Children's Services* collaborates in a variety of work efforts with the department, including but not limited to: a Psychiatric Residential Treatment Facility; a Treatment Foster Care program; Chafee Foster Care Independence Program services in four regions; and, development of the Foster Parent Support Organization.

**Agency Responsiveness to the Community Update FFY 2021:** DCFS is fully committed to strengthening partnerships with families and stakeholders. DCFS remains committed to working with our partners in a respectful, transparent manner. Our relationship with foster caregivers is especially critical to meeting the needs of children in state custody. The department implemented the Quality Parenting Initiative (QPI), which emphasizes collaboration between the department, biological parents and foster parents to best meet the needs of children while they are in foster care.

Louisiana Elite Advocacy Force (LEAF): DCFS supports the LEAF youth advisory board by connecting with them a minimum of monthly. The contact often occurs more often as there are multiple sub-committee meetings held during the month in addition to continued conversation over the GroupMe app, which DCFS started to use this last year with the board to increase communication. DCFS assists the board in planning monthly board calls, and quarterly leadership retreats, board workday meetings and board lunch meetings. In total, the board meets face to face each month in one of the formats listed in addition to having monthly calls. The three committees developed last year continued work. The Policy Committee continues to work on developing a Capitol Day for youth during the legislative session as a multi-year goal. The second committee developed focuses on state board structure, roles, rules, processes, recruitment, and training. This group has accomplished a great deal of work in this area including completely re-vamping the board structure, processes, and plan for support and sustainability. The third committee has focused on placement stability for youth in care. They have planned their work for the next couple of years to address youth voice in placement, youth inclusion in foster parent training and development, and a match process for youth being placed in foster homes. DCFS has supported the board this year and continues to support them in developing their

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

website and material as they grow. The board has been connected to multiple community partners that support their leadership and advocacy.

For updates on the Citizens Review Panel, please refer to the CAPTA portion of the plan.

For updates on the University Alliance, please refer to the Systemic Factors/Training portion of the plan.

Crossroads NOLA teamed up with DCFS in doing a *3-Day Bags* project, which enabled churches, small groups and organizations looking to provide services for their community to donate essential items for children entering foster care. Crossroads met their goal of over 380 bags for round one of this project. Crossroads NOLA held several virtual Foster Parent Information Meetings, which aided in educating the public on the steps to becoming a foster parent and Crossroads NOLA hosted Trust-Based Relational Intervention (TBRI) courses online providing continued educational hours for foster parents.

**Agency Responsiveness to the Community Activities Planned FFY 2022:** The DCFS will continue to collaborate with stakeholders noted above and throughout this plan to achieve safety, permanency, and well-being for children and families and for the Department to continuously improve, learn, and adjust to accommodate the needs of the children and families of the state.

LEAF will continue to meet monthly through their multiple meetings. LEAF will plan a foster youth day at the capitol for upcoming sessions. LEAF will create a Foster Youth Bill of Rights to be presented to legislation for approval.

For activities planned on the Citizens Review Panel, please refer to the CAPTA portion of the plan.

For activities planned on the University Alliance, please refer to the Systemic Factors/Training portion of the plan.

**Child Death Review Panels:** Through a data sharing agreement, DCFS provides LDH with data regarding child deaths in Louisiana. LDH secured a grant for prevention of violence and injuries, which will allow for a shared epidemiologist between DCFS and LDH to review data to improve outcomes for children. There is a Child Death Review Panel (CDRP) within each of the nine regions. DCFS participates on the panel. The LDH/OPH leads the CDRP meetings. Discussions are held to ensure all suspected cases of abuse/neglect are reported to DCFS. The CDRPs throughout the state have participation of various Coroner's Offices, law enforcement, medical providers and other state and local entities. DCFS plans to continue to strengthen the collaborative partnership with members of all Child Death Review Panels to encourage data sharing and ultimately increase the amount of data available from multiple resources in NCANDS reporting.

**Child Death Review Panels Update FFY 2021:** Strong partnerships continued with the Louisiana Child Death Review Panel, which allows the sharing of case information from

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

multiple sources to inform case decisions and assessments. Louisiana's Child Death Review Panel includes, among others, Louisiana Department of Health, Louisiana State Police, representatives from the Office of Vital Statistics, the Louisiana Coroner's Association, the Attorney General's Office, State Fire Marshall, Louisiana District Attorney's Association, Louisiana Sheriff's Association, Louisiana Association of Chiefs of Police and a pediatrician. Local level panels include representatives of several agencies. Highlights of how this partnership informs fatality data include:

- Quarterly Child Death Review Panel meetings held in each of the nine regions across the state to review all unexpected child deaths for children under age 15;
- Quarterly state level Child Death Review Panel meetings to review systemic issues and develop strategies to prevent and reduce child fatalities;
- Assignment of a DCFS regional liaison and Office of Public Health Child Death Review Panel coordinator who work together to ensure the sharing of case information to inform decisions;
- Passage of legislation in 2016 that authorized the Child Death Review Panel to have access to any DCFS information pertinent to alleged child abuse or neglect; and authorized DCFS to have access to all information/documents in the possession of the Child Death Review Panel.

**Child Death Review Panels Activities Planned for FFY 2022:** Louisiana plans to continue to strengthen its collaboration and data sharing agreement with Child Death Review Panels, and to ensure child abuse/neglect cases are reported to DCFS to improve outcomes for children and families.

#### **H. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT AND RETENTION**

**Certification:** DCFS Child Welfare Home Development (HD) Program is responsible for recruiting, certifying and re-certifying foster and adoptive family homes to meet the placement needs of children in the Louisiana foster care (FC) system. These homes are required to meet the department's prescribed minimum licensing standards for the health, safety and well-being of children in foster care and children who are available for adoption. Families are dually certified to foster and adopt. The certification process includes a home study, pre-service training and mutual assessment. The re-certification process involves assessing whether the home continues to meet licensing standards, providing support to the family, and addressing any identified issues or concerns. Families are re-certified annually or every three years. There are various types of family homes; each requiring a particular level of expertise and skill necessary to meet the care needs of the child placed in the home.

Information about certification is available on the DCFS website to assist interested individuals in determining whether becoming a certified foster/adoptive family is appropriate for them. Individuals who are interested in becoming certified can complete an intake inquiry on-line and submit it via a designated provider portal. Applicants can submit the foster/adoptive parent application via CAFÉ, and foster/adoptive families can update their profiles (address, phone/cell number, email address, etc.).

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Home Development is in the process of revising the Foster Parent Handbook with the assistance of AECF to incorporate QPI principles and other information related to recent programmatic changes such as the Extended Foster Care program.

The DCFS uses the Louisiana Adoption Resource Exchange (LARE) subsystem of the Tracking, Information and Payment System (TIPS) to maintain foster/adoptive parent certification data such as date of inquiry, orientation, application, clearances, training sessions, certification, closure, capacity, and age range of children served by the home. In addition to the information tracked in LARE, each region submits a monthly regional statistics log to state office. The log captures number of newly certified foster/adoptive families, number of closures, total number of available homes, number of newly certified child specific homes, number of closures, total number of child specific families, and combined total number of foster/adoptive and child specific families. The information from the statistics log is summarized in a statewide internal tracking document. This tracking document provides a means to compare regional data and assist in determining how the regions are progressing toward increasing the overall number of certified families and meeting regional recruitment/retention goals. All of this information recording, tracking, and reporting information will be included in the CCWIS system.

Regional HD recruitment/retention plans include an annual needs assessment (demographics and placement needs of children within the region), goals/objectives, method of recruitment (general, targeted, child specific), orientation/pre-service training schedule, and the recruitment budget. The region's annual plan is used to review and/or monitor the following:

- Identified placement needs;
- Types of available homes;
- Strategies for increasing the number and types of foster/adoptive families; and,
- Results/outcomes.

One of the overarching and consistent goals of the HD program is to have a continuous increase in the overall number of certified foster/adoptive families. In an effort to meet this goal, there is a targeted goal of a 2% statewide increase of families annually.

**Recruitment:** Recruitment is a joint departmental and community effort. The HD staff is responsible for taking the lead in recruitment related activities. There are three types of recruitment methods: general, targeted and child-specific. General recruitment is designed to educate the community about the purpose, goal, policies/practices of the agency regarding foster care/adoption; the types of homes needed to provide temporary/permanent placements for children in care; and certification requirements. Targeted recruitment is a community-based approach to seek out potential foster/adoptive families reflecting the ethnic and racial diversity of the children in need of foster/adoptive homes. Child specific recruitment is used to bring about awareness within the community about the placement needs of a specific child and/or sibling group who are available for adoption but have no identified adoptive resource. Child focused recruitment is the recruitment method used by the Wendy's Wonderful Kids (WWK) recruiters. In child-focused recruitment, the recruiters build relationships with the child and the child's network in order to find a "forever-family" best fitting the child's needs. Recruitment plays a vital role in the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

achievement of permanency for children awaiting adoption. The regions throughout the state do general recruitment through community events based on a review of AFCARS data. HD staff will develop a plan to review AFCARS data quarterly to assist the regions in developing recruitment plans targeting the foster parents needed to care for the children/youth in care in that area.

**Retention:** Retention is another important aspect of the certification/re-certification process. The retention of certified foster/adoptive families involves two processes: working with foster/adoptive parents as partners in permanency planning; and, providing families with identified support services. HD staff conduct support visits in the homes of certified foster/adoptive parents. Other methods utilized to retain foster/adoptive families include: annual selection of a foster/adoptive parent(s) of the year; foster parent appreciation month; meetings between executive management and foster parent associations; participation of foster parents in trainings offered by LCWTA; provision of support services through the Louisiana Foster Parent Support Organization; and, encouraging foster/adoptive parents' participation in the CQI process. Louisiana's goal is to engage and strengthen support of foster families in an effort to improve the retention of foster/adoptive homes.

DCFS in partnership with the LCWTA developed training specifically for foster parents based on data collected in a survey conducted by Dr. Cori Hebert of LSU. A three-year plan was created which will be provided for all foster parents. In the first year, all current foster parents have to complete the one day of A Journey Home training (an overview of the new foster parent pre-service curriculum), three hours of cultural competence training and two hours of Foster Parent's Roles and Responsibilities training. In the second year, foster parents take three hours of training on Trust Based Relational Intervention (TBRI), three hours of training on Lesbian, Gay, Bisexual, Transgender and/or Questioning (LGBTQ) individuals, two hours of QPI and three hours of Working with Substance Addicted Parents. In the third year, foster parents take at least three trainings from the listed topics, such as Substance Exposed Newborns (SEN), Juvenile Trafficking, Understanding Girls, LGBTQ-Advanced, Foster Parent Grief and Resilience, and Mental Health. All foster parents are asked to complete evaluations of trainings so DCFS and LCWTA can understand what other training opportunities are needed and the effectiveness of the current trainings.

The LCWTA is currently working with QPI National to develop a contract so all DCFS foster parents and staff will have the ability to view trainings offered through QPI's "Just in Time" training library. "Just in Time" offers multiple online training on different child welfare topics.

**Standards Applied Equitably:** DCFS policy ensures foster/adoptive applicants meet prescribed minimum standards for the safety, health and well-being of children entering foster care and adoption. In cases where families do not meet a particular licensing or agency requirement, the home may be certified with a licensing waiver or policy exception under specific circumstances (as outlined in departmental policy). The waiver requests were for the following requirements: marital status, age, medical, case clearance (valid), fingerprints, criminal, bedroom space, and safety fire inspection.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

QPI has been implemented in each region of the state. To date, the regions have developed committees to develop trainings for foster parents around court processes; judges in two jurisdictions are holding informational meetings with staff to increase partnership between the court and staff. In one court jurisdiction, a judge created a form for foster parents to fill out so they could update the court about the child and the case without having to be present. All regions have implemented a practice referred to as “Comfort Calls” by which calls are being made to birth parents when a child is initially placed into a foster home at the time of removal. All parishes have implemented Icebreakers. These are meetings between the birth parent, foster parent, worker and child (if appropriate). They are three to seven days after a child is placed in a foster home. The purpose of the meeting is to discuss the child and their needs. With both Comfort Calls and Icebreakers, the department will be working in the upcoming year to develop practice that is more consistent across regions, and improve the quality and integration of these practices into the work with children and families.

Additionally, HD has been involved in the Child Placing Agency Licensing Workgroup to revise licensing regulations. The workgroup is looking at modifying some of the regulations. HD is working with AECF to generate new ideas and develop a strategic plan for development of more foster/adoptive home resources.

**Requirements for Criminal Background Checks:** The regional HD Units ensure criminal background clearances (CBC) are conducted on individuals interested in providing care and supervision of children placed in state custody. CBCs are conducted on all household members 18 years and older. This is a safety requirement for all certified homes. Children are not placed in homes or kept in situations where a positive criminal clearance cannot be achieved for their caregiver for certified homes. If criminal clearances cannot be positively updated for existing certified homes, the homes are closed.

The HD section in State Office completes a regular review of Home Development records. These quarterly reviews are reported every six months. Records for review are randomly selected and five records are reviewed for each region, totaling 45 records reviewed statewide each quarter. Items in the review instrument address CBCs and State Central Registry (SCR) case clearances.

DCFS policy was updated to be in accordance with R.S.15:587. Policy now states “A national criminal record clearance shall be requested from the Louisiana State Police by DCFS Child Welfare on any foster and adoptive parent applicant and adult member of foster and adoptive parent households; parents whose children have been removed from their custody; parents or caregivers involved in investigations of abuse or neglect; potential caregivers of a child who is either in the custody of the department, is the subject of an investigation of abuse or neglect, or is or has been receiving services through the office of children and family services; potential employees of the department whose duties include the investigation of child abuse or neglect, the supervisory or disciplinary authority over children, direct care of a child, or performance of licensing surveys; and individuals employed directly or indirectly by institutions or facilities providing, or with the potential

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

of providing care and supervision to any child or youth in the custody or under the supervision of the Department. DCFS will complete these national criminal background clearances on the above noted individuals and for OJJ contracted childcare institution staff as well as DCFS contracted childcare institution staff through fingerprint based scans using LIVE SCAN equipment located in DCFS offices around the state.”

**Diligent Recruitment of Foster and Adoptive Homes:** DCFS regional HD units develop and implement annual regional, written recruitment/retention plans according to the Department’s recruitment and retention plan policy guide. The regionally proposed plans are approved by the Area Directors and forwarded to the state office HD Section. Louisiana uses the Developing Recruitment Plans Toolkit from the National Resource Center for Diligent Recruitment. This has improved the needs assessments used to determine the demographics, needs, and placement requirements for the children in each parish and expanded it to include comparison of the data regarding current certified foster parents. A comparison of the children in care to the certified foster families allows for a much more accurate view of the specific types and locations of homes needed. The plans include goals and objectives in recruitment of additional resource families for targeted areas of need, retaining and supporting currently licensed families, and responding to and retaining prospective resource families during the inquiry to licensing phase of the process. The plans detail methods of recruitment, in addition to action steps, periods, persons responsible, and outcomes. Each specific recruitment method identified in the regional plans is linked to the data regarding children in foster care and certified foster parents. These plans are reviewed quarterly along with updated data to determine continued accuracy.

DCFS collaborates with the faith-based community to assist in the recruitment of foster parents who believe in the QPI philosophy. DCFS has included in the updated recruitment plans for many regions to utilize their current foster parents as recruitment resources by having them co-train and speak in the pre-service training classes and orientations. The foster parents chosen to speak are those accepting or having experiences with the group of children recruitment is needed for within the area.

Through expansion of the WWK program, the State now has a recruiter for every region. The recruiters target recruitment efforts for children with the goal of Another Planned Permanent Living Arrangement (APPLA). The goal of this work is an increase in adoptions for hard to place children and youth.

DCFS now provides a two-tier rate adjustment for Therapeutic Foster Homes. This initially served as a mechanism for more adequate reimbursement of foster caregivers for the level of care necessary to meet the needs of the department’s most medically, developmentally and/or behaviorally challenged children. A recruitment tool was developed regarding specialized homes for specific populations of children requiring specialized care. Efforts are underway by DCFS to recruit additional TFC homes to serve children who have development delays, have been involved in sex trafficking, identify as LGBTQ, have serious conduct/behavioral issues, are older youth, and youth who have a history of sexual aggression.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

DCFS has established a statewide **Foster Care Support Organization (FCSO)**. This organization oversees foster care support in all nine regions. The scope of work includes the state FCSSO working with already established local and regional foster and kinship care support organizations to develop services that are more comprehensive or working with community partners to establish foster and kinship-care support organizations in areas where there currently are no support organizations. Services will include monthly support groups for foster and kinship families; quarterly social events for children in foster care and the foster caregivers; developing and presenting in-service training for foster and kinship caregivers; developing a peer mentor program for foster and kinship caregivers; establishing a statewide communication system to disseminate support and training information to foster and kinship caregivers including a monthly or quarterly newsletter, and a website listing available resources; developing a conflict resolution process for foster and kinship caregivers; and, assisting DCFS with recruitment efforts for additional foster families.

**Child Specific Recruitment:** The WWK model focuses on child specific recruitment for older youth and/or children who have been available for adoption more than one year, or for whom no permanent adoptive resource has been identified, or children age 12 and older who at the time of legal availability for adoption do not have an identified adoptive resource. The recruiters work in collaboration with DCFS adoption staff, the identified child and the child's foster parents and any other person significant in the child's life.

DCFS collaborates with the Louisiana Heart Gallery (LHG) to recruit adoptive homes for children who are freed for adoption in the state of Louisiana. They photograph and video children who are freed for adoption. The photographs are displayed at events throughout the state and the videos of the children are shown at the adoption session of the foster parent pre-service training, as well as at different events throughout the state.

**Louisiana Fosters:** This is a statewide network created by the state's First Lady in partnership with DCFS. It links government, faith, nonprofit, business and service communities in support of foster parents and children. The website is [www.LouisianaFosters.la.gov](http://www.LouisianaFosters.la.gov). The state and community resources that support children in foster care and the families caring for them are maintained on the website and the DCFS liaison ensures accuracy of available resources through ongoing contact with regional DCFS staff and community partners. Resources include an organization that meets immediate needs of foster parents and the children they serve such as donations of furniture or school supplies, as well as providing funding for children to participate in extracurricular activities as a part of normalcy. Organizations can provide support services such as tutoring for a child or training in a pertinent area for foster parents, etc. The website connects to the DCFS website for information on fostering and adopting a child. The First Lady hosts an event each year where organizations and community members are invited to the Governor's mansion in an effort to recruit additional support services for children and families. Louisiana Fosters plans to support a new initiative this year to develop more foster caregivers for teens. The goal of Louisiana Fosters is to develop a resource network across

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

the state to provide the kinds of supports foster parents need to ensure stability and services for the children and youth in their care.

**Cross-Jurisdictional Resources for Permanent Placements:** Louisiana has put in place a process for the effective use of cross-jurisdictional resources to facilitate timely placement for waiting children. The ICPC database is used to track overdue home studies, and colleagues in other compact offices are cooperative when inquiries are made regarding pending studies. However, there are concerns about delays in achieving permanency for children with cross-jurisdictional resources. Some contributing factors include staff retention, training of new staff, high caseloads, licensure of relatives by some states and a low priority assigned to interstate home studies. A strategy to minimize delays in placement is implementation of the National Electronic Interstate Compact Enterprise (NEICE), which would streamline and enhance the ICPC business process by electronically exchanging data and documents from one state's jurisdiction to another. To minimize placement delays with parents, a provision in Regulation 2, "Public Court Jurisdiction Cases" adopted by AAICPC allows the court to place children with the non-offending parent and terminate jurisdiction without invoking the compact. Another strategy for minimizing delays in permanency can include expanding the use of "purchase of service" contracts for home study completion across state lines. Privately licensed agencies typically have lower caseloads than public state agencies, and require a shorter timeframe to complete home studies.

**Diligent Recruitment of Foster and Adoptive Homes Update FFY 2021:** DCFS continued to collaborate with Dr. Denise Goodman through 2021 regarding child-specific recruitment and retention plans tailored to fit the region's need for certain types of foster/adoptive homes; however, this work was delayed due to COVID and the hurricanes in 2020. Much of the work continued but was adapted virtually.

DCFS continued to collaborate with Empower 225, Crossroads NOLA and Louisiana Baptist Children's Home to recruit and train foster parents in faith based settings virtually. DCFS continued to collaborate with the Foster Care Support Organization (FCSO) to serve the needs of each tri-region and oversee foster care support virtually in all nine regions. Collaboration continued with 211 to provide a one-stop resource line for Kinship Caregivers.

The HD section in State Office continued revising the Foster Parent Handbook including QPI, EFC and new licensing standards. The HD section revised Home Development policy located in Power DMS to include new licensing standards and all new initiatives of the Department.

**Diligent Recruitment of Foster and Adoptive Homes Activities Planned FFY 2022:** DCFS will continue to collaborate with Empower 225, Crossroads NOLA and Louisiana Baptist Children's Home to recruit and train foster parents in faith based settings. DCFS will continue to collaborate with the Foster Care Support Organization (FCSO) to serve the needs of each tri-region and oversee foster care support virtually in all nine regions. DCFS continues collaboration with 211 to provide a one-stop resource line for Kinship

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Caregivers. Methodist Children’s Home that provides oversight of the FCSO has implemented a Foster Caregiver Mentor program as a pilot in one region and plans to expand the program throughout the state over the next 24 months. For the mentor program, experienced foster caregivers are trained in DCFS policy and procedure as well as conflict resolution and TBRI to assist newer foster caregivers or foster caregivers’ experiencing difficult placements. The FCSO is continuing to work with community partners to establish support organizations in those areas of the state that are lacking in foster caregiver support some of which includes support groups, resource closets and meeting child-specific needs. DCFS continues to collaborate with Methodist Children’s Home in providing expedited certification home studies for relative caregivers and 90 days of one-on-one support upon certification of the families.

The HD section in State Office will continue efforts in revising the Foster Parent Handbook including QPI, EFC and new licensing standards. The HD section will continue revisions in Home Development policy located in Power DMS to include new licensing standards and all new initiatives of the Department.

DCFS will continue collaborating with the Louisiana Child Welfare Training Academy (LCWTA) to make updates to the three-year training plan for foster parents as new licensing requirements for

**Overview and Assessment of Recruitment and Retention: Data and Tracking of Recruitment and Retention:** The average number of certified foster homes in Louisiana will continue to be monitored and the data will continue to be tracked as it has been in the past (2014- 2018). For FFY 2014-2018 DCFS a goal of 2% was set to increase the number of new foster homes annually. This goal of a 2% increase over the previous year’s actual performance will continue through 2024.

FC/AD & HD Outcome Measures	Baseline (FFY 2018 data)	Year 1 – (FFY 2019 data)	Year 2 – (FFY 2020 data)	Year 3 – (FFY 2021 data)	Year 4 – (FFY 2022 data)	Year 5 – (FFY 2023 data)
	%	Improvement Goal (IG) & Actual Performance (AP)				
Increase number of new foster/ adoptive families certified	<b>*863 total</b>	<b>IG: 880 AP: 862</b>	<b>IG:879 AP: 632</b>	IG: AP:	IG: AP:	IG: AP:

\*Data Source WebFocus

Annually, each of the nine regions developed targeted recruitment plans based on regional data of their current foster families and numbers and ages of children in care. While families were being certified, it was noted not all regions had the numbers and types of

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

families to meet the needs of the children and youth in their regions. Most regions had an abundance of homes for children ages 0-5 and all regions were lacking homes for children ages 13-17. In the fall of 2018, the Annie E. Casey (AEC) Foundation began work with DCFS to review certified homes and increase targeted recruitment efforts across the state. In January 2019, each region completed a utilization review of all certified homes. The regions considered age ranges, family skills, had the families been active within the past 12 months, and the number of actual placements available. A review of the results revealed youth ages 12-17 comprised over 21% of the foster care population but only 5% of foster homes were certified to care for this age range. Sixty-one percent (61%) of foster families would accept only a child under five, while only 53% of our children are in that age range. More than 1545 African-American children/youth were in care with only 904 foster homes willing to accept an African American child or teen. One hundred fifty-nine (159) foster homes had not received a placement in over a year. In efforts to increase the types of homes needed to meet the specific needs of children and youth in care, all Home Development staff are being trained by an AECF consultant renowned in targeted recruitment efforts during the fall of 2019. Monthly phone calls with the AECF consultant to review progress will be held throughout the following calendar year with a goal of 15 % annual increase in the numbers of homes needed to meet the true population of children and youth in care.

Over the past five years, there has been an increase in the number of certified kinship families. Currently, 40 % of certified families are kinship families. In recognizing the importance of family connections, DCFS has prioritized these certifications and is working to increase support of kinship families by collaborating with a private agency to assist with certification and support of these families.

Other efforts of improving recruitment and retention of foster families include contracting with a private agency to develop and implement a statewide foster caregiver support organization. This contract is anticipated to begin in October 2019. This organization is tasked with developing and ensuring viable local support organizations will be available in all areas of the state by the end of calendar year 2020. The local support organizations will provide training, monthly support groups, quarterly family activities and peer-to-peer foster caregiver mentor programs for new foster caregivers or other foster caregivers needing extra support.

**Data and Tracking of Recruitment and Retention Update FFY 2021:** State Office Home Development (HD) continued to work with the regional HD units in efforts of improving recruitment and retention efforts. Monthly phone calls were held with the regions to monitor progress. Quarterly phone calls continued with the AECF consultant until work was complete in December 2020.

**Data and Tracking of Recruitment and Retention Activities Planned FFY 2022:** State Office Home Development (HD) will continue to work with the regional HD units in efforts of improving recruitment and retention efforts. Monthly phone calls will continue to be held with the regions to monitor progress.

**SECTION 3 – PLAN FOR ENACTING THE STATE’S VISION**

**A. GOALS, OBJECTIVES AND OVERALL STRATEGY FOR IMPROVEMENT**

The goals for accomplishing the DCFS vision during the five-year period 2020-2024 are organized according to the way DCFS has been addressing the themes through the state’s CFSP PIP. The noted problems in each area of the state’s PIP were the priority concerns and were the focus in developing the goals shown below.

**Goal 1: Quality Assessment**

Develop a unified assessment and decision-making model for DCFS, emphasizing family engagement, in order to improve child safety, reduce repeat maltreatment, ensure appropriate services, and achieve timely permanency for children. This goal was established to provide an assessment approach and corresponding terminology, emphasizing family engagement to be more reliable, cohesive, and easily understood by all stakeholders.

Objectives/Strategies to achieve goal: Workers will become more confident and competent in their ability to gather pertinent information, assess safety threats with consideration to parental protective capacity, risk of repeat maltreatment, and family strengths and needs. Assessments will lead to more accurate and consistent decisions regarding which children can be served safely in their homes, and which children must be temporarily removed for their protection. Case plans will be more focused on the vital services most likely to reduce threats and enhance protective capacities.

Attorneys and judges will receive sufficient case information and agency identification of safety threats and assessment of parental protective capacity so that fewer removals will occur. Assessments and services will improve and permanency for children will be achieved sooner. The workforce will be positively impacted because of a greater sense of competence in the day-to-day work with families, and ultimately, experiencing more positive outcomes for children and families overall.

**Goal 2: Workforce Development**

Through the Louisiana Child Welfare Workforce, enhance performance and practices to improve safety, permanency and well-being outcomes. This goal was selected because the pathway to improving outcomes for children and families is by improving Louisiana Child Welfare Workforce practices and supervisory knowledge and skills.

Objectives/Strategies to achieve goal: The Quality Improvement Center’s Workforce Development Project will implement Job Redesign and Teaming as an experimental design to improve Child and Family Outcomes. The job redesign included a comprehensive job analysis and process mapping to determine which tasks needed to be retained by the child welfare worker and which tasks could be assigned to a newly created professional position (Child Welfare Team Specialist, [CWTS]). The CWTS will work in close partnership with the child welfare worker, assuming those duties generally categorized as administrative, so the child welfare worker will be able to focus

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

on more clinical tasks. The Teaming concept encompasses the Prevention and Permanency units collectively working to meet the needs of children and families.

The Child Welfare Job Redesign along with the implementation of the Teaming approach will result in casework supporting client needs with available resources. The job redesign includes a specific focus on distinguishing between clinical and case management duties as opposed to clerical and administrative duties to make better use of staffs' skills. Child Welfare Supervisors and Caseworkers:

- Will have a manageable amount of work
- Be better able to focus on the tasks for their job level; and
- Their duties will better match their interests, knowledge, skills and abilities.

The Louisiana Child Welfare Department will incorporate a practice of increased quality visits with parents, children and families encompassing an ongoing assessment of safety in the care setting, parent protective capacities, child well-being and optimal permanency outcomes. Child Welfare staff and supervisors will have increased capacities in assessing parents/caretakers, children and families for safety, well-being and conditions for return. A tool will be devised to include essential Child and Family Services Review outcomes as a guide to improved practice. Child Welfare staff will be trained to utilize this tool in practice and to document information to coincide with CFSR requirements. This practice will improve the quality of visits, thereby improving child and family outcomes. The practice will be implemented in the three QIC-Workforce Development implementation parishes, monitored for performance improvement, then trained across the entire department of Child Welfare.

**Goal 3: Engagement**

Treat families and caregivers as important partners in case planning and service delivery so timely permanency is achieved and the well-being of children is ensured. Engagement in the Child Welfare system should begin at the first contact with a family. Group consensus in initial contact with families and caregivers is critical in building strong partnerships. The CW system must explore its attitudes, beliefs and biases when working with parents, children/youth, foster parents and relatives. This includes the examination of Systems Biases, which takes into account how policies and practices influence those biases. Objectives/Strategies to achieve goal:

The Child Welfare system (Child welfare, Attorneys, Judges, etc.) will adopt practices and values indicating awareness of trauma, ACES and cultural biases so that:

- Families will be valued as partners and foster care viewed as a temporary service to families.
- There will be early and ongoing engagement of parents and youth.
- There will be improved case plans, courts orders, and visitation (quality and frequency).
- There will be long-term improvements in permanency measures, due process for families and community view of the CW system.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Engagement practice goals:**

A. Early in new cases

- Positive “first system contacts” for parents and youth
- Identification of all parents
- Foster parent partnerships with parents to minimize trauma
- Early parent-child visitation
- Assessments will be fair and accurate, and
- All parties participate in case plan development

B. Ongoing

- Parent or youth will be involved in all relevant conversations and their voice will be valued
- Foster parent will be a partner to parent and case manager
- Case plans will be clear and will recommend individualized services, and
- Team assists with barriers to accessing services.

**Goal 4: Service Array**

Build the capacity of DCFS, legal stakeholders, and local communities to provide a comprehensive array of services and effective delivery of services which strengthens protective capacities of families to prevent maltreatment, repeat maltreatment and entry into care, shortens foster care stays, reduces trauma and placement disruptions and more restrictive placements, and supports the safety, stability, and self-sufficiency of Louisiana families and children. This goal was selected to result in a decrease in incidents of maltreatment, repeat maltreatment, entry into care, placement disruptions, fewer restrictive placements, and separation of children ages birth to 18 from their families due to abuse/neglect. Additionally, the duration of time in care to permanency for children experiencing removal will decrease.

Objectives/Strategies to achieve goal: The Court Improvement Program (CIP), legal stakeholders, and DCFS will collaborate with judicial leadership in four pilot sites. These sites include Caddo, Rapides, Livingston, and East Baton Rouge parish. These pilot sites will build the capacities of local communities by collaborating to provide a comprehensive array of services and a strategy for effective delivery of services. This will create a parish-wide organizational structure to gather data and information on available services, make referrals, connect families to services, and make needs and opportunities known. This initiative will include developing a replicable and evolving model of multi-generational care for service array work and delivery across the state that will include services not traditionally thought to fall within the child-welfare service array (i.e., mental health services, transportation, and ancillary legal matters). This will assist with preventative services possibly resulting in precluding the need for traditional child welfare services.

The CIP, legal stakeholders, and DCFS will take this a step further and organize a state-level leadership committee where parishes can share systemic barriers and state-level leadership can advocate for solutions. To equip caregivers and service providers to provide trauma informed care and evidence based services that address the adverse emotional, behavioral, and attachment issues arising from maltreatment or from removal of children

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

from their homes, the state level leadership committee will pursue partnerships. These partnerships will support the successful implementation of the service array strategies, build the capacity of the pilot sites to promote trauma informed parenting, care, and treatment, and develop new opportunities for training.

Partnerships will include publications and communications of existing services, trainings, and resources as well as coordination with the following: Casey Family Programs, the Louisiana Department of Education, Social Justice Equity, Office of Behavioral Health, Work Force Development, Chamber of Commerce, Louisiana Department of Health, Center for Evidence to Practice, Office of Public Health, Louisiana Association of United Ways (2-1-1 Louisiana), emergency responders, Children’s Trust Fund, Crossroads NOLA, CASA, Louisiana Supreme Court-Division of Children and Families, Empower 225, Louisiana Child Welfare Training Academy, Civil Rights Section of DCFS, Kinship Navigator Program, U.S. Department of Health and Human Services (“HHS”) Office for Civil Rights (“OCR”), U.S. Department of Justice (“DOJ”), church and faith-based organizations, Louisiana Bar Association, Louisiana Law Institute, Louisiana Bar Association, legal service entities, Child Advocacy Program, Louisiana law schools, local bar associations, Children’s Code Committee, and others to further develop and support the service array strategic plan, fill gaps in services, identify a services and needs online management portal, and support coordination of service communications and referrals within the pilot parishes.

This strategy will continue post-PIP as the CIP, legal stakeholders, and the department partner together to implement, administer, and expand the evidence- based service array and delivery through the Families First Prevention and Services Act and collaborations across state-level systems and within local communities.

**Goal 5: Quality Legal Representation**

Fewer children will enter foster care, and for those who do enter foster care, a higher rate will reach permanency within 12 months. The rationale for selecting this goal is to develop and implement a high-quality multidisciplinary legal representation model.

**Objectives/Strategies to achieve goal:**

- Parent’s and children’s attorneys in the pilot parishes, Caddo, Livingston, East Baton Rouge and Rapides, will receive training on improving the quality of legal representation to more effectively advocate for their clients in court and out of court.
- Attorneys in the pilot parishes will have enhanced knowledge and skills to represent their clients in child welfare proceedings.
- Attorneys in the pilot parishes will be appointed at the earliest possible time and be present at the continued custody hearing to represent and advocate for clients.
- Fewer court delays will occur in the pilot parishes due to lack of parties and/or counsel at the continued custody hearing.
- Parents and children, and their attorneys, in the pilot parishes (resources permitting) will have access to enhanced legal representation, e.g., parent partners and social workers, and resources to resolve the case before a petition is filed with the court.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Parents at risk of having their children removed from their home will have access to timely legal aid and social service assistance to remediate the threats and avoid the child's removal from the home by resolving ancillary exacerbating issues.
- Parents and children with enhanced legal representation will receive greater access to supportive services and parenting time to facilitate timely reunification.
- Parents and children with enhanced legal representation will experience greater support and are more likely to engage in the reunification plan and the court process.
- Judges will have sufficient information after diligent inquiry to determine whether the department has made reasonable efforts to prevent or eliminate the need for removal of the child from the home, and after removal to make it possible for the child to return home.
- Fewer children will enter foster care, and for those entering foster care, a higher rate will reach permanency within 12 months.

**B. UPDATE FOR FFY 2021 ASSESSMENT OF OUTCOMES / PLANS FOR IMPROVEMENT:** On an ongoing basis, departmental staff reviews outcomes using various sources of data to assess performance on the achievement of federal outcome measures. In the following pages, the Department of Children and Family Services (DCFS) has provided available data for federal fiscal years 2019 (and in some instances previous years) from the Louisiana Data Profile, from CQI case review data, DCFS dashboard and Web focus reports, stakeholder input and LaPAS measures which are provided to the Louisiana Legislature.

**QUALITY ASSESSMENT Update FFY 2021:** Louisiana DCFS sought assistance from the Capacity Building Center to support efforts in creating a comprehensive Child Welfare Assessment and Decision Making (CWADM) model. A workgroup of various levels of DCFS staff with consultation of an evaluator from CBC met on 11/18/2019 to begin the development of a review instrument and associated procedures. A CWADM Case Review Procedural manual was developed, which outlines the purpose of the CWADM case reviews, sample methodology, Safety Assessment process guide, which gives details regarding the schedule of reviews that all reviewers must adhere to, outlines elimination criteria, conflict of interest procedures, review assignment, red flag cases and procedures for cases with safety concerns, procedures for tracking and resolving case review issues and describes the feedback loop process for data collected. Moreover, a case review instrument was developed and incorporated into REDCap, an electronic data capture system. All CQI, RPS, CPS, FS and FC consultants, who will be responsible for conducting CWADM case record reviews, as well as their managers, were trained on the case review instrument over the course of two (2) three (3) hour long training sessions held on 11/19/2020.

A feedback loop process was developed and included in the CWADM Case Review procedural manual. After each quarter of consultations and case reviews, reports regarding findings are rolled up and submitted to Child Welfare Manager 2 leads the month following the end of the review period. Those reports were distributed to State Office Management and Program Leads, State Level CQI and CIP, and to Regional Management. A

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

programmatic meeting was held the following month to include State Office program leads, the CQI team, and Regional Program Specialists to discuss findings, plan for the exit with the Child Welfare (CW) field staff, and discuss any program needs. Finally, an exit with CW field staff was held the month after the programmatic meeting two times a year to discuss findings and plans for improvement.

Regional Program Specialists (RPS) conduct formal CWADM case consultations monthly to reinforce the CWADM model. This is an ongoing consultation and support process. Four consultants conduct nine surveys (three in each program – CPS, FS, FC/ADP) per quarter. Data from the consultations are entered into an electronic reporting system in RedCAP, which allows the ability to roll up summary reports to include strengths and needs. These reports are provided quarterly to CW program staff, and Regional management to review in order for assessment of adequate practice, continued support and development of staff. There are quarterly reporting and review periods to identify performance trends, areas the CWADM model is succeeding and areas that need improvement.

Quarterly review meetings were held August 31, 2020 and November 30, 2020. The findings from the RPS case consultations were reviewed along with trends identified and what this means regarding practice and implications. Discussion was held regarding what needed to be emphasized through the consultations and the practice champions. In addition, a data report was created for the meeting. From June 1, 2020 through November 30, 2020 there were 79 CWADM consultations conducted. The consultations revealed progress, as well as challenges in the utilization of the CWADM model in child welfare program/practice. The strength areas were related to gathering information and conducting the safety assessment. Areas needing improvement were related to case planning. This information is shared with the CWADM training staff. As we move into level three training, there will be more education on identifying the safety threat in the case planning and conditions for return.

A workgroup was formed consisting of DCFS and child welfare and legal stakeholders from across the state. The workgroup met at least bi-monthly for 14 months to collaborate and clarify available legal options to manage safety and prevent children from entering foster care. The following documents were created and shared among DCFS and all child welfare and legal stakeholders: Informal Adjustment Agreement Bench Card and model Informal Adjustment Agreement, Temporary Restraining Order and Protective Order Bench Cards and model orders, Instant Safety Plan Bench Card and model order and affidavit, and Continued Custody Hearing Bench Card and model order. The workgroup created a shared language document, which provides definitions for the various alternatives to removal. All of these documents will help us ensure that DCFS and child welfare and legal stakeholders understand all of the available legal options that can be used to prevent removal and have a common understanding of their full and proper uses. These documents were emailed out to all stakeholders and will be available on the CLARO website and the Louisiana Supreme Court website. They will be used in CIP and DCFS trainings. They were initially shared at the Together We Can Conference in November of 2020.

The workgroup compiled a list of common civil legal issues families experience apart from abuse and neglect that can contribute to removal. The workgroup is collaborating with the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

legal service corporations, the Louisiana Bar Association, the Louisiana Bar Foundation, and other legal stakeholders to raise awareness of these underlying legal issues in CINC cases and organize a process to connect families to legal services to address those issues. In the MCC pilot parishes, we are utilizing the My Community Cares Connection Portal to house a database of the available legal services in the pilot parishes

DCFS Policy, 4-521 was implemented on 11/30/2020 to give staff clear guidance on all the available options to manage safety when a child is deemed unsafe. DCFS continues reviewing policy in monthly meetings with staff. Once all of the Alternatives to Removal court templates document have been created policy will be updated and shared in monthly meetings with staff so that clear guidance and expectations can be communicated.

CWADM Training:

- **Practice Champion Survey June 1, 2020:** Through the university partnership a survey was sent out for anonymous feedback from our Regional and State Office Practice Champions to understand their perceived needs better. Out of 38 staff 34 responded. While this survey is not comprehensive, it does provide a snapshot in time as to how 34 or 89.47% percent of the Champions view their preparation to train others on the model. Specifically, staff want more training on risk, safety assessment, safety plan writing, and how to effectively teach others. Respondents largely felt prepared to train others on the model but noted nervousness. In looking at the ratings as they related to needing more instruction, the respondents rated the understanding of content lower (meaning staff felt strongly that they understand the concepts), and the practical implementation items higher (meaning staff were less sure of how to implement). This is consistent with the qualitative feedback. Individuals appear to need time and more examples/training. Several staff noted, “It will just take doing it to get it.” This is consistent with learning new models. The respondents are willing to meet rather frequently (bi-weekly) to better their skills.
- **Education and Support Calls with formalized agenda and smaller groups for Tri-Regions:** Adjustments were made to the educational and communication format to better meet staff needs as CWADM Practice Champions and Trainers. A designated meeting time was established, Tuesdays from 9:30am to 10:30am with smaller groups and a more structured format via Zoom. Each group was co-lead by a Program Manager and a Regional Program Specialist. Participants for each area included: Regional Practice Champions and State Office Program Consultants (FC, FS, and CPS), RPS, and CQI. Training credit was requested for these sessions.
  - Area 1 (Orleans, Covington, Thibodaux) Lori Miller and Ellen Hammons
  - Area 2 (Lafayette, Baton Rouge, Lake Charles) LaTrese LeCour and Nell Aucoin
  - Area 3 (Monroe, Alexandria, Shreveport) Jacqueline Brown and Kim McCain
    - Jun 9, 2020 09:30 AM – Threats of Danger 1-3 and #8
    - Jun 16, 2020 09:30 AM – Threats of Danger 4-7
    - Jun 23, 2020 09:30 AM – Child Vulnerability

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Jun 30, 2020 09:30 AM – Caretaker Protective Capacities #1-5
  - Jul 7, 2020 09:30 AM – Caretaker Protective Capacities #6-11
  - Jul 14, 2020 09:30 AM – Safety Determination and Safety Analysis
  - Jul 21, 2020 09:30 AM – CPS Case scenario
  - Jul 28, 2020 09:30 AM – FS Case scenario
  - Aug 4, 2020 09:30 AM – FC/HD/AD Case scenario
- All CQI, RPS, CPS, FS and FC consultants, responsible for conducting CWADM case record reviews, as well as their managers, were trained on the case review instrument over the course of two (2) three (3) hour long training sessions held on 11/19/2020.
  - Safety planning options training was implemented during a statewide management meeting to ensure understanding of leadership expectations regarding policy changes. The meeting consisted of Area Directors, Regional Administrators, and Managers in the regions along with our BGC attorneys and State Office Leadership Team, Managers, and Program Consultants. Training was implemented for all BGC attorneys during a statewide management meeting to ensure all legal staff are advising and assisting agency staff with available options to prevent removal and manage safety.

**ENGAGEMENT OF YOUTH, CAREGIVERS AND OTHER SYSTEM PARTNERS**

**Update FFY 2021:**

- DCFS communicated and implemented a survey process statewide. An email was sent to all DCFS-CW users on February 21, 2020 by the Deputy Assistant Secretary, Karla Venkataraman to communicate the survey process, populations identified to receive the survey, time frames and background information on how the survey will assist staff in strengthening partnerships, especially with foster parents, older youth and biological parents. The first population to receive the survey was foster parents. The survey was emailed to foster parents in three phases on 02/21/2020, 03/05/2020 and 03/11/2020.
- An evaluation process for Managers was utilized in initial Family Team Meetings (FTM) in the Foster Care (FC) and Family Services (FS) programs to ensure that families (mothers and fathers) are engaged and have a voice in planning and that there is a link between investigative findings, assessments, and case planning was developed. Managers utilized this evaluation in initial FTMs for FS and FC Programs. Manager’s Case Review Instruments were completed prior to the initial FTM to ensure a link between the investigative findings and assessments with the initial case planning (FTM).
- Managers were trained on the FTM process and evaluation expectations to include how feedback is shared with staff: Memorandum 20-005 Family Team Meetings was issued on 03/03/2020 through the DCFS Policy Management System. The memo referenced the training requirements for program staff as well as the dates of completion of the webinar training. All workers and supervisors in both the FS and FC Programs and Managers of all programs were required to complete the training by 03/15/2020. Other staff (CPS, HD, AD), both workers and supervisors were required to complete the training by 05/31/2020. The memo addresses the feedback loop with staff to reinforce quality practice as it relates to strengthening

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

partnerships and engagement. The process provides an opportunity to address practice-needing improvement.

- DCFS implemented and tracked results: Per Memorandum 20-005 Family Team Meetings, issued 03/03/2020, Managers were required to participate in and complete two instruments, The Case Review Instrument and the Family Team Meeting (FTM) Manager Evaluation Instrument. The Case Review instrument is completed prior to the initial FTM and was designed to ensure that services/assessments provided prior to the FTM are completed accurately and considered during the case plan development. The FTM Manager Evaluation Instrument is completed at the conclusion of the initial FTM. The Manager participates in the FTM as a silent observer of the process and ensures that goals identified in the FTM consider risk and safety, are linked to assessments conducted prior to the FTM and that participants are engaged. The Case Review Instrument and The FTM Manager Evaluation Instrument are completed on all initial FTMs in both the Family Services and Foster Care Programs, effective 03/16/2020. Due to the onset of the COVID 19 pandemic, Memorandum 20-007 COVID 19 Staff Protocol for Client/Stakeholder Contact was issued 03/17/2020, providing for FTM's to be held virtually or by phone. Per Memorandum 20-015 COVID-19 Update, issued 06/11/2020, all Managers are required to participate in and complete the FTM Manager Evaluation Instruments on all initial FTMs and enter the information from the instruments into the Redcap data system for tracking purposes, effective 07/01/2020. The Data Unit worked collaboratively with Programs to develop a tracking system (Family Team Meeting Manager's Report) for all cases requiring a FTM and the status of the completion of the required instruments. This report is on the CW dashboard and allows for the Manager, Area Director and Regional Administrator to monitor the completion of the required instruments.
- In partnership with the Child Welfare Training Academy, DCFS developed and implemented a skills building simulation training for new workers to include focus on engagement beginning at initial contact with families and build in evaluation. An in person simulation lab and program focused on engagement developed in early 2020. Adaptations to interactive virtual simulation program necessitated by COVID made and implemented – pilot held 10/06/2020-10/07/2020 with three subsequent two day sessions being held on 10/20/2020 – 10/21/2020 and on 11/09/2020 – 11/10/2020 (two simultaneous sessions of new workers). The virtual simulation program was scheduled through March 2021. Participation in skills building simulation training was a requirement of all new workers. An on-going evaluation is incorporated into the simulation-learning program.
- In FFY 2021, data was prepared and analyzed in reports for inclusion in Regional Exit meetings. Surveys were conducted by Case Reviewers to support the PIP Engagement workgroups through participation and providing feedback. Efforts were explored to improve engagement with field staff in an effort to improve feedback loops.

**WORKFORCE DEVELOPMENT:** The Job-Redesign has been implemented in each of the three pilot parishes (East Baton Rouge, Lafayette, and Calcasieu Parishes). The DCFS

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Engagement Workgroup held an initial planning meeting on July 23, 2019 to discuss the training curriculum. The team has completed the final drafts of the client visitation forms to ensure the forms align with CFSR documentation and promote critical thinking by users. Throughout FFY 2020, there was continuous support for the project fidelity.

The following activities occurred: The supports included SWAT teams, team building trainings, Community of Practice calls, Visions in Voices (refresher and peer learning opportunity regarding job redesign) and project news and trends.

SWAT Teams: The SWAT Teams are a team of Specialists and trainers who provide a modified training support to staff joining the workforce implementation and unable to go through the traditional training processes (usually after turnover). This occurs when there is an employee separation which results in a new team member coming aboard and need a quick training support.

Vision and Voices Tour: During the Vision and Voices Tour, discussions centered on the vision of the job redesign of each program and the structure of the job redesign. Staff provided feedback on the pros and cons and explored the overall needs for the successful outcomes of the job redesign. The Visions and Voices tours occurred in May 2020 and November 2020. Documentation of steps for QIC-WC diaries (successes and challenges) occurred to create a narrative of the process.

Community of Practice Calls: Calls occurred amongst Managers/Supervisors, Prevention Team caseworkers, Permanency Team Caseworkers and Team Specialists to support a community of coordinated practice in the job redesign throughout the pilot parishes. (East Baton Rouge, Lafayette and Calcasieu).

COVID Surveys: On May 7, 2020, the QIC-WD collected baseline data from caseworkers, supervisors, and Child Welfare Team Specialists via an electronic survey. The surveys covered a variety of factors shown in previous research to influence retention, such as individual characteristics, job engagement, job satisfaction, stress, burnout, and perceptions of work-life balance, supervisory and organizational support. Supplemental questions were added focused on the move to virtual work in response to Covid-19. Surveys were distributed to caseworkers and supervisors in the experimental and comparison parishes and Child Welfare Team Specialists in the experimental region. Response rates were high for all three groups: 80.2 % for caseworkers, 89% for supervisors and 100% for Child welfare Team Specialists. Preliminary analyses of questions related to virtual work showed that the communication between workers and supervisors, critical to the job redesign and teaming model, was maintained despite the move to virtual work.

Newsletters: The QIC-WD Newsletter was designed to market the project, provide information regarding the value the project would bring to practice, potential outcomes, and the importance of practice fidelity. The newsletter serves as a creative method of communication since the restrictions of the Corona Virus -19 placed limitations of travel to offices.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Case Record Reviews: June 1, 2020- Case record reviews serves to assess the quality of practice in the Job Redesign by the experimental parishes. The baseline surveys were conducted by reviewing case records for Child Protection Services, Family Services and Foster Care, prior to the Job Redesign with the same review instrument. The instruments continued use to review case records that began during the Job redesign. The goal is to determine if there is significant difference in the quality of documentation in the cases. Twelve (12) case records are reviewed each quarter, six from the Prevention program, and six from the control parishes randomly pulled from the Experimental Implementation parishes (East Baton Rouge, Lafayette and Calcasieu).

Time Study: July 11, 2020 - Conducted in the experimental implementation parishes and seven (7) controlled parishes (Caddo, Ouachita, Rapides, St. Tammany, West Jefferson, Lafourche and Terrebonne). Time studies conducted in July 2020 offered further evidence of model fidelity showing that increases in time spent by caseworkers on clinical duties and decreases in time spent on administrative duties were maintained from levels observed prior to the pandemic. Additional analyses are underway focused on the baseline data, another round of time study data and indicators of practice change captured in case reviews and agency administrative data. The results revealed a small increase in the clinical work with families of the experimental parishes then that of the controlled parishes.

Time Study: October 2020 time study scheduled, but tentative plan for a time study postponed due to Hurricane Preparedness and the aftermath of consecutive hurricanes in the experimental and controlled areas as well as the continued challenges due to the pandemic. This time study was conducted on January 11, 2021 through January 22, 2021. The results of this time study is pending. The results will become part of the full workforce development project’s evaluation, which will compare the time spent in the Job Redesign by the experimental parishes (East Baton Rouge, Lafayette and Calcasieu) versus the time spent in the controlled parishes (Caddo, Ouachita, Rapides, St. Tammany, West Jefferson, Lafourche and Terrebonne) conducting clinical work with families verses professional administrative functions.

The timeline for the Case Record Reviews to obtain baseline data to compare to the Experimental Implementation parish is evidenced in the chart below. Twelve cases were pulled from Web Focus per quarter for all programs across the implementation regions while phasing in the implementation of Groups 1, 2 and 3 were distinguished by their implementation period and included 2-3 units from Calcasieu, Lafayette and East Baton Rouge Parish. The first group was implemented June 2019, the second group was implemented in November 2019 and the third group was implemented in February 2020. The following are the identified Periods Under Review and Groups 1, 2 and 3 implementation dates:

Period Under Review
June 1, 2018 – August 31, 2018
September 1, 2018 – November 30, 2018
December 1, 2018 – February 28, 2019
March 1, 2019 – May 31, 2019
June 1, 2019 – August 31, 2019
Group 1 Starts
September 1, 2019 – November 20, 2019
December 1, 2019 – February 29, 2020

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

<b>Group 2 Starts</b>
March 1, 2020 – May 31, 2020
<b>Group 3 Starts</b>
June 1, 2020 – August 31, 2020
September 1, 2020 – November 20, 2020
December 1, 2020 – February 2, 2021
March 1, 2021 – May 31, 2021

*\*The Case Reviews begin the quarter following the Period under Review*

**Workforce Development Update FFY 2021**

- Implementation of the Job Redesign and Teaming Structure Implementation of the QIC-WD Job Redesign was initiated on June 10, 2019 and completed on February 16, 2020, at which time all units in the three pilot parishes rolled out into the job redesign. Calcasieu, Lafayette and East Baton Rouge parishes began working in either Prevention or Permanency Teams. The Prevention Teams demonstrate engagement with families, preventive support services during CPS intervention, timely and urgent services are/will be provided to families during in-home services. On the Prevention Teams, the specialized caseworkers provide primary attention to parent services/supports and children/ caretakers supports/services. Both the Prevention and Permanency Teams incorporated the CWADM in practice to promote a healthy safety and risk assessment. The Job Redesign and administrative support provided by the newly created position – Team Specialists- allows caseworkers more time to engage with families to achieve optimal case outcomes. Achievable casework promotes increased job satisfaction.
- DCFS hired an onboarding Team Specialist. By February 2020, 24 Team Specialist were filled for full implementation. There has been frequent turnover in the Team Specialist role due to pay. As a result, the onboarding and training has been a continuous process.
- Team Building Trainings for management, supervisors, caseworkers and specialists began in April 2019 for all implementation rollouts. There were Team Building Trainings led by Patsy Wilkerson. Initially the Team Building Trainings were designed for all Managers and Supervisors for the Implementation rollouts #1, #2 and #3 prior to going live. The focus was on teaching the leaders how to form and maintain the teaming concepts and to maximize design performance. After full implementation, there were personality conflicts amongst unit members. In an effort to develop the full team, a new Team Building training was designed and involved each supervisor and his or her respective team. These trainings were implemented August 2020 through January 2021.
- Provided Prevention and Permanency Team unit trainings: All Trainings were conducted for the newly formed Prevention/Permanency teams (supervisors and their staff) prior to each rollout and “go-live” date.
- The agency continues to support the implementation/practice through community of practice meetings. Community of Practice calls amongst Managers/Supervisors, Prevention Team caseworkers, Permanency Team Caseworkers and Team Specialists continues to support a community of coordinated practice in the Job Redesign throughout the pilot parishes. Community of Practice calls were implemented April 2019 and continues throughout the project. Community of Practice calls are held bi-

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

weekly on Fridays with each group. The calls are designed to support a Community of coordinated Practice in the Job Redesign throughout the pilot parishes (East Baton Rouge, Lafayette and Calcasieu).

- The agency experienced delays due to COVID-19 and requested an extension to conduct surveys to monitor and evaluate practice planned surveys on March 23-29, 2020 to evaluate culture and climate, stress assessment, job satisfaction and retention in the DCFS. The Organizational Social Context Surveys were conducted electronically on May 11- June 1, 2020 as an alternative to office visits by the University of Nebraska-Lincoln workforce team. We are currently planning to conduct Time Study surveys which will be administered statewide electronically over a two-week period on July 6- July 17, 2020. We are conducting case record reviews according to an evaluation-designed tool that includes outcome measures expected by improving practice in the Job Redesign.
- The DCFS developed practice guidance on conducting quality visits w/children and parents. The training draft was submitted in January 2020. The live trainings were implemented in the experimental pilot parishes (East Baton Rouge, Lafayette and Calcasieu) February 10, 2020-February 13, 2020. The implementation of quality visits would be effective in visitation documentation where Safety, Permanency and Well-being are documented. This documentation is studied in case record reviews of the experimental parishes through July 2020. On August 14, 2020, a memo was released mandating the remaining child welfare parishes and all frontline staff to complete the online virtual training by the November 30, 2020 deadline.

**SERVICE ARRAY:** The *My Community Cares* (MCC) initiative has launched in the four (4) pilot Parishes (East Baton Rouge Parish, Livingston Parish, Caddo Parish, and Rapides Parish). The Pelican Center and DCFS continue to collaborate with child welfare stakeholders and community partners in each pilot parish to implement MCC. The MCC Parish Steering Committees consists of the MCC State Coordinator, Pelican Center staff, at least one juvenile judge, the MCC Parish Coordinator, and two to three representatives for DCFS who meet monthly and discuss the overall implementation strategies of MCC. MCC Parish Anchor Teams have been established in each parish. These teams consist of the MCC Parish Steering Committee and DCFS, judges, FINS, CINC attorneys, service providers, non-profits, churches/faith-based organizations, CASA, local government, schools, businesses, youth and parents with lived experience with child welfare, foster parents, and residents from each priority neighborhood. The MCC Parish Anchor Teams plan and convene the MCC Parish Wide Update Meetings every quarter. The goal of MCC is to enhance coordination and collaboration between DCFS, courts, service providers, community members, etc., identify social determinants and root causes of child abuse and neglect in the priority zip codes in each parish, identify and capture services and supports in each parish, provide a collaborative online resource platform, and engage community members in advocating to fill gaps/barriers to services and supports in their community.

DCFS created geo-maps that identified the ten (10) zip codes across all four (4) pilot parishes with the highest number of removals and valid investigations in the parish. DCFS and the Pelican Center then created geo-maps that identified the neighborhoods within those zip codes with the most removals and valid investigations. DCFS has reviewed cases

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

in each of those zip codes to capture the 3-5 reasons children have been removed in those areas. A root cause analysis was conducted in each pilot parish, and social determinants of abuse and neglect in the priority neighborhoods were identified. Strategy teams were formed around the results of this analysis. DCFS and the Pelican Center are collecting information on all of the current service providers in each parish and have started to conduct a service array assessment to create a service array continuum, from prevention to permanency, and to identify gaps in services.

An MCC Parish Coordinator for each pilot parish and an MCC Neighborhood Coordinator has been identified for each priority zip code. These coordinators lead the MCC strategies in their community and are building teams of community members and service providers to advocate for that particular zip code/neighborhood. The goal is to give community members an opportunity to share their needs and be an active partner and voice in improving service array and preventing child abuse and neglect in their community.

Across all four (4) pilot parishes, DCFS and the Pelican Center have conducted 624 needs assessments, 12 listening circles with parents with lived experienced with DCFS, former foster youth, foster parents and over 40 community conversations with residents of the priority zip codes. They will continue to conduct them over the next year in each of our priority neighborhoods to identify needs for services, resources, and trainings.

The consistent barriers identified to date in each parish are as follows:

- Need for a trusted entity/person who can help community members problem solve what services/supports they need and/or provide short-term case management.
- Hesitant to seek services for fear of being reported for abuse or neglect.
- Services provided in each parish are unknown by stakeholder and community members.
- Service providers lack the time or capacity to provide needed services.
- Service providers and community partners are disjointed and working in silos.
- No comprehensive centralized information-sharing platform housing all community resources.
- No mechanism for tracking the success of referrals, or addressing the true needs of families.
- Need for collaborative care coordination between service providers, stakeholders, and agencies to bridge communication and create a centralized hub to connect families to supports.
- Lack of emotional and physical support by community members to safely parent their children.

DCFS and the Pelican Center have continued to develop strategies in the area of creating a collaborative communication, referral, and tracking processes in each pilot parish between service providers, DCFS, and legal stakeholders to increase the quality, appropriateness, and accessibility. The Pelican Center is funding and hosting a platform called the My Community Cares Connection Portal. This platform allows DCFS and the Pelican Center to conduct service array assessments, organize parish and neighborhood teams, post community announcements, events, and meetings, house an internal and external

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

services/resource directory, and allows service providers to share information. DCFS and the Pelican Center is collaborating with Unite Us Louisiana to promote use of the Unite Us platform to provide holistic and efficient referrals between DCFS, courts, service providers, and community members. Unite Us allows users to make and track referrals and to ensure services were received by the client. DCFS and the Pelican center are currently creating a plan to sustain and expand the current MCC programs in the pilot parishes and expand MCC across Louisiana.

**Service Array Update FFY 2021:**

- Identified and convened a “*My Community Cares*” State Level Workgroup representing multiple disciplines and systems to meet bi-annually and provide collaboration, communication, and support at the state level to strengthen the capacity of the work in the parishes and address statewide systemic challenges and gaps in services and supports.
- Obtained input from foster youth, biological parents, foster parents in those neighborhoods/ areas regarding concerns and barriers they had to needed services and supports.
- Identified a lead entity in each of the 3-5 areas of priority in the parish to convene community meetings/block parties/service fairs in those areas to lead the Neighborhood Team.
- Identified 3-5 neighborhoods/areas with the most removals in each parish and build neighborhood teams to meet consistently to identify gaps in trainings, resources, and services, discussed opportunities to partner, and moved action plans forward.
- Helped pilot sites map out a service array continuum of service providers in each parish, including critical information needed to determine availability, accessibility, and appropriateness of the services as service-array assessment service results were collected.
- Developed a coordinated process for efficient communication and referral between DCFS, legal stakeholders, CASA, service providers, and community partners to connect families with quality services, which are linked to enhancing parental protective capacities, timely referrals, and providing effective supports.
- DCFS placed one (1) substance abuse counselors in four (4) of the pilot parishes (Covington, East Baton Rouge, Livingston and Caddo).
- Collaborated with the Department of Health, Center for Evidence of Practice, and Office of Public Health to strengthen referrals and access to services and supports to fill identified gaps.
- Through the Kinship Navigator Program partnership, PIP collaborators worked with legal stakeholders to develop a legal services network to connect relative or kinship caregivers to legal services and resources.
- Created a toolkit for all parishes statewide to use to establish a pilot site and a catalog of prevention services, strategies, and capacity building mechanisms and continued development for widespread dissemination
- Created a model “Care and Treatment” report for foster parents, relatives, or pre-adoptive parents caring for a child to exercise their legal right to be heard and provide relevant information as to the services the child is receiving.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Developed a procedure for foster parents, relatives, or pre-adoptive parents caring for a child to submit reports on the status of the child and for DCFS to track in the CCWIS system whether notice and opportunity to be heard in the court proceedings was given and whether their right to be heard was exercised or not.
- Collaborated with the Capacity Building Center for Courts and Casey Family Programs to identify and implement experiential training for DCFS Child Welfare staff that emphasizes empathy for families and youth as well as their understanding of caseworker and foster parent roles.
- Collaborated with Casey Family Programs to host the “Cost of Poverty Experiences” (“COPE”) training in two of the four pilot parishes to DCFS staff, legal stakeholders, and service providers. COPE Trainings were scheduled in Caddo and Rapides parish in June/July 2020, but were not able to be held due to COVID restrictions as the training has to be facilitated in person and requires close contact.
- Explored strategies to address the impact implicit bias, poverty biases, racial disparity, and disproportionality has on service array and delivery in each community.
- The CIP pursued grants and partnerships with the Louisiana Children’s Trust Fund (LCTF), Casey Family Programs (CFP), and others to hire, through a contract with the CIP, a statewide “My Community Cares” Project Coordinator to manage the initiative, support a lead coordinating entity in each parish, and fund or host the online platform.
- Evaluated current budgets, funding, and partnerships to increase prevention services and supports.
- Collaborated with Crossroads NOLA and the Louisiana Child Welfare Training Academy in May 2020 to develop a Trauma Based Relational Intervention (“TBRI”) strategy to build capacity of pilot parishes to provide trauma informed services and supports.
- Identified and invested resources in a lead coordinating entity in each pilot parish to fulfill the administrative role of the initiative and to build neighborhood teams.
- Strategized with the DCFS CQI Unit in May 2020 on how to operationalize an on-going CQI structure in each pilot parish that allows DCFS and/or the courts to track whether services required in the case plan were actually accessible and connected to parental protective capacities identified as insufficient.
- Developed a process for the administration of the substance abuse assessments and referrals to service providers in May 2020.

**QUALITY LEGAL REPRESENTATION:** The Pelican Center for Children and Families, who administers the Louisiana Court Improvement Program (CIP) on behalf of the Louisiana Supreme Court, has collected information on various parent and child representation models, received input and approval from the Public Defender Offices and Mental Health Advocacy Services on the model, and identified attributes of high quality multi-disciplinary parent and child representation models. They are working on the implementation of these parent and child representations models in multiple jurisdictions. A parent multi-disciplinary representations model has been established in Orleans and Caddo. The Pelican Center worked with a variety of legal system child-welfare stakeholders across the state to develop high-quality legal representation competencies for DCFS Attorneys, Children’s Attorneys, District Attorneys, and Parent’s Attorneys

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

involved in Child Welfare cases. A training plan for legal stakeholders was developed and has been implemented based on the indicated competencies.

The Pelican Center developed a strategic plan for ensuring that children's and parents attorneys will inform the court of their clients' wishes at every hearing. They developed a strategic plan for ensuring that children's attorneys will inform their clients of their right to attend court hearings and facilitate their attendance in accordance with Louisiana law. The Pelican Center led a multi-disciplinary workgroup to create the newly published Louisiana Child in Need Bench Book for Juvenile Judges, including model court orders and affidavits and court reports. The Bench Book includes the various alternatives to removals, including when and how to use them, such as Informal Adjustment Agreements, Protective Orders, and Instant Safety Plan Orders. The Louisiana Supreme Court, the Indigent Defender's Board (IDB), Southeast Louisiana Legal Services (SLLS), Mental Health Advocacy Services (MHAS), Acadiana Legal Services (Acadiana), DCFS Attorneys, District Attorneys, DCFS, CASA, local judges, and the American Bar Association Center on Children and the Law have been partnering with the Pelican Center to achieve these strategies.

**Quality Legal Representation FFY 2021:**

- Secured funding to implement and sustain the high-quality multidisciplinary representation programs.
- A Public Cost Allocation Plan (PCAP) amendment was submitted to claim federal funding for the parent and children attorney fees in child protective proceedings.
- Explored funding opportunities to implement the program in the identified pilot courts; potential services include local grant funding and/or CIP funds.
- Contracts were developed between DCFS and each entity to allow for IV-E reimbursement for legal representation.
- Implemented training program.
- Selected a court or courts to implement a high-quality multidisciplinary pre-removal representation program, in one or more of the pilot parishes, (based on the organizational structure, judicial and agency leadership, sufficient legal counsel, percentage of families eligible for Title IV-E funds, and other factors). DCFS will refer certain cases where children are at risk of removal to the program, where appropriate, to prevent children from entering foster care.
- Selected a court or courts to implement a high-quality multidisciplinary post-removal representation program, in one or more of the pilot parishes, (based on organizational structure, judicial and agency leadership, sufficient legal counsel, current timeliness, and percentage of families eligible for Title IV-E funds).
- Created a contract or MOU between the pilot parishes and attorneys that requires parent and children's attorneys to adhere to specific performance standards.
- Established a procedure with the courts and DCFS to ensure parents and children's attorneys are able to appear at the continued custody hearing absent good cause and that the same attorney will continue throughout the proceedings.
- Established a procedure with the courts and DCFS to ensure parents' and children's attorneys will participate in out-of-court meetings including Family Team Meetings

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

and making sure attendance is documented and tracked and preparing children and parents in advance for court appearances.

**C. ACTIVITIES PLANNED FOR FFY 2022 ASSESSMENT OF OUTCOMES / PLANS FOR IMPROVEMENT:**

- a) Quality Assessment: The CWADM model document will serve as a key training tool. The document includes revised definitions of safety and risk, along with a flow of how cases are assessed and decisions made from the point of entry (Intake Call) to the point of a Foster Care case closure. With the revised safety assessment, a document has been created to guide staff with the definitions of all threats of danger and caretaker protective capacities. As we move forward with training, additional tools will be created with the assistance of the Capacity Building Center to successfully implement the model. The CWADM model document was produced, disseminated, and added to the policy management system. Bench Cards were added in the CWADM section of policy providing definitions of threats of danger and protective capacities.

Practice Champions are assigned to all supervisory units throughout the state. They will continue to meet with their assigned supervisory units monthly to review any updates, clarifications, and practice tips. In addition, the Center for States continues to work with the department on messaging and communication. Changes are communicated through emails, policy update webinars, and management and leadership meetings. Weekly calls are held with the Practice Champions to provide updates, provide consultation and build their capacity as experts.

A feedback loop process was developed and included in the CWADM Case Review procedural manual. CWADM Case Reviews and CWADM Case consultations will continue. This is an ongoing consultation and support process. There will be bi-annual reporting and review periods to identify performance trends, areas the CWADM model is succeeding and areas that are needing improvement. After each quarter of consultations and case reviews, reports regarding findings will be rolled up and submitted to Child Welfare Manager 2 leads the month following the end of the review period. Those reports will be distributed to State Office Management and Program Leads, State Level CQI and CIP, and to Regional Management. A programmatic meeting will be held the following month to include State Office program leads, the CQI team, and Regional Program Specialists to discuss findings, plan for the exit with the Child Welfare (CW) field staff, and discuss any program needs. Finally, an exit with CW field staff will be held the month after the programmatic meeting twice a year to discuss findings and plans for improvement.

Court documents that reinforce the Department's assessment model in a way that ensures sound, reasonable efforts inquiries by judges and attorneys were created and will be used. A training plan is being developed to train judges and child welfare stakeholders initially and long term.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The Pelican Center/CIP formed a workgroup tasked with the development of a curriculum for legal stakeholders and interdisciplinary partners around the CWADM. The training began October 2020. The training will become part of the CIP training catalog beginning FFY 2021. The court workgroup will meet bi-annually to assess whether updates need to be made to the documents and will make updates accordingly.

b) Workforce Development:

**Quality Contacts Training:** The Quality Contacts training will continue to be part of the new employee training requirements. Managers and Supervisors were required to take the Quality Contacts training in efforts to partner in overseeing this practice.

**New Supervisors Capacity Building Program:** The next cohort of the new supervisors Capacity Building Program will begin May 2021. The training design will resume with the original training content. Classes will resume virtually until approval is granted to conduct in person sessions. The evaluations consists of the following:

- Mentor evaluation of Supervisor;
- Staff evaluation of Supervisor;
- Manager evaluation of Supervisor; and
- Supervisor evaluation of LCWTA Capacity Building Program.

c) Engagement of youth, caregivers and other system partners: Policy will continue to be reviewed and revised as needed regarding expectations of Initial Calls, Icebreakers, and Transition Plans on all cases.

Monthly QPI regional, state, and YLC leadership calls will be held to discuss progress, identify and address any upcoming barriers to QPI practices in each region. Regions will continue to track calls, icebreaker meetings and transition planning to increase birth family and caregiver engagement. Monthly reports are submitted by each region indicating compliance and a quarterly roll up of the information is prepared and shared with staff through Leadership meetings and CQI exits. CCWIS staff have been invited to gather relevant information for incorporation into their work.

Managers will continue to be required to participate in and complete the Family Team Meeting (FTM) Manager Evaluation Instruments on all initial FTMs, and enter the information from the instruments into the Redcap data system for tracking purposes.

DCFS is in the process of developing a report on our dashboard for Managers, Area Director's and Regional Administrator's to utilize, which will eliminate the need for the PMC's having to pull data and State office having to pull monthly reports. The results of the instruments will be compiled and shared with staff in regional CQI meetings. State Office Programs will distribute qualitative reports to the Area

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Directors and Regional Administrators for identification of trends, issues, and for continuous quality improvement.

In person simulation, lab and program focused on engagement developed in early 2020. The virtual simulation program has been scheduled through March 2021 pending opportunity to return to in person simulation lab and program. Participation in skill building simulation training will be requirement of all new workers. On-going evaluation is incorporated into the simulation-learning program.

Prevention Specialists continue to train staff in Family Search and Engagement in an effort to locate family and kinship networks that could prevent placement of children in Foster Care. Prevention Specialists will continue participating in pre/post removal staffing. The Department plans to meet with Plummer Youth Challenge, Organization and review promising prevention models from Delaware. A site visit is being developed by AECF for particular staff. The Department plans to further educate staff on the role of the Prevention Specialists and how/when to utilize their expertise. DCFS plans to have the Specialist increase “hands on involvement” in cases where they can assist staff to maintain youth in family/kinship networks such as identify/access services, such as wrap-a-round, Family Functional Therapy (FFT), and Multi Systemic Therapy (MST).

d) Service Array:

- CIP will partner with DCFS to implement MCC statewide, including supporting judges in collaborating with their Informal FINS Office, legal stakeholders, Family Resource Center, local DCFS office, service providers, and community members to implement MCC within their jurisdiction/parish, which will include identifying and supporting an MCC lead agency that will have an MCC Parish Director, MCC Connect Coordinator, and an MCC Solution Focused Case Manager and host Community Café’s in priority zip codes
- CIP will partner with DCFS to continue to host the MCC state level workgroup representing multiple disciplines and systems will continue to meet quarterly and provide collaboration, communication, and support at the state level to strengthen the capacity of parishes and address state-wide systemic challenges and gaps in services and supports
- CIP will continue to partner with DCFS to conduct the MCC annual assessment to obtain community partners’ and service providers’ input on gaps in services, resources, trainings, and effectiveness of communication (i.e., social network surveys)
- CIP will partner with DCFS to continue to expand MCC toolkit
- CIP will partner with DCFS to create an MCC overview training, including the purpose of MCC and how to implement
- CIP will provide technical assistance to DCFS regarding judicial and legal stakeholder involvement in MCC
- CIP will partner with DCFS to evaluate the ongoing use of an online management system (i.e., My Community Cares Connection Portal, Unite Us, etc.) to house

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

services, supports, and trainings available and/or to make closed loop referrals between courts, DCFS, other providers, etc.

- Depending on evaluation, CIP will partner with DCFS to create a strategic plan to implement use of online management system
  - CIP and DCFS will collaborate with the Civil Rights Section of DCFS, U.S. Department of Health and Human Services, and Office for Civil Rights, and the U.S. Department of Justice to develop a strategic plan to fill gaps in services that raise civil rights issues, including educating legal and child welfare stakeholders on the extent of civil rights violations in the context of child welfare and procedure to prevent and/or resolve civil rights violations
- e) Quality Legal Representation:
- CIP will partner with DCFS, the Louisiana Bar Foundation, and other legal stakeholders to evaluate the possibility of establishing a holistic multidisciplinary civil legal aid parent representation unit within the Louisiana's legal services corporations under the oversight of the Louisiana Bar Foundation for direct referrals to be made by the Family Services Unit of the DCFS and Family In Need of Services Programs, including acquiring funding to support program, creating a referral process and manual
  - If the multidisciplinary civil legal aid parent representation unit is established, CIP will partner with DCFS, the Louisiana Bar Foundation, and other legal stakeholders to create process for making referrals, manual, assessment for DCFS/FINS to use to determine when to make referrals, and other necessary documents
  - CIP will partner with DCFS to develop a process to evaluate success of Foster Caregiver Progress Form and legal guide
  - CIP will continue to partner with DCFS and legal stakeholders to claim Title IV-E funding for legal representation of the State, children, and parents in CINC cases, including other available Title IV-E funding (i.e., civil legal services, social workers, parent/youth advocates, court liaison/support staff, etc.)
  - CIP and DCFS will continue to support the State's implementation of a multidisciplinary representation model for children and parents across Louisiana, including social workers, parent/youth advocates, and other support staff
- f) CIP will evaluate possibility of improving mediation practice for CINC cases, including assessing need, changes to law/policy that may be needed, funding needs, and other states mediation programs
- g) CIP will create a strategy to improve motion practice in CINC cases

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**D. MEASURE OF PROGRESS OF GOALS FOR FFY 2021:**

CFSR Items Requiring Measurement	Item Description	Number of applicable cases <sup>2</sup>	PIP Baseline	RP 1	RP 2	RP 3	RP 4	RP 5	PIP Goal
<b>Item 1</b>	Timeliness of Initiating Investigations of Reports of Child Maltreatment (case review)	29	69.0%	<b>81.8%</b>	77.4%	80.6%	53.3%	74.2%	80.0%
<b>Item 2</b>	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	37	8.1%	17.7%	31.7%	42.1%	2.5%	67.5%	13.9%
<b>Item 3</b>	Risk and Safety Assessment and Management	65	13.8%	13.8%	36.1%	37.5%	42.4%	51.4%	19.3%
<b>Item 4</b>	Stability of Foster Care Placement	40	87.5%	72.5%	77.3%	72.1%	95.5%	93.3%	94.2%
<b>Item 5</b>	Permanency Goal for Child	39	64.1%	65.0%	61.4%	51.2%	82.2%	83.7%	73.9%
<b>Item 6</b>	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	40	25.0%	27.5%	43.2%	27.9%	53.3%	48.9%	33.8%
<b>Item 12</b>	Needs and Services of Child, Parents, and Foster Parents	65	13.8%	10.8%	29.2%	38.9%	39.7%	50%	19.3%
<b>Item 13</b>	Child and Family Involvement in Case Planning	61	16.4%	12.7%	31.9%	40.3%	51.3%	55%	22.5%
<b>Item 14</b>	Caseworker Visits With Child	65	46.2%	49.2%	62.5%	63.9%	67.7%	73.6%	54.1%
<b>Item 15</b>	Caseworker Visits With Parents	56	16.1%	14.5%	24.6%	31.7%	44.6%	50%	22.4%

- Approach to Measurement:** Louisiana intends to use Method #1 in Technical Bulletin #9, Retrospective measurement method using the state conducted case review results for the baseline period. The State conducted its own Child and Family Services Review (CFSR) and used the same sampling plan and case review process outlined for Round 3 to report ongoing progress in the Program Improvement Plan (PIP). The State will use CFSR onsite review findings as

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

baselines. Such reviews are aligned with the ongoing statewide CQI monitoring approach. The State intends to use a six-month review period.

- **Data Collection Instrument:** The CFSR Onsite Review Instrument (OSRI) will be used to determine compliance. Data will be collected using the OSRI in the Online Monitoring System (OMS).
- **Measurement Location/Sites:** Statewide random sample (no stratification)
- **Case Review Schedule:** Louisiana plans to review the minimum number of 65 cases during the six-month case review period: 40 out-of-home cases and 25 in-home services cases. The state will use a statewide simple random fixed sample to select the 65 cases. The state has reviewers in all of its regions who will review cases and conduct interviews across the state simultaneously based on the statewide random sample. Reviewers will cross-regions as necessary to control for the randomness of the sample.

The State is divided into nine regions: Orleans, Baton Rouge, Covington, Thibodaux, Lafayette, Lake Charles, Alexandria, Shreveport, and Monroe. The sampling frame includes all geographic areas of the state and is representative of the child welfare population served and the major metropolitan area identified as New Orleans. The expected number and percent of cases to be included for the major metropolitan area is seven cases (10%) of the sample. *\*Refer to the Louisiana DCFS CQI Procedures Manual for additional details.*

- **Sampling Methodology:** The proposed sampling methodology follows a 6-month cycle. This is consistent with the current ongoing case review process being conducted in Louisiana. In Home Services, cases have an additional 45-day parameter. *\*Refer to the Louisiana DCFS CQI Procedures Manual for additional details.*

Review Period	Sampling Period	Period Under Review
October 2018-March 2019	October 1, 2017 – March 31, 2018 (Out of Home) October 1, 2017 – May 15, 2018 (In-Home)	October 1, 2017 - Date of Review
April 2019-September 2019	April 1, 2018 – September 30, 2018 (Out of Home) April 1, 2018 – November 14, 2018 (In-Home)	April 1, 2018 – Date of Review
October 2019-March 2020	October 1, 2018 – March 31, 2019 (Out of Home) October 1, 2018 – May 15, 2019 (In-Home)	October 1, 2018 - Date of Review
April 2020-September 2020	April 1, 2019 – September 30, 2019 (Out of Home) April 1, 2019 – November 14, 2019 (In-Home)	April 1, 2019 – Date of Review
October 2020-March 2021	October 1, 2019 – March 31, 2020 (Out of Home) October 1, 2019 – May 15, 2020 (In-Home)	October 1, 2018 - Date of Review

- **Minimum Applicable Case Counts:** The State has implemented a process to monitor the applicable case counts four times throughout the six-month review period to ensure the minimum number of applicable cases are reviewed. A monitoring

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

instrument was developed and will alert managers if additional cases need to be added at different stages throughout the review period. Additional cases will be added to ensure minimum applicable case counts are met.

- Case Review Process: *\*The Louisiana DCFS CQI Procedures Manual has additional details.*
- Stakeholder Participation: The DCFS engaged various stakeholders in the review of data and development of strategies, goals and action steps to improve outcomes of safety, permanency, and well-being. Stakeholders included social service directors from federally recognized tribes, the consumer and community stakeholder group and the state level CQI team. Feedback from the regional CQI quarterly case review exit-interviews was used to inform this process, as were other collaborative efforts. Other stakeholders include: law enforcement, Judges, Attorneys, CASA, health and mental health professionals, parents and representatives of parent groups, former victims of abuse and neglect, and individuals who work with individuals with disabilities and homeless children, CIP, etc.

#### **E. STAFF TRAINING, TECHNICAL ASSISTANCE AND EVALUATION:**

**Staff Training:** See the *Staff and Provider Training* portion of the CFSP within the *Systemic Factors Section*.

**Technical Assistance & Evaluation:** Training and technical assistance provided to the regions will include: Policy development; On-site training; Distance learning opportunities [pre-service and in-service]; Pilot programs; Program specific training; Practice evaluation; Training identified through surveys and needs assessments; Case staffings; Facilitated meetings; Supervision and case management in regions with critical shortages of staff due to high turnover; Modeling; Coaching; and, Mentoring of field staff and supervisors statewide. The Department of Children and Family Services (DCFS) executive management and Child Welfare (CW) executive management conducts meetings with field staff at least once per quarter to discuss performance, workforce development and other identified concerns.

#### **F. IMPLEMENTATION SUPPORTS:**

Additional details related to the implementation supports listed below are included throughout this plan.

Additional details related to the implementation supports listed below are included throughout this plan.

1. CW staff will continue in work with Casey Family Programs and AECF to achieve change in the areas of focus outlined in the Collaboration section of this plan.
2. CW management work with Youth Villages for changes to the Teaming process to develop workforce skills to engage families, youth and stakeholders in the case planning process.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

3. Program staff work with regional staff statewide on the implementation of pilot programs and practice changes to achieve the objectives outlined above regarding the CFSP goals.
4. Louisiana Child Welfare Training Academy (LCWTA) – Child welfare staff will continue to work closely with the LCWTA (which is a collaborative effort with the Court Improvement Project, Pelican Center and the Universities Alliance) to ensure staff receive the most appropriate and effective training. This will include the development of supervisory and management mentoring skills and planning to support ongoing knowledge and skill development for staff on-the-job.
5. The DCFS Child Welfare System Development Project is moving forward to achieve the complete replacement of the CW legacy mainframe systems, which includes CAFÉ, ACCESS, FATS, QATS, and TIPS and works to develop a Comprehensive Child Welfare Information System (CCWIS). This team, made up of CW staff, continues to work closely with other staff in the fulfillment of this work.
6. CQI Process – The data obtained and utilized in the PQI/CQI case review process, and provided to regional staff via exit interviews is critical to measuring success. The CQI process allows for solicitation of and provision of information and data on department progress in achieving department goals from/to stakeholders.
7. Federal Partnership - DCFS relies on the support and expertise of the Dallas regional Children’s Bureau staff in all CW program planning efforts and practice changes. This partnership is critical in providing guidance in aligning Child Welfare funding streams where common threads exist and where work efforts can be merged to maximize accomplishment of department goals.
8. The Department will be working with the Child Welfare Capacity Building Center for States and the Capacity Building Center for Courts for technical assistance to improve practice in efforts to achieve the department goals outlined in the CFSP and the PIP.
9. DCFS will continue collaboration on workforce development with the QIC-WD.
10. DCFS will continue governmental and private partnerships developed through years of collaboration, DCFS Internal and External Advisory Committees, Louisiana Fosters, and PIP development to maintain a robust focus on family engagement with stakeholder ownership and investment in teaming to achieve better outcomes for the children and families served through the Child Welfare continuum.
11. Collaboration with the Children’s Justice Act and Children’s Trust Fund will remain vital to coordinated work efforts in serving Louisiana’s children and families and building or maintaining critical partnerships in this work.
12. Continued development of Kinship Navigator Services to ensure kinship caregivers of children have access to the resources they require to care for their family children will support the long-term safety, permanency and well-being of children.
13. Ongoing work with contract providers through the Family Resource Centers funded by the PSSF funds and the Chafee Foster Care Independence Program providers funded by Chafee funds will be focused on revamping contract terms and the service array provided through those providers to align with department goals as well as implementation of the federal Families First legislation in Louisiana.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

14. Ensuring implementation of the Extended Foster Care program, the Extended Guardianship Subsidy program and the Extended Adoption Subsidy program will provide supports to older youth exiting foster care to ensure their safety, permanency, and well-being as well as promoting success in adulthood, which should support safety, permanency and the well-being of their own children.
15. The Department will continue the New Hire Screening and Selection Process to develop a more stable and committed team of Child Welfare professionals.

G. **Timeline for Implementation:** The majority of the work efforts outlined for enacting the State’s vision in the 2020-2024 CFSP will follow the timeline established through the PIP, and have already been initiated. Through PIP reporting and APSR reporting, updates will be provided on progress. After the timeframe for the PIP the department will continue efforts to ensure sustainability of change through ongoing evaluations, monitoring and continued staff skill building to fully integrate the practice developments long-term. This will include identification of challenges and barriers, which may necessitate re-evaluation of the PIP and CFSP for changes due to unforeseen problems, funding, collaboration difficulties, governmental developments, etc.

**SECTION 4 – SERVICES: CHILD AND FAMILY SERVICE CONTINUUM**

A. **CENTRALIZED INTAKE (CI) PROGRAM:** A CI system was developed by DCFS in 2011. The Department provides a toll-free, statewide child abuse reporting hotline number (1-855-452-5437) that is available 24 hours a day, 7 days a week (24/7). The hotline is operated by Child Protection Services (CPS) teleworkers who work from home and are domiciled throughout the state. The Centralized Child Abuse Hotline is operated by approximately 46 Intake Teleworkers, 10 supervisors, three Child Welfare Managers, a Child Welfare Consultant, a Program Manager 2, and two support staff. Staff is selected based on the following guidelines/qualities:

- Experience in the CPS Program;
- Proficient in TIPS/ACCESS searches;
- Excellent computer, writing and typing skills;
- Ability to multi-task such as entering data, interviewing the reporter and searching for the client in TIPS and ACCESS;
- Excellent speaking and communication skills.

Quality Assurance:

- Customer Service: Assessing response to callers for courtesy, responsiveness during call and provision of information on resources, as needed.
- Call Response Metrics: Analyzing and improving our response time to calls, specifically:
  - Maintaining an average speed to answer four minutes or under
  - Meeting 85% goal or higher of calls answered directly by intake workers.

Customer Service: In order to provide an ongoing assessment of customer service, a child welfare consultant, not assigned to CI, reviews a minimum of 20 intake calls per month. The consultant evaluates the following areas:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Courtesy greeting with identification by name and DCFS Hotline;
- Displaying a manner of professionalism and politeness throughout the call;
- Call flow and information gathering is professional and absent of long pauses or when pauses occur, providing an explanation to the caller of current action/activity;

This program involves skilled, prompt and sensitive intake services in response to reports of abuse and neglect in families, foster homes, day care centers, registered family day care homes, and restrictive childcare facilities. Each intake is dispositioned as determined by law and Departmental policy. *For additional information on Centralized Intake (CI), please refer to the CAPTA portion of this plan.*

**Centralized Intake Update FFY 2021:** The activities planned for FFY 2020 were continued. These activities included a focus on accommodating the increase in online mandated electronic reports of abuse and/or neglect. The unit restructured the workflow of the current workforce to meet timeliness goals of answering calls and online mandated reporter portal intake entry this FFY. The restructuring had to balance “peak time call volume” with entering the portals. There are challenges as the on-line reporters often need follow up calls to get vital additional information needed to make good decisions. This can increase the time of entry thus reducing the number of available staff for calls.

Due to budgeting restraints, no permanent staff could be reallocated during this reporting timeframe, FFY 2020. An increase of five (5) intake workers and one (1) supervisor has been requested for the current SFY. However, five (5) Working as needed (WAE) intake workers (former DCFS staff) are used as a measure until the budget allows the addition of permanent staff.

**Quality Assurance and Training:** Centralized intake implemented a structure to develop and transfer QA trends to practice improvement. It included implementing weekly mandatory unit-wide participation; in-service briefings focused on core areas of intake responsibilities and included technology and troubleshooting skill-building, competencies in information collection, allegation usage and understanding definitions, and decision-making. These in-service briefing topics provide feedback and a transfer of learning opportunity for all staff. The unit has been using virtual learning opportunities through zoom presentations and recordings. The recordings are stored in the share center and available for future viewing by the current workforce and new hires. After each briefing, a real-time review helps measure the success of those briefings.

The Intake Manager Unit and Change Champions worked with CCWIS development teams and Unify in the development of the Intake module for CCWIS. Two major focuses include a redesign of the mandated on-line reporter portal (MRP) designed to capture sufficient information to improve the quality of on-line intake reports and will capture relative and needed information, thus contributing to good assessments and decision making. This redesign aligns with the information an intake worker would gather during a call. In addition, another important change was a formula design that auto-calculates a risk level value. The addition replaces a manual interpretation of policy to make risk assignments more consistent.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Other features have been identified in which the use of these features will result in more consistent practice, reduction of user errors, and up-to-date technology improvements that will reduce manual processes and redundancies. For example, a google address feature search that populates all associated persons to that address.

**COVID19 Impact on Hotline:** There was a significant decrease in speed to answer and increase of calls going directly to an intake worker, especially during schools' virtual classes. With this decrease there were less abandoned calls and a decrease in the average speed to answer during the pandemic. Time in reviewing and assigning a disposition decreased in time. This appears to support the need for an increase in workforce allocated to the hotline unit which would reduce abandoned call, a decrease in wait time, and timely supervisor and disposition of intakes.

**CI Activities Planned for FFY 2022:** Curriculum Development for new hires and ongoing training for all staff assigned to Centralized intake. The QA structure, including redesign from FFY 2021, will continue. This redesign will improve the feedback loop for continued learning. The agency is moving forward with implementing a full CCWIS system. Intake will continue to provide input to CCWIS development as it pertains to intake.

- B. CHILD PROTECTIVE SERVICES (CPS):** CPS is a legally mandated, specialized social service for children who are neglected, abused, exploited, or who are without proper custody or guardianship. The services include an assessment to determine if the child(ren) have been abused or neglected; a determination, if possible, of the person(s) responsible for the injury or harm; an assessment of the severity of the harm; an assessment of the current safety of the child in the home or facility and determination of whether a safety plan/intervention is needed to protect the child from harm; an assessment of future risk of possible harm; provision of emergency services as needed; and participation in court hearings, and timely referral to other programs and/or community service providers in order to protect the child(ren) or otherwise serve the families.

**CPS Update FFY 2021:** DCFS is committed to improving the assessment and decision making around risk and safety. As part of our federal program improvement plan, the Child Welfare Assessment and Decision Making Model (CWADM) was developed and implemented in January 2020 by DCFS to identify abuse and neglect, along with the needs and strengths of children and families, so that the best decisions are made with and for families. The model streamlined our safety assessment processes into one Form 5 Safety Assessment used by all primary programs, which assess all three-core components of safety, including threats of danger, child vulnerability and caretaker protective capacities. The implementation of the model included retraining staff on assessing safety and risk, all geared to enhance CPS worker' competency level to assess and identify safety and risk, implement an appropriate safety plan when needed, and ensure the services offered to children and families address their needs to enhance protective capacities. The first level of the training included an overview of the CWADM model and Form 5 Safety Assessment to all staff and occurred in December 2019. The training included an overview of the model, highlighting anticipated changes in each program's systems, policies and

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

practice. The DCFS completed CWADM Trainers and Practice Champions kickoff on December 12, 2019 to introduce the role of trainers and practice champions for the CWADM model. Louisiana began CWADM and Safety in Child Welfare online training in January 2020 to provide a roadmap of case assessments and safety decisions in Child Protective Services. CWADM Model and Safety in Child Welfare in person training revamping efforts began in March 2020 due to COVID-19. Training for the CPS units occurred February 2-12, 2021 regarding the Form 5 Safety Assessment.

The DCFS developed virtual CWADM Level 2 Training and the training was completed in October 2020 through December 2020. The virtual training is an advanced CWADM training for Managers and Supervisors. The CWADM process included initiating a case review process that began on November 20, 2020 and case consultation that began on November 30, 2020 to reinforce the core safety and risk and provides direct feedback to staff, and identifies systemic issues to inform training and further changes needed to enhance practice. CWADM Level 3 Safety Assessment Overview Online training completed by all staff from December 17, 2020 through January 31, 2021. Comprehensive Unit Based CWADM Application for CPS scheduled in February 2-12, 2021 for CPS units in Louisiana. CPS units in Louisiana completed trainings from February 23, 2021 through March 10, 2021 with the Family Service units. Ten sessions were completed with seven trainers, 29 CPS and FS units completed trainings.

**CPS Activities Planned 2022:** DCFS is committed to improve the assessment and decision making around risk and safety by continuing efforts of successful implementation of the Child Welfare Assessment and Decision Making Model (CWADM). Trainings will continue to ensure staff and stakeholders have a clear understanding of how safety, risk and service needs are assessed and addressed throughout the life of a case and affect daily decision-making. CPS trainings for CWADM will include more in depth training on safety planning. The CWADM Case Reviews will continue to monitor quality of assessments and decision-making and measure compliance and adherence to policy requirements. CPS will utilize the information to identify areas needing improvement and practice issues. Case Consultation will continue to reinforce the CWADM model, to provide direct feedback to and from staff, and to identify systematic and practice issues to inform the problem solving process and to provide training and further changes needed to the CWADM model to enhance practice.

In addition, in an effort to further incorporate the CWADM model into daily practice both internally and with our legal stakeholders, court orders and reports have been developed and/or revised to reflect the core definitions and concepts of the model. These documents are a result of an extensive amount of collaborative work with the Louisiana Supreme Court's Court Improvement Program, the Pelican Center for Children and Families, and other legal stakeholders across the state for at least one year. The documents/templates reflect this collaborative effort by weaving together child welfare practice with the state and federal requirements for each proceeding. The documents will be implemented on March 1, 2021 and DCFS will continue to work with staff and legal stakeholders to achieve consistency across the state with our child welfare practice and legal proceedings.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

CPS units are scheduled to participate in CWADM Model trainings April 21, 2021 through May 7, 2021. Ten sessions are scheduled with six trainers and 24 units identified.

- C. STATE AND CENTRAL REGISTRY (SCR):** The DCFS conducts State Central Registry (SCR) clearances on individuals as dictated by law. The State provides individuals with the right to appeal child abuse and neglect validity findings. The following services are provided through this program:
1. Tiered Validity System – Each valid allegation will be assigned to a specific Tier, which will determine whether the incident/perpetrator is placed on the State Central Registry or the state repository of abuse/neglect investigations, and for how long the incident/ perpetrator will remain on the SCR.
  2. Due Process – All individuals who were/are found to be a perpetrator of a valid allegation of abuse/neglect have the ability to appeal their finding to the Division of Administrative Law if their appeal rights have not been exhausted. This is handled through the Protective Services Review Team (PSRT).

**SCR Update FFY 2020:** The DCFS continues to conduct State Central Registry (SCR) clearances on individuals as dictated by law. In 2018, the Tiered Validity System was implemented and remains. Each valid allegation is assigned to a specific tier, which determines whether the incident/perpetrator is placed on the State Central Registry or the State Repository of abuse/neglect investigations, and for how long the incident/ perpetrator will remain on the SCR. The State continues to provide individuals the right to appeal valid findings of child abuse or neglect if their appeal rights have not been exhausted.

**SCR Activities Planned for FFY 2021:** DCFS will continue to conduct State Central Registry (SCR) clearances on individuals as dictated by law. The department will continue to assign each valid allegation to a specific tier, which will determine whether the incident/perpetrator is placed on the State Central Registry or the State Repository of abuse/neglect investigations. This determines how long the incident/perpetrator will remain on the SCR. Individuals will continue to be provided the right to appeal valid findings of child abuse or neglect if their appeal rights have not been exhausted. Additionally, DCFS expanded the provision of SCR checks in accordance with Families First Act requirements.

**D. PROTECTIVE SERVICE REVIEW TEAM (PSRT) “DUE PROCESS” UNIT**

The PSRT unit works closely with the Division of Administrative Law (DAL) to offer “due process” to individuals with valid findings of abuse and/or neglect. One group, which has developed a working relationship in this area, is the Department of Education to ensure that each owner, operator, employee, prospective employee, and/or volunteer in an Early Learning Center receives a State Central Registry Clearance and due process if they were identified as a perpetrator of abuse and/or neglect on the State Central Registry.

DCFS enhanced due process regarding CPS valid investigative findings on August 1, 2018. Any individual who is found to be a valid perpetrator of abuse and/or neglect can request an Administrative Appeal through the Division of Administrative Law. These individuals are afforded the right to a fair hearing if their appeal rights have not exhausted. Since

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

October 1, 2018, the Division of Administrative Law has received 1,367 appeals from valid perpetrators of abuse or neglect. The DCFS Protective Services Review Team (PSRT), is a state level working group, which reviews the CPS investigation case decision on certain cases in which a child abuse and/or neglect clearance is completed and a valid finding is determined. PSRT will provide a departmental decision regarding the validity decision, prior to the notification to the individual of their appeal right and the release of the SCR clearance information. The PSRT conducts administrative reviews on investigations, utilizing a standardized instrument, to determine if the validity decision and tier level determination meet policy requirements or if the validity decision, allegation, and/or tier level needs to be changed. The Louisiana Children's Code, definitions of Abuse and Neglect, as well as other DCFS Policy are the guides that is used to maintain or change validity decisions and/or tier levels.

DCFS maintains the confidentiality of investigative information, and only releases information as allowed by law. After the completion of a PSRT review, via clearance, the client will receive written notice of their appeal rights for any prior investigations in which they were identified as a perpetrator of a valid appealable finding. In most cases, such as requests for DCFS clearances for employment purposes, volunteer purposes, and foster care/adoptive placement, DCFS will not release the name of the perpetrator of a valid case of child abuse and/or neglect, until the individuals administrative appeal rights have been exhausted. It is the policy of the Department of Children and Family Services (DCFS) to allow all individuals the right to appeal their valid child abuse or neglect finding to an impartial decision maker, and this is done through the Division of Administrative Law (DAL). An individual does not have to request a Protective Services Review as these reviews are completed in some instances via a clearance process before the client is made aware of their administrative appeal rights; however, a client must request an appeal through (DAL) if they would like their case to be reviewed by a DAL Judge. It should be noted that individuals are placed on the State Central Registry (SCR) or State Repository (Repository) as a result of a valid child abuse and/or neglect investigation, after the exhaustion of an individual's due process rights.

The Department of Children and Family Services (DCFS) has a Tiered Validity System that determines an individual's placement on the State Central Registry (SCR) as a result of a valid child abuse and/or neglect investigation. The tiered system determines the length of time an individual remains on the SCR, and how long the information within the investigative record will be maintained in the State Repository (Repository).

The Tiered Validity System is a mechanism to assign each valid allegation to a particular tier, based on the degree of severity of the allegation. Each valid perpetrator of abuse and/or neglect will have a tier assignment for each investigation. When there are multiple valid allegations that are assigned to different tier levels, the highest tier level will be used for the SCR and State Repository. When the PSRT completes a review, the tier level is reviewed to ensure that the assigned tier level is aligned with the allegation and is appropriate and ensure the client is not placed in a tier that is higher or lower than the policy requirement as this could affect employability.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Please note the charts below differentiate the number of Protective Services Reviews (PSR) that were completed by the PSRT, and the number of Appeals that were received by the Division of Administrative Law. Many clients do not complete the administrative appeals process once a PSR has been completed despite the fact that they are made aware of the administrative appeals process.

<b>Appeals Requested to the Division of Administrative Law (DAL) from</b>		
<b>Worker Region</b>	<b>September 1 2018- March 31, 2020</b>	<b>April 1, 2020 – March 31, 2021</b>
CW Region 1 Greater New Orleans	175	92
CW Region 2 Baton Rouge	91	39
CW Region 3 Covington	179	82
CW Region 4 Thibodaux	91	44
CW Region 5 Lafayette	115	52
CW Region 6 Lake Charles	52	21
CW Region 7 Alexandria	77	31
CW Region 8 Shreveport	101	37
CW Region 9 Monroe	60	25
<b>Statewide Total</b>	<b>941</b>	<b>423</b>

<b>Disposition of Appeals Requested to the Division of Administrative Law (DAL) during FFY 2020</b>						
<b>Worker Region</b>	<b>DCFS Decision Maintained</b>	<b>DCFS Decision Overturned</b>	<b>Case Dismissed by Court</b>	<b>Case Dismissed by Client</b>	<b>Pending as of 1/14/2021</b>	<b>Total</b>
CW Region 1 Greater New Orleans	50	23	1	5	8	87
CW Region 2 Baton Rouge	25	9	1	4	3	42
CW Region 3 Covington	48	25	1	8	13	95
CW Region 4 Thibodaux	20	18	0	1	4	43
CW Region 5 Lafayette	27	10	0	3	3	43
CW Region 6 Lake Charles	22	2	0	3	2	29
CW Region 7 Alexandria	20	5	0	2	5	32
CW Region 8 Shreveport	20	5	4	8	2	39
CW Region 9 Monroe	18	10	2	2	2	34
<b>Statewide Total</b>	<b>250</b>	<b>107</b>	<b>9</b>	<b>36</b>	<b>42</b>	<b>444</b>

<b>PSRT Case Reviews Created FFY 2020</b>				
<i>(Note: PSRT reviews occur prior to the DAL appeal hearings and prior to the release of SCR or Repository Child Abuse Clearance results. PSRT reviews occur on both new and old cases.)</i>				
<b>Worker Region</b>	<b>Valid Finding Maintained</b>	<b>Valid Finding Overturned</b>	<b>Pending as of 1/14/2021</b>	<b>Total</b>
CW Region 1 Greater New Orleans	172	49	0	221
CW Region 2 Baton Rouge	100	22	1	123
CW Region 3 Covington	163	61	10	234
CW Region 4 Thibodaux	65	28	0	93
CW Region 5 Lafayette	97	32	5	134
CW Region 6 Lake Charles	77	28	1	106

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

CW Region 7 Alexandria	97	32	4	133
CW Region 8 Shreveport	115	8	11	134
CW Region 9 Monroe	119	37	5	161
Other	6	0	0	6
<b>Statewide Total</b>	<b>1,011</b>	<b>297</b>	<b>37</b>	<b>1,345</b>

**PSRT Update FFY 2021:** The DCFS believes SCR clearances through DCFS decreased due to the pandemic during the reporting period. In addition, Louisiana has experienced a reduction in employment at residential and care facilities that produced fewer SCR clearances through DCFS. As a result, there have been fewer individuals applying for employment that requires SCR clearances through DCFS which in turn creates a decrease in the number of PSRT reviews required. It is believed the SCR clearances will increase and better align with prior years’ SCR requests as employment rates increase and the COVID-19 restrictions are lifted.

During FFY 2021 reporting year, the number of investigations have decreased from previous years. It is believed the decrease in investigations is due to the decrease in the number of reports coming from the school system. We believe this factor contributed to a decline in the number of children in educational settings due to COVID-19 restrictions as DCFS has historically received increased investigations from education providers. In addition, Louisiana experienced multiple hurricanes during the federal reporting year that attributed to the decline in investigations. The occurrences are believed to cause a decline in reports in the Centralized Intake Program and cases requiring child protection investigations. The decrease in the number of child protection investigations ultimately caused a decrease in the number of valid findings that directly caused a decrease in Administrative Appeals filed with DAL. During the current reporting period, Louisiana received 15,102 investigations, which is a decrease from 3,945 of the prior year.

**PSRT Activities Planned 2022:** DCFS continues to examine methods to modify the PSRT and appeals process. DCFS continues to consider the possibility of including a two-step process for clients in relation to due process. The two-step process provides the client with an opportunity to appeal the finding should the internal review maintain the validity decision. DCFS will continue to provide clients with the right to appeal valid findings through DAL. The client will continue to be afforded their due process rights through alternative contact methods that do not include in-person contact such as telephone or through video conference mechanisms.

- E. FAMILY SERVICES (FS) PROGRAM:** Provides services to families following an allegation of child neglect and/or abuse when immediate safety concerns appear manageable, yet future risk of harm continues to be a concern. These families have been assessed as needing services provided while the child remains in the home. The families are encouraged to voluntarily partner with the department to improve caretaker protective capacities and reduce risk of future maltreatment to their children. However, in some instances, the department does seek court intervention to gain family cooperation. In these situations, court involvement is needed in order to encourage compliance with the case plan and recommended services by the caretaker and prevent further child abuse or neglect from occurring. In-home preventive services are provided on a statewide basis. Workers

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

conduct comprehensive assessments of family functioning to identify and enhance critical parental protective capacities as it relates to safety and risk of future harm.

Case plans are developed in collaboration with the families with consideration of their perspective and the overarching goal of strengthening and sustaining the family unit. Case plan actions are agreed upon to enhance the parental protective capacities and provide the children a safe and stable home environment. The FS worker may arrange for services based upon the family assessment. Services may be concrete and focused on accessing resources to address basic needs such as food or shelter, or may be focused on more complex issues requiring medical or therapeutic intervention.

**FS Update FFY 2021:** FS Program Consultants will continue staff development efforts, including consultation and training, focused on the following:

- Child Welfare Assessment and Decision Making Model revamped the manner in which FS assesses families as it relates to assessment and risk
- Assessment of Family Functioning was revised as it relates to aligning with the CWADM model July 2020.
- Family Service Policy now includes case planning with the child and family effective January 2020. The case plan serves to provide specific steps and actions needed to accomplish changes and allows the family to have a voice regarding the case planning process.
- Crossroads NOLA has continued to provide Trust- Based Relational Intervention (TBRI) training to staff, families, foster parents and caregivers. Staff are encouraged to incorporate the TBRI principles into practice.
- Trauma Behavioral Health (TBH) screens are continuing to be used. An explanation of screening practices has been incorporated into new worker training. Regions are provided TBH compliance results. Regions are encouraged to complete thorough monitoring whether the regions reach the 85% goal of completion through monitoring. FS Consultants will continue to support staff in an effort to incorporate TBH screening and assessment into practices and treatment.
- Structured Decision Making (SDM) use continues in FS. SDM revised in Louisiana to align with CWADM model.
- The DCFS revised policy and timelines in January 2020 to provide clear expectations of timely engagement in the assessment process to ensure case plan goals are congruent. Child Welfare Specialists received family engagement trainings and supervisors completes and review with client to assess worker engagement. The goal is to ensure engagement is timely and the service meeting is quality expectations.
- The DCFS continues to use Family Search and engagement efforts in addition to Kinship Navigator services for FS workers to assess family connections and support relative and fictive kin placements when out of home placements are needed.
- The DCFS continues to monitor and support FRC staff and incorporate Quality Parenting Practice (QPI) principles into CW practice. FS Consultants offer assistance and guidance to FRC staff and DCFS local office staff providing support services for families with concerns due to child maltreatment. The local office guidance includes consultation from the FS Consultants through staffing complex cases and guidance on

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

decision making. FRC's assure that region specific services offered meets the needs of DCFS clients in a particular area.

- DCFS continues to hold quarterly meetings with CARA Liaisons for each region that include FS Consultants and community stakeholders (OPH, PBH, Law Enforcement, Early Steps, Kid-Med, hospital health, Early Education staff, and other substance abuse providers). The MCC parish coordinators have been added to quarterly meeting.
- COVID Protocol – FS Staff uses revised COVID-19 protocol for cases with a safety plan, or when there is at least one child under the age of three (3), there is to be at least two in-person visits per month. In all other cases, the worker should hold at least one monthly in-person visit with all household members and additional required visits via visual and/or verbal communication according to SDM risk level.

**FS Activities Planned FFY 2022:** FS Program Consultants will continue staff development efforts, including consultation and training, focused on the following:

- Child Welfare Assessment and Decision Making Model; training and implementation of safety and risk assessment for FS cases. Supportive consultation and evaluation of CWADM statewide practice.
- Assessment of Family Functioning; Training of AFF revisions done to align with the CWADM.
- Case Planning with Child and Family; Consultation and support of case planning practices.
- Trust- Based Relational Intervention (TBRI); Crossroads NOLA has continued to provide TBRI training to staff, families, foster parents and caregivers. Staff are encouraged to incorporate the TBRI principles into practice
- Trauma Behavioral Health (TBH) Screens; TBH screens are continuing to be used. TBH screening and practice is reviewed in new worker training. Regions are provided TBH compliance results. Regions are encouraged to complete their percentage of completion by monitoring. Support is provided to Regions to improve compliance in this area.
- Structured Decision Making (SDM) tools; SDM use continues in FS. Training and evaluation of the compliance with the SDM system revisions.
- Quality and timely engagement of clients served; Consultation and support of continued timely engagement and assessment process to ensure case plan goals are congruent with Agency concerns.
- Monitor and support FRC staff and incorporate Quality Parenting Practice principles into CW practice
- Discovery and elaboration sessions with CCWIS development team for FS program case management module.
- FS Consultants will offer assistance and guidance to FRC staff and DCFS local office staff providing support services for families with concerns due to child maltreatment; and, the local office guidance includes consultation from the FS Consultants through staffing complex cases and guidance on decision-making. FRC's assure that region specific services offered meets needs of DCFS clients in a particular area.

**F. FOSTER CARE (FC) PROGRAM:** Foster Care (FC) services include substitute, temporary care (e.g., foster family home, residential care, kinship care or youth living

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

independently), and are utilized when the child's health and safety are at risk if the child remains in the home of their parent(s)/caregiver(s) or the child has no available caregiver. The state is awarded legal custody of the child by the court of jurisdiction. The court, legal system, Court Appointed Special Advocate (CASA), foster parents, private and public providers, relatives and youth work with departmental staff and parents toward the achievement of permanency for the child/youth. Intensive case management services are offered to families to help them reach a point where the child can be safely returned home, if return home is appropriate. If return home is not in the child's best interests' services are provided to achieve an alternative permanent family setting for the child. Case management services include efforts to engage relatives in the process of resolving the risk issues in the home, providing support for the family and connections for the child through ongoing communication and placement consideration for the child prior to considering other placement options. Throughout the time a child remains in foster care the child is provided an array of services to ensure well-being, such as basic daily care, medical assessment and care, educational/ developmental assessment and care, trauma/ mental health/ behavioral/ emotional assessment and care, contact/ communication with family and other important connections, etc.

**Foster Care Update FFY 2021:** The Program Transfer Staffing form was revised to reinforce the CWADM process and include prompts for discussion around the three safety principles. The Foster Care case plans were revised to clearly identify the conditions for return and diminished protective capacities on which the case plan is to be focused. The Structured Decision Making (SDM) tool was updated to reflect the CWADM process. The Form 5 (Safety Assessment) replaced the Present and Impending Danger Safety Assessment and will be utilized in the Foster Care program as the official safety assessment tool. The structure of the Form 5 was revised to be more streamlined in an effort to promote better decision-making. A comprehensive safety assessment is required as a part of the Risk Reunification Safety Review.

DCFS continued implementing Comfort Calls and Icebreaker Meetings to foster relationship development between birth parents and foster caregivers. Comfort calls were held upon initial placement of a child in foster care, regardless of care setting. The purpose was to provide information to the birth parent as to the child's safety, to introduce the foster family or caregiver providing care to the child, and to facilitate the exchange of information about the child from the birth parent to the foster caregiver. Through this exchange of information, the department reduced trauma to the child by the provision of more informed, quality care to meet the child's needs. To be most effective, these calls were predominately made within one to two hours of the arrival to the foster care setting; however, due to some circumstances preventing holding some calls at that time, some calls were held within 24 hours.

Additionally, Comfort Calls were held with subsequent moves or care setting changes for the child. The calls were held between the new caregiver and birthparent and depending upon length of time in prior care setting, the previous caregiver.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Ice Breaker meetings are critical for the exchange of information about the child from the birth parent to the foster caregiver and as such were held within three to five days of a child entering foster care. The meetings included birth parent(s), foster caregiver(s), the child and foster care worker. The purpose of the meeting was to exchange information about the child known exclusively by the birthparent or previous caregiver, to support better quality care of the child and to better meet the child's needs. An additional goal of the meeting was to facilitate the development of the relationship between the birth parent and foster caregiver.

In an effort to improve engagement and enhance practice within Family Team Meetings (FTM) with parents, youth and stakeholders, Child Welfare Managers are participating in all initial FTMs held in the Foster Care program. In addition to participation in the FTM, Managers were required to complete a Case Review Instrument and FTM Manager Evaluation Instrument at the time of the initial FTM.

The Manager completed the first tool, Case Review Instrument, prior to the initial FTM, which is designed to ensure that services/assessments provided prior to the FTM, are completed accurately and considered during case plan development. The second tool, FTM Manager Evaluation Instrument, was completed at the conclusion of the initial FTM. The Manager participated in the initial FTM as a silent observer of the process and ensured that goals identified in the FTM considered risk and safety and were linked to assessments conducted prior to the FTM. More information on Foster Care and engagement may be found in the Assessment of Outcomes / Plans for Improvement Section of the APSR under Engagement of Youth, Caregivers and Other System Partners.

Policy 6-305 Guidelines for Care Setting Decision Making for Children Under Age Six was revised. Prior to or immediately upon a child entering foster care, it is required that a diligent search for appropriate relatives/fictive kin be conducted in order to assess family members for placement of the child. Due to the time-sensitive nature and importance of attachment to a primary caregiver for infants and young children, the Family Connections form was updated, shall be completed with all available information within the first 10 days of a child entering foster care, and should be used as a working document to add connections as they are discovered over the course of the child's time in foster care. The form shall be attached to the court report submitted in preparation for the Disposition Hearing. Supervisors shall review the progress of the completion of the Family Connections Form and notification to adult relatives weekly until all known relatives are notified.

The Department's responsibility to notify relatives of the child's entry into care is fulfilled by sending the Relative Notification Form. The form letter was updated and shall be mailed no later than 5 working days from the date an address is provided to the worker. The letter explains the responsibility of the relative to indicate a desire to provide placement for the child, as well as the potential consequences of not notifying the Department timely of their interest in doing so.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

For relatives who were sent a Relative Notification Form, it is expected they will make their interest and intent regarding the child, known to the department within 60 days. The intention may be to request legal custody, guardianship with or without a guardianship subsidy, or certification as a foster/adoptive parent. Once a relative has notified the Department of their interest in providing a home for the child, all preliminary assessments should be started immediately (criminal record checks, State Central Registry) to determine what options are available for placement. If the relative is interested in becoming a foster/adoptive parent for the child, it is expected they will begin the certification process as soon as possible, in accordance with the decision about the most appropriate transition plan for the child.

Moreover, in policy 6-305 transition planning was updated. Prior to any move of a child under age six, the case and the transition plan shall be reviewed and approved by the supervisor. If the child has been in the current placement for three months or more, or if the proposed move would be the third move or more for the child regardless of the time spent in any previous placement, there shall be a formal staffing to allow for input of the child's team (current caregiver, prospective caregiver, CASA, any treatment provider involved with the child, child's attorney, etc.) and shall include the supervisor, manager and Regional Program Specialist. The transition plan should consider the child's best interest, and to the extent feasible, multiple, extended visits, such as overnight visits as well as other contacts such as SKYPE, FaceTime, etc., to ensure the most positive experience possible for the child. These activities should occur both prior to the move and after the move to allow the child to have a safe separation from previous caregivers and attachment to the new caregivers.

The Foster Caregiver Progress Form was developed to provide an opportunity for the foster caregiver to provide information directly to the court. After placement and before the first CINC hearing, the caseworker shall provide the foster caregiver with several blank Foster Caregiver Progress Forms and a copy of the Court Process and Legal Rights Guide for Foster Caregivers. The Court Process and Legal Rights Guide for Foster Caregivers provides an overview of the CINC court process and hearings and legal rights that foster caregivers do and do not have at CINC hearings. It includes instructions on how foster caregivers can exercise their right to be heard at hearings, including further information relative to completing and submitting the Foster Caregiver Progress Form.

The Foster Caregiver Progress Form is one of the ways foster caregivers can exercise their legal right to be heard at the hearing but completion of the form is not required. Foster caregivers can submit the Foster Caregiver Progress Form to DCFS even though they may not attend the hearing. Instead of, or in addition to, attending the hearing and providing information about the care and treatment of the child verbally to the court, the foster caregiver may complete and submit the Foster Caregiver Progress Form to the caseworker prior to the hearing. If the foster caregiver timely submits the Foster Caregiver Progress Form to the caseworker, the caseworker should take the following steps depending on the type of CINC hearing:

- Continued Custody Hearing, Answer Hearing, and Adjudication Hearing: For court hearings where a court report is not required, the Foster Care case worker shall

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

provide the form to the CPS case worker (if the Foster Care case worker does not attend) to make copies of the form and be prepared to distribute them at the hearing to the court, counsel of record, unrepresented parties, and CASA (if appointed) upon approval of the court.

- Disposition Hearing, Case Review Hearings, and Permanency Hearings: The Foster Care caseworker should attach the form to the court report, and copies should be provided to counsel of record, unrepresented parties and CASA (if appointed) as required for court reports.

Upon completion by a foster caregiver, the Foster Caregiver Progress Form will contain hearsay information and, therefore, can only be accepted into evidence by the court where hearsay evidence is admissible. Be advised that in some CINC hearings (for example, at the Adjudication Hearing and hearings to Terminate Parental Rights), courts have to abide by the strict rules of evidence.

Even if a foster caregiver submits the Foster Caregiver Progress Form, they still have the right to attend and be heard at any hearing regarding a child in their care. Per Ch. C. Article 623, if a foster caregiver attends the hearing, the court must solicit information from the foster caregiver about the “care and treatment of the child” even if they submitted a Foster Caregiver Progress Form.

Policy 6-1230 Pregnancy and Impending Fatherhood was revised to include breastfeeding. All mothers who desire to breastfeed or continue to breastfeed should be provided the opportunity. When a mother desires to breastfeed and it does not pose a risk of harm to the infant then the agency shall support the mother in successfully breastfeeding. If there becomes a concern with the mother’s ability to provide safe and appropriate breast milk, the caseworker shall encourage the mother to obtain approval from her treating physician prior to providing the infant or the infant’s caregiver with breast milk.

When the mother and infant are not in the same home, the mother should be provided resources to support breastfeeding and shall be provided with the ability to store and transport breast milk. The agency should provide the mother with resources to assist with initiating breast feeding or continuing to breast feed.

The caseworker should assist the mother with proper labeling and storage of the milk until it can be provided to the infant’s caregiver. The caseworker shall encourage the infant’s caregiver to utilize the mother’s breastmilk in lieu of formula whenever all possible.

In light of the public health crisis related to COVID-19, the department learned that it is critical for children and youth in foster care to be able to maintain consistent contact with their families, siblings, and other support people in their lives. It is imperative that the DCFS case manager, the child’s attorney, the court and CASA, if applicable, maintain consistent contact with the children and youth. Communication is critical to ensuring the safety, permanency and well-being of children and youth who have been removed from their homes and placed into foster care. Prolonged absences or breaks in communication with the children and families place children’s safety and well-being in jeopardy and may

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

lead to unnecessarily long stays in foster care. As such, the department was able to provide a device to those foster parents, youth and families we serve who did not have access to a device with virtual communication capabilities. The department is exploring the possibility of providing youth, of a pre-determined age, with a device upon entering care.

DCFS has implemented a process of surveying our families, youth and foster caregivers. The purpose of this anonymous survey is to solicit feedback about the department's level of collaboration with others, as well as our level of engagement and responsiveness. The survey being used is the General Engagement Survey.

A Foster Care Support Line: 1-833-788-1351 was added to the RAVE Mass Communication Alerts and will be sent to all DCFS foster caregivers where a mandatory evacuation is issued. The purpose of the RAVE Mass Communications alert is to verify the safety of these individuals, requesting a response within 24 hours via text, or by calling the Foster Parent Support Line. Designated staff initiate contact with DCFS caregivers and EFC youth that do not respond to the RAVE Mass Communications alert after the first 24 hours.

Policy changes were made to update:

- The steps in ongoing case planning to include: Review and assess condition for return to determine if conditions/behaviors have been met and the child can safely return to the parent's custody;
- DCFS case plan requirements: Documentation of conditions for return describing what behavior changes are required in order to safely return child(ren) to their parent's care; and
- Purpose of first family case planning meeting: To state the conditions for return.

The following policies were revised:

- CT Case Review and Permanency Court Report
- CT Permanency Hearing Order
- CT Case Review Hearing Order
- CT Disposition Court Report
- 6-305 Guidelines for Care Setting Decision Making for Children Under Age Six
- 6-835 Judicial Hearings for Case Review, Permanency and Restoration
- 6-1000 Educational Services to Children in Foster Care
- 6-1230 Pregnancy and Impending Fatherhood
- 6-1410 Voluntary Surrender of a Child in DCFS Custody
- 6-1630 Transportation Expenditures for Foster Children
- 20-400 Foster Care Program Spec Board, Retainer, Clothing, DC, Respite and Placement Codes
- CW Form: Relative Notification Letter
- CW Memo 21-001: COVID-19 Update (In response to the COVID-19 resurge)
- CW Memo 21-002: Supervisory Engagement Surveys
- CW Memo 21-009: COVID-19 Update (Resume in-person contacts)
- CW Memo 21-010: COVID-19 Vaccine (Vaccine for foster children/youth)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Activities Planned FFY 2022:** Foster Care (FC) will continue services including substitute, and temporary care (e.g., foster family home, residential care, kinship care or youth living independently). FC will continue utilizing services to care for the child and address parental or caregiver's needs when the child's health and safety are at risk if the child remains in the home of their parent(s)/caregiver(s) or the child has no available caregiver. Since the implementation of QPI (Quality Parenting Initiative), the department continues to build upon efforts in supporting quality parenting and strengthening families. Comfort calls will continue to be held upon initial placement of a child in foster care, regardless of care setting. Through this exchange of information, the goal is to reduce trauma to the child by the provision of more informed, quality care to meet the child's needs. To be most effective, these calls shall be made within one to two hours of the arrival to the foster care setting, but if circumstances prevent holding the call at that time, they shall be held within 24 hours.

Additionally, Comfort Calls will continue to be held with subsequent moves or care setting changes for the child. The calls should be held between the new caregiver and birthparent and depending upon length of time in prior care setting, the previous caregiver.

Ice Breaker meetings will continue to be held within three to five days of a child entering foster care. The meetings shall include birth parent(s), foster caregiver(s), the child and foster care worker.

Child Welfare Managers will continue to participate in all initial FTMs held in the Foster Care program, and complete a Case Review Instrument and FTM Manager Evaluation Instrument at the time of the initial FTM.

As we move forward, the department is exploring the possibility of providing youth, of a pre-determined age, with a device upon entering care. Again, we learned that it is critical for our children and youth in foster care to be able to maintain consistent contact with their families, siblings, and other support people in their lives.

The Department is exploring providing additional funding upon availability for board payments to foster caregivers who care for minors in custody with children. This is an effort to provide additional support for minor parents and their children to be able to remain placed together as well as providing for the continuation of building their solid attachment.

- G. EXTENDED FOSTER CARE (EFC) PROGRAM:** The criteria for program services to youth are: Adjudicated as a Child in Need of Care (CINC); Aged out of foster care on 18th birthday; Currently 18-21 years old. The youth has to meet one of the following: Enrolled in a secondary educational program or program leading to equivalent credential; Enrolled in an institution that provides postsecondary or vocational education; Participating in a program or activity designed to promote employment or remove barriers to employment; Employed at least eighty hours per month; or, incapable of above educational or employment activities due to a medical condition.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

EFC is a voluntary program and youth must sign a voluntary agreement to participate. Youth in EFC are no longer in the custody of DCFS. Youth in EFC are participating with an extension of foster care services. They retain all of their adult rights. The DCFS will be utilizing the evidence-based *LifeSet* model through Youth Villages as the case management model for EFC. This model is proven to have improved outcomes for youth. All current Foster Care, care-setting types will be available to EFC youth. Each care setting will be making a decision as to accepting/keeping EFC youth. The DCFS will be developing additional placement types available only to EFC youth to include additional transitional living facilities and housing options, host family homes, and supervised independent living situations.

**EFC Update FFY 2021:** In Calendar Year (CY) 2020 there were 288 young adults assisted through the Extended Foster Care (EFC) program, which included five (5) EFC Guardianship subsidies and 21 EFC Adoption subsidies. Extended Foster Care (EFC) completed the rate setting. The Administrative Review (AR) position was filled and program development began. EFC continues in monitoring and tracking all AR's. EFC currently has AR panels in every region across the state of Louisiana except Baton Rouge with plans to expand to the Baton Rouge Region within the next year. EFC facilitated statewide training for CASA on the EFC program and the *LifeSet* model. An EFC training was developed for DCFS Foster Care Staff.

The Wendy's Wonderful Kids (WWK) Recruiter program has been developed for EFC and is operating in both Covington and Baton Rouge regions. A new recruiter was hired due to staff promotion.

**EFC Activities Planned FFY 2022:** EFC will issue a Request for Proposal (RFP) for the Transitional Living Program (TLP) and award contracts. EFC continues the development of host homes for EFC young adults. EFC continues to work towards developing criteria and process for a stipend increase. EFC will assess the need for and develop additional types of placements for young adults. EFC will evaluate the Wendy's Wonderful Kids (WWK) specialized recruiter program for ages 18-21 piloted in Covington Region and determine how to move forward in making this a statewide effort. EFC will continue the administrative review model development and assess the partnerships with stakeholders with plans to increase knowledge and variety of stakeholders supporting this area of work.

**H. SERVICES TO PARENTS (SP) PROGRAM:** The SP program provides services to parents in families where at least one child has entered the foster care system with the goal of supporting the family in maintaining connections to the child while in foster care and collaborating to achieve reunification with the child. When it is not possible for the family to improve parental protective capacities and remove or diminish the safety threats to the child, the department strives to continue teaming with the family to promote the achievement of permanency for the child through other options and preserve connections to the greatest degree possible.

**SP Update FFY 2021:** DCFS continued to provide services to parents using technology to ensure all parents have access to their child during Covid-19. DCFS continued to work

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

with service providers to provide services through Covid-19 and reunited children with their parents awaiting reunification. DCFS developed *A Parent's Guidebook about Louisiana's Foster Care Program* with the help of parents that have gone through similar experiences. This guide provides parents with information regarding the agency and what to expect. This guidebook provides the parents with the DCFS mission, principles of practice, explains how the child welfare system works, and explains the services and programs available. The guidebook provides parents with a copy of their rights and responsibilities, answers frequently asked questions, provides descriptions of court hearings, Family Team Meetings, and has a glossary of frequently used terms.

Policy 6-201 was updated regarding diligent/concerted efforts to visit parents. It is the policy of the Department of Children and Family Services, in cases where a parent's whereabouts are unknown or the parent is uncooperative, the case manager conduct at least two meaningful attempts to locate or contact the parent per month. Meaningful attempts to locate or visit include attempts at in-person contact (i.e. scheduled and unscheduled home visits) and phone calls. Also expected is in-person or phone contact with family members, public service agencies, and/or service providers to attempt to locate the parent. It is imperative documentation in the family's record reflects efforts to locate and /or visit with all potential parents of a child in foster care.

**SP Activities Planned FFY 2022:** DCFS plans to continue providing services to parents in families where at least one child has entered the foster care system with the goal of supporting the family in maintaining connections to the child while in foster care and collaborating to achieve reunification with the child(ren). Please refer to the Foster Care section of the plan for information concerning a number of services provided to parents whose children are in foster care as we continue to support and strengthen families in their efforts to be reunified with their children.

- I. **ADOPTION (AD) PROGRAM:** The goal of the AD program is to provide permanency for children through adoption. Foster care (FC) adoption is a permanency option for children who cannot safely return to their biological families. The goal of adoption is pursued as a permanent plan when the court of jurisdiction determines the child's family is either unable or unwilling to resume care of the child, and the child's needs for safety, permanency and well-being are best achieved through adoption. Pre-adoptive services provided by the FC worker for a child with a goal of adoption include helping the parents voluntarily relinquish parental rights, preparing the judicial termination of parental rights packet in the event the parents are unwilling to surrender, providing ongoing case management services, and preparing the child for the adoptive process. Some of the more important services delivered by the adoption worker include completing a child evaluation/assessment, preparing children for adoption, assisting in the recruitment of child specific adoptive homes as needed, selection of adoptive resource families and placement of children, providing supportive case management services, processing adoption subsidy applications, and participating in the adoption finalization process.

Other post-adoption services are provided within budgetary constraints to any adopted child and his or her adoptive family including those families having adopted

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

internationally. The Department's regionally based Family Resource Centers (FRC) provide supportive post-adoptive services to all Louisiana adoptive families, and parish based child welfare (CW) offices offer family services (FS) on a voluntary basis to adoptive families seeking assistance post adoption finalization.

The DCFS AD Program is responsible for managing the Louisiana Voluntary Registry. This entails providing information to adopted persons from closed adoption records as allowed by state law, management of the state's adoption petition file-room, and the handling of all Louisiana public and private agencies, intra-family, and private adoption petitions.

- **Louisiana Voluntary Registry:** Louisiana is a closed adoption state with sealed adoption records, but in 1982 the State Legislature authorized a registry to allow contact between adopted persons and their biological family members should both parties register. The registry is maintained and operated exclusively by the DCFS state office AD staff. In 2008, legislation was enacted authorizing the release of specific information from the sealed adoption record to adopted persons upon their written request, which includes verification of adoption, name of the court where the adoption was finalized and the name of the placing agency or attorney. In 2010, legislation was enacted expanding the list of persons eligible to register to include additional relatives, adoptive parents, minor adopted children and descendants of deceased adopted persons and deceased biological parents. The registry provides non-identifying information reports to persons adopted from a number of private adoption agencies and attorneys' no longer in operation transferring their records to DCFS, as mandated by Louisiana law.
- **Adoption File Room:** Louisiana maintains a centralized adoption file room located in the DCFS headquarters building in Baton Rouge. The AD staff is responsible for maintaining and processing the confidential adoption petition records of every adoption conducted in the state of Louisiana back to the 1920's. Additionally, all adoption records transferred to the Department from adoption agencies no longer in operation and retired adoption attorneys are maintained in the DCFS adoption file room. Authorized Adoption Section staff to provide information as allowed by law to members of the adoption triad access the records frequently. However, records are only released by court order and no adoption record is ever destroyed.

**Adoption Update FFY 2021:** DCFS has 21 children that are freed for adoption and either have an identified resource but are waiting for the Adoption Agreement Form (427-B) to be signed, or DCFS is actively recruiting a permanent resource for them. Monthly calls are held with each Region to discuss any possible delays in the foster family signing the Adoption Agreement Form (427-B) and how program staff may assist.

Of the 31 adoptions finalized in this current FFY, 10/01/2020 – 05/13/2021, 12% (4) were finalized within the Adoption and Safe Families Act (ASFA) guidelines, meaning the children achieved permanency within 24 months of entering care.

The above information is regarding current numbers and a brief synopsis of our efforts thus far regarding the 2021 Adoption Call to Action work. DCFS is excited about the progress

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

made as we continue to build upon our efforts to reduce the barriers and delays for waiting children in order to achieve permanency timely.

DCFS has 95 children that are open in Foster Care and have the goal of Adoption, but the parental rights have not been terminated or, as in a few situations, the child is freed for adoption and the worker is in the process of transferring the case to the adoption unit.

The Call to Action database/dashboard was created. The Louisiana Department of Children and Family Services (DCFS) capped National Adoption Month with a virtual event celebrating 549 families who adopted 756 children from foster care during the past year.

Due to the ongoing coronavirus pandemic, the state's 22<sup>nd</sup> Annual Adoption Celebration – like many of this year's adoption ceremonies – was held virtually via Zoom. The event featured First Lady Donna Edwards, video shout-outs to the adoptive families in each region of the state, a video highlight of an adoptive family, a photo slideshow of adoption ceremonies throughout the year and presentation of DCFS's annual Adoption Awards. The 756 adoptions finalized during the 2020 Federal Fiscal Year marked the fourth highest number of adoptions from foster care in Louisiana in a single year. More than 125 of those adoptions happened completely virtually through videoconferencing such as Zoom. Countless others were partially virtual, with the adoptive family and attorneys present in court while extended family and friends participated by Zoom.

Collaboration with our Data Unit has continued to enhance and expand the state's tracking system to monitor children that have the goal of adoption and those freed for adoption. With the available enhanced data, monthly calls are scheduled with the nine regional adoption units to discuss barriers, identify solutions, and determine trends statewide, regionally, and by parish. DCFS continues working to enhance efforts in processes that will reduce the time towards permanency for those children without an identified adoptive resource.

DCFS monitors all pending cases of children freed and placed with an out-of-state adoptive home through Interstate Compact on the Placement of Children (ICPC). Some of the internal barriers identified thus far are additional training opportunities for staff to ensure the correct types of home studies requested and when, submitting complete referrals, placements occurring prior to receiving an approved home study, the time to receive the decision from the receiving state, and for various reasons, non-compliance by the adoptive resource. Through the monthly staffing of each child's case, staff are able to collaborate and identify solutions to eliminate the barriers, thus decreasing the time involved in the overall process.

A Louisiana Service Plan through AdoptUsKids was approved. Louisiana continues to collaborate with AdoptUsKids to develop a Speaker's Bureau to assist in the recruitment and retention of foster/adoptive families who support permanency plans such as reunification and adoption for older youth, sibling groups, and medically fragile children/youth.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Louisiana continues exploring the options of utilizing the RAVE system through our Department as an additional outreach to educate and share information on the recruitment needs of the children and youth we serve with currently certified foster caregivers. This mechanism allows us to send information to foster caregivers often and quickly.

We continue to ensure that the information and photographs representing our waiting children on the AdoptUsKids website is updated. America's Kids Belong has generously collaborated with the department to provide professional photographers and videographers for these children. Additionally, staff are continuing to develop their skills to access the full array of helpful tools within AdoptUsKids.

DCFS continued monthly staffings with field, reviewing data trends, progress and areas needing continued improvement. The Adoptions Unit continued to assess the usefulness of how data is compiled and rolled out, along with assessing additional training needs for AD staff. The Adoptions Unit provided training to Foster Care Staff by AD Consultants on steps to take in order to achieve timely transfer of case when child is freed for adoption (medical records, birth certificate, etc.) and provide input to CCWIS development on necessary processes to monitor movement and timeliness of case activities. Updated policy revisions were submitted for review to be incorporated within the department's policy as needed.

The Adoptions Unit continued to collaborate with the DCFS Communications Unit to develop a plan to have public service announcements (PSA) aired in communities throughout the state, emphasizing the need for adoptive families for older youth and sibling groups. Baton Rouge was a concentrated area to which the PSA was utilized this past year.

**Adoption Activities Planned FFY 2022:**

- Accountability to achieve timely permanency and reduce time for waiting children.
  - Continue monthly staffing with field, reviewing data trends, progress and areas needing continued improvement.
  - Assess usefulness of how data is compiled and rolled out.
  - Assess additional training needs for AD staff.
  - Provided training to Foster Care Staff by AD Consultants on steps to take in order to achieve timely transfer of case when child is freed for adoption (medical records, birth certificate, etc.).
  - Provide input to CCWIS development on necessary processes to monitor movement and timeliness of case activities.
  - Collaborate with the Bureau of General Council (BGC) to identify delays within their scope of work, such as the filing of TPR petitions timely.
  - Submit updated policy revisions for review to be incorporated within the department's policy.
- Community awareness of need for timely permanency.
  - Collaborate with Home Development to develop a plan for certified caregivers who are interested in adopting becoming registered on AdoptUsKids.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Initiate discussion with Managed Care providers to assess their ability to support National Training Initiative (NTI) Adoption Training for the mental health providers in their network.
- Identify Mental Health providers with a specialty in adoption issues for pre and post adoptive services.
- Collaborate with DCFS Communications Unit to develop a plan to have public service announcements aired in communities throughout the state, emphasizing the need for adoptive families for older youth and sibling groups.
- Staff awareness of need for timely permanency.
  - Assess need for NTI Adoption Competency Training for other program staff, to include FC, HD and Bureau of General Counsel.
  - Wendy's Wonderful Kids Recruiters present their roles and responsibilities to each region and collaborate with Foster Care (FC) staff for the need to individualize trainings with FC Units.
  - Ongoing discussions with regions regarding trends with ASFA delays; and delays in continued court hearings. Strategize ways BGC can assist
- Research Pennsylvania's effort to improve court collaboration.
- Research surrounding a smoother process to reinstate parental rights when appropriate.
- Identify duplicated processes within the program.
- Collaborate with LBCH regarding post adoption services/referrals within the Shreveport Region. DCFS and LBCH will explore expanding services including a support group for adoptive parents to other areas.

**J. ADOPTION SUBSIDY (AS) PROGRAM:** Post-adoption services in Louisiana are offered principally through the AS and Medical Assistance Program (Medicaid), which are federally and state funded. AS services are provided to eligible families until the child's 18th birthday and the Medicaid portion is extended to age 18. The Interstate Compact on Adoption and Medical Assistance (ICAMA) is a major component of the Adoption Subsidy Program, which extends post adoption services across state lines. The Compact provides a framework for interstate coordination to remove barriers to the adoption of children with special needs and facilitates the interstate transfer of adoptive, educational, medical and post adoptive services. Adoption and medical assistance (Medicaid) are the primary issues driving the need for interstate collaboration in interstate adoptions. All families who adopt may apply for an adoption subsidy irrespective of the type of adoption. Many private and child placing agency adoptive families do not meet the IV-E federal subsidy requirements to receive the full range of benefits designed to help move special needs children out of foster care and into permanent homes via adoption. International adoptions are ineligible for state AS assistance.

- **Extended Adoption Subsidy (EAS) Program:** The EAS program is available to those children receiving an adoption subsidy whose adoptive family wishes to continue receiving subsidy services after the child reaches age 18. To be eligible for EAS the youth had to be adopted from foster care after the age of 16, but prior to age 18; and, the child must meet the same criteria as required for participation in the state's EFC program.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**AS Program Update FFY 2021:** The Adoption Subsidy (AS) and Extended Adoption Subsidy (EAS) programs continue to provide support for youth and young adults. In Calendar Year (CY) 2020, there were five (5) Extended Foster Care (EFC) Guardianship subsidies and 21 EFC Adoption subsidies. The department continued to assist with adult adoptions. Anyone at any age can be adopted in the State of Louisiana. Many young adults who spend time in foster care miss a permanent legal connection with a caring adult. However, there are many different circumstances in which a young adult may choose to be adopted by a caretaker or a permanent connection. If a young adult and a family decide to move forward with an adoption, the department can assist in costs associated with the adoption. Parental rights of the birth parents do not have to be terminated and consent is not needed therefore the adoption process is not complicated and there are no timeframes that need to be met. If a young adult is adopted, they will continue to participate in the extended foster care program and receive the appropriate services until they turn 21 years of age.

**AS Program Activities Planned for FFY 2022:** The Adoption Subsidy (AS) and Extended Adoption Subsidy (EAS) programs will continue to provide support for youth and young adults. The department will continue to assist with adult adoptions.

- K. ADOPTION PETITION (AP) PROGRAM:** DCFS reviews every adoption petition filed in the state for the courts. This review responsibility includes adoptive placements made by public and private agencies and those made by private attorneys for family member adoptions and adoptions of children by unrelated persons. The DCFS investigates, upon order of the court, all proposed adoptive situations (legal availability and physical/emotional condition of the child, fitness of the petitioners and conditions of the home) to determine the best interests of the child. The Department submits a confidential report of its findings to the court and assists the family with obtaining the revised birth certificate after the adoption. A copy of each adoption petition record is maintained in the adoption file room.

**AP Update FFY 2021:** The aforementioned activities and service will continue throughout the fiscal year.

**AP Activities Planned FFY 2022:** There is no change in any of the aforementioned information. All current services will continue.

- L. GUARDIANSHIP SUBSIDY (GS) PROGRAM:** The GS program serves the guardians of children who entered a guardianship arrangement from foster care to provide supportive services for the care of the child to maintain the guardianship situation. Guardianship subsidy services may include an ongoing maintenance subsidy, special board subsidy for special care requirements provided by the guardians; special services subsidy to meet special needs of the child; and ongoing medical coverage through Medicaid.
- **Extended Guardianship Subsidy (EGS) Program:** The EGS program is available to those children receiving a guardianship subsidy whose guardians wish to continue receiving subsidy services after the child reaches age 18. To be eligible for EGS the youth had to enter a guardianship arrangement from foster care after the age of 16, but

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

prior to age 18; and, the child must meet the same criteria as required for participation in the state's EFC program. Additionally, the Guardianship family must retain financial responsibility for the care of the young adult as established through quarterly eligibility redetermination. The Guardian of youth may only continue receiving the Extended Guardianship Subsidy up through the youth's 21st birthday as long as the youth continues to meet eligibility requirements.

**GS Update FFY 2021:** In 2020, thirteen youth qualified for the Extended Guardianship Subsidy. Letters were mailed to each youth and caregiver within 90 days of the youth reaching the age of majority. As of December 31, 2020, five youth were enrolled in the Extended Guardianship Subsidy Program, the majority qualifying based on educational criteria.

**GS Activities Planned for FFY 2022:** Continue to provide services to those meeting eligibility and requesting services.

**M. HOME DEVELOPMENT (HD) PROGRAM:** Services include recruitment, certification, retention, and support to DCFS foster and adoptive families and private foster care providers. Additional information concerning HD is found in the Foster and Adoptive Parent Diligent Recruitment Plan.

**HD Update FFY 2021:** Due to COVID concerns, pre-service training was adapted to a virtual format. HD workers continued child specific trainings. DCFS collaborated with Crossroads NOLA to adapt A Journey Home Pre-Service training to a virtual format and Crossroads NOLA started providing all pre-service training for regular foster homes effective January 2021. HD staff continued completing home studies, support for foster parents, certification of foster homes, and maintenance of certifications. Effective February 1, 2021 the HD staff will provide oversight of contracted Therapeutic Foster Care (TFC) homes program. TFC's in Louisiana moved from being monitored by the Behavioral Health unit to the HD unit. HD continued monitoring contracts and determining if children meet the characteristics to be housed in a TFC. HD staff continued securing housing needs for children and youth.

The HD Supervisor Advisory Committee continued to seek ways of improving work processes as well as work morale. The HD Supervisor Advisory Committee consists of four Home Development Supervisors, three Child Welfare Consultants and one Child Welfare Manager. The committee continues to meet quarterly.

HD continues to have monthly HD supervisor calls, which allows HD supervisors to hear updates to policy, timelines for completing work activities and discuss new initiatives. Policies 21-003: Foster Care Placement Process was revised.

**HD Activities Planned FFY 2022:** Home Development is reviewing all Home Development policies and procedures to ensure policy and procedures are aligned with Model Home Licensing Regulations and to ensure policy aligns with other DCFS programs. Home Development has continued to work with the EFC Workgroup to develop

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

policies and procedures for host families for young adults participating in the Extended Foster Care program. This work will continue.

HD will continue to update orientation and training for host homes. HD will collaborate with EFC workers to find out if host families need additional training and obtain feedback about the current online trainings.

- N. BEHAVIORAL HEALTH AND RESIDENTIAL SERVICES PROGRAM:** This program contracts with and manages placements for children in Foster Care with behavioral health issues, extreme care needs or other challenging placement needs. Services include assessments to ensure appropriateness of care setting selection; monitoring of placement caregivers to ensure adequacy of treatment and other behavior management protocols in meeting child needs; and, advocating for or developing care settings when there are no available options to meet the child's needs. This program works closely with the LDH and managed care organization health plans to serve our most high-needs children.

**Behavioral Health and Residential Services Program Update FFY 2021:** Louisiana DCFS continued to focus on maintaining and furthering the reduction in the use of congregate care settings achieved in FFY 2020. The DCFS collaborated with the Louisiana Office of Behavioral Health in a Quality Improvement Collaborative, focused on the Six Core Strategy values, funded by the Building Bridges Initiative. Five residential facilities received intensive support to implement strategies to reduce police calls and emergency room visits. Organizations focused on amplifying youth voice and choice, and instituting more collaborative and trauma informed strategies to prevent police calls, runaways, and emergency room visits. During the period when outcomes were tracked, providers noticed a 75% decrease in police calls and runaways. In this reporting period, congregate care utilization declined by approximately 16%, with an average utilization decrease from 120 to 100 youth. The impact of the COVID-19 crisis is still yet to be determined.

**Behavioral Health Residential Services Program Activities Planned FFY 2022:** Develop a network of providers that offer Qualified Residential Placements. Develop and collect outcome measures related to family engagement and permanency for youth served in Qualified Residential Placements. Collaborate with the Office of Behavioral Health and other behavioral health stakeholders to enhance residential behavioral health care for youth in Louisiana.

- O. INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN (ICPC) PROGRAM:** ICPC coordinates services with other states for out-of-state placements of children in foster care with non-custodial parents, relatives, foster parents, permanent adoptive homes and residential care providers when it is either in the child's best interests for achieving permanency or no other appropriate resource is available to meet a child's treatment needs within the state.

**ICPC Update FFY 2021:** ICPC continued coordinating services with other states for children in foster care placed across state lines. Continued monitoring and improvement of

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

ICPC processes as the National Electronic Interstate Compact Enterprise system (NEICE) implementation is expected on October 5, 2020. ICPC continues coordination with the CCWIS to ensure incorporation of NEICE by completing preliminary meetings to ensure the incorporation of NIECE Clearinghouse into development of the system. The system allows quick and secure exchange of data and documents for transmission of referrals in ICPC across state lines. Foster Care, Extended Foster Care, Adoption, Home Development and ICPC staff participated in NEICE training to develop skills needed to process referral in the NEICE system. The training began August 31, 2020. The training consists of three parts:

- NEICE Class 101 Part 1 – Child Welfare Specialists, Foster Care, Extended Foster Care, Adoption, Home Development and State Office/Central ICPC.
- NEICE Class 101 Part 2 Part 2 for Foster Care, Extended Foster Care, Adoptions, Home Development and State Office/Central ICPC
- NEICE Part 3 for ICPC staff ICPC Case Coordinator in State/Central Office.

**ICPC Activities Planned FFY 2022:** Continue coordinating services with other states for children in foster care placed across state lines. Monitoring and improvement of ICPC processes as NEICE implementation continues. Ongoing coordination with the CCWIS team to ensure incorporation of the NEICE Clearinghouse into the development of the system.

Formalize the ICPC tracking process to identify all pending cases of children freed and placed in an out-of-state adoptive home. Develop a format to identify barriers to achieving timely permanence, and develop a plan of action for identified barrier(s).

**P. SERVICE COORDINATION**

The coordination of service delivery through the DCFS CW programs with participants, including other government agencies, private partners, community organizations, other stakeholders, and the clients is discussed throughout this plan. The utilization of other federally funded programs such as TANF, CCDF, Medicaid, SNAP, etc., is presented in the initial section on *Collaboration*. Involvement of Community Based Child Abuse Prevention, the Children’s Justice Act, and the Court Improvement Project are presented in the initial section on *Collaboration*, and in other locations within the plan as appropriate.

Additional coordination of services related to a prevention vision will occur through the efforts of the **Family First Prevention and Services Act (FFPSA) Workgroup**. DCFS and the Annie E. Casey Foundation formed a steering committee and workgroup. The overview of the workgroup’s goals is to: 1.) Analyze data to determine current prevention expenditures, and 2.) Identify the prevention service array and payment gaps, which can be filled with FFA Prevention options. The initial meeting was held on February 12, 2019. The group met on April 8, 2019 and May 13, 2019. There were consultation calls held with Child Focus on March 21, 2019 and April 3, 2019. Meetings have continued on the second Monday of each month on an ongoing basis. Child Focus consultation is providing workgroup guidance and a framework for goals.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**FFPSA Update FFY 2021:** DCFS is working to determine the best use of the Family First Transition Act funding allocated to the state. The agency is interpreting the provisions for the IV-E funding and evaluating the Clearinghouse programs identified to determine which programs will reduce out of home placement of children. The evaluation for the FFPSA will include analysis of current services being providing, funding sources, and outcome data. Determination of the Candidacy definition in addition to identification of evidenced-based programs considering the target population are planned activities in the development of the FFPSA plan. DCFS will incorporate policy, programming, and continuous quality improvement and evaluation as part of the prevention plan development. Intercept and Child First are two home visiting models being considered for implementation in two areas of the state.

**FFPSA Activities Planned FFY 2022:** The Prevention, Residential Redesign and Administrative workgroups will meet with internal and external stakeholders throughout the next fiscal year to continue planning efforts on the Title IV-E prevention state plan and residential redesign process.

An amended Title IV-E pre-print to include a section on QRTP's will be submitted as well as the Title IV-E prevention pre-print and Title IVE 5-year prevention state plan.

A steering committee has been developed and meets monthly to provide feedback, direction and oversight to the work of the three workgroups.

**SERVICE DESCRIPTION:**

The following is an assessment of gaps in the current provisions of services through the Child Welfare programs of the department:

1. Services are provided to families following an allegation of child neglect and/or abuse when immediate safety concerns appear manageable, yet future risk of harm continues to be a concern. These families have been assessed as needing services provided while the child remains in the home. Services needed in order to prevent future maltreatment, such as, mental health treatment, substance abuse treatment, and home based skill building in some instance are delayed or service provisions are incongruent with reason for Agency involvement. The DCFS has redefined the assessment of safety and risk process in an attempt to assure services needed to prevent future maltreatment are provided to families. As part of our current Program Improvement Plan (PIP), we have begun extensive assessment of the services provided to families in the community, in order to determine individual needs as it relates to preserving family units.
2. Children ages 0-5, including substance exposed or affected newborns, and children with developmental or medical disabilities have been identified as a population of greater focus as they are at greater risk for increased safety and risk concerns. The department continues to see a rise in the number of Substance Exposed Newborns (SEN). Policies, practices, and legislation have been developed to address the issues, but ongoing work is needed. The DCFS will continue to monitor occurrence of SEN reports, and possible collaborations to address the issues.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

3. The DCFS will focus more attention on developing services to children age five and under. The Department needs to reduce the length of time children under age five are without a permanent family.
4. The Department will collaborate with the Court Improvement Program (CIP) and Pelican Center in assessing effectiveness of the Family Preservation courts in assuring permanency for children; in effectively sustaining parental custody of children during parent substance use treatment; and, in preventing repeat maltreatment of children.
5. Safety focused practice is key to assessing the safety of children in families and the referral to services when needed. State and regional implementation plans will continue to target specific improvements in staff diligence regarding the sufficiency of information collection, the recognition of danger and the development of safety plans. State and regional staff will provide additional support and training to reinforce and extend field staff expertise in safety and risk assessment practice. Competency assessment and evaluations will be conducted to determine additional training and support needed for field staff. Consultations will continue to be available to field staff to further knowledge and development of skills.

These areas as well as the gaps in practice identified through the PIP assessment and development will be a focus for improvements in CW practice through the 2020-2024 timeframe.

**Q. STEPHANIE TUBBS JONES CHILD WELFARE SERVICES PROGRAM, TITLE IV-B SUBPART 1**

In 2005, the state expended \$1,300,615 of the grant on foster care maintenance. No funds were used in 2005 for adoption assistance or childcare. The state assures that funding for this service will not exceed the 2005 expenditure levels. DCFS budget and fiscal staff confirm that none of these funds were used for childcare or adoption assistance payments.

**Services Specific to Use of Funds:** Child welfare service components of the DCFS are focused on an effective and accountable child welfare system. Services are provided statewide in 64 parishes through 9 regional offices and 48 parish offices. Service components include Centralized Intake (CI), Prevention and Family Services (FS), Foster Care Services (FC) and Adoption Services (AD).

The grant allocation for the Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B, Subpart 1) to Louisiana will continue to be used in Louisiana to prevent the neglect, abuse or exploitation of children and to keep families together in two of the stated purpose areas of the grant; to protect and promote the welfare of all children; and for prevention and support services to at-risk families with services to allow children to remain with their families (wherever safely achieved). The services and efforts included in the grant are:

1. Services for children adopted from other countries:
2. Services to children under the age of five
3. Efforts to track and prevent child maltreatment deaths

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The Department continues to focus on improving the service array to children and families to ensure safety, permanency and well-being. The DCFS Child Welfare practice principles will guide the service delivery process as well as continuous quality improvement efforts. The department will continue to focus on improving staff and stakeholder involvement, the use of data and strengthening its commitment to quality improvement.

**1. Services For Children Adopted From Other Countries:**

- Activities to support the families of children adopted from other countries:** Louisiana provides pre and post adoption services to support inter-country adoptions through the Adoption Petition Program, which assists families to record adoptions in Louisiana, and then obtain a revised birth certificate. Regional Family Resource Centers (FRC) provide supportive post adoptive services to all Louisiana adoptive families and the DCFS offers family services on a voluntary basis to adoptive families seeking assistance post-adoption finalization. Adoptive families can self-refer for behavioral health services through the Louisiana Behavioral Health Partnership.

For foreign children entering protective custody experiencing adoption disruption and/or dissolution Louisiana provides ongoing foster care services, to include board rate, independent living skills development, educational support services, medical assistance, psychological support, and clothing replacement services.

<b>Inter-Country Adoption Data:</b>	
Federal Fiscal Year	Number of Children With “Out of Country Birth Location”
2018-19	26
2019-20	7
2020-21	
2021-22	
2022-23	
TOTAL	

*The data will be derived from the TIPS download files for the Adoption Petition Program. All cases reported above will be closed in the Adoption Petition Program. Cases are to be counted in the year in which the adoption petition program case was closed.*

**2. Services to Children Under the Age of 5:**

**Targeted services provided to these children to reunify or find a permanent family:** All services typically offered to children in foster care to insure safety, promote permanency and sustain child well-being are provided to this population of children. Through concurrent planning, efforts are made to place children with families who can provide permanent placements for them should they be unable to return to their parents' custody. This involves placing children with relatives who are willing to adopt or accept custody/guardianship of the child or with foster parents who are dually certified as adoptive parents and who are willing to accept legal risk placements.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**How developmental needs of children under age five are addressed:** Early Periodic Screening, Diagnostic, and Treatment (EPSDT) services are provided through the child's Medicaid provider. Through collaboration with LDH, Medicaid program, the Healthy LA managed care programs establish a medical home for all children receiving Medicaid, which includes children in foster care, so a primary care physician will be able to monitor the child's developmental needs. Through collaboration with the LDH, Office of Citizens with Developmental Disabilities (OCDD), Early Steps screening for all children involved in an abuse/neglect investigation is required to identify early signs of developmental delays and acquire appropriate services. Finally, through interdepartmental collaboration with the Child Care Assistance Program, childcare services are offered to children in foster care to address developmental and socialization needs.

Staff are required to complete an assessment of the client family (Assessment of Family Functioning) including assessment of each child in the home regardless of their involvement in the abuse and neglect. The assessment includes assessment for safety as well as any needs related to development, physical or mental and emotional health.

Specific policy addresses how to assess and work with Substance Exposed Newborns and their families. Policy provides guidance on conducting a thorough assessment of the infant, caregivers and the environment in order to determine what services, if any, are appropriate for the family.

An Infant Mental Health/behavioral health screening tool was developed for children age five and under to assist workers with identifying behaviors indicating further assessment and treatment might be indicated. All children are required by DCFS policy to be screened unless they are already receiving early intervention, Early Childhood Support and Services (ECSS) or other behavioral health services. ECSS is a state program managed by the Louisiana Department of Health (LDH), Office of Behavioral Health (OBH) provide a coordinated system of screening, evaluation and referral services and treatment for families of children ages 0 through 5 years who are at risk of developing cognitive, behavioral and relationship difficulties.

The two infant teams in the state in the Orleans Region provide infant mental health services. (For additional information on the Infant teams, please refer to the PSSF section of this plan.) The infant teams provide comprehensive services to children, ages 0-60 months whose families are involved with DCFS due to maltreatment or who have been prenatally exposed to drugs or alcohol. Comprehensive assessments include intake assessment, psychosocial assessment of caregiver and child, infant mental health assessments, developmental evaluation, neurodevelopmental evaluation and school/daycare observations. The infant mental health assessment includes a variety of evidence-based assessments used to assess the status of the caregiver-child relationship.

Training is being provided with Tulane Infant Mental Health statewide to staff and caregivers on planning transitions when infants and young children move to a different

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

placement including reunification, adoption or different foster home placements. Transitions, particularly with infants and very young children must be carefully planned and take into consideration the attachment and development of the child and transitioning the child in a way which minimizes trauma and supports healthy attachments as the child moves to a different caregiver setting.

Foster parent pre-service training *A Journey Home* is devoted to childhood development with a focus on early childhood development. Two additional sessions in pre-service training are focused on understanding infant and childhood trauma and helping infants and children heal from trauma and how to support healthy attachments.

**Activities Planned for FFYs 2021-2024:** Implement Planful Transitions policy, incorporating Regional Program Specialist support to field staff throughout the state to help in transitions for children ages 0-6 whether into care, from care setting to care setting or out of care.

- Expedite foster family adoptions for young children when in the best interests of the child once termination occurs to insure timely permanency;
- Continue focus on early identification of relatives and notification of child involvement in foster care;
- Use family teaming to build team of supportive individuals for the family to improve achievement of case plan goals; and,
- Assess safety of child and parental protective capacities more frequently to achieve enhanced parental functioning to meet the safety needs of the child as soon as feasible.

**Services to Children under the Age of 5 Update FFY 2021:** DCFS continued the efforts noted above. DCFS continued ensuring staff were aware of targeted services for children within the 0-5 year age group such as Early Steps. DCFS continued to ensure the appropriate services and placements were identified and coordinated with local staff and programs within the agency. Quarterly review of adoption dissolution reports were conducted to identify foreign adoptions, monitor service provision to children who have entered protective custody, and provide adoption recruitment services.

**Services to Children under the Age of 5 Activities Planned for FFY 2022:** Continue ongoing efforts listed above. Continue conducting quarterly reviews of adoption dissolution reports to identify foreign adoptions, monitor service provision to children who have entered protective custody, and provide adoption recruitment services, if needed.

### **3. Efforts to Track and Prevent Child Maltreatment Deaths:**

DCFS compiled, completed, and accurately reported information on child maltreatment deaths to NCANDS. DCFS continues to gather relevant information on children's deaths from relevant organizations within the state. DCFS continues to develop and implement a comprehensive, statewide plan to prevent child maltreatment fatalities involving and engaging relevant public and private agency partners, including those in public health, law enforcement, and the courts. DCFS continues to collaborate and support partner services to prevent child maltreatment deaths through the following.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

DCFS continues to hold Manager High Risk Staffings to ensure a higher-level involvement in cases with the greatest risk of poor safety outcomes including cases with the likelihood of becoming a fatality/near fatality. The purpose of the Manager High Risk Staffings is to reinforce accurate application of safety and risk assessment practice, assure that appropriate safety actions have been taken when needed, and assists workers and supervisors with decision-making.

Cases meeting the following criteria are identified as high risk:

- Level 1 investigation with a victim under the age of 5;
- Investigations with a victim under the age of 5, if there are 2 or more investigations within a six-month period;
- Level 1 investigation with victims over the age of 5 if the allegation category is physical abuse;
- Investigations in families that have a second substance exposed newborn;
- Investigations with victims under the age of 10 with previous FS or FC involvement within the last 24 months; or
- Investigations in families with a prior substantiated fatality.

DCFS collaborated with the National Safe Haven Alliance to offer a 24-hour, seven-day a week crisis hotline for Safe Haven. In addition, DCFS focused on public awareness regarding Safe Haven which included but not limited to: public service announcements, social media releases, newspaper articles, brochures, posters, and decals. The DCFS continues to boost awareness and understanding by increasing exposure through communication channels and working with agency partners to identify new messaging opportunities.

The Louisiana Children's Trust Fund (LCTF) provides annual grant awards to aid in the prevention efforts to protect children, strengthen family well-being, and educate the public about children's safety. From FFY 2020-2021, LCTF awarded 52 prevention grants to 39 agencies totaling \$922,844.

Louisiana Department of Health, Office of Public Health, Bureau of Family Health funds essential state core infrastructure, capacity development, surveillance and limited implementation efforts for injury and violence prevention. The Department of Children and Family Services participated in the development of the state's 5-year Injury Prevention State Action Plan. The plan takes a shared risk and protective factor approach to the reduction of leading causes of intentional and unintentional injury, including, but not limited to child maltreatment and domestic and intimate partner violence. Main strategies and activities include surveillance, data linkages and analytics, promotion of evidence-based primary prevention policies and practices, engagement of injury prevention partners and alignment of efforts, and emphasis on collaborative support and coordination of resources across agencies working to prevent violence and other unintentional injuries.

The Nurse-Family Partnership (NFP) program through Louisiana Department of Health continues to provide nurse home visitation services to low income, first-time mothers.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Nurses begin home visits early in the mother's pregnancy and continue visitation until the child's second birthday. Nurses provide support, education and counseling on health, behavioral and self-sufficiency issues. NFP plays a key role in providing much needed preventative care for children and families.

VIA LINK offers Louisiana Parent Line, which provides parents with free, confidential, 24/7 access to a live specialist. Louisiana Parent Line can be reached through phone and text 24 hours a day. We give parents a safe space to express their frustrations, ask parenting questions and get support. Louisiana Parent Line specialists can offer emotional support, de-escalation, crisis intervention, information and referral, and plans for coping. Follow up calls are offered to parents to increase their circle of support. The Louisiana Parent Line phone number is 833-LA-CHILD (833-522-4453) or text can be sent to (225) 424-1533.

**Efforts to Track and Prevent Child Maltreatment Deaths Activities Planned 2022:**

- DCFS will continue to compile, complete, and accurately report information on child maltreatment deaths to NCANDS. DCFS will continue gathering relevant information on children's deaths from relevant organizations within the state. DCFS will continue to develop and implement a comprehensive, statewide plan to prevent child maltreatment fatalities involving and engaging relevant public and private agency partners, including those in public health, law enforcement, and the courts. DCFS will continue to collaborate and support partner services to prevent child maltreatment deaths through the following
- DCFS will continue to hold Manager High Risk Staffings to ensure a higher-level involvement in cases with the greatest risk of poor safety outcomes including cases with the likelihood of becoming a fatality/near fatality..
- The DCFS will continue its collaboration with the National Safe Haven alliance. DCFS will continue to increase statewide public awareness campaigns for both Safe Sleep and Safe Haven.
- The DCFS will continue to collaborate with the Louisiana Children's Trust Fund (LCTF) to obtain annual grant awards to aid in the prevention efforts to protect children, strengthen family well-being, and educate the public about children's safety.
- The DCFS will continue its partnership with Louisiana Department of Health in receipt of a Core Violence and Injury Prevention Grant. The grant funds essential state core infrastructure, capacity development and limited implementation efforts for injury and violence prevention. Some target areas include motor vehicle crash, traumatic brain injury, intimate partner violence and sexual violence, and child abuse and neglect prevention. Main activities include surveillance of all injuries, data linkages and analytics, promotion of evidence-based primary prevention policies and practices, coordination of injury prevention partners and alignment efforts, and limited funding support for partner efforts.
- The Nurse-Family Partnership (NFP) program continues through Louisiana Department of Health provides nurse home visitation services to low income, first-time mothers. Nurses begin home visits early in the mother's pregnancy and continue visitation until the child's second birthday. Nurses provide support, education and counseling on health, behavioral and self-sufficiency issues. NFP

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

plays a key role in providing much needed preventative care for children and families.

- *KidLine* is an anonymous, toll free, statewide telephone service that is available 24 hours offering crisis intervention, parenting support, and referrals to community resources.

**R. PROMOTING SAFE AND STABLE FAMILIES TITLE IV-B, SUBPART II**

State and local share spending for Title IV-B, Subpart 2 for FFY 2018 (for comparison with the 1992 base year amount of \$2,772,015) indicates \$8,094,421 was spent, \$6,070,816 of which was federal funds and \$2,023,605 was state general funds and in-kind funds. State and local share spending for Title IV-B, Subpart 2 for FFY 2019 (for comparison with the 1992 base year amount) indicates \$8,392,492 was spent, \$6,294,369 of which was federal funds and \$2,098,123 was state general funds and in-kind funds. State and local share spending for Title IV-B, Subpart 2 for FFY 2020 indicates \$8,971,077.33 was spent; however, Louisiana has not submitted the final report at this time.

DCFS utilizes these funds for family preservation, community-based family support, time-limited family reunification and adoption promotion and support services.

The department assures no more than 10% of funds is used for administrative costs and significant portions of expenditures are made in the four areas below:

- Family Prevention and Support Services (FPSS) – 23% of funds
- Family Preservation (FP) – 23% of funds
- Time Limited Reunification Services (TLR) – 23% of funds
- Adoption Promotion and Support Services (APSS) – 22% of funds

*(Note: This comes to 101%, but the totals are based on rounding up of numbers, which causes the slight discrepancy.)*

Services provided in Louisiana with Promoting Safe and Stable Families (PSSF) funds include A) Family Resource Centers, and B) Infant Teams.

1. **Family Resources Center (FRC)** services provided by the centers address Family Preservation Support Services (FPSS), Family Planning (FP), Tonic Labyrinthine Reflex (TLR), and additional support services. Centers provide therapeutic intervention services to families to improve safety, reduce risk and to support permanency for children in their homes or out of home if necessary. There are ten Child Welfare FRCs contracted to provide services. The current FRCs are listed below:

- 1.) Discovery FRC-Southeastern University, Baton Rouge Region
- 2.) Renew Family Resource Project-Southeastern University, Covington Region
- 3.) Nicholls State University Family Service Center, Thibodaux Region
- 4.) The Extra Mile, Lafayette Region
- 5.) Educational and Treatment Council, Inc., Lake Charles Region
- 6.) Volunteers of America-North Louisiana, Alexandria Region
- 7.) Community Support Program-Portals, Shreveport Region
- 8.) Project Celebration, Shreveport Region

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- 9.) Tulane Parenting Education Program, Orleans Region
- 10.) Children’s Coalition of Northeast Louisiana, Monroe Region

FRCs provide three (3) CORE services: Parent Education, Visit Coaching and Family Skills Building.

Parent Education: Each FRC is expected to have trained staff to provide parent education and skill building for families with children of all age groups. The following parenting programs have been approved for use by the FRC due to their evidence of effectiveness with the child welfare population but can only be facilitated by persons who have been trained by a qualified trainer:

- The Nurturing Parenting Program for parents of infants, toddlers, and pre-school children;
- The Nurturing Parenting Program for parents of children ages 5-11;
- The Nurturing Parenting Program for parents and their adolescents;
- Systematic Training for Effective Parenting, (STEP), including Effective Black Parenting

Visit Coaching: Primarily targeting children in foster care, but this service benefits in-home families as well. Visit coaching helps the parent take charge of their visits (contacts/interactions with their children) and demonstrate more responsiveness to the needs of their children. For families in the Nurturing Parenting Program (NPP) program, the “family time” component can be expanded to accommodate visit coaching and often serves as the parent’s visit.

Family Skills Building: The Family Skills Building (FSB) service provided through the Family Resource Centers provides customized support, mentoring, and guidance in the areas of identified needs, which are not readily addressed by other services. FSB targets areas of family skills identified as areas of concern or problems in a family’s functioning. FSB is designed to meet those specifically identified needs. The service is directly related to the safety, risk, and well-being of the child and the parent/caregiver’s ability to provide for these needs and to maintain children in the home. Family Skills Building services are those services focused on targeted skill building and may be facilitated in the client’s home or other designated locations.

**Decision-making process for Family Support Services** – The Family Resource Centers (FRC) were selected as providers through the Request for Proposals (RFP) process. DCFS placed ads requesting interested parties submit proposals. After the closing date, the proposals were reviewed and the agencies/organizations demonstrating the most qualifications, which aligned with DCFS standards, were selected as providers. These programs were expected to be community based and located within the community they were requesting to serve. Family Resource Centers are located in one central location within the region, however, many have satellite locations allowing them to have a more visible presence and afford greater convenience to the clients.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Population Served** – The Family Resource Centers (FRC) provide services to families referred by the Department and the Office of Juvenile Justice Family in Need of Services (FINS) Program. DCFS refers families with children ages 0-17 who are receiving services from the agency due to abuse or neglect. DCFS can refer families to an FRC involved with CPS, FS, FC, and Adoptions programs. Foster and adoptive parents are able to self-refer when there is a need for services to enhance their parenting skills or stabilize placements. There is emphasis placed on referrals for children ages 0-5, which have been identified as being at greatest risk for abuse and neglect. The Nurturing Parenting Program has a specialized curriculum to work with children and families in each age group.

**Gaps in Services** – Considering current capacity building efforts of the Louisiana Family Resource Center Network, the department’s plan is to address existing gaps in services through networking and building partnerships in communities where children and families live, work, and play. This approach embraces the inclusion of informal and formal supports, with children and families at the core of the capacity building processes.

Program staff along with the FRC Network met the goal of developing service guidelines for each of the core services provided by the resource centers. Program staff and regional liaisons will monitor the services being provided and provide guidance as needed to enhance compliance with the service guidelines.

The Tulane Parenting Education Program has continued to provide consultation resources to FRCs across the state. These consultations have occurred twice per month as set in the initial goal. Consultation services included on-going training, in addition to support and guidance to FRC staff in implementing parenting programs for clients, including Visit Coaching.

DCFS contract monitors will continue to develop and strengthen the data collection and evaluation protocol for services provided by the Child Welfare FRCs. DCFS will be issuing a “Request For Proposals”, (RFP) for services to be provided by the Family Resource Centers based on evaluation of services and the needs of our families.

The Extra Mile FRC in Lafayette implemented the Parent Partner program in 2013. They plan to use their expertise to assist other FRCs in adding a Parent Partner program to their service array by October 2020.

The Parent Partner program employs parents who have successfully navigated the child welfare system. These parents want to support other parents, who may need assistance in understanding agency policies, procedures, forms, meetings, case plans, hearings, services, etc. These Parent Partners are in a unique position to share their personal experience and give guidance, understanding, hope, realistic advice and advocacy to parents currently involved with the agency. In addition, they form a critical link between the DCFS worker, other professionals, and the family.

**FRC Update FFY 2021:** The FRCs provided services to parishes in their geographic area allowing service provision throughout the state. The FRCs received referrals from DCFS

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

for families involved with the department due to neglect and abuse of a child. FRCs provided Parent Education, Visit Coaching and Family Skills Building.

The DCFS continued training for FRC staff by NOLA Crossroads to use Trust-Based Relational Intervention (TBRI). DCFS staff continued receiving TBRI training in order to have an understanding of TBRI interventions used in the FRCs.

Quality Parenting Initiative (QPI) has made it possible for children to contact their parents or caretakers when they are placed in DCFS custody. The children are encouraged to make calls in order to help the child stay connected with the parents or caretakers. Foster parents are expected to keep an open line of communication with the parents or caretakers in an effort to provide the best care for the children while they are in foster care. The parents are able to inform the foster parent of any medical conditions of the children or explain what comforts the child when upset.

DCFS monitors data gathered from FRCs monthly in an effort to improve their annual outcomes and collect data necessary for annual evaluations. Monthly conferences are conducted with the FRCs to discuss services provided, barriers to services, and service trends. There is a decrease in DCFS clients due to COVID-19, which has resulted in a decrease of referrals for service. In FFY 2019, we served 3,681 families through the FS program. In FFY 2020, we served 3,162 families through the FS program. The data supports a decline of 519 families served in the FS program statewide.

The FRCs provided services to parishes in their geographic area allowing service provision throughout the state. The FRCs received referrals from DCFS for families involved with the department due to neglect and abuse of a child. FRCs provided Parent Education, Visit Coaching and Family Skills Building.

**FRC Activities Planned for FFY 2022:**

- Continue efforts with the FRC's and DCFS regional liaisons to increase the number of referrals by 10% in FFY 2021 to ultimately improve staff referrals and expand services being provided by the FRCs.
- FRCs will continue using the Trust-Based Relational Intervention (TBRI) and Quality Parenting Initiative (QPI) to support service provision in their geographical areas.
- The DCFS contract monitors will continue to develop and strengthen the data collection and evaluation protocol for services provided by the FRCs.
- DCFS will incorporate training and evaluation of the newly instituted Kinship Navigator and Parent Partner programs
- DCFS will utilize the additional PSSF funds to support the addition of the Parent Partner program to the Family Resource Centers throughout the state. This will include Parent Partner training and ongoing consultation for the implementation of the program.
- DCFS contract monitors plan to have quarterly in-services (via Zoom) with the Family Resource Centers (FRC) and DCFS parish offices in an effort to increase the referrals. In-services will provide information about the FRCs to DCFS staff. Due to turnover within the offices, the in-services will be held quarterly in an effort to reach any new staff. DCFS staff will be able to voice their needs and concerns regarding services that

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

are provided by the FRCs. Barriers to services can be discussed during the in-services as well. The in-services will be recorded for DCFS staff who are unable to attend due to court or other casework obligations.

- DCFS is in the process of redesigning the service provisions for the FRC's

2. **Infant Team:** Services address Family Preservation and Support Services (FPSS), Family Planning (FP), Tonic Labyrinthine Reflex (TLR) services. Two-infant teams in the state provide infant mental health services. Comprehensive assessments include intake assessment, psychosocial assessment of caregiver and child, infant mental health assessments, developmental evaluation, neurodevelopmental evaluation and school/daycare observations. The infant mental health assessment includes a variety of evidence-based assessments used to assess the status of the caregiver-child relationship. These assessments include several different interaction assessments, parent perception interviews, parental insightfulness interviews, and projective play methodologies for the children. Every child-caregiver dyad completes an interaction assessment and parent perception interview. Completed assessments are used to guide the provision of treatment services by the infant team as well as referrals for developmental services. The infant teams provide therapy for the caregiver, often with the child, in order to improve the overall health of their relationship by increasing the caregiver's ability to respond to the child's needs. Sometimes the services provided include school/daycare intervention, group therapy, case conferences, and participation with DCFS case planning conferences, court reports and court testimony.

**Decision-making process for Infant Team Services** – The infant teams provide comprehensive services to children, ages 0-60 months whose families are involved with DCFS due to maltreatment or who have been prenatally exposed to drugs or alcohol. With increasing numbers of SEN, this service is seen as core to encouraging bonding with very young children and their parents to prevent child maltreatment, support families, preserve the family unit, and when unable to safely preserve the family unit strive for timely reunification of these very young children with their parents.

**Population Served** – Children age 0-60 months who have experienced maltreatment in their families are the target population. There are two infant teams in the state. The team in New Orleans receives referrals from the 0-3 court team when children are placed in foster care as well as children 0-5 from additional courts in Orleans Parish when children are placed in foster care. The Permanency Infant and Preschool Program (PIPP), colloquially referred to as the "LSU Infant Team" in Orleans Parish, expanded its services to the Covington region by providing two clinicians to travel to this office one day/week to service families from this region. The clinicians will attempt to work with as many families as feasible, but likely will be available to treat 8-12 families at any point in time.

The Tulane Infant Team receives referrals for children 0-5 who enter foster care in Jefferson Parish and serve children from St. Bernard, Orleans and Plaquemines parishes. One of the goals of these teams is to assist the department in developing a treatment plan aimed at achieving permanency as quickly as possible.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Gaps in Services** – Most children and families in the state do not have access to specialized infant team services. A few, very young victims of abuse and neglect coming into foster care in other parishes of other areas of the state may access minimal specialized infant mental health services through the Early Childhood Supports and Services program. However, the majority are not receiving any specialized assessment and treatment services since infant teams are only located in the southern part of the state. Services to infants and children continue to be available through the Child Welfare Family Resource Centers, Early Steps Program, and Maternal Infant and Early Childhood Home Visiting Program (MIECHV) through the Louisiana Department of Health. Interagency efforts continue to improve referral processes and data sharing within departments and child serving agencies.

**Infant Team Update FFY 2021:** The Infant Team’s services are provided in Orleans Region continues to provide infant mental health services to identified families. The infant mental health comprehensive assessments include intake assessment, psychosocial assessment of the caregiver and child, infant mental health assessments, developmental evaluation, neurodevelopmental evaluation and school/daycare observations to assess the status of the caregiver-child relationship. The Infant Team provides a monthly report to DCFS with the number of new referrals for the month, number of families in treatment, and the number of persons in treatment. Annual evaluations are completed regarding the services provided and case outcomes for clients receiving treatment from the Infant Team.

<b>LSU Infant Team</b> Number of referrals each month for FFY 2021 October 1, 2019 – September 30, 2020		
<b>Month</b>	<b>Orleans Parish</b>	<b>North Shore</b>
October 2019	5	1
November 2019	0	1
December 2019	0	1
January 2020	2	1
February 2020	0	3
March 2020	0	0
April 2020	0	0
May 2020	3	1
June 2020	0	2
July 2020	0	0
August 2020	3	0
September 2020	1	1

**Infant Team Activities Planned FFY 2022:** Infant Teams in the Orleans and Covington Regions will continue to provide infant mental health services to identified families. The infant mental health comprehensive assessments include intake assessment, psychosocial assessment of the caregiver and child, infant mental health assessments, developmental evaluation, neurodevelopmental evaluation and school/daycare observations to assess the status of the caregiver-child relationship.

- Nurturing Parent Program (NPP):** The Nurturing Parent Program (NPP) is a family based parenting program with a proven record of preventing and treating child abuse and

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

neglect. The state’s Family Resource Centers (FRC) located in every region offers Nurturing Parent groups. Technical assistance on implementation of the model is provided to the Family Resource Centers.

**Population Served:** This statewide program serves parents with children age birth to five that have parenting determined as a need in their service/case plan. A family can consist of single parents, parent couples, stepparents or parent paramours. The families referred should be at risk of child abuse/neglect or have experienced child abuse/neglect. The families could be intact or families with the goal of reunification of families. Families should not be actively using substances or in recovery.

**Services Provided:** Parents and children attend different groups for two hours with 30 minutes of family nurturing time between the first and second hour. Each group is followed by a weekly home visit to work one-on-one with the parent to assure the parent is able to demonstrate what they have learned. Parent groups consist of discussion, role-play, lecture, skill building, nurturing activities, and the assignment of home practice exercises. Children’s group activities consist of age-appropriate activities including role-play, music, arts, puppets, reading, infant massage and modeling for parents. The Nurturing Parent Program is 16 weeks long.

FFY	Number of Parents receiving NPP	# and % of parents who complete the Nurturing Parenting Program	# and % of parents who completed the Nurturing Parenting Program with a higher post-test mean score than the pre-test mean score.
FFY 2018	328	212 (64%)	198 (93%)
FFY 2019	520	339 (65%)	274 (82%)
FFY 2020	635	298 (47%)	150 (50%)
FFY 2021			
FFY 2022			
FFY 2023			

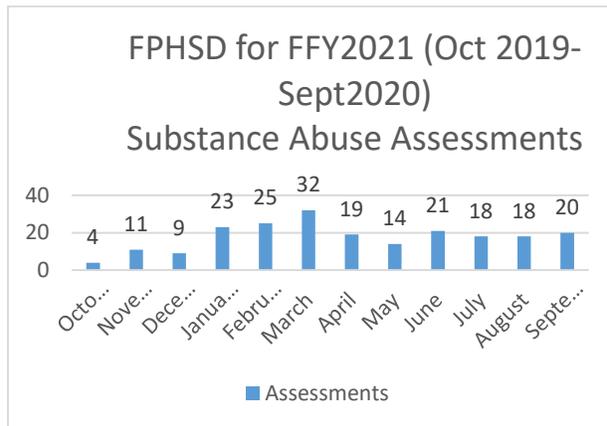
**NPP Update FFY 2021:** The Nurturing Parenting Program (NPP) is offered in each region of the state through Family Resource Centers (FRC). New Orleans Region offers the Positive Parenting Program and Effective Black Parenting through its FRC. DCFS continues to make available, support and provide technical assistance to each Region’s FRC by providing assigned liaisons and program managers from the agency. Currently services are being provided virtually due to the COVID-19 pandemic.

**NPP Activities Planned FFY 2022:** The Family Resource Centers (FRC) will continue providing NPP services to identified families. Families will continue to participate in the 16-week NPP evidenced based program offered at the FRC’s. The agency will continue to provide support and technical assistance through assigned liaisons and program managers to each region’s FRC.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Substance Abuse Counselors:** The Agency previously contracted with LDH to house Substance Abuse counselors in DCFS offices where in office substance abuse assessments were provided in addition to referral services.

4. **Substance Abuse Counselors Update 2021:** DCFS continued working in collaboration with LDH in order to place substance abuse counselors in four pilot parishes: East Baton Rouge, Livingston, Caddo, and Rapides parish offices. A substance abuse counselor has been placed in in the Covington Region through Florida Parishes Human Services and provides a monthly report to the region’s FS Consultant that includes a compilation of substance abuse assessments completed each month (see chart below). The contract with Florida Parishes Human Services and DCFS has been extended through June 30, 2021. Capital Area Human Services entered into a contract for a fulltime substance abuse clinician, social service counselor and part-time recovery coach July 1, 2020, providing services within three offices in the Baton Rouge region. The contract will expire June 30, 2021. A clinician, social service counselor and recovery peer specialist has been hired. Active Recovery entered into a contract with DCFS on July 1, 2020 serving the Caddo and Bossier Parishes. The contract expires June 30, 2021. The Central Louisiana Human Services District (CLHSD) contract with DCFS serving the Rapides parish is in the process of approval. The Substance Abuse Counselors will continue to provide substance abuse and behavioral assessments in addition to treatment referral services.



- S. **MONTHLY CASEWORKER VISITS (MCV):** DCFS will work to ensure by FFY 2024 and thereafter, caseworkers have consistently visited at least 95% of the children in the custody of the state monthly with 50% of these visits taking place in the child’s home. Departmental policy already requires caseworker visits occur every month in the residence of the child and allows a supervisor to temporarily assign another worker when the officially assigned worker is out of the office for an extended period. If this type of reassignment occurs, it is documented in the case documentation.

**Use of Monthly Caseworker Visit Funds:**

- Travel and associated costs to support caseworker visits.
- Support core competencies by teaching caseworkers the skills required to conduct quality visits, which focus on engagement and emphasize the need for seeing each child monthly.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Stress the importance of worker visits in New Worker Orientation, at Regional Administrator meetings, in foster care program supervisory mentoring, in on-going training on risk and safety assessments, as well as integrating the importance of family engagement, appropriate assessment of family functioning, and targeted case planning in these efforts.
- Ongoing implementation of the training program for new child welfare workers. The new workers remain in trainee status for a six-month period after employment and are trained using a competency-based training model, which includes traditional classroom training, on-the-job training, computer-based training, and blended learning.
- Provide field staff encrypted laptops with air cards to support a mobile workforce.
- Continue implementation of a teleworker plan to increase staff mobility, improve casework and retain staff.
- Develop strategies for staff to manage the workload effectively in a climate of staff reductions as well demonstrating the impact of staff reductions on service delivery resulting from fiscal shortfalls. In addition, the Department will continue examination of trends in performance indicators in the context of human resources data (staff on board, FMLA hours, separations and overtime hours worked) and workload data (number of cases per program, average caseload size, etc.).
- Support technology modernization efforts in developing a CCWIS system.

DCFS will continue to utilize the FATS system to provide the required data regarding monthly caseworker visits until the CCWIS system is completed. Data is extracted from the Tracking, Information and Payment System (TIPS) for state identification numbers (TIPS ID) and foster care entry and exit dates of all children served in foster care from October 1 through September 30 each FFY. The entry and exit dates are concatenated where each child had one record in the core data file and children with multiple episodes had all full months in care stored as a single episode. These IDs are matched against case notes in FATS to extract all face-to-face visits with each child made by an assigned caseworker or supervisor. If multiple visits occur in the same month, only one visit is counted. If any of the qualifying visits is made in the child's residence, the month is included in the numerator for visits occurring in the child's place of residence.

This section provides information on the federal mandate to assess and improve frequency and location of caseworker visits with children in foster care.

The table below tracks the annual progress of 95% of children in foster care being visited by their worker each month with 50% of the visits taking place in the child's residence.

<b>Caseworker Visit Compliance</b>				
FFY	% of children visited monthly by caseworker		% of children visited monthly whose visits were in child's residence monthly	
	Baseline/Goal	Actual	Baseline/Goal	Actual
2018	95%	95.46%	50%	97.29%
2019	95%	96.61%	50%	96.97%
2020	95%	97.37%	50%	97.46%
2022	95%		50%	

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

2023	95%		50%	
2024	95%		50%	

**Activities Planned for FFY 2021-2024:** In order to continuously monitor and improve compliance with monthly caseworker visits, the DCFS will do the following:

- 1) Continue monthly Performance Measures Consultant teleconferences to review regional performance in completion of caseworker visits in the child’s residence.
- 2) CW Data unit provides percentage of visits held with children monthly to the Foster Care Program unit and Regional Performance Measures Consultants.
- 3) All regions require caseworker visits with children to be completed by the end of the month. A few of those regions have required caseworkers visits with children to be completed by the fifteenth (15<sup>th</sup>) of each month instead of the end of the month, to allow the worker additional time if an emergent situation occurs. The manager has to monitor unachieved visits and ensure the worker completes the visit.
- 4) DCFS Data unit developed a dashboard report to reflect daily for workers statewide the status of all caseworker visits for ease in ongoing monitoring of compliance.

OJJ provides data annually for their foster care population and merges this data with the DCFS data to provide the complete caseworker visit report for all children in foster care in Louisiana.

**Monthly Caseworker Visit Update FFY 2021:** DCFS continued efforts as outlined above. Communication continued with local Child Welfare Managers to ensure all children who were in foster care were visited according to DCFS policies and procedures. DCFS continued reviewing and interpreting casework visit data ensuring the agency is within compliance.

**Monthly Caseworker Visit Activities Planned FFY 2022:** Continue as outlined above. DCFS will continue to monitor monthly caseworker visits and encourage timeliness. Policy will be updated as needed. The children’s safety will be assessed on ongoing bases.

**Office of Juvenile Justice (OJJ) Sampling Methodology:** OJJ utilizes the following methodology for evaluating compliance with the caseworker visit requirements.

**Data Reporting Population:**

- The OJJ population, for purposes of federal visitation are youth who were submitted to DCFS on the OJJ AFCARS file or children in OJJ custody who are covered by a Title IV-E agreement between the state Title IV-E agencies.
- Children in custody for at least one full calendar month during the FFY are included in the population.
- A child with more than one custody episode during the 12-month period is considered one child.
- Children placed in an out-of-state placement are included in the data reporting population of the state with placement and care responsibility for the children.
- If a state considers children who have returned home for a trial home visit to be in OJJ custody, then the children are included in the population.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Children who have run away from a placement are included in the population for as long as the child remains in the state's placement and care.

**Data Utilized for Computation and Verification:**

- The SAS data warehouse and DB2 SQL was used to develop reports to extract data from JETS related to caseworker visits with children identified as IV-E. JETS is a distributed Lotus Notes application supporting data from Lotus Notes and DB2.
- Case level data was extracted from JETS for all children indicated as IV-E. The extraction criteria identified which months were full months in care, and which months were not full months in care. The extraction criteria identified the months containing a recorded face-to-face visit and the months not reflecting a face-to-face visit.
- The data file generated by the OJJ SAS data warehouse was merged with the data file from DCFS. The merged file was analyzed by DCFS to complete computations on the number and percentage of expected and accomplished face-to-face visits and the number and percentage of those visits occurring in the child's residence.
- Testing and verification included case matches between the SAS data warehouse, the JETS Lotus Notes Narrative databases, and DB2. Case record reviews were conducted to verify the accuracy of the extraction logic.
- Data submitted to the Department included statewide totals for OJJ as well as data broken down by each region. The final data was submitted in Excel spreadsheet format.
- The DCFS provided the calculation of percentages and statistical data to the US Department of Health and Human Services, Administration for Children & Families from the combined DCFS and OJJ data sets.

The percentage of visits made on a monthly basis by caseworkers to youth was determined by taking the number of visits made during all full months children in the reporting population were in care and dividing it by the number of full months in care for all children in the reporting population. This quotient was multiplied by 100 and expressed as a percentage rounded to the nearest whole number.

The percentage of visits occurring in the residence of the child was determined by taking the number of monthly visits made to children in the reporting population during full months in care occurring in the residence of the child and dividing it by the total number of monthly visits made to children in the reporting population during full months in care. This quotient was multiplied by 100 and expressed as a percentage, rounded to the nearest whole number.

**DCFS Sampling Methodology:** DCFS has uses the following methodology for evaluating compliance with the caseworker visit requirements.

**Data Reporting Population:**

- All children under age 18 in foster care for at least one full calendar month during the FFY were included in the population.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- A child with more than one foster care episode during the 12-month period is considered one child.
- Children placed in an out-of-state foster care placement were included in the data reporting population of the state with placement and care responsibility for the children.
- If a state considers children who have returned home for a trial home visit to be in foster care, then the children were included in the population.
- Children who had run away from a foster care placement were included in the population for as long as the child remained in the state’s placement and care.
- Children in foster care covered by a Title IV-E agreement between the state Title IV-E agency and an Indian Tribe

FFY	# of Children Served in FC at Least 1 Full Month FFY 2014 (unduplicated)	# of Full Months in Care	# of Full Months in Care with Face to Face Visit by Assigned Worker	# of Qualifying Visit Months with a Visit in the Child’s residence	% of Full Months in Care with Face to Face Visits	% of Qualifying Visits occurring in the Child’s Residence
2018	6,782	50,293	48,008	46,708	95.46%	97.29%
2019	6,165	47,611	45,999	44,603	96.91%	96.97%
2020	5,424	43,008	41,876	40,811	97.37%	97.46%
2021						
2022						
2023						

❖ *Data to be extracted from Web Focus Developer Studio*

**T. ADDITIONAL SERVICES**

- Child Welfare Waiver Demonstration Activities:
  - Louisiana is not participating in any demonstration waivers at this time.
- Adoption and Legal Guardianship Incentive Payments:
  - Services the state expects to provide to children and families using Adoption and Legal Guardianship Incentive funds: DCFS anticipates utilizing the adoption incentive funds on child specific recruitment for those children available for adoption and in need of an adoptive placement. The services, will include, but not be limited to the following: media, contract assistance for timely completion of home studies for families interested in adoption, a child specific recruiter, and statewide match exchanges.
  - Should there be additional funds because of the changes to how adoption incentive funds are disbursed by the ACF, the department will assess the feasibility of increasing the number of days for post adoption respite beyond the current 25-day limit allowed in the adoption subsidy policy. The department will assess the feasibility of covering therapeutic services for those families ineligible to receive services through the Louisiana Behavioral Health Partnership.
  - Additionally, the Guardianship Subsidy program will be assessed for areas, which would benefit from additional supports to guardians in stabilizing guardianship settings and sustaining those care settings for the children.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- The state’s plan to ensure timely expenditure of the funds within the 36 month expenditure period: To ensure timely expenditure of the funds DCFS will develop a plan for usage by outlining child specific recruitment activities; assess contracted services for timely expenditure usage; identify costs of additional services; and, coordinate with the department’s budget section to ensure funds are appropriately utilized and expended within the allocated timeframe.

Federal Fiscal Year	Foster Child Adoption	Special Needs	Older Child (age 9 and older)	Amount Awarded
FFY 2018	912	904	226	\$1,980,351
FFY 2019	895	887	200	\$1,806,747
FFY 2020	757	751	185	\$1,675,213.57
FFY 2021				
FFY 2022				
FFY 2023				

*Data extracted on 01/05/2021 from WebFocus Developer Studio.*

**U. ADOPTION SAVINGS**

- Methodology for calculating and reporting annual adoption savings: Louisiana uses the Children’s Bureau method with actual amounts. Identification of actual amounts will not differ in any manner from the procedures used in the prior FFY.
- How adoption savings are spent: These funds are used for subsidized maintenance costs for otherwise Title IV-E ineligible children in provision of Adoption and Guardianship subsidies.
- Services state expects to provide children and families with adoption savings, 2020-2024: The Department intends to continue using the funds as they have been used in the past. Additionally the department is considering the following options for funding utilization:
  - Support groups for adoptive parents.
  - Start with experienced foster parents as mentors to do preventive support with potential foster/adoptive parents and relative caretakers from the very first placement and as needed along the way to help them be aware of and cope with the issues that arise immediately.
  - Look at paying experienced foster parents an hourly salary to be their mentor, i.e. understanding the importance of adoption over guardianship placement, overcoming struggles/barriers to finalize an adoption, working through adoptive and guardianship crisis situations to prevent disruption, etc. It was suggested DCFS consider using one experienced foster parent to mentor other foster parents in each region, including relative and fictive kin caretakers.
  - Funding for crises to prevent disruption.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Estimated timetables for spending unused savings calculated for previous years: All funds are being used at this time, nor are there typically unused funds.
- Challenges in accessing and spending funds: There are no identified challenges in accessing and spending the funds.
- If needed, complete and Attachment E: Louisiana has not changed the adoption savings methodology since 2015, and thus the Attachment E is not needed.

**V. FAMILY FIRST PREVENTION SERVICES ACT TRANSITION GRANTS:**

The Family First Prevention Services Act (FFPSA) authorized new optional title IV-E funding for time-limited (one year) prevention services for mental health/substance abuse and in-home parent skill-based programs for: 1) a child who is a candidate for foster care (as defined in section 475(13) of the Act), 2) pregnant/parenting foster youth, and 3) the parents/kin caregivers of those children and youth (sections 471(e), 474(a)(6), and 475(13) of the Act).

Louisiana intends to use FFPSA Transition Grant Funds to support child welfare activities allowable under title IV-B of the Act, including efforts to promote primary prevention of child abuse and neglect. Transition funds will be used for evidence-based practices to promote the well-being of children, youth and families and to prevent unnecessary foster care placements. Louisiana is in the process of contracting with Youth Villages to oversee the implementation of the Intercept model with providers in certain areas of the state in addition to being a direct service provider in certain areas.

Intercept®, developed by Youth Villages, is an integrated, intensive in-home parenting skills program used to safely prevent children from entering out-of-home care or to reunify them with family as quickly as possible if a period of out-of-home care is necessary (this includes, but is not limited to, foster care, residential treatment, or group home settings). Intercept is appropriate for children ranging in age from birth to 18, with services lasting four to nine months (typically, four to six months for prevention or six to nine months for reunification). Family Intervention Specialists work with both the child and the caregivers to address issues impacting the stability of the family, meeting an average of three times weekly in the home or community, depending on family need, and providing 24-hour on-call crisis support. Trauma-informed care is provided.

Going forward, Louisiana intends to contract with Child First to bring the model to Louisiana to provide intensive in home services to children zero (0) to age six (6). Implementation will occur in two (2) or more areas with four (4) Teams per Affiliate. Child First is an evidence based in-home prevention model, which has a holistic approach by a two-member clinical team.

In addition, DCFS will enter into a contract with the University of Louisiana at Lafayette, Kathleen Babineaux Blanco Public Policy Center (Blanco Center) to provide research support to DCFS in identifying best practices for agency programs; working with agency staff to identify and track key metrics related to program activities and outcomes; and conducting program evaluations to support the agency's efforts to improve the quality and impact of programs administered by DCFS.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**W. FAMILY FIRST TRANSITION ACT FUNDING CERTAINTY GRANTS:**

Not applicable as no funds are used at this time or plan to be used.

**SECTION 5 – CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES**

There are four federally recognized Native American Tribes in Louisiana:

1. **The Chitimacha Tribe of Louisiana** is located in Charenton, LA in St. Mary Parish. Lonnie Martin is the chief and Karen Matthews is the Director of Health and Human Services. The mailing address is P.O. Box 661, Charenton, LA 70523, and the telephone number is (337) 923-7000. Website: [www.chitimacha.gov](http://www.chitimacha.gov)
2. **The Coushatta Tribe of Louisiana** is located in Elton, LA in Allen Parish. Kevin Stickey is the Chairman and Rayne Langley is the Social Services Director. The mailing address is P.O. Box 967, Elton, LA 70532, and the telephone number is (337) 584-1433. Website: [www.coushattatribela.org](http://www.coushattatribela.org)
3. **Tunica-Biloxi Tribe of Louisiana** is located in Marksville, LA in Avoyelles Parish. Earl Joey Barbry is the chairperson and Evelyn Cass is the Social Services Coordinator. The mailing address is P.O. Box 331, Marksville, LA 71351, and the telephone number is (318) 253-9767. Website: [www.tunicabiloxi.org](http://www.tunicabiloxi.org)
4. **Jena Band of Choctaw Indians of Louisiana** is located in Jena, Louisiana, and includes parts of Grant, Rapides and LaSalle Parishes. Christine Norris is the Chairwoman and Mona Maxwell is the Social Services Director. The mailing address is P.O. Box 14, Jena, LA 71342, and the telephone number is (318) 992-0136. Website: [www.jenachoctaw.org](http://www.jenachoctaw.org)

Collaboration Activities: Annual meetings between federal, state and tribal partners are generally held to discuss collaboration, planning and service delivery between the state and the tribes. The meetings prove beneficial in improving service delivery to tribal families and children. Chafee Independent Living providers in regions where the tribes are located make ongoing outreach efforts to the tribes. Formal and informal working agreements with the Native American tribes are in place with local DCFS offices and state office staff facilitates quarterly teleconferences with all federally recognized tribes.

DCFS continues efforts to invite all tribal representatives to each quarterly PQI/CQI Stakeholder Subcommittee meetings. The goal is to improve communication with tribes on important matters such as notification of case planning meetings, safety/risk assessments, staffings, and court hearings. Tribes are located in jurisdiction of three regional PQI/CQI committees: Lafayette Region (Chitimacha Tribe), Lake Charles Region (Coushatta Tribe) and Alexandria Region (Tunica-Biloxi and Jena Band of Choctaw Tribes). To date, the Chitimacha Tribe Social Services Director has been the only participant in the statewide PQI Stakeholder Committee.

Plans, Reports and Reviews: DCFS provided tribes with an outline for the new Child and Family Services Plan (CFSP) and goals and action steps to obtain feedback for planning for the next five years at the annual tribal meeting.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Ongoing discussion regarding plans, reports and the state’s compliance with ICWA will be held in quarterly conference calls initiated by DCFS. The department will resume site visits with tribes. The DCFS will conduct the conference calls and encourage tribal participation through meeting reminders and requests for agenda items, which are important to tribes as well as coordinate the site visits.

Rights of Tribes to Operate a Title IV-E Program: DCFS is available to all tribes in the state, the Director of the Bureau of Indian Affairs, and the Director of the Louisiana Intertribal Council to negotiate in good faith with any tribe or tribal organization requesting the development of a Title IV-E agreement to administer all or part of the Title IV-E program, including the Chafee Foster Care Independence Program on behalf of Native American children, and to provide access to Title IV-E administration, training and data collection resources.

Measures taken by the state to comply with ICWA: DCFS provides initial and ongoing training to front-line staff to assure ICWA policy is understood and implemented and developed a computer-based course on ICWA, which is mandatory for staff. The course is available in the Department’s on-line training environment. Tribal representatives are invited to participate in trainings offered by DCFS. In consultation with tribes, Louisiana has developed policies and procedures to comply with the Indian Child Welfare Act.

Notifications to Indian Parents and Tribes: DCFS policy requires staff identify children who are Native American or eligible for tribal membership. The Child Protection Services (CPS) data system, A Comprehensive Enterprise Social Services System (ACCESS 2.0) intake screen captures information regarding Native American status, and inquiries continue throughout the life of the case, with Tracking, Information and Payment System (TIPS) data and/or ACCESS 2.0 being updated accordingly. Upon identification of a child served by DCFS and affiliated with a federally recognized Native American tribe, the tribe is notified. DCFS encourages identification of Native American children early in the child welfare process and stresses open communication with the family and the tribe throughout the family’s involvement with the department.

The department does not currently capture data within any of our data systems on the notification to tribes when a Native American child becomes involved in the child welfare system. DCFS captures this information on the case transfer staffing form when cases move from one Child Welfare program to another, but this is not an electronic process where data can be easily collected. The state hopes to achieve enhanced data tracking capacity in this area in the future if a Comprehensive Child Welfare Information System (CCWIS) system is developed.

DCFS is able to provide data on removals among this population. The table below reflects the total number of Native American Indian children who were alleged victims and victims who were removed because of validated abuse/neglect.

FFY	Total Alleged Child Victims (un-duplicated)	Total Alleged Native American child victims (unduplicated)	Percentage of Native American child victims	Total Validated child victims (unduplicated)	Total Validated Native American child victims (un-duplicated)	Percentage of Valid Native American child victims
2018 Baseline	26,672	71	0.27%	9,589	27	0.28%
2019	30,505	27	0.09%	8,252	7	0.08%

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

FFY	Total Alleged Child Victims (un-duplicated)	Total Alleged Native American child victims (unduplicated)	Percentage of Native American child victims	Total Validated child victims (unduplicated)	Total Validated Native American child victims (un-duplicated)	Percentage of Valid Native American child victims
2020	24,362	29	0.12%	6,810	7	0.10%
2021						
2022						
2023						
2024						

*The chart above reflects the total number of alleged Native American child victims unduplicated, the percentage of Native American child victims unduplicated.*

The following chart reflects the total number of Native American children who represented valid cases of abuse/neglect.

FFY	Native American Children entering Foster Care Program (single race)	Total Native American Children entering Foster Care program (multiple race)	Total Native American Children entering the Foster Care Program
2018 Baseline	4	6	10
2019	4	1	5
2020	14	0	14
2021			
2022			
2023			
2024			

*The chart above reflects the total of Native American children who represented valid cases of abuse/neglect.*

**Placement Preferences:** DCFS policy recognizes the special placement preferences for Native American children within the tribe if placement within the family is not possible. Policy addresses placement preferences for Native American children in foster care, pre-adoptive and adoptive homes. Policy requires children be placed with family and within a placement resource meeting the specific ethnic and cultural needs of the child.

**Services to Facilitate Reunification:** DCFS policy recognizes the need for services to facilitate reunification with their Native American families, when safe and appropriate. Policy addresses Native American children in Foster Care and the need to involve tribes and parents in the FTM process and court proceedings to facilitate the reunification process.

**Family Preservation:** Services are sought to prevent the breakup of Native American families. The DCFS is working toward building a continuum of services focusing on prevention and the preservation of the family unit for all families served by the Department, including tribal families. Limitations exist in the availability of services in rural areas of the state, which negatively affects the ability to provide services to tribal families and all other families who reside in rural areas.

**Tribal Jurisdiction:** Policy recognizes the rights of tribal courts and their jurisdiction. Policy has been updated to reflect the process of transferring jurisdiction to a tribal agency, if requested. Tribal courts usually allow the local courts to proceed, but would prefer complete details in an informed decision making process. It is hoped through ongoing participation of tribal representatives on regional PQI/CQI teams and on the statewide stakeholder committee, these

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

types of issues can be discussed and resolved in a satisfactory manner for all parties and in the best interests of the children and families served.

**Special Provisions:** The department has special provisions in policy applying to a child eligible for membership in a federally recognized Native American Tribe and involved in child custody proceedings relative to foster care placement, termination of parental rights, pre-adoptive placement and adoptive placement. These special provisions include family background investigation, pre-removal services, and hearing notification to the parent(s) and the tribe. DCFS requires Chafee Independent Living Service providers by contract to serve tribal youth in foster care with the tribe as well as in state custody in providing services.

**Plans for Tribal Collaboration for FFY 2020-2024 CFSP:** The state level Foster Care Unit will do the following:

- Continuously review and update policy and seek tribal input for improved guidance to departmental staff in serving Native American children and families;
- Conduct verbal communication at least quarterly and conduct onsite meetings annually with each Louisiana tribal social service director and their local child welfare tribal liaisons to collaboratively identify challenges and facilitate improved working relationships;
- Encourage tribal PQI involvement at the state level;
- Encourage tribal youth involvement in the Louisiana Youth Leadership Advisory Council (LYLAC), if previously in state custody;
- Notify tribes of monthly program specific webinars and other DCFS child welfare trainings provided to child welfare staff in relation to policy/legislative issues and encourage participation;
- Collaborate with Supreme Court, Court Improvement Program in planning for improved ICWA compliance in serving Native American families;
- Work with contracted Chafee Independent Living Services providers to reach out to tribes on a regular basis to offer support and services to tribal youth in custody who are transitioning to adulthood; and,
- Assist tribes with the development of a Title IV-E plan and/or agreement, if needed/requested.

**Collaboration with Tribes Update FFY 2021:** Foster Care Consultant and Extended Foster Care Consultant met quarterly with the Chitimacha Tribe, Coushatta Tribe, Tunica-Biloxi Tribe and Jena Band of Choctaw Indians. During these teleconference meetings, the Foster Care Consultant and Extended Foster Care Consultant offered any assistance needed. Updates on policies were provided regarding the tribes and data was received regarding COVID-19 with staff or tribal youth in custody. All tribes displayed interest in trainings provided by the department to elaborate more on what is needed from DCFS to better assist the children and training on the Indian Welfare Act. Tribal partners stated interest in sharing data for their tribal children and their process of recruiting members to become certified foster parents. Training information was provided as available. Face-to-face restrictions were put in place due to Covid-19 and teleconference meetings continued quarterly. The Foster Care Consultant and Extended Foster Care Consultant continued to maintain contracts with the tribes and provide assistance.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The extended foster care consultant provided tribes with information regarding tribal children eligible for financial aid training, \$5,000 yearly vouchers for school were given to tribal children, and assistance with furniture and housing was provided. Information was shared with the tribes via email.

**Collaboration with Tribes Activities Planned FFY 2022:** The Foster Care Consultant and Extended Foster Care Consultant continue to ensure all tribes are up to date with all department updates and changes. The department will continue teleconference meetings with all tribes until COVID-19 restrictions are lifted for face-to-face visits. The department will continue to encourage the tribes to recruit tribal foster parents for tribal children entering foster care.

**SECTION 6 – JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD (THE CHAFEE FOSTER CARE INDEPENDENCE PROGRAM – CFCIP):**

**Agency Administering Chafee:** The Department of Children and Family Services (DCFS) is the state department administering the Chafee Foster Care Independence Program (CFCIP) and Educational and Training Vouchers (ETV) Program. DCFS state-office staff members meet onsite with Chafee providers and the contract distributor of the ETVs at least quarterly. They complete a contract monitoring form to assure compliance with contractual obligations and federal regulations regarding Chafee and ETV funds during each quarterly visit. Staff attend Chafee independent living skills training classes offered by the providers to monitor youth participation and course content, as well as reviewing youth CFCIP service records to ensure individual assessment and service planning. Staff review youth ETV eligibility determination immediately prior to dissemination of each voucher, insure appropriate compliance with voucher dissemination prior to invoice processing monthly and require corrective action plans with Chafee and ETV providers as necessary.

**Description of Program Design and Delivery:** DCFS has strengthened services provided through the Chafee program by providing transitional services and Independent Living Skills (ILS) to prepare youth for transition into adulthood. DCFS has enhanced service array by providing in depth instruction within the home setting and classroom training to improve life skills for children ages 14-21. These services were shifted from classroom ILS preparation to in-home skill assessment and learning/planning for 16-17 year olds. Youth Engagement Programs were rolled out in each Region in addition to social skill building for ages 14-21. Case management services for those not in EFC are currently offered to youth ages 18-21. In July 2020 services were expanded to include services through age 23. To assist in improving services to youth, Permanency Consultants and Specialized Youth Workers (SYW) provide case consultation, on-site coaching and training to assist caseworkers and supervisors in working youth towards permanency prior to exiting foster care. In addition, assistance is provided with community outreach to inform stakeholders of program improvements. The enhancements are geared towards increasing engagement of youth in FTM's, collaboration with community stakeholders and enhancing the skills of DCFS child welfare workforce when working with young adults to include coaching in family search and engagement. DCFS expanded work with the Youth Advisory Board to help them restructure and plan initiatives throughout the year.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The programs are designed according to Positive Youth Development principles to achieve the purposes of the CFCIP and ETV programs. Consideration of adolescent brain development has been utilized in stratifying the curricula provided to youth through the CFCIP providers as well as in experiential learning opportunities provided to the youth. The CFCIP providers are moving toward a model of working with youth, which will be even more conducive to serving the developmental stages, and learning styles of youth as all learning activities are going to be individually targeted and tailored to each youth with the youth's input in designing the services the youth will receive. There will continue to be social activities hosted by the CFCIP providers to bring together the youth for peer-to-peer relationship development. Additionally, all youth will be provided a mentor to support relationship building and development of connections.

Service delivery for youth is provided by the youth's caregivers, DCFS workers and by contracted CFCIP provider agencies. Four agencies comprise the CFCIP providers statewide in nine regions. Goodwill of North Louisiana provides services in Shreveport, and Alexandria Regions. Louisiana United Methodist Children and Family Services serves the Monroe, Lake Charles, Lafayette and Covington Regions. Goodwill Southeast Louisiana serves New Orleans and Thibodaux Regions. Empower225 serves the Baton Rouge Region. The ETV provider for the state is the Louisiana Office of Student Financial Assistance (LOSFA). This state agency is located in Baton Rouge, but works collaboratively with the financial assistance offices of all accredited post-secondary institutions and programs throughout the state as well as other federal and state funding programs for individuals seeking post-secondary educational/vocational skill development. The National Youth in Transition Database (NYTD) is the database used by the state of Louisiana to report demographics regarding youth in foster care (sex, race, ethnicity, date of birth and foster care status) and outcomes of youth involved in the Foster Care and EFC programs. For additional information regarding data collection, please see the *Overview and Assessment of Recruitment and Retention: Data and Tracking of Recruitment and Retention* section of the plan.

**Serving Youth Across the State:** The LOSFA has done outreach across the state to the primary educational/vocational institutions. LOSFA does targeted outreach any time a current or previous foster youth indicates an interest in a program, which has not previously been available or utilized. Their educational institutions refer the youth to LOSFA for ETV applications and approvals. Youth are encouraged to explore available resources through the Orphan Foundation of America to access additional services. The state Foster Parent Association offers a variety of scholarships and achievement awards for youth exiting foster care annually. Information can be accessed at [www.lfapainc.org](http://www.lfapainc.org). DCFS has a youth link on the Department's internet site, which is disseminated routinely to youth to provide them information on education and other services to support the transition to adulthood. This link is [www.dcfslouisiana.gov](http://www.dcfslouisiana.gov) under the tab for Child Welfare, and then the tab for Youth Link.

Prior to age 18, a DCFS worker or an Office of Juvenile Justice (OJJ) worker who has primary case management responsibility serves each youth. (Tribal Social Service workers serving youth in tribal foster care with the four federally recognized tribes within Louisiana may make referrals.) The caseworker refers youth to the CFCIP provider for life skills training beginning at age 14 or entry into foster care, if entering state/tribal custody after age 14. The CFCIP provider may serve youth enrolled in CFCIP services up to age 23, as needed. Youth are informed of the ETV program by their DCFS caseworkers and by CFCIP providers. By completing the Free Application for

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Federal Student Aid (FAFSA) and indicating he/she was a ward of the state, or by applying for financial assistance through any federally recognized educational or vocational program, a youth is referred to the Louisiana Office of Student Financial Assistance (LOSFA) for ETV consideration. The Department monitors compliance with ETV guidelines through verification of eligibility, consultation with LOSFA and periodic disbursement of funds.

**Education and Training Vouchers (ETV):**

Youth are eligible to receive an ETV if the youth are currently under the age of 26 and meet one of the following criteria:

- Exited foster care from DCFS or a federally recognized tribe at age 18 or OJJ custody between ages 18 and 21;
- If the youth exited foster care from DCFS custody after age 16, but prior to age 18 to an adoption or guardianship arrangement;
- If the youth exited foster care after the age of 14, but prior to age 18 to another permanency option (ex: reunification, custody to a relative, etc.)

Louisiana extends ETV services to youth from other states/tribes meeting the same criteria who live in Louisiana and are not receiving ETVs from their own state/tribe.

ETV awards are based on need and a formula is used to ensure the youth receives the highest benefit possible. DCFS staff and Independent Living providers give the youth information concerning the ETV and this is documented on the Youth Transition Plan (YTP).

Youth ages 16 and 17 who are dually enrolled in accredited secondary and post-secondary programs are eligible for ETVs. Satisfactory progress toward degree completion is required in order to maintain eligibility.

DCFS offers CFCIP and ETV services to all youth meeting the criteria above.

Youth receiving an ETV are required to apply for all financial aid and scholarships for which they might qualify. Periodic review of the youth's progress will continue to occur to assure the youth receives the services to meet educational or training needs and achieve educational goals. Each participant is required to submit grades each semester or quarter to LOSFA, and/or a DCFS program consultant so the youth's progress and performance can be assessed and continued expenditure of ETV funds can be justified.

The Independent Living Program participate in a site review every quarter at which time youth are interviewed regarding the services they are provided through the program in which they participate. DCFS participated in the Jim Casey Youth Town Halls, Children's Bureau Virtual Roundtables and virtual forums. The Department works very closely with the Louisiana youth advisory board, Louisiana Elite Advocacy Force (LEAF). LEAF have members who are peer support with the Independent Living Providers (ILP) throughout the state. The peer support are able to provide feedback regarding the needs of the youth and young adults they serve. DCFS's Youth Consultants will meet with the supervisors of the ILP's to discuss feedback received from the youth regarding services. Feedback includes not only the effectiveness of the curriculum but also their youth engagement activities. If the youth identify activities that were not helpful, the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Consultants will address the feedback with the providers so that changes can be made. The Consultants also review participation levels and discuss concerns regarding why youth may or may not be participating. Due to many of the activities, needing to be facilitated virtually this year there was a decrease in the level of participation. Due to the pandemic, the Department will purchase a new Independent Living Curriculum, Life Skills Reimagined. The curriculum is online but is reinforced by the independent living specialist employed by the providers. The department will have access to all youth enrollment and completion.

The Department developed a survey during this reporting period for both youth and caretakers regarding Independent Living Services offered and their effectiveness. This survey will be distributed in the next reporting period. Once the survey is received, the information will be incorporate into the feedback of the scope of work within DCFS's contracts with the Independent Living Providers (ILP)'s. DCFS will be seeking new ILP proposals for the next contractual year.

In order for a student to be considered for many of the federal and state aid programs, they must complete the Free Application for Federal Student Aid or FAFSA. The postsecondary school uses the information from the FAFSA to determine eligibility for those programs. A student cannot receive any financial aid that exceeds the cost of attendance.

Cost of attendance varies from school to school. The elements of cost of attendance include tuition, books, room and board, miscellaneous expenses, transportation, and childcare (if the student has a dependent). Students in off-campus housing have a higher cost than those living in the dorm or those who live at home. The formula for federal and state aid is:

Cost of attendance/COA minus expected family contribution/EFC (derived from info on the FAFSA) equals financial need.

Cost of Attendance (COA) – Expected Family Contribution (EFC) = Financial Need

Schools are required to use the formula above and cannot receive aid in excess of the cost of attendance.

Five groups of youth continue to be eligible for CFCIP services after they leave foster care:

1. Youth in the Extended Foster Care Program.
2. Youth who left foster care for adoption or guardianship after age 16 but prior to age 18 are informed by their worker of their continued eligibility for CFCIP services up to age 23, and are potentially eligible for ETV services, when the youth leaves foster care.
3. All youth who leave foster care for any reason after beginning CFCIP life skills training are eligible and encouraged to remain in the program until they complete it.
4. Youth who have aged out of foster care and make a plan to continue educational and vocational pursuits with the assistance of the ETV program.
5. Youth who have completed the life skills training program with a CFCIP provider may always return to the provider for additional assistance as resources allow.

Please note that the current DCFS Chafee services are available to age 21. DCFS changed to the Independent Living (IL) providers serving young adults to age 23 starting July 2020. Young adults

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

18-23 are able to receive case management to include emergency assistance funds and coaching in IL skill building. They have the opportunity to be involved in youth engagement activities and programs, skill specific educational classes, and included in social activities.

NYTD data is discussed with field staff, state office staff, youth, OJJ staff, the Louisiana Elite Advocacy Force (LEAF) and with the CFCIP providers. During these discussions, staff reiterate the importance of this information in assessing service delivery and improving work with youth. The CFCIP providers assist in surveying “NYTD follow-up youth”. DCFS implements an ongoing plan for the CFCIP providers to stay in contact with the sampled “NYTD follow-up youth” and with the baseline youth as they enter the population. The plan ensures CFCIP providers will have contact with each of these youth a minimum of every 60 days. It requires the providers send the youth a birthday and Christmas card to sustain the relationship and remind youth of the availability of the CFCIP providers as a connection and resource for services.

DCFS does not have the ability to compare NYTD data by region to determine if services vary by location. The Independent Living contract service providers provide a consistent service array across the state. Each of their programs provide the same menu of services, same assessment, and same delivery technique of services. They will be using the same curriculum for independent living skill development within the next few years. Over the next two years, DCFS will be working with the local communities to build additional services in an adequate and functioning service array statewide.

DCFS is developing a CCWIS system that will allow for the increased accuracy of data collection for NYTD data elements. This will allow NYTD services data to be pulled from the data system regarding services received. We are working to develop a report in the interim that can compare the AFCARS and NYTD data. The baseline surveys will continue to be collected by the Independent Living contract providers. They make direct contact with young adults to facilitate the completion of baseline surveys. We will be strengthening our plan to share NYTD data with an increased number of stakeholders and youth to improve program development and change. This will include training youth to share the data with other youth.

**Collaboration with Tribes:** In all discussions with the tribes, they have requested information on Chafee services available. Due to the small number of youth they serve, they have stated their interest in obtaining services through our contract providers when needed. The State Office team makes contact with each tribe quarterly by phone and email and then makes in-person visits annually. In addition, each year the Independent Living contract providers must meet with each tribe to discuss services available within their programs and how services are accessed. To date none of our federally recognized tribes have requested any Chafee or ETV services for their youth.

**Collaboration with other Private and Public Agencies:**

Louisiana Elite Advocacy Force (LEAF): There have been two LEAF board retreats and one workday. There are monthly executive team calls as well as monthly board calls. The board has three committees:

- 1) Policy: Completed Youth Bill of Rights. Senate Bill 151 is scheduled to be heard. Partnership with the Pelican Center for Children and Families to increase youth voice in

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- the courtroom. Creation of a Court Prep Form. Inclusion in the Pelican Center Code Committee, Trauma-informed court workgroups and Care Committee listening groups.
- 2) Placement Stability: Development of a placement stability survey used through home development and DCFS workers; foster parent “scenario” training; youth survey to evaluate their: experience with DCFS worker, involvement in case planning and decision making, experience in current foster home placement, connection with biological. Family members, over all foster care experience while utilizing “What Helps What Harms” questions.
  - 3) State Boards Structure and Training: Continuous updates to board’s bylaws and creating new processes such as applications and code of conduct.

Goodwill Industries: Goodwill Industries continued with their *GoodFutures* program which improves educational and employment opportunities for at-risk youth, ages 16-19, to achieve lasting financial stability and self-sufficiency. For students who have not graduated high school, Goodwill Industries partners with Bossier Parish Community College (BPCC) to provide HiSET classes, as well the opportunity to receive a nationally recognized retail certification. This program is funded by Bossier Parish Community College and is offered at no cost to its participants.

Goodwill Industries continued with their Good Transitions program and collaboration with DCFS, which is a referral, based program through the Department of Children and Family Services (DCFS) that provides free services to youth ages 14-21 in foster care. The program's goal is to develop skills and supportive services necessary for the youth to become independent and to transition into adulthood and assume personal responsibility for their daily care.

Methodist Children’s Home: The Methodist Children’s Home continued to provide the most comprehensive, intensive residential care for children in Louisiana on three campuses in Ruston, Mandeville, and Sulphur. The Life Skills Program continued to serve not only residents of Louisiana Methodist Children’s Home, but children living in group homes and foster homes in twenty-nine parishes in the following regions: Monroe, Covington, Lake Charles and Lafayette. This program provided the opportunity for youth, ages 14-17, to learn the life skills necessary to transition successfully into independence. Many youth returned after completion of the program from ages 18-21 to refresh their skills and receive Case Management Services. Life Skills Training Centers collaborated with other community-based programs to offer education and training. These other programs included churches, transitional living facilities and schools, all of which assist youth in transitioning successfully into adulthood. Additional training was offered to foster parents and DCFS staff. The Life Skills Training Center maintained the Hope Chest Program to collect donations of household items such as pots and pans, bathroom accessories, bedding, small appliances, etc.

The COVID-19 pandemic required the Family Counseling Center therapists shift gears and continue to serve the community using Telehealth to support the mental health needs of children and families. The Family Counseling Center offers sessions via tele-health and in person and follows CDC and LUMCFS guidelines regarding health screenings.

Empower 225: Please refer to the Collaboration section of the APSR.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Housing Authority of New Orleans (HANO): DCFS collaborated with the HANO regarding the Foster Youth Initiative (FYI). DCFS plans to incorporate FYI into more locations pending the availability of providers. DCFS and HANO worked with referral sources, and ensured youth in care meet criteria for services.

**Determining Eligibility for Benefits and Services:** The state's criteria for objectively determining eligibility for benefits and services under the CFCIP and ETV programs is described above in the other portions of the John H. Chafee Foster Care Program section of this plan.

**Cooperation in National Evaluations:** DCFS will work with the CCWIS team over the next five years to ensure capability to provide relevant data elements from NYTD that incorporates data that includes the services received and other sources of information that addresses how services vary by region.

**Chafee Training Update FFY 2021:** DCFS continued educating providers and youth regarding the availability and changes in service array for young adults by providing trainings to each DCFS region, ILS providers and Youth Advisory Boards throughout the state by June 30, 2021.

The Department contracted with three agencies to provide independent living services to youth ages 14-23; this is an increase from age 21 to 23. These agencies serviced the entire state of Louisiana. Services included independent living skills, youth engagement programs, monthly case management, Love 146 and peer support. Independent Living Providers were responsible for doing all NYTD follow up surveys. All youth were referred to an Independent Living Provider at the age of 14 and that provider continued to provide services until the youth's case is closed. Young adults who age out of foster care or extended foster care can receive services from the provider until the age of 23. These youth are informed of this resource at case closure. The Department has one When Actually Employed (WAE) who is responsible for ensuring that NYTD completed timely and accurately within each reporting period and one staff member, that provides quality assurance prior to submission for approval. DCFS coordinated with OJJ to ensure the list of NYTD surveys was completed. The Department and HANO signed an MOU to begin the FYI program in Orleans. There are currently nine young adults referred to the FYI program. The Department worked with HUD to grant 25 vouchers to EFC young adults who meet eligibility requirements.

**Chafee Training Activities Planned for FFY 2022:** DCFS will continue educating providers and youth regarding the availability and changes in service array for young adults by providing training to each DCFS region, ILS providers and Youth Advisory Boards throughout the state. The Independent Living (IL) providers will include a financial literacy curriculum for 14-17 year olds this summer (2021). A new Independent Living Curriculum (Life Skills Reimagined) was purchased that IL providers will begin to use in July 2021. The Department and IL providers will be assisting young adults with transportation (this is a piece of the Division X Funds). This assistance will include payment for car insurance, driver's education, driver's license, ride shares, purchase of vehicles, maintenance, and other needed services.

DCFS will roll out the use of the Peer Support curriculum during the next fiscal year. This will include continued training plans for the curriculum and ongoing plans for additional uses of the curriculum. DCFS plans to implement a Youth Ambassador position to work through a contractor

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

and work in partnership with DCFS State Office Transitioning Youth staff, Peer Support staff, and the State Youth Board, including legislative activities. This Youth Ambassador will continue coaching for peer support staff. DCFS will be working to ensure the appropriate training regarding coaching is obtained for this individual. The Youth Ambassador will be a young adult who aged out of foster care in Louisiana. DCFS will continue to search for a new IL curriculum to replace the one currently being used. A new RFP will be started to plan for a new contract process for IL contracts. Continued support and growth of the State Youth Board and regional Youth Engagement Programs will continue.

- A. EDUCATIONAL AND TRAINING VOUCHERS (STATISTICAL & SUPPORTING INFORMATION):** The ETV program, the methods the state uses to operate the program efficiently, and the methodology for assessing the use of these benefits is embedded within the John H. Chafee Foster Care Program information above.

The chart below reflects the continuing and new ETVs issued by year according to the state’s school year, which runs from August through July each year.

<b>Continuing and New ETVs by School Year</b>		
<b>School Year</b>	<b>Total Vouchers</b>	<b>New Vouchers (First Time)</b>
School Year 2018 (Baseline)	97	29
School Year 2019	92	35
School Year 2020	95	22
School Year 2021	95	20
School Year 2022		
School Year 2023		

- B. CONSULTATION WITH TRIBES:** The involvement of the federally recognized tribes in accessing CFCIP and ETV services is described throughout the John H. Chafee Foster Care Program section of this plan.

**SECTION 7 – UPDATES ON TARGETED PLANS WITHIN THE 2020 – 2024 CFSP:**

- A. FOSTER AND ADOPTIVE PARENT DILIGENT RECRUITMENT PLAN:** As per Section 422(b)(7) of the Social Security Act, the state provides for the diligent recruitment of foster/adoptive families meeting the needs of the infants, children, youth served by the child welfare agency. The following information describes the state’s plans for the 2020-2024 Child and Family Services Plan (CFSP).

**Characteristics of children for whom foster and adoptive homes are needed:** Children who enter the Louisiana foster care program are from diverse racial and ethnic backgrounds. Many of these children have various medical, emotional, behavioral, developmental and/or psychiatric needs. Other characteristics include adolescents, older youth and sibling groups. The Department’s goal is to have a sufficient number of foster/adoptive parents to meet and/or match the various placement needs. On May 3, 2021, there were 1,271 (African-American); 1,823 (Caucasian); and 270 (Other) children in foster care, which equates to 37.8% being African-American; 54.2% being Caucasian; and 8% other. (This is information was obtained from Web Focus.)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The regional Home Development program staff is responsible for preparing an annual recruitment/retention plan tailored to address the region specific temporary and/or permanent placement needs. A copy of the plan is made available to the state office level Home Development program for monitoring purposes.

The demographic data shows the following racial makeup of 933 single parent families for FFY 2020:

- 400 Caucasians (383 females and 17 males)
- 530 African-Americans (520 females and 10 males)
- 2 American Indian/Alaska Native (2 females and 0 male)
- 1 Asian/Pacific Islander (1 females and 0 males)

Of the 933 single parent families, 910 were not Hispanic; 9 were Hispanic; and 14 were Unknown. The remaining 2,045 were two-parent families; the demographic data indicates the following racial makeup:

- Caucasians – 1,624 (Parent 1) and 1,594 (Parent 2)
- African-Americans – 410 (Parent 1) and 430 (Parent 2)
- American Indian/Alaska Native – 5 (Parent 1) and 5 (Parent 2)
- Asian – 4 (Parent 1) and 7 (Parent 2)
- Native Hawaiian/Other Pacific Islander – 2 (Parent 1) and 7 (Parent 2)
- Unknown – 0 (Parent 1) and 2 (Parent 2)

Of the 2,045 dual parent families – 1,981 (Parent 1) and 1,985 (Parent 2) were not Hispanic; 35 (Parent 1) and 32 (Parent 2) were Hispanic; and 29 (Parent 1) and 28 (Parent 2) were Unknown.

**Specific strategies to reach out to all parts of the community:** The DCFS continuously, seeks out community partners and/or resources to assist with meeting the temporary and/or permanent placement needs of children in the foster care program. During the previous five years, the Department experienced tremendous strides (as result of the designated regional recruiters), as well as some minor delays (resulting from the dissolving of the regional recruiter positions). Moving forward, the Department began to expand its utilization of community partners and stakeholders in the recruitment, certification and retention process. The partners include the cooperative agreement with the Louisiana Baptist Children’s Home, the Court Improvement Project and Wendy’s Wonderful Kids (WWK).

DCFS has continued to support implementation of the Quality Parenting Initiative focusing on providing quality care for children in foster care through improving relationships between foster parents, birth parents, and staff and engaging all for improved outcomes for children and families.

In order to provide updated information and current best practice strategies, 51 DCFS staff and foster parents participated in the QPI National Virtual Conference in May 2020. Additionally, 1365 staff, foster parents and birth parents participated in the 10 best practice

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

webinars offered during this quarter focusing on establishing and building relationships with foster parents and birthparents.

To support ongoing practice improvement within each region, work plans were developed within each region to identify strategies and plans to support continuous quality improvement with the Quality Parenting Initiative. These regional planning meetings were led by National QPI to develop region-specific work plans to further focus on Initial calls and Ice Breakers.

Additionally, DCFS enlisted the assistance of the Youth Law Center (YLC) to develop online transitions training that had previously been a 6-hour in-person training. The online training has been consolidated into two 3-hour online trainings. This web-based training began in January 2021 and will be scheduled throughout the year.

Throughout the year, regional leadership participated in monthly QPI implementation calls/zoom meetings. These monthly meetings review practice compliance, data review, share successful practice strategies, and address questions regarding implementing quality parenting practices.

In collaboration with the Child Welfare Training Academy at Southeastern LA University, Tulane University Psychiatry department developed a training curriculum on Planful Transitions for children in care. The initial trainings began in May and continued throughout 2020 to ensure front line staff understand the impact on moves for children and of the essential components and strategies for successful transitions related to children and families in care. The training was provided to foster caregivers throughout the state. DCFS utilized a train the trainer model in order to support sustainability of this training.

DCFS will continue focus on improving skills relative to the utilization of Initial Comfort Calls, Icebreaker Meetings, and Transition Planning practices. Transition Planning Training began in January 2021 and will continue being provided to all staff. Regional planning meetings and trainings will be held at least twice in 2021 and 2022 to further skill development and engagement of families, caregivers and community stakeholders and partners. Finally, a statewide meeting is planned for mid-2022 in order to provide staff, caregivers, parents, and community partners and stakeholders the opportunities to share experiences and collaborate on continuous quality parenting implementation strategies.

**Strategies for recruitment of foster/adoptive parents may vary from region to region. From an overall, statewide perspective, DCFS plans to utilize the following strategies to reach out to all parts of the community:**

1. General recruitment focusing on bringing about an awareness of the need for foster/adoptive families;
2. Targeted recruitment focusing on the specific needs of the children and youth in care, with demographic data (e.g., characteristics of children in care and characteristics of certified families); and
3. Child specific recruitment focusing on seeking adoptive resources for a child and/or a sibling group who are without an identified adoptive resource.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Recruitment of Foster/Adoptive Parents Update FFY 2021:** This past year there has been no in-person recruitment due to COVID-19; however, DCFS continued to focus on the three strategies listed above through social media messaging. DCFS worked with Louisiana Fosters, a campaign established by Louisiana's First Lady, to host a virtual Summit August 21, 2020. The Summit focused on faith-based recruitment and what churches and organizations could do to recruit and support foster caregivers. The Summit had over 90 persons in attendance representing faith-based organizations throughout the state. Staff continue to prioritize recruitment and certification efforts for older youth and special needs children; these priorities therefore reduced the numbers of certifications for younger children. In addition, Methodist Children's Home assisted with child-specific certifications.

**Recruitment of Foster/Adoptive Parents Activities Planned for FFY 2022:** DCFS will continue to focus on the three strategies listed above. DCFS is working with the DCFS Communications Department to develop a virtual recruitment campaign to be launched in May 2021.

**B. HEALTH CARE OVERSIGHT AND COORDINATION PLAN:** Practitioners and providers who opt into the provider networks of managed care organizations (MCOs) provide health care services for children in foster care. The Health Care Services plan is operational as a Memorandum of Understanding (MOU) between the DCFS, LDH and OJJ.

**C. DISASTER PLAN: (See Appendix D and E)**

**• Specify whether the state was affected by a natural disaster since submission of the 2021 APSR, and, if so, describe how the Disaster Plan was used and assess its effectiveness.**

Below are the events that DCFS-EP responded to in 2020. The Winter Storm in February 2021 and the Heavy Rainfall (flooding event) in May 2021 were local events and did not have any activation of DCFS staff to support, with the exception of DSNAP for the winter storm. DSNAP is currently pending request and approval by ES for the flooding event.

- Coronavirus Response (March 12, 2020)
- Tropical Storm Cristobal (June 7, 2020)
- Hurricanes Marco and Laura (Combined event) (August 25 / August 27, 2020)
- Hurricane Sally (September 14, 2020)
- Hurricane Delta (October 9, 2020)
- Hurricane Zeta (October 26, 2020)
  
- Winter Weather (February 11, 2021)
- Heavy Rainfall (May 17, 2021)

Hurricane Laura impacted 439 families served. During hurricane Delta there were 289 families being served through our in-home services program living in the impacted areas. Hurricane Zeta impacted 261 families. DCFS made outreach efforts to all families served within the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

impacted areas. Winter storms also affected 23 parishes in Louisiana from February 15-18, 2021.

Louisiana's Unified Shelter Plan designates DCFS and Louisiana Workforce Commission (LWC) as lead agencies to support Critical Transportation Needs (CTNS), Medical Special Needs (MSNS) clients and Unaccompanied Minor shelters. General Population sheltering is under the control of the Louisiana Shelter Task Force. During a pandemic, the plan is to utilize congregate with increased square footage for evacuees and non-congregate shelters where possible. Space requirements under a pandemic greatly reduces the state's congregate shelter capacity.

Statewide COVID-19 planning began on February 28, 2020 with a Louisiana COVID-19 Task Force Call. COVID-19 response for ESF-6 included planning, establishing, and operating three Isolation Sites and support to one Medical Monitoring Station and Annex. These efforts prepared Louisiana to have capacity to isolate citizens that did not have the ability to isolate themselves and created capacity for hospital overflow with the Medical Monitoring Station.

Hurricane response planning for sheltering changed with COVID-19. Due to COVID numbers, Governor and State Health Officer's guidance changed to utilize Non-Congregate Sheltering (NCS) to the most extent possible. Louisiana did not have a NCS plan for Mass Care Levels 3 and 4; therefore, we began work on a pandemic annex to the Louisiana Unified Shelter Plan.

The Louisiana Unified Shelter Plan (USP) is a state document, which outlines the planning considerations surrounding the sheltering of all citizens in the State of Louisiana. LA USP can be found on Governor's Office of Homeland Security and Emergency Preparedness (GOHSEP) website or the link below:

[https://gohsep.la.gov/Portals/0/Documents/Prepare/Planning/2020\\_06\\_05\\_Louisiana\\_Unified\\_Shelter\\_Plan\\_Updated.pdf?ver=2020-08-14-092946-323](https://gohsep.la.gov/Portals/0/Documents/Prepare/Planning/2020_06_05_Louisiana_Unified_Shelter_Plan_Updated.pdf?ver=2020-08-14-092946-323)

**• Describe whether and how the Disaster Plan has been used during the COVID-19 pandemic and national public health emergency.**

As a supplement to the State's Annual Progress and Services Report, we provided an additional COVID specific response plan and referenced it in our regular disaster plan. Please reference that plan in SECTION 8. COVID – 19 PANDEMIC STATE RESPONSE of the 2021 APSR and any adjustments to that plan in SECTION 8. COVID – 19 PANDEMIC STATE RESPONSE of this report.

**• Indicate in the 2022 APSR if there are any changes or additions needed to the plan, including any needed updates to maintain contact with families and ensure uninterrupted essential agency operations during a public health emergency.**

State Offices were either closed or reduced occupancy as indicated in the above referenced Proclamations. Revisions made to case contact and visitation requirements to require and/or encourage virtual contact/visits instead of in-person visits. Purchase of PPE's for staff use when conducting required in-person contacts. Issuing screening protocols for staff when making

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

required in-person contacts. Implementation of Practice Support Teams to provide staff guidance when encountering families who did not pass the COVID-19 screening protocol. Implementation of screening protocols and temperature taking in DCFS offices.

Information on the change or update to the Disaster Plan is located in Attachment D and E.

**Disaster Relief Act Funds and Accomplishments Update:**

To address the needs of children and families in the three identified parishes affected by disasters under the Disaster Relief Act Fund Grant and promote Louisiana's flexibility in the development and expansion of a coordinated child and family services program that utilizes community-based agencies, the following has been accomplished through the My Community Cares (MCC) Initiative:

- The MCC Initiative has been implemented in the following affected areas: East Baton Rouge Parish (Baton Rouge Region), Livingston Parish (Covington Region), and Rapides Parish (Alexandria Region).
- A MCC Parish Coordinator has been identified in each of the three parishes to: serve as a community resource and engagement liaison to the courts, DCFS, Family in Need of Services (FINS), Family Resource Centers (FRCs), service providers, and other legal and child welfare stakeholders to help them link children and families to community-based resources in the three pilot parishes; act as an MCC point-of-contact for communication regarding MCC on the neighborhood, parish, and state levels; and lead Parish and Neighborhood Teams in discussing the social determinants of abuse and neglect, gaps in services, unmet needs in the parish and priority neighborhoods, and what children and families in them need to be safe, stable, and self-sufficient; identifying persons and/or entities families trust in and/or go to in their parishes/neighborhood to provide information on services and supports; and, co-designing solutions with neighborhood residents, child welfare and legal stakeholders, and community partners and implementing strategies to overcome barriers, meet needs, and prevent child abuse and neglect and entry of children into foster care in the parishes/neighborhoods.
- Each of the three parishes have established an MCC Support Team who meet at least every other month to provide overall support to the MCC activities and teams. At a minimum, these teams consist of the MCC State Coordinator, My Community Cares Connection Portal Administrator, DCFS staff, a judge, and a few key child welfare and legal stakeholders.
- Each of the three parishes have established an MCC Anchor Team who meet at least every other month to enhance coordination, collaboration, and communication within the parish to identify and solve barriers and connect children and families to services and supports they need based on the parish's unique set of resources and opportunities. At a minimum, these teams consist of the MCC Support Team, community residents, parents and former foster youth with lived experience with DCFS, foster parents, child welfare and legal stakeholders, government officials, businesses, service providers, churches, schools, and nonprofits.
- Each of the three parishes host MCC parish-wide meetings quarterly to: share relevant child welfare, FINS, poverty, crime rates, and other important data about the priority zip codes; provide updates on the various MCC activities; conduct and continuously

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- assess SWOT analyses to determine Strengths, Weaknesses, Opportunities, and Threats related to connecting families to the services and supports they need to be safe, stable, and self-sufficient; learn about the various services and resources available in the parish; identify gaps and barriers to services and in current communication and referral processes that may be hindering families from accessing services; create strategies to improve service delivery and array and overcome barriers in priority neighborhoods as well as address the impact implicit biases, poverty biases, racial disparities, and disproportionalities have on service array and delivery; invite participants to be a part of the MCC Parish Anchor Team; discuss ways to build neighborhood teams; ask for attendees to sign up to be on a MCC Neighborhood Support Team in order to start building MCC Neighborhood Teams; discuss upcoming events, trainings, and partnership opportunities; and, develop a coordinated process for efficient communication and referrals between DCFS, legal stakeholders, CASA, service providers, and community partners to connect families with quality services including services linked to protective capacities, timely referrals, and effective supports.
- Each of the three parishes identified MCC Neighborhood Coordinators for each of the priority neighborhoods to lead, implement, and administrate the neighborhood level MCC key activities, lead their MCC Neighborhood Team, and serve as a community resource/services liaison to the courts, DCFS, FINS, FRC's, and community members to help them link families to community-based resources.
  - Each of the three parishes established MCC Neighborhood Teams to lead MCC key activities in that neighborhood, consisting of the MCC Neighborhood Coordinator and community members.
  - The following listening circles were hosted across all three of the parishes to assess barriers to services and supports they needed to prevent child welfare intervention: three for parents with lived experience with DCFS with 45 participants; three for foster parents with 40 participants; and three for former foster youth with 20 participants.
  - Twenty-five (25) community conversations were held with 945 plus community members from the priority zip codes across all three parishes to present data on child abuse and neglect in each community, find out who community members turn to and trust to get their needs met, discuss gaps in services, unmet needs, social determinants of abuse and neglect, and what children and families in their neighborhoods need to be safe, stable, and self-sufficient.
  - Five-hundred (500) plus MCC Parent and Caregiver Needs Assessments were conducted on parents/caregivers from priority zip codes across all three parishes to determine unmet needs, partner with service providers and community partners to meet the needs identified by the parent/caregiver, and utilize the data to inform strategies and action plans.
  - Participatory asset community maps and Strengths, Weaknesses, Opportunities, Threats (SWOT) analyses were conducted in each of the three parishes with MCC teams to inform strategies and action plans.
  - Two online management platforms have been established:
    - My Community Cares Connection Portal (MCCCP): MCCCP is an online platform that facilitates collaboration between MCC partners, DCFS, courts, FINS, FRCs, legal and child welfare stakeholders, and a cross-sector of service providers and community partners to coordinate care, share information, and

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

connect children and families to the services and supports they need to be safe, stable, and self-sufficient. Once user's login, they have access to: (1) search the organizational directory to find service and supports for families (based on the information inputted by organizations who have completed the service array assessment); (2) communicate with one another and join teams with other users; (3) share calendars, forms, and information; and, (4) collaborate together to plan activities, meetings, events, etc. Organizations are asked to input their services, resources, and/or trainings they provide, including whether they are linked to one or more protective capacities, primary, secondary or tertiary prevention, and/or are evidence-based. Organizations are also asked for critical information, such as whether there is a waitlist, a cost, insurance is accepted/ Medicaid is required, an in-home option, transportation is provided, and a referral is required or not required, etc.

- Unite Us Louisiana: The Unite Us platform provides a shared case management, referral, and tracking system for all organizations utilizing the platform. Community members can also self-refer through the platform.
- The following provides a breakdown of the key MCC activities specific to each of the three parishes:
  - EBR Parish: Civil Rights collaboration meetings occur with key support team members to establish cohesiveness, address concerns, and educate on policy and procedures; Biases, disproportionalities, and/or disparities are discussed in an effort to elicit equitable outcomes; Adverse Childhood Experiences (ACEs) and Trust Based Relational Interventions (TBRI) trainings are made available for agency partners as well as community members; The Community Café structure, focused on building protective factors within families and communities, is being implemented as part of the Neighborhood Teams; Collaboration with DCFS's Prevention workgroups and subcommittees is occurring to implement prevention and intervention programs; MCC's partnership with the Louisiana Department of Education allows MCC Parish Coordinators to make referrals for children to get the social, emotional, behavioral care they need when Medicaid is not able to cover the service; Mentor programs are being made available to youth through the courts with MCC partners; MCC teams are continuing to host community conversations in priority zip codes and listening circles for parents with lived experience with DCFS, foster parents, and former foster youth and conduct parent/caregiver needs assessments in order to establish needs, address barriers, and connect families to services and supports; MCC teams are connecting families to resources, services, and supports as they are referred to MCC by DCFS, courts, FINS, FRCs, community members, and other MCC partners (i.e., finding housing, jobs, vehicles, household appliances, and meeting other needs); Strategies to utilize partnerships between DCFS, the FINS office, Parish Coordinators and MCC teams, and the school system are being implemented to connect families to the services and supports they need; Our Lady of the Lake Hospital medical mobile "Blue Bus" partners with MCC at events and regularly scheduled locations to provide services to children and families in priority neighborhoods because transportation and insurance are regular barriers. The

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

focus of MCC in EBR Parish is building strength and trust in the community by addressing needs that community members identify.

- Livingston Parish: Civil Rights collaboration meetings occur with key support team members to establish cohesiveness, address concerns, and educate on policy and procedures; Biases, disproportionalities, and/or disparities are discussed in an effort to elicit equitable outcomes; Adverse Childhood Experiences (ACEs) and Trust Based Relational Interventions (TBRI) trainings are made available for agency partners as well as community members; The Community Café structure, focused on building protective factors within families and communities, is being implemented as part of the Neighborhood Teams; Collaboration with DCFS's Prevention workgroups and subcommittees is occurring to implement prevention and intervention programs; MCC's partnership with the Louisiana Department of Education allows MCC Parish Coordinators to make referrals for children to get the social, emotional, behavioral care they need when Medicaid is not able to cover the service; Mentor programs are being made available to youth through the courts with MCC partners; MCC is continuing to host community conversations in priority zip codes and listening circles for parents with lived experience with DCFS, foster parents, and former foster youth and conduct parent/caregiver needs assessments in order to establish needs, address barriers, and connect families to services and supports; MCC teams are connecting families to resources, services, and supports as they are referred to MCC by DCFS, courts, FINS, FRCs, community members, and other MCC partners (i.e., finding housing, jobs, vehicles, household appliances, and meeting other needs); Strategies to utilize partnerships between DCFS, the FINS office, Parish Coordinators and MCC teams, and the school system are being implemented to connect families to the services and supports they need; A calming room is being implemented at the juvenile court; Our Lady of the Lake Hospital medical mobile "Blue Bus" partners with MCC at events and regularly scheduled locations to provide services to children and families in the community because transportation and insurance are regular barriers; MCC is working with MCC partners to provide a practical training for parents involved with DCFS, which includes a curriculum created by a local juvenile judge; Hosted a Christmas Celebration in one of the priority neighborhoods with 350 plus community members to connect families to resources in their community and conduct parent/caregivers needs assessments; Hosted a drive-thru Spring Fling in all three priority neighborhoods to provide families with basic supplies and information on services and supports in their area and conduct parent/caregivers needs assessments; Hosted a Popsicles in the Park in one of the priority neighborhoods to build relationships with community members and conduct parent/caregivers needs assessments. The focus of MCC in Livingston Parish is building partner participation and community member advocacy through events hosted by MCC.
- Rapides Parish: Civil Rights collaboration meetings occur with key support team members to establish cohesiveness, address concerns, and educate on policy and procedures; Biases, disproportionalities, and/or disparities are

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

discussed in an effort to elicit equitable outcomes; Adverse Childhood Experiences (ACEs) and Trust Based Relational Interventions (TBRI) trainings are made available for agency partners as well as community members; The Community Café structure, focused on building protective factors within families and communities, is being implemented as part of the Neighborhood Teams; Collaboration with DCFS's Prevention workgroups and subcommittees is occurring to implement prevention and intervention programs; MCC's partnership with the Louisiana Department of Education allows MCC Parish Coordinators to make referrals for children to get the social, emotional, behavioral care they need when Medicaid is not able to cover the service; Mentor programs are being made available to youth through the courts with MCC partners; MCC is continuing to host community conversations in priority zip codes and listening circles for parents with lived experience with DCFS, foster parents, and former foster youth and conduct parent/caregiver needs assessments in order to establish needs, address barriers, and connect families to services and supports; MCC is connecting families to resources, services, and supports as they are referred to MCC by DCFS, courts, FINS, FRCs, community members, and other MCC partners (i.e., finding housing, jobs, vehicles, household appliances, and meeting other needs); Strategies to utilize partnerships between DCFS, the FINS office, Parish Coordinators and MCC teams, and the school system are being implemented to connect families to the services and supports they need; The school system is implementing a multi-tiered system of support wherein students who require more attention and support are connected to a mentor program and parents are connected to MCC Neighborhood Teams/Cafés and other supports; The school system has expanded their Social, Emotional, Behavioral Health pilot program to add more clinics within the schools, and they are working with MCC partners to connect children to the outside services and supports they need; Hosted a crawfish boil fundraiser to raise funding to support families in need that are referred to MCC through parent/caregiver needs assessments, DCFS, or other MCC partners. The focus of MCC in Rapides Parish is on building sustainability of Neighborhood Teams and continuing to work with MCC partners to implement identified MCC strategies in the priority neighborhoods.

- D. CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT (CARES ACT) (Title IV-B, Subpart 1):** DCFS received federal funding through the CARES Act to support children, youth and foster caregivers during this pandemic. These funds are available through September 30, 2021. It was highly encouraged that staff review available services and take advantage of these services.

Child Care Needs for Children in Foster Care: As Day Care Centers are available; staff are to utilize childcare for eligible children in accordance with agency policy. If childcare is not available through a licensed childcare center, or attendance at a childcare setting is not in the child's best interests, reimbursement for babysitting through a "supplemental board rate", as per CW Memorandum 20-009 COVID19 Services for Families and Children, is available. Reimbursement of up to \$25.00 per day for a maximum of three children per placement is

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

available for children 12 and younger. Rationale for the supplemental board rate was documented within the case record. Also, see CW Memorandum 20-009 for additional information.

Preventive Assistance Fund (PAF)/ Reunification Assistance Fund (RAF) Crisis Assistance: Assistance was accessible and provided with rent, housing, utility assistance, food purchases as needed to support a child remaining home or to sustain stability of a family within the CPI, FS, FC, EFC, and SP programs for crisis assistance related to the COVID-19 pandemic.

Tutoring Services: Recognizing that virtual learning may have an impact on the educational progress of foster children, additional tutoring services are available. If a child is in need of tutoring services outside the normal school hours, the foster caregiver should first notify the case worker and the school of origin to see if services can be provided by the school free of charge. If the school does not provide the services or there is a cost, the case worker shall work collaboratively with the foster caregiver to secure appropriate educational services to ensure the child does not fall behind. When tutoring services are located, the agency will cover the cost of the services. High school or college students, age 16 or above who have an A or B grade average in the subjects for which tutoring is provided, may provide tutoring services.

Communication Devices: Funding was provided to the agency to ensure that communication devices such as cell phones and tablets were provided to parents, caregivers, foster caregivers, youth 14 years and older, and at least one to residential facilities. These devices have allowed the agency to continue serving families and youth in care during the pandemic. It is expected that consideration shall be given to all youth entering care, age 14 years and up, to receive a cell phone.

Transportation for School: In effort to ensure all COVID precautions are met, some schools are unable to provide transportation to all enrolled children. Caregivers were reimbursed for mileage to and from school when free transportation was not available. Additionally, if it has been determined that it is not in the child's best interest to utilize the provided transportation, a discussion shall be held with the child's case worker to determine if mileage can be reimbursed.

Personal Protective Equipment: Any personal protective equipment required by the school may be reimbursed to the caregiver, not to exceed \$25.00 per child. Examples of personal protective equipment include cloth facemasks, hand sanitizers, etc.

- E. TRAINING PLAN:** The Department of Children and Family Services (DCFS) supports staff development and provides training supporting the goals and objectives of the 2020-2024 Child and Family Services Plan (CFSP). The training and staff development plan addresses Title IV-B programs and Title IV-E requirements and other training needs, objectives, and initiatives reflecting the ever-changing nature of staff training and development. The training plan is based on providing legally required training as well as incorporating feedback and input from staff, university partners, foster parents, adoptive parents, and other stakeholders.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

DCFS, in partnership with the Universities Alliance and the Pelican Center (PC), has established the Louisiana Child Welfare Training Academy (LCWTA). While the work in strengthening the LCWTA continues, the academy is working to provide comprehensive and consistent education and training to departmental staff, foster parents, and other key child welfare stakeholders including judges, attorneys, and Court Appointed Special Advocates (CASA).

This training plan is supported by the use of child welfare trainers, university partners and other stakeholders. The Department utilizes Titles IV-E and IV-B funding and Title XX, Social Services Block Grant (SSBG) funds for allowable training and administrative costs. The non-federal match includes state general funds provided by DCFS, the Universities Alliance and general fund supported costs of trainers and trainees provided by public agencies other than DCFS. Full implementation of this plan is contingent upon funding and resources.

The Department adopted various definitions and principles about training and professional development through new knowledge gathered from the trainings. These principles shaped the training needs analysis conducted. The following are key concepts from this model:

- **Training** prepares a person to do a specific job; the person leaves training able to begin to apply the knowledge and skills learned (ex. How to complete a safety assessment; How to write behaviorally specific case plans; and planning meaningful visits between parents and their children in foster care).
- **Education** is information presented from a broader perspective; it contributes to one's overall knowledge but is not expected to necessarily result in immediate application on the job (ex. Understanding the dynamics of domestic violence; Core concepts of child trauma; and the effects of commonly abused drugs).
- **Professional development** refers to on-the-job training (ex. coaching, mentoring, and various forms of supervision such as task supervision, reflective supervision, or supervision for licensure).

**Training, education, and professional development opportunities** should always be considered in the following instances:

- Someone is preparing for or is new to a job;
- There is a new policy, area of focus, or practice expectation (new law, initiative, etc.); and,
- There is a gap in performance determined to be a result of lack of knowledge or skill.

The decision to offer training, education, or professional development – or a combination of all three – should be carefully considered and based on the expected outcome. Training needs are continually assessed utilizing feedback and input from staff, university partners, biological parents, foster/adoptive parents, youth and other stakeholders. Evaluations are conducted following each training to provide direct feedback about the training experience and need for future training topics. The LCWTA Learning Management System provides the capacity to collect and report this data in a routine and systematic manner. Trainings contain assessments providing information on improvement in subject knowledge and comprehension and several provide information about improvement in key competency areas because of the training experience.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Statewide Training:** Staff are offered various training opportunities throughout the year and the Department provides a competency-based CW curricula. Child Welfare New Worker Orientation curriculum revisions were implemented and further refined. All course curricula are reviewed and revised on an annual basis and as evaluative feedback suggests a need. Title IV-E Child Welfare Scholars/Interns are encouraged to attend child welfare new worker orientation trainings provided and the staff hired to work in the Social Services Sections of Louisiana's four federally recognized tribes are invited to attend all child welfare trainings provided. Staff development and training opportunities have been provided to address the skills and knowledge needed to carry out child welfare duties. DCFS collaborates with the LCWTA, the Pelican Center, the University Alliance, Healthy Blue (a Medicaid managed care organization), Louisiana State Office of Behavioral Health, the Office of Public Health and several community organizations to collaboratively provide training opportunities for DCFS staff, federally recognized tribes and other partners. The automated registration for training and LCWTA learning management system was developed and implemented. The integrated system will be used for all child welfare trainings offered by LCWTA.

**Regional Training:** Social Work requirements, worker safety, supervisory training and other local training as determined by management and/or legal mandates, is supported by university partners, providers, other state departments and/or training staff. DCFS regional trainers provide the overall, agency-wide DCFS orientation training to all newly hired DCFS employees. The DCFS Regional Training Unit initiated the transfer of all Child Welfare program specific training responsibilities to the DCFS Child Welfare Training Unit and LCWTA.

The mandated reporter training content and curriculum has been updated to reflect current legislation, policy, and procedures and is now available to all mandated reporters and others through the LCWTA Learning Management System (LMS).

**Methods to Measure/Outcome Measures:** Trainees are required to complete pre and posttests, and an evaluation after every training session. Feedback received from this process is utilized to make revisions in the core curriculum and other training courses to better address specific or additional training needs.

The Louisiana Child Welfare Training Academy (LCWTA) along with DCFS, the Pelican Center for Children and Families, and the University Alliance began the initiative to provide continuous online education to Foster Parents, staff and stakeholders through the LCWTA LMS. The LCWTA began registering Foster Parents into the LCWTA LMS at the beginning of 2018 to offer increased opportunities to achieve certification and continuous education. Moreover, it offers convenience to those who have difficulty with childcare or have medically complex children to receive training without leaving the home. The LCWTA LMS offers learners the convenience of participating in interactive training sessions, taking pre and posttests, obtaining remediation feedback, and securing certificates of completion. Supplemental handouts are available to print out after completion of select

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

training courses. Learners can access Child Welfare educational material through the LMS 24 hours a day, 7 days a week.

**Partnerships/Collaboration:** The Department has entered into an agreement with the Pelican Center for Children and Families, and Southeastern Louisiana University. The agreement is to develop and maintain a training and staff development program comprehensive and responsive to the needs of DCFS staff, foster parents, federally recognized Native American tribes and other key stakeholders.

The Department, in collaboration with the Louisiana Children's Justice Act Task Force, the Louisiana Court Improvement Program, the Pelican Center for Children and Families, the Louisiana Children's Trust Fund, the Louisiana Foster and Adoptive Parents Association and other stakeholders produce an annual interdisciplinary conference. The conference concentrates on key areas of CW practice involving the safety, permanency and well-being of children in or at risk of entering the foster care system.

Title IV-E funds are utilized for this three-day annual training conference called *Together We Can* (TWC). The TWC conference focuses on providing continuing education for departmental staff, judges, children's attorneys, parents' attorneys, Court Appointed Special Advocates (CASA), foster parents, social workers and other key professionals who benefit from the interdisciplinary training.

**Child Welfare Scholars Program (Formerly the Stipend Program):** Child Welfare Scholars are selected using the competency-based screening and selection process. Educational stipends are awarded to non-employee Scholars with the expectation they will work for DCFS in child welfare after graduation. The chart below shows the number of students receiving stipends through State Public Universities.

<b>Educational Stipends of Persons Preparing for Employment</b>					
<b>State (Public) University</b>	<b># of BSW / MSW Stipends SFY 2019</b>	<b># of BSW / MSW Stipends SFY 2020</b>	<b># of BSW / MSW Stipends SFY 2021</b>	<b># of BSW / MSW Stipends SFY 2022</b>	<b># of BSW / MSW Stipends SFY 2023</b>
Southern University at New Orleans (SUNO)	4 BSW 5 MSW	3 BSW 5 MSW	4 BSW 8 MSW 3 EESP	4 BSW 8 MSW	
Grambling State University (GSU)	2 BSW 2 MSW	3 BSW 3 MSW	4 BSW 4 MSW 8 EESP	4 BSW 4 MSW	
Southern University Baton Rouge (SUBR)	5 BSW 0 MSW	5 BSW 0 MSW	7 BSW 0 MSW	7 BSW 0 MSW	
University of Louisiana at Monroe (ULM)	3 BSW 0 MSW	6 BSW 0 MSW	4 BSW 0 MSW	4 BSW 0 MSW	

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

<b>Educational Stipends of Persons Preparing for Employment</b>					
<b>State (Public) University</b>	<b># of BSW / MSW Stipends SFY 2019</b>	<b># of BSW / MSW Stipends SFY 2020</b>	<b># of BSW / MSW Stipends SFY 2021</b>	<b># of BSW / MSW Stipends SFY 2022</b>	<b># of BSW / MSW Stipends SFY 2023</b>
Northwestern State University (NSU)	4 BSW 0 MSW	5 BSW 0 MSW	5 BSW 0 MSW	5 BSW 0 MSW	
Southeastern Louisiana University (SLU)	5 BSW 0 MSW	3 BSW 0 MSW	10 BSW 0 MSW	10 BSW 0 MSW	
Louisiana State University (LSU)	0 BSW 2 MSW	0 BSW 2 MSW	0 BSW 7 MSW 11 EESP	0 BSW 7 MSW	
Annual Total # BSW Stipends / Cost (\$6,500/\$7,500 each)	24 BSW \$6,500 each \$149,000	23 BSW \$7,500 each \$187,500	BSW \$7,500 each \$255,000	34 BSW \$7,500 each \$255,000	
Annual Total # MSW Stipends / Cost (\$8,500/\$7,500 each)	9 MSW \$8,500 each \$76,500	10 MSW \$9,500 each \$95,000	MSW \$9,500 each \$180,500	19 MSW \$9,500 each \$180,500	

Scholars receive their social work education from one of the Council on Social Work Education accredited BSW and/or MSW programs in the state. Students are required to take the required social work curriculum of each program in addition to the field internship with DCFS and specific child-welfare course offerings; all which must meet both the CSWE and Child Welfare competencies. Through research conducted by statewide University Alliance Staff, 435 scholars have received their social work education as scholars since January of 2010. Additionally, 207 DCFS staff who were not scholars (or stipend recipients) graduated from those same seven universities and have worked for the Department during that time. For that reason, and upon the recommendation of a Title IV-E consultant, the Alliance has refocused how it approaches its recruitment methods and the methodology of accounting for and reporting Certified Public Expenditures (CPEs) for the 2020-2023 Grant Cycle. This has included a greater focus on transparency and accurate accounting of the CPEs generated each semester and a focus on making targeted investments. The accounting of the courses taught as they relate to training can be found in Appendix B. Grambling State University created the first University Alliance Sponsored Certificate Program, developing a certificate in Advanced Supervision. This certificate program will be offered to scholars and DCFS supervisors for college credit. The first enrollment period for this will not take place until the fall 2021 semester.

**Employee Educational Support Program:** Since 2017, employees have had the opportunity to apply for educational support to pursue a master of social work degree from Grambling, LSU, or Southern University in New Orleans with a commitment to continue

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

working in Child Welfare. Employees are selected based on the following criteria: length of service with DCFS (at least two years if a former scholar, four years if not), written support of the direct and regional supervisor, outstanding evaluations from the previous three years, and evidence of the desire to stay with the Department. Employees can pursue the MSW either part-time (at GSU, LSU, or SUNO) or full-time in LSU’s online program. Since 2017, nine employees have graduated from their respective programs and are all still with the Department. The chart below shows the number of employees receiving support through State Public Universities.

Educational Stipends of Persons Preparing for Employment					
State (Public) University	# of EESP Awards SFY 2019	# of EESP Awards SFY 2020	# of EESP Awards SFY 2021	# of EESP Awards SFY 2022 Projected	# of EESP Awards SFY 2023 Projected
GSU	5	5	1	8	8
LSU	16	11	5	11	11
SUNO	5	5	6	5	5
<b>Annual Total #</b>	<b>26</b>	<b>21</b>	<b>12</b>	<b>24</b>	<b>24</b>
<b>EESP Costs*</b>	<b>\$422,868</b>	<b>\$296,944</b>	<b>\$309,444</b>	<b>\$309,444</b>	<b>\$309,444</b>
<b>By Program:</b>					
GSU	(\$20,000)	(\$20,000)	(\$32,000)	(\$32,000)	(\$32,000)
LSU	(\$355,368)	(\$229,944)	(\$229,944)	(\$229,944)	(\$229,944)
SUNO	(\$47,500)	(\$47,500)	(\$47,500)	(\$47,500)	(\$47,500)

*\*Each university is structured differently in how employees progress through the program. Students can attend LSU’s online program, which is \$3484 per module for six modules (\$20,904 per student). GSU is expanding to an online program; however, GSU and SUNO will remain part-time programs for students.*

The University Alliance (UA), in partnership with the LCWTA, the Pelican Center and DCFS, has greatly expanded its capacity to carry out the mission of supporting a competent, stable workforce as it relates to recruitment, retention, learning, and infrastructure. The UA made additional key personnel investments. In SFY 2020, UA staff began the process of working with DCFS to conduct research related to the Performance Improvement Plan as it relates to workforce development and improvement of practices. In June of 2020, Jennifer Luna, MPA resigned from her position as the Project Operations Coordinator. The position was re-conceptualized as the Project Support Specialist. Polly Boersig, MA was hired in the conceptualized position. Northwestern State University, the lead university, is expanding its research capacity by collaborating with DCFS for the distribution and analysis of statewide surveys. Three initial surveys were conducted, and findings were disseminated through technical reports. Due to the increase in the partnership, NSU will hire a Research Coordinator to help carry out research and evaluation projects throughout the state. During this period, UA staff worked with LCWTA staff to write the contracts and subcontracts for the 2020-2023 grant cycle. Since that time, several major projects have moved forward.

**Collaboration with the Court Improvement Program (CIP) and Court Appointed Special Advocate (CASA):** The CIP developed the Pelican Center mentioned above to encompass all CIP activities and provide formalized, interdisciplinary, and collaborative work agreements with the DCFS and other relevant CW stakeholders. Through the partnership with the DCFS

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

and the University Alliance described in and mentioned throughout the CFSP, all parties work together to develop and implement training and education of CW practitioners including children's and indigent parents' attorneys, judges, CASAs, and district attorneys. Primary focus of the CIP relates to improving the overall quality of safety decision-making by legal stakeholders, which include judges, attorneys for all parties, district and agency attorneys. The operating theory of change is as follows:

**Strategic Goals and Training Activities Planned for FFY 2020-2024 (Please refer to Appendix B and the systemic factors section on Staff Training for additional information.):**

**Recruitment: Recruit competent, dedicated child welfare professionals**

- I. Increase the number of competent, committed, and culturally diverse social workers entering DCFS Child Welfare by 3-5% each year over the next five years ending June 30, 2024.
  - a. Develop a comprehensive recruitment plan by June 30, 2021 to recruit a diversity of current and prospective students into child welfare.
  - b. Develop an assessment tool on interest in child welfare.
  - c. Develop targeted scholar positions for key regions/parishes.
  - d. Continue to utilize competency-based screening and selection process
  - e. Develop communities of practice at individual Universities in the Alliance.
  - f. Implement comprehensive recruitment plan through 2024.
- II. Increase the number of Child Welfare Legal Specialists (CWLS) by 3-5% each year over the next five years ending June 30, 2024.
  - a. Develop a recruitment plan to recruit attorneys into child welfare by June 30, 2021.
  - b. Implement recruitment plan through 2024.
- III. Co-Develop a data/research plan between DCFS, LCWTA, University Alliance (UA), and Pelican Center to gather, analyze and use data effectively to support recruitment initiatives by June 30, 2021.

**Update through April 2021:**

- Louisiana continues to recruit and support Louisiana child welfare attorneys and judges as CWLS. This year, we were able to recognize that the baseline of CWLS is subject to change due to attorneys moving out of state, or changing their practice. Nonetheless, our growth continues with the increase of three new CWLS this year, surpassing our stated goal in 2020. We added five new applicants, and through supports such as sponsoring their attendance in the Red Book Online Training presented twice per year, the applicants have access to study materials and training facilitators in case they have any questions while preparing for the exam.
- The stated goal of "Develop a recruitment plan to recruit attorneys into child welfare by June 30, 2021" will not be met. COVID-19 related training work shifts and the priority of implementation of PIP deliverables would require us to restate this goal as "Develop a recruitment plan to recruit attorneys into child welfare by June 30, 2022".

**Activities Planned 2021/2022:**

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- NSU has begun developing a survey to assess perception of internship supervisors, university alliance coordinators, and students regarding necessary preparation for completing the internship. The survey will be utilized as part of an overall dissertation project for the UA program manager understanding perception of readiness and how participation in the community of practice model changes readiness for entry level child welfare professionals.
- UA staff continue to work on the issue of recruitment of competent child welfare professionals through the Scholars and Employee Scholars programs. Additional efforts to better screen potential scholars will be put in place beginning with the Fall 2021 cohort.
- UA staff are developing additional models of the Scholar program to increase the number of students who receive training and priority internship placement. UA staff, following similar practices established in other states, will include “un-funded” scholars in the program through early recruitment efforts and standardization of child welfare curriculum/requirements throughout the state.
- Universities with certificate programs will offer the certificate to scholars and non-scholars in an effort to recruit further potential child welfare professionals.
- UA staff will continue working with DCFS to expand the scholars program including potentially working with programs outside of social work to recruit workers in targeted areas of the state where Universities do not place students. The first effort has begun with McNeese State University.
- UA staff will partner with DCFS staff to conduct virtual job fairs and job interest meetings in order to recruit additional prospective child welfare professionals.
- UA staff will continue to grow the supervisor selection process by developing evaluation methods to measure student and supervisor effectiveness.
- Judge Ernestine Gray joined the Pelican Center in January 2021, as a Judicial Fellow. With her support, strategies will be developed to outreach and recruit judges into our CWLS program.
- Recruitment of prospective CWLS applicants will continue, but with an intentional focus on 10 professionals who are committed to completing the application process, studying and sitting for the examination within six months. We have learned that attorneys motivated to focus and complete the process within that time frame have had greater success at earning the certification.

**Retention: Support the retention of child welfare professionals**

- I. Increase the retention of DCFS CW staff and scholars by a statistically significant percentage each year.
  - a. In collaboration with DCFS, develop a retention plan by July 1, 2021, including setting statistically significant retention targets for child welfare staff and scholars.
  - b. Continue to utilize and evaluate the competency based screening and selection process
  - c. Continue to support and refine the Employee Educational Support Program
  - d. Support DCFS implementation of QIC Workforce Development Program in collaboration with Lead DCFS Project Staff and the WIE

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Leadership Team (Workforce, Implementation & Evaluation) with the Quality Improvement Center for Child Welfare Workforce Development.

- e. Develop and recommend retention incentives for child welfare staff
- f. Support staff well-being
- II. Develop retention plan for Louisiana Child Welfare Legal Specialists (CWLS) by June 30, 2020 and implement the plan 2021-2024.
- III. Increase the retention of law students who complete a child welfare externship and enter the child welfare workforce by a statistically significant percentage each year.
  - a. Develop a retention plan by January 1, 2021.
  - b. Implement retention plan for law students 2021-2024.

**Update through April 2021:**

- UA and LCWTA staff conducted the first focus groups with the CWADM practice champions to determine perception of the CWADM roll-out and to understand factors that led to champions wanting to continue or not.
- Further development of the Board Approved Clinical Supervisors (BACS) program is in process with the development of policies to require recipients to work for the department after receiving funding. A process for application and approval is being revamped to allow for ease of applying.
- Universities with certificate programs will receive investments from shared UA dollars in order to increase the number of workers who actively pursue the programs starting with GSU's Advanced Supervisory Certificate. This will allow for better recruitment of students and workers. UA, LCWTA, and DCFS staff have committed to funding 10-15 employees in 2021-2022 to complete the certificate program in three semesters.
- Pelican Center retention efforts for law student externs, was thwarted by COVID-19 and the priority of implementing PIP initiatives. However, SULC law student, Shaliza Tolliver assisted with the Bench book in many ways: researching reasonable efforts case law, reviewing Instanter and CCH template documents, and reviewing CCH and Instanter Sections. She drafted a Court Observation Form for the CCH.
- Louisiana continues to support the retention of child welfare attorneys by providing support in the implementation of the Program Improvement Plan, Quality Legal Representation.
- Providing annual Louisiana Children's Code Handbooks to the three Children's Attorney Representation agencies, and Parents' Representation.
- Sponsoring conference attendance for Parents' Attorneys at the biennial ABA National Parent Representation Conference, and biennial Interdisciplinary Representation Conference.
- Sponsoring conference attendance for Children's' Attorneys at the annual National Association of Counsel for
- A two-day CINC training for members of the Louisiana District Attorneys' Association was sponsored by DCFS, with state and national speakers on various topics relevant to the work of a CINC prosecutor. Many members of the Bureau of General Counsel, attorneys for DCFS attended this training.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- A workgroup of Legal stakeholders, CASA, DCFS staff and Legal created a training curriculum around the department's new safety model Child Welfare Assessment Decision Making Model. The virtual training launched in December of 2020 and has been offered four times to an interdisciplinary audience of child welfare stakeholders.

**Activities Planned for 2021/2022:**

- Further develop a retention plan for new employees and scholar employees to ensure that individuals are provided with support, targeted training, and opportunities for advancement and participation in workforce development projects.
- Conduct focus groups with employees to determine retention strategies to enhance worker well-being and retention rates.
- SUNO will formalize their Interdisciplinary Practice Certificate Program. UA staff will assist with applying for approval and support through their system administrators.
- UA staff are in the process of formalizing a policy and procedure manual for the scholar and employee scholar program, which will encompass all policies and processes from recruitment through employment and support afterward.
- Develop a retention plan "to increase the retention of law students who complete a child welfare externship by January 1, 2021" will not be met. COVID-19 related training work shifts and the priority of implementation of PIP deliverables would require us to restate this goal as "Develop a retention plan to increase the retention of law students who complete a child welfare externship by January 1, 2022."
- Continued jurisdictional training around the newly released CINC Bench Book, Bench Cards, Model Court Reports and Model Court Orders.
- Continued development of the QRTP FFPSA Bench Card, and Court Documents and Orders training for judges and legal stakeholders.

**Learning: Offer comprehensive quality learning opportunities**

- I. Offer comprehensive training and professional development opportunities
  - a. Expand child welfare trainer/talent development resources by hiring seven (7) additional full-time or FTE staff within DCFS and LCWTA University Alliance by 2022 consistent with available resources. See Infrastructure Goal.
  - b. Recruit and develop parent, foster parent, and youth/former youth co-trainers to be integrally involved in expanding learning opportunities in child welfare
  - c. Continue to offer required training to child welfare staff, foster parents, legal professionals, and mandatory reporters each year.
  - d. Develop individualized and multidisciplinary training plan for a variety of CW professionals annually by January of each year.
    - i. Prioritize learning plans/needs relating to assessment, engagement, workforce, service array and legal representation strategies in Louisiana's CFSR Program Improvement Plan (PIP) for SFYs 2020 and 2021. See Louisiana's CFSR PIP.
    - ii. Expand training plan for new DCFS child welfare employees for the initial three years of employment to support achievement of intermediate to mastery levels of child welfare practice.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- iii. Conduct on-going needs assessment to guide development of annual training plans focused on learner needs and priorities.
- iv. Develop and maintain a comprehensive course catalog of current training/learning opportunities for child welfare professionals.
- v. Offer individualized, targeted training and learning opportunities to child welfare professionals and service providers consistent with priority tiers and resources.
- e. Offer multidisciplinary learning opportunities.
- f. Support the development of individualized talent development plans.
- g. Create a professional development continuum for each CW professional, offering comprehensive training and professional development opportunities from entry through advanced levels for each professional by July 1, 2022.
- h. Develop more innovative trainings (interactive, simulation, experiential, virtual) to facilitate learning and professional development
  - i. Expand courtroom simulation training in SFY 2019-2020
  - ii. Develop simulation-based training for new staff including focus on engagement and assessment to be offered through Southern University in Baton Rouge in SFY 2019-2020.
  - iii. Offer experiential Better Together training including parents, foster parents, and child welfare staff as training co-horts
  - iv. Explore options for virtual reality training.
- i. Expand use of blended learning approaches to provide more just in time learning opportunities, build competency, and facilitate transfer of learning in day-to-day practice.
- j. Develop tools, processes, and evaluation instruments to support effective transfer of learning in critical training/practice changes/improvements.
- k. Develop Mentor Pairing among child welfare professionals to model and reinforce quality practice and provide support
- l. Continue to strengthen the Title IVE Child Welfare Scholars Program, including the Child Welfare Employee MSW Educational Support Program (Cross-referenced with retention)
- m. Implement a comprehensive selection and support process for internship supervisors
- n. Develop Certification Programs supporting advanced and specialized practice
  - i. Research the creation of certificate programs with the Board of Regents.
  - ii. Develop a template for applying for certificate programs.
  - iii. Create Certificate programs through University partnerships, the LCWTA, and the Pelican Center to advance learning and development of students and employees.
  - iv. Incentivize Certificates
- o. Develop and support Communities of Practice [Cross reference with Recruitment and Retention])

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- i. Develop face-to-face and online community of practice environments to help scholars and employees connect virtually and in person utilizing support groups.
    - 1. Provide regular and substantive opportunities for engagement in discussions and experiences in child welfare.
    - 2. Provide opportunities for research in child welfare.
    - 3. Develop continued support networks
      - a. Develop enhanced level mentoring programs for new and veteran employees
  - p. Provide for specialized recognition of practice (e.g. layers of certification)
    - i. Create levels of recognitions depending on specific trainings participated in (Circle of excellence program)
      - 1. “We are Child Welfare” recognition strategy
      - 2. LA Bar Association
      - 3. Together We Can Conference
      - 4. Child Welfare Award/Children’s Law Award
    - ii. Create levels of recognitions for CW professionals who serve above and beyond or who participate in trainings beyond required training hours
  - q. Develop Advanced Supervision Certification Program with incentives
  - r. Reach out to communities to educate on the system of child welfare; Start with the four pilot parishes identified in CFSR PIP.
    - i. Create a strategy to educate on the system of child welfare supporting the CFSP PIP
    - ii. Create a marketing campaign to educate on the child welfare system supporting the CFSP PIP
    - iii. Create a bureau of speakers that include various CINC related disciplines
    - iv. Mandatory reporter training
- II. Offer comprehensive learning opportunities supporting professional competencies by July 1, 2022.
- a. Formalize framework for competency-based learning aligned with Louisiana child-welfare practice principles, U.S. Children’s Bureau Child and Family Services Review practice expectations, and screening and selection competencies by June 30, 2022.
    - i. Develop and refine professional competencies
    - ii. Identify learning opportunities to support professional competencies
    - iii. Develop course curriculum aligned with competencies for each stakeholder professional.
    - iv. Develop/support transfer of learning components to critical/practice changes/improvements
  - b. Implement comprehensive competency-based learning beginning July 1, 2022.
- III. Expand expertise in child welfare each year through July 1, 2022.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- a. Develop at least one area of child welfare expertise for each of the seven university Social Work Departments aligned with priority needs by July 1, 2020.
  - b. Recruit, prepare and support additional trainers/learning professionals/experts each year consistent with available resources and areas of highest need until all needs met.
- IV. Participate in research opportunities.
- a. Develop annual research plan.
    - i. Identify and develop valid assessment of learning opportunities
    - ii. Develop metrics for improvement
    - iii. Conduct ongoing needs assessment of learning
    - iv. Report on assessment findings and make necessary adjustments to learning plan.

**Update through 2021:**

- GSU has been approved by the Louisiana University System to offer the Advanced Supervisory certificate program to GSU students. A plan has been put into place to recruit 10-15 employees to take part in the first cohort beginning in the Fall of 2021.
- SUNO has begun working with UA staff and GSU representatives to structure the Interdisciplinary Certificate Program and work through the steps of approval.
- SUBR worked with DCFS staff to utilize the simulation lab prior to the COVID-19 stay-at-home orders. The curriculum was reworked to be facilitated online after the shutdown. SUBR is currently working with partners across the nation to certify the simulation lab.
- Louisiana continued to implement training and coaching plans to meet needs relating to assessment, engagement, workforce, service array and legal representation strategies prioritized in Louisiana's CFSR Program Improvement Plan (PIP) for SFY 2020.
- Louisiana adapted and implemented numerous trainings in an interactive virtual format, including New Worker Orientation (NWO), Child Welfare Supervisor Support and Capacity Building Training Series, Child Welfare Assessment and Decision Making, LGBTQ+, Trust Based Relational Intervention (TBRI), IV-E Scholar Intern Orientation & Supervisor Workshop, Foundations of Infant Mental Health, Child and Adolescent Development, Adult Behavioral Health, Child Behavioral Health, Worker Safety, Planful Transitions, Family Search and Engagement, Family Preservation Team Meeting, and Domestic Violence and Child Welfare Training.
- Louisiana expanded child welfare trainer/workforce development resources by hiring three (3) On the Job Trainers to assist with transfer of learning and application of knowledge and skills acquired during New Worker Orientation Training.
- Louisiana has invested in the development and preparation of practice champions in each region of the state to implement child welfare assessment and decision-making practice.
- Louisiana has continued to offer training to new staff and supervisors and to provide trainings to meet the in-service training needs of more experienced staff.
- Louisiana has initiated development of an interactive, virtual courtroom simulation training for child welfare staff until in person learning experiences are a possibility again.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- LCWTA continues to expand its on-line and virtual course offerings, collaborating with multiple entities to offer high quality learning.
- Southeastern Louisiana University in collaboration with the DCFS Home Development Department has analyzed satisfaction surveys from current and former foster caregivers administered from 2019–2020. A presentation for area administrators is in development to review agency strengths and areas for improvement.
- Louisiana has developed an expanded training plan for new DCFS child welfare employees for the initial three years of employment to support achievement of intermediate to mastery levels of child welfare practice. This plan is currently under review by DCFS leadership and management staff for adoption and implementation in next fiscal year.
- Louisiana has revised current training policies, which are under review and will be implemented next fiscal year.
- External partners, including Plummer and Annie E. Casey, have complimented the DCFS/LCWTA team on its exceptional level of professionalism, customer service, and quality in creation and support of quality learning experiences.
- **Bench Book:** A Louisiana Child in Need of Care Bench Book for Juvenile Judges, which includes Bench Cards and model court document templates, was developed to provide information and best practices on all CINC proceedings. The Bench Book is 541 pages in length and includes 10 Bench Cards and 26 model court document templates. One-hundred (100) plus judges, attorneys, DCFS staff members, and other legal stakeholders assisted in developing the Bench Book and court document templates for 16 months. The following press releases were published:
  - [https://www.lasc.org/Press\\_Release?p=2021-08](https://www.lasc.org/Press_Release?p=2021-08)
  - [https://mailchi.mp/teamdynamicsweb.com/announcing-louisiana-cinc-benchbook-for-juvenile-judge?fbclid=IwAR2Y6hPXaX5DCS6NuVb-k8dH9xy4fxcVG6R47pq9sD\\_9tNZBriyYo7yfcN4](https://mailchi.mp/teamdynamicsweb.com/announcing-louisiana-cinc-benchbook-for-juvenile-judge?fbclid=IwAR2Y6hPXaX5DCS6NuVb-k8dH9xy4fxcVG6R47pq9sD_9tNZBriyYo7yfcN4)

The Bench Book may be found at the following online locations:

- <https://pelicancenter.org/benchbook.html>
- [https://www.lasc.org/Children\\_Families?p=CIP](https://www.lasc.org/Children_Families?p=CIP)
- <https://clarola.org>
- <https://lajudicialcollege.org>

The Pelican Center is partnering with the Louisiana Supreme Court, the Louisiana Judicial College, and the Department of Children and Family services to develop trainings to support the successful implementation and use of the Bench Book, Bench Cards, and model court document templates.

- **Multidisciplinary Representation for Parents - Family Justice Initiative (FJI) Presentation:** December 11, 2020
  - The **FJI** (a national collaborative of children's attorneys, parents' attorneys, educators, researchers, and national policy advocates who share a common goal: to increase access to high-quality legal representation for children and parents in child

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

welfare cases) invited one or more parishes in Louisiana to become a "demonstration site," a parish where the parent representation program and child representation program agree to lower attorney caseloads and/or utilize a multidisciplinary representation model. (The child and parent representation programs in that parish do not have to choose the same model). The programs receive technical support, funding ideas, help with data tracking, and more. Mimi Laver of the ABA Center on Children and the Law and Elizabeth Thornton of FJI provided information about demonstration sites to an audience upwards of 30. We invited parent representation, child representation, DCFS, CASA, ADA, and BGC in the 4 pilot parishes plus Lafayette & Orleans and had the most diverse group of attendees

- **Pre-Removal/Civil Legal Needs:** The Pelican Center has had a number of meetings with key stakeholders to develop a strategy for the provision of collateral civil legal services. These legal services will help prevent entry of children into foster care and stabilize families that have been involved with DCFS. To date, the Pelican Center has met with the Louisiana Bar Foundation, DCFS, the child representation programs, the public defenders and more. On August 4, experts from other civil legal service programs in New Jersey (Legal Services of New Jersey) and Iowa (Iowa Legal Aid) presented to Louisiana stakeholders on their models, successes, and challenges. The Pelican Center has consulted with the ABA Center on Children and the Law and Legal Aid Services of Oklahoma to strategize the referral process and discuss best practices. On March 11th, the Pelican Center consulted with a national expert on commissioning an Economic Impact Study to analyze and report on the social value return.
- **Multidisciplinary Representation Model.** The Pelican Center held two presentations for the child representation programs to learn more about multidisciplinary representation as a child's attorney. The presentations included attorneys and social workers. Presentations were held on July 31, 2020 and August 14, 2020. The speakers included individuals from the Children's Law Center in California and Children's Law Center in Washington D.C.

**Activities Planned 2020/2021:** LCWTA partners will continue to work closely together to expand quality-learning opportunities to child welfare professionals, youth, and families throughout Louisiana. DCFS will continue to convert child welfare trainings to a virtual or hybrid format to meet training needs while the COVID-19 pandemic prevents in person training from occurring. The department will develop plans to return to in person training when it is safe and possible to do so. DCFS will continue to assess needs and develop trainings to address the needs of child welfare staff.

**Infrastructure: Build capacity to effectively, and efficiently fulfill the LCWTA University Alliance mission.**

- I. Assess, strengthen, align, and maximize human, technological, fiscal and programmatic resources to effectively, and efficiently fulfill the LCWTA mission for the next 5 years.
  - a. Develop and utilize integrated mission, dynamic strategic goals, and 60-90 day action plans across LCWTA partners to focus and steer work

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

aligned with highest priorities and impact on outcome and meeting State Plan and CFSR/PIP priorities.

- b. Assess infrastructure needs and develop plan to build capacity aligned with highest priorities consistent with strategic plan and available resources by March 1 each year.
- c. Update Memorandum of Understanding to accompany new three-year LCWTA agreement to be effective July 1, 2020.
- d. Align budgets and fiscal resources each year consistent with strategic goals and outcomes.
- e. Expand human resource capacity in strategic priority areas in SFY 2019-2020.
  - i. Add 3-4 full-time (or FTE) training and talent development staff within LCWTA partnership to be focused on CFSR/PIP priorities, simulation training, advanced supervision, on the job training and transfer of learning.
  - ii. Expand, restructure, and re-align the LCWTA business office at Southeastern to support expanded operations and full integration of the five areas of success.
  - iii. Re-align and expand administrative support at Northwestern to support scholars, Supervisors, Staff and University Liaisons, integrated LMS and implementation of University Alliance goals.
  - iv. Create and administrate child welfare externships for law students to execute the legal components of the strategic plan.
  - v. Pelican Center to subcontract with an attorney to engage with the Department to develop legal components of kinship navigator program. (Pelican Center)
    - 1. Kinship caregiver legal training.
    - 2. Kinship caregiver legal guide.
    - 3. Kinship caregiver legal services network.
- f. Expand human resource capacity consistent with strategic goals/priorities and available resources in SFYs 2020-2021 and SFY 2021-2022, including adding 3-4 additional full time (or FTE) trainers/talent development specialists.
- g. Align human and programmatic resources consistent with strategic priorities and goals/action plan achievement.
- h. Expand data measurement, analytic, evaluation, research, and reporting capacities to effectively Measure and Communicate LCWTA Outcomes.
- i. Expand technology to support learning, data/CQI, collaboration, and effective and efficient operation of LCWTA guided by the five areas of success.
  - i. Continue with implementation of integrated learning management system across LCWTA partners.
  - ii. Assess need for additional data/analytical tools to support effective collaboration and robust CQI and reporting

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- j. Evaluate and confirm appropriate resource(s) to refine policy and procedures in priority areas.
- k. Develop and implement strategic communication plan across LCWTA partners, including effective branding
- l. Assess and develop plan for physical space needs.

**Update through April 2021:**

- New three-year contracts budgets, and related programmatic and fiscal policies and procedures to support universities, DCFS and Pelican Center partnerships in achievement of LCWTA strategic goals for SFY 2021-2023 were implemented.
- With support from LCWTA/University Alliance, three on the Job/Transfer of Learning consultants were hired by DCFS, one for each tri-region area of the state, to support on-boarding, on the job training, shadowing, and support for new child welfare staff.
- LCWTA/Southern University added a full-time trainer/learning and development specialist to support the simulation lab experience and new worker learning and development.
- The LCWTA restructured to expand capacity to meet the growing needs of the child welfare system and to support resources being in place to achieve the overall strategic plan goals. This restructuring included revising job descriptions for the positions of Digital Media Manager, Learning and Instructional Development Specialist, and Associate Director of Learning and Development. The new Associate Director of Learning and Development began in Summer 2020. The Title IVE Program Manager and new Research Associate at Northwestern State University have assumed the data and analytics functions of LCWTA and will work closely with the Associate Director to expand evaluative capacities of the Academy and support transfer of learning. Specialized learning and instructional development expertise, leadership, and support are currently being provided by an experienced team of people partnering with LCWTA through contract.
- Kinship Caregivers: The Pelican Center/Court Improvement Program (CIP) has representatives on the Louisiana Kinship Caregiver State Committee. DCFS collaborated with the Pelican Center/CIP and the Louisiana State Bar Association to create a legal handbook for kinship caregivers in Louisiana and a one-hour webinar. The handbook answers common legal questions that kinship caregivers have and provides information on legal resources/entities available to kinship caregivers. The webinar educates kinship caregivers and other individuals on the different types of legal custody a person can obtain in Louisiana and the authority, security, and stability that type of custody provides to a child. DCFS is piloting a kinship navigator program through Renew and Discovery, who is the Family Resource Center for Region 2 and 3. Kinship caregivers can contact Renew and Discovery to get information on legal services available to them. The Pelican Center is hosting a website called the "My Community Cares Connection Portal," which lists all of the available legal services for kinship caregivers in four pilot parishes. DCFS entered into a contract with Louisiana 2-1-1. Kinship Caregivers can contact Louisiana 2-1-1 to get information on legal services available to them.
- Initial analysis of long-term scholar data has shown that the program affects change beyond the 435 scholars in that time period. Roughly, 270 employees graduated from

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

UA universities but were not in the scholar’s program. Analysis has shown the importance of developing unfunded scholar positions in order to better prepare students to become child welfare professionals. Increase in funded and unfunded scholar positions does show utility in increasing the professionalization of the child welfare workforce.

- In SFY, 44 scholars were selected and completed internships with DCFS, which equated to a 37% increase in the number of students recruited in SFY 2019. Final hiring numbers have not been finalized at this time; however, it is expected that more than 35 scholars will be hired which is a 37% increase in the number of hires from the previous year.
- Analysis of child welfare course offerings and requirements to become a scholar for each University has been completed.

**Activities Planned 2021/2022:** Continue building capacity to effectively and efficiently fulfill the LCWTA University Alliance mission to work collaboratively to strengthen recruitment, learning, and retention of child welfare professionals to strengthen the child welfare continuum from prevention to permanency and achieve safety, permanency and well-being outcomes for children and families in Louisiana. A priority focus for SFY 2021/2022 will be on expanding utilization of best practices in instructional design and development, transfer of learning and evaluative capacity, and enhancing technological supports for learning and developments.

Training expenditures include travel, per diem, tuition, books and registration fees for trainers; salaries, fringe benefits, travel and per diem for staff development personnel assigned to training functions to the extent of time spent performing such functions; costs of space, postage, training supplies and purchase or development of training material. The following chart outlines actual and projected training expenditures.

Category of Expenditure	Actual FFY 2018	Projected FFY 2019	Actual FFY 2019	Projected FFY 2020	Projected FFY 2021	Projected FFY 2022
<b>Salaries</b> -cost allocated expenses for staff in the field and state office including stipends and Related Benefits	776,085	895,045	895,044	1,808,278		
<b>Travel</b>	165,098	133,728	134,165	160,084		
<b>Operating Services</b> -advertising, printing, equip. maintenance, rental equipment/ buildings, utilities, telephone services, postage, building security, dues, etc.	2,207	462	27	3,230		
<b>Supplies</b>	376	2,783	2,782	4,288		
<b>Acquisitions</b>	0	0	0	0		
<b>Interagency Transfers</b> -services provided by other state agencies for services such as telephone, insurance, building rentals, indirect cost, printing and advertising	4,663	1,543	1,543	6,191		
<b>Other Charges</b> -contract with university for the purpose of developing child welfare curricula to prepare future graduates for competent practice in child protection, family services, foster care and adoption	2,861,818	3,440,660	3,357,232	3,308,809		

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

programs, and training of foster and adoptive parents.						
<b>Total</b>	<b>3,810,247</b>	<b>4,474,221</b>	<b>4,390,793</b>	<b>5,290,880</b>		

**Cost Allocation Methodology:** The Department has exercised the provisions of the Social Security Act, Sections 474(a)(3)(A) and (B); 45 CFR 1356.60(b) and (c), 235.63-235.66(a) to make claims under Title IV-E at the 75% rate and, when appropriate at the 50% rate, for training (including both short-term training and long-term training at educational institutions, through state grants to the public institutions or by direct financial assistance to students enrolled in such institution) of personnel employed or preparing for employment by the state agency. The amount deemed claimable in IV-E is specified in individual contracts with the institutions and individuals.

Budgetary impact is a primary consideration for training; therefore, trainings are provided throughout the tri-areas of the state. If there is a cluster of trainees in a particular area, the training is conducted there. Less travel costs are incurred using this method. The average cost per person will vary based on lodging and meal allowances. The training staff develop the majority of training within the Child Welfare Training Unit. The costs listed below were developed using the formula below and is applied to all child welfare-training courses.

**Travel Costs:** Travel and Training costs October 1, 2019 – September 30, 2020, are as follows:

- **Lodging:** Average \$127.50 (low for Tier I - \$94.00 – high for Tier 2 - \$161.00 per night excluding taxes and surcharge)
- **Meals:** Average of \$55.00 per day; (Tier I - \$51.00 per day: Breakfast \$9.00; Lunch \$13.00; Dinner \$29.00; Tier II (including New Orleans) - \$59.00 per day: Breakfast \$12.00; Lunch \$17.00; Dinner \$30.00.)
- **Trainees’ workbooks:** Average cost \$15.00 per workbook
- **DCFS Trainer Cost:** Average salary cost and benefits of \$70.00 per day per trainer. One eight-hour day of trainer salary is \$560.00. Two trainers teach some courses, (ex. New Worker Orientation) bringing the trainer cost to \$1,120 per day.
- **Contract Trainer Cost:** Average of \$650.00 per day. The Louisiana Child Welfare Training Academy (LCWTA) contracts with trainers at the following rates: \$500.00 per day within their domicile. \$750.00 per day outside of their domicile. This daily rate includes travel, consultations, and other expenses.
- **Training Site:** The figures below are based on a free centralized location (such as state office) therefore; no fees are associated with the minimum and maximum costs.

*\*\*Note: The formulary (below) does not include trainees’ salaries, mileage, parking, or telephone calls nor does it include trainer course development time, course update time or preparation time.*

- **Minimum Cost:** For training held at the state office/headquarters or a DCFS regional office with the minimum number of trainees (10) incurring costs of average lodging cost \$127.50 + \$55 for meals and \$15/workbook = \$1,975.00, per day (\$197.50/trainee)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- With one DCFS trainer: Salary \$560.00 and travel per day \$197.50 (\$757.50) = \$2,732.50 (\$273.25/trainee)
- With two DCFS trainers: Salary \$1,120.00 and travel per day \$395.00 (\$1,515.00) = \$3,490.00/day (\$349.00/trainee)
- With Contract Trainer (\$650.00) = \$2,625.00 (\$262.50/trainee)
- **Maximum Cost:** For training held at the state office/headquarters or a regional office with the maximum number of trainees (30) incurring costs of average lodging cost \$127.50 + \$55 for meals and \$15 for workbooks = \$5,925.00 per day (\$197.50/trainee)
  - With one DCFS trainer: Salary \$560.00 and travel per day \$197.50 (\$757.50) = \$6,682.50 (\$222.75/trainee)
  - With two DCFS trainers Salary \$1,120.00 and travel per day \$395.00 (\$1,515.00) = \$7,440.00 (\$248.00/trainee)
  - With Contract Trainer (\$650.00) = \$6,575.00 (\$219.17/trainee)

For additional information on ongoing training in the core curriculum, please refer to the DCFS Training and Staff Development Chart in Appendix B.

**Pelican Center Cost Allocation Methodology:** The Department has exercised the provisions of the Social Security Act, Sections 474(a)(3)(A) and (B); 45 CFR 1356.60(b) and (c), 235.63-235.66(a) to make claims under Title IV-E at the 75% rate and, when appropriate at the 50% rate, for training (including both short-term training and long-term training at educational institutions, through state grants to the public institutions or by direct financial assistance to students enrolled in such institution) of personnel employed or preparing for employment by the state agency. The amount deemed claimable in IV-E is specified in individual contracts with the institutions and individuals.

Budgetary impact is a primary consideration for training; therefore, trainings are provided throughout the state to mitigate the need for travel and lodging expenses for the trainees. The costs listed below were developed using the formula below and is applied to all Court Improvement Program training courses.

**Training costs** from July 1, 2019 – June 30, 2020, are as follows:

- **Trainees' Cost:** \$25.00 per attendee, which includes trainee materials, snacks, lunch, and continuing education hours.
- **CIP Training Events:** \$2,000 per training, includes locating and securing training venues, developing paper and social media marketing, prepare and file accreditation applications, prepare and assist with online registration, manage trainee materials, manage AV needs, arrange for all day refreshments/food, venue set up, onsite assistance, follow-up with filing earned credits, send certificates, process post-event paperwork.
- Approximately 40-50 hours per event between five different team members.
- CLARO Online Training - \$600 each/38 courses in 2019 = \$22,800 annual cost – divided in half to reflect only July to December of 2019. Maintenance of online courses already created in previous years. 10 hours each for annual accreditation application, updates to website for course numbers, PIN, programming annually, filing of course credits, reporting of hours. Approximately 10 hours per course annually between three

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

team members and Mirliton. During the period of July 1 to December 31, 2019 – the courses were viewed 274 times for a total of 480.55 hours of CLE earned.

- CLARO Course Development - \$5000 in 2019 – Transition of Mock Court Video to Online Course. Approximately 100 hours for the series between one team member, Pelican Center staff and Mirliton. CLARO training expenses during the January 1 to June 30, 2020 were restricted to course editing to prepare for the new website and learning management system. 29 hours (@\$65/hour = \$1885) were spent editing the mock court videos and preparing the LGBTQ course by Gary Mallon, DSW.
- Transition Assistance from in-person to Virtual Live Training for CIP events –\$747.50 total (11.5 hours @ \$65/hour) of coaching and practice sessions for Fundamentals of Child Welfare session to be offered online instead of in-person with preparation, practice, debriefing after practice, equipment set up, revisions to materials to fit online distribution. Additional costs involved zoom subscription for a single meeting space of \$156.57 annual expense for 100-person meeting space. Sessions can be recorded for later use.
- *GoToTraining* is used for live in-person training and the subscription per year is \$1247.13. It accommodates up to 1000 people, can be recorded and allows for playback at a later date.
- LDAA Conference in July 2020 – most everything was planned in May and June of 2020. The coordination fee was \$2000. It was a virtual event of two half-days with 76 registered attendees – primarily from the District Attorney’s Offices across the state. All attendees were admitted without registration fee. It was held on July 20-21, 2020.
- **Contract Trainer Cost:** Average of \$650.00 per day. The Pelican Center for Children and Families (PC) contracts with trainers at the following rates: \$500.00 per day within their domicile. \$750.00 per day outside of their domicile. This daily rate includes travel, consultations, and other expenses.
- **Per Diem Contract Trainer Cost:** \$1,500 - \$1,700 to facilitate one 6-hour training – includes preparation, delivery of training, development of pre and post assessment and evaluation.

For additional information on ongoing training in the core curriculum, please refer to the DCFS Training and Staff Development Chart in Appendix B.

- F. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA):** The Department of Children and Family Services (DCFS) is designated to manage the Child Abuse and Prevention Treatment Act (CAPTA) grant funds. CAPTA funds are utilized with Title IV- B funds and Social Services Block Grant (SSBG) funds in Louisiana to prevent, identify, and treat child abuse and neglect situations.

This plan, which complies with the CAPTA Reauthorization Act of 2010, Public Law 111-320, profiles services provided and will remain in effect for the duration of the state’s participation in the grant program. The state assures periodic review and revisions to the plan to reflect any changes in strategies or programs. The state provides notice of any substantive changes relating to the prevention of child abuse and neglect that may affect eligibility for the grant program including statutory and regulatory changes.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The following pages describe how the funds provided under CAPTA were and will be used to address the purposes of the grant and achieve the objectives of the grant. Substantive changes to the use of CAPTA funds include the funding of services related to Human Trafficking (HT). Louisiana is fully compliant with all federal legislation related to HT. DCFS has amended its policies related to disclosure of fatalities and near fatalities to direct that the Department shall share information on these cases. In practice, and for many years, DCFS has always shared the information on fatalities and near fatalities when requested.

Most recently, and to comply with Public Law 114-198, House Bill 678 passed the state legislature and on June 22, 2017 the Governor signed Act 359. The Department then promulgated an emergency rule that went into effect on October 1, 2017. Provisions of the act that were amended on January 7, 2019, by the Victims of Child Abuse Reauthorization Act of 2018, Public Law 115-424.

**PROGRAM AREAS SUPPORTED BY CAPTA FUNDS:** In accordance with section 106(b) (1) (A) of CAPTA, the state addresses services and programs with grant funds in order to improve the child protective service system of the state. Of the program areas allowable under CAPTA guidelines, the state utilizes funds in the following program areas:

- Intake, assessment, screening, and investigation of child abuse and neglect reports;
- Risk and safety assessment protocols;
- Programs and procedures for the identification, prevention, and treatment of child abuse and neglect;
- Implementing criminal records checks for prospective foster and adoptive parents and other adults in their homes;
- Improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including training and improvements in the recruitment and retention of caseworkers;
- Development and implementation of procedures for collaboration among child protection services, domestic violence, and, other agencies; and services to disabled infants with life threatening injuries;
- Addressing the needs of infants born with prenatal drug exposure;
- Referring child not at risk of imminent harm to community services
- Protecting the legal rights of families and alleged perpetrator
- Multi-disciplinary outreach, consultation or coordination the state has taken to support implementation with substance abuse treatment authority, hospitals, health care professionals and public health agencies.
- Current monitoring process for Plans of safe Care
- Supporting Citizen Review Panels

**PROGRAM AREAS:** Intake, assessment, screening, and investigation of child abuse and neglect reports.

**SERVICES PROVIDED:**

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

1. **Centralized Intake (CI) Service Description** – A CI system was developed by DCFS in 2011 and provides a centralized child abuse reporting hotline telephone service (1-855-452-5437) that is available 24 hours a day, 7 days a week (24/7). The Department contracts with a vendor, Young Williams, to enable provision of this service. The hotline is operated by Child Protection Services (CPS) teleworkers who work from home and are stationed throughout the state. The DCFS call center provides 24/7 back-up services for the child abuse reporting hotline. The Department strives to have 85% of calls go directly to an intake worker and the speed to answer goal is no more than 4 minutes; however, if a caller does not wish to wait for the next available intake worker a callback option can be chosen by the caller and they will not lose their place in the queue.

Staff are selected based on the following guidelines/ qualities:

- Experience in the CPS Program;
- Proficient in TIPS/ACCESS searches;
- Excellent computer, writing and typing skills;
- Ability to multi-task such as entering data, interviewing the reporter and searching for the client in TIPS and ACCESS;
- Excellent speaking and communication skills.
- Recapping information throughout the call to assure the reporter that the report information is being captured accurately; and
- Closing the call by answering any final questions and thanking them.

**CI Update FFY 2021:** The focus of child-safety through the Child Welfare Assessment and Decision Making model (CWADM), with continued assessments at the intake level. With a goal of improving information collection to support accurate assessments and disposition. The areas of assessment were aligned and implemented. Weekly unit-wide briefings are held and videos of briefings are made available for staff to reinforce the concepts and practices of the CWADM model. The number of intakes received during FFY 2020 by 7,966. The lowest percentage of acceptance during the current reporting period is 32.7% and the highest 33.9%. (Additional information regarding Centralized Intake (CI) can be located in Section 4: Services – Child Welfare Continuum section).

**Number of Intakes Received and Acceptance Rate:** The number of intakes received during FFY 2020 by 7,966. The lowest percentage of acceptance during the current reporting period is 32.7% and the highest 33.9%. (Additional information regarding Centralized Intake (CI) can be located in Section 4: Services – Child Welfare Continuum section.)

Number of Intakes Received and Percentage of Intakes Accepted for CPS Services													
Month	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	March 2020	April 2020	May 2020	June 2020	July 2020	Aug 2020	Sept 2020	Total
# of reports received FFY 2020	5,096	3,878	3,951	4,694	4,317	3,762	2,327	2,871	3,209	3,406	3,568	4,079	45,158
% of Reports Accepted	37.5% (1,913)	38.0% (1,474)	37.1% (1,465)	36.1% (1,693)	34.1% (1,473)	33.7% (1,267)	30.6% (713)	36.5% (1,047)	33.7% (1,080)	34.3% (1,169)	36.9% (1,316)	35.5% (1,450)	35.6% (16,060)

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

FFY 2020													
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Number of Intakes Received and Percentage of Intakes Accepted for CPS Services												
Month	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	March 2021	April 2021	May 2021	June 2021	July 2021	Aug 2021	Sept 2021
Number of reports received FFY 2020	4,202	3,775	3,758	3,890	3,572	4,907						
% of Reports Accepted FFY 2020	35.9% (1,509)	34.8% (1,305)	32.7% (1,228)	37.17% (1,446)	34.01% (1,215)	33.74% (1,656)						

**Call Response Metrics: Analyzing and Improving Response To Calls:** Two goal metrics for strategic planning were set at 85% of calls going directly to an intake worker, and speed to answer goal of no more than 4 minutes.

**Number of Mandated Reporter Portal Reports Received and Total Calls Received:**  
Call Summary: The lowest number of call received occurred in the month of April 2020 with CI receiving 5,675 calls. Prior to the pandemic in April 2019, CI received 7,112 calls, which was a decrease of 21% at the beginning of the pandemic. CI calls are returning to pre-pandemic numbers as indicated by 6,931 calls received in March 2021.

Mandated Reporter Summary: The lowest number of written reports entered by mandated reporters during the pandemic were 815 in April 2020. CI received 2,017 reports in April 2019, which indicates 40% decrease in 2020 when compared to pre-pandemic numbers. Virtual learning contributed to the decrease in percentages due to less face-to-face-contact between students and teachers. As virtual learning decreases and return to classroom teaching increases, the number of portals are more aligned with the numbers prior to the pandemic.

Month	Total Calls	#MRP Reports (Mandated Reporter Portal)	*Total Received
January 2020	7,290	2,284	9,574
February 2020	6,323	2,115	8,438
March 2020	6,187	1,747	7,934
April 2020	5,675	815	6,490
May 2020	3,687	1,034	4,721
June 2020	5,342	1,099	6,441
July 2020	5,666	1,182	6,848
August 2020	6,002	1,430	7,432
September 2020	6,731	1,803	8,534
October 2020	6,195	1,994	8,189
November 2020	5,331	1,757	7,088
December 2020	5,167	1,715	6,882
January 2021	5,567	1,453	7,020
February 2021	5,554	1,805	7,359

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

March 2021	6,931	2,579	<b>9,510</b>
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*\*Total Received – This number represents total calls and mandated reports through on-line portal.*

**Speed to answer:** CI maintained the goal of answering calls within four (4) minutes through February 2021. The time increased in March 2021. The average speed to answer (ASA) remained below 10 minutes for over 28 days each month.

Calls – Speed to Answer		
Month	Average Speed to Answer	#Days ASA Below 10 Minutes
March 2020	3.24	28
April 2020	.97	30
May 2020	1.24	30
June 2020	1.04	30
July 2020	1.27	30
August 2020	1.76	29
September 2020	2.39	30
October 2020	1.86	31
November 2020	1.77	30
December 2020	1.52	31
January 2021	1.96	31
February 2021	3.41	27
March 2021	5.89	27

*\* March 2020-December 2020 COVID 19 Data. During COVID19 pandemic, the number of calls decreased, especially during the time of school virtual learning.*

**CI Activities Planned for FFY 2022:** CI will continue the efforts to focus on child safety and improving information collection to promote accurate assessments decision making at the intake level. We anticipate the redesign of the intake, which will be implemented through CCWIS, will improve the quality of written reports from mandated reporters and contribute to better information collection thereby leading to improved decision-making at intake. The goals for receipt of calls include an average speed to answer of four (4) minutes or under and 85% of calls going directly to an intake worker.

**ALLOWABLE AREA:** Risk and Safety Assessment Protocols

**SERVICES PROVIDED:**

2. **Structured Decision Making (SDM®) Service Description** – The SDM® model incorporates a set of evidence-based assessment tools and decision-making guidelines designed to provide a higher level of consistency and validity throughout the case process. Goals of the SDM® model are to reduce subsequent harm to children, to reduce recidivism on validated cases of abuse/neglect and/or foster care placements, and to reduce permanency timelines. These goals are accomplished by introducing structure to critical decision-making points, increasing consistency and validity of decisions, targeting resources on families most at risk and using aggregated assessment and decision making data to inform agency-wide monitoring, planning and budgeting. Components of the SDM® model include a series of tools used to assess families and structure agency responses at specific decision-making points that range from intake to reunification. The SDM® model utilizes service levels (high, medium, low) with differentiated minimum

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

standards for each level, and targets those families that score at the highest levels of risk and needs as priority.

CQI continued the mentoring project for CPS supervisors. There were ongoing trainings and consultations scheduled to enhance the staff's ability to complete the SDM correctly, as well as to use the information accurately as it relates to determining case closure, referral for services or removal. The CPS email address, [dcfs.childprotectiveservices@la.gov](mailto:dcfs.childprotectiveservices@la.gov), was utilized as a point of contact by field staff to submit questions/concerns as it relates to risk assessments and/or completion of the risk assessment instrument.

**SDM® Update FFY 2020:**

Area of Practice	FFY 2019 Q1 Oct 1 – Dec 31, 2018		FFY 2019 Q2 Jan 1 – Mar 31, 2019		FFY 2019 Q3 Apr 1 – Jun 30, 2019		FFY 2019 Q4 Jul 1 – Sept 30, 2019	
	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%
Correct Household	36	100	37	94	34	94	30	100
Timely Approval	20	85	16	75	17	82	11	82
Consistency	20	85	16	81	17	71	11	82

Area of Practice	FFY 2020 Q1 Oct 1 – Dec 31, 2019		FFY 2020 Q2 Jan 1 – Mar 31, 2020		FFY 2020 Q3 Apr 1 – Jun 30, 2020		FFY 2020 Q4 Jul 1 – Sept 30, 2020	
	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%
Correct Household	28	100	24	100	20	100	15	100
Timely Approval	13	81	8	100	6	83.3	6	67
Consistency	14	88	8	88	14	83.3	6	33.3

Area of Practice	FFY 2021 Q1 Oct 1 – Dec 31, 2020		FFY 2021 Q2 Jan 1 – Mar 31, 2021		FFY 2021 Q3 Apr 1 – Jun 30, 2021		FFY 2021 Q4 Jul 1 – Sept 30, 2021	
	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%	# of Cases Meeting Practice	%
Correct Household	21	100	24	100				
Timely Approval	11	91	5	20				
Consistency	11	73	5	60				

Child Protective Services (CPS) conducts in Initial Risk Assessment using the SDM to determine the likelihood of the family coming to the attention of DCFS again if the DCFS does not intervene or provide services. Family Services conducts an in-home risk assessment for children in the homes. All cases with a goal of reunification referred to Foster Care because of child abuse and/or neglect shall be assessed for safety and risk, using the Structured Decision Making Risk Assessment Tool. The Structured Decision Making (SDM) Risk Assessment and Reunification Reassessment is the process used to

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

determine the degree to which the child may be at risk of future maltreatment within the next 18-24 months. The Out-of-Home Reunification Reassessment is the tool used to assess the caregivers' progress toward achieving case plan goals, which are focused on increasing protective capacities to address threats of danger.

The initial SDM Risk Assessment is used to identify families who have low, moderate, high or very high probabilities (levels) of future abuse and/ or neglect. The Initial SDM Risk Assessment determines if a family is more or less likely to have another incident without further intervention by the Department.

The SDM Out-of-Home Reunification "Reassessment", which includes a risk determination from the most recent investigation, an evaluation of case plan progress, a visitation plan evaluation and a safety review informs decision making regarding reunification of a child with the family and permanency for the child. The Reassessment determines the frequency of contact with the parent. The Reassessment is completed three months (90 days) after the case was opened in foster care (FC) every three months (90 days) thereafter, prior to each case plan review as long as a case plan goal remains reunification and any time there is a significant change in family circumstances. When a case plan review is approaching, the reassessment should occur prior to the initiation of planning, even if that means the reassessment occurs a few weeks early. When completing the Reassessment, a Safety Review is completed as part of that assessment and a Form 5, Safety Assessment shall be completed to assess if any child is still considered unsafe. The safety assessment and risk assessment shall be used in combination to determine case planning and prior to considering a trial placement or immediate reunification.

In comparing data from 2018 to the average quarter data in 2019, there was a decrease of 4.32% in data completing the risk assessment on the correct household. Child Protective Services (CPS) conducts an Initial Risk Assessment using the SDM to determine the likelihood of the family coming to the attention of DCFS again if the DCFS does not intervene or provide services. Family Services conducts an in-home risk assessment for children in the homes. During the first quarter of FFY 2019, thirty (30) cases were reviewed, and of the thirty, 100% were completed on the correct household; twenty cases, or 85%, had timely approval of the risk assessment; and twenty cases, or 85% had consistency of information on the risk assessment. During the second quarter, thirty-nine (39) cases were reviewed, and of those cases, thirty-seven, or 94%, were completed on the correct household; 75% had timely approval of the risk assessment; and 81% had consistency of information on the risk assessment. In the third quarter, thirty-six (36) cases were reviewed and of those, thirty-four or 94% was completed on the correct household, 82% had timely approval of the risk assessment; and 71% had consistency of information on the risk assessment. During the fourth quarter 30 cases were reviewed, and of those 100% were completed on the correct household; 82% had timely approval of the risk assessment; and 82% had consistency of information on the risk assessment.

**SDM® Activities Planned for FFY 2022:** Continuous Quality Improvement staff (CQI) along with program staff will review the SDM tools for accurate completion. When deemed necessary, training and consultation will be offered to frontline staff to enhance their

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

knowledge and skills related to completion and use of the SDM® tool. DCFS will make available to child welfare specialists and supervisors, staff training and consultation in the use of SDM tools and guidelines in the assessment. Coaching and mentoring with supervisors will incorporate the use of these guidelines and processes in examining risks, safety threats, and safety planning for children throughout the life of the case.

3. **ACCESS 2.0- Service Description** – The Department began using ACCESS 2.0 in June 2018. A Comprehensive Enterprise Social Services System (ACCESS) is the statewide system for intake of all reports of child abuse and neglect. This information management system contains intake records (CI) that are assigned to the CPS program. ACCESS used to serve as the electronic case record for all intakes, child abuse and neglect reports and CPS services until the development and implementation of On-Base. ACCESS provides some case management tools. The Department continues to address system issues for optimal performance.

ACCESS 2.0 gathers all the new data that is required by CARA. ACCESS 2.0 captures data in regards to notifications of newborns who exhibit symptoms of withdrawal or other observable and harmful effects in his appearance or functioning that a physician believes is due to the use of a controlled dangerous substance in a lawfully prescribed manner by the mother during pregnancy. It captured if a plan of safe care was developed and referrals made to ensure the needs of the family are met upon discharge from the hospital, and captured data of whether or not a plan of safe care was developed and monitored for screened in reports, including services/referrals for the affected family or caregiver. This data is pushed to our TIPS system to allow for NCANDS reporting.

**ACCESS 2.0 UPDATE 2021:** ACCESS 2.0 was implemented as a temporary solution to meet existing business needs pending implementation of a CCWIS solution. DCFS continues to work with a vendor to design and implement a CCWIS solution. Active work continues on the ACCESS system to resolve identified defects, while minimizing any enhancements until CCWIS is implemented. The Intake and Investigations modules were selected as the first modules for design in the new CCWIS system and staff are actively involved in developing a CCWIS system that meets the business needs of Child Welfare. The DCFS is anticipating CCWIS to go live in March 2022.

**ACCESS 2.0 Activities Planned 2022:** DCFS will continue active work to identify any defects in the ACCESS 2.0 system until the CCWIS system is implemented. ACCESS will remain the system in place while CCWIS staff continues development of the CCWIS for the identification of cases that meet the DCFS criteria for abuse and/or neglect.

4. **Criminal Record Clearances (CRC):** DCFS uses DCFS Child Welfare LIVE SCAN equipment to complete fingerprint based criminal record clearances through the Louisiana State Police (LSP) and the FBI. Criminal record clearances were obtained on prospective foster/adoptive parents (both DCFS and private agency used by DCFS) prior to certification, on relative caregivers, and on all residential staff including contractors prior to employment to insure the safety of children placed in the care of these individuals. Additionally, all DCFS staff that are “new hires” receive criminal record clearances prior

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

to hire to insure safety of children with whom the employees interact. The DCFS requires all mentors, visiting resources and volunteers who will be working for long stretches of time alone with a child to receive criminal record clearances as well since they are the caregivers for the child while they are alone with the child. Additional information can be found in the Systemic Factor Section G: Foster and Adoptive Parent Licensing, Recruitment, and Retention.

**CRC Update FFY 2021:** Child Protection Act, Louisiana R.S. 15:587, 15:587.1, 46:51.2(C) and P.L. 115-123 were updated and changes were made to DCFS Administrative Policy 1-1000, Criminal Record Clearances, to include the arrest and criminal offenses that apply to foster/adoptive caregivers, relatives and other caregivers if five or more years have elapsed between the date of proposed placement and the date of successful completion of any sentence deferred adjudication, or period of probation or parole. There are non-violent offenses that foster and/or adoptive caregivers, relatives and other caregivers may be considered for placement of children in their home upon successful completion of any sentence, deferred adjudication, or period of probation or parole and after a thorough assessment related specifically to the criminal conviction(s). The assessment is completed by the Foster Care and/or Home Development case worker and must consider the following factors in determining the person's suitability for certification as a foster or adoptive caregiver or relative guardian: The Department invested in nine portable *Livescan* systems to expand the availability of fingerprinting capacity in the regions. The existing fingerprinting equipment is located in the regional offices, but this equipment will be located in parish offices, and will be able to be used in the field within client homes or facilities.

**CRC Activities Planned FFY 2022:** Information included in the Foster and Adoptive Parent Licensing, Recruitment and Retention Section of APSR

5. **Training-** Child Welfare Training in coordination with the Louisiana Child Welfare Training Academy (LCWTA) continued to provide the 24-week competency based child welfare curricula for new staff. The Department offers various training opportunities to all staff throughout the year including a core child-welfare curriculum (4-6 sessions of the core curriculum are offered annually). Other opportunities for training are through conference participation, and professional development workshop participation within the state's prospective communities. This involvement with the community creates opportunities for staff to collaborate with other service providers and to engage in collaborative networking activities. Staff receiving these training opportunities are responsible for case management duties in the areas of child protection, family preservation, foster care, adoption, and independent living services. Both management and program staff are afforded the same opportunities in the initial phases of any new initiative to serve as leads in the training after having been trained by contracted experts.

Performance measures and practice expectations are incorporated into each training staff receives. From the new worker phase to the experienced worker phase, trainings required of departmental staff address the skills, and knowledge needed to carry out specified job responsibilities in the four core areas under the Promoting Safe and Stable Families

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Program. (For additional information, please refer to the Systemic Factors section of the APSR).

Training is available to foster/adoptive parents through LCWTA sponsored training providers. Additional trainings may be used to meet licensing requirements including: Louisiana Foster/Adoptive Parent Association annual conference; National Foster Parent conferences;

- Community agency or organization trainings (pre-approved by the regional or state office);
- Participation in consultation with a licensed professional for purposes of implementing an individualized behavior management program or other therapeutic treatment on behalf of a foster child;
- On-line trainings (pre-approved by state office).

All families applying to become certified as foster/adoptive parent(s) in Louisiana are required to complete pre-service training and to receive education in CPR/first aid. Pre-service training is scheduled at a minimum of every 10 weeks. Pre-service trainings are held statewide in various locations to accommodate potential applicants. Both morning and evening sessions are held statewide as well as Saturday sessions for kinship/relative families that choose to pursue licensure for the placement and permanency goal of their relative/kin. (For additional information, please refer to the systemic factor section on Foster and Adoptive Parent Licensing, Recruitment, and Retention.)

The Department utilizes the following mechanisms of technology to meet training needs:

- Modular Object-Oriented Dynamic Learning Environment (MOODLE) as its Learning Management System (LMS);
- Web-Based Training;
- Video Conferencing; and,
- Webinars and Teleconferences.

Louisiana Child Welfare moved into initial implementation of the Job Redesign and the Louisiana Workforce Development Implementation Team achieved major milestones by completing the initial implementation of the Job Redesign with eight teams over three (3) Louisiana parishes (Calcasieu, Lafayette and East Baton Rouge).

See the Collaboration and Vision section of this report for additional information on Workforce Development.

**Training Update FFY 2021:** See Systemic Factors – Staff and Provider Training Plan in Appendix B

**Training Activities Planned for FFY 2022:** See Systematic Factors – Staff and Provider Training Section Plan in Appendix B.

6. **Critical Incident Stress Management (CISM):** The DCFS CISM team provides:

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Pre-crisis Preparation - stress prevention education to help staff improve coping and stress management skills;
- Crisis Management Briefing/Staff Consultation - stress management intervention used to inform and consult and allow psychological decompression;
- Defusing – small group intervention provided within a short time frame after a traumatic event to reduce the level of harm to the people exposed to it;
- Critical Incident Stress Debriefing – small group intervention which uses crisis intervention and educational processes to reduce psychological distress associated with a critical incident; and
- Individual Crisis Intervention – used when only one to three persons are affected by the traumatic incident with a goal to assist the individuals in reestablishing a pre-incident level of functioning.

Population Served: The CISM team provides stress prevention education statewide to any DCFS employee in the Child Welfare, Economic Stability, and Child Support Enforcement units, upon request when experiencing job related critical incidents, either directly or indirectly.

CISM Update 2021: The Department of Children and Family Services (DCFS) Critical Incident Stress Management (CISM) team consists of thirty-two (32) active members who are trained and registered with the International Critical Incident Stress Foundation (ICISF) through February 24, 2022, and maintains the integrity of the critical incident model established by this trauma response organization. Teams must register on an annual basis in order to remain on the “Current” team list. If ICISF does not have the current information, the team may not be included in referrals to respond to requests for CISM assistance through the ICISF Hotline or the ICISF office. The CISM team members are spread throughout the state, as there is representation from almost every region. In FFY 2020, three (3) 1:1 CISM interventions were held according to the CISM model. The CISM team completed one group intervention prior to the pandemic. Due to the COVID-19, pandemic 1:1 intervention and interactions were limited with staff. In an effort to make sure the needs of staff were met, the CISM team conducted supportive counseling via Zoom meetings, Skype and telephone for nine DCFS staff members requesting interventions. Thirteen staff received services.

CISM Interventions			
	Requested Group Interventions	Requested 1:1 Interventions	Total Staff Receiving Services
FFY 2018	3	9	39
FFY 2019	8	8	16
FFY 2020	1	3	13
FFY 2021			
FFY 2022			
FFY 2023			

**CISM Activities Planned FFY 2022:** The Department will continue to provide pre-crisis preparation, crisis management, defusing, critical incident stress debriefing and individual

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

crisis intervention CISM services. Ongoing recruitment will continue for new members of the team.

7. **Nurturing Parent Program (NPP):** The Nurturing Parent Program (NPP) is a family based parenting program with a proven record of preventing and treating child abuse and neglect. The state’s Family Resource Centers (FRC) located in every region offers Nurturing Parent groups. Technical assistance on implementation of the model is provided to the Family Resource Centers.

**Population Served:** This statewide program serves parents with children age birth to five that have parenting determined as a need in their service/case plan. A family can consist of single parents, parent couples, stepparents or parent paramours. The families referred should be at risk of child abuse/neglect or have experienced child abuse/neglect. The families could be intact or families with the goal of reunification of families. Families should not be actively using substances or in recovery.

**Services Provided:** Parents and children attend different groups for two hours with 30 minutes of family nurturing time between the first and second hour. Each group is followed by a weekly home visit to work one-on-one with the parent to assure the parent is able to demonstrate what they have learned. Parent groups consist of discussion, role-play, lecture, skill building, nurturing activities, and the assignment of home practice exercises. Children’s group activities consist of age-appropriate activities including role-play, music, arts, puppets, reading, infant massage and modeling for parents. The Nurturing Parent Program is 16 weeks long.

FFY	Number of Parents receiving NPP	# and % of parents who complete the Nurturing Parenting Program	# and % of parents who completed the Nurturing Parenting Program with a higher post-test mean score than the pre-test mean score.
FFY 2018	328	212 (64%)	198 (93%)
FFY 2019	520	339 (65%)	274 (82%)
FFY 2020	635	298 (47%)	150 (50%)
FFY 2021			
FFY 2022			
FFY 2023			

**NPP Update FFY 2021:** The Nurturing Parenting Program (NPP) is offered in each region of the state through Family Resource Centers (FRC). New Orleans Region offers the Positive Parenting Program and Effective Black Parenting through its FRC. The DCFS continues to make available, support and provide technical assistance to each Region’s FRC by providing assigned liaisons and program managers from the agency. Currently services are being provided virtually due to the COVID-19 pandemic.

**NPP Activities Planned FFY 2022:** The Family Resource Centers (FRC) will continue providing NPP services to identified families. Families will continue to participate in the 16-week NPP evidenced based program offered at the FRC’s. The agency will continue to

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

provide support and technical assistance through assigned liaisons and program managers to each region's FRC.

8. **Substance Abuse Counselors**: DCFS is working in collaboration with LDH to place substance abuse counselors in four pilot parishes: East Baton Rouge, Livingston, Caddo, and Rapides parish offices to house Substance with a plan to expand throughout state.

**Substance Abuse Counselors Update 2020**: DCFS and Florida Parishes Human Services entered into an MOU effective April 1, 2019 through June 30, 2019, placing a Substance Abuse Counselor in the Livingston DCFS office every other week to conduct substance abuse assessments. A substance abuse counselor started in the Covington region with an MOU from March to June 2019. The counselor has continued under contract since July 2019. The collaborative work between DCFS and LDH concerning Substance Abuse Counselors seeks to reduce the timeframe, in which clients with substance abuse issues receive treatment, and as a result, case outcomes will improve and repeat maltreatment of children will be reduced.

**Substance Abuse Counselors Activities Planned 2021**: DCFS will continue working in collaboration with LDH to place substance abuse counselors in four pilot parishes: East Baton Rouge, Livingston, Caddo, and Rapides parish offices. The Substance Abuse Counselors will provide substance abuse and behavioral assessments in addition to treatment referral services. The collaboration between DCFS and LDH will include a Recovery Coach in addition to the Substance Abuse Counselor. Florida Parishes Human Services and DCFS entered into a contract for a fulltime substance abuse counselor and part-time recovery coach July 1, 2019, providing services within three offices in the Covington region. The collaborative work between DCFS and LDH concerning Substance Abuse Counselors seeks to reduce the timeframe in which clients with substance abuse issues receive treatment and support in maintaining sobriety, and as a result, case outcomes will improve and repeat maltreatment of children will be reduced. The aforementioned efforts are expanding to East Baton Rouge, Livingston, and Caddo parishes.

9. **Human Trafficking (HT) Services**: In accordance with the Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-183, and Act 564 of 2014. DCFS is committed to identifying, protecting, and providing services for children, as well as adults, such as a parent/caretaker, who have been identified as trafficking victims or are at risk of being a potential human trafficking victim. DCFS has strategies in place to identify human trafficking victims or potential victims at intake and during the initial stages of the assessment phase of the case due to specific indicators. DCFS will continue serving on the Louisiana Human Trafficking Prevention Commission and Advisory Board and is planning how recommendations will be implemented from the report submitted last year. DCFS will develop specialized foster homes for trafficking victims, while continuing to adjust parts of the Human Trafficking Model as needed. Training for staff will commence with additional, more in depth, classroom sessions. DCFS will complete the curriculum for tier 2 and 3 classroom sessions. Safety plans for victims of human trafficking will be developed for prevention and support for trafficking victims. There are two (2) specialized residential facilities for human trafficking victims in Louisiana: Metanoia and Free Indeed. Currently

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

there are state level staffings for human trafficking cases. Once a victim or potential victim is identified, the Human Trafficking Victim Notification Form is emailed to the Louisiana DCFS State office via email at: [dcfs.humantrafficking.dcf@la.gov](mailto:dcfs.humantrafficking.dcf@la.gov) and staffing shall occur within five (5) business days. DCFS plans to begin Multi-Disciplinary Team (MDT) staffings for Human Trafficking cases in the nine (9) regions throughout the state. The team will consist of service providers, medical professionals and, individuals who can provide needed support for victims and potential victims of human trafficking and their families.

**Human Trafficking Update 2021:** DCFS participated in quarterly meetings with the HT Commission and Advisory Board to address how the state of Louisiana tackles the problem of HT and ensures appropriate services are available for survivors. In response to Act 409 of the 2019 Legislative Session, DCFS, FINS and LDH staff were charged with developing a report to develop HT victim services delivery model. DCFS collaborated with multiple agencies including Louisiana Department of Health, Families In Need of Services, the Governor's Office, Children's Advocacy Centers (CAC), and the Louisiana Child and Youth Trafficking Collaborative, to develop recommendations aligned with HT Commission report. The DCFS collaborated Louisiana Alliance of CAC's and the Governor's Office regarding the Louisiana Child and Youth Trafficking Collaborative grant received to develop Human Trafficking MDT's statewide. The meetings are held bi-monthly. DCFS appointed liaisons in each region to work with the regional coordinators in developing the MDT protocol and attend all MDT's. The DCFS continues to expand awareness of the HT 101 training developed to identify victims of HT and their needs. The DCFS completed the development of tier 2 and 3 multi-Level HT Training in 2019 with a plan to roll training out in 2020 but could not due to COVID. The DCFS developed a training plan for the Tier 2 and Tier 3 in addition to a train the trainer certification for those curriculums. A pilot of the curriculums will be offered in April 2021 with a full roll out of curriculums starting in July 2021. The DCFS is in the beginning stages of working with the Governor's Office and service providers to develop a plan to certify additional HT trafficking trainers for the curriculum. The DCFS continues to work with the Louisiana Child and Youth Trafficking Collaborative to develop a screening for labor trafficking for utilization within child welfare. DCFS collaborated with OBH regarding the need for development of specialized therapeutic services for trafficking victims. Those needs included evidenced based therapies funded through Medicaid, training therapeutic providers in HT, identifying therapeutic providers that are trained in HT, and availability of virtual evidence based therapies. The training of Evidenced Based Therapeutic providers in Human Trafficking will begin this year.

**Activities Planned FFY 2022:** The DCFS will continue to participate in the HT Commission and Advisory Board to address HT statewide with all involved partners. The DCFS will continue to address barriers in HT. Some of these barriers include: lack of specialized knowledge and services to serve HT victims, lack of specialized staff or resources to address cases, lack of specialized placements (Therapeutic Foster Homes, Assessment Center, and Residential Placements), lack of specialized therapeutic services for HT victims (and availability of), and difficulty in providing services to juvenile victims who are not ready or, are unwilling to accept services and who frequently move around the state (placements or on runaway).

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The DCFS will add to its Child Welfare policy for all HT cases continuing to be served ongoing through programs to be referred to local, specialized MDT's when they are up and running. DCFS will work with multi-disciplinary teams to include stakeholders, HT survivors, and other agencies to develop a high level screening for labor trafficking to use within child welfare. The screening will assist in identifying red flags so that the case can be flagged for intervention. Finally, DCFS will roll out Tier 2 and Tier 3 HT trainings for caregivers, caseworkers, supervisors and administrators. During the next reporting year, the majority of Specialized Youth Workers, Extended Foster Care staff, State Office Human Trafficking Consultants, in addition to many others will be trained in the curriculums.

Over the next year, DCFS will be adding to its Child Welfare policy for all HT cases continuing to be served ongoing through programs to be referred to the local, specialized MDTs when they are up and running. DCFS will be working with a multi-disciplinary team to include stakeholders, HT survivors, and other agencies to develop a high level screening for labor trafficking to use with in child welfare. The screening will assist in identifying red flags so that the case can be flagged for further intervention. Finally, DCFS will be rolling out the Tier 2 and Tier 3 HT trainings for caregivers, caseworkers, supervisors, and administrators. During the next year the majority of Specialized Youth Workers, Extended Foster Care staff, State Office Human Trafficking Consultants, in addition to many others will be trained in the curriculums.

- 10. Media Campaigns/Community Education:** The department recognizes it is vitally important that any approach to protecting children and strengthening families in Louisiana include a strong prevention/awareness component. Communications have served as an essential tool to inform the community of safety initiatives implemented by the Department to keep our children safe, help individuals and families become self-sufficient, and provide a safe refuge during a disaster.

**Media Campaigns Update FFY 2020:** The Department's communication efforts continued largely as planned for the first six months of FFY20, with a focus on foster caregiving, adoption, human trafficking, child safety, child abuse prevention and other issues. Activities included:

- DCFS Secretary Marketa Walters and the Executive Staff met with legislators, legislative staff and community partners throughout the state to inform them about DCFS services and programs in "Conversations with the Secretary" sessions.
- The department and secretary received national awards in recognition for Louisiana's record-setting work in adoption.
- The DCFS Communications Office continued a redesign of its website and used a mass texting program to point foster parents and staff to online resources.
- The Communications Office continued to expand its online resources and child welfare data through its online "News Room." There, the Department posts fact sheets and reports. The Newsroom is the site of the department's online Public Records Center, which launched in May 2019. This portal provides a centralized and more efficient

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

system for the public to request and receive public records from the Department. The portal gives users the opportunity to submit public records requests, track requests and view released records in one centralized and user-friendly location.

The Department focused its communication efforts on major initiatives, including *Quality Parenting Initiative (QPI)*. Since its statewide launch in August 2016, DCFS has promoted QPI as a leading initiative in Louisiana's changing face of foster care.

*Louisiana Fosters*. Louisiana Fosters is the counterpart to QPI. First Lady Donna Edwards first launched this initiative with Secretary Marketa Garner Walters at the Governor's Mansion in August 2017, and is a statewide network of support for foster parenting. It involves business and community groups, nonprofits and church-based organizations all working together to support and advance foster parenting. Resources include a website, <http://www.louisianafosters.la.gov/> and pamphlets offering tips for becoming a foster caregiver or supporting foster parents.

In August 2019, the department and First Lady held the third annual Louisiana Fosters Summit at the Governor's Mansion. In an attempt to increase awareness of the Louisiana Fosters website and resources, the staff developed New Year's letters and Louisiana Fosters magnets and mailed them to every foster parent household in January 2020.

- Adoption Awareness
  - During Adoption Awareness Month, DCFS used digital and traditional news media to share the department's second-highest number of adoptions from foster care in a single year and its partnership with the Dave Thomas Foundation.
  - The department highlighted increases in teen and sibling adoptions.
  - Governor Edwards and First Lady Donna Edwards echoed the news of the adoption record throughout the year (through the Governor's radio show, Governor Edwards' major speeches touting the accomplishments of the administration, the First Lady's blog, the First Lady's presentation on a panel at the National Governor's Association conference, various speeches and public appearances, social media posts, etc.).
  - DCFS Secretary Walters, shared adoption information through presentations to numerous organizations throughout Louisiana.
  - DCFS continued to work with HP Serve on the statewide Louisiana Heart Gallery featuring adoptable foster children. HP Serve maintains the website and works to ensure ongoing recruitment efforts for children awaiting an adoptive family.
- Safe Haven: DCFS promoted Safe Haven through social media and continued distribution of Safe Haven materials (posters, brochures, Safe Baby stickers) to hospitals, law enforcement, fire stations, child advocacy centers, etc.
- Extending the Age of Foster Care/Outreach to Foster Youth. In FFY19, Louisiana launched an effort to extend the age of foster care to 21. The department publicized its efforts through fact sheets, media events, press releases, social media and other communication activities. The department worked with its youth advisory board to

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

redesign its *YouthLink* site, featuring information especially for foster youth. The department worked with local and national news media to promote extended foster care. This included a feature on “Good Morning, America” and an opportunity for the young woman and her caseworker to travel to New York City for an appearance on the show.

In March 2020, the Department’s focus shifted, by necessity, to the response to the pandemic and the new ways of serving and communicating with families as they confronted the challenges of COVID-19.

The Communications Office worked with the Child Welfare Division to develop online COVID-19 resources for foster families, to promote child abuse prevention through social media and traditional news media and to conduct local and national media interviews about the impact of the pandemic on child abuse and neglect reports. The department launched a Kinship Navigator partnership with Louisiana 211 to connect kinship caregivers with resources in their communities.

The DCFS Communication staff played a major role in the redesign of the Louisiana Fosters website to create a more interactive hub for those seeking assistance and for partners interested in collaboration. The website can be found at:  
<http://www.louisianafosters.la.gov/>.

Communication Activities Planned FFY 2022: Visits to the DCFS website more than tripled in 2020 over 2019, as DCFS Communications steered families to vital information about food assistance and other resources so essential during the pandemic and the three hurricanes that struck Louisiana. DCFS staff directed families to the information through social media and direct texts. Staff will continue these efforts in FFY21 and will seek other innovative ways to inform the public about DCFS services that strengthen families and protect children.

Its communication efforts will surround the following initiatives:

- *Family First Prevention Services Act*. DCFS is developing and implementing a communication plan to coincide with the rollout of the Family First model. With implementation of the Family First Prevention Services Act, the department’s focus is shifting to a greater emphasis on strengthening families, child safety and family preservation. DCFS Communications supports these efforts through the development of materials, online resources, presentation assistance and other means. DCFS communications will help key the DCFS Secretary and child welfare leadership engage staff and stakeholders (courts, CASAs, policymakers, foster parents, birth parents, community members, etc.) about what it takes to keep children and youth from entering care.
- *Adoption*. DCFS held a virtual adoption ceremony in November 2020 and promoted it through traditional means: press release, social media and video.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- *Safe Haven.* DCFS Communication staff worked with child welfare staff to produce an animated video promoting DCFS’ partnership with the National Safe Haven Alliance. The department will make the video the focus of social media publicity and partner outreach throughout the year.

In addition to these issues, Communication staff will continue to provide support for various Child Welfare Initiatives, including foster caregiver recruitment and support, extended foster care and child abuse prevention.

11. **Substance Exposed Newborns (SEN):** The DCFS met with community partners including the Louisiana Department of Health (LDH), local hospitals, Healthy LA, judicial stakeholders, and behavioral health agencies, to develop strategies to reduce the number of infants exposed to drugs during the mother’s pregnancy. Department policy has been updated to give staff guidance on completing safety assessments on cases of Substance Exposed Newborn (SEN) and to ensure all cases involving a substance-exposed newborn receives a Priority 1 (24 hour) response by CPS staff to determine the safety of the newborn infant. The Department has tracked these cases to identify trends in order to determine what the needs are and what interventions or resources are appropriate to meet the needs. The Department has implemented high-risk staffings, consultations with Bureau of General Counsel attorneys, and court ordered safety planning to assist with identifying safety needs and implementing interventions.

Louisiana formed the Heroin and Opioid Prevention and Education Council (HOPE) Council during the 2017 legislative session to continue the work of the Governor’s Commission on Heroin and Opioid Prevention; The HOPE Council is comprised of thirteen state agencies, including DCFS, all with a stake in addressing the Opioid epidemic.

DCFS is in compliance with CAPTA as it relates to Substance Exposed Newborns (SEN), as all SEN reports were received as per the Louisiana Children’s Code, Article 610 G (1) that states, if a physician has cause to believe that a newborn was exposed in utero to an unlawfully used controlled dangerous substance, as defined by R.S. 40:961 et seq., the physician shall order a toxicology test upon the newborn, without the consent of the newborn's parents or guardian, to determine whether there is evidence of prenatal neglect. If the test results are positive, the physician shall issue a report to the Department, as soon as possible. The Louisiana Children’s Code, Article 603 (17) defines a newborn as a child who is not more than thirty days old. Article 603 (22) defines prenatal neglect as “exposure to chronic or severe use of alcohol or the unlawful use of any controlled dangerous substance or in a manner not lawfully prescribed which results in symptoms of withdrawal in the newborn or the presence of a controlled substance or a metabolic thereof in his body, blood, urine, or meconium that is not the result of medical treatment, or causes observable and harmful effects in his physical appearance or functioning.”.

The Governor signed Louisiana Act 359 and rulemaking occurred to establish specific procedures for notifications to the Department through the Physician Notification of Substance Exposed Newborns No Prenatal Neglect Suspected form, which is completed by the physician. The form includes a plan of safe care to ensure the needs of the family

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

are met upon discharge from the hospital. This form is a notification for data gathering purposes and does not constitute a report of abuse/neglect.

**Population Served:** Newborns under the age of 30 days identified by a physician as having a positive toxicology test for a controlled dangerous substance, or symptoms of withdrawal in the newborn; and/or, symptoms of withdrawal or other observable and harmful effects in physical appearance or functioning due to chronic or severe use of alcohol by the mother during the pregnancy.

**SEN Update FFY 2021:** As part of the state’s efforts to monitor ongoing efforts and services related to substance exposed newborns, quarterly meetings were held in each region for the Comprehensive Addiction and Recovery Act of 2016 (CARA) focusing on the ongoing compliance and activities related to the POSC (Plans of Safe Care). The regional meetings included DCFS staff and local stakeholders for each region, and addressed services to families and their substance-exposed newborns. The regional teams held quarterly meetings during FFY 2020 that included video conferencing due to COVID-19. A Family Services Consultant monitors the regional quarterly meetings and every 6 months there is a call with all of the Regional CARA liaisons for updates. State level meetings were held in June 2020 and December 2020 to address systematic issues identified in the regional level meetings.

Through legislation, an advisory committee to the Governor was formed to address the opioid epidemic. DCFS served on the Heroin, Opioid Prevention and Education Council (HOPE). Within the last year, the HOPE Council continued to update the statewide website capturing data related to the opioid epidemic and a comprehensive listing of all opioid related initiatives. The council formed three sub-committees to focus on the areas of impact to the state. These committees include a Health Care Impact, Public Safety Impact, and Community Impact committee. Annually, a report is submitted to the legislature with recommendations to improve the response to the epidemic. (For additional information regarding HOPE, refer to Collaboration section of the plan).

The chart below provides an overview of the Substance Exposed Newborn cases received statewide for FFY 2020.

Substance Exposed Newborns					
	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Valid	2,080	1933			
Not Valid	186	120			
Total	2,266	2101			

**SEN Activities Planned FFY 2022:** Louisiana will continue to provide quality services for Substance Exposed Newborns through continued collaboration with stakeholders, judges and legal partners. Collaboration will continue with LDH regarding the established protocol addressing the needs of substance-exposed infants. DCFS will continue to align practice with the CWADM model to develop a unified assessment of risk and safety, which supports family engagement, enhancing protective capacities and supports the needs of children and families of children born substance exposed. Efforts will be made to ensure

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

staff understand and are accountable for activities involving child safety and, child/family risk assessments, and planning with families to ensure the well-being of substance exposed children and those services for the child and family are delivered effectively and efficiently.

12. **Early Intervention Services:** Policy requires referrals to Early Steps for children ages 0-3. The number of children served in the FS Program referred to the Early Steps Program has not been captured. However, during FFY 2020 there were 3,177 children served in the FS program ages 0-3. This is an unduplicated count. If a child left the FS program and returned during the same FFY, they were only counted one time.

Referrals to Early Steps for children ages 0-36 months, which have not already been referred by a pediatrician or other referent, are required. Policies related to drug and alcohol affected newborns are reviewed and include requirements outlined in CARA legislation (Comprehensive Addiction and Recovery Act). Quarterly regional CARA meetings with community stakeholders are held and documented to ensure the needs of the drug and/or alcohol affected infants, and their families are addressed and included in discussions of Early Steps referrals and potential barriers. Once the child is referred, the child will be assessed to determine if there is a developmental delay in one or more of the domains covered by the Early Steps Program. The domains include physical (vision and hearing), cognitive, social or emotional, communication and adaptive. Once the assessment is completed and the child is determined to be eligible for services, the Single Point of Entry (SPOE) is responsible for developing an Individual Family Service Plan (IFSP) and coordinating the services for the child and family. These may include services in the areas of health, nutrition, vision, occupational therapy, physical therapy, speech and language therapy, social work, family training, counseling, home visits and transportation.

**Population Served:** Children from birth to three years of age who have been abused or neglected, have a known or suspected developmental delay, have a medical condition which can result in a developmental delay, or a disability and are not already participating in an LDH early intervention program. Case circumstances with non-abuse/neglect, low birth weight, premature birth, exposure to domestic violence, family break-up, prenatal exposure to drugs or alcohol, and/or other risk factors are some circumstances which place a child at risk of developmental delays and can be referred with the parent/caretaker's consent. Referral procedures are consistently implemented statewide.

**Early Intervention Services Update FFY 2021:** The agency continues to require referrals to Early Steps are completed for children 0-36 months involved with DCFS. In addition to the referral, participation by the family is incorporated into the case plan to reduce the number of families that may opt to decline the assessment by phone. The agency improved tracking of drug affected, and alcohol affected newborns in FS by adding individual case open reason codes for each (code 85 and 88), and monitored the requirements put forth by CARA to ensure the needs of families with drug, and alcohol affected newborns are met. The formal use of Family Team Meetings in the Family Services program was implemented. The teaming approach in all DCFS program areas allows for focused case planning with parent/caretakers in addition to older youth input in service provision.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Early Intervention Services Activities Planned FFY 2022:** Departmental staff will continue to refer children 0-3 years of age to early intervention services, and will continue to serve on the State Interagency Coordination Council. DCFS will collaborate with DPH to assure any barriers to receiving early intervention services are addressed for the 0-3 population.

**ALLOWABLE AREA:** Protecting the legal rights of families, alleged perpetrators and mandated reporters

**SERVICE PROVIDED:**

**13. Protecting legal rights of families and alleged perpetrators:** It is the policy of the Department of Children and Family Services (DCFS) to allow all individuals the right to appeal their valid child abuse or neglect finding. Individuals are placed on the State Central Registry (SCR) or State Repository (repository) because of a valid child abuse and/or neglect investigation, after the exhaustion of an individual's due process rights. The Department has a Protective Services Review Team (PSRT) who reviews all valid findings once an appeal has been requested or for other administrative reasons, when a valid finding may affect a client's employability, or volunteer rights. Beginning July 1, 2018, any individual with a valid finding as a perpetrator of child abuse or neglect as the result of a CPS investigation has the right to an administrative appeal of the valid finding decision. The appeal process is held in accordance with Children's Code, Article 616.1.1 and the LAC Title 67, Part V. §1111.

**Protecting the rights of mandated reporters:** DCFS Policy 4-105 is in compliance with Louisiana Children's Code, Title 6, Article 611, which states that any person who in good faith makes a report, cooperates in an investigation, or participates in judicial proceedings authorized by the Code, or any caseworker who in good faith conducts an investigation, makes an investigative judgment or disposition, or releases or uses information contained in the central registry for the purpose of protecting a child, shall have immunity from civil or criminal liability. This immunity does not extend to any alleged principal, conspirator, or accessory to an offense involving the abuse or neglect of the child. It does not extend to any person who makes a report known to be false or with reckless disregard for the truth of the report.

**PROGRAM AREAS:** Multi-disciplinary outreach, consultation or coordination the state has taken to support implementation with substance abuse treatment authority, hospitals, health care professionals and public health agencies.

**SERVICES PROVIDED**

**14. Interagency Collaboration/Consultation with Physicians:** When appropriate, the department consults with physicians or other appropriate medical professionals to obtain appropriate assessments and guidance to address health needs, including mental health needs, and well-being of foster children. Annual medical examinations are required for all foster children as are dental exams for all foster children with their first tooth, or age one

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

year and older, whichever comes first. Other medical needs are addressed as they arise. Medical choice is limited to licensed physicians and facilities who participate in the Medicaid programs or providers who agree to bill and accept payment from DCFS.

The worker is responsible for 1) initiating plans for medical care 2) making direct referrals when indicated; and 3) maintaining current medical information in the child's case record. Responsibility for securing routine medical care is delegated to foster parents or other caregivers with assistance from the worker. For children up to one year of age, examinations shall be obtained according to the standards established by the American Academy of Pediatrics, and for all children over the age of one year at least annually or more frequently based upon the child's needs or a physician's recommendations.

Louisiana has adopted the provisions of the Affordable Care Act, which allows youth aging out of foster care to retain Medicaid coverage from age 18 to age 26. These services include only those, which are needed for routine wellness or medical necessity. DCFS implemented a polypharmacy and diagnostic consultation process with a contracted Psychiatrist at LDH. Children on multiple psychotropic medications with multiple diagnoses and at risk of placement disruption are candidates for presentation on bi-weekly calls and follow-up consultations as deemed necessary. The purpose of the consultation is to educate staff on the impact multiple psychotropic medications and mental health diagnoses have on children and youth in foster care and to empower staff with information to advocate on behalf of the indicated child. The Psychiatrist consults with departmental staff to provide guidance in case planning as needed. Policy and forms were created to address the use of psychotropic medications requiring parental consent when parent's continue to retain their rights, requiring that psychotropic meds be considered a last resort treatment option, and requiring a discussion of the medication's impact and options with the child, birth parent(s) and foster caregiver. A statewide WebEx was conducted to review updates to psychotropic medications policy and to provide support to staff with case specific questions on the topic. The psychotropic medications training is posted and is accessible on the DCFS website to all staff and stakeholders. Ongoing educational training and/or information WebEx trainings related to mental health issues and children in Foster Care are offered to all Foster Care staff on a quarterly basis.

DCFS staff ensure a Trauma and Behavioral Health (TBH) screening is completed by the caregiver and by children age seven and older within 30 days of foster care entry. Subsequent TBH screenings are completed every six (6) months thereafter. The caregiver's version is completed for children ages birth to six (6) years.

**Population Served:** Children and youth in the DCFS foster care program statewide and youth aging out of foster care at age 18 up to 21.

**Services Provided:** Treatment for resolution of emotional, behavioral or psychiatric problems to restore clients referred for outpatient mental health treatment to an acceptable level of functioning in the family and/or community in accordance with the case plan goal as well as to assess the medical and dental health and well-being of foster children.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Referrals for treatment are made based on medical necessity, treatment needs of the child and reduction of risk in the home of origin. Recommendations by medical professionals in assessing the well-being of foster children are often essential to the development of a case plan to work with the child and the family. In some cases, it is used to assess the progress with the case plan or prepare for court involvement. All treatment provided to DCFS clients, is to be addressed in the case plan for the family and child.

**Interagency Collaboration/Consultation Update FFY 2021:** The DCFS consults with Dr. Marty Drell to obtain appropriate assessments of foster children. The purpose of these calls are to educate staff on multiple medications and diagnoses. The calls held with Dr. Drell have helped the staff tremendously. All calls held are always educational and very engaged. The calls are helpful in that the workers and caregivers obtain needed guidance and education regarding the health, mental health and well-being of foster children. A training was provided to the Department of Children and Family Services staff to give more in-depth information on how to care for a child with multiple medications and diagnoses. Dr. Drell consults with the department staff to provide information for case planning and referrals.

The DCFS staff ensure a Trauma and Behavioral Health (TBH) is completed by both the children and caregivers. TBH's are to be completed every 6 months and for every child entering care until the age of 18 up to 21. TBH's have helped in assessing the well-being of foster children. Sufficient progress has been made with the Trauma and Behavioral Health screenings. Quarterly reports are forwarded to all regions to keep the staff abreast on needed TBH forms. The TBH forms have helped staff stay on top of their medical appointments and diagnoses. The staff are using and filing the forms. All staff members are in compliance with completing the forms and interacting with caregivers to complete the forms.

**Interagency Collaboration/Consultation with Physicians Activities Planned FFY 2022:** The DCFS will continue consultations with physicians and other appropriate medical professionals to obtain guidance and appropriate assessments to address health needs, mental health needs and the well-being of foster children. The DCFS will continue to complete TBH screenings on children and caregivers every six months for every child entering care until the age of 18 up to age 21. Monitoring and completion of the TBH screenings will continue by monitoring through quarterly reporting requirements.

15. **Interagency Collaboration/Healthy Louisiana (HL)/Coordinated Systems of Care Update FFY 2021:** DCFS continued to work with LDH, the Managed Care Organizations (MCO) and system providers to enhance the provider network to ensure the Child Welfare client population receives behavioral health services to meet their needs. LDH, OBH, DCFS, and OJJ will work together to strengthen service delivery. The DCFS continued educating providers, stakeholders and state agency staff on the processes involved in securing behavioral health services. In accordance with The Family's First Prevention Service Act (FFPSA), the Behavioral Health and Placement Services Unit will develop more focused workflows to decrease reliance on congregate care settings; decrease the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

number of children who experience inappropriate residential treatment; increase family-care settings; and identify service gaps that prevent family care settings.

Weekly meetings are held with MCOs, OBH and other key stakeholders to identify discharge plans for children who are approaching discharge who no longer meet medical need criteria, or who are beyond medical need criteria and may need intensive discharge planning and case management to transition child to appropriate care setting. DCFS collaborates with the Louisiana Office of Citizens with Developmental Disabilities (OCDD) and the Local Governing Entities (LGE) to ensure children are appropriately identified and assessed to determine whether children are eligible for services through OCDD and the (LGE).

DCFS collaborates with the Office of Public health to ensure that providers of children residential services licensed by DCFS are recognized as priority settings for COVID testing. OPH developed COVID Testing Strike teams in every Region of the state to ensure a rapid response to testing needs for staff and residents. To initiate help from the strike team, OPH connected DCFS with LGE Regional Medical Directors to organize testing efforts.

DCFS collaborate with LDH Health Standards (LDH-HS) in ongoing assessment of quality service among residential treatment providers licensed by LDH-HS. In the event that DCFS or LDH HS becomes dubious that a provider is able or willing to provide quality care in accordance with practice standards, DCFS and LDH-HS will collaborate in efforts to assess service provision and corrective actions.

In the second quarter of 2019, DCFS concluded two-year collaboration with OBH, Building Bridges Initiatives and congregate care providers to enhance competencies within Louisiana in the Six Core Strategies™ approach. By a competitive process, providers at the psychiatric residential treatment, therapeutic group home, and non-medical group home level of care were selected to receive intensive training, coaching and support to implement Six Core Strategies. A Residential Summit is planned in October 2020 where providers will present how they implemented the Six Core Strategies™ approach within their programs and the resulting outcomes.

DCFS continues to collaborate with the office of Behavioral Health regarding the Coordinated Systems of Care (CSoC) services through meetings, weekly phone calls with two of the health plans, and contact with our Magellan liaison. Below is a chart that reflects the number of DCFS children referred for CSoC services:

DCFS CHILDREN REFERRED TO CSoC FFY 2020		
Quarter	Dates	Total Referred
1 <sup>st</sup>	10/01/2019 – 12/31/2019	271
2 <sup>nd</sup>	01/01/2020 - 03/31/2020	315
3 <sup>rd</sup>	04/20/2020 - 06/30/2020	297
4 <sup>th</sup>	07/01/2020 - 09/30/2020	296

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Interagency Collaboration/Healthy Louisiana (HL)/Coordinated Systems of Care Activities (CSoC) Activities Planned 2022:** DCFS will continue to work with LDH, the Managed Care Organizations and system providers to enhance the provider network to ensure Child Welfare client population receives behavioral health services to meet their needs. LDH, OBH, DCFS, and OJJ will work together to strengthen service delivery. The DCFS will continue to educate providers, stakeholders and state agency staff on the processes involved in securing behavioral health services. A three-part virtual Residential Summit was planned in October 2020 for providers across all levels of residential care. The education was approved for continuing education units and posted on the Louisiana Child Welfare Training Academy (LCWTA) site for ongoing use by DCFS staff to promulgate the Six Core Strategies™ within Child Welfare.

The DCFS will continue to collaborate with OBH regarding CSoC services and to ensure uniform practice standards across service providers for youth utilizing congregate care services. DCFS continues to refer children for CSoC services, which includes services and supports targeted to at risk children and youth with significant behavioral health challenges or co-occurring disorders. The DCFS continues to ensure youth in DCFS care are in the most appropriate family focused and youth informed manner.

16. **Requirement for Media Disclosure on Child Fatalities and Near Fatalities** - Section 106(b)(2)(B)(x) of CAPTA requires states to assure the state will provide for the public disclosure of findings or information about a case of child abuse or neglect which results in a child fatality or near fatality. In compliance with this requirement, the Department has policy regarding the release of information to the media in cases involving child fatalities and near fatalities:

- the cause of and circumstances regarding the fatality or near fatality;
- the age and gender of the child
- information describing any previous reports of child abuse or neglect investigations are pertinent to the child abuse or neglect that led to the fatality or near fatality
- the result of any such investigations
- the services provided by and actions of the state on behalf of the child that are pertinent to the child abuse or neglect that led to the fatality or near fatality

The CAPTA legislation provides for the allowance of exceptions to the release of information in order to ensure the safety and well-being of the child, parents and family or when releasing the information would jeopardize a criminal investigation, interfere with the protection of those who report child abuse or neglect or harm the child or the child's family. The department's existing policy on disclosure provides for the exception of the release of this information when the district attorney requests information not be released due to its potential to compromise a criminal investigation, criminal prosecution or when the agency thinks a release may compromise the agency's investigation.

FFY 2020	Total Number of Children	Valid	Invalid	Inconclusive	Client Non-Cooperation	Pending
Number of Children Investigated as a Fatality	38	14	14	5	0	5

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

*Fatality data from WebFocus Managed Reporting extracted 1/14/2021*

Number of Children Investigated as a Near Fatality	Total Number of Children	Valid	Invalid	Inconclusive
Investigated as a Near-Fatality Victim	17	10	6	2
Report came in as Near Fatality - Child Later Died	0	0	0	0
Near Fatalities that did not become Fatalities	17	10	6	2

**Activities Planned for 2022:** Comply with federal regulations and departmental policies with regard to media disclosure on child fatalities and near fatalities. For additional sources of child fatalities, DCFS will contact the head of the Louisiana Coroners Association and work with the Association to develop a system to obtain information on additional child fatalities. Contact will be initiated with the Louisiana Sheriff's Association on the development of a process to include any additional fatalities handled by local law enforcement.

The Louisiana Department of Children and Family Service (DCFS) Child Welfare Department received new Program Instruction (PI) ACYF-CB-PI-18-06 on June 1, 2018. As per Program Instruction ACYF-CB-PI-18-06, Louisiana will need to document steps taken to track and prevent child maltreatment deaths in the APSR due June 30, 2019, including:

- A description of the steps Louisiana is taking to compile complete and accurate information on child maltreatment deaths to be reported to NCANDS, including gathering relevant information on deaths from the relevant organizations in the state.
- A description of the steps Louisiana is taking to develop and implement a comprehensive, statewide plan to prevent child maltreatment fatalities involving and engaging relevant public and private agency partners, including those in public health, law enforcement, and the courts.

17. **Plans of Safe Care:** This statewide process consists of a comprehensive assessment of the safety and risk of the substance or alcohol exposed newborn and any other children in the home by the Child Protective Services staff and is aligned with the Child Welfare Assessment Decision Making (CWADM) model. The comprehensive assessment is designed to promote best practice in the area of engagement and assessment at initial contact to ensure adequate services and supports are identified to enhance parenting capacity. Whenever there are supports to the mother and/or treatment services available, the newborn may be discharged to his mother's care with a plan of safe care including necessary services and careful monitoring of the child's safety. Services such as home health, Family Services, substance abuse treatment and assistance from a spouse/partner or family member may provide sufficient safety for the newborn to remain with his family. When the safety assessment decision for the newborn is, safe or unsafe, but with an in-home safety plan appearing sufficient to assure the safety of the newborn, the requirement for a plan of safe care is met and out of home placement is not required. Medical services to meet the child's needs are determined by the child's physician. The newborn must be

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

referred to an early intervention program and other services recommended by the child's physician. When the safety decision for the newborn is unsafe and an in-home safety plan cannot control the safety threats, staff are expected to seek court action to assure the child's safety. Whenever the newborn remains in the home, the CWADM model guides the CPS worker in determining the necessary services for the family (e.g. Family Services, Court Ordered Safety Plan or Foster Care). When ongoing service needs are identified during the assessment process, the worker is expected to refer the family to community and/or DCFS services that may be available to meet the needs of the child and family.

**Plans of Safe Care FFY 2021:** The Department continues to monitor plans of safe care via Regional Quarterly Stakeholder Teams of multidisciplinary professionals to address the availability and delivery of the appropriate services for substance exposed newborns and affected caregivers and families. On a case specific level, all accepted cases continue to be monitored on a supervisor level to ensure that a plan of safe care was developed, appropriate referrals were made, and that there was follow up on those referrals. ACCESS 2.0 continued to gather the below data, which CARA requires:

- Captures data regarding notifications to CPS of newborns who exhibit symptoms of withdrawal or other observable and harmful effects in the newborn's appearance or functioning a physician believes is due to the use of a controlled dangerous substance in a lawfully prescribed manner by the mother during pregnancy. It captures if a plan of safe care was developed and referrals made to ensure the needs of the family are met upon discharge from the hospital.
- Captures data of whether or not a plan of safe care was developed and monitored in reports, including services/referrals for the affected family or caregiver. This data is sent to our TIPS system to allow for NCANDS reporting.

The in person substance abuse and co-occurring disorders curriculum through the Training Academy rolled out in June 2019. The training assisted staff in understanding the dynamics of substance abuse, the unique characteristics involving Opioid use, enhancing engagement skills that will result in better outcomes, and assisted staff in assessing safety/risk in substance using families. DCFS is currently collaborating with the Office of Public Health and Office of Behavioral Health to share grant resources to convert this training to a virtual format. DCFS is planning virtual trainings on substance-exposed newborns and medication assisted treatment. The recorded trainings will be available on the Louisiana Child Welfare Training Academy website for staff and community partners

**Plans of Safe Care Activities Planned 2022:** Regional Stakeholder meetings will continue to be held to address needs specific to substance-exposed newborns and their families. The meetings will include multidisciplinary professionals to address the availability and delivery of the services to infants exposed to substances as it relates to medical, developmental, and other special needs due to perinatal drug use. Agency policy outlines specific tasks to be completed by the assigned caseworker of substance-exposed newborns, assuring a plan of safe care is developed and client specific referrals are made with caseworker follow up. The agency is currently developing a new CCWIS system and this system will gather the required data that is needed for CARA.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

18. **Citizen Review Panels** – Louisiana has three (3) Citizen Review Panels (CRP) located in the North, South and Southwest areas of the state. The Beauregard Region CRP is parish based and located in the southeastern quadrant of the state assigned as part of the Lake Charles Region. The Monroe CRP is regional based and located in the north quadrant of the state. The remaining panel is based in the region of Lafayette located in the south quadrant of the state. The Monroe Region and the Lafayette Region consist of multiple parishes in these two regions that participate in their respective CRP.

CRP convene with the goal of providing an opportunity for citizens to commit, promote and create positive change for the overall well-being and safety of children. The CRP meet a minimum on a quarterly basis to review and to discuss specific policies and procedures as well as when applicable, review and discuss specific cases of both state and local agencies. And, the three CRP end the fiscal year by preparing an annual report.

During the last year, the three Citizen Review Panels (CRP) have reported the following:

**Lafayette Region Citizen Review Panel 2020:**

**Lafayette Region Panel Members:**

Joan Lasseigne, Foster Parent Partner, Extra Mile Resource Center

Grace Leblanc, Our Saviors Church-New Iberia

Shala Walls, Our Saviors Church-Broussard

Bonnie Bonin, 16<sup>th</sup> JDC CASA

Heather Duhon, Foster the Love Louisiana,

Father Randy Courville

Melissa Thompson, LCSW-BACS, Area Director Lafayette Region

Ryan Dodge, Performance Measures Consultant, DCFS-CW

Jessica Houghton, FC Caseworker, St. Martin CW

Melissa Vidrine, LCSW, CW Manager, DCFS-CW

Marlo Davis, MSW, RSW, CW Manager, DCFS-CW

Sandra Moore, FC/FS Supervisor, Iberia CW

**Withdrawal:** Corey Porter and Darlene French,

**Introduction:** The following events occurred as part of the Lafayette Region DCFS Citizen Review Panel.

Meetings – Tentatively scheduled on March 27, 2020 and was cancelled due to the pandemic.

The Citizens Review Panel did not meet in 2020 due to the pandemic. However, Lafayette Region maintained a working relationship with several panel members, which included partnerships with faith, based churches. As a result, continuation of Christmas gifts for foster children and children in FS cases via outdoor Christmas activities that were in compliance with COVID-19 guidelines.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Lafayette Region continued to utilize the **Quality Parenting Initiative (QPI)** to maintain a working relationship with stakeholders and community partners. A meeting with CASA Director, Heather Blanchard, and Foster the Love director, Heather Duhon, was held on January 8, 2020 in St. Landry Parish. Judge Duplantier convened meeting with TSU Representative, Cross Roads NOLA representative, Anna Palmer, attorneys, community partners regarding trauma informed practices, including, TBRI in the courts.

Lafayette Region assisted Lake Charles Region during the impact of Hurricane Delta. CPS staff around the region assisted Lake Charles by conducting investigations and providing services to ensure children and families were safe and services were provided. Neither natural disasters nor a worldwide pandemic can prevent Child Welfare Staff from preventing the safety of our citizens.

**Recommendations/Future Plans for Panel:**

- a. Meetings to be held virtually during the pandemic.
- b. Combine Citizen Review Panel with QPI Quarterly Meetings.

**Monroe Region Citizen Review Panel 2020:** The Monroe Region Citizen Review Panel continued to experience significant difficulty in maintaining the commitment of member involvement with the panel due to ongoing serious medical challenges, job reassignments and/or retirement and even death of two panel members. These unplanned changes presented extreme challenges in fulfilling the mission statement as mandated by the 1996 Child Abuse Prevention and Treatment Act. As a result, the Region IX Citizen Review Panel failed to meet the guidelines outlined in CAPTA.

The Monroe Region Citizen Review Panel was unsuccessful in facilitating and carrying out any meetings during the 2020 year and this was not all COVID related, although there were significant difficulties in coming together even virtually as there was no leader in place. During 2020, the panel and community was faced with the untimely death of the Panel Chairperson and this resulted in the absence of leadership as the Vice Chairperson, assumed another position that involved increased responsibilities and extensive travel across the state. Revitalization efforts are paramount at this time in an effort to stimulate renewed interest among the remaining panel members, assessment of their continued interest as well as the exploration of outreach efforts to garner the support of new community partners in revamping this endeavor. The DCFS liaison experienced illness that resulted in an extended period of absence from the office.

**Recruitment Efforts:** During the prior reporting period, in person and phone discussions were held with three current members of the panel regarding their ongoing interest in continuing to participate as stakeholders for this work. Mrs. Peggy Kirby indicated that she was unable to be as involved following the death of her spouse and her other Foster Parent duties to commit on an ongoing basis. Ella Nimmers did indicate her willingness to continue to be a part of the panel. Jacquiela McFarland expressed a desire to continue but was very aware of her declining health and the need for her to step down as the Chairperson of the panel. The liaison reached out to a retired former Office of Behavioral Health employee, Doris Broadnax, who asked to allow her to consider her ability to commit to the

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

panel and the work to be done. With these responses, it became quite evident that an ongoing and focused recruitment effort would be necessary to revitalize the panel.

**Members of the 2020 Monroe CRP:**

Jacquiela McFarland, Chair, the Wellspring Alliance for Families, Inc.-(Deceased 2020)  
Angie Thomas, Vice-Chair, Louisiana Methodist Children's Home-(*New Position*)  
Peggy Kirby, Advocacy Chair, LA Foster/Adoptive Parents Association, Fair Visions (following death of her spouse, did not feel she could commit)  
Patty Newman, OYD Regional Administrator-(*Retired*)  
Melody Karamanis, Louisiana Baptist Children's Home  
Ella Nimmers, Ex. Director Christopher Youth Center (formerly Our House for Teens)  
Keri Foust, CASA

**Beauregard Parish Citizen Review Panel 2020:**

**Beauregard Parish Citizen Review Panel Members:**

Chair- Tommy Edwards, CASA  
DFCS Liaison- Telisa Pooler, CWS 4  
DCFS Liaison- Patricia McClinton, CWS  
Carol Williams, Victim Assistant Coordinator – District Attorney Office  
Alba Dubois, Counselor, Grace Church  
Kim Haynes, Beauregard Parish School Board  
Annette Duplechin, Executive Director, BeauCARE  
Sgt. D. Coker, DeRidder Police Department  
Myrna Cooley, TASC Supervisor (Truancy)  
Eddie Joslin, Beauregard Parish School Board, Designee of Tim Cooley

The Citizen Review Panels (CRP) continues to meet in conjunction with the Beauregard Parish Child Advocacy Panel for quarterly meetings. During these meetings, CRP members provide updates to all members' present including the Children Advocacy Panel members.

**Introduction:** In July 2019, it was requested that the CRP be relocated to another parish going forward. The current chair was no longer able to chair the panel due to other duties. DCFS was working on several other initiatives that mirror the task that the CRP would be engaged in. As of March 2, 2020, the CRP has been reorganized to invite different members of the community to participate on the panel.

**Summary of the Panel's Yearly Activities/Projects/Accomplishments:** A meeting was held on March 2, 2020 to discuss the CRP panel continuing in Beauregard Parish. Patricia McClinton, Leslie Breaux, Carolyn Hall and Janella Simmons attended and the discussion was geared toward restructuring the CRP Group. Numerous phone contacts and emails were conducted during the month of March to invite community members to take part in the CRP panel.

On March 27, 2020, a phone conference was held to discuss the CRP and the goals of the CRP panel. The focus of the phone conference was to share information about the CRP

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

and recruit new panel members. The discussion focused on upcoming goals of the CRP such as recruitment of foster homes. During this meeting, commitment from new panel members was obtained. The CRP held additional meetings on April 27, 2020, May 29, 2020, June 26, 2020, July 31, 2020 and December 28, 2020.

The focus of the CRP this year was to recruit foster parents for the rural parishes. Three panel members volunteered to reach out to local churches to speak with them regarding fostering and share information on fostering. Ideas were shared regarding advertisement for recruitment such as newspaper, radio and flyers. In order for everyone to have the same information to share, the Home Development Supervisor sent a script to Mrs. Pooler and Mrs. Ashworth. Mrs. Pooler shared this script with the three panel members. Each of the panel members contacted numerous churches in the areas and spoke with them about recruitment for foster parents. However, due to COVID-19, the panel members could not go to the Churches and speak to the congregation face to face. As an alternative, Mrs. Ashworth created flyers with the “script” provided by the home development supervisor. Each flyer was printed on colored paper and mailed along with a letter to each of the Churches that were contacted. The flyers could be displayed on the Churches’ bulletin boards and shared with others. The CRP discussed radio participation in advertising.

The Home Development Supervisor was coordinating with CASA to participate in the local radio broadcasting to discuss foster parenting. The CRP members discussed DCFS home development creating a video regarding fostering and specifically foster parent recruitment. During the July meeting, the panel discussed how the Home Development worker and some others could create a video with one message regarding foster parent recruitment. This video could be shared with the local Churches, foster parent Facebook page, District Attorney’s page, and other community websites. However, Hurricane Laura and Hurricane Delta devastated our area in August and September and the video could not be produced. Our Lake Charles DCFS office had damages from the storms and the video could not be completed. It is the goal of the CRP to complete the video this year.

**Identified Trends/Findings/Concerns:**

- a. Recruitment of foster parents and volunteers in the parish remains to be a challenge.
- b. The lack of sufficient foster homes in the parish continues to place additional strain on DCFS staff, CASA Staff and volunteers assigned to the children. The additional time required to travel to conduct monthly visits remains an issue. Additional fiscal resources, manpower and logistical resources would make a significant impact on recruitment and retention of foster families.
- c. The requirement to place children outside of the Parish will continue to cause adverse effects on the children and their families.

**Recommendations:**

- a. CRP continue their efforts to increase Foster Parent recruitment for Rural Parishes.
- b. CRP continue to engage the Faith Based community, local leaders and Local organizations in rural communities to increase awareness of the need for additional Foster Homes.
- c. CRP continue to explore advertisement options such as radio and newspaper for foster parent recruitment.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**STATISTICAL AND SUPPORTING INFORMATION:**

**A. Annual State Data Report**

The number of children reported to DCFS as victims of child abuse and neglect, the number of reports substantiated, unsubstantiated and/or determined to be false; and, Of the number of children reported the number of children who received services during the reporting year.

For additional information, see the chart in the Centralized Intake section.

**B. Information on Child Protective Workforce:** Louisiana DCFS provides Child Welfare (CW) services for children and families of the state beginning from intake through adoption. Child Protective Services (CPS) staff is responsible for the assessment of safety and risk, the assessment of the child and parental protective capacity, and the service provision and/or referral in reports of abuse and neglect. In-home services and out-of-home services are provided to ensure the safety, permanency and well-being of children impacted by abuse/neglect. Staff members are generally assigned to a single parish as well as a single program, but in some instances staff have multi-parish assignments within a region and work in more than one program.

For child protective service personnel responsible for intake, screening, assessment and investigation of child abuse and neglect reports in the state, report available information or data on the following:

**a) Demographic Information of child protective service personnel**

Age of Employee	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
20-29	12%	13%			
30-39	26%	27%			
40-49	26%	25%			
50-59	24%	23%			
60-69	11%	10%			
70-79	2%	2%			

Race of Employee	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
African American	67.75%	68.32%			
White	31.28%	30.79%			
Asian	0.13%	0.13%			
Indian	0.19%	0.19%			
Declined to State	0.65%	0.75			

Gender of Employee	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Female	94%	94%			
Male	6%	6%			

**b) Caseload or workload requirements for Child Protective Service Workforce**

Factors that affect workload include staffing levels, caseload size, extended new worker training, reassignment of staff, higher expectations for performance and quality, Family Medical Leave, and overtime.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Staffing Levels: Every effort will be made to maintain current staffing levels for child welfare during the next five budget years.

- c) **Training - Extended New Worker Training:** The Department plans to continue the extended training and reduced caseloads for new workers for the first six months of employment. This is recognized as an important practice to assure that new workers are fully prepared for the challenging careers child welfare offers. Achieving the goal of improved retention of staff will significantly reduce the impact that extended new worker training has on the caseloads of experienced workers. DCFS CW staff expects the supervisory training to result in better preparation of new staff and reduce the high rate of turnover among staff with three or fewer years of experience. (For additional information on New Worker Training and supervisory training, please refer to the Staff Training Systemic Factor and Training Plan sections of this plan.)

Child Welfare caseload size: The caseloads for experienced and new works are shown on the chart below

Child Welfare Caseload Standards		
Program	Caseload Standard for Experienced Workers	Maximum Caseload for Workers with Less than Six Months Experience
CPI	10	7
Family Services	15	10
Foster Care	10	7
Adoptions	15	N/A*
Home Development	55	N/A*

\*DCFS requires experienced workers carry Adoption and Home Development Caseloads

The baseline for caseload size is the average caseload for each region and statewide in each of the major child welfare programs. The goal for caseload size is to achieve the caseload standards in all programs statewide. Retaining staff and rapid hiring to replace departed workers are expected to support caseload size standards. DCFS continued with the New Hire Screening and Selection process throughout the state with all new hires and Title IV-E stipend students being interviewed with the research based process. Quarterly Regional New Hire Screening and Selection conference calls were held and these conference calls were updated to zoom conference on January 28, 2021 with an additional quarterly call being held on April 29, 2021. Regional New Hire Screening and Selection meetings allow all regions throughout the state to report best practice experiences, concerns, vacancies, quarterly turnover, trends, and if there are any applicants in the hiring pool. Several trends reported throughout the quarterly regional calls consisted of concerns from staff surrounding low salaries and caseloads being too high and/or staff being overwhelmed.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

The tables below provide caseload standards for experienced workers in the child welfare program areas: Child Protective Services (CPS), Family Services (FS), Foster Care (FC) and Adoptions (AD) and Home Development (HD). The charts provide an average caseload per worker in each region and statewide during FFY 2020. The average caseload sizes for CPS, FC and AD were above the caseload standards. The average caseload sizes decrease in FS, FC, AD and HD during FFY 2020.

As indicated in the table below, CPS caseloads increased by 8% from baseline statewide. Statewide the average number of cases per worker was above the standard of 10 cases. CPS caseloads increased in Orleans, Baton Rouge, Thibodaux, Lafayette, Lake Charles and Alexandria Regions from FFY 2019. Caseloads declined from FFY 2019 in three regions (Covington, Shreveport and Monroe).

Child Protective Services Caseloads (Standard = 10)						
Region	Baseline	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Orleans	12.96	13.53	13.40			
Baton Rouge	13.21	11.41	11.58			
Covington	11.38	12.23	11.69			
Thibodaux	12.38	12.17	13.03			
Lafayette	9.58	10.56	10.72			
Lake Charles	11.31	12.39	12.93			
Alexandria	11.80	13.15	13.85			
Shreveport	10.53	12.49	12.44			
Monroe	9.56	10.92	10.42			
Statewide	11.41	12.37	<b>12.40</b>			

Family Service caseloads have decreased below the baseline in FFY 2020 by 8.6%. All regions were below the caseloads standards. FS caseloads in Orleans, Baton Rouge, Covington, Thibodaux, Lafayette, Lake Charles and Alexandria declined from the statewide baseline. FS caseloads are above the baseline in Shreveport and Monroe regions.

Family Services Caseloads (Standard = 15)						
Region	Baseline	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Orleans	17.14	10.35	10.30			
Baton Rouge	14.65	11.67	11.28			
Covington	13.86	12.92	10.98			
Thibodaux	13.34	12.34	10.33			
Lafayette	12.99	11.06	9.99			
Lake Charles	11.15	11.30	10.88			
Alexandria	16.24	12.48	13.31			
Shreveport	10.39	12.63	10.75			
Monroe	12.51	15.23	12.56			
Statewide	13.58	12.25	<b>11.17</b>			

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Statewide, FC caseloads remained above the caseload standard and remained higher than the baseline by 9.3%. FC caseloads decrease below the baseline in Orleans, Alexandria and Shreveport regions while Baton Rouge, Covington, Thibodaux, Lafayette, Lake Charles and Monroe regions experienced an increase above baseline.

Foster Care Caseloads (Standard = 10)						
Region	Baseline	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Orleans	11.36	13.40	10.62			
Baton Rouge	10.82	14.51	15.28			
Covington	11.36	13.99	11.56			
Thibodaux	10.50	15.97	12.61			
Lafayette	8.56	11.36	11.57			
Lake Charles	10.82	13.65	15.05			
Alexandria	13.38	12.98	11.73			
Shreveport	12.79	11.36	10.43			
Monroe	11.04	13.85	14.18			
Statewide	11.18	13.29	<b>12.23</b>			

Adoption caseloads declined from the baseline statewide by 6.5%. Average caseloads fell within the established standard caseload in one region, Orleans. Adoption caseloads decreased from the baseline in four regions, Lake Charles, Alexandria, Shreveport and Monroe Regions. Adoption caseloads exceeded the established caseload standard in Baton Rouge, Covington, Thibodaux and Monroe regions. The caseload standards in Lafayette, Lake Charles, Alexandria and Shreveport regions fell below the caseload standards.

Adoption Caseloads (Standard = 15)						
Region	Baseline	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Orleans	21.28	17.40	14.51			
Baton Rouge	16.26	16.44	17.00			
Covington	14.84	22.70	18.68			
Thibodaux	17.77	29.83	20.07			
Lafayette	11.43	19.40	13.26			
Lake Charles	18.72	13.11	13.65			
Alexandria	12.31	14.02	11.74			
Shreveport	18.48	11.63	13.46			
Monroe	22.45	27.17	21.46			
Statewide	17.06	19.63	<b>15.95</b>			

Home development caseloads declined from the baseline statewide in every region except Thibodaux. Average caseloads fell within the established standard in one region, Monroe. Four regions experienced an increase above baseline in FFY 2020, Lafayette, Thibodaux, Alexandria and Monroe. Orleans, Baton Rouge, Covington, Lake Charles, Shreveport experienced a decrease below baseline.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Home Development Caseloads (Standard = 55)						
Region	Baseline	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Orleans	77.8	39.57	43.14			
Baton Rouge	72.1	41.05	34.02			
Covington	64.6	66.97	58.09			
Thibodaux	42.2	59.15	66.02			
Lafayette	42.1	43.68	40.10			
Lake Charles	63.9	50.10	45.38			
Alexandria	49.7	57.18	51.13			
Shreveport	86.3	49.06	49.60			
Monroe	53.7	55.70	55.67			
Statewide	61.37	51.45	<b>49.15</b>			

- d) **Supervision:** Increasing the knowledge level of supervisors with limited supervisory experience is a priority of the Department (For additional information on supervisory training please refers to the Systemic Factor – Staff Training and the Training Plan portion of this plan.) The table below provides the average number of years of supervisory and management experience for Child Welfare supervisors and managers in each region.

Monroe Region has the most supervisors with over three years’ experience at 73.69%. State Office/Centralized supervisors has the highest percentage of supervisors with less than three years of experience with a percentage rate of 78.57%. All Managers in Baton Rouge and Lake Charles region have over three years’ experience. Thibodaux and Covington Region has the highest percentage of managers with less than three years of experience with 66.67%.

Supervisors with Three Years or Less Experience			
Region	Total CW Supervisors	Number of Supervisors Under Three Years’ Experience	Percentage of Supervisors Under Three Years’ Experience
Orleans	20	13	65.00%
Baton Rouge	14	6	42.85%
Covington	26	8	30.76%
Thibodaux	14	7	50.00%
Lafayette	26	10	38.46%
Lake Charles	14	5	35.71%
Alexandria	18	6	33.33%
Shreveport	21	10	47.61%
Monroe	19	5	26.31%
State Office	14	11	78.57%
<b>Statewide</b>	<b>186</b>	<b>81</b>	<b>43.54%</b>

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Managers with Three Years or Less Experience			
Region	Total CW Managers	Number of Managers Under Three Years' Experience	Percentage of Managers Under Three Years' Experience
Orleans	5	3	60.00%
Baton Rouge	4	0	00.00%
Covington	6	4	66.67%
Thibodaux	3	2	66.67%
Lafayette	6	2	33.33%
Lake Charles	4	0	00.00%
Alexandria	4	2	50.00%
Shreveport	4	1	25.00%
Monroe	4	2	50.00%
State Office	24	9	37.50%
<b>Statewide</b>	<b>64</b>	<b>29</b>	<b>64.47%</b>

d. **Supervisor and Manager Education:** The Child Welfare Training Academy conducted a study of the IV-E Stipend Program in Louisiana. The study included exploration of a plan to provide stipends for current DCFS employees to obtain a MSW. As a result of the study, DCFS is currently developing policy and procedure to resume this program. Meanwhile, a focus on hiring professional level social work staff with social work degrees has continued and DCFS has implemented an evidence-based screening and selection process for entry-level staff. These new screening and selection procedures and tools were implemented effective March 1, 2017. The Department continues to work with Louisiana's universities to attract and recruit students to participate in the IV-E stipend program.

In 2020, the State had an overall percentage of 40% of its managerial staff with a bachelor's in social work or a related field. Baton Rouge, Alexandria and Shreveport all have 50% of managers with a bachelor's in social work or a related field.

Statewide, 70.31% of the Managers possess a master's in social work or a related field. Additionally, Orleans Parish had 100% of their managerial staff who each have a Masters in Social Work, while all other regions held 50% or higher with the exception of Alexandria with 25%.

Child Welfare Supervisors with BSW or Related Field as of FFY 2020					
Region	# of CW Supervisors	# BSW	# Related Bachelor's	Total BSW or Related Bachelor's	% BSW or Related Bachelor's
Orleans	20	0	2	2	10.00%
Baton Rouge	14	5	1	6	42.86%
Covington	26	6	10	16	61.54%
Thibodaux	14	3	4	8	57.14%
Lafayette	26	1	14	15	57.69%
Lake Charles	14	1	6	7	50.00%
Alexandria	18	5	7	12	66.67%

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

<b>Child Welfare Supervisors with BSW or Related Field as of FFY 2020</b>					
<b>Region</b>	<b># of CW Supervisors</b>	<b># BSW</b>	<b># Related Bachelor's</b>	<b>Total BSW or Related Bachelor's</b>	<b>% BSW or Related Bachelor's</b>
Shreveport	21	2	5	7	33.33%
Monroe	19	5	7	11	57.89%
State Office	14	0	4	4	28.57%
<b>Statewide</b>	<b>186</b>	<b>28</b>	<b>60</b>	<b>88</b>	<b>47.31%</b>

<b>Child Welfare Supervisors with MSW or Related Field as of FFY 2020</b>					
<b>Region</b>	<b># of CW Supervisors</b>	<b># MSW</b>	<b># Related Master's</b>	<b>Total MSW or Related Master's</b>	<b>% MSW or Related Master's</b>
Orleans	20	14	0	14	70.00%
Baton Rouge	14	3	4	7	50.00%
Covington	26	7	1	8	30.77%
Thibodaux	14	5	2	7	50.00%
Lafayette	26	8	0	8	30.77%
Lake Charles	14	1	2	3	21.42%
Alexandria	18	4	0	4	22.22%
Shreveport	21	5	5	10	47.62%
Monroe	19	6	1	7	36.84%
State Office	14	9	1	10	71.43%
<b>Statewide</b>	<b>172</b>	<b>62</b>	<b>16</b>	<b>78</b>	<b>45.35%</b>

<b>Child Welfare Managers with Bachelor's Degree in Social Work or Related Field as FFY 2020</b>					
<b>Region</b>	<b># of CW Managers</b>	<b># BSW</b>	<b># Related Bachelors</b>	<b>Total BSW or Related Bachelor's</b>	<b>% BSW or Related Bachelor's</b>
Orleans	5	0	0	0	00.00%
Baton Rouge	4	1	1	2	50.00%
Covington	6	1	1	2	33.33%
Thibodaux	3	0	1	1	33.33%
Lafayette	6	1	1	2	33.33%
Lake Charles	4	0	1	1	25.00%
Alexandria	4	1	1	2	50.00%
Shreveport	4	2	0	2	50.00%
Monroe	4	0	1	1	25.00%
State Office	24	2	1	3	12.50%
<b>Statewide</b>	<b>64</b>	<b>8</b>	<b>8</b>	<b>16</b>	<b>40.00%</b>

<b>Child Welfare Managers with Master's Degree in Social Work or Related Field as of FFY 2020</b>					
<b>Region</b>	<b># of CW Managers</b>	<b># MSW</b>	<b># Related Master's</b>	<b>Total MSW or Related Master's</b>	<b>% MSW or Related Master's</b>
Orleans	5	5	0	5	100.00%
Baton Rouge	4	2	0	2	50.00%
Covington	6	2	2	4	66.67%
Thibodaux	3	2	0	2	66.67%
Lafayette	6	3	1	4	66.67%
Lake Charles	4	2	0	2	50.00%
Alexandria	4	1	0	1	25.00%
Shreveport	4	2	0	2	50.00%
Monroe	4	2	0	2	50.00%

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Child Welfare Managers with Master's Degree in Social Work or Related Field as of FFY 2020					
Region	# of CW Managers	# MSW	# Related Master's	Total MSW or Related Master's	% MSW or Related Master's
State Office	24	16	5	21	87.50%
Statewide	64	37	8	45	70.31%

- e. **Pay:** Per State Civil Service Rule 6.32 – In order to maintain market competitiveness, DCFS provides Market Adjustments for employees in active status six months prior to the disbursement date, except for those serving as classified When Actually Employed (WAE) employees. The Market Adjustments began in FFY 2017 and disbursements began in July 2018. The amount of base pay adjustments range from 2% to 4% and is tier based. Market adjustments were paid for FFY 2019 in July 2020 and are anticipated to be paid in July 2021 for FFY 2020.

The time for promotion from Child Welfare Specialist 1 and Child Welfare Specialist 2 position reduced from two years to one year. This change resulted in 7% pay increases for front line staff early in their careers. The third change made to resolve the pay issue was an increase in the number of Child Welfare Specialist 3 positions resulting in promotions and pay increases for staff who are promoted.

In order to help recruit and retain staff who possess a Master's Degree in Social Work or a related human services field, DCFS has been utilizing Civil Service approved Special Entrance Rates (SER) since February 2008. Civil Service approved these SERs in order to recruit and retain qualified, experienced child welfare staff. Further, justification must be provided when an applicant without a social work or related degree is hired or promoted when an applicant with such credentials has been passed over.

- f. **Staff Turnover:** A baseline for reducing staff turnover was established by averaging the turnover rate for each region and statewide for Calendar Years (CY) 2012 and 2013. The average turnover rates for those two years are reflected in the table below. The goal is to reduce the turnover rate by at least 5% in each region with a turnover rate greater than 20%, and by at least 3% in other regions.

In CY 2020, turnover Statewide decreased by 5.91% below the baseline. Orleans, Covington, Shreveport and Monroe regions exceed the baseline goals for CY 2020. DCFS continued with the New Hire Screening and Selection process throughout the state with all new hires and Title IV-E stipend students being interviewed with the research based process. Quarterly Regional New Hire Screening and Selection conference calls were held and these conference calls were updated to zoom conference on January 28, 2021 with an additional quarterly call being held on April 29, 2021. Regional New Hire Screening and Selection meetings allow all regions throughout the state to report best practice experiences, concerns, vacancies, quarterly turnover, trends, and if there are any applicants in the hiring pool. Several trends reported throughout the quarterly regional calls consisted of concerns from applicants regarding low starting salaries, concerns for being on call and the type of work were not good fits for many

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

and there were concerns regarding interacting with the public during COVID-19. Many vacancies were caused due to internal promotion; however, some vacancies were caused due to concerns of COVID-19 and interactions with the public, caseload, employment opportunities in other areas with higher salaries including but not limited to the Louisiana school board/system. Some vacancies were due to staff moving to different states and other vacancies were due to staff becoming pregnant and not wanting to interact with the public during their pregnancy. Within the last Quarterly Regional Screening and Selection meeting there was some discussion surrounding expanding the applicant search beyond the social work profession, looking more at the timeline of onboarding, getting computers more quickly for new hires, and getting new hires into training classes more quickly. DCFS has met with Louisiana Spirits to create a crisis support group to support self-care for staff. The department continues to build supports for staff and is looking into creating a new higher-level position that would increase pay for investigative staff. Moreover, there was discussion of having security ride with staff on call overnight to alleviate concerns for safety.

Region	Baseline	CY 2014	Change from Baseline	CY 2015	Change from Baseline	CY 2016	Change from Baseline	CY 2017	Change from Baseline	CY 2018	Change from Baseline
Orleans	28.92%	47.56%	18.64%	26.09%	-2.83%	15.93%	-12.99%	21.43%	-7.49%	14.42%	-14.5%
Baton Rouge	32.31%	46.00%	13.69%	33.80%	1.49%	50.65%	18.34%	31.88%	-0.43%	24.00%	-8.31%
Covington	22.21%	20.72%	-1.49%	19.74%	-2.47%	21.53%	-0.68%	10.71%	-11.5%	14.65%	-7.56%
Thibodaux	16.45%	14.29%	-2.16%	30.67%	14.22%	17.57%	1.12%	23.68%	7.23%	18.82%	2.37%
Lafayette	11.57%	26.47%	14.90%	15.07%	3.50%	8.33%	-3.24%	12.58%	1.01%	7.79%	-3.78%
Lake Charles	22.61%	28.30%	5.69%	33.75%	11.75%	22.22%	-0.39%	21.05%	-1.56%	14.47%	-8.14%
Alexandria	16.36%	35.38%	19.02%	21.88%	5.52%	18.75%	2.39%	7.87%	-8.49%	17.53%	1.17%
Shreveport	21.22%	25.30%	4.08%	25.83%	4.61%	27.59%	6.37%	11.71%	-9.51%	17.25%	-3.97%
Monroe	25.02%	27.94%	2.92%	33.66%	8.64%	36.54%	11.52%	18.28%	-6.74%	11.63%	-13.39%
Statewide	21.32%	29.55%	8.23%	25.31%	3.99%	22.89%	1.57%	16.54%	-4.78%	14.94%	-6.29%

Region	Baseline	CY 2019	Change from Baseline	CY 2020	Change from Baseline	CY 2021	Change from Baseline	CY 2022	Change from Baseline	CY 2023	Change from Baseline
Orleans	28.92%	24.55%	-4.37%	17.27%	-11.65%						
Baton Rouge	32.31%	24.71%	-7.60%	30.24%	-2.07%						
Covington	22.21%	15.03%	-7.18%	13.21%	-9.00%						
Thibodaux	16.45%	16.85%	0.40%	13.79%	-2.66%						
Lafayette	11.57%	7.42%	-4.15%	10.19%	-1.38%						
Lake Charles	22.61%	15.48%	-7.13%	21.43%	-1.18%						
Alexandria	16.36%	19.35%	2.99%	13.33%	-3.03%						
Shreveport	21.22%	12.71%	-8.51%	11.11%	-10.11%						
Monroe	25.02%	17.14%	-7.88%	15.00%	-10.02%						
Statewide	21.32%	16.28%	-5.07%	15.41%	-5.91%						

*Turnover by Length of Service:* Based on consistent history, approximately 50% of all turnovers occur within the first five years of employment.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

*Supervision and Management Turnover:* Much of the turnover of staff with more than ten years of experience is the result of retirements, and those retiring employees frequently leave supervisory and management positions. As a result, the level of experience at the supervisory and management level remains lower than desired. Some vacancies at this level were due to internal promotion, staff relocation and/or personal reasons.

**g. Education and Experience Requirements for Child Welfare Workers and Other Professionals Responsible for the Management of Cases and Child Welfare Staff**

As a Louisiana state agency, DCFS is required to follow the rules set forth by the Department of Civil Service in accordance with Article X, Section 7 of the Louisiana Constitution. Employment practices are to be based on “merit, efficiency, fitness and length of service”. As required, the Department posts vacant positions to the Civil Service LA Careers on-line system, interested individuals apply, and, from these applications, a certificate of eligible candidates that meet the qualification requirements for the job is developed and provided to hiring managers. At times throughout the year, preference is given to hiring Title IV-E stipend students into Child Welfare Specialist jobs upon graduation to gain the benefit of their interest in child welfare and their child-welfare specific social work education, along with encouraging their long-term careers in child welfare.

**Social Services Analyst** positions are used in IV-E Eligibility Determination Units:

Social Services Analyst 1 (SS410)

- Bachelor’s degree
- Six years of full-time work experience in any field may be substituted for the required bachelor’s degree.
- Candidates without a bachelor’s degree may combine work experience and college credit to substitute for the bachelor’s degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience.
- A bachelor of social work degree will substitute for the one year required experience.
- A master's degree in social work, psychology, sociology, counseling or education will substitute for the one year of required experience.

Social Services Analyst 2 (SS411)

- Bachelor’s degree plus one year professional social services experience
- Six years of full-time work experience in any field may be substituted for the required bachelor’s degree.
- Candidates without a bachelor’s degree may combine work experience and college credit to substitute for the bachelor’s degree as follows:
  - 30-59 semester hours for one year of experience

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- 60-89 semester hours for two years of experience
- 90-119 semester hours for three years of experience
- 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience.
- A bachelor of social work degree will substitute for the one year required experience.
- A master's degree in social work, psychology, sociology, counseling or education will substitute for the one year of required experience.

**Social Services Analyst 3 (SS413)**

- Bachelor's degree plus two years of professional social services experience
- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience.
- A bachelor of social work degree will substitute for the one year required experience.
- A master's degree in social work, psychology, sociology, counseling or education will substitute for the one year of required experience.

**Social Services Counselor Positions are used in the Adoption Petitions Program.**

**Social Service Counselor 1 (SS410)**

- Bachelor's degree
- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience

**Social Service Counselor 2 (SS411)**

- Bachelor's degree plus one year professional social services experience
- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- 90-119 semester hours for three years of experience
- 120 or more semester hours for four years of experience
- Bachelor's degree in social work, sociology, psychology, behavioral science or human service counseling from an accredited institution will substitute for all of the required experience.
- Graduate training in social work, sociology, psychology, or human service counseling will substitute for the one year of required experience based on thirty semester hours for one year of experience.

**Child Welfare Specialist** positions are used in front-line service for Child Protective Services, Family Services, Foster Care, Adoptions and Home Development Programs:

**Child Welfare Specialist Trainee (SS411)**

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus one year of professional social services experience.
- Bachelor's degree in a non-related field plus one year of professional social services worker's degree in unrelated field.
- Master's degree in a non-related field.

**Child Welfare Specialist 1 (SS412)**

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus one year of professional social services experience.
- Bachelor's degree in a non-related field plus two years of professional social services experience.
- Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services.
- Master's degree in a non-related field plus one year of professional social services experience.

**Child Welfare Specialist 2 (SS414)**

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus two years of professional level experience in social services, one year of which must have been in child welfare.
- Bachelor's degree in a non-related field plus three years of professional level experience in social services, one year of which must have been in child welfare.
  - Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus one year of professional child welfare social services experience.
  - Master's degree in a non-related field plus two years of professional level experience in social services, one year of which must have been in child welfare.

**Child Welfare Specialist 3 (SS415)**

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus three years of professional level experience in social services, two years of which must have been in child welfare.
- Bachelor's degree in a non-related field plus four years of professional level experience in social services, two years of which must have been in child welfare.
- Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus two years of professional child welfare social services experience.
- Master's degree in a non-related field plus three years of professional level experience in social services, two years of which must have been in child welfare.

**Child Welfare Supervisor (SS417):** Provides services in child-welfare program areas administered by the Department of Children and Family Services by supervising a unit of professional child welfare staff.

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus four years of professional social services experience, three years of which must have been in child welfare.
- Bachelor's degree in a non-related field plus five years of professional social services experience, three years of which must have been in child welfare.
  - Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus three years of professional child welfare social services experience.
  - Master's degree in a non-related field plus four years of professional social services experience, three years of which must have been in child welfare.

**Child Welfare Consultant (SS418):** Provide consultation and program guidance to managers and other child welfare staff.

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus four years of professional social services experience, three years of which must have been in child welfare.
- Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus three years of professional child welfare social services experience.

**Child Welfare Manager 1 (SS420):** Manage a state office unit responsible for the administration of child welfare programs, or several special programmatic support functions, or the contracts and federal eligibility function for the agency.

- Bachelor's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- counseling; social services counseling; vocational rehabilitation; or human services plus five years of professional level experience in social services, four years of which must have been in child welfare.
- Bachelor's degree in a non-related field plus six years of professional social services experience, four years of which must have been in child welfare.
  - Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus four years of professional child welfare social services experience.
  - Master's degree in a non-related field plus five years of professional level experience in social services, four years of which must have been in child welfare.

**DCFS Area Director (SS421):** Direct social service operation activities for a region as defined by the Department of Children and Family Services.

- Bachelor's degree plus six years' professional level social services experience, including three years at the supervisory level in Child Welfare programs.
  - Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
    - 30-59 semester hours for one year of experience
    - 60-89 semester hours for two years of experience
    - 90-119 semester hours for three years of experience
    - 120 or more semester hours for four years of experience
  - Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the general experience based on thirty semester hours for one year of experience: counseling; social work; psychology; economics; business, public, or health administration.
  - Master's degree in the above fields will substitute for one year of the required general experience.
  - Juris Doctorate will substitute for one year of the required general experience.
  - Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required general experience.
  - Ph.D. in the above fields will substitute for two years of the required general experience.
  - Graduate training and degrees will substitute for a maximum of two years of the required general experience.

**DCFS Regional Administrator (SS 423):** Serve as administrator over social service field activities for multiple regions as defined by the Department of Children and Family Services.

- Bachelor's degree plus seven years professional level social services experience, four years of which must have been at the supervisory level in Child Welfare program.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Candidates without a bachelor’s degree may combine work experience and college credit to substitute for the bachelor’s degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the general experience based on thirty semester hours for one year of experience: counseling; social work; psychology; economics; business, public, or health administration.
- Master’s degree in the above fields will substitute for one year of the required general experience.
- Juris Doctorate will substitute for one year of the required general experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required general experience.
- Ph.D. in social work or a related field will substitute for two years of the required general experience.

**Child Welfare Manager 2 (SS422):** Administer complex child welfare statewide program(s) and/or direct statewide functions and practices.

- Bachelor’s degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus five years of professional level experience in social services, four years of which must have been in child welfare.
- Bachelor’s degree in a non-related field plus six years of professional social services experience, four years of which must have been in child welfare.
- Master's degree in social work; psychology; psychiatric nursing; psychiatry; mental health counseling; rehabilitation counseling; psychological counseling; criminal justice; sociology; applied sociology; human services counseling; education with a concentration in special education; family and consumer sciences with a concentration in child, family and social services; guidance and counseling; human development counseling; social services counseling; vocational rehabilitation; or human services plus four years of professional child welfare social services experience.
- Master's degree in a non-related field plus five years of professional level experience in social services, four years of which must have been in child welfare.

**Classified Administrative Services Positions that Support Child Welfare:**

**Program Specialist-Social Services (SS414):** Provide professional support services for social service programs.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Bachelor's degree plus two years of professional level experience in administrative services, economics, public health, public relations, social services, or health services.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the experience based on thirty semester hours for one year of experience: public health; counseling; social work; psychology; rehabilitation services; economics; and business, public, or health administration.
- Master's degree in the above fields will substitute for one year of the required experience.
- Juris Doctorate will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in the above fields will substitute for the two years of required experience.

**Executive Staff Officer (AS616):** Serve as a confidential assistant to an Assistant Secretary or equivalent level administrator.

- Bachelor's degree plus three years of professional level experience in a public or private sector setting.
- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience based on thirty semester hours for one year of experience.
- Master's degree in any field will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in any field will substitute for two years of required experience.

**Program Consultant – Social Services (SS417):** Provide advanced professional level support services for social service programs.

- Bachelor's degree plus three years of professional level experience in administrative services, economics, public health, public relations, social services or health services.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience based on thirty semester hours for one year of experience.
- Master's degree in any field will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in any field will substitute for two years of required experience.

**Program Manager 1 – Social Services (SS419):** Manage statewide social service programs that have a lesser degree of impact and complexity.

- Bachelor's degree plus four years professional experience in administrative services; day care center administration; economics; public health; public relations; family life education; early childhood development regulatory experience; the monitoring of health care or social care facilities for licensing compliance; teaching in an early childhood development program or teaching at the elementary or secondary level; social services; or health services.
- Six years of full time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience: public health; public relations; counseling; social work; psychology; rehabilitation services; economics; business, public, or health administration.
- Juris Doctorate will substitute for two years of required experience.
- Master's degree in the above fields will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in the above fields will substitute for two years of the required experience.
- Specialized degrees will substitute for a maximum of two years of the required experience.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Qualifications for the Program Manager 2** – Social Services (SS421), Program Manager 3 – Social Services (SS422), Program Manager 4 – Social Services (SS423) are the same as the Program Manager 1 except that five years of professional experience are required.

Attorney 2 (AS618)

- Possession of a license to practice law in the state of Louisiana plus two years of experience as a practicing attorney

Attorney 3 (AS620)

- Possession of a license to practice law in the state of Louisiana, plus three years of experience as a practicing attorney

Attorney Supervisor (AS622)

- Possession of a license to practice law in the state of Louisiana, plus four years of experience as a practicing attorney

Attorney-Deputy General Counsel 1 (AS 623)

- Possession of a license to practice law in Louisiana, plus five years of experience as a practicing attorney

Attorney-Deputy General Counsel 2 (AS 624)

- Possession of a license to practice law in Louisiana, plus five years of experience as a practicing attorney

**Executive Management Advisor (AS623):** Serve as the special assistant and advisor to a Secretary; performs a wide variety of complex and diverse management duties.

- Bachelor's degree plus five years' professional level experience in a public or private sector setting.
- Six years of full-time work experience in any field may be substituted for the required bachelor's degree.
- Candidates without a bachelor's degree may combine work experience and college credit to substitute for the bachelor's degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training in any field will substitute for a maximum of one year of the required experience based on thirty semester hours for one year of experience.
- Master's degree in any field will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.  
Ph.D. in any field will substitute for two years of required experience.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

**Program Manager 4 – Social Services (SS423):** Administer the largest and most complex social service program(s) or programmatic support activities.

- Bachelor’s degree plus five years of professional experience in administrative services, economics, public health, public relations, program evaluation, social services, or health services.
- Six years of full time work experience in any field may be substituted for the required bachelor’s degree.
- Candidates without a bachelor’s degree may combine work experience and college credit to substitute for the bachelor’s degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience: public health; public relations; counseling; social work; psychology; rehabilitation services; economics; business, public, or health administration.
- Juris Doctorate will substitute for two years of required experience.
- Master’s degree in the above fields will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in the above fields will substitute for two years of the required experience.
- Specialized degrees will substitute for a maximum of two years of the required experience.

**Deputy Assistant Secretary 3 (AS 626):** Direct the programs for a state office having either: over three thousand employees or (2) a state office having the most technical programs; and to serve as principal assistant to the Assistant Secretary.

- Bachelor’s degree plus five years of professional level experience in a public or private sector setting.
- Six years of full time work experience in any field may be substituted for the required bachelor’s degree.
- Candidates without a bachelor’s degree may combine work experience and college credit to substitute for the bachelor’s degree as follows:
  - 30-59 semester hours for one year of experience
  - 60-89 semester hours for two years of experience
  - 90-119 semester hours for three years of experience
  - 120 or more semester hours for four years of experience
- Graduate training with eighteen semester hours in one or any combination of the following fields will substitute for a maximum of one year of the required experience on the basis of thirty semester hours for one year of experience: public health; public relations; counseling; social work; psychology; rehabilitation services; economics; business, public, or health administration.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- Juris Doctorate will substitute for two years of required experience.
- Master’s degree in the above fields will substitute for one year of the required experience.
- Graduate training with less than a Ph.D. will substitute for a maximum of one year of the required experience.
- Ph.D. in the above fields will substitute for two years of the required experience.
- **Unclassified Positions**
  - Assistant Secretary of Child Welfare
    - Unclassified Position – No minimum qualifications
  - Assistant Secretary of Family Support
    - Unclassified Position – No minimum qualifications
  - General Counsel
    - Unclassified Position – No minimum qualifications
  - Deputy Secretary
    - Unclassified Position – No minimum qualifications
  - Undersecretary
    - Unclassified Position – No minimum qualifications
  - Secretary
    - Unclassified Position – No minimum qualifications

**Juvenile Justice Transfers:** Data shows children who were in the care (custody) of the DCFS and were transferred to the supervision (custody) of the state Office of Juvenile Justice (OJJ). Context information about the source of this information and how the reporting population is defined is provided below.

Regional Analysis of Children Transferred from DCFS to OJJ:					
Region of Child’s Domicile	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
No Court Identified	0	0			
Orleans/Jefferson	0	1			
Baton Rouge	1	2			
Covington	0	0			
Thibodaux	0	0			
Lafayette	3	1			
Lake Charles	1	0			
Alexandria	0	0			
Shreveport	0	0			
Monroe	1	0			
<b>TOTAL</b>	<b>6</b>	<b>4</b>			

*Data extracted from WebFocus Developer Studio. Contextual Information: The provide data reflect DCFS database information on children who changed custody statewide in a specified federal fiscal year. The data is on children whose case was opened in the state’s foster care system and who had their custody transferred to the Department of Corrections (DOC). DOC has responsibility for children adjudicated to the OJJ, the state’s juvenile justice system. The information presented above was obtained through a DCFS Web-focus Report.*

**ADDITIONAL REQUIREMENTS [Section 106 (b) (2) (D)]:** The department assures policies and procedures regarding the requirements listed below are in place and can be viewed by using the PowerDMS link <https://powerdms.com/docs/404926>. The PowerDMS system was initiated in July 2018 and is accessible to active users in the DCFS directory.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

Public documents in PowerDMS can be viewed by using the DCFS public facing portal. It is located on the DCFS webpage at [www.dcfslouisiana.gov](http://www.dcfslouisiana.gov) and can be accessed under the **About Us/Policy Management** tab.

**SUBSTANTIVE CHANGES IN STATE LAW:** Louisiana state law is fully compliant with all federal legislation related to HT. CARA legislation passed the 2017 legislative session. Linda Haley is the CARA lead for the state of Louisiana. Ms. Haley may be reached via email at [linda.haley.dcfslouisiana.gov](mailto:linda.haley.dcfslouisiana.gov) or by phone at (225) 342-8637. Robbie Montgomery is the State Office CARA lead regarding Family Services. Ms. Montgomery may be reached via email at [robbie.montgomery.dcfslouisiana.gov](mailto:robbie.montgomery.dcfslouisiana.gov) or by phone at (318) 676-7256. There are no other substantive changes in Louisiana state law affecting eligibility for CAPTA funds.

**STATE CAPTA COORDINATOR/STATE LIAISON OFFICER:** Ms. Lori Miller serves as the state's liaison officer. She can be reached by e-mail at [lori.miller.dcfslouisiana.gov](mailto:lori.miller.dcfslouisiana.gov) or by phone at (225)342-9928 or by U.S. post addressed attention to Ms. Miller, Department of Children and Family Services, P.O. Box 3318, Baton Rouge, LA 70821. Ms. Miller's contact information is posted on the DCFS home page under Child Welfare, Plans and Reports.

**SUPPLEMENTAL CAPTA FUNDING (AMERICAN RESCUE PLAN ACT- ARPA)**

The Department is currently researching programs to assist with plans of safe care and plans to implement a new program to assist with strengthening and supporting families with substance abuse issues.

The Department is partnering with the Louisiana Alliance of Children's Advocacy Centers (LACAC) to provide funding to the LACAC to carry out services including:

1. Conduct neutral, fact finding forensic interviews of children following allegations of abuse, neglect, human trafficking and witnessing violent crime.
2. Provide trauma-focused therapy for child victims of abuse and their non-offending caregivers to foster treatment, healing and resiliency.
3. Provide family advocacy for child victims of abuse and their non-offending caregivers to ensure they are equipped with coping skills, information, treatment, and resources throughout the investigative and judicial process.
4. Conduct prevention activities including: training/education on identification, reporting, and response to child abuse for adults and community members; and prevention programs for children focused on healthy relationships, body safety, internet safety, and empowerment.
5. Facilitate investigative multi-disciplinary teams in accordance with the Louisiana Children's Code (Art. 507 et. al.) to reduce trauma for families, increase efficiency across agencies, and improve prosecution outcomes.
6. Conduct forensic medical exams that will provide evidence for investigations, address any medical issues, and offer reassurance for children about their wellbeing.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

7. Provide statewide training and technical assistance to improve the quality and accessibility of CAC services across Louisiana.

**SECTION 8. COVID – 19 PANDEMIC STATE RESPONSE:**

**COVID-19 PLAN UPDATE:**

Memorandums released providing staff practice guidance during COVID-19:

- CW Memorandum 20-007 Staff Protocol for Client/Stakeholder Contact, Part 1
- CW Memorandum 20-008 COVID-19 Case Contacts – Additional Guidance and ICPC
- CW Memorandum 20-009 COVID-19 Services for Families and Children
- CW Memorandum 20-010 Staff Protocol for Client/Stakeholder Contact, Part 2
- CW Memorandum 20-011 Rewards and Recognition
- DCFS Departmental Memo 2020-07 COVID-19 Pandemic/Procedures for Vehicles
- 21-001 COVID-19 Update

**Case Contact Requirements:** For all in-person contacts, continue to use the COVID-19 screening questions prior to each contact, and if any questions are answered yes, staff should contact their managers for consultation on proceeding with case contacts. Take extra precaution such as social distancing, frequent handwashing, using indicated personal protective equipment, and following CDC recommendations when having contact with others. <https://www.cdc.gov/infectioncontrol/pdf/contact-precautions-sign-P.pdf>

Safety of our children is paramount, it is especially critical during this time to work in partnership with our service providers and collaterals to assist with information gathering, assessments, and service provision. With less mandatory reporters having eyes on our children, extra diligence is needed in all cases with talking to neighbors, doctors, landlords, and others who have daily contact with families.

- A. **Centralized Intake** – There have been no changes in practice in Centralized Intake due to COVID-19 Pandemic. (For more information see Child and Family Services Continuum Section)
- B. **Child Protective Services** – Child Protective Services ensures that all intakes accepted for investigation are reviewed prior to assigning and submit any requests to Centralized Intake where the intake decision needs to be reviewed. As per policy, the reporter is to be contacted. If the reporter reveals that the client has been exposed to COVID-19, the worker should consult with their supervisor/manager to discuss an investigation plan, and then the COVID-19 CPS/FS/EFC Practice Support Team prior to going to the home.

Upon arrival at the home, workers are to maintain social distancing, and complete the screening questions for all household members prior to entering the home. If the answer is no to all screening questions, the worker may enter the home to conduct the investigation

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

as per normal protocol. If there is a “yes” response to any of the screening questions, the worker is to, call the Supervisor/Manager to determine how to proceed with investigation contacts. State Office Program Managers and Consultants are available for consultation as needed.

Contact Requirements: Complete COVID-19 Screening Protocol prior to entering home. If yes to any protocol question, consult Supervisor immediately to assess safety and further direction to ensure the safety and well-being of children. This should not prevent other investigative activities.

- C. **PSRT and Appeals**- Currently there are still case staffings, but they are being held via telephone. The PSRT Manager and staff have been assessing each case to determine if the hearing can be heard by telephone. If it is determined, a hearing cannot be held via telephone, PSRT will try to postpone those cases so that individuals will not have to go in the office. Due to the large numbers of closures of backlog cases in CPS, there are a large number of appeals being requested. An update will be forwarded regarding how that will be addressed. PSRT is continuing to work on clarification regarding what to do with “walk in” clearances (when a client walks into the office). (For more information please see the Child and Family Service Continuum Section of the plan)
- D. **Family Service** – For cases with a safety plan, or when there is at least one child under the age of three, there is to be at least two in-person visits per month. Maintain additional required SDM visitation with all household members via visual communication (Zoom, FaceTime, Skype, or other video conferencing technology) and/or verbal communication.

In all other cases, the worker should hold at least one monthly in-person visit with all household members, and maintain additional required visual communication and/or verbal communication according to the SDM level

Parish Managers should assess designated areas where Family Team Meetings are held and determine the maximum number of participants for a FTM in the office, considering social distancing requirements. All FTM’s should resume, preferably in person or via virtual communication. If this is not possible, consult the Supervisor or Manager to explore options.

For FS cases with in-person court hearings, the current COVID-19 protocols for each court will be followed. If in-person court hearings are held, contact the parent/caretakers prior to the hearing to conduct the COVID-19 screening. Depending on the outcome of the screening, work with the court to explore virtual hearings.

**Contact Requirements:** For cases with a safety plan, or when there is at least one child under the age of three, there is to be at least two in-person visits per month. In all other cases, the worker should hold at least one monthly in-person visit all household members, and maintain additional required visual communication and/or verbal communication according to the SDM risk level.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

- E. **Foster Care / Adoption Services Update 2020** - Video conferencing has been incorporated regarding monthly visitation due to challenges surrounding COVID-19. DCFS purchased and received 197 cell phones/tablets to help facilitate video conferencing.

Guidance related to Foster Care and Adoptions (Including ICPC cases of children placed in Louisiana and out-of-state): In lieu of in-person monthly worker visits with foster children and caregivers, workers are to have Skype/FaceTime or other video conferencing visits with each child and caregiver individually. Workers are to indicate that this is a Face-to-Face Visit in FATS, and document in the narrative that the visit occurred via video conferencing. During this difficult time for our children and families, weekly phone contact should be made with all families, utilizing available support staff to meet this need. The purpose of this weekly contact is to provide as much support and reassurance to our families as possible. During visits, ensure that a discussion is held on the impact COVID-19 is having on their lives and any hardships experienced. If a child placed in Louisiana is assessed as unsafe, or the placement is at risk of disruption, an in person visit is to be held. When conducting home visits, contact the foster caregiver and conduct a pre-screening of COVID-19 using the below screening protocol. If any answers to the three screening questions are yes, consultation occurs with the COVID-19 Foster Care, Home Development, and/or Adoption Practice Support Team to determine next steps related to case contact.

Worker visits with parents are to be held via visual communication, where possible, or through verbal communication individually with all parents. Discussion should include a review of the case plan, progress, and troubleshooting any barriers discussed in achieving case plan goals due to COVID-19. In-person visits with the Service to Parents (SP) are required when there is a safety plan in place, or any safety concerns, for non-custody children. In this situation, workers will contact parents, and conduct a COVID-19 screening for all household members. Cases where any of the three COVID-19 screening questions are answered yes shall be referred to the COVID-19 Foster Care, Home Development, and/or Adoption Practice Support Team to determine next steps related to case contact.

Family Visits: All workers are to review case plans for any court-ordered visits to occur prior to April 30, 2020. Depending on the court's position on court ordered visitation, if all parties are agreeable (parent, foster parent, child), hold visits via FaceTime/Skype, and/or postpone the visit. In the event that a parent is not agreeable to modifying the visitation, the screening protocol is to be used to screen participants prior to visiting. Should any participant fail the prescreening, the presiding Judge is to be approached for approval to cancel in-person visits and hold via FaceTime, Skype or phone call or to postpone. Visits are not to be held in DCFS offices and "social distancing" protocol is to be followed. In absence of visitation, QPI practices are strongly encouraged. Regular phone contact between Parent, Child, Caregivers, and Siblings is strongly encouraged.

Court Hearings: Each court jurisdiction has established a protocol regarding court hearings. For all hearings that remain scheduled, the caseworker and/or supervisor is expected to be present unless the court has arranged the use of audio and/or video conferencing. Conduct a pre-screening on all client participants, and if any screening questions are answered yes,

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

consult with Bureau of General Counsel (BGC) about requesting a continuance. In hearings that are required, the child's attorney should be contacted in order to waive the child's presence at the court hearing, if possible.

Family Team Meetings (FTM): FTM's are to be held via visual communication, where possible, or through verbal communication. If a conference line is needed, one can be obtained free of charge through [www.freeconferencecall.com](http://www.freeconferencecall.com). For FTM's occurring via phone, an in person FTM is required within 60 days or prior to the next court hearing. Manager participation in initial Family Team Meetings is required; the completion of FTM review instruments are not required.

Adoption Petition staff are to determine if any office or home visits are required prior to April 30, 2020 in order to submit the confidential court report timely. Adoption Petition staff are to consider if phone contacts can be made for intra-family adoptions. If any visit is required prior to April 30, 2020, conduct a COVID-19 pre-screen verbally on all family members who will be present for the required visit. If any of the three screening questions are answered yes, the Adoption Petition Worker is to consult with the Bureau of General Counsel (BGC) and request that the hearing be postponed.

Wendy's Wonderful Kids' Recruiters are to conduct all visits via phone, Skype, FaceTime or other means available via technology.

- F. **EFC COVID Update 2020:** Face to face, visits started back in the fall of 2020. Visits occur monthly unless the young adult is enrolled in LifeSet and these visits occur weekly. In December 2020, the Federal Government passed a bill stating that young adults do not have to exit Foster Care based on age alone. Now young adults may continue receiving services until the age of 21 if services are still needed. Due to COVID Lifeset trainings and clinical consultations are now predominately completed online/virtually.
- G. **HD COVID Update 2020:** In early January 2021, additional guidelines were set forth due to an increase in COVID cases. Waivers were granted to allow re-certification and some certification visits to be conducted virtually as noted below:

For re-certifications due through January 31, 2021, a waiver has been granted to allow the in-home interview and completion of the HDU-5 Checklist for Environmental, Health, and Fire Safety to be completed through virtual technology. In-home visits of those homes, including a review of the HDU-5, must be completed by the Home Development worker no later than April 15, 2021.

For child-specific certifications with children in DCFS custody living in the home a waiver has been granted to allow two of the three required in-person home visits to be completed using virtual technology if the following criteria has been met: an in-home visit including the HDU-5 Checklist for Environmental, Health, and Fire Safety must have been completed and all criminal and SCR clearances must have been completed to certify the home. An in-person support visit in the home for all child-specific homes certified per waiver guidelines must be completed by April 15, 2021.

STATE OF LOUISIANA  
2022 Annual Progress and Service Report

For regular foster home certifications willing to provide placement types whereby regions are currently experiencing significant shortages, a waiver has been granted through January 31, 2021, to allow one of the three required in-person visits to be completed using virtual technology. Two in-home visits, one of which included the HDU-5 Checklist for Environmental, Health, and Fire Safety, and all criminal and SCR clearances must have been completed to certify the home.

For all other pending certifications that cannot be completed per waiver guidelines, please note in the case record the certification delay is due to the COVID-19 crisis.

Support visits should be completed by phone/or virtual technology.

**Updated COVID Memorandums/Forms:**

21-04: COVID-19 Update

21-06: COVID-19 Update / Return to Work

21-07: COVID-19 Update: Wearing Mask and Social Distancing

21-001: COVID Update (COVID-19 resurge)

21-009: COVID-19 Update (Resume in-person contacts)

21-010: COVID-19 Vaccine (For foster children/youth)

COVID-19 Acknowledgement Form

COVID-19 Medical Certification/Accommodation Form