Child and Family Service Plan

2020 - 2024

Tennessee Department of Children’s Services | Submitted: June 30, 2019
# Table of Contents

Collaboration and Vision ............................................................................................................. 4
State Agency Administering the Programs ................................................................................. 4
Collaboration .............................................................................................................................. 4
Vision Statement ......................................................................................................................... 5

Assessment of Current Performance in Improving Outcomes .................................................. 6
Child and Family Outcomes ........................................................................................................ 6
Safety Outcome 1 .......................................................................................................................... 6
Safety Outcome 2 .......................................................................................................................... 9
Permanency Outcome 1 ................................................................................................................ 11
Permanency Outcome 2 ................................................................................................................ 15
Well-Being Outcome 1 .................................................................................................................. 18
Well-Being Outcome 2 .................................................................................................................. 21
Well-Being Outcome 3 .................................................................................................................. 23

Systemic Factors ....................................................................................................................... 24
Information Systems ................................................................................................................... 24
Case Review Systems .................................................................................................................. 27
Quality Assurance Systems ......................................................................................................... 29
Staff Training ............................................................................................................................... 31
Service Array ............................................................................................................................... 35
Agency Responsiveness to the Community ............................................................................... 37
Foster and Adoptive Parent Licensing, Recruitment, and Retention ....................................... 39

Plan for Enacting the State’s Vision .......................................................................................... 41
Goals ........................................................................................................................................... 41
Objectives & Measures of Progress .......................................................................................... 42
Staff Training, Technical Assistance and Evaluation ................................................................. 48
Implementation Supports ............................................................................................................ 49
Services ....................................................................................................................................... 50
State Agency Administering the Programs

Tennessee's Department of Children's Services (DCS) is responsible for the administration of funding through Titles IV-B (Subparts 1 and 2) and IV-E programs, the Child Abuse Prevention and Treatment Act (CAPTA) and the Chafee Foster Care Independence Program. The Department provides services in twelve regions covering the 95 counties across the state. The population served by DCS includes the families of children in foster care and non-custodial children and youth in the community receiving various prevention, and intervention services. Children in foster care include those who have been determined to be dependent and neglected, as well as children adjudicated delinquent or unruly by the courts. Non-custodial populations include families served through Child Protective Services who receive services through one of three Multiple Response System (MRS) tracks including Investigations, Assessments, or Resource Linkage. Ongoing services to families are also provided through Family Support Services and Family Crisis Intervention. Through the Extension of Foster Care Program, DCS serves youth who have reached the age of majority, have exited care and remain on a voluntary contract to receive post-custody services. DCS is also provides services to the families of non-custodial youth placed on state probation and aftercare supervision by the courts.

State Contact Person:
Tony Nease, MSSW
Program Director 3 & State Liaison Officer
(865) 235-2234
anthony.nease@tn.gov

Tennessee CFSP Website Link:
https://www.tn.gov/dcs/program-areas/qi/policies-reports-manuals/federal-initiatives.html

Collaboration

DCS incorporated internal and external stakeholders in the Child and Family Service Review (CFSR) process. Tennessee chose to do state administered CFSR during round three, and has adopted the CFSR model as its official qualitative review process. A member of Tennessee’s Administrative Offices of the Courts developed and serves as a CFSR Reviewer for DCS. The Department also invites internal and external stakeholders to serve as Shadow Reviewers. This allows stakeholders such as Foster Care Review Board members, Court Appointed Special Advocates, Guardian ad Litem, providers, community partners, and all levels of DCS workforce members to become familiar not only with the CFSR process, but with Federal expectations, systemic issues that impact service delivery, and the needs of families and communities.

The Department used numerous methods to collect feedback from stakeholders in development of the CFSR Program Improvement Plan (PIP). Goal Four, Strategies One Two, and Three of Tennessee's PIP include not only aligning this Child and Family Service Plan with the PIP, but increasing the integration of internal and external feedback to driving practice improvements.
Tennessee developed a series of questions based on findings during the 2017 CFSR. These questions were asked during a series of stakeholder focus groups that occurred in March and April 2019. Over 150 internal and external stakeholders were invited to participate in these groups. Participants included frontline Caseworkers, DCS Supervisors, Foster Parents, contract providers (foster care and in home), Juvenile Court staff, Foster Care Review Board members, Extension of Foster Care youth, birthparents, Court Appointed Special Advocates, Guardian ad Litems, and other Tennessee state agencies that work with the same population (Department of Human Services, Department of Mental Health and Substance Abuse Services, Department of Intellectual Disabilities, Administrative Offices of the Courts, and Tennessee Council on Children and Youth). In addition to focus groups, DCS solicited input from Citizen’s Review Panel members in April 2019 after a presentation on the new CFSP and CFSR PIP at their annual conference.

Tennessee hosted a Joint Planning Meeting on May 14 and 15, 2019 at the Madison Police Precinct in Nashville. Fifty-seven internal and external stakeholders were invited to Joint Planning to assist DCS in determining focus areas for development of the 2020 – 2024 Child and Family Service Plan. Fifty-three stakeholders attended the first day of Joint Planning. These stakeholders were provided with a brief presentation on the purpose of the CFSP and Tennessee’s approved CFSR PIP. Stakeholders rotated between seven tables to share feedback on the identified topic for that table. Table topics included Court Improvement; Prevention; Mission, Vision, and Values; Strategic Planning; Service Array Enhancement; Safety, Permanency, and Well-Being; and Employee Recruitment, Training, and Retention. Questions were developed for those tables to spark discussion based on information that had been collected during the stakeholder focus groups. During the second day of Joint Planning a smaller group of internal stakeholders that help lead the DCS divisions that implement the PIP met to review information that had been collected the previous day. This information was imbedded into the development of Tennessee’s 2020 – 2024 CFSP.

Information collected from the stakeholder focus groups, Joint Planning table discussions, CFSR PIP focus groups and 2017 CFSR results were used to develop the 2020 – 2024 CFSP in an effort to ensure that the voice of the internal and external stakeholders of Tennessee’s child welfare system was represented. Stakeholders will be involved in an ongoing basis throughout the 2020 – 2024 CFSP, as many of the goals are directly tied to Tennessee’s CFSR PIP. For example, the expansion of Safe Baby Courts is an initiative that involves the court, service providers, and DCS. This initiative will also be woven into changes that DCS plans to make to meet the new Families First Prevention Services Act. Tennessee also intends to continue to engage stakeholders through surveys and through the annual Joint Planning Session, including youth and courts. Many external stakeholders are partners in several initiatives under the CFSR PIP and 2020 – 2024 CFSP.

**Vision Statement**

Tennessee has presented the new vision of the Children's Bureau to internal and external stakeholders throughout the development of the CFSP during Joint Planning, during the Citizen's Review Panel Conference, and during Grand Regional Provider Meetings. DCS Executive Leadership determined that the current Mission, Vision, and Values of the organization should be updated. The new Mission, Vision, and Values for the agency were developed from input received during numerous focus groups and the 2019 Joint Planning session.
Mission: Provide high quality prevention, and support, services to children and families that promote safety, permanency, and well-being.

Vision: To create safe and healthy environments for children where they can live with supportive families and engaged communities.

Values:

- **Relationships:** We believe that the child welfare system in Tennessee is a collaborative, aligned system of professionals that provide unique interventions to our most vulnerable populations.
- **Integrity:** We believe that ethics, fairness, and sincerity are the foundation for a successful organization.
- **Diversity:** We believe that all children and families deserve to be treated with respect and maintain strong connections to their identified community, faith, and culture.
- **Learning:** We believe that staff should be safe and receive the training, services, and supports to be mentally and physically healthy.

Assessment of Current Performance in Improving Outcomes

**Child and Family Outcomes**

**Safety Outcome 1**

*Children are, first and foremost, protected from abuse and neglect.*

**Item One:** Were the agency’s responses to all child maltreatment reports initiated, and all face-to-face contact with the children made, within time frames established by agency policies or state statutes.

Tennessee was found to be in substantial conformity on Safety Outcome One during the 2017 CFSR. DCS does not have a Measurement Plan goal for the CFSR PIP. The target goal in the chart below is based on the federal percentage of substantial conformity.
**Data Source: TFACTS and OSRI**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline (FY 2019)</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item One)</td>
<td>82.4% (as of 9/30/18 full Review) 76.32% (as of 6/30/19 partial review)</td>
<td>95%</td>
<td>6/30/2024</td>
</tr>
<tr>
<td>Timeliness of Response – Priority One</td>
<td>90.01% - CPSI 96.57% - CPSA</td>
<td>95%</td>
<td>6/30/2024</td>
</tr>
<tr>
<td>Timeliness of Response – Priority Two</td>
<td>89.64% - CPSI 95.34% - CPSA</td>
<td>95%</td>
<td>6/30/2024</td>
</tr>
<tr>
<td>Timeliness of Response – Priority Three</td>
<td>89.97% - CPSI 87.17% - CPSA</td>
<td>95%</td>
<td>6/30/2024</td>
</tr>
</tbody>
</table>

**Data Source: Statewide Data Indicators (Round Three)**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Incidence of Maltreatment while in DCS Custody (Using new CFSR Round 3 Measure)</td>
<td>9.67</td>
<td>12.06</td>
<td>10.8</td>
<td>10.41</td>
<td>8.44</td>
</tr>
<tr>
<td>Recurrence of Maltreatment</td>
<td>9.5</td>
<td>6.2</td>
<td>7.0</td>
<td>6.3</td>
<td>5.0</td>
</tr>
</tbody>
</table>
**Data Source:** Tennessee CFSR 3 January 2019 Data Profile. Data years, A=October through March, B=April through September.

**Explanation:** Incidence of maltreatment while in DCS custody according to the Data Profile Tennessee's performance is statistically no different than the national performance; however, Tennessee has made improvement since the Data profile in May 2017 which reflected Tennessee's performance was statistically worse than the national performance. Recurrence of Maltreatment according to the Data Profile Tennessee's performance is statistically better than the national performance.

<table>
<thead>
<tr>
<th><strong>Strategy:</strong> Ensure timely investigations/assessments per DCS policy.</th>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>This strategy will be monitored through Leadership monthly conference calls with all Investigations Coordinators/Team Coordinators to focus discuss percentage of cases not meeting assigned response priority and identity trends to barriers to be addressed through the CQI process. In addition, this strategy will be monitored through ongoing CFSR Reviews.</td>
<td>OCS Quality Control Regional Investigations Directors Regional Administrators Investigations Coordinators/Team Coordinators</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**Strengths and Areas of Needed Improvement:** DCS has seen a slight decline in the number of cases that have met the state policy for response time. This trend is relational to the counties where workforce turnover is problematic. Turnover has caused Caseworkers to have increased caseloads, which has created a barrier in achieving all of the required good faith attempts mandated in Tennessee's response policy. Also, the tracking of response times by supervisors appears to be in need of improvement. Tennessee will be focusing on workforce recruitment, training, and retention which should impact this area of needed improvement. Tennessee will also be working with supervisors to promote ongoing quality case review with Caseworkers, as outlined in the Quality Contacts and Team Leader Mentoring and Enhancement projects of the CFSR PIP.
**Safety Outcome 2**

*Children are safely maintained in their homes whenever possible and appropriate.*

**Item Two:** 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 Three:** Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the children in their own homes or while in foster care?

Tennessee was not found to be in substantial conformity on Safety Outcome Two during the 2017 CFSR. The Measurement Plan goal for Item Two is 48.5%. The Measurement Plan goal for Item Three is 27.4%. The target goals in the chart below are based on these goals.

**Data Source: OSRI**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item Two)</td>
<td>40% (as of 9/30/2018 full review)</td>
<td>48.5%</td>
<td>9/30/2020</td>
</tr>
<tr>
<td></td>
<td>32% (as of 6/30/2019 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item Three)</td>
<td>22.9% (as of 9/30/2018 full review)</td>
<td>27.4%</td>
<td>9/30/2020</td>
</tr>
<tr>
<td></td>
<td>18.06% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Strategy:** Ensure children receive timely, initial and ongoing safety assessments

**Responsible Party**

**Date**

<table>
<thead>
<tr>
<th>CFSR PIP – Goal One: Strategy One – Quality Contacts Initiative; Strategy Two – Assessment Integration Model.</th>
<th>Executive Director of Training and Professional Development Regional Directors</th>
<th>Ongoing</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Two: Strategy One – Safe Baby Courts; Strategy Two – Services Identified by FAST;</td>
<td>Executive Director of Child Safety Administrative Office of the</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Strengths and Areas of Needed Improvement: DCS identified that the quality of safety assessments were an area of needed improvement during the 2017 Child and Family Service Review. The quality of the Caseworker visitation with children and parents was determined to be poor. When visitation is not of quality, informal assessments of safety cannot be accurately made. Therefore, Caseworkers were not identifying or providing needed safety services or completing quality informal or thorough formal safety assessments. A lack in supervisor support and mentoring was also noted as a concern, especially with new employees. This root cause analysis identified included training and coaching and mentoring of Caseworkers. Strategies were developed in Tennessee’s CFSR PIP that outlined how these identified areas of needed improvement would be addressed. Trainings through Quality Contacts and Assessment Integration will be provided to Caseworkers. The Team Leader Mentoring and Enhancement Project will work with Team Leaders on how to better coach and mentor Caseworkers to ensure that quality visitation and assessment occur.

Team Leader Mentoring and Enhancement Project will use the DCS SimLabs as a component of this new training. SimLabs, provide experiential learning to Caseworkers. A Simulation lab is a training technique that utilizes immersive scenarios that replicate real life, on the job events. A room or building can be set up to mimic a location similar to a real life encounter, such as a client’s home. A simulation lab training team consists of at least two individuals. One member of the Simulation Lab training team serves as a facilitator, that is an outside observer, not actively participating in the actual event. This person will direct questions to trainees after the scenario is complete. Other members of the simulation team serve as actors, such as a parent or child within the scenario. An unscripted scenario is played out to closely mimic a situation that the could encounter on the job. The scenario is played out without any outside intervention until the facilitator stops the scenario, ensuring the utmost adherence to real life. All participants are then prompted with questions about the scenario by the facilitator including how the participant felt, why they made the choices they did, and what observations they made in the scenario. Simulation labs can be utilized in many different ways, and could be easily modified to train staff for any conceivable scenario.
Monitoring safety plans was found to be an area of needed improvement, as well. Monitoring and documenting the monitoring of these plans has been embedded into new quality contacts trainings that are available to all regions. Monitoring of safety plans is being added to the Case Process Review Tool that is used by supervisors. The quality of the Case Process Reviews will begin being monitored by the Program Evaluation Unit during January 2020. This new monitoring process is currently under development.

Safe Baby Courts (SBC’s) were legislatively created in July 2017, with the support of the Executive Committee for the Juvenile Court Judges. Safe Baby Courts (SBC) were created in collaboration with DCS, the Administrative Offices of the Courts (AOC), and the Tennessee Department of Mental Health and Substance Abuse Services (DMHSAS). The SBC’s were developed utilizing the Zero to Three practice model and incorporates the core components, which have proven to reduce time to permanency and repeat maltreatment in other states. Tennessee has received on-site technical assistance from Zero to Three and continues to maintain a strong relationship for ongoing support and technical assistance. This initiative recognizes the critical stages of child development and uses a specialized judicial approach to coordinate and expedite services, and to engage community partners to support and sustain families. This approach has strong support from the Juvenile Court Judges and the infant mental health community to ensure that services to the infant and the parents/caregivers are tailored to their unique circumstances and to support critical timeframes unique to infant development to reduce trauma, custodial episodes and future involvement from CPS.

**Permanency Outcome 1**

*Children have permanency and stability in their living situations.*

**Item Four:** Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goals?

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

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

Tennessee was not found to be in substantial conformity on Permanency Outcome One during the 2017 CFSR. The Measurement Plan goal for Item Four is 88.4%. The Measurement Plan goal for Item Five is 50%. The Measurement Plan goal for Item Six is 43.9%. The target goal in the chart below is based on these goals.
### Data Source: OSRI

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item 4)</td>
<td>82.9% (as of 9/30/18 full review) 71.79% (as of 6/30/19 partial review)</td>
<td>88.4%</td>
<td>9/30/2020</td>
</tr>
<tr>
<td>CFSR Performance (Item 5)</td>
<td>42.7% (as of 9/30/18 full review) 56.41% (as of 6/30/19 partial review)</td>
<td>50%</td>
<td>9/30/2020</td>
</tr>
<tr>
<td>CFSR Performance (Item 6)</td>
<td>36.8% (as of 9/30/18 full review) 25.64% (as of 6/30/19 partial review)</td>
<td>43.9%</td>
<td>9/30/2020</td>
</tr>
</tbody>
</table>

### Data Source: Statewide Data Indicators (Round Three)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanency in 12 months for children entering foster care</td>
<td>42.7%</td>
<td>46.7%</td>
<td>43.6%</td>
<td>45.1%</td>
<td>44.8%</td>
<td>43.8%</td>
<td>DQ</td>
</tr>
<tr>
<td>Re-entry to foster care in 12 months</td>
<td>8.1%</td>
<td>9.1%</td>
<td>8.8%</td>
<td>9.5%</td>
<td>10.1%</td>
<td>10.1%</td>
<td>DQ</td>
</tr>
<tr>
<td>Permanency in 12 months for children in foster care 12 to 23 months</td>
<td>45.9%</td>
<td>49.1%</td>
<td>49.2%</td>
<td>51.4%</td>
<td>49.0%</td>
<td>47.8%</td>
<td>DQ</td>
</tr>
<tr>
<td>Permanency in 12 months for children in foster care</td>
<td>31.8%</td>
<td>37.3%</td>
<td>36.0%</td>
<td>37.5%</td>
<td>37.3%</td>
<td>35.4%</td>
<td>DQ</td>
</tr>
</tbody>
</table>
### 24 months or more

| Placement Stability | 4.44 | 7.28 | 7.95 | 7.79 | 7.90 | 7.48 | DQ |

**Data Source:** Tennessee CFSR 3 January 2019 Data Profile. Data years, A=October through March, B=April through September.

**Explanation:** Permanency in 12 months for children entering foster care according to Data Profile Tennessee's performance varies between statistically no difference or statistically better than the national performance; Re-entry to foster care in 12 months closes out the 2015-2019 CFSP as statistically worse than the national performance; Permanency in 12 months for children in foster care 12 to 23 months Tennessee's performance has been statistically better than the national performance but dropped to statistically no difference than the national performance at the closing of the 2015-2019 CFSP; Permanency in 12 months for children in foster care 24 months or more Tennessee's performance statistically better than the national performance; Placement Stability reflects Tennessee's performance statistically worse than the national performance and will be addressed in the program improvement plan as well as the 2020-2024 CFSP through the strategies below.

<table>
<thead>
<tr>
<th>Strategy: Collaborate with courts and stakeholders to ensure that quality services provided to families to meet their unique needs.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Two: Strategy One – Safe Baby Courts; Strategy Two – Services Identified by FAST; Strategy Three – Revitalize CFTM Process</td>
<td>Executive Director of Child Safety</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>Executive Director for Permanency</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regional Directors</td>
<td></td>
</tr>
<tr>
<td>CFSR PIP – Goal Three: Strategy Two– Foster Parent Recruitment and Retention Plans</td>
<td>Executive Director for Permanency</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>Executive Director of Network Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regional Directors</td>
<td></td>
</tr>
<tr>
<td>CFSR PIP – Goal Four: Strategy Three– Court Improvement</td>
<td>General Counsel Administrative Offices of the Courts Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Incorporate Children’s Bureau “Foster Parents as a service to families, not a substitute” vision into recruitment and training of Foster Parents, both DCS and provider agency.</td>
<td>Executive Director for Permanency Executive Director of Network Development Regional Directors</td>
<td>July 1, 2021</td>
</tr>
<tr>
<td>DCS and provider agencies will collaboratively conduct an analysis of the types of Foster Homes available in each county that meet the demographics and unique needs of the children from those counties in order to obtain a true picture of recruitment needs.</td>
<td>Executive Director for Permanency Executive Director of Network Development Contract Provider Network</td>
<td>July 1, 2021</td>
</tr>
</tbody>
</table>

**Strengths and Areas of Needed Improvement:** The workforce turnover rate at DCS has played a role in impacting this outcome area. Tennessee found that changes in Caseworkers often can lead to a delay in permanency for the child, as the new Caseworker must re-engage the family and begin building relationships. Also, service array played a role in impacting this outcome. When children were placed in temporary placements upon coming into care due to not having an identified placement resource or when children were placed a greater distance from family, time to permanency was increased.

DCS is currently exceeding the Measurement Plan goal for Item 5. The Department has seen an increase in the number of Foster Homes available across the state. However, a challenge is ensuring that those Foster Homes meet the unique needs of the children from each county. Data often shows that the number of foster homes in a county may match the number of youth in care from those counties. However, when the unique needs of those children are reviewed, many counties do not have the correct match of foster homes to the needs and ages of the children in care from that area. More collaborative work is needed between DCS and contract providers to analyze the
number of homes available in each county that can serve the children from those county based on
the age of the child, size of the sibling group, and unique behavioral needs for the children. DCS
realizes that having children placed closer to birth-parents can lend to more quality visits with family
and therefore assist in children obtaining permanency in a more timely fashion. Ongoing and
collaborative work with provider agencies and DCS to ensure that recruitment strategies match the
needs of each county and the new “foster parents as a service, not a substitute” philosophy should
improve these outcomes.

Tennessee has seen a large increase in the number of infants born exposed to drugs. In many
counties these infants are placed into DCS custody through bench order of the court of removal
petition by the Department. Tennessee has been working to expand the number of Safe Baby
Courts in the state. These courts work in collaboration with the new Child Protective Services Drug
Teams. These teams receive special training on addiction and provide CPS investigation and then
ongoing in home services to parents. Through Safe Baby Courts, Drug Teams, and special providers,
DCS has started working with courts to build a team around addicted mothers to provide services
and prevent children from coming into care, when possible.

DCS is also working with two courts (Marshall and Blount Counties) to help educate the courts on
the DCS safety assessment (FAST). This partnership is designed to help the courts understand these
assessments and to use them to build services around families to prevent removal whenever
possible. This initiative is also designed to help those counties look at what services are available to
them and what services may need to be enhanced in those counties. The goal is to eventually
expand this initiative to other counties.

**Permanency Outcome 2**

*The continuity of family relationships and connections is preserved for children.*

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

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

**Item 11:** Did the agency make concerted efforts to promote, support, and/or maintain positive
relationships between the child in foster care and his or her mother and father or other primary
caregivers from whom the child had been removed through activities other than just arranging for
visitation?
Tennessee is near substantial conformity for item seven during the 2017 CFSR. The target goal in
the chart below is based on the federal percentage of substantial conformity. The Measurement
Plan goal for Item eight is 40%. The Measurement Plan goal for Item nine is 35%. The Measurement
Plan goal for Item ten is 50%. The Measurement Plan goal for item eleven is 45%. The target goal in
the chart below is based on these goals.

**Data Source: OSRI**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item 7)</td>
<td>93% (as of 9/30/18 full review) 86.36% (as of 6/30/19 partial review)</td>
<td>95%</td>
<td>6/30/24</td>
</tr>
<tr>
<td>CFSR Performance (Item 8)</td>
<td>36% (as of 9/30/18 full review) 48.48% (as of 6/30/19 partial review)</td>
<td>40%</td>
<td>9/30/20</td>
</tr>
<tr>
<td>CFSR Performance (Item 9)</td>
<td>31.6% (as of 9/30/18 full review) 35.9% (as of 6/30/19 partial review)</td>
<td>35%</td>
<td>9/30/20</td>
</tr>
<tr>
<td>CFSR Performance (Item 10)</td>
<td>46.8% (as of 9/30/18 full review) 48.39% (as of 6/30/19 partial review)</td>
<td>50%</td>
<td>9/30/20</td>
</tr>
<tr>
<td>CFSR Performance (Item 11)</td>
<td>38.3% (as of 9/30/18 full review) 43.75% (as of 6/30/19 partial review)</td>
<td>45%</td>
<td>9/30/20</td>
</tr>
</tbody>
</table>

**Data Source: TFACTS & Case Process Reviews**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of Child/Parent Visitation (Non-Delinquent)</td>
<td>Not Currently Available</td>
<td>50%</td>
</tr>
<tr>
<td>Percentage of Sibling Visits for Siblings Not Placed Together</td>
<td>54.6%</td>
<td>90%</td>
</tr>
<tr>
<td>Percentage of Children Placed With Relatives</td>
<td>13.54%</td>
<td>20%</td>
</tr>
<tr>
<td>Percentage of Siblings Not Placed Together</td>
<td>29.13%</td>
<td>20%</td>
</tr>
<tr>
<td>Case Process Review: Documentation of visitation between child in foster care and birthparent monthly as applicable or concerted efforts to do so.</td>
<td>N/A – New Measure</td>
<td>50%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strategy: Ensure that connections are maintained to family and community for children in foster care.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Two: Strategy Three – Revitalize CFTM Process</td>
<td>Executive Director of Child Safety  Executive Director for Permanency  Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>CFSR PIP – Goal Three: Strategy One – Team Leader Mentoring and Enhancement Project; Strategy Two– Foster Parent Recruitment and Retention Plans</td>
<td>Executive Director for Permanency  Executive Director of Network Development  Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>CFSR PIP – Goal Four: Strategy One – CFSR/CFSP Integration</td>
<td>Director of Program Evaluation  Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Incorporate Children's Bureau “Foster Parents as a service to families, not a substitute” vision into recruitment and training of Foster Parents, both DCS and provider agency.</td>
<td>Executive Director for Permanency  Executive Director of Network Development</td>
<td>July 1, 2021</td>
</tr>
</tbody>
</table>
**Regional Directors**

**Strengths and Areas of Needed Improvement:** DCS is near substantial conformity for placement of siblings in care together. An analysis of data, both CFSR and Placement Exception Requests, point that many times siblings are separated due to having an inadequate service array. Collaborating with agencies to determine and target recruitment in counties, as discussed in Permanency Outcome 1, should help DCS meet conformity for this area.

The Department understands that enhancing the service array would potentially enable birthparents to visit more with their children in foster care, as well as participate in other activities. Currently, children placed in higher-levels of care, mostly residential, may be hours away from their home county. Partnering with provider agencies to ensure that the higher-level of care foster homes are available in counties is addressed in Permanency Outcome 1.

DCS has added quality parent child visitation as an area of review for the Case Process Reviews completed by supervisors. The importance of quality visits is also an emphasis in the Quality Contacts Initiative and Team Leader Mentoring and Enhancement Project. The Child and Family Team Meeting Revitalization Project includes a discussion around child and parent visitation and ensuring the relatives are discusses as possible placement options. Also, ongoing training about the importance of quality visitation is occurring across the state. Including visitation and the importance of maintaining relationships and culture, as well as other CFSR expectations have been incorporated into most trainings and ongoing presentations. This increased focus on continuity of relationships should help Tennessee improve performance.

**Well-Being Outcome 1**

*Families have enhanced capacity to provide for their children's needs.*

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

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

**Item 14:** Were the frequency and quality of visits between caseworkers and children sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals?
Item 15: Were the frequency and quality of visits between caseworkers and the mothers and fathers of the children sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals?

Tennessee was not found to be in substantial conformity on Well-Being Outcome One during the 2017 CFSR. The Measurement Plan goal for Item Twelve is 25.2%. The Measurement Plan goal for Item Thirteen is 39.2%. The Measurement Plan goal for Item Fourteen is 39.1%. The Measurement Plan goal for Item Fifteen is 22%. The target goals in the chart below are based on these goals.

**Data Source: OSRI**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item 12 Overall)</td>
<td>20.8% (as of 9/30/18 full review)</td>
<td>25.2%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>19.44% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 12A)</td>
<td>41% (as of 9/30/18 full review)</td>
<td>50%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>47.22% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 12B)</td>
<td>17.6% (as of 9/30/18 full review)</td>
<td>20%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>16.42% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 12C)</td>
<td>52.4% (as of 9/30/18 full review)</td>
<td>60%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>72.73% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 13)</td>
<td>34% (as of 9/30/18 full review)</td>
<td>39.2%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>28.17% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 14)</td>
<td>34% (as of 9/30/18 full review)</td>
<td>39.1%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>40.28% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item 15)</td>
<td>17.7% (as of 9/30/18 full review)</td>
<td>22%</td>
<td>9/30/20</td>
</tr>
</tbody>
</table>
**Strategy:** Ensure that children and families receive quality formal and informal assessments, as well as quality visitation from Caseworkers in order to increase engagement of families in case planning.

<table>
<thead>
<tr>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Training and Professional Development, Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**CFSR PIP – Goal One: Strategy One – Quality Contacts Initiative; Strategy Two – Assessment Integration Model.**

<table>
<thead>
<tr>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Child Safety, Executive Director for Permanency, Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**CFSR PIP – Goal Two: Strategy One: Safe Baby Courts; Strategy Two: Services Identified by FAST; Strategy Three – Revitalize CFTM Process**

<table>
<thead>
<tr>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director for Permanency, Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**CFSR PIP – Goal Three: Strategy One – Team Leader Mentoring and Enhancement Project; Strategy Two– Foster Parent Recruitment and Retention Plans**

<table>
<thead>
<tr>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director for Permanency, Executive Director of Network Development, Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**Strengths and Areas of Needed Improvement:** As, with Safety Outcome 2, the quality of the Caseworker visitation with children and parents was determined to be poor. When visitation is not of quality, informal assessments of cannot be accurately made, and successful engagement with families does not occur. DCS also found that often Caseworkers did not comprehensively assess the entire family on in-home cases, but instead focused on the target child and parent. A lack in supervisor support and mentoring was also noted as a concern, especially with new employees.
The Quality Contacts Initiative is designed to help Caseworkers better understand what a quality visit should be. This includes what informal assessments should be occurring, such as those related to Item 12. This initiative then goes further to train the Caseworker on how to use the informal assessment to guide formal assessments and incorporate them into case planning. Documentation of these informal assessments is also covered in this initiative. The Team Leader Mentoring and Enhancement Project will help the supervisors to understand how to provide feedback to Caseworkers on things such as quality visits. Through this project, supervisors are coached on how to mentor Caseworkers. Those supervisors are first evaluated on their own ability to recognize what a quality visit looks like and what components make a quality formal or informal assessment. The supervisor is coached on how to incorporate observed interactions and home visits with Caseworkers into supervision and mentoring sessions to ensure that visits and assessments are of quality (items 12, 14, 15), families are engaged and have their voices heard (Item 13), and those visits and assessments are documented.

DCS is currently exceeding the Measurement Plan Goal for Item 14. Preliminary data has shown that the Quality Contacts Initiative has been having positive results in the three pilot regions. DCS has incorporated CFSR language into polices and trainings around Caseworker visitation and assessment. DCS realized that the Caseworker visit is the key element that drives engagement and informal assessment. This is an area of much greater focus from the Department since the 2017 CFSR.

These two initiatives will also be incorporated into the Safe Baby Court and FAST Services CFSR PIP strategies, as quality visits, assessments, and engaged families are imperative to the successfulness of working with that population.

**Well-Being Outcome 2**

*Children receive appropriate services to meet their educational needs.*

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

Tennessee was not found to be in substantial conformity on Well-Being Outcome Two during the 2017 CFSR. 2017 performance on this Item was 54.7%. 2018 performance on this Item was as 55.2%. 2019 performance to date is 53.85% with six of the twelve services regions having been reviewed. Tennessee is required to show improvements from the 2017 review year. We don't have a Measurement Plan Goal to meet; therefore, the target goal was determined as a realistic percentage within the current capacity to show improvement.
Data Source: OSRI

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item Sixteen)</td>
<td>55.2% (as of 9/30/18 full review) 53.85% (as of 6/30/19 partial review)</td>
<td>60%</td>
<td>9/30/20</td>
</tr>
</tbody>
</table>

**Strategy:** Ensure that all children receive quality educational assessments and services as applicable.

<table>
<thead>
<tr>
<th><strong>Responsible Party</strong></th>
<th><strong>Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Training and Professional Development Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Director of Program Evaluation Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Director of Program Evaluation Regional Directors</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Executive Director for Child and Family Well-Being Director of Educational Services</td>
<td>July 1, 2020</td>
</tr>
</tbody>
</table>

Strengths and Areas of Needed Improvement: DCS currently has an Educational Specialist in each of its twelve service regions. These specialists routinely provide training to school systems and DCS workforce members. DCS was not found to be in substantial conformity with this Item. During focus groups that were conducted several participants noted that communication between the
school system and DCS was in need of improvement. Tennessee has identified strategies for improvement which include the following:

- DCS Education will meet with Education Consultants to discuss the CFSP and areas of need. The meeting will occur on August 28 and 29, 2019.
- For students placed in the DCS LEA, the Education Division will utilize transcript tracking through the Skyward program - currently in the early stages of implementation.
- DCS Education will utilize the report card program through Skyward to assist DCS Caseworkers with enrollment time frames.
- DCS Education will work with other program staff to ensure during face-to-face visits, all DCS case workers directly ask about school updates and specific areas of difficulty creating barriers to academic success.
- DCS Education will request that consistent forms be utilized across the state to document face-to-face child and family interviews where education is addressed.
- DCS Education will train DCS Caseworkers on Response to Intervention and how to track student progress through RTI Tiers.
- DCS will train its affiliated schools on tracking grades through the Skyward program.
- DCS will request that all non-custodial case managers attend education training to understand indicators of academic distress.

**Well-Being Outcome 3**

*Children receive adequate services to meet their physical and mental health needs.*

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

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

Tennessee was not found to be in conformity with Well-Being Outcome Three. DCS performance was at 58/3% on Item seventeen during the 2017 CFSR. DCS performance was at 33.3% on Item eighteen. Tennessee is required to show improvements from the 2017 review year. We don't have a Measurement Plan Goal to meet; therefore, the target goal was determined as a realistic percentage within the current capacity to show improvement.

**Data Source: OSRI**

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline FY 2019</th>
<th>Target Goal</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR Performance (Item Seventeen)</td>
<td>36.1% (as of 9/30/18 full review)</td>
<td>40%</td>
<td>9/30/20</td>
</tr>
<tr>
<td></td>
<td>35.56% (as of 6/30/19)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CFSR Performance (Item Eighteen)</td>
<td>32.4% (as of 9/30/18 full review)</td>
<td>35%</td>
<td></td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------------------------------</td>
<td>-----</td>
<td></td>
</tr>
<tr>
<td></td>
<td>25.49% (as of 6/30/19 partial review)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Strengths and Areas of Needed Improvement:** DCS found that workforce turnover at provider agencies and community partners often impacted this area. Also, the lack of services in many rural areas of the state created less than satisfactory results. DCS will be expanding partnerships in order to recruit more quality services in areas of need. Tennessee Governor’s Executive Order One outlines fifteen rural counties for state departments to assess and focus to determine how services can be improved/increased in those areas. DCS is assessing this and developing a plan to meet this Executive Order.

**Systemic Factors**

**Information Systems**

DCS was found to be in substantial conformity with this systemic factor during the 2017 CFSR. The Department has a well deployed CCWIS system, TFACTS, which meets security standards. All DCS workforce members receive ongoing training on cyber security and any updates to the TFACTS system.

DCS has a Management Advisory Council (or MAC) that approves and prioritizes the key information technology activities based on the strategic goals and objectives of DCS. The MAC, which meets monthly, is chaired by the DCS Commissioner and includes the Deputy and Assistant Commissioners of the various business units. This business driven governance model ensures that technology resources are used most effectively. The Strategic Technology Solutions – DCS IT Support team (under the Tennessee Department of Finance and Administration) is responsible for executing the projects prioritized by the MAC.

**Project Timeline:** The following timeline summarizes the project schedule for the coming year, showing target delivery dates by quarter. The projects that are approved but pending MAC prioritization will support Tennessee to maintain substantial conformity by improving practice and documentation with using assessments to accurate determine families' needs, quality contacts in caseworker visits with children and parents, tracking and ensuring timely health and well-being.
### The current CCWIS system operated by Tennessee is TFACTS. This system has an associated data warehouse that is refreshed each evening. The department has some 400 plus management reports that are output from this data warehouse on various schedules from daily, weekly, monthly, quarterly and both annual and fiscal yearly periods. These reports cover both custodial and non-custodial instances of service provision to Tennessee residents by the department. Subjects such as client and worker visitation, timely assessments and case plans and other departmental KPIs are measured using these various reports. This data warehouse also facilitates urgent report and data request development when needed to address emergency and research data projects. All federal reports (AFCARS, NCANDS and NYTD) are sourced from the same data warehouse. Fulltime data dashboards are also provided to DCS program management for informational and research purposes. These dashboards present data by county and regional geographical means which allows for geospatial research.
DCS Scorecard

Work will continue on the ‘My Work’ feature of TFACTS, which updates worker items from the scorecard within the application, removing pending tasks once the work item have been completed and properly entered into TFACTS. When complete, this feature provides a single source of information for the caseworker for standard casework tasks that require their attention. TFACTS will allow the worker to easily navigate from their list of tasks in need of completion to complete the data entry of those work items.

AFCARS (Adoption and Foster Care Analysis and Reporting System)

DCS will continue to submit AFCARS Data by the twice yearly due dates prescribed by the Children's Bureau (CB). The last AFCARS review took place in April 2013. Since that time, in partnership with the CB, DCS established and implemented an AFCARS Improvement Plan (AIP) to remediate findings from the review. Updates to the AIP will be submitted to CB twice yearly on dates established/requested by the CB. The next AIP update is scheduled for June 2019. DCS IT Support, per CB request, has resubmitted all AFCARS data, going back to 2010, using the updated extraction code. The AFCARS 2.0 final rule has been issued, but additional guidance from the CB is required before DCS can move to address the new data requirements being introduced. DCS hopes to obtain this guidance through its continued partnership and collaboration with the AIP.

NYTD (National Youth in Transition Database)

The NYTD Report will continue to be submitted twice a year for the reporting periods from October through March and April through September. The report is due 45 days after the reporting period concludes. The last submission was April 2019. As required, the Age 17 baseline population was submitted for federal review. The Department of Health and Human Services (DHHS) determined that the submission was compliant and no penalties were incurred.

NCANDS (National Child Abuse and Neglect Data System)

The NCANDS Report will continue to be submitted annually for the submission period of October 1 through September 30. The report is due three months from the closing date of the reporting period. DCS submitted the FFY 2018 submission on January 31, 2019 and DHHS is currently reviewing the submission. All remaining data quality and extraction logic changes from FFY2016 have been included in the FFY2017 submission.

As DHHS continues to expand the requirements for reporting data, updates may be needed in the next (FFY 2019) NCANDS submission.
Case Review Systems

DCS was not found to be in substantial conformity with this systemic factor during the 2017 CFSR.

Data Source: TFACTS

<table>
<thead>
<tr>
<th>Measure of Progress</th>
<th>Baseline (FY 2019)</th>
<th>Target Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 20: Child has a written plan that is developed jointly with the child’s parents/Family participated the CFTM</td>
<td>77.67% of children who entered custody during the period had a mother and/or father participating in the initial permanency plan CFTM</td>
<td>80%</td>
</tr>
<tr>
<td>Item 23: The filing of TPR proceeding occurs within 15 of the last 22 months or compelling reasons is documented.</td>
<td>88.89%</td>
<td>95%</td>
</tr>
<tr>
<td>Item 24: Documentation that Resource Parents were notified in advance of all CFTM’s, FCRB’s and Court Hearings (CPR)</td>
<td>78% Foster Care Cases</td>
<td>80%</td>
</tr>
</tbody>
</table>

Items 21 and 22 were previously tracked through Case Process Reviews, but was removed from the tool; therefore, we have no data to report. Questions related to these items will be added to the tool and data will be available to report on in the upcoming APSR.

<table>
<thead>
<tr>
<th>Strategy:</th>
<th>Ensure that all children have a written case plan developed jointly with the family.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Two: Strategy Three – Revitalize CFTM Process</td>
<td>Executive Director of Child Safety</td>
<td>Executive Director for Permanency</td>
<td>Regional Directors</td>
</tr>
<tr>
<td>Increase communication and collaboration with Juvenile Courts and Foster Care Review Boards to ensure that case review system is well functioning.</td>
<td>General Counsel Administrative Offices of the Courts Regional Directors</td>
<td>July 1, 2021</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Use the CFSR case reviews to analyze legal barriers that prevent the achievement of timely permanency, timely goal ratification, and periodic reviews.</td>
<td>General Counsel Director of Program Evaluation</td>
<td>Ongoing</td>
<td></td>
</tr>
<tr>
<td>CFSR PIP – Goal Four: Strategy Three – Court Improvement</td>
<td>General Counsel Administrative Offices of the Courts</td>
<td>Ongoing</td>
<td></td>
</tr>
</tbody>
</table>

**Court Improvement Program**

During the 2020-2024 CFSP DCS and the Court Improvement Program (CIP) of the Administrative Office of the Courts (AOC) will continue to work on a number of initiatives:

**Model Foster Care Review Boards**

DCS and the Court Improvement Program (CIP) collaborate to improve reviews of youth in foster care through the use of Model Foster Care Review Boards. There are 17 counties with Model Foster Care Review Boards in Tennessee. Anderson County is in the process of establishing a Model Foster Care Review Board and Hickman County is in the process of reinstituting a foster care review board which is also planned to be a Model Foster Care Review Board. Montgomery County, though already having the Model Foster Care Review Board system, is undertaking a substantive restructuring of its boards to accommodate its growing and changing county and foster care population. In 2018, the CIP developed and implemented a skill-set based Motivational Interviewing Training for foster care review board members. The training encompasses teaching board members how to incorporate components of Motivational Interviewing throughout the board reviews: interpersonal style, open-ended questions, reflective listening, affirmations, and offers. The CIP continues the Quality Hearing Project to improve the quality of foster care review board proceedings through utilization of Motivational Interviewing components and skillsets in the foster care review board forms and during the review. Foster care review board forms for adolescents age 14 years and older have been revised to include open-ended format questions. This provides a more substantive review encouraging increased participation from the youth and family. Court staff and foster care review board members in the following juvenile courts have completed the new Motivational Interviewing Training: Davidson, Dyer, Haywood, Maury, Sumner, and Tipton.
**Peer Advocates**

Peer advocates provide services to youth at the Model Foster Care Review Boards and Extension of Foster Care (EFC) Review Boards. Peer advocates are trained and supervised by Court Improvement Project staff. Services include but are not limited to: modeling and encouragement to the foster youth to make his/her preferences and concerns known to the board; explanation of independent living services available; information regarding post-secondary education options; discussion of the benefits of accepting extension of foster care services; and advocacy during the board review. To support the Model Foster Care Review Board project, peer advocates have received training in motivational interviewing, on the new forms, and on education pathways for youth aging out of foster care. A five-year contract between DCS and the Administrative Office of the Courts which provides for peer advocate compensation and quarterly training for the advocates which was set to expire in June 2017 was renewed by DCS. The funding has been increased to $75,500 per year through 2022. There are currently three peer advocates serving seven counties. Courts and DCS have been asked to identify candidates for the open positions. Courts report being unable to identify qualified candidates from the extension of foster care population or young adults who have exited from custody for the peer advocate position.

**Joint Project**

Project Wrap Around is a federally mandated joint project between the Court Improvement Program and DCS with Metropolitan Nashville Public Schools (MNPS) and Davison County Juvenile Court as collaborative partners. The goal is to improve permanency outcomes for the extension of foster care population by increasing timely high school graduation rates, matriculation, retention rates, and attainment of post-secondary certificates or degrees among the 18 to 21 year old population. The joint project population includes the high school population with the premise that in order to increase the number of young adults in EFC who obtain post-secondary degrees or certificates; youth must graduate from high school in a timely manner. This will allow the three years of EFC eligibility to focus on post-secondary success rather than completion of secondary education. The pilot population encompasses students committed to foster care by Davidson County Juvenile Court who are enrolled in high school in MNPS. As a result of Project Wrap Around, a referral process has been established regarding communication of student movement to ensure that the youth’s school conducts a wraparound meeting within 10 days. This meeting allows an opportunity to make a best interest determination about school placement, complying with Every Student Succeeds Act (ESSA), but also helps determine class placement and services in the school setting to help each student be successful. Regular professionals meetings, training for staff, and annual transcript reviews also assist in improving the overall experience of youth in foster care.

Implementation of this project began in August 2018. Data is collected to determine overall outcomes for youth being served through this pilot. Qualitative data will also be collected through professional participants’ focus groups and surveys that can help inform decision making around the pilot moving forward.

**Quality Assurance Systems**

DCS was found to be in substantial conformity with this systemic factor during the 2017 CFSR. The Office of Continuous Quality Improvement, Division of Program Evaluation, conducted multiple focus groups with internal and external stakeholders to collect information that helped determine
the goals and strategies for the CFSR Program Improvement Plan that was approved in February 2019.

The Program Evaluation Division conducted multiple focus groups via WebEx to collect information to help design the new Child and Family Service Plan. DCS divided internal and external stakeholders by type for the focus groups. The Department then invited a smaller group of stakeholders to further refine ideas during the annual Joint Planning meeting in May 2019.

The Program Evaluation Team recruits external and internal stakeholders to shadow the CFSR process. Contract provider CFSRs are conducted during the year to further help providers understand the CFSR standards and DCS expectations. The monthly Interagency Quality Assurance WebEx meeting is hosted by the Program Evaluation Team and attendees include the DCS Continuous Quality Improvement (CQI) Coordinators and the quality improvement staff from provider agencies to discuss progress on the CFSR PIP and CFSP, as well as provide training on any upcoming changes to service delivery requirements.

Upon completion of each regional CFSR week a Debrief Session is held. During the CFSR results are shared and regional leadership has the opportunity to ask questions. Each region has a CQI Coordinator that can then work with the region to further understand the CFSR data and set short term action plans to help improve certain outcomes. These CQI Coordinators also help the region to focus on other areas of identified need, such as those in the CFSP or DCS Strategic Plan.

<table>
<thead>
<tr>
<th>Strategy: Ensure that the Continuous Quality Improvement Process is aligned with the Child and Family Service Plan and CFSR findings.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Four: Strategy One – Integrated Processes</td>
<td>Director of Program Evaluation</td>
<td>Ongoing</td>
</tr>
<tr>
<td>a. Quarterly Case Process Reviews (CPR) will include CFSR language.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Quarterly reviews of Monthly Provider Summaries will be conducted using CFSR standards.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. CFSR will be the official qualitative review for DCS.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Special provider CFSR reviews will be conducted during the</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
period of November – March each year.

<table>
<thead>
<tr>
<th>CFSR PIP – Goal Four: Strategy Two – Integrated Feedback</th>
<th>Director of Program Evaluation</th>
<th>Ongoing</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Continue to solicit internal and external input on a regular basis through surveys, focus groups, work groups, and presentations with stakeholders.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Joint Planning sessions will include more voice of the stakeholder in development of APSR.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Staff Training**

DCS was found to be in substantial conformity with this systemic factor during the 2017 CFSR.

**Pre-Service Training**

In 2019, a revision process will be implemented incorporating focus groups and surveys of new hires, as described below. The information will be used to determine next steps and revision needs to ensure pre-service training is meeting the needs of newly hired staff.

Pre-Service focus groups were initiated in November 2018 and were conducted over nine rounds, arranged by program area. Focus groups concluded in January 2019 with 65 participants including Case Managers, Supervisors, and certified Mentors contributing to the conversation. Program areas represented in the focus groups and survey responses included: Child Protective Services Assessment/Investigations, Foster Care, Juvenile Justice, and Family Support Services. Through these groups, it was determined that many new Caseworkers do not have the skill set needed upon completion of pre-service to conduct quality visitation and informal assessments. This was also evident in CFSR ratings. The previous training process relied heavily on new Caseworkers having a strong On the Job Training (OJT) Coach during the training and certification process, as well as an experienced Mentor from their team that would help the new workforce member apply learning from pre-service classes. Due to high turnover rates the OJT Coaches and Mentors were not always available, creating poor outcomes for the new Caseworkers.
Pre-Service Training Surveys was released to 261 Case Managers who completed Pre-Service certification between June 2017 and July 2018. Of the eligible staff, 48 responded (20%). Based on the responses received, Pre-Service is incorporating Simulation Labs and additional On the Job Training time starting in January 2020. Classroom materials were revised to attend to the new hires’ level of context of the work as well as introduction of Google Classrooms and Live Webinar materials to support ongoing learning.

New Hires during the 2020 cycle of Pre-Service groups will be surveyed to gauge effectiveness of the classroom material, their time in the field and the Simulation Labs. The Pre-Service design team will track and make adjustments based on feedback received throughout the year.

**In-Service Training**

93% of staff was in compliance with mandatory trainings during FY 2019. Completion of In-service training is tied to workforce performance plans and raises. This has helped improve this performance goal.

A new training that is being offered to Caseworkers was designed after its need was discovered after the 2017 CFSR. The Quality Contacts Initiative seeks to improve practice through supervisory coaching and training support to develop knowledge and skills of caseworkers in spending quality time with children and families. As of November 2018, three pilot regions completed the webinar and classroom supervisor sessions. The pilot was evaluated in early 2019 and deployment to the other regions is outlined in the CFSR PIP.

Training managers meet with regional leadership on a quarterly basis to obtain feedback regarding the training program in that region. This process allows the training division to learn of knowledge gaps, solidify and build on strengths in the program, and quickly address any concerns.

Ongoing training needs are determined in a variety of ways, including through direct contact with regional leadership as described above. Additionally, training evaluation is conducted at the conclusion of every class, which allows the division to track and adjust the effectiveness of a course and provides participants an opportunity to identify additional training needs. Further training supervisors attend regional leadership meetings in their areas, allowing them to hear from frontline supervisory staff any knowledge gaps or other newly identified training needs. Training leadership conducts monthly meetings with the OJT Coaches and with regional Training Coordinators. These meetings serve as both a method of communicating information between the training division and regional operations and as a quality improvement process where problems are identified and brought to a larger group for resolution as needed.

**Foster Parent Training**

The Foster Parent Training Program offers learning opportunities that support adoptive, foster and kinship parents in their effort to provide safe, nurturing and loving environments for the children in their care. Through a contract with two community agencies, the Department provided Parents as Tender Healers (PATH) pre-service training to 2811 traditional applicants in all twelve regions across the state between July 1, 2018 and June 30, 2019. As a result of a successful expansion of the Kinship PATH pilot for kinship applicants we now offer Kinship PATH in all twelve regions and we trained 1112 kinship applicants during this period. The Kinship PATH is a 16-hour condensed pre-
service training for kin families. In addition, the applicants are able to complete training in just two and a half weeks.

The Foster Parent Training program hosted an annual conference for 707 foster parents. A total of 96 workshops were attended by foster parents, along with an additional training on trauma related topics from a keynote speaker. Parents were able to receive a maximum of 21 hours of training credits in one weekend.

During the 2018-2019 fiscal year, 63% of foster parents were in compliance with training. Although, this did not meet our 80% goal, we were able to note a drastic increase in compliance from the 2017-2018 fiscal year. During the previous fiscal year, 39% of foster parents were initially in compliance. Next, DCS currently mandates Prudent Parenting and What to Know about Child Exploitation for all foster parents. In addition, parents are required to receive a minimum of 15 hours of training credit annually. Between July 1, 2018 and June 30, 2019, 1125 (of 1,897) foster parents completed Prudent Parenting training and 1091 (of 1,897) completed the What to Know about Child Exploitation training.

Next, DCS experienced a major milestone by completing the national pilot Core for Teens that was sponsored by the Children's Bureau and Spaulding for Children. There were 58 foster parents that completed the pilot that included Self-Assessment, 15 hours of classroom training, and Right-Time online training. The goal of this curriculum is to increase stability and permanency, while promoting social and emotional well-being for older youth who have experienced trauma and now exhibit challenging behaviors.

Finally, the Foster Parent Training Program is unique in that the program also develops Foster Parent Trainers, who are DCS and private agency staff, across the state. The Foster Parent Trainers are instructed and provided with training skills, tools and curriculum to develop quality foster, adoptive, and kinship parents who are professional and well prepared. There were approximately 536 Foster Parent Trainers trained across the state from July 1, 2018 to June 30, 2019.

**DCS Tuition Assistance Programs**

**Bachelor of Social Work (BSW) Tuition Assistance Program:** The Bachelor of Social Work (BSW) Tuition Assistance Program will continue to provide financial support for selected social work majors who commit to working with children and families at DCS immediately after graduation. In this program, students agree to work for the Department after graduation for six months for each semester of financial support they receive.

**Master of Social Work (MSW) Tuition Assistance Program:** The Master of Social Work (MSW) Tuition Assistance Program will continue to allow qualified DCS employees to receive financial support to pursue an advanced degree in Social Work in exchange for a commitment to continue to work for the Department upon graduation. As is the case with the BSW Tuition Assistance Program, the employee agrees to continue to work for the Department for six months for each semester of financial support they receive, up to 24 months.
**Strategy:** Develop a strong, healthy, child welfare workforce that has the capacity and capability to meet the unique needs of the families served.

<table>
<thead>
<tr>
<th>CFSR PIP – Goal One: Strategy One – Quality Contacts Initiative</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Training and Professional Development</td>
<td>Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CFSR PIP – Goal Three: Strategy One – Team Leader Mentoring and Enhancement Project</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of Program Evaluation</td>
<td>Regional Directors</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work with University partners to support the development of strong Social Workers who have the skill set to provide the quality services necessary to promote success for families.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Training and Professional Development</td>
<td>University of Tennessee College of Social Work</td>
<td>July 1, 2020</td>
</tr>
<tr>
<td>Executive Director of Human Resources</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Revise DCS pre-service training program.</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Director of Training and Professional Development</td>
<td>July 1, 2020</td>
<td></td>
</tr>
</tbody>
</table>

**CFSR PIP – Goal One: Strategy One: Implement Quality Contacts Initiative.** Supervisors provide caseworkers with monthly case specific coaching toward achieving improved global assessment that is integrated in case planning and ongoing assessment. Caseworkers and supervisors participate in ongoing learning and implement small tests of change to improve practice and related documentation over a six month period.

- Key activity c.: Team Leaders and Team Coordinators participate in three supervisory level, face-to-face small group, classroom style coaching sessions in the pilot regions (one every four weeks). Work through coaching on a selected case to receive and give coaching. These sessions will focus on caseworker practice regarding safety, permanency and well-being with each family and team member each month.
- Include in CFSP, PIP strategies being piloted for statewide expansion during the CFSP period. This strategy is referenced in the table above.

**CFSR PIP – Goal 2 – Strategy 1:** Tennessee is developing strategies and key activities in coordination with the Administrative Office of the Courts (AOC) to support Safe Baby Courts (SBC) in Coffee,
Davidson, Grundy, Johnson, Knox, Madison, and Stewart Counties and will identify future sites. These strategies address access and quality of services.

- Key activity 4c - Implement and monitor the collaborative pilot project with Omni Community Health to provide intensive In Home services and case management to FSS cases transferred from the drug team in the Northeast region.

CFSR PIP – Goal 3 – Strategy 2 – Key Activity 1: Implement the CORE for Teens training initiative in three Regions (Northwest, Shelby County, and Davidson County) along with a community provider, Omni Visions, who will work in conjunction with DCS in the western part of the state. The two urban regions were chosen for placement stability reasons and extensive involvement in placing teenagers in foster care.

**Service Array**

DCS was not found to be in substantial conformity with this systemic factor during the 2017 CFSR.

DCS is committed to expanding the service array. Several areas of needed improvement that were recognized during the 2017 and 2018 CFSRs appear to be linked to the need to expand quality services to rural areas of the state. Children in foster care may be placed out of area for services not available in their home community. This often resulted in family having difficulty financially maintaining frequent quality visitation with the child in care.

While DCS does well recruiting and training foster homes, often the children placed into foster care from that county do not match the demographics of what those Foster Parents serve. For example, most foster homes want younger children. However, in most counties the children in care are teenagers. Also, the organizations that DCS contracts with to provide therapeutic foster care often do not have an available home near the child's community that can meet his/her specialized behavioral needs.

The lack of services available to parents also was impacted by the service array. Birthparents may be unable to receive the services that they need near their home community due to unavailability of the service, waitlists for the services, or insurance barriers. Many birthparents had to drive some distance to participate in services.

Executive Order One, issued by Governor Bill Lee, identified fifteen rural counties that were economically distressed. This Executive Order asks all state agencies to expand services if possible in those counties. DCS is currently in the planning stage of focusing services in those counties. Please see Executive Order One attached.

Through focus groups with internal and external stakeholders DCS learned that many courts, Guardians ad Litem, parent attorneys, and newer DCS Caseworkers do not often know what services are available within the county they serve. DCS is in the planning stages of developing a strategy to ensure that available services are identified and shared with stakeholders.
DCS recognizes that the Resource Linkage Program can be re-focused to help meet the goal of moving to a more prevention focus. Realignment of this program is in the early stages of planning. However, certain areas of the state have very successful Resource Linkage Programs and those areas will be studied to identify best practices for when the realignment is implemented.

<table>
<thead>
<tr>
<th>Strategy: DCS will collaborate with other organizations to expand the service array for families of Tennessee</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFSR PIP – Goal Three: Strategy Two– Foster Parent Recruitment and Retention Plans</td>
<td>Executive Director for Permanency</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>Executive Director of Network Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regional Directors</td>
<td></td>
</tr>
<tr>
<td>DCS will begin work to enact Executive Order One in one of the fifteen counties, then expanding until all fifteen counties service array has been expanded.</td>
<td>Executive Director for Permanency/Executive Director of Child Safety</td>
<td>January 1, 2024</td>
</tr>
<tr>
<td></td>
<td>Executive Director for Child and Family Well-Being/Executive Director of Network Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regional Directors</td>
<td></td>
</tr>
<tr>
<td>Conduct an assessment of the Resource Linkage Program in each region in order to design a restructure that will focus on prevention services to children and families in all service regions.</td>
<td>Executive Director for Permanency/Executive Director of Child Safety</td>
<td>July 1, 2021</td>
</tr>
<tr>
<td></td>
<td>Executive Director for Child and Family Well-Being/Executive Director of Network Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regional Directors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Director of Program Evaluation</td>
<td></td>
</tr>
</tbody>
</table>
DCS will work with Child Advocacy Centers, Citizen’s Review Panels, and Community Advisory Boards across the state to listen to the community and support enhancement of needed services in each service region.

Executive Director for Permanency/Executive Director of Child Safety

Executive Director for Child and Family Well-Being/Executive Director of Network Development

Regional Directors

Director of Program Evaluation

July 1, 2021

**Agency Responsiveness to the Community**

DCS was found to be in substantial conformity with this systemic factor during the 2017 CFSR.

The Department is committed to engaging all levels of internal and external stakeholder in developing the Annual Progress and Services Report (APSR), as it did with the development of this CFSP. Many of the CFSR PIP strategies involve engagement of the community and ongoing communication between DCS and all stakeholders. The annual Joint Planning Sessions moving forward will include multiple external stakeholders. Activities such as Safe Baby Courts, Interagency Quality Assurance WebExs, and CFSRs will continue to include internal and external partners.

DCS will continue to coordinate services with the Tennessee Department of Human Services, Tennessee Department of Mental Health and Substance Abuse Services, Tennessee Department of Developmental Disabilities, Tennessee Department of Education, Tennessee Department of Corrections, and Tennessee Bureau of Investigations. Strengthening these relationships will also be a focus for DCS over the next five years. Stakeholder Groups will begin meeting in December 2019 to review the final 2020-2024 CFSP and begin developing the APSR. These groups will include representatives from other state departments and service providers, judges and attorneys. Tennessee plans to use these stakeholder groups as a method to maintain substantial conformity. In addition the Children's Advisory Council is scheduled to meet regularly in 2019 and will be included in reviewing the 2020-2024 CFSP and development of the APSR. Members of the Council include but are not limited to representatives from the following:

- Local law enforcement
- Mental health professionals
- Local education agencies
- Juvenile Court Officials
- Social Workers
- Healthcare providers
- Consumers of services such as parents, foster parents or family members of children who have been or are service recipients
- Child advocates
- Persons having specialized knowledge or experience
- Public agencies that provide services to children
- Private agencies that provide services to children
- Faith-based providers
- Youth Voice

<table>
<thead>
<tr>
<th>Strategy:</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DCS will enhance relationships with external stakeholders.</strong></td>
<td><strong>Executive Director of Child Safety</strong>&lt;br&gt;&lt;br&gt;<strong>Administrative Office of the Courts</strong>&lt;br&gt;&lt;br&gt;<strong>Regional Directors</strong></td>
<td><strong>Ongoing</strong></td>
</tr>
<tr>
<td>CFSR PIP – Goal Two: Strategy One – Safe Baby Courts</td>
<td><strong>General Counsel</strong>&lt;br&gt;&lt;br&gt;<strong>Administrative Offices of the Courts</strong>&lt;br&gt;&lt;br&gt;<strong>Regional Directors</strong></td>
<td><strong>Ongoing</strong></td>
</tr>
<tr>
<td>CFSR PIP – Goal Four: Strategy Three – Court Improvement</td>
<td><strong>c.</strong> Continue to solicit internal and external input on a regular basis through surveys, focus groups, work groups, and presentations with stakeholders.&lt;br&gt;&lt;br&gt;<strong>d.</strong> Joint Planning sessions will include more voice of the stakeholder in development of APSR.</td>
<td></td>
</tr>
</tbody>
</table>
Foster and Adoptive Parent Licensing, Recruitment, and Retention

DCS was not found to be in substantial conformity with this systemic factor during the 2017 CFSR.

DCS recruits foster parents who are capable to provide for the safety, permanency, and well-being of children and are fully prepared to serve in this capacity. This is also applicable to relatives and kin who are potential placement resources for children under the Interstate Compact on the Placement of Children.

Each region is required to establish an annual recruitment and retention plan. Various strategies are implemented to meet regional goals. Regional staff continues to educate themselves to evaluate demographic data and utilize heat mapping to better target placement needs in their region specifically as it relates to minority groups.

Regionally, recruitment and retention plans have varied in success. However, statewide goals under the TN Fosters Initiative have been exceeded three years running.

Standards for foster home approval are applied equally with non-safety accommodations provided for relative/kin placements. DCS policy has been revised to include any national licensing standards as required under the Family First Prevention Services Act. DCS meets and exceeds the criminal background check requirements for foster parent applicants and all adult household members. Non-smoking Foster Homes and immunization requirements were the only areas that DCS was not in compliance. New policies are in process of being developed to meet these standards.

Foster homes are re-assessed biennially to ensure that approved foster parents remain capable of providing for the safety, permanency and well-being of the children placed in their care and that they continue to serve children in their home in accordance with current DCS Policies and Procedures.

In an effort to meet systemic factors as it relates to preserving family connections, foster parent pre-service and in-service trainings are being revised to educate foster parents to the importance of reunification, birth parent mentoring, and understanding grief/loss and attachment.

DCS is currently in process of applying for the grant to help develop the new ICPC system, NIECE. DCS was found to not be in compliance with Item 35 (diligent recruitment that matches the ethnic or racial diversity of children) or Item 36 (cross-jurisdictional resources). These two areas, as well as increasing foster home placement availability in each county will be the focus for DCS over the next five years.

<table>
<thead>
<tr>
<th>Strategy:</th>
<th>DCS will meet substantial conformity</th>
<th>Responsible Party</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standards for the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention.</td>
<td>CFSR PIP – Goal Three: Strategy Two– Foster Parent Recruitment and Retention Plans</td>
<td>Ongoing</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Incorporate Children’s Bureau “Foster Parents as a service to families, not a substitute” vision into recruitment and training of Foster Parents, both DCS and provider agency.</td>
<td>Executive Director for Permanency/ Executive Director of Network Development Regional Directors</td>
<td>July 1, 2021</td>
<td></td>
</tr>
<tr>
<td>DCS and provider agencies will collaboratively conduct an analysis of the types of Foster Homes available in each county that meet the demographics and unique needs of the children from those counties in order to obtain a true picture of recruitment needs.</td>
<td>Executive Director for Permanency/Executive Director of Network Development Contract Provider Network</td>
<td>July 1, 2021</td>
<td></td>
</tr>
<tr>
<td>DCS will begin enforcing policies to ensure that Foster Parents have non-smoking homes and the appropriate immunizations.</td>
<td>Executive Director for Permanency Regional Directors</td>
<td>July 1, 2019</td>
<td></td>
</tr>
</tbody>
</table>
DCS will develop a project management plan to design and implement the new NIECE system for ICPC.  

Executive Director for Permanency  
Chief Information Officer  
Assistant Commissioner for Finance and Administration  

July 1, 2020

Plan for Enacting the State’s Vision

Goals

**Goal One:** DCS will collaborate with providers, juvenile courts, community advisory boards, child advocacy centers, and community organizations to expand the service array in Tennessee.  

**Rationale:** While DCS is committed to moving to a more prevention focused system, quality prevention services must be available to families across the state. It became clear through focus groups that many juvenile courts do not know about or trust some service providers.

**Goal Two:** DCS will work collaboratively with providers and juvenile courts to conduct in-depth utilization reviews on all children in the foster care system.  

**Rationale:** DCS has seen an increase in the number of children coming into the foster care system. The opioid crisis has fueled some of this increase. However, it is apparent through CFSRs, as well as focus groups, that DCS has a number of children in care for reasons other than dependency or neglect (unruly, bench order for services, etc.). In order to put a greater financial impact to prevention services, DCS must be able to reduce the number of children in foster care.

**Goal Three:** DCS will improve workforce recruitment, onboarding, training, mentoring, coaching, and retention.  

**Rationale:** DCS has seen a very high level of workforce turnover. It has also been evident through CFSR and focus groups that Caseworkers do not always have the skill set needed to conduct quality visitation or informal assessments. It was also evident that frontline supervisors often lack the ability to properly coach and mentor staff. DCS must be able to recruit, train, and retain quality staff in order to meet the goals identified.
**Goal Four:** DCS will work with Foster Parents and providers to provide support, training, and evaluation in shifting the focus to foster care being a service to families and not a substitute for parents.

**Rationale:** The philosophy of foster care as a service will require a shift in culture for Foster Parents in Tennessee. A structured messaging will be required and reinforced through regular required trainings. This will also impact recruitment and screening practices for Foster Parents.

**Objectives & Measures of Progress**

<table>
<thead>
<tr>
<th>Goal One: DCS will collaborate with providers, juvenile courts, community advisory boards, child advocacy centers, and community organizations to expand the service array in Tennessee.</th>
<th>Action Steps:</th>
<th>Completion Date</th>
<th>Measure of Progress</th>
</tr>
</thead>
</table>
| **Objective One:** Assess the existing Resource Linkage Program to determine enhancements that will benefit and expand the program, allowing families to have access to services without an open case with DCS. | 1. Complete assessment of Resource Linkage Coordinator Job Duties.  
2. Set Resource Linkage Coordinator Job Plan to be consistent across state.  
3. Educate all Resource Linkage Coordinators on FFPSA.  
4. Develop any needed enhancements or changes in duties. | July 1, 2021 | New Resource Linkage Policies  
Assessment Results  
Increase number of responses to families. (Baseline to be determined) |
| **Objective Two:** Conduct a Needs Assessment in each service region that will focus on available non- | 1. Use Executive Order One Format to complete an assessment of available | July 1, 2021 | Needs Assessment  
Guide to available services produced for |
| Objective Three: Coordinate, train, and assess the role of the DCS Court Liaison in each county, as these workforce members have direct communication with the courts. This can enable Juvenile Court Judges to have the most up to date information about quality services in their jurisdiction. | 1. Complete assessment of Court Liaison job duties.  
2. Set Court Liaison Job Plans to be consistent across the state.  
3. Provide training for Court Liaisons on FFPSA and available resources in each county (Online guide with hard-copy guide provided to each juvenile courtroom). | July 1, 2021 | Percentage of Court Liaisons that are trained. (Baseline to be determined).  
Increase in prevention services referrals from court (Baseline to be determined). |

| | services in each region.  
2. Consult with Resource Linkage Coordinators, courts, and local chamber of commerce to determine potential gaps.  
3. Review data from FAST to determine needs of families from each county.  
4. Implement, support, and evaluate an In Home Practice Model, called Family Support Service (FSS) that guides and strengthens the delivery of In Home services to children and families. Staff will develop a deeper understanding of familial issues influencing child safety, well-being and permanency, leading to clear identification of service needs. | | |
<table>
<thead>
<tr>
<th>Community</th>
<th>Counties Served</th>
</tr>
</thead>
</table>

**Objective Four: CFSR PIP Strategy Three – Revitalize CFTM Process.** This PIP goal will also help ensure that Skilled Facilitators have the most up to date information for resources available in communities to help plan services for families.

<table>
<thead>
<tr>
<th>Goal Two:</th>
<th>DCS will work collaboratively with providers and juvenile courts to conduct in-depth utilization reviews on all children in the foster care system.</th>
<th>Action Steps:</th>
<th>Completion Date</th>
<th>Measure of Progress</th>
</tr>
</thead>
</table>
| **Objective One:** Develop a comprehensive utilization review instrument that will be implemented on a quarterly basis at each contract provider to determine if children are receiving the appropriate services to move to permanency in a timely fashion and that those children are being served in the least restrictive environment possible. | 1. Develop Utilization Tool for providers.  
2. Office of Continuous Quality Improvement and Office of Network Development to collaborate on development of a utilization review plan.  
3. Present utilization review tool to providers and develop plan for ongoing reviews. | July 1, 2020 | Review Tool  
Evidence of Reviews  
Decrease in time to permanency for children in care. (Baseline to be determined) |

**Objective Two: CFSR PIP – Goal Four: Strategy Three – Court Improvement.**

<table>
<thead>
<tr>
<th>See CFSR PIP</th>
<th>Ongoing</th>
<th>Completion of PIP Strategy</th>
</tr>
</thead>
</table>

### Action Steps:

1. Develop Utilization Tool for providers.
2. Office of Continuous Quality Improvement and Office of Network Development to collaborate on development of a utilization review plan.
3. Present utilization review tool to providers and develop plan for ongoing reviews.

<table>
<thead>
<tr>
<th>Measure of Progress</th>
</tr>
</thead>
</table>
| Review Tool  
Evidence of Reviews  
Decrease in time to permanency for children in care. (Baseline to be determined) |
Objective Three: Conduct a random assessment of reason for custody for children in foster care in each service region. This assessment will identify the number of children who enter care for reasons other than true dependency or neglect.

<table>
<thead>
<tr>
<th>Action Steps</th>
<th>Completion Date</th>
<th>Measure of Progress</th>
</tr>
</thead>
</table>
| 1. Office of Continuous Quality Improvement will work with STS to identify reasons for custody of sample of children in each region.  
  2. Sample will be compared to services available in each county to determine gaps. | July 1, 2021    | Completed Assessment Baseline goal will be determined for regions or counties determined to have a large percentage of children entering care for services only. |

Goal Three: DCS will improve workforce recruitment, onboarding, training, mentoring, coaching, and retention.

<table>
<thead>
<tr>
<th>Objective One: CFSR PIP – Goal One: Strategy One – Quality Contacts Initiative. This PIP strategy will improve the Caseworkers’ ability to conduct quality visits with children, as well as birthparents and</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective One: CFSR PIP – Goal One: Strategy One – Quality Contacts Initiative. This PIP strategy will improve the Caseworkers’ ability to conduct quality visits with children, as well as birthparents and</td>
</tr>
<tr>
<td>See CFSR PIP</td>
</tr>
</tbody>
</table>
conduct quality informal assessments during those visits.

<table>
<thead>
<tr>
<th>Objective Two: CFSR PIP – Goal Three: Strategy One – Team Leader Mentoring and Enhancement Project. This PIP strategy will help frontline supervisors have the skills necessary to coach and mentor Caseworkers to ensure that quality visitation and assessments are occurring.</th>
<th>See CFSR PIP</th>
<th>Ongoing</th>
<th>Completion of PIP Strategy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Objective Three: DCS will utilize the Baldrige Framework – Category Five: Workforce to increase workforce engagement and ensure that all workforce members are listened to and able to enact innovative change through the existing CQI system.</th>
<th>1. Office of Continuous Quality Improvement will partner with Office of Human Resources and Office of Professional Development and Training to develop a plan along the Baldrige Framework – Category 5. 2. Gaps will be identified and action steps developed based on assessment upon completion of Category Five planning sessions.</th>
<th>July 1, 2021</th>
<th>Increased employee satisfaction rates (Baseline to be determined)  Decreased turnover rates (Baseline to be determined from year prior to full initiation of objective)</th>
</tr>
</thead>
</table>
**Goal Four:** DCS will work with Foster Parents and providers to provide support, training, and evaluation in shifting the focus to foster care being a service to families and not a substitute for parents.

<table>
<thead>
<tr>
<th>Action Steps:</th>
<th>Completion Date</th>
<th>Measure of Progress</th>
</tr>
</thead>
</table>

**Objective One:** PATH training for both DCS and provider agencies will include new curriculum that emphasizes the importance of mentoring birth-parents.

1. Office of Training and Development will work with Capacity Building Center and others to determine new curriculum to implement in order to move foster parents to understanding their role as a mentor.

2. New training curriculum will be implemented and provided to all new foster parents during initial training.

3. New training will be initiated and required of all current Foster Parents.

| 1. Office of Training and Development will work with Capacity Building Center and others to determine new curriculum to implement in order to move foster parents to understanding their role as a mentor. | July 1, 2021 | New curriculum |
**Objective Two:** DCS will strategically examine the willingness of Foster Parents to serve as mentors during the initial recruitment and training process.

1. New questions about serving as a mentor will be added to foster parent inquiry calls.
2. Office of Professional Development and Training will develop an assessment tool to rate a foster parent's willingness to mentor as they go through PATH sessions.

| July 1, 2021 | New recruitment plan will be developed that addresses how applicants will be screened. |

---

**Staff Training, Technical Assistance and Evaluation**

DCS has a goal to have a strong, healthy, child welfare workforce to achieve better outcomes for families. Objectives in support of this goal include:

- The Quality Contacts Initiative
- The Assessment Integration Model (*This is mentioned in the goals, but I can’t find anything already written about this model in the rest of the report. We may want to add something here.*)
- The Team Leader Mentoring and Enhancement Project
- Pre-Service Revision
- Working with University Partners to support the development of strong Social Workers who have the skill set to provide the quality services necessary to promote success for families.

DCS has incorporated a new Quality Contacts Initiative as identified in the approved CFSR PIP. This initiative was originally piloted in the Smoky Mountain, Davidson County, and Upper Cumberland service regions. Each region saw some improved progress between the 2018 CFSR and the 2019 CFSR review. The program evaluation that was conducted also showed progress. This initiative includes one-day training from Caseworker and supervisors on the components of a quality visit with children, as well as birthparents, based on CFSR requirements. A checklist was developed to help Caseworkers understand what should occur at each visit, with emphasis on Item 3, and Items 12-18.

The Quality Contacts Initiative also supports the following strategies:

- Ensure children receive timely, initial and ongoing safety assessments
- Ensure that children and families receive quality formal and informal assessments, as well as quality visitation from Caseworkers in order to increase engagement of families in case planning.
- Ensure that all children receive quality educational assessments and services as applicable.

A coaching component to the training was added for immediate supervisors based on the Child Welfare Skills-Based Coaching Modes and Core Steps in Coaching as outlined in the Capacity
Building Center's Child Welfare Brief. The Department’s Case Process Review (CPR) system has been incorporated to address the CFSR Items. This allows each Caseworker to get feedback on documentation quarterly through this process. A Reliability Review of CPR cases is conducted on a small sample of cases. Reliability Reviews are conducted by trained CFSR Reviewers form the Office of Continuous Quality Improvement to provide feedback to both the Caseworker and supervisor.

The Team Leader Mentoring and Enhancement Project as identified in the approved CFSR PIP has recently been initiated in the two pilot regions. This project will provide supervisors with the necessary skills and assess current skills to coach and mentor quality visitation and informal assessments. This project is very promising and will be evaluated upon completion of the pilot. The Team Leader Mentoring and Enhancement Project also supports the following strategies:

- Ensure children receive timely, initial and ongoing safety assessments
- Ensure that children and families receive quality formal and informal assessments, as well as quality visitation from Caseworkers in order to increase engagement of families in case planning.

The Office of Professional Development and Training is in process of updating the pre-service training for new Caseworkers. This update is based from finding during the 2017 CFSR, as well as from information collected during focus groups that occurred while developing the CFSR PIP and CFSP.

DCS will be conducting an analysis of the OJT Coach role and working to strengthen this component of training, as it was found to be a crucial missing piece that could help improve the skills of new Caseworkers. This issue was mentioned frequently during focus groups with all levels of workforce members.

**Implementation Supports**

Goal Four of the CFSR PIP was designed to assure that the CFSP; results from the CFSR, and CFSR PIP were all incorporated into a meaningful plan that can help improve outcomes for children and families. DCS has incorporated the FFPSA, as well as the Tennessee Governor's Priorities and the organization's State Strategic Plan into one comprehensive and aligned plan. No additional workforce, training, coaching, policies or other implementation supports outside of those specified in the CFSR PIP or in the action steps above have been identified or are planned. DCS will continually evaluate to determine if additional supports are needed as the CFSP and CFSR PIP objectives and strategies are implemented.
Services

Child and Family Services Continuum

Community-Based Child Abuse Prevention (CBCAP)

Tennessee's CBCAP program receives consistent funding from federal and state-matched dollars which are distributed through publically-available child abuse prevention grants. The grants are specific to delivering primary and secondary prevention services through the Stewards of Children training and Nurturing Parenting Program curriculum. Community-based agencies are free to develop a program specific to the needs of their community.

As a part of Tennessee's Children's Trust Fund, Tennessee is looking for opportunities to expand prevention-related activities and services through publically available grants and increase funding for CBCAP programs.

DCS embraces the opportunity to work with Community Advisory Boards (CABs). CABs support the work of the Department's vision keeping Tennessee's children safe, healthy and back on track for success. CABs bring a commitment, knowledge and skillsets that enrich the Department's work. CABs allow the Department to stay in communication with community partners. Through collaboration, DCS can leverage strengths and resources to meet immediate needs, address systematic issues and build for the future. DCS recognizes that there is opportunity to enhance relationships with external stakeholder. CABs provide the prefect venue to accomplish this task.

Family Preservation

The state's family preservation contracts include family violence intervention, family visitation, and family support services contracted agencies currently provide these services to children and families across the state.

- Family Visitation Services are provided to enhance the opportunities parents have to practice parenting skills and demonstrate their ability and to help build safe and healthy relationships. Family Visitation staff deliver services including preparing the child, parents and siblings for the visit, facilitating appropriate child/parent interaction during each supervised visit and providing feedback and coaching to parents during and after each visit.

- Family Violence Intervention Services are designed to help end the debilitating effects of the cycle of violence within families by promoting the five protective factors. Services also work to empower individuals to become self-sufficient and develop a capacity to maintain a violence-free lifestyle. For DCS cases involving family violence, there is an increased concern that abuse suffered by the victims can seriously compromise the safety of children in those families. Family Violence Intervention Services work to meet the multiple needs of families that are affected by both child maltreatment and family abuse.

- Family Support services encompass a wide range of flexible and responsive service tailored to the individual child and family's strengths and needs. Specifics service include, but are not limited to parent skill building, teaching and modeling, advocacy, crisis management, anger
management, stress reduction, conflict resolution, interpersonal communication, utilizing community resources and other service not covered by TennCare.

**Time Limited Family Reunification**

Time Limited Family Reunification services are provided from the Department, primarily, through either the Foster Care Placement Continuum (described in the section on Child and Family Service Continuum) or a contract with Youth Villages Inc. and their Intercept Program. The Youth Villages Intercept in-home services program provides treatment to troubled children and families in their own homes at times convenient for the families.

- The program serves children of any age (infant to age 18) who have serious emotional and behavioral problems.
- Intercept specializes in diverting youth from out-of-home placements such as residential treatment facilities, foster homes, psychiatric residential treatment centers, hospitals or group homes, and in successfully reuniting children with their families in the community.
- Diversion services generally last four to six months, while reunification services generally last six to nine months. Intercept family intervention specialists are skilled at reuniting families even when the child has been out of the home for an extended period.

All treatment is family-centered and includes strength-based interventions. Intercept's comprehensive treatment approach includes family therapy, mental health treatment for caregivers, parenting skills education, educational interventions, development of positive peer groups, and extensive help for families and children in accessing community resources and long-term, ongoing support.

Intercept family intervention specialists provide services to the family, rather than just to the youth, meeting with families at least three times weekly and remaining on-call around the clock. Youth Villages tailors services to meet each family's needs, while measuring treatment progress through ongoing assessment and review. Specialists collaborate with other providers, case workers and courts to formulate a collaborative treatment plan. Small caseloads – four to six families – allow the family intervention specialists to focus on the individual needs of each child and family served.

Adoption Promotion and Support Services are provided through the Departments pool of regional staff identified as Permanency Specialists dedicated to supporting assigned Family Service Worker’s, children, and potential adoptive families, when children have an identified permanency goal of adoption. The Permanency Specialists have expertise in the areas of Adoption and Subsidized Permanent Guardianship (SPG). Additionally, the Department has partnered via contract with Harmony Family Center to provide pre and post adoption support through their Finding Our Children Unconditional Support (FOCUS) and Adoption Support and Preservation (ASAP) programs.
Finding Our Children Unconditional Supports (FOCUS)

The FOCUS program at Harmony Family Center allows staff to make referrals for additional case support for children in need of adoptive families or planned exits to adoptive permanency. Each month all of the children in full-guardianship to the agency are reviewed by region to assess progress in their exit to adoptive families. Involved in these discussions are key stakeholders to the Child and Family Team that includes: DCS Central Office Lead, Regional Permanency Specialist, assigned Harmony Resource Coordinator (RC), Private Provider Staff, and other stakeholders. Conversations are driven by identifying whether the child has an adoptive family identified. Depending on the answer to that question for each child, unique tasks and action steps are identified and documented.

Each child that does not have an adoptive family identified it is required that their case file have thorough review (including expanded diligent search), an Individual Recruitment Plan (IRP) is developed, the Child and Family Team be expanded, and that they be photo-listed to AdoptUsKids. These tasks are completed in partnership with the regional Department staff, the provider, and the Harmony Resource Coordinator. The RC from Harmony may also take the lead in coordinating additional recruitment tasks such as following up with inquiries from potential adoptive families that are generated from AdoptUsKids or other recruitment activities.

For children in anticipated adoptive families, the FOCUS partners are targeting their work on completing pre-placement and presentation summaries, determining adoption assistance eligibility, providing Full-Disclosure, and supporting the family to sign their Intent to Adopt. When families are anticipated, much of the time is spent in gathering documents for full-disclosure and preparing the adoptive family and child for permanency.

Once the four tasks for an anticipated family is complete, the child is recognized as being in an identified adoptive home. While in this status, the FOCUS work is directed toward getting the adoption finalized in court. If any barriers are identified prior to the court hearing, the FOCUS team partners to get those resolved. Examples of these barriers include the need for additional preparation, referral to additional community-based services, ICPC issues, etc.

The FOCUS contract and our process for monthly review of the individual cases have played an important role in the State's recognition as being a national leader in timeliness to adoptive permanency. The partnership and coordination between the many stakeholders involved has resulted in getting children to forever families and an increase in adoptions of 29%, last year.

Adoption Support and Preservation

Tennessee began a statewide Adoption Support and Preservation program (ASAP) in 2004, prompted by the settlement of a lawsuit, Brian A. v. State of Tennessee. (Section 8 of the settlement agreement dealt with adoption and post-adoption support to families.) Services are provided through a contract with Harmony Adoption Services in Maryville and Knoxville, TN, that serves eastern Tennessee. Harmony subcontracts with two other private agencies – Catholic Charities in
Nashville serves mid-Tennessee, and Agape Child and Family Services in Memphis and Jackson serves the western part of the state. ASAP services include crisis intervention, in-home therapeutic counseling, monthly support groups, respite team building, adoption preparation classes and other educational opportunities for families, and other advocacy. This program is funded at $2.1 million and serves over 1,000 families annually.

The Adoption Assistance agreement, the Intent to Adopt form that families sign prior to adoption, and the agency website all refer adoptive families to the ASAP program. Some workers begin talking to families about this service prior to adoption and encourage them to participate in an adoption preparation course offered by the ASAP program. Despite formal efforts to educate families about the availability of ASAP, the program's providers report that many families do not know about their availability.

The ASAP program sponsors an annual Cycles of Healing Conference for adoptive families and clinicians and maintains a lending library of books, CDs, DVDs, and board games for adoptive families. An 8-12 hour adoption preparation training is offered to pre-adoptive families based on a curriculum developed by the program. The first four sessions of the training is dedicated to the caregiver, and the second half is child-specific preparation focused on their child's specific story and trauma history.

Each of the ASAP programs in the three grand regions of the state designs monthly support groups for their geographic service area, with groups offered in approximately 12 sites around the state. Some locations have groups for children and parents, while others just serve parents. One area has an adopted teens' support group. They have tried different approaches to maintaining support groups, and still find that some are well attended (15 families) while others struggle to gel (3 families).

ASAP requires that therapists contact adoptive families in crisis (about 40%) within 24 hours and have a face-to-face meeting within 48 hours of their initial phone call. In-home counseling with an ASAP Family Therapist is free to all families who adopted through Tennessee DCS and available on a sliding-scale fee to other types of adoptive families. There are approximately 15 therapists who work in the program across the state. The East Tennessee program has offices in Maryville and Knoxville, but many of their therapists work out of their homes in other cities such as Chattanooga and Oak Ridge. The central and west Tennessee programs have their therapists based in agency office locations.

The primary evidence-informed practice that permeates clinical practice from assessment and treatment planning to supervision is ARC (Attachment, Self-Regulation, and Competency), and TF-CBT (Trauma-Focused Cognitive Behavior Therapy) also is used heavily. Tennessee has a special program headed by Vanderbilt University's School of Medicine with partners at several other state universities – Center of Excellence for Children in State Custody – that seeks to improve the quality of health and behavioral health care services to these children. The Center established a learning collaborative and provided training on ARC and TF-CBT to community mental health providers as well as to most of the ASAP clinicians. The program utilizes statewide case consultation and is
planning statewide case reviews to provide learning opportunities to enhance ARC usage and application.

ASAP therapists also use aspects of other intervention treatment models, including Trust-Based Relational Intervention (4 therapists have attended the week-long training in Texas), Circle of Security and Parent-Child Interaction Therapy. Agency staff reported that it is difficult to consistently utilize some of these models because even after therapists are trained and certified in a treatment modality, they must pay significant fees for ongoing supervision to maintain the credential.

The service statistics for 2011-2012 report 680 adopted children served, with an average length of treatment of 7.2 months. For pre-adoptive children, there was a disruption rate of 5% among families served, and for post-adoptive families, a 1% dissolution rate.

Foster Care

Children entering foster care receive services based on a level of care determined by the needs of the child through assessments and finalized in the child and family team meeting. Levels of services include Levels 1 - DCS and Contract Agency Resource Homes, Level 2 and 3 – Contract Agency Resource home and Congregate Care, Level 4 – Acute Psychiatric Hospitalization, and Youth Development Center placement types. DCS currently has maintains a network of 28 private agencies providing foster care and services to children in the custody of the Department and services to their families. Twenty-four of these contracts are out-of-home continuum contracts. Continuum contracts allow both providers and regions to coordinate services to children and their families while providing the flexibility to customize service delivery on an individual, child-specific basis.

The DCS continuum model was developed in order to effectuate changes in the way out-of-home services are delivered to children in the custody of the state. The protocol associated with the continuum model affords providers greater flexibility in designing services for children and families, the ability to facilitate rapid movement of children through the service system toward permanency as well as the ability to customize the delivery of services to children and families in the least restrictive, family-like setting appropriate to needs and strengths in the most cost-effective manner.

The continuum model as implemented in Tennessee is service-based and geared to purchase successful and timely permanency for children. It provides incentives for placement in the most appropriate, least restrictive, community-based settings. In addition to residential treatment or group home settings, continuum care provides a broad array of treatment and case management services extending to community-based care. These services are delivered by providers in such a way as to meet the clinical, behavioral and medical treatment needs of children.

Children enter a continuum program at a specified level of care. Currently there are three continuum levels of care provided by contract provider agencies: Level 2 Continuum, Level 3 Continuum and Level 3 Continuum Special Needs. Continuum services are initially provided to
children in foster care in a variety of settings but may continue after a child returns home for a period of time to be determined by the recommendations of the most recent child and family team meeting (CFTM).

A continuum provider is responsible for delivering all services necessary for maintaining the stability of the child and family. That service may be delivered in a variety of treatment settings: a Residential Treatment Center, a Group Home, and a Resource Home or in the youth’s home receiving In-Home Continuum Services. If an agency is unable to provide a particular service to a child directly, the provider must procure the service from an appropriately credentialed entity. Children cannot be disrupted from their recommended level of care based on an unavailability of services.

The continuum model requires providers to have the full array of services that will appropriately meet the needs of children at the recommended level. The continuum reimbursement rate is set at a specified amount and this amount remains constant throughout the child or youth’s span of service in the continuum. The reimbursement rate is set at a level that is targeted to encourage providers to move children to permanency or least-restrictive settings quickly and appropriately. This rate also remains constant through the application of In-Home Continuum Services.

Many times, In-Home Continuum Services will be the final phase of continuum service application prior to a child’s discharge to permanency. As such, it is critical that these services be appropriately applied and closely monitored to ensure not only that permanency is ultimately achieved but also that the family will remain intact after the decision to reunify has been made.

As mentioned above, services applied to a case utilizing the continuum are accessed through the recommendation of the Child and Family Team. In the higher levels of care (Level 3 Continuum and Level 3 Continuum Special Needs) these services are coordinated and provided as a part of the private agency’s internal network of services. Service coordination, application and any costs incurred as a result of these services being applied to a case are solely the responsibility of the contracting provider. The application of these services is considered to be a part of that agency’s continuum contract and may not be billed to any other entity.

In a Level 2 Continuum scenario, certain therapeutic services may be accessed using existing community providers outside of the contracting continuum agency. It is the responsibility of the continuum contractor to coordinate these therapeutic services but it is not an expectation that the contracting agency will be responsible for payment. These community-accessed services therapeutic services may be billed to TennCare.

**Independent Living**

Each of the twelve service regions has an Independent Living Program Specialist that attends CFTMs for youth over the age of 14 currently in foster care to discuss services available through the independent living program, funding available through Chafee, and the results of the Ansel Casey Independent Living Assessment, which is now linked to the Permanency Plan in TFACTS.
During fiscal year 2019 DCS privatized the case management services for post-custody youth. Youth Villages was awarded that contract statewide.

**Kinship Care and Planned Permanent Living Arrangement**

Kin Independent Living LifeSet services are provided through a contract arrangement with Youth Villages. The services encompass support and guidance to at risk youth who are leaving the foster care system, to make a successful transition to adulthood. Planned permanent living arrangements is administered in a way that sustains and supports permanency with a committed adult, often a foster parent who can provide ongoing life support when the youth is not open to or accepting other options such as adoption. Kinship care services, which are always the first option explored when children enter custody, are supported through state funded reimbursement to kin families until fully approved and eligible for IV-E reimbursement.

**Service Coordination**

Tennessee requested an extension for the Families First Prevention Services Act and has elected to begin in 2021. A team is being developed and will begin meeting in October to develop the five year plan in October 2019. Progress will be reported in the upcoming APSR. We anticipate when children who are eligible for IVE funding and have parents with substance abuse; coordination will include Department of Mental Health for treatment services, DCS Drug Teams, Hospitals, and Safe Baby Court.

**Service Description**

Tennessee has numerous services available to families. However, as previously stated information about those services are not always known. Services can also be lacking in many rural areas of the state, and workforce turnover at provider agencies can drastically impact the quality of those services. DCS has several objectives in the outcomes and systemic factors section that outline the state's plan to improve these areas of need.

**Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)**

**Services for Children Adopted from Other Countries**

DCS has had a unique, statewide contract with Harmony Family Center, in East Tennessee, to provide post-adoption services to children and families. This service is at no charge to families that adopt from the public child-welfare agency, but legislation was created in July of 2011 that made this service accessible to any family that has adopted internationally, domestically, or privately and resides in the State of Tennessee. When contacted by families that need this type of assistance, staff will work with them to make a referral to Harmony that provides the services to family in-home. The Post-Adoption services from Harmony are delivered by a Master's level Clinician that is versed in several Evidence-Based Practices and is able to assist in referral to other community-based services, when needed. Data associated with services offered by Harmony indicates that less than 2% of the families served by this agency result in adoption dissolution. During the period of 2014-2019 Harmony provided ASAP services to over 133 private, domestic and intercountry families. All
referrals to Harmony are tracked. The historical issue has been not having a mechanism to readily identify out of country adoptions. Effective October 1, 2019, the TFACTS system will have a mechanism to capture this information and referrals for service can be made when indicated/needed.

**Services for Children Under the Age of Five**

DCS will continue to require that every child under the age of three whose investigation results in a classification of “allegation substantiated” or every child under the age of five who is in DCS custody have a referral for screening and eligibility determination to the Tennessee Early Intervention Services (TEIS) program through the Tennessee Department of Education (DOE). TEIS develops an Individualized Family Service Plan (IFSP) for children whose assessment indicates a need for services. At age three, TEIS, in partnership with DCS, when applicable, ensures a timely transition to public school special education services. After the child is approved and receiving services, three to nine months before the child's third birthday, the TEIS service coordinator will work with the family to discuss options for when the child turns three and exits TEIS.

DCS workers across the state are able to access age appropriate therapies for children, as needed. Many local mental health providers are able to provide therapy to children as young as age three. In cases where it is difficult to locate a provider for intensive needs, DCS staff has access to five Center of Excellence (COE) locations statewide. Each COE provides consultation, evaluation, and assists with coordination of services for children and youth in DCS care with unique mental health needs.

The first Infant Court in the state is located in Davidson County through Building Strong Brains: Tennessee's ACEs Initiative. Initiated in October 2016, the court offers specialized, frequent contact to encourage affirmative interaction by biological parents with the infant who is in foster care or to determine that the child will not be with the biological parent so that bonding with an adoptive family occurs early. The purpose is to achieve permanency as quickly and safely as possible. A second court is being developed in Grundy a rural county that will start at the beginning of fiscal year 2020.

Legislation was passed in July of 2017 mandating the Department of Children's Services, in collaboration with the Administrative Office of the Courts (AOC) and the Department of Mental Health and Substance Abuse, to establish Safe Baby Courts in five jurisdictions by January 2018 and five additional jurisdictions by January 2019. The courts are modeled after the Zero to Three core components focusing on babies from the age of birth through to three years with the goal of reducing the time to permanency, reducing repeat maltreatment, reducing trauma, and increasing resource capacity. Currently Coffee, Davidson, Grundy, Johnson, Knox, Madison, and Stewart Counties have Safe Baby Courts. Safe Baby Courts are incorporated into the CFSR PIP (Goal Two – Strategy One). Other services available to eligible children under age five in Tennessee, which includes children in foster care:

- Special education services are provided by public school systems beginning at age three for children who demonstrate need;
- Early Head Start: Pre-natal to age three if the family is economically qualified;
Books from Birth: program providing one free book per month for children under the age of five regardless of income.

Even Start: An education program for economically qualified families that is designed to improve the academic achievement of young children and their parents, especially in the area of reading. Serves children through age seven.

Pre-Kindergarten Programs: Voluntary public school programs serving four year olds. DCS has priority status for child placement in these programs.

Tennessee Head Start - School readiness program for children age four through age five. DCS has priority status for child placement in these programs.

**Efforts to Track and Prevent Child Maltreatment Deaths**

Tennessee is a mandatory reporting state (TCA 37-1-403) and as such, all child deaths that are suspected to be the result of abuse or neglect must be reported to DCS via the Child Abuse Hotline. This information comes from many sources including law enforcement and the medical examiner’s office, or any other referent with knowledge or suspicion of a child abuse related death. The Child Abuse Hotline collects initial information regarding the child death and enters it into the CCWIS database. Following the initial report, an investigation is conducted and additional information is gathered and entered. Upon conclusion of the investigation, all of the child death information that has been collected is entered into the database. This information is stored and reported to National Child Abuse and Neglect Data System (NCANDS) annually.

DCS worked with external partners and developed a comprehensive Child Death Review (CDR) process and policy. The process dictates activities required related to notifications, case oversight, and data collection. Additionally, the policy includes a robust review protocol, which culminates into an annual report. The CDR process includes participation of external partners and DCS staff. Additional staff positions were created to support the entire review process and training was created and delivered to every person at DCS. In the area of promoting greater transparency for child protection in Tennessee, a method for sharing child death and near death information publicly was executed using the DCS website in Q4 2013. In 2014, DCS began posting, as available, preliminary information on child deaths to its website within two business days. The process for publicly sharing child death and near death information was enshrined in state law as part of TCA 37-5-107(c)(4). The Child Death Annual Report for 2019 has been reviewed by the Commissioner and posted for public view. [https://www.tn.gov/dcs/program-areas/child-safety/cdnd-pn/current-year/2019-deaths.html](https://www.tn.gov/dcs/program-areas/child-safety/cdnd-pn/current-year/2019-deaths.html)

DCS receives information from Vital Statistics, however, this information is usually a year or two behind NCANDS reporting timeframes and does not offer any additional information. With the structure and mandatory reporting requirements set forth by legislation, there is insufficient evidence to suggest that DCS’ CCWIS database is not gathering timely and complete information on child deaths that are suspected to be the result of maltreatment. There is no plan currently to change the process for collecting NCANDS data regarding child deaths.
Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

Promoting Safe and Stable Families - Please see TN FY20 CFS 101 and Payment Limitations reports for Tennessee’s expenditures and activities for FY 2018-2019.

- Out of Home Care (30% Title IV-B Funding Family Preservation)
- Time Limited Family Reunification (20% Title IV-B Funding)
- Adoption Promotion and Support Services (20% Title IV-B Funding)

Service Decision-Making process for Family Support Services

DCS is required to utilize the RFQ (Request for Qualifications) process, which is coordinated through the State of Tennessee Central Procurement Office (CPO). The RFQ process is similar to that of the Request for Proposal (RFP). The procuring agency defines the scope of the work to be provided and sets the evaluation factors. Notices are sent out to all current providers delivering the services on the same date the RFQ is posted on CPO’s website for public viewing. The RFQ has a schedule of events including a conference and a date and time for written questions. The department responds to the questions and the responses are posted as an amendment to the initial RFQ. The date and time for the responses to the RFQ is included in the schedule of events. Responders are held to delivering their proposals on or prior to the date and time identified in the schedule. A minimum of three state employees comprise the team that will evaluate the proposals submitted by the Responders to the RFQ. Scores are assigned for the technical component of the RFQ process. If there is a cost component those will be evaluated in accordance with the schedule of events. The CPO Coordinator compiles the scores from the technical and cost proposals. The responder with the highest combined score is recommended to the commissioner for a contract. The Commissioner is the final approver of the contract. The contract originating from this process follows the rules and policies of CPO.

Populations at Greatest Risk of Maltreatment

- Drug Exposed Children

The populations identified at the greatest risk are the infants born affected by substance abuse. Data was reviewed to determine where the largest amount of child protective services referrals were assigned and a determination was made to assign infants through three (3) months to the drug teams for investigation and family support services if appropriate. This was also created in coordination with 2 large hospitals that have NICU capacity to care for many of these infants, and strongly contributed to making the determination where to create specialized teams in regions located in the eastern portion of the state. According to the data analyzed, these regions had the highest number of cases for CPS as well as infants entering foster care due to substance abuse. The hospitals in this area were also very supportive and collaborative in this approach. Currently, specialized drug teams cover 4 of the 12 regions in Tennessee including Knox, East Tennessee, Smoky Mountain regions, and Northeast in East Tennessee. Planning is underway to expand the
specialized drug teams into other regions with a focus on expanding next into counties that are
underserved to assist in responding to the need for increased services within these counties.

The expansion for the specialized drug teams is also a customer focused goal and included in
the department’s strategic plan.

On October 1, 2018, the drug teams started a partnership with Omni Healthcare to provide intensive
in-home services for families in these cases after the CPS Investigation case is closed. The service
provider is monitored by an OCS FSS team and provides all needed in-home services to the family
and connects family members with needed community resources to assist in addiction services and
recovery.

As of November 26, 2018, the drug teams experienced high turnover due to stress from high
caseloads, long drive times, and complicated cases with lots of court action. Regional investigators
have been utilized to provide additional support to the teams. Additional positions were moved from
local staff to the drug teams to cover the number of referrals assigned to the teams. Due to the
territory covered, a plan was implemented that would reduce the geographic areas covered by each
drug team member.

While the department continues to see opioid affected children, the teams have seen an increased
shift of drug exposed children to other drugs, such as methamphetamines and cocaine. As this
occurs across the state, workshops and/or training is identified and instituted to address the need.
The teams continue to work with community partners to provide intensive in-home services.

Safe Baby Courts were established to recognize the critical stages of development for children ages
0-3 years, by using a specialized judicial approach to coordinate and expedite services that support
and sustain families. This model approach ensures the needs of the infant and parents are tailored
to their specific circumstances and supports critical timeframes unique to child development. The
focus of this effort is to reduce trauma, reduce the length of time to find permanency for the child,
and to increase community involvement that will provide the family long term supports and
partnerships to keep the child safe.

Legislation was passed in July 2017 outlining the collaboration between the Department of
Children’s Services, TN Department of Mental Health and Substance Abuse Services, and the
Administrative Office of the Courts to create Safe Baby Courts in five (5) jurisdictions. Prior to this
legislation, there were two (2) Safe Baby Courts already established. Presently, the seven counties
with active Safe Baby Courts include Madison, Stewart, Grundy, Coffee, Davidson, Knox, and
Johnson. Additional legislation was passed in 2019 to establish five (5) more courts by January 2020,
and they will be located in Henry, Dickson, Rutherford, Jefferson, and Anderson counties. Senator
Ferrell Haile was the sponsor for both legislative bills and has been actively involved in supporting
the Safe Baby Courts.
Commercial Sexual Exploitation of a Minor (CSEM)

DCS Office of Child Safety and the Office of Information Technology have worked together to develop enhancements to the statewide automated child welfare system (CCWIS), TFACTS, to collect and report on victims of sex trafficking. A mechanism has been implemented, for the Child Abuse Hotline to flag any report where there is a suspicion of sex trafficking within TFACTS. Additionally, if at any point during an open Child Protective Services case sex trafficking is suspected or confirmed, the CCWIS system will be able to be updated to acknowledge that sex trafficking is a factor. Trainings, policies, and procedures have been updated to educate staff and support these technological updates.

Additionally, the Tennessee Department of Children's Services has partnered with the Tennessee Bureau of Investigations, Vanderbilt Center of Excellence, and Chapin Hall to develop tools in identification, assessment, and service recommendations for suspected and confirmed victims of child sex trafficking. Custodial and non-custodial assessment tools have been updated to provide risk algorithms to drive preventative services as well as identification functionality to track service implementation on known sex trafficking victims. The Department is also facilitating the formation of regional and geographic coalitions to assist in the service provision to sex trafficking victims to establish increased communication and service flow across child welfare, law enforcement, juvenile court, and private stakeholders.

Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

DCS policies and protocols outline the minimum guidelines for maintaining contact between case workers at DCS and children placed in foster care. In an effort to provide clear and concise instructions for case worker visits, the protocol describes the people responsible, time frames for the visit, and the purpose of the visit including discussion points to be covered. Along with prescribed visitation frequencies, policy also requires that children are visited no less than is needed to assess their progress and ensure their needs are met. The protocol requires that during each face-to-face visit the caseworker, whether DCS or Private Provider, should speak with the child privately for at least some portion of the visit. The policy and protocol outlines the requirements of case manager contacts with service providers and birth parents. DCS also requires that face-to-face visits and other contacts with children, families, service providers and/or courts be documented. The documentation includes identified strengths and needs related to the case, a description of the discussion, observations and any next steps to be completed. To improve engagement and global assessments on In Home cases, DCS implemented a Quality Contacts Initiative. This initiative is expected to strengthen staff’s understanding of how they structure their time with case team members monthly to build the quality of contacts in a way that increases both formal and informal assessment improving the quality of contacts. The initiative began in October 2017 in Davidson, Smoky Mountain and Upper Cumberland regions with all program areas. Caseworkers and supervisors participated in an eight-part (plus one additional session for supervisors) webinar series on Quality Contacts that focused on demonstrating concerted efforts with children, siblings, parents, and out-of-home caregivers. This initiative also included the implementation of a Desk Reference Practice Guide to support staff in writing monthly documentation and new monthly summary. DCS plans to use the Monthly Caseworker Visit Grant funds to support the initiative over the next five years.
Tennessee will monitor monthly caseworker visits through ongoing CFSR reviews. Also, DCS continues to publish Regional Scorecards with aggregate data regarding monthly casework contacts.

### Tennessee Federal Caseworker Face to Face Visits Federal Fiscal Year 2018

<table>
<thead>
<tr>
<th>12810</th>
<th>The aggregate number of children in the data reporting population</th>
</tr>
</thead>
<tbody>
<tr>
<td>86085</td>
<td>The total number of monthly visits made to children in the reporting population</td>
</tr>
<tr>
<td>89424</td>
<td>The total number of complete calendar months children in the reporting population spent in care</td>
</tr>
<tr>
<td>64135</td>
<td>The total number of monthly visits made to children in the reporting population that occurred in the child’s residence</td>
</tr>
<tr>
<td>96.27</td>
<td>Percentage of visits made on a monthly basis by caseworkers to children in foster care</td>
</tr>
<tr>
<td>74.50</td>
<td>Percentage of visits that occurred in the residence of the child</td>
</tr>
</tbody>
</table>

* Population logic is exactly the same logic used in the AFCARS submission 18A & 18B

** Data as of 12/05/2018 Database Instance eidwprd

### Child Welfare Waiver Demonstration Activities

Nurturing Parenting Program (NPP) is implemented in six regions of the state. KEEP is fully implemented in eleven regions and one additional county. Initial evaluation reflects a positive, though not statistically significant, relationship between KEEP and placement stability and a positive, statistically significant relationship between KEEP and permanency. The FAST is fully implemented in the state and continues to undergo enhancements to increase efficacy, ease of use, and application. As a result of the strong relationship with the Waiver evaluators at Chapin Hall, DCS is engaged in ongoing assessment of systems issues beyond the Waiver interventions in order to most effectively align practices, policies, and systems in ways that maximize the effects of Waiver investments.

### Adoption and Legal Guardianship Incentive Payments

DCS will follow the guidelines of the FFPSA and has elected to begin in 2021.

### Adoption Savings

DCS will follow the guidelines of the FFPSA and has elected to begin in 2021.
Consultation and Coordination between States and Tribes

- **Mississippi Band of Choctaw Indian**

There are no federally recognized Native American tribes officially established with the State of Tennessee. The Mississippi Band of Choctaw Indians (MBOC) possesses a Land Trust in Henning (Lauderdale County), Tennessee on the Mississippi border consisting of approximately 88.15 acres of land; however, the tribe is not established in Tennessee as a federally recognized tribe. Tennessee has attempted to engage the Choctaw to become a collaborative partner. At this time the tribe does not wish to enter into such a relationship.

- **Eastern Band of Cherokee Indian**

The U.S. Congress passed a bill on April 16, 2018 to take specified lands and easements in Monroe County, Tennessee, into trust for the use and benefit of the Eastern Band of Cherokee Indians. These lands include the Sequoyah Museum, the Chota Memorial, the Tanasi Memorial, and land to provide support for these properties and cultural programs.

On June 18, 2019 the Eastern Band of Cherokee Indians purchased 122 acres of land in Sevier County, Tennessee for $7.656 million with the intent to develop a casino once permitted by state law. The tribe intends to also use this land for economic diversification.

DCS has not engaged the Eastern Band of Cherokee at this time. However, the Department will initiate the following by January 1, 2020:

- Contact the Nashville Office of the Bureau of Indian Affairs, and ask the organization to contact the Choctaw and Cherokee to let them know that we wish to engage in a conversation about future collaboration.
- Send both tribes a copy of Tennessee ICWA policies and invite the tribe to have input in them.
- Invite both tribes to participate in the 2020 Joint Planning Session.
- Offer a point of contact at DCS for the designated tribal contact in case either tribe has questions or wants to engage in a collaborative project.

There have been no revisions to Tennessee DCS policy regarding the Indian Child Welfare Act (ICWA) policy 16.24, Native American Children since January 2012. The state is in compliance with the ICWA law with the most recent Title IV-E plan. This grants a retroactive approval for the Fostering Connections Act, to October 1, 2010, and included a revised policy 31.3, Case Transfer Guidelines Between Regions, Agencies, and Facilities, that demonstrates DCS’ compliance to ensure seamless
transfer of a Native American child to a Tribal title IV-E agency or an Indian Tribe with a Title IV-E agreement.

- Indian Child Welfare Act (ICWA) Compliance

DCS continues to maintain Policy 16.24: Children of Native American Heritage. The policy ensures compliance with the ICWA law as it was submitted with the most recent Title IV-E plan. This approval grants a retroactive approval to October 1, 2010 for the Fostering Connections Act. DCS enacted new Policy 31.3: Case Transfer Guidelines between Regions, Agencies and Facilities as of November 2013, which demonstrates DCS’ compliance to ensure the seamless transfer of Native American children to a Tribal Title IV-E agency or an Indian Tribe with a Title IV-E agreement. Tennessee is one of 14 States without a federally or State recognized tribe. Over the past 5 years, less than 1% (47 out of 35,269) of TN's AFCARS reporting populations have a documented tribal affiliation.

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

*Agency Administering Chafee (section 477(b)(2) of the Act)*

The TN Department of Children's Services provides the John H. Chafee Foster Care Program for Successful Transition to Adulthood through its Office of Independent Living Division and Extension of Foster Care (EFC) Services. As a part of the federal mandate, this Division is charged with building a network of appropriate supports and services for youth transitioning out of care and for those who are likely to remain in care. The Department's goal is to provide each young person in foster care, age 14 or older, with supports, services, experiences, and opportunities that are individualized based on the strengths and needs of each individual youth, that are important to healthy adolescent development, and that will help the youth successfully transition to adulthood. The strengths and needs of a 14-year-old who is four years from legal independence are generally different than that of a 17-year-old who is facing the imminent assumption of adult rights and responsibilities, and so the planning and services are tailored on that basis.

*Description of Program Design and Delivery*

DCS uses Chafee Foster Care Program for Successful Transition to Adulthood funds to staff Independent Living Program Specialists (ILPS) within each region across the state. The DCS ILPS work directly and collaboratively with Family Service Workers, foster parents, contracted providers and youth. They are responsible for local program coordination, service delivery, community resource development, and on-going consultation to agency staff, foster parents and youth. Although the primary function of the ILPS is to provide support and technical assistance to staff and resource adults, they also provide direct services and support to youth and young adults through life skills training classes, coordinating the establishment and tracking of Extension of Foster Care Services, provisions of the Independent Living Allowance, assistance with financial aid (FAFSA),
Education and Training Voucher and other scholarship applications, and support and coordination of statewide youth leadership boards (Youth 4 Youth).

Describe how the state designed and intends to deliver and strengthen programs to achieve the purposes of the Chafee program over the next five years (section 477(b)(2)(A) of the Act). Indicate how these activities and any identified goals align with the state's vision and support those developed as part of the CFSP/CFSR PIP.

**Five Year Strategic Plan**

- Improve practice around expectant and parenting youth and young adults, to include young fathers. Develop strategies to collect and analyze related data.
- Expand Chafee and ETV eligibility per Family First.
- Improve strategies to conduct credit checks on 14- to 17-year-olds to determine if any youth is a victim of identity theft or credit fraud and clear the records, if necessary, before age 18. The ability to conduct credit checks in the state’s CCWIS is in place, and policies and procedures are in effect to guide the process. There are some technical issues with the data and file transfer procedures that need to be corrected and refined.
- Ongoing focus on legal permanency for youth approaching majority. Over the last 5 years, we have seen a fluctuation in youth aging out across our population of youth adjudicated delinquent and dependent/neglect in TN, but not significant increases as compared to years prior. TN DCS will continue to implement efforts for building connections to caring adults with older youth. TN DCS will continue implementing efforts to build connections between caring adults and older youth, to include mentoring opportunities. See foster care section of the plan.
- Increase planning for housing stability for youth aging out. Address housing options prior to the CFTM established for all youth exiting to adulthood. Develop more supportive options for housing for youth aging out.
- Ensure that foster parents caring for older youth understand what services, supports, opportunities and experiences are important for healthy adolescent development and that these foster parents are comfortable providing young people with opportunities for practicing skills and for exercising increasing levels of independence, responsibility and autonomy. Increase efforts to recruit foster homes for older youth in foster care, and those receiving Extension of Foster Care Services.
- Ensure that congregate care facilities serving older youth have programming that addresses the need for normalizing, developmentally appropriate services, supports, opportunities and experiences.
- Ensure that young people understand the services, supports, and opportunities that should be available to them, the increased responsibility that they need to exercise consistent with these opportunities, and what to do if they feel that they are not getting the services, supports and opportunities they feel they need.
- Ensure that, when additional financial supports are necessary to allow foster parents and congregate care staff to provide any specific types of services, supports or opportunities, “wraparound” or “flex funds” are available to provide that support and/or that private provider contracts address those specific types of services, supports or opportunities. Continue evaluation and improvement to the transition planning process. The Office of
Independent Living and the Department will conduct ongoing reviews to determine areas of improvement within transition planning.

- Monitor rules and regulations that have been developed to ensure appropriate supervision of younger children in foster care, but that are being applied to older youth in care in ways that are depriving them of age-appropriate opportunities and experiences, to determine whether the rules and regulations are striking the proper balance between providing supervision and supporting healthy adolescent development.

- Continue to utilize data to understand outcomes like increasing uptake and retention in EFC. Increase in the use of state funded scholarships and ETV. The Department continues to work with certain state post-secondary programs to provide special support for former foster youth as they adjust to college life. Efforts are underway to develop similar programs at other colleges and universities.

- Add the two additional criteria for EFCS; employment and looking for employment
- Continue to fund the Jim Casey Resource Centers and increase youth involvement.
- Continue to engage aged out youth who didn't accept services, to ensure they get connected to support and services, as needed.
- Continue utilization of the Youth Villages LifeSet contract. The LifeSet contract has been expanded to include Extension of Foster Care case management.
- Improve EFCS court processes and Foster Care Review Board.
- Develop strategies to improve services for youth with co-occurring Mental Health and Borderline Intellectual Functioning.
- Make progress on outstanding items on the NYTD Quality Improvement Plan, to include improving the capability to capture non paid NYTD services.
- The Department continues to provide the opportunity for our older youth to share their experiences related to the Child and Family Team Meeting process at least four times a year, at the Advanced Skilled Facilitator training. This continues to be a positive learning experience for staff and reinforces key opportunities for improvement. Regional Quality Practice Team circles dedicated to addressing planning issues for older youth continue. These teams review cases with workers and supervisors with a specific focus on transition planning, and they identify strengths and opportunities in the planning process, which allows them to continually refine transition planning in the region and to increase the opportunity for successful transition in the individual cases they review. TN DCS will work to expand Quality Practice Teams to regions that don't utilize them, and continue to work to improve ongoing practice around CFTM and planning processes.

- The Office of Independent Living supports initial and ongoing training regarding the importance of assisting youth in making successful transitions to adulthood needs to a wide range of stakeholders. Training should include information about the availability of Fostering Connections/EFCS and educational, legal and other services and supports that help young adults navigate the many barriers they face. In addition to the youth themselves, the following stakeholders will benefit from such training.
  - Department of Children's Services staff;
  - Juvenile court judges and magistrates;
  - Youth services officers and other juvenile court staff;
  - Court Appointed Special Advocates (CASAs);
  - Guardians ad Litem;
  - Attorneys who practice in juvenile court;
• Foster care review board members;
• Foster parents;
• Residential provider agency staff;
• Mental health service providers;
• School guidance counselors/school social workers;
• Peer advocates; and
• Mentors for current/former foster youth.

The Department has redesigned Youth Engagement work and developed a youth engagement model that promotes meaningful youth-adult partnerships that supports system and organizational change while providing opportunities for youth to develop, master and apply leadership skills. The Department has been working with youth leaders who serve on advisory boards to implement youth voice in areas of advocacy, policy improvement, as well as organizational change. The Office of Independent Living revamped both local Youth Advisory Boards (Y4Y Boards) and the Statewide Youth Advisory Board, now called the Young Adult Advisory Accountability Council. DCS has active Youth Boards across the state in Nashville, Chattanooga, Memphis, and Knoxville as well as youth actively serving on the statewide Young Adult Advisory Accountability Council. DCS has had youth involved in CFSP development, CFSR, trainings to staff and many regional activities. Focus groups that were completed with youth across the state contributed to the development of the Parenting Independent Living Allowance rate for parenting young adults receiving Extension of Foster Care Services. Going forward we will continue to strengthen youth adult partnerships and include youth and young adults in our planning process to help guide our future steps around assessment, practice improvement, and to help drive our NYTD work.

• Describe how the state is incorporating principles of Positive Youth Development (PYD) in its Chafee program.

**NYTD Data Quality Improvement Plan**

Tennessee participated in a NYTD Pilot Assessment Review in 2015, and a NYTD Quality Improvement Plan was implemented as a result of the review’s findings. The primary issues requiring remediation included surveys that did not meet all of the NYTD requirements, problems with the extraction code, challenges with capturing data from source records in the state’s CCWIS (particularly accurate and up to date educational and non-paid services data), and lack of engagement with youth and other stakeholders regarding NYTD data. Updated surveys that are directly accessible to youth were developed and found to be in compliance, use of a provider agency to obtain the baseline and follow up surveys was implemented, and fixing the extraction code/better data report availability resulted in no financial penalty over the last several years of submissions. There is still work to be done to improve data entry and overall improve data quality in the identified areas, and to include young people more significantly in the NYTD process. The following outlines the areas still requiring remediation identified on the QIP, what is needed and planned to resolve these issues:

**The state must revise its business process for collecting information on independent living services to ensure that service information is consistently captured regarding activities and supports paid for by DCS or provided by caseworkers and foster parents for all served youth**
regardless of age or foster care status (see General Requirement #1). DCS needs to develop a way for placement providers and others that the Office of Independent Living has direct contracts with, such as Youth Villages and the Resource Centers, to document such services and educational information for youth served external to DCS. It will need to be included in contracts. Need documentation regarding the state’s action plan, RE: business process plan, data quality reports or plan.

An enhancement request to develop TFACTS records that allow easier data entry was submitted to the DCS Office of Information Systems (now STS) in September 2016, and there has still not been progress to date due to project priority issues. Tennessee DCS will continue to monitor, and partner with, the state’s information technology division to establish a workable time frame for this project. Youth Villages does enter services paid out of their LifeSet contract in TFACTS (as reporting-only services), but not the non-paid, life skills type services. It is anticipated that engaging providers who routinely provide these types of non-paid services by providing TFACTS training on data entry, giving specific provider staff TFACTS access, and developing monitoring reports will occur concurrently with efforts to enhance TFACTS.

The state should consider expanding training opportunities for state staff involved in administering the NYTD survey in order to improve its survey participation rate.

Although state staff do not generally administer the NYTD surveys in Tennessee, as this work is contracted out to a provider agency, training and information sharing will continue at least annually targeting provider staff and state Independent Living Specialists. Youth participants will also be incorporated. Guidance and feedback is provided to the provider agency frequently.

The state is strongly encouraged to develop and implement a plan to stay in touch with and to collect updated contact information from youth who leave foster care between survey waves. Please provide an update on the state’s efforts to engage the Youth Advisory Board on locating strategies. Was anything decided? New plans developed?

DCS is implementing a new and robust youth engagement model that includes strategies for developing stronger youth boards, which will include more significantly including youth in Tennessee’s NYTD process. Youth representatives have received training on NYTD, and this will continue and be expanded. DCS also plans to utilize young people in NYTD outreach efforts to improve the number of surveys completed each period, which includes engaging the provider agency to work with the state to develop and implement this process.

The state is strongly encouraged to develop and implement a systematic effort to analyze NYTD data to assess youths’ access to services and the quality of services. The state should engage young people in developing and implementing these plans. Please provide more information about the NYTD data analysis conducted and shared with partners.

NYTD data continues to be included in the annual Youth Transitions Advisory Council report, released annually. This report is also provided to the Tennessee legislature, and agency partners and stakeholders, and the public.
DCS maintains a NYTD page on its Independent Living website, and will develop and post updated data along with information describing its use. This effort will be done in collaboration with youth partners. NYTD data is also included as part of performance measures included in the state’s Jim Casey Youth Opportunities Initiative annual plan, as Tennessee DCS is the lead agency to four Jim Casey sites.

The state is strongly encouraged to incorporate older youth cases into its QSR process and to develop performance measures using NYTD data to raise visibility of practice issues impacting transitioning youth. Need documentation regarding the changes made to the state’s QSR process.

The QSR process for EFCS clients is available and continues to be implemented. This particular QSR process has been in place for less than two years, so the focus was on implementation of the review process itself. During the 2017 QSR process twelve EFC cases were reviewed (one case per region). A QSR supplemental guide was developed in 2016 that provides information more reflective of circumstances and practice for older youth to support reviewers when rating indicators. All cases showed acceptable ratings for the Child and Family and System.

CB-06/16/2016: Question:

- Does TFACTS allow for recording the sending state agency code for ICPC cases?
- Is the sending state agency code recorded on the case_agency_link (county_code) table?
- What is the scenario/condition when the value for this element is reported as “centralized unit”?

The extraction code is defaulting to Centralized Unit instead of a FIPS county code if the Responsible County /Region record is blank. This record has mandatory fields and usually auto populates from intakes, and the last submission did not appear to include any Centralized Unit values. However, Tennessee may want to use Centralized Unit in the future, especially when providers start entering services more for youth not in foster care. There is no way to reflect “Centralized Unit” in TFACTS. Even if DCS Central Office is picked as the organization on the Responsible County /Region record, a FIPS county value needs to be selected. The enhancement request to add out of state FIPS codes/values to TFACTS and also add the ability to select Centralized Unit was submitted October 14, 2016, and is still not implemented due to project priority issues. Tennessee DCS will continue to monitor, and partner with, the state’s information technology division to establish a workable time frame for this project.

The state is to add supervisory controls to ensure that information on a youth’s tribal membership is entered/updated timely. In Progress. Need TFACTS screens and updated extraction code.
The enhancement request was submitted October 14, 2016. The correct label and tribal membership values are available in TFACTS, but there is no enforcement of this data's entry. It is captured in practice via a custody intake packet. Discussions were planned to identify a trigger point in the TFACTS workflow where it would make sense to put in a validation rule to require this information, and an enhancement request was submitted to add a “Yes/No” prompt on the TFACTS Person record, but this did not occur due to project priority issues. Tennessee DCS will continue to monitor, and partner with, the state's information technology division to establish a workable time frame for this project.

The state is to establish supervisory controls to ensure that information on a youth's education record is entered/updated timely, especially for youth who are no longer in the state's custody (this includes special education/IEP data). In-Progress, Need updated extraction code.

There is still discussion about developing an interface between the state's Department of Education data collection system and TFACTS, but there has not been progress on this initiative. DCS did receive the ability to review education data via the P-20 system, which can be viewed as a preliminary step toward DCS and the Tennessee Department of Education jointly ensuring data quality as an interface is pursued. There is also discussion about generating pop up messages at various points in the TFACTS workflow, such as during the development of permanency plans when educational information is required, that prompt the workers to update education data using the applicable records. Progress on this has still not been made. Office of Independent Living staff continue updating education records for youth who receive Education and Training Voucher (ETVs) or the state funded Bright Futures scholarship, and for youth who exited custody to adoption or SPG who are receiving an independent living service. DCS submitted a request to ACF to participate in the NYTD Data Challenge, which is focused on improving the collection and use of education data, and is waiting for more information on starting that effort. Tennessee DCS will continue to monitor, and partner with, the state's information technology division regarding progress in this area.

Tennessee DCS shared, and will continue to share, the results of the NYTD Pilot Assessment Review, resulting QIP, and efforts to resolve the issues identified with the state's primary inter-agency and stakeholder forum for transitioning youth, the Youth Transitions Advisory Council.

In addition to continuing efforts to complete the corrective action items in the QIP, Tennessee will continue working on improving ongoing monitoring reports generated from the TFACTS database. A focus will be on generating reports to monitor identification of the baseline population and their survey status. Movement in and out of foster care and changes in foster care placement status during the surveyable time frame makes tracking this population challenging, and refinement of reporting will help ensure better participation rates.
Serving Youth Across the State

DCS uses Chafee Foster Care Program for Successful Transition to Adulthood funds to staff Independent Living Program Specialists (ILPS) in each of the state’s regions. The DCS ILPS work directly and collaboratively with Family Service Workers (FSW), foster parents, contracted providers, community-based organizations and youth. They are responsible for local program coordination, service delivery, and community resource development, working with specialized Foster Care Review Boards and on-going consultation to agency staff, foster parents and youth. The Independent Living program staff report to DCS Central office under the Division of Independent Living (IL) which resides under the Office of Child Programs. The IL team meets regularly to discuss ongoing barriers, concerns and to ensure that statewide policies are adhered to within Independent Living.

Tennessee collects and reports data related to participation and retention related to young adults receiving Extension of Foster Care Services by region and even by county. Although data reporting has been done this way at times on general Chafee or ETV administration, when requested by particular stakeholders such as state legislative representatives, it has not been a part of the consistent reporting. Tennessee commits to including data reporting of this type, to include NYTD data as current and applicable, in ongoing, standardized reports including the APSR.

Serving Youth of Various Ages and Stages of Achieving Independence (section 477(b)(2)(C) of the Act)

The 17 and up group is subject to federal Permanency plan, Independent Living plan, and Transition plan requirements, which prescribe a set of domains that must be addressed in planning, and suggest a related range of services that they might need to successfully transition. The Department addresses not only the federally prescribed domains and services, but expands the scope of transition planning for youth. Transition planning for all young people in DCS custody addresses Social Skills, Life Skills, Education, Housing, Employment, Essential Documents, Credit Check, Health, Finances, and Transportation. Additionally, special concerns including immigration and parenting are included in the transition planning process when appropriate. For this group, the Department has developed a partnership with the Youth Villages LifeSet Program. Youth Villages has taken on a very special role and responsibility--both in understanding the range of services that this group needs and in ensuring that each young person they work with has access to the specific services and supports he or she needs. The Youth Villages LifeSet Program employs weekly case management services and engagement of experts in the areas of finance, education, and access to community resources to teach clients the necessary skills to achieve economic self-sufficiency, develop lasting relationships, and succeed independently. The Department has expanded the LifeSet contract with the program to include case management for Extension of Foster Care Services.

The second group is the 14-16 year olds, for whom federal law is less prescriptive in the number of domains to be addressed in IL planning. For this group, normal adolescent development requires increasing levels of responsibility for taking care of themselves and learning some basic self-care skills (cooking, cleaning, health and hygiene habits), introductory budgeting, and opportunities for social interaction, recreational activities, and pursuit of interests that build relationships, confidence and competence. Opportunities for these young people should be shaped by individual interests,
levels of maturity, and functioning—the normalizing experiences that would characterize what we expect a younger adolescent to experience in a reasonably well functioning, intact family.

Tennessee includes a breakout of Chafee services provision in standardized data reporting that differentiates the Extension of Foster Care Population (EFCS) from the youth population still in DCS custody, youth who exited foster care to adoption or subsidized permanent guardianship at or after age 16, and other eligible populations who receive Chafee-based services from contracted providers. This reporting, such as in the APSR, does include measures and outcomes for youth served by the Youth Villages LifeSet grant, which is the largest recipient of general Chafee funds and serves the most youth outside of the EFCS young adult population. More attention will be paid to interpreting the data to evaluate how offering (and now privatizing) Extension of Foster Care impacts channeling Chafee funding to other populations and improving outcomes for those youth, and also include more detail regarding ETV utilization for eligible youth not receiving EFCS.

The Casey Life Skills Assessment is the assessment tool cited in state protocol as the recommended method for evaluating young peoples’ stages of development, particularly as it relates to learning life-skills, planning for the future in the areas of education, employment, related activities, and building a network of supportive adults. Youth identified as having intellectual/developmental disabilities may have individualized assessment methods utilized that are developed by qualified staff. Young adults receiving Extension of Foster Care Services may be engaged using less formal assessment methods such as a discussion of their needs and strengths, per their preferences. The next phase of TFACTS permanency plan development and systems integration will include creation of the life skills assessment in TFACTS, and connection of the assessment results with the permanency plan. Progress on this will be included in the APSR.

Collaboration with Other Private and Public Agencies (section 477(b)(2)(D) of the Act)

The primary mechanism for Tennessee DCS to collaborate with other agencies regarding youth transition issues is via the legislatively mandated Youth Transitions Advisory Council. The council’s membership includes representation from state departments such as the Department of Mental Health, Department of Intellectual and Developmental Disabilities, the Bureau of TennCare, and other agencies such as the Tennessee Association of Mental Health Organizations, Workforce Investment, provider agencies with contracts or other initiatives in place to serve transitioning youth such as Youth Villages, the Oasis Center, Helen Ross McNabb, Monroe Harding, (Oasis and Helen Ross McNabb administer federally funded Transitional Living programs, and Monroe Harding has a contract with DCS along with the two prior agencies to administer a Resource Center), representatives from the Tennessee Children’s Cabinet, and other entities who request attendance. Much of the membership of this current forum were instrumental in passage of legislation to extend foster care to age 21 in Tennessee, and successfully obtaining approval from the state’s Department of Safety to provide free photo identification cards to all youth in state’s custody age 16 and older, and young adults receiving Extension of Foster Care Services. There has been collaboration with Tennessee Works. Tennessee Works deals with young people that have intellectual and developmental disabilities. The goal of Tennessee Works is to increase the number of young people with intellectual and developmental disabilities who are employed in the state. Their focus is to ensure that every young person with a disability can find a good job.
Determining Eligibility for Benefits and Services (section 477(b)(2)(E) of the Act)

Tennessee has robust guidelines for determining eligibility as set forth in policies and procedures, practice manuals and guides, and summary materials that clearly outline in detail the requirements to receive independent living related services. The latter are posted on the DCS public website. The eligibility factors are based on the law as set forth by the federal guidelines and instructions, and allowances afforded to the states to interpret or restrict such.

Cooperation in National Evaluations (section 477(b)(2)(F) of the Act)

CB partners with ACF's Office of Planning, Research & Evaluation to coordinate efforts to evaluate programs designed to serve youth in transition from foster care (Planning a Next Generation Evaluation Agenda for the Chafee Program). The program is in the second stage of the work after conducting the first wave of evaluations under the project. Currently, the project has conducted a national search of programs that are of interest under the topics of employment, education, financial literacy, housing, and specialized case management. In addition to stating that the agency will cooperate in any national evaluation, the CB encourages states to provide information on programs they currently offer that they believe are promising practices or are ready to be evaluated.

Chafee Training

States must provide information on specific training planned for FYs 2020 - 2024 in support of the goals and objectives of the Chafee plan. Chafee training may be incorporated into the training information discussed in the Training Plan (see section D7) for the 2020-2024 CFSP, but should be identified as pertaining to Chafee.

Please also note that states are required to certify that they will use training funds provided under the title IV-E foster care and adoption assistance programs to provide training, including training on youth development, to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting youth preparing for a successful transition to adulthood and making a permanent connection with a caring adult (section 477(b)(3)(D).

Education and Training Vouchers (ETV) Program (section 477(i) of the Act)

The TN Department of Children's Services is the sole administrator of Education and Training Vouchers. The Office of Independent Living has a Scholarship Coordinator who manages the ETV funds available, and also a State Funded Scholarship called Bright Futures. ETV applicants are required to provide documentation along with ETV or Bright Futures Scholarship applications that include the FAFSA SAR, the financial aid package for the programs they are enrolled in, total cost of attendance, and progress reports when applying for subsequent awards. The Bright Futures Scholarship is used for youth who do not qualify for ETVs, or to supplement ETV allocations (not concurrently). These verification documents are reviewed to determine the amount of award.
needed against other financial aid awards, and to ensure total cost of attendance is not exceeded. The required documentation is scanned and uploaded via the state's CCWIS system. Each ETV and Bright Futures Scholarship award is processed as a service in the state's CCWIS system, with entry, review and approval of each service by different staff and utilizing standardized payment procedures in the CCWIS and also the state's enterprise payment processing system, EDISON. These internal controls guard against duplication of service and exceeding maximum allowable liability. A focus moving forward is to better identify barriers to continued educational progress and program completion, and to build partnerships and implement strategies with post-secondary institutions to improve such outcomes.

Consultation with Tribes (section 477(b)(3)(G))

All eligible youth of Indian/Native American heritage are provided the same Chafee services and incentives that are available to all other state custodial youth. The TN Department of Children's Services is the sole administrator of Education and Training Vouchers. The Office of Independent Living has a Scholarship Coordinator who manages the ETV funds available, and also a State Funded Scholarship called Bright Futures. ETV applicants are required to provide documentation along with ETV or Bright Futures Scholarship applications that include the FAFSA SAR, the financial aid package for the programs they are enrolled in, total cost of attendance, and progress reports when applying for subsequent awards. The Bright Futures Scholarship is used for youth who do not qualify for ETVs, or to supplement ETV allocations (not concurrently). These verification documents are reviewed to determine the amount of award needed against other financial aid awards, and to ensure total cost of attendance is not exceeded. The required documentation is scanned and uploaded via the state's CCWIS system. Each ETV and Bright Futures Scholarship award is processed as a service in the state's CCWIS system, with entry, review and approval of each service by different staff and utilizing standardized payment procedures in the CCWIS and also the state's enterprise payment processing system, EDISON. These internal controls guard against duplication of service and exceeding maximum allowable liability. A focus moving forward is to better identify barriers to continued educational progress and program completion, and to build partnerships and implement strategies with post-secondary institutions to improve such outcomes.

Appendices:

A. Foster Parent Adoptive Parent Diligent Recruitment Plan

Tennessee operates a state administered system whereby the Division of Foster Care and Adoption Services provides support to 12 geographic regions that have flexibility in creating their own annual recruitment and retention plans based upon demographic indicators. These, generally, seem to reflect commonalities at a statewide level in terms of needing more homes for teenagers and large sibling groups. Annual regional plans are targeted to the unique needs of each region based upon ethnic/cultural needs, gender needs, etc.
B. Health Care Oversight and Coordination Plan
Through interagency agreement and established processes, the Department of Children's Services (DCS) and the Tennessee Division of TennCare, the State of Tennessee's Medicaid program, and the selected Managed Care Organization, TennCare Select (TCS), collaborate to provide children in custody with primary physical and behavioral health services. DCS also partners with other state agencies including the Tennessee Department of Health, the Department of Education, and the Department of Intellectual and Developmental Disabilities Services to ensure care coordination and oversight. The elements are further outlined in the Health Care Oversight and Coordination Plan.

C. Disaster Plan
The Continuity Plan applies to the functions, operations, and resources necessary to ensure the continuation of Department of Children's Services' essential functions in the event its normal operations are disrupted or threatened with disruption and that Department of Children Services is capable of conducting its essential missions and functions under all threats and conditions, with or without warning. This plan applies to all Department of Children's Services personnel, unless specified otherwise. Department of Children's Services staff should be familiar with continuity policies and procedures and their respective continuity roles and responsibilities.

D. Training Plan
The plan provides a list of pre-service and ongoing trainings required for staff and providers. A description of each class and the credit hours is also provided.