

Georgia Department of Human Services
Office of Legislative Affairs & Outreach

2018 General Assembly

Session Wrap-up Report

Walter Jones

DFCS Director of Legislative Affairs and Communications



stronger families

FOR A STRONGER GEORGIA



HB 159

- Rewrites the Adoption Code relative to private adoptions
- Creates a Power of Attorney allowing a parent to delegate caregiving authority (with limitations) regarding his or her child to an individual who is an adult relative, who resides in this state, or a nonrelative who is approved as an agent by a child-placing agency or a nonprofit entity or faith based organization for a period not to exceed one year
 - Requires the Department to maintain a list of the nonprofits or faith based organizations that have required information to provide these services
 - Allows the Department to refer an individual seeking to execute a Power of Attorney to a nonprofit entity or faith based organization on the list
 - Requires the Department to promulgate the rules and regulations



SB 131

- Requires that adoption proceedings be stayed while an appeal to terminate parental rights is pending
- Includes a DFCS proposal that eliminates the burden to prove that a child would be harmed by long-term foster care in order to terminate parental rights.



SB 336

- Allows the Department to retain fingerprints for the purposes of records checks for licensing certain facilities, foster homes, and other regulatory functions
- Also prohibits internet service providers from notifying internet subscribers that the GBI has subpoenaed records related to a child pornography investigation



HB 906

- Protects foster parents' private information, including home address and telephone number, from public disclosure.
- Requires DFCS to provide educational and medical records and court scheduling information of foster children to caregivers for children placed with them
- Extends foster care services to youth up to the age of 21, allowing DFCS to access federal revenues to fund those services. Establishes court oversight of youth ages 18-21 in foster care voluntarily.



HB 920

- Allows DFCS Director or his/her designee to access and share sealed adoption records with the Office of the Child Advocate in order to investigate reports of maltreatment of adopted children and review agency practice following the death or serious injury of a child adopted from foster care



Questions

Walter Jones, DFCS Director of
Communications and Legislative
Affairs

walter.jones@dhs.ga.gov

470-512-0104





Tom C. Rawlings
Interim Director

Family First Prevention Services Act

Purpose of Law

Background

On February 9, 2018, President Trump signed the Family First Prevention Services Act (Family First)

The provisions are aimed at decreasing entries into foster care; ensuring children are placed in the most appropriate, family-like setting when foster care is necessary

Provides some partial IV-E funding for specific “prevention” services & reduces utilization of Child Caring Institutions (CCI)

Major Provisions

Candidacy and Prevention Services

- Identify children at imminent risk of entering foster care (“candidates”)
- Prevention services have to be three kinds (mental health, in home parenting, substance abuse).
- Mental health and substance abuse prevention and treatment services provided by a qualified clinician
- Prevention services must be evidence based (3 tiers of evidence based – 50% must be in top tier)
- If services not documented correctly, then state funds must be used
- IVE funds (50%) can be used for 12 months

Major Provisions

Congregate Care

Restricted in using Title IV-E for children placed in a Child Caring Institution (CCI) to no more than two weeks per child, except under five specific circumstances:

- A Qualified Residential Treatment Program (QRTP)
- A setting specializing in providing prenatal, post-partum, or parenting supports for youth.
- A supervised setting for youth ages 18 and older who are living independently.
- A setting providing high-quality residential care and supportive services to children and youth who have been found to be, or are at risk of becoming, sex trafficking victims.
- A licensed residential family-based treatment facility for substance abuse





Qualified Residential Treatment Program

QRTPs must be:

- Licensed and accredited
- Use trauma-informed treatment model
- Facilitate and document family involvement and outreach and how sibling connections are maintained
- Provide at least 6 months post-discharge family-based aftercare support.
- Have a registered or licensed nurse and other licensed clinical staff on site and available 24 hours a day, 7 days a week. They do not have to be employees of the QRTP.

DFCS Process Re: QRTPs

Development of assessment capacity within the provider community to assess youths' suitability for placement in a QRTP (30 days)

Judicial approval of placement within 60 days

Establishment of a process and persons to oversee quality of care and lengths of stay in QRTPs

Enhancement of contractual process to ensure contracts reflect new requirements and outcomes

Foster Home Recruitment



INCREASED NUMBERS OF FAMILY FOSTER HOMES
WILL NEED TO BE RECRUITED, TRAINED AND
EVALUATED



DEFINES FOSTER FAMILY HOME AS A HOME
WHERE A LICENSED FOSTER PARENT RESIDES
WITH 6 OR FEWER FOSTER CHILDREN.(SOME
FLEXIBILITY)



STATES WILL HAVE TO REPORT BY APRIL 1, 2019
WHETHER THEIR LICENSING STANDARDS MEET
ACF STANDARDS

Technology Impacts

System Modifications To Support Family First Act

Modify system to identify new population – candidate for foster care, establish criteria for “candidate” children at imminent risk of removal

Modify system to support IVE reimbursability for in-home services

Modify system to support IVE reimbursability for QRTP

Modify system to support new licensing requirement for QRTPs

Modify system to support all other business process changes to support FFA, i.e. family engagement, prevention plan, discharge plan, post foster care services.

Implementation Aspects



INCREASED NUMBERS OF FAMILY FOSTER HOMES WILL NEED TO BE RECRUITED



NEW CATEGORY OF QRTP- CLINICAL AND NURSING STAFF, CREDENTIALING



AUTOMATION BUILD IN CASE MANAGEMENT SYSTEM



PREVENTION STAFF AND PREVENTION CASELOADS ESTABLISHED



EVALUATION STRATEGY AND FIDELITY MONITORING



INCREASE NUMBER OF PROVIDERS THAT ARE TRAUMA INFORMED AND TRAINED IN THE USE OF EVIDENCED BASED PRACTICES FOR "CANDIDATE" YOUTH AND FAMILIES



AVAILABILITY OF SUBSTANCE ABUSE PREVENTION AND TREATMENT, ESPECIALLY IN RURAL AREAS

Implementation Aspects cont.



Data collection across agencies



Role of CMOs



Policies and Regulations within agencies to support FFPSA



Cost

Some steps being taken now:



ACF/Casey had three national meeting on Families First, one in Atlanta. Most state partners participated.



DFCS asking OPB to consider funding request to improve technology platform (SHINES) that supports child welfare system in SFY20 so that prevention services and CCI reimbursement limits can be managed. DFCS has also requested funding for project team.



Established Executive steering Team and workgroups

Some issues for consideration by state agencies:



Once list of prevention services is issued by ACF, what level (if any) of these services are provided in the state now?



How does the state choose which prevention services to test or implement in Georgia environment?



Will some Prevention services prove to be more cost effective in the Georgia environment?



What are implications of prevention mental health services for Medicaid system (possible implication of more robust mental health services for candidates than for foster kids)? If mental health service is provided for “candidate” for foster care, how does the state not provide it for kids in foster care?

Some issues
for
consideration
by state
agencies:
(cont'd.)

Given DPH involvement with certain in home services, what role might they play?

Given need for both substance abuse and mental health services, what role might DBHDD play? DFCS does not have a major provider base in either substance abuse or mental health systems.

GAO required to do a study in 2025 on impact of Family First on juvenile justice system. States need to include in their state IV-E plan that the state will not enact or advance policies or practices that will result in a significant increase in number of youth in the juvenile justice system because of the new restrictions on federal reimbursement for children placed in CCIs.

Increase in risk of program and audit disallowance due to technical complexity and subjectivity of prevention services (especially candidacy) and new CCI reimbursement limitations. How does the state mitigate these risks?

Service Provision Through the Lens of *Safety*



From Collateral Collaborative

- Case manager's and Service Providers have a long history of working together as “Collaterals” on cases. These two professions have worked cooperatively with the same families with a mutual level of respect for each other. While the two relationships have been respectful it has not typically been collaborative.
- Collaboration requires concurrence on the agreed upon outcome and a shared conceptual map/pathway to achieve the outcome. Sometimes the concurrence or the consensus can be difficult to achieve due to unintended professional isolation from both professions and the various diverse theoretical backgrounds.
- As these restraints or challenges have begun to loosen, we find new opportunities for service collaboration and integration emerging and have proven to be successful.

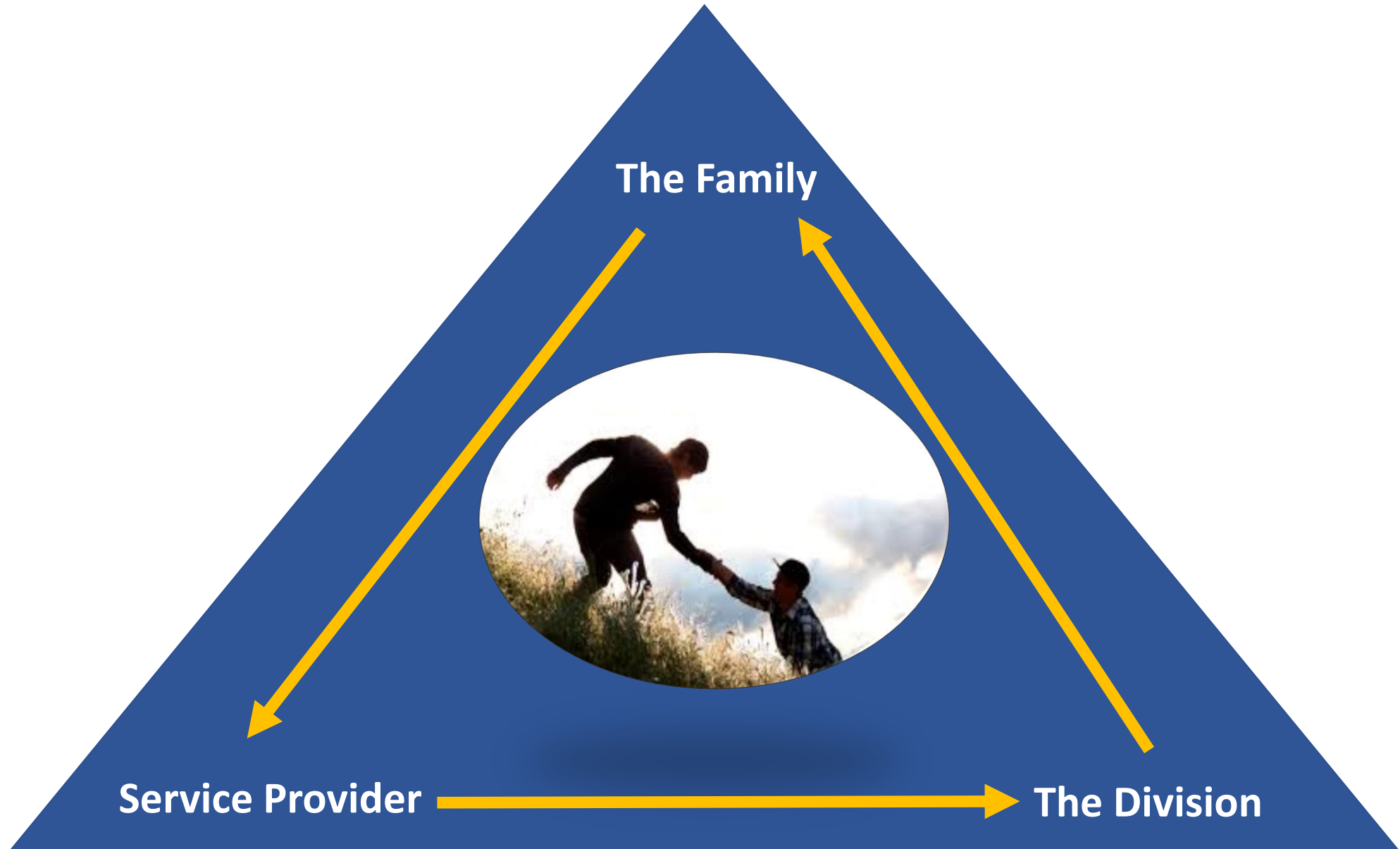


Solution Based Casework

Practice Essentials

- ✓ Genograms
- ✓ Safety Plans
- ✓ Family Functioning Assessments
- ✓ Case Plans
- ✓ Action Plans





Gathering Basic Information About The Referral



- **What happened????**---Something specific must have happened.... Someone was hit, someone went to school appearing to be unkept, someone ran away, someone was left unattended for a long period of time. Something happened!!!
- Providers Receive this----“We’re concerned we think Mom has a drug problem”, “The Father is no good and has mental health issues”, “She just wont leave him” “Mom is so negative towards the child” “I don’t think she really loves the child nor does she want to be a mother” **But tell me what happened??**
- Without the referral source providing clear information regarding what actually happened the provider may be stuck with a contract to do the following: **Cure the drug problem, get mom to leave her husband, or get mom to truly love her children....**
- **The most important piece of information the provider must collect is what happened and the sequence of events that led to the agency getting involved. Without this information the family, agency and the provider will be unable to develop plans to prevent recurrence of the problem pattern.**



Collaborative Safety Planning

- The Safety Plan should be more than just a verbal agreement with the family, it should be written with the family's input and signed by them, indicating their intention to carry it out.
- The Safety Plan can't be based on long term prevention, because family members will have only a beginning knowledge of their problem pattern and little awareness.
- As long as a safety plan is in place the family is at risk, because their only plan is based on their current ability to intervene rather than later on in their buildup pattern.
- If Providers are not aware of the safety plan they cannot ask about it or continue to reinforce its use.
- When Providers ask about the safety plan the family will also see them as equally concerned about the safety issues. (Family's take cues from their providers regarding what is important to discuss during visits and meetings).
- When providers ask questions about the safety plan the family talks about safety.
- How the family thinks about the problem is critical to what they will be willing to do about it.

Invalid Requests/Trends

- The required documents are not uploaded
- Missing CPS applications for current house hold members who are age 18 or older
- Missing Agency Letterhead
- Missing maiden name or previous names used
- Invalid, or No DOB
- Partial, Invalid, or No SSN
- Partial or missing physical address (NO P.O. Boxes)
- Missing previous address(s) within the past five years
- Missing full dates for previous address(s)
- CPS Application is not signed by the applicant
- Applicant not listed in GA+SCORE



CHILD ABUSE SCREENING REQUEST INFORMATION

This form is to request a screening to check for Child Protective Services history.

Required Documents
 CPS Screening Request form
 for each household member
 that is 18 years or older that
 will require a screening.

Agency Letterhead

AGENCY REQUESTING SCREENING INFORMATION

NAME	TEL #	EMAIL
NAME OF AGENCY	STREET ADDRESS	CITY/STATE/ZIP CODE

INFORMATION ON PERSON TO BE SCREENED (APPLICANT) ADDRESSES MUST GO BACK FIVE YEARS NO GAPS (PLEASE USE MONTH/YEAR FORMAT FOR ALL ADDRESSES)

FIRST NAME	MIDDLE NAME ONLY (NOT MAIDEN NAME)	LAST NAME
MAIDEN NAME	OTHER NAMES USED IN THE PAST	
DATE OF BIRTH	SOCIAL SECURITY NUMBER	GENDER
CURRENT ADDRESS	CITY/STATE/ZIP CODE	LIST AS MONTH/YEAR-CURRENT
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR
PREVIOUS ADDRESS	CITY/STATE/ZIP CODE	MONTH/YEAR

CURRENT HOUSEHOLD MEMBERS ONLY (To be completed by Foster Care/Adoptions applicants ONLY.)

NAME OF HOUSEHOLD MEMBER	RELATIONSHIP	DATE OF BIRTH	SSN #	GENDER	PREVIOUS STATE(S)	DATE

IN ORDER TO VERIFY THAT YOU ARE THE REQUESTING AGENCY, PLEASE SUBMIT A WRITTEN REQUEST ON AGENCY LETTERHEAD ALONG WITH THIS FORM TO THE GEORGIA CHILD PROTECTIVE SERVICES EMAIL.

Assessing applicants with CPS history

- Applicant(s) with numerous CPS reports
- Applicant(s) with multiple policy violations (low/high risk)
- Applicant(s) with substantiated CPS history prior to March 20, 1998
- Applicant(s) with substantiated CPS history March 21, 1998-June 30, 2016
- Assessing protective capacity

How does the Registry Work?

Notice of Inclusions

1. CAR team reviews the justification statements.
 2. Requests for revisions sent back to the county
- or-
- Notice is printed and mailed via certified mail

Appeals

Maltreators have 10 days to request a hearing.

Hearings are generally held in the county of incident.

The county is responsible for notify the case manager and SAAG.

Case Managers are required to attend the hearings and be represented by a SAAG.

Screenings

1. Self Check
2. CPS Investigator
3. For employment or licensing
4. DECAL
5. CASA

How does CAR impact you?

- Foster Parent and Employee Screenings (<https://gacar.dhs.ga.gov/General>)
 - Licensed entities in Georgia, which interact with children or are responsible for providing care for children, which shall only be provided information for purposes of employment of a specific individual.
 - Agency letterhead is the only requirement for this type and they enter their information into our system.
 - A Child-Placing Agency licensed in Georgia to place children in foster homes or for adoption requesting information concerning any prospective foster or adoptive parent. Information provided and used solely for the purpose of conducting child abuse clearances of foster or adoptive parents.
 - Request on Agency Letterhead indicating the purpose and the applicant's name.
 - Copy of your Georgia CPA license from RCCL

Agency Request

ALERT! Due to new enhancements

Child Protective Services Information System(Child Abuse Registry) screenings are governed by state law O.C.G.A Section 49-5-180 et seq. Only requests in accordance with the law should be submitted. By signing below, you are affirming that your request conforms to state law and that the information provided is true and accurate. Providing false and misleading information may subject you to criminal penalty under Georgia law.

Expand all

Video Tutorials

1. Self-Check	▼
2.A Child Abuse Investigator	▼
3. State or government agency of Georgia for the purpose of licensing	▼
4. State or government agency of Georgia for the purpose of employment	▼
5. Licensed entities in Georgia for the purpose of employment	▼
6. State or government agency of any other state for the purpose of licensing	▼
7. State or government agency of any other state for the purpose of employment	▼
8. Georgia Court Appointed Special Advocate (CASA)	▼
9. Any federal, federally recognized tribal, state, or local government entity	▼
10. A Child-placing agency licensed in Georgia	▼
11. Any entity licensed by any other state to place children for adoption	▼

Agency Information

Agency Information

Agency User

Where to Send

Person to be Screened

Current Address

Finish

Agency Already Registered? Yes No

Agency Name

 *

Phone Number

Email

 *

Primary Contact

Address Line 1

 *

Address Line 2

City

 *

County

State

 ▼ *

Zip



**ALONE WE CAN
DO SO LITTLE;
TOGETHER WE
CAN DO SO
MUCH.**

HELEN KELLER

QUOTED

WE JUST WANT TO SAY...

THANK YOU!

RESOURCE DEVELOPMENT & IV-E

PLACEMENT & PERMENANCY SECTION

National Training & Development Curriculum

Spaulding for Children, in partnership with Dr. Bruce Perry and the Child Trauma Academy (CTA); The Center for Adoption Support and Education (C.A.S.E.); the North American Council on Adoptable Children (NACAC); National Council For Adoption (NCFA); and, University of Washington (UW) was awarded a 5-year cooperative agreement from the Administration on Children, Youth & Families, Children's Bureau. This grant will be used to develop and then evaluate a state-of-the-art training program to prepare foster and adoptive parents to effectively parent children exposed to trauma and to provide these families with ongoing skill development needed to understand and promote healthy child development.

At the end of the grant period, states, counties, tribes, territories, and private agencies will have access to a free, comprehensive curriculum that has been thoroughly evaluated, which can be used to prepare, train, and develop foster and adoptive parents. The National Training and Development Curriculum for Foster/Adoptive Parents (NTDC) will be designed for families who are fostering and/or adopting children through the public child welfare system as well as those adopting through an intercountry or private domestic process.

Highlights

- Understanding Trauma Related Behaviors and Cutting Edge Trauma Based Parenting.
- Foster Care: A Means to Support Families (Reunification; Kinship; Siblings; Community Connections)
- Increasing Child Resilience
- Sensory Integration
- Impact on Family Dynamics & Self Care

Next Steps

- Establishing pilot sites
- Decisions regarding interim improvements to IMPACT
- Begin ongoing technical assistance sessions
- Strong monitoring and qualitative analysis component

Staff Curriculum – Resource Development

- Change in federal program improvement plan strategy – Reduce initial number of public/private staff to be trained by March 2018. Continued training will occur beyond the PIP.
- Opportunities to complete full curriculum ongoing
- Move to “Foundations” model for private provider training – in progress

IV-E Reminders

Federal Audit

- July 15 – 19, 2019

Period Under Review (PUR)

- April 1, 2018 through September 30, 2018

To do's:

- Training webinars
- Placement Log in SHINES
- CPA's approval letter
- Safety Checks
 - SOR, DOC, P&P, CPS, & CAR
 - Completed no more than 30 days prior to hire
 - Completed no more that 30 days prior to anniversary date



Currently under Corrective Action Plan

- 20 ILP's
- 65 CCI's
- 16 CPA's

Currently
Admission
Suspension: 2

