EXECUTIVE SUMMARY
Final Report: Virginia Child and Family Services Review

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Virginia. The CFSR assesses State performance with regard to seven child welfare outcomes pertaining to children’s safety (two outcomes), permanency (two outcomes), and well being (three outcomes), and seven systemic factors relevant to the State’s ability to achieve positive outcomes for children who come into contact with the child welfare system. The Virginia CFSR was conducted the week of July 7, 2003 with an additional case review for Item 5 (Foster Care Re-Entries) conducted on March 16 and 17, 2004. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the Virginia Department of Social Services (DSS);
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases (both foster care and in-home services cases) at three sites in the State;
- Reviews of 115 foster care cases for Item 5 at three sites in the State; and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to, children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

A key finding of the Virginia CFSR is that the State is in substantial conformity with Well Being Outcome 2 (Children receive appropriate services to meet their educational needs). This outcome was determined to be substantially achieved in 92.3 percent of the cases reviewed, which exceeds the 90 percent required for substantial conformity. CFSR case reviews found that DSS made concerted efforts to address children’s educational needs in both foster care and in-home services cases.

One area of concern with regard to the State’s performance on the child and family outcomes pertained to Permanency Outcome 1 (Children have permanency and stability in their living situations). This outcome was determined to be substantially achieved in only 37 percent of the cases reviewed. Although performance on this outcome was fairly low in the three sites included in the onsite CFSR, there was substantial variation in performance across sites. The outcome was determined to be substantially achieved in 71 percent of Bedford County cases, compared to 42 percent of Fairfax County cases and no Norfolk City cases.

The case-review findings, as well as data from the State Data Profile, indicate that DSS is not effective in establishing appropriate permanency goals (Item 7) and achieving those goals in a timely manner (Items 8 and 9). Stakeholders and case reviewers identified both court-related and agency-related barriers to attaining permanency in a timely manner. Court-related barriers were overcrowded dockets, continuances, and a lengthy appeals process for termination of parental rights (TPR). Agency-related barriers included delays
in completing paperwork and filing for TPR, failure to discuss adoption fully with children and foster parents, and a lack of consistency in providing adoption counseling to children who voice concern about adoption.

Another area of concern pertained to Well Being Outcome 1 (Families have enhanced capacity to provide for their children’s needs). This outcome was determined to be substantially achieved in only 66.0 percent of the cases reviewed and all indicators for the outcome were rated as Areas Needing Improvement. Again, although performance on this outcome was low in the three CFSR sites, there were cross-site differences. The outcome was determined to be substantially achieved in 83 percent of Fairfax County cases, compared to 53 percent of Norfolk City cases and 50 percent of Bedford County cases. CFSR case review findings indicate that DSS was not consistent in its efforts to assess and meet the services needs of children, parents, and foster parents; involve parents and children (when relevant) in the case planning process; and establish face-to-face contact with parents and children with sufficient frequency to ensure children’s safety and promote their well-being.

With regard to the systemic factors assessed through the CFSR, Virginia achieved substantial conformity with the systemic factors of Statewide Information System, Quality Assurance, and Agency Responsiveness to the Community. The State did not achieve substantial conformity with the systemic factors of Case Review System; Training; Service Array; or Foster and Adoptive Parent Licensing, Recruitment, and Retention. The following are some of the key concerns identified in the assessment of systemic factors: (1) parents are not routinely involved in the case-planning process; (2) the State does not have mandated training for all new workers or for foster parents and does not have a State-mandated program of ongoing training for caseworkers or foster parents; (3) the status of each child in foster care is not reviewed at least once every six months on a consistent basis across the State in accordance with Federal requirements; and (4) the agency is not seeking TPR in accordance with the provisions of the Adoption and Safe Families Act (ASFA) in a consistent manner.

The findings with regard to the State’s performance on the safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State’s performance relative to the national standards, and table 4 provides information pertaining to the State’s substantial conformity with the seven systemic factors assessed through the CFSR.
I. KEY FINDINGS RELATED TO OUTCOMES

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

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

Virginia did not achieve substantial conformity with Safety Outcome 1. This determination was based on the finding that the outcome was substantially achieved in 85 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity. However, the State did meet the national standards for (1) the percentage of children experiencing more than one substantiated or indicated child maltreatment report within a six-month period; and (2) the percentage of children maltreated while in foster care. The criteria and standards for all three measures must be met for the State to achieve substantial conformity with this outcome.

A key case review finding is that DSS was not consistent with regard to initiating investigations of maltreatment reports and/or establishing face-to-face contact with the children who were the subject of the maltreatment reports in accordance with the timeframes established by the State or local agency. Case reviewers determined that in these cases, children were not sufficiently protected from abuse or neglect. In addition, although both case review findings and data from the State Data Profile indicate a low incidence of recurrence of substantiated maltreatment reports within a six-month period, the Statewide Assessment reports that maltreatment reports received on open cases are not routinely subjected to a formal investigation and that this practice varies across the State. As a result, it is difficult to determine the actual rate of maltreatment recurrence.

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

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

Virginia did not achieve substantial conformity with Safety Outcome 2. This determination was based on the finding that the outcome was substantially achieved in 81.3 percent of the cases reviewed, which does not meet the 90 percent required for substantial conformity.
One finding of the CFSR case reviews was that DSS made concerted efforts to provide services to families to protect children in the home and prevent their removal. However, case reviewers also determined that in 19 percent of the applicable cases, the DSS response was not adequate to reduce the risk of harm to the child. In several cases, reviewers noted that there was no safety assessment or the safety assessment was not sufficiently comprehensive to capture critical family issues relevant to the child’s safety, such as domestic violence and mental illness.

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

There are six indicators incorporated in the assessment of Permanency Outcome 1, although not all are relevant for all children. The indicators pertain to the agency’s efforts to prevent foster care re-entry (Item 5), ensure placement stability for children in foster care (Item 6), and establish appropriate permanency goals for children in foster care in a timely manner (Item 7). Depending on a child’s permanency goal, the remaining indicators focus on the agency’s efforts to achieve permanency goals (such as reunification, guardianship, adoption, and permanent placement with relatives) in a timely manner (Items 8 and 9), or whether the agency is effective in ensuring that children who have other planned living arrangements are in stable placements and adequately prepared for eventual independent living (Item 10).

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

- The outcome was substantially achieved in 37 percent of the cases, which is less than the 90 percent required for a determination of substantial conformity.
- The State Data Profile indicates that for fiscal year (FY) 2001, the State did not meet the national standard for (1) the percentage of children who were reunified within 12 months of entry into foster care; (2) the percentage of children who were discharged to finalized adoptions within 24 months of entry into foster care; and (3) the percentage of children who experienced no more than two placement settings after having been in foster care for 12 months or less.

However, the State Data Profile indicates that for FY 2001, the State did meet the national standard for the percentage of children entering foster care who were re-entering within 12 months of a prior foster care episode.

There was considerable variation in performance on this outcome across CFSR sites. The outcome was determined to be substantially achieved in 71 percent of Bedford County cases, compared to 42 percent of Fairfax County cases and no Norfolk City cases.

The results of the case reviews and the data provided in the State Data Profile suggest that DSS does not consistently make concerted efforts to (1) ensure children’s placement stability while in foster care; (2) establish appropriate permanency goals in a timely manner;
(3) reunify children in a timely manner; and (4) achieve finalized adoptions in a timely manner. Stakeholders and case reviewers identified both court-related and agency-related barriers to attaining permanency in a timely manner. Court-related barriers included overcrowded dockets, continuances, and a lengthy appeals process for termination of parental rights (TPR). Agency-related barriers included delays in completing paperwork and filing for TPR, failure to fully discuss adoption with children and foster parents, and a lack of consistency in providing adoption counseling to children who voice concern about adoption.

Although data in the State Data Profile indicate that in FY 2001 Virginia met the national standard for the percentage of children re-entering foster care within 12 months of a prior episode, the initial case reviews found that in one (17%) of the six applicable cases, the child’s entry into foster care during the period under review was within 12 months of discharge from a prior foster care episode and the re-entry was due to the same reason that originally brought the child into care. The criteria and standards for both measures must be met for this indicator (Item 5) to be rated as a Strength. As requested by the State, an additional review of cases was conducted in order to address the difference between the results of the original onsite case review and the State’s aggregate data for this measure. The additional case review of 115 cases conducted for Item 5 resulted in two cases being rated as Areas Needing Improvement while the balance of cases were rated as Strengths. Therefore, Item 5 is rated as a Strength because 98 percent of the 121 applicable cases were rated as Strengths, in addition to the State’s data meeting the national standard related to this item.

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

Permanency Outcome 2 incorporates six indicators that assess agency performance with regard to (1) placing children in foster care in close proximity to their parents and close relatives (Item 11); (2) placing siblings together (Item 12); (3) ensuring frequent visitation between children and their parents and siblings in foster care (Item 13); (4) preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (Item 14); (5) seeking relatives as potential placement resources (Item 15); and (6) promoting the relationship between children and their parents while the children are in foster care (Item 16).

Virginia did not achieve substantial conformity with Permanency Outcome 2. This determination was based on the finding that the outcome was rated as substantially achieved in 70.3 percent of the cases, which is less than the 90 percent required for substantial conformity.

Performance with respect to achieving Permanency Outcome 2 varied across CFSR sites. Case reviewers determined that this outcome was substantially achieved in 92 percent of Fairfax County cases, compared to 57 percent of Bedford County cases and 50 percent of Norfolk City cases.
CFSR findings indicate that DSS makes concerted efforts to place children in close proximity to their families and to place siblings together in foster care. However, case reviewers determined that the agency is not consistent in its efforts to preserve connections between children and their families through frequent visitation or other forms of contact. In addition, case review findings indicate that DSS is not consistent in its efforts to seek and assess relatives as placement resources, although this is mandated in State policy.

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

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

Virginia did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 66 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.

Performance with regard to achieving Well-Being Outcome 1 varied across CFSR sites. The outcome was determined to be substantially achieved in 83 percent of Fairfax County cases, compared to 53 percent of Norfolk City cases and 50 percent of Bedford County cases.

The CFSR case reviews revealed that DSS was not consistent in its efforts to (1) assess needs and provide services to children, parents, and foster parents; (2) involve children (when age appropriate) and parents in case planning; and (3) establish face-to-face contact with children and their parents that is of sufficient frequency and quality to ensure children’s safety and/or promote attainment of case goals.

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

The one indicator for Well Being Outcome 2 pertains to agency efforts to assess and address children’s educational needs (Item 21).
Virginia achieved substantial conformity with Well-Being Outcome 2. The CFSR found that DSS makes concerted efforts to assess children's educational needs and provide appropriate services to meet those needs. Stakeholders cited a number of agency practices and community collaborations that contribute to the agency’s success in meeting children’s educational needs.

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

This outcome incorporates two indicators. One assesses agency efforts to meet children’s physical health needs (Item 22), and the other assesses agency efforts to address children’s mental health needs (Item 23).

Virginia did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 83.7 percent of the applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

Performance on this outcome varied across CFSR sites. The outcome was determined to be substantially achieved in 95 percent of Fairfax County cases and 83 percent of Bedford County cases, compared to 64 percent of Norfolk City cases.

CFSR case reviews found that DSS made concerted efforts to meet the physical health needs of children in both the foster care and in-home services cases. However, the case reviews also found that DSS was less consistent in its efforts to meet children’s mental health needs for both types of cases.

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

**Statewide Information System**

Substantial conformity with the systemic factor of Statewide Information System is determined by whether the State is operating a statewide information system that can identify the status, demographic characteristics, location, and goals for children in foster care (Item 24).

Virginia is in substantial conformity with this factor. The CFSR determined that the State's information system, OASIS, meets these requirements.
Case Review System

Five indicators are used to assess the State’s performance with regard to the systemic factor of Case Review System. The indicators examine the development of case plans and the involvement of parents in the case planning process (Item 25), the consistency and timeliness of six-month case reviews (Item 26) and 12-month permanency hearings (Item 27), the implementation of procedures to seek TPR in accordance with the timeframes established by ASFA (Item 28), and notification and inclusion of foster and pre-adoptive parents and relative caregivers in case reviews and hearings (Item 29).

The State is not in substantial conformity with the systemic factor of Case Review System. The CFSR determined the following: (1) children and parents are not consistently involved in case planning; (2) the federally required review of the status of each child in foster care at least once every six months is not occurring in a timely manner on a consistent basis; (3) the process for providing for TPR in accordance with the provisions of ASFA is not being implemented consistently; and (4) foster parents, preadoptive parents, and relative caregivers of children in foster care are not consistently notified of, nor have an opportunity to be heard in, all reviews and hearings held with respect to the child in their care.

Despite these concerns, the CFSR found that the State makes concerted efforts to ensure that every child in foster care has a permanency hearing in court no later than 12 months from the date the child is considered to have entered foster care and no less frequently than every 12 months thereafter.

Quality Assurance System

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

Virginia is in substantial conformity with the systemic factor of Quality Assurance System. The CFSR found that the State has developed and implemented standards to ensure that children in foster care are provided with quality services that protect their health and safety, and that the State is operating a quality assurance system that evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.
Training

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

Virginia did not achieve substantial conformity with the systemic factor of Training. The CFSR determined that the State does not provide initial training for all agency personnel who deliver services under titles IV-B and IV-E statewide. Further, ongoing training for staff to address the skills and knowledge needed to carry out their duties is not provided in a consistent manner across the State. While there is an orientation requirement, there is no statewide mandated training for current or prospective foster parents and adoptive parents.

Service Array

The assessment of the systemic factor of Service Array addresses three questions: (1) Does the State have an array of services that meets the needs of children and families served by the child welfare agency (Item 35)? (2) Are these services accessible to families and children throughout the State (Item 36)? (3) Can services be individualized to meet the unique needs of the children and families served by the child welfare agency (Item 37)?

Virginia did not achieve substantial conformity with the systemic factor of Service Array. The CFSR found that although the State has services available for children and families, there are critical gaps in services that address the needs of families, help create a safe home environment for children, enable children to remain safely with their parents when reasonable, and help children in foster placements achieve permanency. In addition, some services to assist children and families are not accessible in all political jurisdictions of the State. However, the CFSR found that DSS has the capacity to individualize services to meet the needs of children and families through flexible funding opportunities.

Agency Responsiveness to the Community

The systemic factor of Agency Responsiveness to the Community incorporates the extent of the State’s consultation with external stakeholders in developing the Child and Family Services Plan (Items 38 and 39), and the extent to which the State coordinates child welfare services with services or benefits of other Federal or federally assisted programs serving the same population (Item 40).
Virginia is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. The CFSR found that DSS engages consumers, service providers, foster care providers, juvenile court, and other public and private child and family services agencies in ongoing consultation regarding the goals and objectives of the State’s Child and Family Services Plan. The CFSR also determined that DSS coordinates services provided under the Child and Family Services Plan with services and benefits of other Federal or federally assisted programs serving the same populations.

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

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

Virginia did not achieve substantial conformity with this systemic factor. The CFSR determined that the State’s standards for foster family homes and child care institutions have not been adequately updated in a timely manner. Also, the established standards are not applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds. Specific concerns raised regarding licensure were the following: (1) the State does not monitor adherence to standards in a routine or consistent manner; and (2) the State does not require mandated training for foster and adoptive parents prior to the placement of children in their homes. The CFSR also found that the State does not have recruitment procedures to ensure the diligent recruitment of foster and adoptive families that reflect the ethnic and racial diversity of the children in the State’s foster care system.

The CFSR found that the State is effective in conducting criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate the timely adoptive and permanent placement of waiting children both between localities and with other States. While the State has identified barriers that affect the timely adoption and permanent placement of waiting children across localities and States, it has implemented a variety of initiatives to address these cross-jurisdictional barriers to permanency.
Table 1. CFSR Ratings for Safety and Permanency Outcomes and Items for Virginia

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<thead>
<tr>
<th>Outcomes and Indicators</th>
<th>Outcome Ratings</th>
<th>Item Ratings</th>
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<tbody>
<tr>
<td></td>
<td>In Substantial Conformity?</td>
<td>Percent Substantially Achieved*</td>
</tr>
<tr>
<td>Safety Outcome 1-Children are first and foremost, protected from abuse and neglect</td>
<td>No</td>
<td>85.0</td>
</tr>
<tr>
<td>Item 1: Timeliness of investigations</td>
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<td>Item 2: Repeat maltreatment</td>
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<tr>
<td>Safety Outcome 2 - Children are safely maintained in their homes when possible and appropriate</td>
<td>No</td>
<td>81.3</td>
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<tr>
<td>Item 3: Services to prevent removal</td>
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<td>Item 4: Risk of harm</td>
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<tr>
<td>Permanency Outcome 1- Children have permanency and stability in their living situations</td>
<td>No</td>
<td>37.0</td>
</tr>
<tr>
<td>Item 5: Foster care re-entry</td>
<td></td>
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<tr>
<td>Item 6: Stability of foster care placements</td>
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<td>Item 7: Permanency goal for child</td>
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<td>Item 8: Reunification, guardianship and placement with relatives</td>
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<td>Item 9: Adoption</td>
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<td>Item 10: Other planned living arrangement</td>
<td></td>
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<tr>
<td>Permanency Outcome 2 - The continuity of family relationships and connections is preserved</td>
<td>No</td>
<td>70.3</td>
</tr>
<tr>
<td>Item 11: Proximity of placement</td>
<td></td>
<td></td>
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<tr>
<td>Item 12: Placement with siblings</td>
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<tr>
<td>Item 13: Visiting with parents and siblings in foster care</td>
<td></td>
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<td>Item 14: Preserving connections</td>
<td></td>
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<td>Item 15: Relative placement</td>
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<td>Item 16: Relationship of child in care with parents</td>
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</table>

*90 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

**Items may be rated as a Strength or an Area Needing Improvement (ANI).
<table>
<thead>
<tr>
<th>Outcomes and Indicators</th>
<th>Outcome Ratings</th>
<th>Item Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In Substantial Conformity?</td>
<td>Percent Substantially Achieved*</td>
</tr>
<tr>
<td>Well Being Outcome 1 – Families have enhanced capacity to provide for children's needs</td>
<td>No</td>
<td>66.0</td>
</tr>
<tr>
<td>Item 17: Needs/services of child, parents, and foster parents</td>
<td>ANI</td>
<td></td>
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<tr>
<td>Item 18: Child/family involvement in case planning</td>
<td>ANI</td>
<td></td>
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<tr>
<td>Well Being Outcome 2 – Children receive services to meet their educational needs</td>
<td>Yes</td>
<td>92.3</td>
</tr>
<tr>
<td>Item 21: Educational needs of child</td>
<td>ANI</td>
<td></td>
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<tr>
<td>Well Being Outcome 3 – Children receive services to meet their physical and mental health needs are met</td>
<td>No</td>
<td>83.7</td>
</tr>
<tr>
<td>Item 22: Physical health of child</td>
<td>ANI</td>
<td></td>
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<tr>
<td>Item 23: Mental health of child</td>
<td>ANI</td>
<td></td>
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</tbody>
</table>

*90 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

**Items may be rated as a Strength or an Area Needing Improvement (ANI).
<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>National Standard</th>
<th>Virginia Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Of all children who were victims of a substantiated or indicated maltreatment report in the first 6 months of CY 2001, what percent were victims of another substantiated or indicated report within a 6-month period?</td>
<td>6.1% or less</td>
<td>3.8%</td>
</tr>
<tr>
<td>Of all children who were in foster care in the first 9 months of CY 2001, what percent experienced maltreatment from foster parents or facility staff members?</td>
<td>0.57% or less</td>
<td>0.34%</td>
</tr>
<tr>
<td>Of all children who entered foster care in FY 2001, what percent were re-entering care within 12 months of a prior foster care episode?</td>
<td>8.6% or less</td>
<td>3.6%</td>
</tr>
<tr>
<td>Of all children reunified from foster care in FY 2001, what percent were reunified within 12 months of entry into foster care?</td>
<td>76.2% or more</td>
<td>73.6%</td>
</tr>
<tr>
<td>Of all children who were adopted from foster care in FY 2001, what percent were adopted within 24 months of their entry into foster care?</td>
<td>32.0% or more</td>
<td>17.9%</td>
</tr>
<tr>
<td>Of all children in foster care during FY 2001 for less than 12 months, what percent experienced no more than 2 placement settings?</td>
<td>86.7% or more</td>
<td>84.8%</td>
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</table>
### Table 4: CFSR Ratings for the Seven Systemic Factors for Virginia

<table>
<thead>
<tr>
<th>Systemic Factors</th>
<th>In Substantial Conformity?*</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>IV. Statewide Information System</td>
<td>Yes (3)</td>
<td></td>
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<tr>
<td>Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care</td>
<td></td>
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<tr>
<td>V. Case Review System</td>
<td></td>
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<tr>
<td>Item 25: Process for developing a case plan and for joint case planning with parents</td>
<td>No (2)</td>
<td>ANI</td>
</tr>
<tr>
<td>Item 26: Process for 6-month case reviews</td>
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<tr>
<td>Item 27: Process for 12-month permanency hearings</td>
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<tr>
<td>Item 28: Process for seeking TPR in accordance with ASFA</td>
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<tr>
<td>Item 29: Process for notifying caregivers of reviews and hearings and for opportunity for them to be heard</td>
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<tr>
<td>VI. Quality Assurance System</td>
<td></td>
<td></td>
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<tr>
<td>Item 30: Standards to ensure quality services and ensure children’s safety and health</td>
<td>Yes (3)</td>
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<tr>
<td>Item 31: Identifiable QA system that evaluates the quality of services and improvements</td>
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<td>VII. Training</td>
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<tr>
<td>Item 32: Provision of initial staff training</td>
<td></td>
<td>ANI</td>
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<tr>
<td>Item 33: Provision of ongoing staff training that addresses the necessary skills and knowledge</td>
<td></td>
<td>ANI</td>
</tr>
<tr>
<td>Item 34: Provision of training for caregivers and adoptive parents that addresses the necessary skills and knowledge</td>
<td></td>
<td>ANI</td>
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<tr>
<td>VIII. Service Array</td>
<td></td>
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<tr>
<td>Item 35: Availability of array of critical services</td>
<td>No (2)</td>
<td>ANI</td>
</tr>
<tr>
<td>Item 36: Accessibility of services across all jurisdictions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item 37: Ability to individualize services to meet unique needs</td>
<td></td>
<td></td>
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<tr>
<td>IX. Agency Responsiveness to the Community</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP</td>
<td></td>
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</tr>
<tr>
<td>Item 39: Develops annual progress reports in consultation with stakeholders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item 40: Coordinates services with other Federal programs</td>
<td></td>
<td></td>
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<tr>
<td>X. Foster and Adoptive Parent Licensing, Recruitment and Retention</td>
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<td></td>
</tr>
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<td>Item 41: Standards for foster family and child care institutions</td>
<td>No (2)</td>
<td>ANI</td>
</tr>
<tr>
<td>Item 42: Standards are applied equally to all foster family and child care institutions</td>
<td></td>
<td>ANI</td>
</tr>
<tr>
<td>Item 43: Conducts necessary criminal background checks</td>
<td></td>
<td></td>
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<tr>
<td>Item 44: Diligent recruitment of foster and adoptive families that reflect children’s racial and ethnic diversity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item 45: Uses cross-jurisdictional resources to find placements</td>
<td></td>
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</tr>
</tbody>
</table>

*Systemic factors are rated on a scale from 1 to 4. A rating of 1 or 2 indicates “Not in Substantial Conformity.” A rating of 3 or 4 indicates Substantial Conformity.** Individual items may be rated either as a Strength or as an Area Needing Improvement (ANI).
Introduction

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Virginia. The CFSR assesses State performance with regard to seven child welfare outcomes pertaining to children’s safety (two outcomes), permanency (two outcomes), and well being (three outcomes), and seven systemic factors relevant to the State’s ability to achieve positive outcomes for children who come into contact with the child welfare system.

The Virginia CFSR was conducted the week of July 7, 2003 with an additional case review for Item 5 (Foster Care Re-Entries) conducted on March 16 and 17, 2004. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the Virginia Department of Social Services (DSS);
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases at three sites in the State;
- Reviews of 115 foster care cases for Item 5 at three sites in the State; and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

The following are the key characteristics of the 50 cases reviewed:

- Twenty-three cases were reviewed in Fairfax County, 12 in Bedford County, and 15 in the City of Norfolk.
- All 50 cases had been open cases at some time during the period under review.
- Twenty-seven cases were “foster care cases” (cases in which children were in the care and custody of the local child welfare agency and in an out-of-home placement at some time during the period under review), and 23 were “in-home services cases” (cases in which families received services from the child welfare agency while children remained with their families and no child in the family was in out-of-home care during the period under review).
- Of the 27 foster care cases, 15 children (55%) were younger than age ten at the start of the period under review; five children (18%) were at least ten years old, but not yet 13 years old; and seven children (26%) were 13 years of age and older at the start of the period under review.
- All of the children in the family were Black in 23 cases (46%), White in 21 cases (42%), Hispanic in three cases (6%), Asian/Pacific Islander in two cases (4%), and of two or more races in one case (2%).
For the 50 cases reviewed, reviewers identified the following primary reasons for the opening of the case by the child welfare agency:

- Neglect (not including medical neglect) – 20 cases (40%)
- Physical abuse – nine cases (18%)
- Substance abuse of parents – six cases (12%)
- Sexual abuse – six cases (12%)
- Child’s behavior – three cases (6%)
- Abandonment – two cases (4%)
- Medical neglect – one case (2%)
- Mental/physical health of child – one case (2%)
- Domestic violence in the home – one case (2%)
- Voluntary placement – one case (2%)

For the 50 cases reviewed, the most frequently cited of all reasons for children coming to the attention of the child welfare agency were the following:

- Neglect (not including medical neglect) – 33 cases (66% of all cases)
- Substance abuse by parents – 23 cases (46% of all cases)
- Physical abuse – 15 cases (30% of all cases)
- Child’s behavior – ten cases (20% of all cases)

In 21 (78%) of the 27 foster care cases, the children entered foster care prior to the period under review and remained in care during the entire period under review.

The first section of the report presents the CFSR findings relevant to the State’s performance in achieving specific outcomes for children in the areas of safety, permanency, and well-being. A table presents key findings, a discussion of the State’s status regarding the outcome, and a presentation and discussion of each item (indicator) assessed. The second section of the report provides an assessment and discussion of the systemic factors relevant to the child welfare agency’s ability to achieve positive outcomes for children.
SECTION 1: OUTCOMES

I. SAFETY

Safety Outcome 1

Outcome S1: Children are, first and foremost, protected from abuse and neglect.

<table>
<thead>
<tr>
<th>Number of cases reviewed by the team according to degree of outcome achievement:</th>
<th>Bedford County</th>
<th>Fairfax County</th>
<th>Norfolk City</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved:</td>
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<td>17</td>
<td>10</td>
<td>34</td>
<td>85.0</td>
</tr>
<tr>
<td>Partially Achieved:</td>
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<td>3</td>
<td>1</td>
<td>5</td>
<td>12.5</td>
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<tr>
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<td>0</td>
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<td>2.5</td>
</tr>
<tr>
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<td>10</td>
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</tr>
</tbody>
</table>

Conformity of Statewide data indicators with national standards:

<table>
<thead>
<tr>
<th>National Standard (Percentage)</th>
<th>State’s Percentage</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeat maltreatment</td>
<td>6.1</td>
<td>3.77</td>
<td>X</td>
</tr>
<tr>
<td>Maltreatment of children in foster care</td>
<td>0.57</td>
<td>0.34</td>
<td>X</td>
</tr>
</tbody>
</table>

STATUS OF SAFETY OUTCOME 1

Virginia did not achieve substantial conformity with Safety Outcome 1. This determination was based on the finding that the outcome was substantially achieved in 85 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity. The State, however, met the national standards for (1) the percentage of children experiencing more than one substantiated or indicated child maltreatment report within a six-month period; and (2) the percentage of children maltreated while in foster care.

Although information from the CFSR case reviews and the State Data Profile suggests that there is little recurrence of substantiated maltreatment within a six-month period, information from stakeholder interviews and from the Statewide Assessment indicates that maltreatment reports on open cases often are not investigated as new reports. Consequently, it is difficult to make an accurate determination of the State’s actual rate of maltreatment recurrence.
CFSR case reviews also found that DSS was not consistent in its efforts to initiate an investigation of a maltreatment report and/or establish face-to-face contact with the child subject of a maltreatment report in accordance with State or local required timeframes. Case reviewers determined that children in these cases were not sufficiently protected from abuse or neglect.

The findings pertaining to the specific items assessed under Safety Outcome 1 are presented below.

**Item 1. Timeliness of Initiating Investigations of Reports of Child Maltreatment**

<table>
<thead>
<tr>
<th></th>
<th>Strength</th>
<th>X</th>
<th>Area Needing Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Review Findings:** The assessment of Item 1 was applicable for 19 of the 50 cases. Thirty-one cases were not applicable because they did not involve reports of child maltreatment during the period under review. In assessing this item, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency requirements. In Virginia, response requirements for maltreatment reports are established by State and local policies. State policy requires the agency to initiate an investigation of all valid maltreatment reports immediately. The local sites reviewed each had their own policy which further requires staff to initiate an investigation of “high priority” reports within 24 hours of receipt of the allegation. The following response timeframes applied to the CFSR local sites for reports other than those classified as “high priority”:

- **Bedford:** Prior to April 2003, workers were to respond to reports that were not considered “high priority” within five days of receipt of the complaint. After April 2003, the response time changed to within 48 hours.
- **Fairfax:** Prior to March 1, 2003, workers were to respond to all reports within 24 hours of receipt of the complaint. After March 1, 2003, reports that are not “high priority” are either “priority 2 reports,” which require face-to-face contact with the child victim within two calendar days; or “priority 3 reports;” which require face-to-face contact within five calendar days (120 hours).
- **Norfolk:** Workers are to respond to maltreatment reports that are not “high priority” within 72 hours.

The following were the results of the case review assessments:

- Item 1 was rated as a Strength in 14 (74%) of the 19 applicable cases (three of the 14 cases were foster care cases).
- Item 1 was rated as an Area Needing Improvement in five (26%) of the 19 applicable cases. Two of the five cases were foster care cases.

Item 1 was rated as a Strength when a response to a maltreatment report was initiated within the timeframes established by the State or local site. The item was rated as an Area Needing Improvement in five cases because the response was not initiated within required
timeframes. Two cases rated as Area Needing Improvements involved reports classified as “high priority” (requiring a response within 24 hours). In one of these cases, the worker did not initiate a response for three days and in the other case, the worker did not respond until four days after receipt of the report. The three other cases for which this item was rated as an Area Needing Improvement involved lower level priority maltreatment reports.

Most stakeholders commenting on the issue of timeliness of investigations expressed the opinion that the agency responds to child maltreatment reports in a timely manner, usually within 24 to 48 hours. Stakeholders also reported that law enforcement and the child welfare agency generally conduct joint investigations of reports of sexual abuse and serious physical abuse, although they noted that this collaborative effort does not occur in all areas of the State.

**Determination and Discussion:** Item 1 was assigned an overall rating of Area Needing Improvement based on the finding that the agency did not initiate a response to a maltreatment report in accordance with required timeframes in 26 percent of the applicable cases.

According to the Statewide Assessment, Virginia implemented a child protective services (CPS) Differential Response System statewide in May 2002. Under this two-track response system, the agency responds to a valid CPS complaint either through an investigation or a family assessment. An investigation is conducted in response to serious maltreatment incidences while the family assessment response is used for reports where there is no immediate concern for the child’s safety. The Statewide Assessment reports that when this system was piloted in five localities in 1997, about 70 percent of the reports were diverted to the “family assessment track.”

**Item 2. Repeat Maltreatment**

[X] Strength  ____ Area Needing Improvement

**Review Findings:** The assessment of Item 2 was applicable for 39 of the 50 cases. Eleven cases were not applicable because there was never a substantiated or indicated child maltreatment report on any children in the family. In assessing this item, reviewers were to determine whether there had ever been a substantiated or indicated report on the family. Reviewers were also to determine if there was at least one substantiated or indicated maltreatment report during the period under review, and if so, if another substantiated or indicated report occurred within six months of that report. The following were the products of this assessment:

- Item 2 was rated as a Strength in 37 (95%) of the 39 applicable cases (18 of the 37 cases were foster care cases).
• Item 2 was rated as an Area Needing Improvement in two (5%) of the 39 applicable cases (one of the two cases was a foster care case). 

Item 2 was rated as a Strength under the following circumstances:
• There was a substantiated or indicated maltreatment report involving the family prior to the period under review, but no substantiated or indicated report during the period under review (25 cases).
• There was a substantiated or indicated maltreatment report involving the family during the period under review, but there was no substantiated or indicated report within six months of that report (12 cases).

Item 2 was rated as an Area Needing Improvement in two cases where two or more reports during the period under review occurred within six months of a previous report and involved similar circumstances and the same perpetrator. Both cases were in Fairfax County.

Additional findings with respect to the frequency of maltreatment reports on the family prior to and during the period under review for all 50 cases include:
• In seven cases, there was never a maltreatment report involving the family.
• In 19 cases, there was one maltreatment report over the life of the case.
• In 21 cases, there were between two and five maltreatment reports over the life of the case.
• In three cases, there were between six and ten maltreatment reports over the life of the case.
It is not known how many of these reports were substantiated.

Stakeholders commenting on the issue of maltreatment recurrence generally attributed the State’s low percentage of repeat maltreatment to the availability of family support services and to the agency’s use of ongoing risk assessments. Several stakeholders also noted that maltreatment reports on open cases often are not investigated as new reports, which may mask the actual incidence of maltreatment recurrence within a six-month period.

**Determination and Discussion:** Item 2 was assigned an overall rating of Strength based on the following findings:
• In 95 percent of the applicable cases, reviewers found no evidence of repeat maltreatment within a six-month period of a prior report.
• The State's rate of maltreatment recurrence for 2001 (3.77%), as reported in the State Data Profile, meets the national standard of 6.1 percent or less.

According to the Statewide Assessment, the State’s low rate of maltreatment recurrence may be attributed to the fact that at the conclusion of every substantiated investigation and family assessment, the worker is required to assess risk to determine if the child is
in jeopardy of future abuse and/or neglect and if further intervention is necessary to protect the child. The Statewide Assessment acknowledges that the handling of new maltreatment reports on open cases is not explicitly addressed in State policy. This results in a variation in practice both within and across localities with regard to whether maltreatment allegations on open cases are formally investigated or reported. Consequently, it is difficult to make a clear determination of the State’s actual rate of maltreatment recurrence.
Safety Outcome 2

Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th></th>
<th>Bedford County</th>
<th>Fairfax County</th>
<th>Norfolk City</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
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<td>19</td>
<td>12</td>
<td>39</td>
<td>81.3</td>
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<td>1</td>
<td>4</td>
<td>8.3</td>
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<tr>
<td>Not Achieved or Addressed:</td>
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<td>1</td>
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<td>2</td>
<td></td>
</tr>
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</table>

STATUS OF SAFETY OUTCOME 2

Virginia did not achieve substantial conformity with Safety Outcome 2. This determination was based on the finding that the outcome was substantially achieved in 81.3 percent of the cases reviewed, which does not meet the 90 percent required for substantial conformity.

While CFSR case reviews found that DSS made concerted efforts to provide appropriate services to parents and children to prevent removal and maintain children safely in their own homes, the case reviews also found that DSS was not as consistent in its efforts to reduce the risk of harm to children. In several cases, reviewers noted that either there was no safety assessment or the safety assessment was not sufficiently comprehensive to capture critical family issues relevant to the child’s safety, such as domestic violence.

Findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

Item 3. Services to Family to Protect Children in the Home and Prevent Removal

X  Strength  ___  Area Needing Improvement

Review Findings: There were 32 cases for which an assessment of Item 3 was applicable. Eighteen cases were excluded from this assessment because the children entered foster care prior to the period under review and/or there were no substantiated or indicated maltreatment reports or identified risks of harm to the children in the home during the period under review. For this item, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide
services to families to prevent removal of children from their homes while at the same time ensuring their safety. The results of the assessment were the following:

- Item 3 was rated as a Strength in 28 (88%) of the 32 applicable cases (six of the 28 cases were foster care cases).
- Item 3 was rated as an Area Needing Improvement in four (12%) of the 32 applicable cases (three of the four cases were foster care cases).

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

- Appropriate services were provided to the parents and child to prevent removal (23 cases).
- The children were appropriately removed from the home to ensure their safety (four cases).
- The family received appropriate post-reunification services (one case).

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The agency did not offer or provide appropriate services to ensure that a child was safely maintained in the home (three cases).
- The agency closed the case when the parent refused to comply with services, although there continued to be risk of harm to the child (one case). The child was removed from the home several months later.

Services provided to the families included, but were not limited to, individual counseling or therapy, in-home therapy, home-based services, post-reunification services, safety plans, supervised visitation, mentoring, parent education, monthly case monitoring, day care, respite care, marital counseling, anger management, domestic violence services, sexual abuse evaluations and counseling, psycho-sexual support group, mental health evaluations and services, substance abuse evaluations and treatment, medical insurance, transportation, furniture, housing assistance, job development training, financial support, and educational evaluations.

Most stakeholders commenting on this item expressed the opinion that DSS makes concerted efforts to provide services to families to prevent children’s placement in foster care. They noted that there is an array of community-based prevention programs and services available for this purpose.

**Determination and Discussion:** Item 3 was assigned an overall rating of Strength because in 88 percent of applicable cases, reviewers determined that the agency had made diligent efforts to provide the services necessary to maintain children safely in their own homes.

According to the Statewide Assessment, local departments of social services make the decision to open a case for on-going services based on a determination of a child’s safety during the course of the investigation or family assessment. At the conclusion of every substantiated investigation and family assessment, the caseworker assesses risk to determine if the child is in jeopardy of future
abuse/neglect and if further intervention is necessary to protect the child. If services are offered or court-ordered for the purpose of preventing or remedying child abuse or neglect, the case is opened to CPS. Otherwise, a case may be opened for family support or other services if resources are available in the locality. As noted in the Statewide Assessment, a survey of CPS workers found that the two most common reasons why a case that needs services is not opened for CPS services are: (1) the family refuses services; and (2) the agency is focused on more high-risk cases. In addition, social workers participating in a focus group convened as part of the State’s self-assessment, noted that the availability of resources is a critical factor in making the decision whether or not to leave a child in the home.

**Item 4. Risk of Harm to Child**

<table>
<thead>
<tr>
<th>Strength</th>
<th>X</th>
<th>Area Needing Improvement</th>
</tr>
</thead>
</table>

**Review Findings:** An assessment of Item 4 was applicable for 48 cases. Two cases were not applicable for assessment because they were opened due to the child’s behavior and the child was not at risk of harm from guardians or parents. In assessing Item 4, reviewers were to determine whether the agency made, or was making, diligent efforts to reduce the risk of harm to the children involved in each case. The assessment resulted in the following findings:

- Item 4 was rated as a Strength in 39 (81%) of the 48 applicable cases (20 of the 39 cases were foster care cases).
- Item 4 was rated as an Area Needing Improvement in nine (19%) of the 48 applicable cases (five of the nine cases were foster care cases).

Item 4 was rated as a Strength when reviewers determined the following:

- The risk of harm to children was appropriately managed by providing services to families to address risk concerns while the children remain in the home (19 cases).
- The risk of harm to children was appropriately managed by removing the children from home either prior to or during the period under review and providing services to the family (13 cases).
- The risk of harm to children was appropriately addressed by removing the children from the home either prior to or during the period under review and seeking termination of parental rights (TPR) (seven cases).

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The services offered by the agency were insufficient to reduce the risk of harm to the child (four cases).
- Parents were not compliant with services and the agency did not pursue court involvement although the child was still at risk (two cases).
The safety assessment was not sufficient to identify underlying problems that contribute to risk of harm to the child (three cases).

Stakeholders commenting on this item identified a number of DSS practices and procedures that they believe contribute to the agency’s effectiveness in managing the risk of harm to children. These included (1) the development of a new safety assessment tool; (2) the development of and adherence to safety plans; (3) the use of team meetings to assess risk; and (4) the requirement of central registry checks on all relative placements. However, several stakeholders expressed concern that the quality of risk assessment varies considerably among workers and that poor assessments often result in inappropriate service provision.

**Determination and Discussion:** Item 4 was assigned an overall rating of Area Needing Improvement because in 19 percent of the applicable cases, reviewers determined that DSS was not effective in addressing the risk of harm to the children.

As noted in the Statewide Assessment, at the close of each investigation, the worker completes a risk assessment to determine whether or not a case should be opened to on-going CPS services. This risk assessment process is designed to be used at any point when an assessment of safety is needed. Once the level of need is determined, families are offered services or immediate intervention occurs. The Statewide Assessment also notes that DSS plans to adopt a Structured Decision Making Model that will incorporate safety assessment and risk processes throughout the child welfare continuum.
II. PERMANENCY

Permanency Outcome 1

Outcome P1: Children have permanency and stability in their living situations.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th></th>
<th>Bedford County</th>
<th>Fairfax County</th>
<th>Norfolk City</th>
<th>Total Number</th>
<th>Total Percentage</th>
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Conformity of Statewide data indicators with national standards:

<table>
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<tr>
<th></th>
<th>National Standard (percentage)</th>
<th>State’s Percentage</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster care re-entries</td>
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<tr>
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<td>76.2 or more</td>
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<td>X</td>
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<tr>
<td>Length of time to achieve adoption</td>
<td>32.0 or more</td>
<td>17.9</td>
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<td>Stability of foster care placements</td>
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</table>

STATUS OF PERMANENCY OUTCOME 1

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

- The outcome was substantially achieved in 37 percent of the cases, which is less than the 90 percent required for a determination of substantial conformity.
- The State Data Profile indicates that for Federal fiscal year (FY) 2001, the State did not meet the national standard for (1) the percentage of children who were reunified within 12 months of entry into foster care; (2) the percentage of children who were discharged to finalized adoptions within 24 months of entry into foster care; and (3) the percentage of children who experienced no more than two placement settings after having been in foster care for 12 months or less.

However, the State Data Profile indicates that for Federal FY 2001, the State met the national standard for the percentage of children entering foster care who were re-entering within 12 months of a prior foster care episode.

Performance on this outcome varied across the three CFSR sites. The outcome was determined to be substantially achieved in 71 percent of Bedford County cases, compared to 42 percent of Fairfax County cases and no Norfolk City cases.
The results of the case reviews and the data provided in the State Data Profile indicate that DSS is not consistent in its efforts to (1) ensure children’s placement stability while in foster care; (2) establish appropriate permanency goals in a timely manner; (3) reunify children in a timely manner; and (4) achieve finalized adoptions in a timely manner. Delays in attaining permanency were attributed to both court-related and agency-related barriers. Court-related barriers included overcrowded dockets, continuances, and a lengthy TPR appeals process. Agency-related barriers included delays in completing paperwork and filing for TPR, as well as a lack of effort to fully discuss adoption with children and foster parents and provide adoption counseling to children who express concerns about being adopted.

Although data in the State Data Profile indicate that in Federal FY 2001 Virginia met the national standard for the percentage of children re-entering foster care within 12 months of a prior episode, the initial case reviews found that in one (17%) of the six applicable cases, the child’s entry into foster care during the period under review was within 12 months of discharge from a prior foster care episode and the re-entry was due to the same reason that originally brought the child into care. As requested by the State, an additional review of 115 cases was conducted in order to address the difference between the results of the initial onsite case review and the State’s aggregate data for this measure.

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

**Item 5. Foster Care Re-Entries**

__X__ Strength  ____ Area Needing Improvement

**Review Findings:** Although data in the State Data Profile indicate that in FY 2001 Virginia met the national standard for the percentage of children re-entering foster care within 12 months of a prior episode, the initial case reviews found that in one (17%) of the six applicable cases, the child’s entry into foster care during the period under review was within 12 months of discharge from a prior foster care episode and the re-entry was due to the same reason that originally brought the child into care. The criteria and standards for both measures must be met for this indicator (Item 5) to be rated as a Strength. As requested by the State, an additional review of 115 cases was conducted in order to address the difference between the results of the original onsite case review and the State’s aggregate data for this measure.

In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode and if the re-entry was due to the same reason that originally brought the child into care.
The initial review of cases combined with the additional review of cases resulted in the following findings:

- Item 5 was rated as a Strength in 118 (98%) of the 121 applicable cases.
- Item 5 was rated as an Area Needing Improvement in three (2%) of the 121 applicable cases.

Item 5 was rated as a Strength when the child’s entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode and in one case where there was a re-entry it was an isolated incident and the child entered care for a reason different than what originally brought the child into care. Three cases were rated as an Areas Needing Improvement when the child’s entry into foster care during the period under review occurred within 12 months of a previous foster care episode and the re-entries were due to the same general reasons that originally brought the children into care.

Some stakeholders commenting on the issue of foster care re-entries expressed the opinion that re-entry into foster care is a rare event. They suggested that this was due in part to the DSS practice of continued monitoring of families after reunification. A few stakeholders on the other hand suggested that re-entries do occur and that more preparation and planning are needed prior to reunification to ensure its success.

_Determination and Discussion:_ Item 5 was assigned an overall rating of Strength based on the finding that in three of the 121 applicable cases (2%) the child re-entered foster care within 12 months of discharge from a prior episode and the re-entries were due to the same general reasons that originally brought the children into care. In addition, the data from the State Data Profile indicate that Virginia’s re-entry rate for FY 2001 (3.6%) met the national standard of 8.6 percent or less.

**Item 6. Stability of Foster Care Placement**

___ Strength ___X___ Area Needing Improvement

_Review Findings:_ All 27 foster care cases were applicable for an assessment of Item 6. In assessing this item, reviewers were to determine whether the child had multiple placements during the period under review and, if so, whether the changes in placement were necessary to achieve the child's permanency goal or meet the child's service needs. The assessment produced the following findings:

- Item 6 was rated as a Strength in 17 (63%) of the 27 applicable cases.
- Item 6 was rated as an Area Needing Improvement in ten (37%) of the 27 applicable cases.
Ratings for Item 6 varied across the CFSR sites. The item was rated as a Strength in 86 percent of Bedford County cases and 75 percent of Fairfax County cases, compared to 25 percent of Norfolk City cases. Six of the ten cases rated as an Area Needing Improvement for this item were in Norfolk City.

Additional findings of the case review include:
- Children in 12 cases experienced one placement during the period under review.
- Children in six cases experienced two placements during the period under review.
- Children in seven cases experienced three placements during the period under review.
- In one case, a child experienced four placements during the period under review.
- In one case, a child experienced five placements during the period under review.

Item 6 was rated as a Strength when reviewers determined that the child did not have a placement change during the period under review (nine cases), or that the changes in placement were in the child's best interest (seven cases), such as moving a child to a pre-adoptive home, a therapeutic foster home, or a facility for specialized treatment. One case was rated as a Strength when reviewers determined that the child’s placement changes were beyond the agency’s control because the placement decisions were made by the juvenile justice system subsequent to the child’s probation violation.

The item was rated as an Area Needing Improvement when reviewers determined that the child’s placement changes resulted from the following:
- A lack of adequate placement resources (one case).
- A lack of effort by the agency to support a placement when there was a threat of disruption (two cases).
- Insufficient assessments of the child’s needs to ensure an appropriate placement (three cases).
- Inadequate care and supervision by foster parents or by facility staff in a foster home (four cases).

Stakeholders commenting on the issue of placement stability during the onsite CFSR differed in their opinions. Some stakeholders suggested that most children are in stable placements with committed foster parents, while other stakeholders expressed the opinion that foster children do not experience placement stability and that frequent placement changes are due to inadequate placement resources and insufficient attention to problems that occur in foster homes. Many stakeholders also voiced concern about the lack of adequate treatment facilities for children with specialized needs and insufficient resources to meet the needs of adolescents with serious behavior problems.

**Determination and Discussion:** Item 6 was assigned an overall rating of Area Needing Improvement based on the following findings:
In 27 percent of the applicable cases, reviewers determined that children had multiple placement changes that were not consistent with case plan goals or treatment needs.

Data from the State Data Profile for Federal FY 2001 indicate that the percentage of children who had no more than two placements in the first 12 months in foster care (84.8%) did not meet the national standard of 86.7 percent or more.

According to the Statewide Assessment, children who have multiple foster care placements are increasing. Point-in-time permanency data indicate that the number of children with one placement during the current episode of foster care has decreased from 59 percent in 1999 to 42 percent in 2001. The number of children with two or more placements has steadily increased during this period. The Statewide Assessment suggests that the increasing number of children with multiple placements may be attributed to the practice of using assessment homes when a child first enters foster care.

### Item 7. Permanency Goal for Child

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**Review Findings:** All 27 foster care cases were applicable for an assessment of Item 7. In assessing this item, reviewers were to determine whether the agency had established an appropriate permanency goal for the child in a timely manner. The results of this assessment were the following:

- Item 7 was rated Strength in 22 (81%) of the 27 applicable cases.
- Item 7 was rated as an Area Needing Improvement in five (19%) of the 27 applicable cases.

Ratings for this item varied across CFSR sites. The item was rated as a Strength in 100 percent of Fairfax County cases and 86 percent of Bedford County cases, compared to 50 percent of Norfolk City cases.

The case review found that the children in the 27 foster care cases had the following permanency goals:

- Ten children had a goal of adoption.
- Nine children had a goal of reunification.
- Seven children had a goal of long-term foster care (called “permanent foster care”) and emancipation/independent living.
- One child had concurrent goals of adoption and long-term foster care.
Twenty of the 27 children in the foster care cases had been in foster care for 15 of the most recent 22 months at the time of the onsite review. TPR had been filed in 13 of the 20 cases, and attained in ten. For the seven cases for which TPR had not been filed, a reason for not filing had been entered in two of the case files. In five case files, no reason was provided for not filing for TPR.

Item 7 was rated as a Strength when reviewers determined that the child's permanency goal was appropriate and had been established in a timely manner. The item was rated as an Area Needing Improvement when reviewers determined the following:

- The goal is not appropriate given the needs of the child and the circumstances of the case (three cases).
- The goal is appropriate but was not established in a timely manner (two cases).

Fairfax and Bedford County stakeholders commenting on this item during the onsite CFSR expressed the opinion that the agency and the courts generally establish permanency goals in a timely manner. Several stakeholders also reported that concurrent planning has been implemented, although they noted that it does not begin until the child has been in foster care for six months. Fairfax County stakeholders reported that that the county has a Permanency Planning Group that is comprised of judges, Guardians Ad Litem, social workers, and other relevant parties and serves as a forum for addressing permanency issues and eliminating potential barriers. Bedford County stakeholders reported that the court in that county has a “no continuance” policy that helps to move dependency cases to permanency.

In contrast to Fairfax and Bedford County stakeholders, Norfolk City stakeholders expressed the opinion that permanency goals are not being established in a timely manner for children in foster care in that locality. This was attributed to a lack of concurrent planning and to inadequate determinations of appropriate permanency goals. The differences across localities with regard to stakeholders’ perceptions are consistent with cross-site differences in the case review findings.

**Determination and Discussion:** Item 7 was assigned an overall rating of Area Needing Improvement based on the finding that in 19 percent of the applicable cases, reviewers determined that the agency had not established an appropriate goal for the child in a timely manner.

According to the Statewide Assessment, reforms initiated through the Court Improvement Program have helped DSS and the courts to collaborate to meet permanency goals and Federal timelines. The Statewide Assessment also notes that the agency is mandated to first pursue reunification as the child’s goal. When this goal is not possible, the second permanency priority goal for a child is placement with relatives. Adoption is the third priority goal if the first two goals are not feasible. The Statewide Assessment indicates that workers are encouraged to engage in concurrent planning to facilitate timely movement toward permanency, although this practice is not mandated.
Item 8.  Reunification, Guardianship, or Permanent Placement with Relatives

___ Strength  ___ Area Needing Improvement

**Review Findings:** Item 8 was applicable for nine of the 27 foster care cases. In assessing these cases, reviewers were to determine whether the agency achieved the goal of reunification in a timely manner or, if the goal was not achieved, whether the agency made, or was in the process of making, diligent efforts to achieve reunification in a timely manner. The following were the results of this assessment:

- Item 8 was rated as a Strength in six (67%) of the nine applicable cases.
- Item 8 was rated as an Area Needing Improvement in three (33%) of the nine applicable cases.

Nine of the cases reviewed had a goal of reunification. In three cases, children were reunified with their parents during the period under review, and in one of these cases, reunification occurred within 12 months of the child’s entry into foster care. Three of the six children with a goal of reunification who had not yet been reunified with parents had been in foster care for more than 12 months by the end of the CFSR period under review.

Item 8 was rated as a Strength when reviewers determined that the goal had been achieved in a timely manner (one case) or that the agency had taken steps to achieve the goal in a timely manner, despite barriers such as a delay in accessing services (five cases). The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made adequate efforts to achieve the goal of reunification in a timely manner (three cases).

While noting that the agency has an emphasis on reunification, stakeholders identified the following barriers to timely reunification:

- The agency’s case plans do not address all of the services needed to achieve reunification.
- Visitation between children and parents is not sufficient to support a plan of reunification.

Stakeholders also reported that the State does not have a subsidized legal guardianship permanency option for children in foster care.

**Determination and Discussion:** Item 8 was assigned an overall rating of Area Needing Improvement based on the following findings:

- Data from the State Data Profile indicate that for FY 2001 the percentage of children who are reunified within 12 months of entry into foster care (73.6%) did not meet the national standard of 76.2 percent or more.
- In 33 percent of the applicable cases, reviewers determined that the agency had not made diligent efforts to attain the goals of reunification in a timely manner.
According to the Statewide Assessment, Virginia has a lower proportion of children in care with the goal of reunification than the national average, although reunification is considered the highest priority goal for children in foster care, according to State procedures. The Statewide Assessment also notes that Virginia does not have a goal of subsidized legal guardianship, and although the goal of placement with a relative is a second priority, Virginia does not have a formal kinship care program.

As indicated in the Statewide Assessment, participants in focus groups convened as part of the State’s self-assessment process identified the following barriers to timely reunification:

- Parental substance abuse.
- Parental non-compliance with services.
- Parental mental health problems.
- Parent’s lack of financial resources and inadequate housing.

**Item 9. Adoption**

___ Strength     X Area Needing Improvement

*Review Findings:* Eleven of the 27 foster care cases were applicable for an assessment of Item 9. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to finalize adoptions in a timely manner. The results of this assessment were the following:

- Item 9 was rated as a Strength in two (18%) of the 11 applicable cases.
- Item 9 was rated as an Area Needing Improvement in nine (82%) of the 11 applicable cases.

The item was rated as a Strength in 100 percent of the applicable cases (two cases) in Bedford County compared to none of the cases in Norfolk City and Fairfax County.

Children in 11 cases had permanency goals of adoption, including one child with a concurrent goal of long-term foster care. Adoption was finalized in two of these cases. One finalization occurred 24.5 months after the child’s entry into foster care and the other occurred 36 months after entry into foster care. Two of the nine remaining children with a permanency goal of adoption were in adoptive placements at the time of the onsite review.
Item 9 was rated as a Strength when reviewers determined that the agency had achieved a finalized adoption in a timely manner (one case) or was making active efforts to achieve the adoption within 24 months (one case).

The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- There were agency-related barriers to timely adoption, such as maintaining a goal of reunification for too long a period of time, failing to complete the necessary paperwork in a timely manner, lack of provision of adoption counseling to children, lack of discussion with foster parents about adoption including information about adoption subsidies, and/or failure to file for TPR in a timely manner (six cases).
- There were court-related barriers to timely adoption including continuances and a lengthy TPR appeals process (three cases).
- The agency experienced difficulty recruiting adoptive families for children with special needs (two cases).

Most stakeholders commenting on this item expressed the opinion that adoptions are not being finalized in a timely manner. They noted that the primary barriers to timely adoptions are the lengthy TPR appeals process and crowded court dockets. Fairfax County stakeholders reported that when a continuance is granted, it may take six months before a hearing can be rescheduled.

Some Bedford County and Fairfax County stakeholders suggested that the adoption subsidy program has increased the number of adoptions and encouraged foster parents to adopt. However, Norfolk City stakeholders expressed concern that adoption subsidies are not available for all adoptive families. They noted that some families who have been fostering a child for a long period of time and who are committed to the child still do not wish to adopt because once children are adopted, they are no longer eligible for all of the State-supported services they previously received.

**Determination and Discussion:** Item 9 was assigned an overall rating of Area Needing Improvement based on the following findings:

- Data from the State Data Profile indicate that the State's percentage of finalized adoptions in FY 2001 that occurred within 24 months of removal from home (17.9%) did not meet the national standard of 32 percent or more.
- In 82 percent of the applicable cases, reviewers determined that DSS had not made concerted efforts to achieve an adoption in a timely manner.

According to the Statewide Assessment, the length of time to achieve adoption decreased 9.7 percent in the three-year period from 1999-2001 and the number of TPRs tripled in five years. The State received Federal Adoption Incentive funds in FY 1999 and FY 2001.
The Statewide Assessment reports that delays in finalizing adoptions often occur when parents appear to make progress toward reunification at the time the court is considering TPR. When this happens, the court often decides to delay TPR to give parents more time for reunification. Other factors identified in the Statewide Assessment as contributing to delays in the adoption process include:

- A lack of adoptive homes for older children and for children with special needs.
- High caseloads of workers and attorneys.
- Crowded court dockets.
- Granting of continuances.
- The lengthy TPR process.

Finally, the Statewide Assessment notes that as part of an effort to eliminate adoption barriers, Virginia is standardizing regulations for approving foster and adoptive homes as resource families. This process will decrease the time foster parents wait to be approved as adoptive parents when adopting their foster children. As noted in the Statewide Assessment, more than 78 percent of children adopted from the foster care system are adopted by their foster parents.

**Item 10.  Permanency Goal of Other Planned Permanent Living Arrangement**

| X | Strength | Area Needing Improvement |

**Review Findings:** Eight of the foster care cases were applicable for an assessment of Item 10. In assessing these cases, reviewers were to determine if the agency made, or was making, diligent efforts to assist children in attaining their goals related to other planned permanent living arrangements. This assessment resulted in the following findings:

- Item 10 was rated as a Strength in seven (88%) of the eight applicable cases.
- Item 10 was rated as an Area Needing Improvement in one (12%) of the eight applicable cases.

Item 10 was rated as a Strength when reviewers determined that children were receiving appropriate services and the foster care placement was stable. One case was rated as an Area Needing Improvement when reviewers determined that the agency did not actively pursue an adoptive placement for a 12-year-old HIV-positive child who had been in foster care for several years.

Stakeholders commenting on the issue of long-term foster care expressed different opinions. While some stakeholders expressed the opinion that the goal is used appropriately, particularly for older teens, other stakeholders voiced concern that this goal is established even when there is no family willing to take the child on a long-term basis. These stakeholders also noted that “long-term” placements often disrupt and thus are not really “permanent” homes.
While many local-level stakeholders commented favorably on the availability of independent living services in their localities for youth aged 16 and older, a few stakeholders suggested that independent living assessments and planning could be improved. A clear concern identified by stakeholders is that independent living services are not mandated statewide. Therefore, foster care youth in some areas of the State do not have access to independent living services, even if they are expected to be emancipated and live independently.

**Determination and Discussion:** Item 10 was assigned an overall rating of Strength because in 88 percent of the applicable cases, reviewers determined that DSS had made concerted efforts to ensure that the child’s placement was stable and that the child was receiving appropriate services.

According to the Statewide Assessment, Virginia has a higher proportion of children in long-term foster care than the national average. Long-term foster care encompasses three specific permanency goals—permanent foster care, another planned permanent living arrangement (APPLA), and continued foster care. APPLA is reserved for children with severe disabilities who require residential treatment. Continued foster care is to be used as an interim goal until a permanent plan is established. Permanent foster care is reserved for children over the age of 12 (unless a child is part of a sibling group) who have bonded with their foster parents and the goals of reunification, placement with relatives, and adoption have been eliminated. Independent living also is a permanency goal for foster children. The Statewide Assessment notes that there has been an 80 percent increase over the past seven years in the number of children with Permanent Foster Care as their permanency goal and that, for some of these children, this permanency goal may not be appropriate and or in accordance with State policy.
Permanency Outcome 2

Outcome P2: The continuity of family relationships and connections is preserved for children.

| Number of cases reviewed by the team according to degree of outcome achievement: |
|-------------------------------------------------|-----------------|-----------------|-----------------|-----------------|
|                                                | Bedford County | Fairfax County | Norfolk City    | Total Number    |
| Substantially Achieved:                        | 4              | 11             | 4               | 19              |
| Partially Achieved:                           | 3              | 1              | 3               | 7               |
| Not Achieved or Addressed:                    | 0              | 0              | 1               | 1               |
| Not Applicable:                               | 5              | 11             | 7               | 23              |

Total Percentage

70.3

26.0

3.7

STATUS OF PERMANENCY OUTCOME 2

Virginia did not achieve substantial conformity with Permanency Outcome 2. This determination was based on the finding that the outcome was rated as substantially achieved in 70.3 percent of the cases, which is less than the 90 percent required for substantial conformity.

Performance with respect to achieving Permanency Outcome 2 varied across CFSR sites. The outcome was determined to be substantially achieved in 92 percent of Fairfax County cases, compared to 57 percent of Bedford County cases and 50 percent of Norfolk City cases.

CFSR case review findings indicate that DSS made concerted effort to place children in close proximity to their families and to place siblings together in foster care. Nevertheless, case reviewers determined that the agency did not always preserve connections between children and their families through frequent visitation or other forms of contact. In addition, case review findings indicate that DSS did not consistently seek or assess relatives as placement resources, although this is required in State policy.

Findings pertaining to the specific items assessed under Permanency Outcome 2 are presented below.

Item 11.                Proximity of Foster Care Placements

X  Strength              _____ Area Needing Improvement

Review Findings: Of the 27 foster care cases, 18 were applicable for an assessment of Item 11. Cases determined to be not applicable were those in which (1) TPR had been attained prior to the period under review; (2) contact with parents was not
considered to be in the child's best interest; and/or (3) parents were deceased or their whereabouts were unknown. In assessing this item, reviewers were to determine whether the child's most recent foster care setting was in close proximity to the child's parents or close relatives. The products of this assessment were the following:

- Item 11 was rated as a Strength in 17 (94%) of the 18 applicable cases.
- Item 11 was rated as an Area Needing Improvement in one (6%) of the 18 applicable cases.

Item 11 was rated as a Strength when reviewers determined the following:

- The child was placed in the same community as parents or relatives (five cases).
- The child’s out-of-county placement was necessary to meet the child’s needs (ten cases) (e.g., therapeutic foster home, residential facility).
- The child’s out-of-state placement was necessary to meet the child’s needs (two cases) (i.e., sex offender treatment facility, residential treatment facility).

The item was rated as an Area Needing Improvement in one case when reviewers determined that the child was not placed in close proximity to parents or close relatives because of a lack of placement resources.

Stakeholders commenting on this item expressed the opinion that the agency attempts to place children in their communities whenever possible. However, several stakeholders reported that this objective often is difficult to achieve because of a lack of placement resources. They noted that special needs children usually are placed out-of-county and sometimes in another State. Stakeholders said that there is a multidisciplinary team that explores all community resources and makes the final assessment regarding these placements.

**Determination and Discussion:** Item 11 was assigned an overall rating of Strength because in 94 percent of the cases, reviewers determined that DSS had made diligent efforts to ensure that children were placed in foster care placements that were in close proximity to their parents or relatives; or, when placements were not in close proximity, they were necessary to meet the child’s special needs.

This finding is consistent with information provided in the Statewide Assessment indicating that children in foster care are placed in close proximity to their communities of origin.
Item 12. Placement with Siblings

X Strength _____ Area Needing Improvement

**Review Findings:** Fourteen of the 27 foster care cases involved a child who had siblings who also were in foster care. In assessing this item, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether the separation was necessary to meet the needs (service or safety needs) of one or more of the children. The following were the results of this assessment:
- Item 12 was rated as a Strength in 12 (86%) of the 14 applicable cases.
- Item 12 was rated as an Area Needing Improvement in two (14%) of the 14 applicable cases.

In nine of the 14 applicable cases, the child was in a placement with at least one other sibling, and in five of those cases, the child was in a placement with all of his or her siblings.

Item 12 was rated as a Strength if the child was in placement with all of his or her siblings (five cases), or if separation of the siblings was deemed necessary to meet at least one child’s safety or treatment needs (seven cases). The item was rated as an Area Needing Improvement when reviewers determined that (1) the agency did not make efforts to find a foster care home that would keep a sibling group together (one case), or (2) the agency did not place a child with siblings in a foster home that had already indicated interest in adopting all of the siblings (one case).

Although most stakeholders commenting on this item expressed the opinion that DSS makes diligent efforts to place children with their siblings, several stakeholders suggested that there is a need for more foster homes and for an increase in the use of therapeutic foster homes for sibling groups.

**Determination and Discussion:** Item 12 was assigned an overall rating of Strength because in 86 percent of the applicable cases, reviewers determined that DSS made diligent efforts to place siblings together in foster care whenever possible.

According to the Statewide Assessment, as of March 2003, approximately 63 percent of all children in foster care who had siblings in foster care were placed with at least one sibling. Another 18.7 percent were placed in the same locality or zip code as their sibling. The Statewide Assessment notes that only 18.4 percent of these children were not placed with or near their sibling.
Item 13. Visiting with Parents and Siblings in Foster Care

___ Strength ___ Area Needing Improvement

Review Findings: An assessment of Item 13 was applicable for 21 of the 27 foster care cases. Six cases were not applicable for an assessment because TPR had been established prior to the period under review and parents were no longer involved in the children’s lives. In assessing this item, reviewers were to determine (1) whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care; and (2) whether these visits occurred with sufficient frequency to meet the needs of children and families. The following findings of this assessment include:

- Item 13 was rated as a Strength in 14 (67%) of the 21 applicable cases.
- Item 13 was rated as an Area Needing Improvement in seven (33%) of the 21 applicable cases.

Because visitation is generally perceived as critical to promoting reunification, an analysis was done of the ratings for this item in those cases in which children had a permanency goal of reunification. Four of the nine cases in which the child had a permanency goal of reunification were rated as an Area Needing Improvement for this item and five were rated as a Strength.

Ratings for this item varied across CFSR sites. The item was rated as a Strength in 89 percent of Fairfax County cases, compared to 60 percent of Bedford County cases and 43 percent of Norfolk City cases.

Typical visitation between children and their mothers for the 18 applicable cases was the following:

- Weekly visits (four cases).
- Twice a month visits (two cases).
- Monthly visits (three cases).
- Less than monthly visits (five cases).
- No visits (four cases).

Reviewers determined that the agency had made concerted efforts to promote more frequent visitation in five of the nine cases in which visits with mothers occurred less frequently than once a month.

Typical visitation between children and their fathers for the ten cases for which this assessment was applicable was the following:

- Weekly visits (three cases).
- Monthly visits (one case).
- Less than monthly visits (one case).
- No visits (five cases).
Reviewers determined that the agency had made concerted efforts to promote more frequent visitation in four of the six cases in which visits with father occurred less frequently than once a month.

Visitation between siblings was applicable in nine cases. Typical visitation between siblings was the following:

- Weekly visits (three cases).
- Monthly visits (two cases).
- Less than monthly visits (one case).
- No visits (three cases).

Reviewers determined that there was a valid reason for infrequent visits between siblings in three of the four cases in which sibling visits occurred less frequently than once a month.

Item 13 was rated as a Strength when reviewers determined that the frequency of visitation met the needs of children and parents (ten cases), or that, when visitation was less frequent than needed, the agency made diligent efforts to promote more frequent visitation (four cases). The item was rated as an Area Needing Improvement when reviewers determined that the frequency of visits was not sufficient to meet the needs of the child and the agency did not make appropriate efforts to facilitate more frequent visitation between a parent and child.

Most stakeholders commenting on the extent of visitation between children and their parents and siblings in foster care expressed the opinion that DSS makes concerted efforts to facilitate visitation. Stakeholders noted that DSS often provides transportation for parents or foster parents to facilitate visitation, makes available supervised visitation through a Visitation Center, involves foster parents and GALs in visitation plans, and works with service providers to allow siblings to visit in unique settings such as an amusement park. A few stakeholders, however, expressed concern that DSS does not make sufficient effort to encourage visitation and planning with fathers.

**Determination and Discussion:** Item 13 was assigned an overall rating of Area Needing Improvement due to the finding that in 33 percent of the applicable cases, reviewers determined that DSS had not made concerted efforts to ensure that visitation between parents and children and between siblings was of sufficient frequency to meet the needs of the child.

According to the Statewide Assessment, Virginia’s policy requires that visiting with parents or prior custodians must begin at the time a child is placed in foster care. A mutually agreeable visitation plan and other communication, such as phone calls and letters, are arranged with the parents. The worker is responsible for facilitating visitation and assisting the parents to ensure that visitation occurs. Visitation requirements apply even when a parent is incarcerated or in a treatment program, unless the court has restricted visitation.
The Statewide Assessment also notes that when a child is separated from siblings, the agency should arrange regular visitation with siblings. For reunification, indicators of progress include trial visit length and frequency, with reduced supervision of visits.

**Item 14. Preserving Connections**

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**Review Findings:** Item 14 was applicable for assessment in 26 of the 27 foster care cases. One case was not applicable because the agency determined that the child had “no connections to build upon, no positive connections to family or friends, and that it was not in the child’s best interest to maintain connections with his remaining extended family.” In assessing Item 14, reviewers were to determine whether the agency made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, heritage, family, faith, and friends while in foster care. This assessment resulted in the following findings:

- Item 14 was rated as a Strength in 20 (77%) of the 26 applicable cases.
- Item 14 was rated as an Area Needing Improvement in six (23%) of the 26 applicable cases.

Reviewers indicated that in 18 of the 26 cases, children's primary connections had been “significantly” preserved while they were in foster care; in six of the 26 cases, children’s primary connections had been “partially” preserved; and in two of the 26 cases, children’s primary connections were “not at all” preserved.

Item 14 was rated as a Strength when reviewers determined that the agency had made diligent efforts to achieve one or more of the following:

- Preservation of the child’s primary connections with extended or former foster family members (19 cases).
- Preservation of the child’s heritage (three cases).
- Preservation of the child’s religious affiliation (one case).
- Preservation of the child’s primary connections with school or community (one case).

The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made diligent efforts to preserve the child's connections with primary or extended family members (six cases). In one of these cases, reviewers also determined that the agency did not make efforts to preserve the ethnic/cultural connections of an African American child who was placed in a White foster home, even though the child expressed distress over this loss of connection.
Stakeholders commenting on this issue expressed the opinion that DSS works in collaboration with schools and foster parents to ensure that children’s connections to extended families and schools are preserved. Stakeholders noted that the agency could be more innovative in preserving connections, such as recognizing fictive kin who have significant bonds with the child. Some stakeholders expressed concern that insufficient attention is given to preserving children’s connection with their religion.

**Determination and Discussion:** Item 14 was assigned an overall rating of Area Needing Improvement based on the finding that in 23 percent of the cases, reviewers determined that the State did not make diligent efforts to preserve children's connections.

**Item 15. Relative Placement**

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**Review Findings:** Twenty-three of the 27 foster care cases were applicable for an assessment of Item 15. Cases were not applicable for assessment of this item when a child’s special treatment needs precluded relative placement or when the child was in the juvenile justice system. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The assessment produced in the following findings:

- Item 15 was rated as a Strength in 17 (74%) of the 23 applicable cases.
- Item 15 was rated as an Area Needing Improvement in six (26%) of the 23 applicable cases.

Item 15 was rated as a Strength when reviewers determined that the agency had made diligent efforts to search for both maternal and paternal relatives whenever possible. Relatives were ruled out as potential placement resources when they were unable or unwilling to care for the children or had a criminal record or history of substantiated child maltreatment.

The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made diligent efforts to search for either maternal or paternal relatives (five cases), or had sought paternal but not maternal relatives (one case).

The opinions provided by stakeholders commenting on this item during the onsite CFSR differed. Although some stakeholders suggested that relatives are being sought as placement resources, other stakeholders expressed the opinion that relatives are not being sought as placement resources until it is determined that reunification will not be possible. A few stakeholders noted that the agency is beginning to use family group conferencing and that it is hoped that this process will assist in identifying relatives as placement resources early on in the case.
Stakeholders also noted that a key barrier to relative placements is that the State does not have a formal kinship care program that provides for a legal guardianship subsidy for relatives. Relatives who are not licensed as foster parents can receive “child only” payments through the Temporary Assistance for Needy Families (TANF) program. If they become licensed foster parents, they receive the same level of reimbursement as non-relative foster parents, which is considerably higher than TANF payments.

**Determination and Discussion:** Item 15 was assigned an overall rating of Area Needing Improvement based on the finding that in 26 percent of the cases, reviewers determined that DSS did not make diligent efforts to locate and assess relatives as potential placement resources.

According to the Statewide Assessment, Virginia policy requires workers to explore relatives as possible permanent placements or foster parents for the child. The Virginia Court system also has a built in mechanism to consider placements of a child with relatives at each hearing. Although 70 percent of Virginia’s foster children are placed in a family setting, the majority of these placements are in non-relative homes. Legislation in 2000 increased emphasis on relative placements, both as an alternative to foster care and as a placement resource for children re-entering care. While only 3.6 percent of Virginia’s foster children were in relative foster homes at a point in time in 2001, relative foster placements are increasing. From 1999-2001 there was an increase of 29 percent in actual children in relative foster home placements.

The Statewide Assessment also provides findings from focus group participants regarding relative placements. Participants stated that locating relatives who are willing to care for children without financial support is a challenge. To receive financial support, a relative must be a licensed foster parent or seek TANF assistance for the child if they assume custody. Some relatives prefer to assume custody even though foster home payments are significantly higher than assistance through TANF. Others prefer to become a licensed foster parent and have on-going agency involvement. In other instances, relatives are not available or are unwilling to care for the child.

According to the State’s CPS policy, workers are to consider placement with relatives when emergency removal is required. A criminal records check and central records check are required for placement with relatives in these emergency situations. The State’s Foster Care policy states that the court must give consideration to placing a child with a relative at the emergency removal, preliminary removal, and dispositional hearings. The policy objective is to place children with relatives and transfer custody to relatives.
**Item 16. Relationship of Child in Care with Parents**

_____ Strength    X Area Needing Improvement

**Review Findings:** An assessment of Item 16 was applicable for 18 of the 27 foster care cases. A case was considered not applicable if parental rights were terminated prior to the period under review and parents were no longer involved with the child or there was reason to believe that having a relationship with the parent was “not in the child’s best interest.” In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers. The findings of this assessment were the following:

- Item 16 was rated as a Strength in 12 (67%) of the 18 applicable cases.
- Item 16 was rated as an Area Needing Improvement in six (33%) of the 18 applicable cases.

Ratings for this item varied across CFSR sites. The item was rated as a Strength in 87.5 percent of applicable Fairfax County cases and 75 percent of applicable Bedford County cases and 33 percent of applicable Norfolk City cases.

Item 16 was rated as a Strength when reviewers determined that the agency promoted the parent-child relationship by facilitating and encouraging frequent visitation/contact or made active efforts to promote bonding or continued involvement. The item was rated as an Area Needing Improvement when reviewers determined that DSS did not make diligent efforts to ensure that the frequency of visitation between the parents and the child was sufficient to support the child’s relationship with the mother (four cases) or with both parents (two cases). For example, in one case, the mother did not receive funds to defray the cost of travel to visit her child who was placed far away and she was not given financial assistance for long-distance telephone calls to the child.

**Determination and Discussion:** Item 16 was assigned an overall rating of Area Needing Improvement due to the finding that in 33 percent of the applicable cases, reviewers determined that DSS had not made concerted efforts to support the parent-child relationships of children in foster care.
III. CHILD AND FAMILY WELL-BEING

Well-Being Outcome 1

Outcome WB1: Families have enhanced capacity to provide for their children’s needs.

| Number of cases reviewed by the team according to degree of outcome achievement: |
|---------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
|                                 | Bedford County | Fairfax County  | Norfolk City    | Total Number    | Total Percentage|
| Substantially Achieved:        | 6               | 19              | 8               | 33              | 66.0            |
| Partially Achieved:           | 4               | 4               | 4               | 12              | 24.0            |
| Not Achieved or Addressed:    | 2               | 0               | 3               | 5               | 10.0            |
| Not Applicable:               | 0               | 0               | 0               | 0               | 0               |

STATUS OF WELL-BEING OUTCOME 1

Virginia did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 66 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.

Performance on Well-Being Outcome 1 varied across the three CFSR sites. The outcome was determined to be substantially achieved in 83 percent of Fairfax County cases, compared to 53 percent of Norfolk City cases and 50 percent of Bedford County cases.

The CFSR case reviews revealed that DSS was not consistent in its efforts to (1) assess needs and provide services to children, parents, and foster parents; (2) involve children and parents in case planning; and (3) establish face-to-face contact with children and their parents that was of sufficient frequency and quality to ensure children’s safety and/or promote attainment of case goals.

Findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.
Item 17. Needs and Services of Child, Parents, Foster Parents

___ Strength     ___ Area Needing Improvement

**Review Findings:** An assessment of Item 17 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether the agency had (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. The results of this assessment were the following:

- Item 17 was rated as a Strength in 37 (74%) of the 50 applicable cases (19 of the 37 cases were foster care cases).
- Item 17 was rated as an Area Needing Improvement in 13 (26%) of the 50 applicable cases (eight of the 13 cases were foster care cases).

There was no substantive difference in the ratings for this item as a function of type of case (i.e., foster care case or in-home services case). Ratings for the item did vary across the CFSR sites. The item was rated as a Strength in 91 percent of Fairfax County cases, compared to 67 percent of Bedford County cases and 53 percent of Norfolk City cases.

Item 17 was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Services provided to the children were not appropriate to meet the child’s needs (eight cases).
- Children’s needs were not assessed (seven cases).
- Children’s service needs were not met (three cases).
- Parents’ needs were not assessed (seven cases).
- Parents’ service needs were not met (four cases).
- Foster parent’s needs were not assessed (four cases).
- Foster parent’s service needs were not met (three cases).

Stakeholders commenting on this item during the onsite CFSR reported that multiple services are available, accessible, and well-coordinated for children, youth, and parents. However, several stakeholders voiced concern about the quality of assessments and of the service delivery process. They expressed the opinion that the quality of assessments is inconsistent across workers, and that in many cases assessments are not sufficiently comprehensive to capture underlying issues and problems in the family that contribute to child maltreatment. With regard to service delivery, Fairfax County stakeholders, which has a substantial population of recent immigrants from foreign countries, noted that language and cultural differences are barriers to effective service delivery. Stakeholders...
also noted that there are gaps in transitional services, such as housing and education, for youth who are expected to move from the foster care system to living independently.

**Determination and Discussion:** Item 17 was assigned an overall rating of Area Needing Improvement because reviewers determined that DSS had not adequately assessed and/or addressed the service needs of children, parents, and foster parents in 26 percent of the cases.

According to the Statewide Assessment, foster care policy requires that the service plan be based on an assessment of the child and family’s needs and conditions that must be successfully addressed before the child can safely return home. Local needs assessment practices range from the use of formalized tools to less formal methods such as interviews with children, families, and collateral contacts. The Statewide Assessment notes that services offered to the child and the family are based on the needs identified through the assessment process and captured in the service plan.

**Item 18. Child and Family Involvement in Case Planning**

___ Strength  ___X___ Area Needing Improvement

**Review Findings:** An assessment of Item 18 was applicable for 49 of the 50 cases. One foster care case was considered not applicable because the mother was deceased, parental rights had been terminated for the father, and the child was not considered capable of active participation. In assessing this item, reviewers were to determine whether parents (including pre-adoptive parents or permanent caregivers) and children (if age-appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required active participation by the parent and/or child in identifying the services and goals included in the case plan. The assessment resulted in the following findings:

- Item 18 was rated as a Strength in 34 (69%) of the 49 applicable cases (19 of the 34 cases were foster care cases).
- Item 18 was rated as an Area Needing Improvement in 15 (31%) of the 49 applicable cases (seven of the 15 cases were foster care cases).

Although there was less than a ten percent difference in ratings for this item based on the type of case reviewed (73 percent of foster care cases were rated as a Strength compared to 65 percent of in-home services cases), there was extensive variation in ratings across CFSR sites. The item was rated as a Strength in 87 percent of Fairfax County cases, compared to 60 percent of Norfolk City cases and 45 percent of Bedford County cases.
Item 18 was rated as a Strength when reviewers determined that all appropriate parties actively participated in the case planning process. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following occurred:

- Mothers who should have been involved in case planning were not involved (eleven cases).
- Fathers who should have been involved in case planning were not involved (ten cases).
- Children who were old enough to have been involved in case planning were not involved (six cases).
- There was no current case plan in the child’s file (two cases).

Stakeholders commenting on this issue were in general agreement that DSS is not consistent in involving older children and parents in the case planning process. Stakeholders noted that in many situations, rather than engaging children and parents in the case planning process, workers will tell the parents and children what the goals are and ask them to sign the plan. Some stakeholders reported that there are instances when youth request that specific services or actions be included in the plan and this request is ignored.

**Determination and Discussion:** Item 18 was assigned an overall rating of Area Needing Improvement based on the finding that in 31 percent of the cases, reviewers determined that DSS had not made diligent efforts to involve parents and/or children in the case planning process.

According to the Statewide Assessment, DSS has established a service-planning process that is family-centered and strengths-based, and includes the family in identification of service needs and development of the plan. The Statewide Assessment notes that when a child is in foster care, the worker must involve the parents or prior custodians and the child (if appropriate) in service planning. Parents and children, age 12 and older, are members of the “foster care team,” along with the worker, foster parents, services providers, and the court. In addition, information in the Statewide Assessment indicates that under the Comprehensive Services Act, the Family Assessment and Planning Team (FAPT) must provide for family participation in all aspects of assessment, planning and implementation of services, including full participation by the family during the team meeting when their child’s case is presented.

**Item 19. Worker Visits with Child**

___ Strength ___X Area Needing Improvement

**Review Findings:** All 50 cases were applicable for an assessment of Item 19. In conducting this assessment, reviewers were to determine whether the frequency of visits between caseworkers and children was sufficient to ensure adequate monitoring of the
child's safety and well-being and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The assessment produced the following findings:

- Item 19 was rated as a Strength in 38 (76%) of the 50 applicable cases (19 of the 38 cases were foster care cases).
- Item 19 was rated as an Area Needing Improvement in 12 (24%) of the 50 applicable cases (eight of the 12 cases were foster care cases).

Ratings for this item varied slightly as a function of type of case. The item was rated as a Strength in 70 percent of foster care cases compared to 83 percent of in-home services cases. Ratings also differed across CFSR sites. The item was rated as a Strength in 87 percent of Fairfax County cases, compared to 73 percent of Norfolk City cases and 58 percent of Bedford County cases.

Reviewers noted the following with respect to frequency of visits for the 27 foster care cases:

- In seven cases, visits typically occurred bi-weekly.
- In nine cases, visits typically occurred once a month.
- In eleven cases, visits typically occurred less than monthly.

Reviewers noted the following with respect to frequency of visits for the 23 in-home services cases:

- In four cases, visits typically occurred weekly.
- In six cases, visits typically occurred bi-weekly.
- In ten cases, visits typically occurred once a month.
- In three cases, visits typically occurred less than monthly.

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

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

Stakeholders commenting on the issue of worker contacts with children expressed differing opinions. Some stakeholders noted that workers visit children regularly and often exceed policy requirements for face-to-face contact. They indicated that workers make concerted efforts to establish frequent face-to-face contact with infants (because many are born drug exposed) and youth who have a goal of independent living. Other stakeholders reported that workers do not visit children and youth regularly, although they
acknowledged that the frequency of contact varies across caseworkers and is likely to be determined by the caseworker’s caseload size.

**Determination and Discussion:** Item 19 was assigned an overall rating of Area Needing Improvement based on the finding that in 24 percent of the cases, reviewers determined that caseworker visits with children were not of sufficient frequency and/or the visits did not focus on case planning or goal attainment.

According to the Statewide Assessment, Virginia foster care policy requires workers to have on-going face-to-face contact with each child in their caseloads at least once every three months. There are two exceptions to this: (1) If the child is in an independent living placement arrangement other than a dormitory setting, there must be face-to-face contact at least monthly; and (2) if the child is in an approved permanent foster care placement, the child must receive face-to-face contact at least once every six months.

The Statewide Assessment also notes that CPS policy (i.e., in-home services) requires face-to-face contact with the child and family at least once every three months when a case is opened for services, either as a result of a founded CPS disposition or a completed family assessment. Eighty percent of CPS supervisors and workers surveyed as part of the State’s self-assessment indicated that face-to-face contact between the worker and child happens at least monthly once a case is open for services, while 91 percent reported that other types of contacts happen at least monthly. Over 65 percent of youth surveyed reported seeing their worker two or more times during a three-month period.

As noted in the Statewide Assessment, one barrier preventing more frequent worker contacts with the child is large caseloads that contribute to limited staff time and resources. Other barriers include case crises and travel time required for contacts.

**Item 20. Worker Visits with Parents**

___ Strength  X Area Needing Improvement

**Review Findings:** An assessment of Item 20 was applicable for 43 of the 50 cases. There were seven foster care cases that were not applicable for this assessment. In one case, both parents were deceased. In six cases, TPR had been attained for the parents prior to or during the period under review and the parents were no longer involved with the child. Reviewers were to assess whether the caseworker’s face-to-face contact with the children’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and/or ensure the children's safety and well being. The following were the results of this assessment:

- Item 20 was rated as a Strength in 33 (77%) of the 43 cases (15 of the 33 cases were foster care cases).
• Item 20 was rated as an Area Needing Improvement in ten (23%) of the 43 cases (five of the ten cases were foster care cases). Ratings for worker visits with parents did not vary substantively as a function of type of case. However, ratings did differ across CFSR sites. The item was rated as a Strength in 89 percent of Fairfax County cases, compared to 73 percent of Bedford County cases and 61 percent of Norfolk City cases.

Typical patterns of caseworker visits with mothers were the following (43 applicable cases):
• Weekly visits (six cases – one of which was a foster care case).
• Twice a month visits (nine cases – four of which were foster care cases).
• Monthly visits (18 cases – eight of which were foster care cases).
• Less than monthly visits (ten cases – seven of which were foster care cases).

Typical patterns of caseworker visits with fathers were the following (30 applicable cases):
• Twice a month visits (four cases – two of which were foster care cases).
• Monthly visits (nine cases – four of which were foster care cases).
• Less than monthly visits (13 cases – four of which were foster care cases).
• No visits (four cases – three of which were foster care cases).

Item 20 was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. The item was rated as an Area Needing Improvement when reviewers determined the following:
• Visits were not occurring with sufficient frequency, although when visits did occur they were focused on case planning, service delivery, and goal attainment (nine cases).
• Visits were not occurring with sufficient frequency, nor did they focus on substantive issues pertaining to the case (one case).

Most stakeholders commenting on this item expressed the opinion that workers visit parents as frequently as is necessary to further attainment of case goals, particularly when children remain in their homes.

**Determination and Discussion:** Item 20 was assigned an overall rating of Area Needing Improvement due to reviewers determining that the frequency and/or content of caseworker visits with parents were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals in 23 percent of the applicable cases.

According to the Statewide Assessment, CPS policy requires face-to-face contact a minimum of once every three months with the child and the family in an ongoing CPS case. Foster care policy requires the worker to maintain regular involvement of the family
members to facilitate reunification of the child. Case management policy requires a face-to-face or telephone contact with an active member of a case at least once every three months.
Well-Being Outcome 2

Outcome WB2: Children receive appropriate services to meet their educational needs.

Number of cases reviewed by the team according to degree of outcome achievement:

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<th>Fairfax County</th>
<th>Norfolk City</th>
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STATUS OF WELL-BEING OUTCOME 2

Virginia achieved substantial conformity with Well-Being Outcome 2. This determination was based on the finding that the outcome was determined to be substantially achieved in 92.3 percent of the cases reviewed, which exceeds the 90 percent required for substantial conformity.

A key CFSR case review finding was that DSS made concerted efforts to assess children's educational needs and provide appropriate services to meet those needs. Stakeholders cited a number of agency practices and community relationships that contribute to the agency’s success in meeting children’s educational needs.

The findings for the item assessed for Well Being Outcome 2 are presented below.

Item 21. Educational Needs of the Child

X Strength _____ Area Needing Improvement

Review Findings: An assessment of Item 21 was applicable for 39 of the 50 cases reviewed. Cases that were not applicable for assessment included those in which children were not school-age or in-home services cases in which children did not have education-related needs. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The following were the results of this assessment:

- Item 21 was rated as a Strength in 36 (92%) of the 39 applicable cases (21 of the 36 cases were foster care cases).
- Item 21 was rated as an Area Needing Improvement in three (8%) of the 39 applicable cases (two of the three cases were foster care cases).
Item 21 was rated as a Strength when reviewers determined that all educational needs were assessed and addressed. The item was rated as an Area Needing Improvement when reviewers determined that educational needs were not assessed (two cases) or that services were not provided to address identified educational needs (one case).

Most stakeholders commenting on this issue during the onsite CFSR expressed the opinion that DSS makes concerted efforts to meet the educational needs of children and youth. Stakeholders reported that services to meet special education needs are available and that there are GED classes and education benefits for older children. Stakeholders also noted that foster parents are very involved in educational matters and serve as advocates for the children. A few stakeholders, however, expressed concern about the number of children who must change schools due to changing foster care placements.

**Determination and Discussion:** Item 21 was assigned an overall rating of Strength due to the finding that in 92 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children.

According to the Statewide Assessment, foster care policy indicates that the worker, in cooperation with the child’s parents and foster parents, is responsible for monitoring the educational needs of a child in the custody of the local child welfare agency. Specific responsibilities include: (1) making sure that the child is enrolled in school as soon as possible after placement; (2) notifying the school that the child was attending, as well as the school that the child will be attending, of a change in school; (3) providing case information as requested to the school; (4) monitoring the child’s educational progress; and (5) when needed, requesting a special needs evaluation.
Well-Being Outcome 3

Outcome WB3: Children receive adequate services to meet their physical and mental health needs.

Number of cases reviewed by the team according to degree of outcome achievement:

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STATUS OF WELL-BEING OUTCOME 3

Virginia did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 83.7 percent of the applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

Performance on this outcome varied across CFSR sites. The outcome was determined to be substantially achieved in 95 percent of Fairfax County cases and 83 percent of Bedford County cases, compared to 64 percent of Norfolk City cases.

CFSR case reviews found that DSS made concerted efforts to meet the physical health needs of children in both the foster care and in-home services cases. However, the case reviews also found that DSS was less consistent in its efforts to assess and address children’s mental health needs in both the foster care and in-home services cases.

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

**Item 22. Physical Health of the Child**

- **X** Strength
- ___ Area Needing Improvement

**Review Findings:** An assessment of Item 22 was applicable for 37 of the 50 cases reviewed. Cases that were not applicable were in-home services cases in which children did not have physical health concerns. In assessing this item, reviewers were to determine whether (1) children's physical health needs had been appropriately assessed; and (2) the services designed to meet those needs had been, or were being, provided. This assessment produced the following findings:
• Item 22 was rated as a Strength in 35 (95%) of the 37 applicable cases (27 of the 35 cases were foster care cases).
• Item 22 was rated as an Area Needing Improvement in two (5%) of the 37 applicable cases (neither of the two cases were foster care cases).

Item 22 was rated as a Strength when reviewers determined that children's health needs were routinely assessed and services provided as needed. The item was rated as an Area Needing Improvement when reviewers determined the following:
• The child did not receive appropriate screenings and preventive health or dental care (one case).
• A delay in the transfer of a family’s medical benefits resulted in a delay in services for the child (one case).

Most stakeholders commenting on this item expressed the opinion that DSS is effective in assessing and meeting children’s physical health needs. However, Fairfax County stakeholders reported that it is difficult to obtain dental services for children because many dentists do not accept Medicaid. Bedford County stakeholders reported that dental services are available for foster children in that location, but that there are waiting lists for Medicaid services.

**Determination and Discussion:** Item 22 was assigned an overall rating of Strength based on the finding that in 95 percent of the applicable cases, reviewers determined that DSS had adequately addressed children’s health needs.

According to the Statewide Assessment, over 93 percent of all directors, supervisors, workers, and other staff surveyed as part of the State’s self-assessment process reported that children in foster care receive necessary medical treatment. Over 80 percent of workers surveyed reported that children usually receive physical exams within one month of entering foster care while 78 percent reported that children usually receive dental exams within the first month of care. The Statewide Assessment also notes that some foster parents participating in Statewide Assessment focus groups reported that medical information is not always provided to caretakers. In addition, as noted in the Statewide Assessment, several DSS staff members said that it is difficult to find dentists willing to accept Medicaid and that, to address this problem, the 2002 General Assembly passed several pieces of legislation to improve access to dental care through Medicaid.

**Item 23. Mental Health of the Child**

_____ Strength _____ X Area Needing Improvement

**Review Findings:** An assessment of Item 23 was applicable for 36 of the 50 cases reviewed. Cases that were not applicable were those in which the child was too young for an assessment of mental health needs or in-homes services cases in which children did not
have mental health concerns. In assessing this item, reviewers were to determine whether (1) mental health needs had been comprehensively assessed; and (2) appropriate services to address those needs had been offered or provided. The following were the findings of this assessment:

- Item 23 was rated as a Strength in 29 (81%) of the 36 applicable cases (18 of the 29 cases were foster care cases).
- Item 23 was rated as an Area Needing Improvement in seven (19%) of the 36 applicable cases (three of the seven cases were foster care cases).

Ratings for this item varied slightly by the type of case. The item was rated as a Strength in 86 percent of applicable foster care cases compared to 73 percent of applicable in-home services cases. Ratings also differed across CFSR sites. The item was rated as a Strength in 93 percent of applicable Fairfax County cases and 83 percent of applicable Bedford County cases, compared to 56 percent of applicable Norfolk City Cases.

Reviewers determined that children’s mental health needs were “significantly” assessed in 30 cases, “partially” assessed in three cases, and “not at all” assessed in three cases. Reviewers determined that identified mental health service needs were “significantly met” in 25 cases, “partially met” in five cases, and “not at all met” in two cases.

Item 23 was rated as a Strength when reviewers noted that children’s mental health needs were “significantly” or “partially” assessed, and mental health needs, if relevant, were “significantly” met. The item was rated as an Area Needing Improvement when reviewers determined the following:

- The child did not receive a formal mental health assessment at entry into foster care and there was evidence that a mental health assessment was needed (one case).
- Children with mental health needs did not receive ongoing mental health treatment (two cases).
- Mental health services were delayed, unavailable, or insufficient to meet the child’s needs (four cases).

Stakeholders commenting on this item during the onsite CFSR identified the following concerns regarding mental health assessments and services: (1) budget cuts have decreased the availability of mental health services creating service gaps; (2) there are many mental health providers that will not accept Medicaid; and (3) contracted mental health service providers have limited service capacity, which delays service provision. Despite these concerns, several stakeholders reported that there are some mental health agencies in the State that provide mental health services to children in foster care on a pro bono basis.

**Determination and Discussion:** Item 23 was assigned an overall rating of Area Needing Improvement based on the finding that in 19 percent of the applicable cases, reviewers determined that DSS did not make sufficient effort to address the mental health needs of children.
According to the Statewide Assessment, foster care policy requires that all children receiving service through the Comprehensive Services Act have a uniform assessment of behavior and functioning. If the child is seven years old or older, policy requires that the Child and Adolescent Functional Assessment Scale be used to assess the child’s mental health needs. If the child is between the ages of four and seven, the Preschool and Early Childhood Functional Assessment Scale is used.

Mental health programs serving child abuse and neglect victims are available through the use of Victims of Crimes funds. These funds pay for support services such as support groups, counseling, and treatment for abused and neglected children who are victims of domestic violence.

Over 90 percent of workers and child-placing agency staff surveyed as part of the State’s self-assessment reported that mental health services are “always” or “usually” provided to children in foster care who are in need of services. Moreover, 64 percent of foster care youth surveyed reported receiving counseling services while five percent stated a need for mental health services.

According to the Statewide Assessment, the main barriers to providing mental health services to children in foster care are the following:
• There are too few providers who accept Medicaid, which results in long waits for services.
• Medicaid reimbursable mental health services are not available statewide.
• There is a scarcity of community-based residential services for children with substance abuse and mental health treatment needs.
SECTION 2: SYSTEMIC FACTORS

IV. STATEWIDE INFORMATION SYSTEM

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Virginia achieved substantial conformity with the systemic factor of Statewide Information System. Information pertaining to the item addressed for this factor is provided below.

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

_X_ Strength ___ Area Needing Improvement

Item 24 is rated as a Strength because the CFSR determined that Virginia’s On-Line Automated Services Information System (OASIS) is able to identify the status, demographic characteristics, location, and goals for the placement of every child in foster care.

According to the Statewide Assessment, DSS generates reports from OASIS for the local DSS agencies as well as for the State and Federal government. As noted in the Statewide Assessment, approximately 200 reports, most of which can be manipulated or re-formatted to produce numerous additional reports, are available through OASIS. These reports help with case management and track clients and resource providers. Many reports can be sorted by worker, locality, region, or statewide.

The Statewide Assessment also notes that as a result of DSS’ ongoing efforts to provide OASIS-related training and management oversight, the quality and timeliness of data have improved considerably. However, OASIS is not a complete SACWIS system in that it does not currently include capacity for managing ongoing Child Protective Services (CPS) cases, title IV-E eligibility determinations, family preservation and support services, or a financial/payment component.
Most stakeholders commenting on the statewide information system during the onsite CFSR expressed the opinion that OASIS can produce information about the demographics, location, and goals for all children in foster care. A few stakeholders noted that it is sometimes difficult to actually find information in OASIS. They reported that cases are not always linked to a child’s name, which results in some problems identifying a child or a family.

Additional stakeholder comments during the onsite CFSR reflect a wide range of opinions about the system. The following positive aspects of OASIS were identified by stakeholders:

- There is good access to information and reports are useful.
- Reports are available online.
- Training on system use is effective and the State’s Help Desk is responsive.

The following were significant concerns expressed by stakeholders about OASIS:

- OASIS does not include information on CPS ongoing cases.
- Cases are not always linked with the child’s name which can result in some problems identifying the child and family.
- Information does not meet the level of management needs and can be hard to follow.
- Navigation through the system is difficult.
V. CASE REVIEW SYSTEM

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Virginia is not in substantial conformity with the systemic factor of Case Review System. Information pertaining to the items assessed for this factor is provided below.

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

___ Strength ___ Area Needing Improvement

Item 25 was rated as an Area Needing Improvement because children and parents are not consistently involved in the case planning process across the State.

According to the Statewide Assessment, Virginia meets the Federal requirement for a written case plan on all children in foster care and Virginia’s Code and foster care policy require parents’ participation in service planning. The Comprehensive Services Act (CSA) requires the Family Assessment and Planning Team to include the child’s, parents’, or caretaker’s participation in all aspects of assessment, service planning, and service delivery. In addition, foster care policy identifies parents as team members responsible for permanency planning for the child.

Despite the statute and policy requirements of parent and child involvement in case planning, the Statewide Assessment acknowledges that the level of participation of parents and children in case planning varies across the State. Participants in focus groups convened as part of the State’s self-assessment process reported that parents are inconsistently involved in the case planning process. The Statewide Assessment also reports that many supervisors surveyed regarding parent involvement in case planning expressed the opinion that parents are typically invited to participate in the service planning process, but some parents choose not to be involved.
Stakeholders commenting on case plans and the case planning process during the onsite CFSR were in general agreement that children have case plans. There was variation across counties with respect to stakeholders’ opinions about the involvement of parents in case planning. Fairfax and Bedford County stakeholders indicated that parents are involved in case planning on a consistent basis. In contrast, Norfolk City stakeholders reported that parents are not routinely involved in the case-planning process. These stakeholder comments are not uniformly consistent with case review findings reported under Item 18. The case reviews determined that parents and children were involved in case planning in 87 percent of Fairfax County cases, 60 percent of the Norfolk City cases, and only 45 percent of Bedford County cases. In addition, the case reviews found that in two of the foster care cases the child did not have a current case plan in the file.

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

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Item 26 was rated as an Area Needing Improvement because the CFSR determined that the status of each child in foster care is not reviewed at least once every six months on a consistent basis across the State.

According to the Statewide Assessment, Virginia Code requires that reviews of service plans occur in juvenile court or administrative hearings. Although a few exceptions are noted, the Statewide Assessment reports that most foster care cases are reviewed at least every six months to evaluate the service plan and progress toward permanency. However, information in the Statewide Assessment indicates that the review must be held six months from the dispositional hearing rather than six months from the time of entry into foster care. As noted in the Statewide Assessment, a dispositional hearing is held 75 days after the child has entered foster care.

The Statewide Assessment also reports that Administrative Panel Reviews (APRs) are required for children who remain in foster care placement after the first permanency planning hearing. APRs are held within six months of the permanency planning hearing and subsequent APRs are held yearly thereafter, alternating with annual juvenile court reviews as appropriate. Information in the Statewide Assessment indicates that, based on an analysis of OASIS data, 90 percent of Virginia’s children in foster care have timely juvenile court hearings and APRs.

Bedford and Fairfax County stakeholders commenting on this issue during the onsite CFSR expressed the opinion that in their localities, six-month reviews are taking place on a timely basis, although the first review may not be held until the child has been in foster care for more than eight months, depending on the time of the dispositional hearing. Stakeholders noted that if the dispositional
hearing is delayed, the first six-month review is delayed. Bedford County stakeholders reported that the court in that locality has a “no continuance” policy which results in timely reviews.

In contrast, Norfolk City stakeholders voiced concern that after the first judicial review, a case involving a child with a permanency plan of permanent foster care, independent living, or placement with relatives is reviewed in court only every 12 months. These stakeholders indicated further that the six-month APRs that are required for children with these permanency goals often are not full reviews but consist of a meeting that includes the local DSS supervisor, the caseworker, and a “third party” who is usually another caseworker. Stakeholders expressed the opinion that these meetings do not provide a process for the objective review of the child’s case with participation of all those involved and are not an adequate substitute for a full six month case plan review as required in Federal regulations.

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

Strength ____  Area Needing Improvement

Item 27 was rated as a Strength because CFSR findings indicate that the State has established a process to ensure that every child in foster care has a permanency hearing in court no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

According to Virginia’s Statewide Assessment, the court holds a permanency hearing within five months of the first foster care review hearing or within 11.5 months from the date that is 60 days after the child is removed from the home. State law requires that a child’s permanency goal be specified and achieved, if possible, at this hearing. In cases in which the permanency goal is not achieved by the date of the first permanency hearing, a second permanency planning hearing is held six months later if certain statutory requirements, including approval of an interim plan documenting progress, are met. The courts are required to hold annual hearings for any child who remains in the legal custody of the State after the initial permanency hearing, including those children on whose behalf a TPR petition has been granted, filed, or ordered to be filed; who are placed in permanent foster care; and who are receiving services to achieve independent living status.

The Statewide Assessment also notes that local Court Improvement Teams are utilized in many localities to develop protocols for such things as assuring appropriate documentation on court forms and avoiding delays through improved calendar management techniques.
to reduce waiting time in court. However, information in the Statewide Assessment indicates that Court Improvement Teams do not exist in all areas of the State.

Most stakeholders interviewed regarding the permanency hearing process during the onsite CFSR expressed the opinion that permanency reviews are held in a timely manner. Some stakeholders noted that future hearings are scheduled at each hearing so that cases are on the court docket far in advance. Norfolk City stakeholders, however, voiced concern that in their locality some cases are not heard within the ASFA requirement because of court continuances. A few Norfolk City stakeholders questioned whether judges in that locality are knowledgeable regarding the timeframes established by ASFA for hearings and reviews.

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

___ Strength ___ X Area Needing Improvement

This item is rated as an Area Needing Improvement because the CFSR determined that a process for terminating parental rights in accordance with the provisions of the ASFA is not implemented consistently across the State.

According to the Statewide Assessment, Virginia Code and agency policy include requirements to file for TPR. Legislative changes between 1999 and 2001 established new grounds for TPR and provisions excusing the requirement for reasonable efforts to reunite under certain circumstances. “Aggravated circumstances” was added in 2002 as a reason for not requiring reunification efforts. Information in the Statewide Assessment indicates that data collected by the Court Improvement Program (CIP) from court files since July 1997 reveal that the pace of TPR hearings quickened among cases initiated with the courts after the modifications to Virginia law. Members of the judiciary report more effective court practices leading to timely permanency such as quicker paced Court hearings, more in-depth information presented in Court, child-focused Court hearings, and court forms that are user friendly and promote appropriate documentation of decisions and orders.

Despite these changes, the Statewide Assessment reports that in a survey of local DSS agencies, 61 percent of agency staff indicated that parental rights were rarely or never terminated at the initial permanency hearing. The Statewide Assessment also reports that more than one-fifth of parents appeal TPR in Virginia, which causes extensive delays in the adoption process.

Stakeholders commenting on this issue during the onsite CFSR expressed the opinion that in most of the State, procedures are in place for seeking TPR in accordance with ASFA timeframes, but that the lengthy TPR appeals process causes extensive delays in achieving
TPR. They noted that appeals to TPR decisions, while required to be heard within 90 days of filing the appeal, often take much longer to schedule and to complete than regular hearings because they are considered *de novo* hearings. *De novo* hearings require the court to “start at the beginning” with regard to gathering evidence, make factual findings, and apply the laws and ordinances to the question at hand, and to do so independently of the decision being appealed.

Bedford County stakeholders reported that the local court and DSS agency have an excellent relationship and that timeframes for seeking TPR are tracked and adhered to by both the agency and the courts. They noted that the court has developed a written booklet for parents explaining DSS responsibilities and ASFA timeframes and that the DSS caseworker usually reviews this booklet with the parents at each hearing.

In contrast to Bedford County, Norfolk City stakeholders suggested that there is confusion in that locality regarding exceptions to TPR, the role of extenuating circumstances, ASFA timeframes, and the responsibilities of the local DSS and the courts with respect to filing for TPR in accordance with ASFA timeframes. They noted that judges in that locality sometimes allow “last minute” efforts by parents to meet case plan goals for reunification to influence TPR decisions and are likely to grant continuances that delay the process extensively. Similarly, Fairfax County stakeholders voiced concern that delays in the TPR process are due to the frequent granting of continuances and to the lengthy TPR appeals process. They noted that most of the initial TPR decisions in Fairfax County are appealed.

State-level stakeholders identified an additional barrier to achieving TPR in accordance with ASFA timeframes. They reported that local DSS agencies are expected to fund agency attorneys from their budgets and many of the localities do not have enough money to hire a sufficient number of agency lawyers to represent the agency in court. This leads to frequent requests for continuances.

Finally, case reviews found that at the time of the onsite review, 20 of the 27 children in the foster care cases had been in foster care for 15 of the most recent 22 months. TPR had been filed in 13 of the 20 cases, and attained in ten. For the seven cases for which TPR had not been filed, a reason for not filing had been entered in two of the case files. In five case files, no reason was provided for why TPR was not filed.
**Item 29.** The State provides a process for foster parents, preadoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.

_____ Strength _____ X Area Needing Improvement

Item 29 is rated as an Area Needing Improvement because the CFSR findings indicated that foster parents, preadoptive parents and relative caregivers of children in foster care are not consistently notified of, nor have an opportunity to be heard in, all reviews and hearings held with respect to the children in their care.

According to the Statewide Assessment, Virginia Code requires that a child’s foster parents or other care providers are entitled to notice and an opportunity to participate in the initial foster care review hearing, which is held six months after the 75 day dispositional hearing, and all subsequent court hearings. Virginia Code establishes that foster parents and others determined to have legitimate interest in the hearing such as pre-adoptive parents and relative caregivers are considered “parties to the case,” which legally entitles them to notice and an opportunity to be heard at hearings. The Statewide Assessment reports that the court is responsible for notification, and DSS workers are responsible for providing all relevant information needed by the court to invite caregivers to the hearing.

As noted in the Statewide Assessment, caseworkers surveyed as part of the State’s self-assessment process reported that foster and adoptive parents, relative caregivers, and other persons involved with a child are almost always notified of juvenile court hearings. In addition, almost 90 percent of foster parents surveyed indicated that they are informed about court hearings or administrative case reviews for children in their care. However, the Statewide Assessment also indicates that less than 70 percent of the caseworkers responding to the survey reported that caregivers “always” participate in court hearings and less than 45 percent of the workers stated that caregivers “always” participate in administrative panel reviews. The primary reasons provided by these caseworkers for non-participation of foster parents and other caregivers in hearings and reviews were the following: (1) caregivers are intimidated by the court process; (2) caregivers need child care for other children, which neither the agency nor the court provide; and (3) families have to wait long periods of time in court for a case to be heard.

Many stakeholders commenting on this issue during the onsite CFSR expressed the opinion that foster parents are notified of court hearings on a consistent basis. Although some stakeholders noted that caregivers are routinely given the opportunity to be heard during the hearings, other stakeholders stated that participation in court hearings varies depending on the judge. Norfolk City stakeholders reported that some judges will not allow foster parents in the court room. State-level stakeholders commented that although the dispositional hearing is considered by the State to be a foster care review hearing since the case plan is reviewed and
approved at this time, foster parents, pre-adoptive parents, and relative caregivers are not given notice of nor an opportunity to be heard at this hearing.

A key concern identified by stakeholders pertained to the APR. Most stakeholders voiced concern that foster parents and other caretakers are not being notified about APRs and are not being given the opportunity to be heard during an APR. Norfolk City stakeholders, in particular, reported that the local DSS does not notify the child’s caretakers when an APR is being held.
VI. QUALITY ASSURANCE SYSTEM

Virginia is in substantial conformity with the systemic factor of Quality Assurance System. Information pertaining to the items assessed for this factor is provided below.

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

_X_ Strength  ____ Area Needing Improvement

Item 30 is rated as a Strength because the CFSR determined that the State has developed and implemented standards to ensure that children in foster care are provided with quality services that protect their health and safety.

According to the Statewide Assessment, all foster and adoptive parents in Virginia must complete an approval process that includes a State criminal background check, a child abuse/neglect Central Registry check, an interview, reference check, employment history, and medical assessment. The foster/adoptive home is evaluated to assure the child's health and safety. Approved foster homes are required to be visited every six months. Homes must be re-approved every 24 months, except that homes with emergency or suspended provisions have shorter periods for re-examination. Child-placing agencies initially license foster families for 12 months. Thereafter, they re-evaluate and re-approve foster parents every two years. Relatives applying to be foster parents must meet the same standards as non-relative foster parents.

All child residential facilities must meet core standards to be licensed by the Departments of Education, Juvenile Justice, Mental Health, Mental Retardation and Substance Abuse Services, or Social Services. The Division of Licensing monitors child-placing agencies and residential facilities through one announced and one unannounced visit each year. Additional on-site investigations and reviews are conducted in response to complaints. Residential facility staff members who are alone with children on a regular basis must submit to State and national criminal background checks and a check of the child abuse/neglect Central Registry.
Virginia implemented a safety assessment process as part of its ongoing casework effort. This safety assessment is designed to be used at any point in the case to help drive decision making including placement and reunification decisions.

Most stakeholders commenting on this issue during the onsite CFSR reported that DSS has procedures and standards in place to ensure children’s safety and health. Bedford County stakeholders reported that all CPS cases are staffed by a team, and that supervision is provided regularly and frequently to ensure children’s safety. Similarly, Fairfax County stakeholders reported that regular supervision is a key process for ensuring children’s safety and health and that the county is in the process of developing a quality assurance position that will review cases and look at reports. Norfolk City stakeholders indicated that there is a QA supervisor in that locality who reviews cases. However, several stakeholders expressed concern that children’s safety may be jeopardized by the lack of a clear policy regarding responses to maltreatment reports on open CPS cases, particularly since this may result in some reports not being investigated. State-level stakeholders commented that the safety assessment is a valuable tool that can be used at any point in a child’s case to ensure that a child in foster care is safe. In addition, courts often require continued CPS monitoring of cases after reunification so that safety can be assured.

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

X Strength ___ Area Needing Improvement

Item 31 is rated as a Strength because CFSR findings indicate that the State is operating a quality assurance (QA) system that evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.

According to the Statewide Assessment, Virginia established a Quality Review and Improvement Team in July 2002 to coordinate and manage all quality management activities across the State. This team was designed to play a key role in QA and to plan and carry out statewide foster care and CPS case reviews. According to State-level stakeholders, for the period under review, the Regional Directors and Regional Office Program Specialist conducted the major quality assurance functions for the State. Each Regional Director selected specific localities for full scale interdisciplinary reviews of randomly selected cases. These reviews identified best
practices, and included recommendations for change. A Regional Specialist may also have decided to do a review based on issues raised by the localities within the Region.

The Statewide Assessment also notes that Virginia is moving toward a continuous quality case review system using a modified Federal CFSR on-site review instrument to review CPS and foster care cases. Team case reviews are planned for FY 2004 that include local partners in the review process and involve local program improvement plans. The State plans to use the results of these reviews to guide State policy changes, training initiatives, and practice guidance. Currently, OASIS provides tools for quality assurance for State administrators, program managers and specialists, and directors and supervisors.

Other QA efforts occur at the local level and vary across locations. State level stakeholders also noted that the State is creating a Performance Management Improvement Team to combine social service with benefits programs such as food stamps and TANF. In addition, State-level stakeholders reported that DSS is encouraging local offices to use the CFSR case review instrument to conduct assessments. To help them in this effort, DSS has posted the instrument on the agency website.
VII. TRAINING

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Virginia did not achieve substantial conformity with the systemic factor of Training. Information pertaining to the items assessed for this factor is provided below.

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

_____ Strength          X   Area Needing Improvement

Item 32 is rated as an Area Needing Improvement because the CFSR determined that the State does not provide initial training for all staff who deliver services under titles IV-B and IV-E on a consistent basis statewide.

According to State-level stakeholders, the Virginia Code mandates the completion of uniform initial policy and OASIS training for CPS workers within their first year of employment. This five-day training session is conducted by the Regional Program Specialist and the Program Staff in the State Office at least twice a year in each Region and is required of all new CPS staff prior to the assignment of cases to their workloads. Additional sessions are scheduled when needed. In addition, new CPS workers are required to attend three mandated skills courses including Intake and Investigation in Child Protective Services, Sexual Abuse Investigations, and Out-of-Family Investigations.

Although not required by law or regulation, local DSS agencies are strongly urged to send new foster care and adoption workers to policy and skills training within the first three months of employment. The combined policy and OASIS training for child welfare staff, other than CPS staff, is also provided by the Regional Program Specialists and Program Specialists at the State Office. This training is not mandated for new workers, although it is offered on a regular basis across the State.
As noted in the Statewide Assessment, over 75 percent of caseworkers attending new-worker training reported that the training sessions were “very helpful” or “somewhat helpful.” However, in surveys conducted statewide, 50 percent of directors and 60 percent of supervisors indicated that new CPS caseworkers are not prepared to handle cases.

Stakeholders commenting on the issue of training during the onsite CFSR reported that there is no State-mandated training for foster care, adoption, or other child welfare workers, although there is State-mandated training for CPS workers. Most stakeholders expressed the opinion that the training received by CPS workers is of high quality and that CPS workers are well-trained for their jobs.

Stakeholders noted that training of other local DSS staff depends on the requirements of local agencies. Fairfax County stakeholders, for example, reported that the county has new-worker training that can last up to three months and includes 10-18 modules. These stakeholders also indicated that during this three-month time period, new workers are mentored by more experienced workers. In addition, Fairfax County stakeholders said that the agency has a one-week training program for new supervisors. Bedford County stakeholders commented that while CPS workers receive excellent initial training, mandated training for foster care and adoption workers similar to what is available for CPS workers is needed. Norfolk City stakeholders responded that there is no clear requirement for initial training before staff assume caseload responsibilities except for CPS staff. Informal training for staff is done at the unit level through mentoring and shadowing.

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

___ Strength X Area Needing Improvement

Item 33 is rated as an Area Needing Improvement since CFSR findings indicate that ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties is not consistently provided across the State.

According to the Statewide Assessment, the Virginia Institute for Social Services Training Activities (VISSTA) is the primary provider for skills training for public child welfare staff. Training is provided for staff through five Area Training Centers. VISSTA defines the training competencies for supervisors and staff, standardizes curricula to address the competencies, and establishes the delivery system that provides training within the regions of the State. Some of the approximately 50 child welfare skills training courses provided by VISSTA include separation and loss; ethical decision making; engaging families; time and stress management; working with children; the family as a system; family empowerment; measuring client change; assessment and service planning; and, recognizing and assessing developmental delay and disability.
The Statewide Assessment also notes that child welfare employees receive in-service training whenever there is a change in the law, regulations, or policy, and as identified through assessments. In addition, OASIS training beyond the new worker level is periodically conducted on an as-needed basis. For instance, when there is a new version of OASIS, users receive training on the new features as appropriate. Every year VISSTA offers special events for child welfare staff in several locations around the State. A number of other entities provide training for child welfare staff on a regular basis. Finally, the Court Improvement Project (CIP) has continued to provide training to court personnel and to local teams that include local DSS staff members and their attorneys.

As noted in the Statewide Assessment, most local DSS supervisors surveyed as part of the State’s self-assessment reported that on-going training is adequate. Almost 75 percent of supervisor survey respondents said that CPS on-going training is adequate, 60 percent of supervisor survey respondents indicated that on-going training for foster care workers is adequate, and almost 55 percent of supervisor survey respondents indicated that adoption workers receive adequate on-going training. The caseworkers surveyed noted that training is available but that it often is challenging to find the time to attend training and to maintain their caseload responsibilities.

Stakeholders commenting on ongoing staff training during the onsite CFSR were in general agreement that on-going training is available. However, there is no State-level requirement for staff to participate in ongoing training (except possibly regarding policy changes or changes in OASIS) and no minimum hours established for ongoing training requirements. Fairfax County stakeholders reported that there are training opportunities available and that staff receive up to $200 to spend on training. However, Fairfax County stakeholders also noted that workers are not always allowed to participate in training because of caseload demands. Stakeholders in this county also reported that there is little focus on professional development in the agency and that there is no recognition when a Master's Degree in social work is obtained. Bedford County stakeholders said that the agency provides special training for staff quarterly on select topics. Stakeholders describe this effort as “very helpful.” In addition, Radford University offers a yearly Child Welfare Institute training conference at no cost to agency staff participants. Finally, Norfolk City stakeholders reported that ten hours of training annually is recommended, and that staff are also sent to conferences to receive training. These stakeholders also noted that there is a tuition reimbursement program that reimburses at 100 percent.

Norfolk City stakeholders also reported that the local agency is in the process of contracting with Norfolk State University to develop a training academy and curriculum. These stakeholders reported that although VISSTA training is currently available, staff may have to wait up to a year to participate in the training. Several stakeholders voiced concern about the fact that there is no training evaluation to determine the effectiveness or impact on worker practice.
State-level stakeholders noted that a worker must assess his or her own training needs every two years. In addition, staff are encouraged to use the training assessment during their formal performance appraisal. The assessment can then be used to schedule necessary or recommended skills training sessions provided through VISSTA. VISSTA also provides skills training sessions designed specifically for supervisors.

Stakeholders identified the following areas where training was needed:
- Identification of substance abuse;
- Working with families in which domestic violence is a problem, particularly when children are witnesses;
- Assessments of families and completing quality home-studies;
- Combining policy training/refresher training with skills development;
- Testifying in court; and
- Documenting TPR exceptions.

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

___ Strength    X Area Needing Improvement

Item 34 was rated as an Area Needing Improvement due to the fact that the CFSR determined that there is no statewide mandated training for current or prospective foster parents and adoptive parents who care for foster children that addresses the skills and knowledge base needed to carry out foster care and/or adoption duties.

According to the Statewide Assessment, training is not mandated or required for current or prospective foster parents either prior to the placement of a child in a home or on an ongoing basis. Nevertheless, the Statewide Assessment indicates that most of the 121 local DSS agencies offer foster and/or adoptive parent training, even though not required by State law or regulation. Many also mandate both pre-service and in-service training for their foster/adoptive families. Since there is no mandated curriculum, PATH, PRIDE, Eastern Michigan, and MAPP programs are used or modified to fit the needs of local agencies. As noted in the Statewide Assessment, the level of training varies among localities due to the vast differences in size and operation. Ninety-five percent of all adoption and foster care supervisors surveyed as part of the State’s self-assessment recommended required statewide mandated
training for foster and adoptive parents. Foster parents in focus groups also suggested statewide mandated training on specific topics such as attachment issues.

The Statewide Assessment indicates that State regulations require staff in residential facilities to complete orientation and training on the objectives and philosophy of the facility, confidentiality, and other policies and procedures within the first month of employment. The Office of Interdepartmental Regulation facilitates and monitors training for child care staff in residential facilities. Bedford county stakeholders commented that group homes have a very intensive training program including sessions on medical management, CPR, and the use of restraints.

Stakeholders commenting on the issue of foster parent training during the onsite CFSR expressed concern about the absence of State-mandated training for foster or adoptive parents and of a uniform training curriculum across the State. Stakeholders also noted that there are no State-mandated requirements concerning the amount or type of training for foster and/or adoptive parents. State-level stakeholders indicated that VISSTA is working with the State to provide a uniform training curriculum that local agencies can use for their prospective foster and adoptive parents through the Community Resource, Adoption and Foster Family Training (CRAFFT) program.
VIII. SERVICE ARRAY

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Virginia did not achieve substantial conformity with the systemic factor of Service Array. Information pertaining to the items assessed for this systemic factor is presented below.

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

___ Strength  ___ X Area Needing Improvement

Item 35 is rated as an Area Needing Improvement since the CFSR findings indicate that although the State has services available for children and families, there are critical service gaps with regard to services that address the needs of families, help create a safe home environment for children, enable children to remain safely with their parents when reasonable, and help children in foster placements achieve permanency.

According to the Statewide Assessment, Virginia offers a broad range of effective services that support family preservation, family reunification, and permanency. The Statewide Assessment notes that the availability of prevention services, such as in-home services, parent support, individual and family counseling, and youth mentoring, is one reason why the number of children in foster care is low compared to the statewide child population. In addition, the Statewide Assessment reports that Virginia's Adoption Family Preservation Services System, which was implemented statewide in 2000, is designed to ensure that children who have been adopted remain in their adoptive families.
Most stakeholders commenting on the issue of service array during the onsite CFSR expressed the opinion that a wide array of services are available in Virginia to assess the strengths and needs of children and address the identified service needs. Some of the services noted as readily available were the following:

- Domestic violence programs;
- Substance abuse assessments (but not treatment);
- In-home services;
- Therapeutic foster care;
- Post-adoption services;
- Family Resource Centers;
- Counseling services; and
- Tutoring services.

However, stakeholders also identified the following gaps in critical services:

- Mental health services;
- Treatment services, including residential and out-patient, for sex offenders;
- Services for victims of sexual abuse;
- Child psychiatrists;
- Dental care;
- Culturally appropriate services;
- Day care services, particularly for foster parents;
- Substance abuse treatment;
- Parenting classes for teen parents;
- Family group conferencing and mediation services;
- Housing and housing for youth transitioning from foster care to independent living; and
- Foster family homes, particularly for adolescents, but also for infants.
Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP.

_____ Strength     X Area Needing Improvement

Item 36 is rated as an Area Needing Improvement due to the fact that the CFSR determined that critical services are not accessible to families and children in all political jurisdictions of the State.

According to the Statewide Assessment, CPS, foster care, family preservation and adoption services are available in all 121 localities. Services through the Comprehensive Services Act and Promoting Safe and Stable Families Program also are available in each locality. However, as noted in the Statewide Assessment, service provision is hampered in some areas of the State. Focus groups convened as part of the self-assessment process identified mental health and substance abuse treatment services as examples of services that are not readily available in all locations of the State, particularly Medicaid-reimbursable services. Other services noted in the Statewide Assessment as not available in all jurisdictions are community-based residential services for children with substance abuse, mental health, or mental retardation needs; facilities for juveniles with aggressive behaviors; crisis stabilization centers; sex offender treatment facilities; transitional facilities; facilities for children with multiple disabilities; Independent Living services; therapeutic day treatment services; and family support services. In addition, the Statewide Assessment reports that many communities have waiting lists for services for children who are severely emotionally disturbed, at risk, or in need of substance abuse services.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that there are gaps in service availability across the State. Some State-level stakeholders noted that services are more likely to be available in the cities than in rural locations. Stakeholders indicated that sexual offender programs; preventative services; and psychiatrists, physicians, and dentists who accept Medicaid are not available Statewide. State-level stakeholders reported that in some counties there are waiting lists for dental care and substance abuse evaluation and treatment. With State budget cuts, many State-level stakeholders expressed concern that services to children and families will be reduced or eliminated.

Norfolk City stakeholders commented that there is a need for more services and placement opportunities for dually diagnosed children and services for young sex offenders. Bedford stakeholders identified waiting lists for substance abuse treatment, dental care, child psychiatrists, transportation, and tutoring. Fairfax County stakeholders identified that transportation services are needed and providers struggle with meeting the needs of clients from various different cultures.
Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the 
agency.

Strength ____  Area Needing Improvement

Item 37 is rated as a Strength because services can be individualized to meet the needs of children and families.

According to the Statewide Assessment, the local multidisciplinary teams assess a child’s and family’s service needs and authorize appropriate services based on the identified needs. The Comprehensive Services Act’s local Family Assessment and Planning Teams (FAPT) are multidisciplinary teams that assess the strengths and needs of children and their families to determine what services can best meet these needs. Service plans are developed based on these assessments. On-going FAPT meetings monitor service provision and the achievement of service plan goals. When specific services are not available, the CSA has a limited pool of funds that can be used to provide individualized services to the child and families to meet their needs.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that local DSS agencies are effective in individualizing services to meet the unique needs of children and families. Fairfax County stakeholders noted that services are provided in Asian and Spanish languages and, in all three CFSR sites, stakeholders reported that the local FAPT teams are effective in ensuring individualized services. However, stakeholders in Fairfax commented that in order to access any service, the local agency must go through the FAPT process which can be slow due to the amount of paperwork required.
IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

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Virginia is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. Information pertaining to the items assessed for this factor is provided below.

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

X Strength ____ Area Needing Improvement

Item 38 is rated as Strength since the CFSR findings indicate that DSS engages consumers, service providers, foster care providers, juvenile court, and other public and private child and family services agencies in ongoing consultation involving the goals and objectives of the State’s Child and Family Services Plan.

According to the Statewide Assessment, DSS is a key partner in collaboration under the Comprehensive Services Act (CSA) that oversees the family centered service delivery and community collaboration in serving children and families. This collaboration includes the following agencies: the Departments of Social Services; Education; Health; Mental Health, Mental Retardation and Substance Abuse Services; Medical Assistance Services; Juvenile Justice; and the Supreme Court of Virginia. Implementation of the CSA has allowed Virginia communities to become more responsive in meeting the needs of families and children. The CSA has Community Policy and Management Teams in each locality that assess the community’s needs and goals as part of the State’s consultation and coordination in the development of the Child and Family Services Plan.

Virginia has no federally-recognized Indian tribes, although eight State-recognized tribes exist. Virginia is currently in the process of entering into a Memorandum of Understanding (MOU) between the Virginia Council on Indians and the Virginia Department of
Social Services. The MOU will govern the activities that both parties will take to ensure that tribal connections are maintained and children are protected from harm and have permanency as soon as possible. Guided by the MOU, every child would be screened to determine if a tribal connection exists.

State-level stakeholders commenting on this issue during the onsite CFSR expressed the opinion that the process of developing the goals and objectives of the DSS Child and Family Services Plan is very inclusive. They noted that DSS uses focus groups throughout the State in the consultation process, and that the youth advisory board, the State’s Court Improvement Program coordinator, foster parents, as well as other relevant individuals, have input into the plan. The State also holds a statewide meeting to review the plan. In addition, State-level stakeholders reported that the CSA Executive Council is very involved in developing the child welfare agency’s goals and objectives.

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

X Strength _____ Area Needing Improvement

Item 39 is rated as a Strength due to the fact that the CFSR findings indicate that DSS develops, in consultation with various representatives, annual reports of progress and services delivered pursuant to the Child and Family Services Plan.

According to the Statewide Assessment, program planning committees provided input and reviewed the original Child and Family Services Plan. The committees consisted of local, regional, and State representatives from public and private providers, law enforcement, the faith community, parents, consumers, government, and the courts. Stakeholders continue to be involved in planning and providing feedback on the Annual Progress and Services Reports. Virginia continues to have localities complete a community assessment with coordination in the development of the Annual Progress and Services Reports.

Other avenues of consultation in which the Virginia Department of Social Services engages include Virginia's Court Improvement Project, which is a strong advocate for statutory and policy change, resulting in improved legal processes and services. DSS also works in collaboration with the Virginia Family and Children's Trust Fund Board; the Virginia Partnership for People with Disabilities; the Department of Mental Health, Mental Retardation and Substance Abuse Services; the Department of Housing and Community Development; the Department of Health; the Department of Criminal Justice Services; the Department of Juvenile Justice; Prevent Child Abuse Virginia; Voices for Virginia's Children; and other State and local public and private agencies and organizations to plan and improve services in Virginia.
According to State-level stakeholders, the CSA Executive Council meets frequently and is involved in reviewing the child welfare agency’s goals and objectives. The CSA’s Community Policy and Management Teams in each locality assess the community’s needs and goals as part of the State’s consultation and coordination each year. As noted in the Statewide Assessment, based upon feedback from surveys, focus groups, and many committee meetings, DSS learns about the effectiveness of its programs and processes for involving community and State stakeholders in the development of the CFSP and agency operations.

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

_X_ Strength      ____ Area Needing Improvement

Item 40 is rated as a Strength because the CFSR found that DSS coordinates services provided under the CFSP with services and benefits of other Federal or federally assisted programs serving the same populations.

According to the Statewide Assessment, the Comprehensive Services Act for At-Risk Youth and Families (CSA) created a collaborative system of services and funding that is child-centered and family-focused at both the State and local levels. The Comprehensive Services Act combines eight funding streams into a pool of funds to create an interagency approach to serving children and families. Combined funding allows communities the flexibility to meet the needs of each individual, to identify and intervene with families and children who are at risk, and to collaborate in the process of service delivery. The funding streams include the Social Services Block Grant and state funding for foster care; two funding sources from the Department of Juvenile Justice; special education funds for the Department of Education; funding from the Department of Mental Health, Mental Retardation and Substance Abuse Services; and Interagency Consortium funding. At the state level, the State Executive Council (SEC) assures collaborative programmatic and fiscal policy development, and administrative oversight for services.

State-level stakeholders commenting on this item during the onsite CFSR expressed the opinion that coordination is happening through the CSA. They also noted, however, that there is a need for better data to support the collaboration and coordination of services.
X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

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Virginia did not achieve substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. Information pertaining to the items assessed for this factor is presented below.

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

_____ Strength X Area Needing Improvement

Item 41 is rated as an Area Needing Improvement due to the fact that the CFSR findings indicate that although the State has standards for foster family homes and child care institutions these standards have not been adequately updated in a timely manner.

According to the Statewide Assessment, Virginia's agency-approved provider standards for foster and adoptive homes comply with the Child Welfare League of America's (CWLA) Standards for Excellence in several areas including background checks, interviews and references, standards of care, approval periods, and monitoring. The Minimum Standards for Licensed Private Child-Placing Agencies also complied with the CWLA's Standards of Excellence in all areas when developed.

The Statewide Assessment notes that localities approve and monitor foster and adoptive homes in accordance with Virginia Code regulations for Minimum Standards and Regulations for Agency Approved Providers. Private child-placing agencies licensed by the State approve and monitor foster and adoptive homes in accordance with the Virginia Code regulations for Minimum Standards for Licensing Private Child-Placing Agencies. These standards include but are not limited to criminal background checks, child abuse and neglect clearances, medical examinations and statements, interviews and references, and home safety. Foster and adoptive homes supervised by private child placing agencies are re-evaluated for a 12 to 24 month period.
As noted in the Statewide Assessment, existing standards for public agency approved homes have been in effect since 1985. Child-placing agency home standards were developed in 1989. Both sets of standards are being reviewed for revision.

A key concern expressed by stakeholders at the State-level and local sites was that there are no training requirements associated with the licensing process. Therefore, foster and adoptive parents have no preparation prior to children being placed in their homes. In addition, foster parents are not required to attend any in-service training to assist them in parenting children placed in their homes. State-level stakeholders commenting on this item during the onsite CFSR reported a need to license facilities for children age 18 to 21 to ensure that facilities that house foster youth in this age range comply to basic health and safety standards. In addition, some stakeholders in one location reported that the standards are not ensuring a good environment for children. These stakeholders noted that some homes are dirty or provide small living spaces for children such as patios. It was noted that there should be more regular monitoring of standards by these stakeholders. Stakeholders in Norfolk City also noted that some children are placed with foster parents who are not licensed. Norfolk stakeholders reported that in many instances foster parents who were not re-approved for a license continue to have children in the home.

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

___ Strength  ___X___ Area Needing Improvement

Item 42 is rated as an Area Needing Improvement because the CFSR findings indicate that State standards are not applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.

According to the Statewide Assessment, Virginia has a single set of standards for foster and adoptive homes approved by the State, and local DSS, including relatives who become foster and/or adoptive parents. The minimum Standards for Licensed Private Child-Placing Agency are applied to all foster and adoptive homes approved through licensed, private child-placing agencies.

However, as noted in the Statewide Assessment, each locality has the authority to determine the level of training or orientation required for a foster or adoptive parent, if any is required. In addition, private child-placing agencies use separate standards for approving foster and adoptive homes. Therefore, standards for foster and adoptive homes approved by the State are not consistent with those used by child placing agencies to approve foster and adoptive parents.
State-level stakeholders defined the major differences between the standards for homes approved by public agencies and those approved by private agencies to include key health and safety issues, such as prospective foster or adoptive parents of private agencies cannot have a conviction for certain barrier crimes, and the inability for private agencies to waive standards for foster and adoptive families, while public agencies have the ability to waive certain standards for their families. In addition, public agencies approve homes for 24 months while private agencies may only approve a home for 12 months before the home must be recertified. Some local stakeholders also noted there are higher standards for private agency foster homes than for local DSS agency foster homes.

While some stakeholders commenting on this issue during the onsite CFSR indicated that the standards for foster families are applied equally to licensed relative and non-relative foster homes, stakeholders in one county noted that standards need to be updated to apply equally to relatives. In addition, stakeholders in another location commented that relatives may not be approved as foster parents and that there may be substandard conditions in the homes of some relative caregivers. Although, according to stakeholders, relatives may receive a variance, when they do, they are not to receive title IV-E funds.

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

_X_ Strength ___ Area Needing Improvement

Item 43 is rated as a Strength due to the fact that the CFSR findings indicate that the State conducts criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.

According to the Statewide Assessment, Virginia has implemented a new statute that requires criminal and child protective services background checks on anyone with whom a local DSS places a child, including birth parents and other relatives. Criminal background checks, as well as child abuse and neglect registry checks, are conducted on anyone with whom the State or a licensed child-placing agency is considering placing a child on an emergency, temporary, or permanent basis. This includes any prospective foster or adoptive parent, as well as a child's birth parent or relative prior to reunification. Regulations have required background checks on any adult in the prospective foster or adoptive parent's home.

In addition, DSS is required to complete national criminal background investigations on certain employees and volunteers at children's residential facilities. All employees, volunteers and contractual service workers who are alone with children on a regular basis are
required to submit to fingerprinting and to provide personal descriptive information to be submitted to the Virginia Criminal Records exchange and the FBI.

Stakeholders commenting on this issue during the onsite CFSR noted that criminal background and child abuse and neglect registry checks are completed for relative and non-relative placements. However, stakeholders in Norfolk City reported that some foster parents had not had criminal background checks as part of re-licensure in over three years. Stakeholders in this locality also noted that some children are placed with foster parents who are not licensed. Norfolk stakeholders reported that in many instances foster parents who were not re-approved for a license continue to have children in the home.

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

___ Strength __ X__ Area Needing Improvement

Item 44 is rated as an Area Needing Improvement because the CFSR determined that the State does not have a recruitment process in place for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.

As noted in the Statewide Assessment, approximately 42 percent of the State's foster homes and 50 percent of the State's foster children are African-American. Approximately 63 percent of adoptive families are Caucasian and 34 percent are African-American. Fifty-two percent of the children waiting for adoption are African-American. Therefore, there is a lower proportionate representation of African-American families for the African-American children waiting to be adopted.

According to the Statewide Assessment, Virginia has contracted with Virginia One Church, One Child for the recruitment of adoptive families in the African-American community. The agency's mission is to find at least one adoptive family within each of its congregations. Virginia also has a number of other initiatives to place waiting children into adoptive homes which resulted in the placement of 135 children into adoptive homes, 61 percent of whom were African American. In addition, foster and adoptive parents are recruited in a variety of other creative ways. For example, targeted speaking engagements in churches and inserts in church bulletins (particularly in African-American churches, in order to recruit African-American foster parents); recruitment labels on items such as bottled water; and brown bag lunch presentations to businesses and organizations are all used to recruit foster and adoptive families.
As noted in the Statewide Assessment, recruitment for foster and adoptive families is a local responsibility. The State does not currently have a statewide recruitment plan to ensure the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed. The self-assessment reported that at the local level, there is a limited number of staff who are available for the recruitment of prospective foster and adoptive parents. There is also limited funding for advertising and other outreach efforts. This was noted to hinder the ability of local agencies to advertise and aggressively recruit for foster and adoptive homes.

Several stakeholders commenting on the issue of recruitment during the onsite CFSR reported that DSS is attempting to increase the pool of African American foster and adoptive families through recruitment efforts such as One Church, One Child and community support groups that target the African American community. However, stakeholders at the local level noted that there is a lack of foster family placements for Vietnamese and Korean children, as well as for African American children. In Norfolk, 45 percent of children in foster care are in therapeutic foster homes because the local DSS does not have a sufficient pool of regular foster homes, not because of the need for a higher level of care. Stakeholders commented that in Fairfax County it is difficult to compete with private agencies in recruiting foster and adoptive parents due to the higher payment rate and other supports that private agencies can offer their parents. The inability to increase the foster care payment for local DSS foster parents has become a barrier to the recruitment of new families. Fairfax County stakeholders commented that they the local DSS recently lost funding for a position that was focused on the recruitment of families to care for the most difficult to place children.

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

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Item 45 is rated as a Strength due to the CFSR finding that the State has in place a process for the effective use of cross-jurisdictional resources to facilitate the timely adoptive and permanent placement of waiting children both between localities and with other States. While the State has identified barriers that affect the timely adoption and permanent placement of waiting children both between localities and with other States, the State has in place a variety of initiatives to address these cross-jurisdictional barriers to permanency.

According to the Statewide Assessment, Virginia has worked to enhance opportunities of facilitating timely adoptions, regardless of where the families or children live, through several special statewide initiatives such as the Project to Eliminate Barriers to Inter-
Jurisdictional Placements and Adoption Resource Exchange of Virginia (AREVA). During Federal Fiscal Year 2001, 238 children were placed in adoptive homes outside of Virginia. All children defined as special needs are required to be registered on Virginia's Adoption Exchange. This provides statewide and national exposure for individual children. In addition, the self-assessment points out that the State supports adoptions, regardless of where children and families live, by providing adoption assistance through title IV-E and state funds.

Stakeholders commenting on this issue in one county expressed concern regarding delays in placement caused by the Interstate Compact on the Placement of Children (ICPC) process for completing home studies in nearby States. Costs of dealing with some out of state private agencies are making them inaccessible for some local DSS agencies. Some State level stakeholders, however, reported efforts to improve cross-jurisdictional placements, especially through the use of AdoptUSKids.

State-level stakeholders also identified cross-jurisdictional barriers between local DSS offices. This was attributed to mistrust between staff and their lack of willingness to work together on cases that cross local jurisdictions. The State has instituted efforts to deal with this problem by holding video conferences and match parties so that workers can get to know one another and feel more comfortable working with each other. The effects of these activities were seen in some of the onsite review cases which illustrated examples of good cooperation between workers from specific counties.

As noted in the Statewide Assessment, a State-sponsored initiative with two private agencies was developed to identify barriers to inter-jurisdictional placements. One product of this collaboration was a home study format to standardize adoptive home studies across the State. This initiative also held match retreats so that workers from different local DSS agencies could network to facilitate cooperation when matching children to families from other jurisdictions.