

Fiscal Year 2021-22 Needs- Based Plan & Budget

Commonwealth of
Pennsylvania

Office of Children, Youth
and Families

**NEEDS-BASED PLAN AND BUDGET
NARRATIVE TEMPLATE**

Budget Narrative Template

The following pages provide a template for counties to use to complete the narrative portion of the Fiscal Year (FY) 2021-22 Needs-Based Plan and Budget (NBPB). All narrative pieces should be included in this template; no additional narrative is necessary. Detailed instructions for completing each section are in the NBPB Bulletin, Instructions & Appendices. As a reminder, this is a public document; using the names of children, families, office staff, and Office of Children, Youth and Families (OCYF) staff within the narrative is inappropriate.

The budget narrative is limited to a MAXIMUM of 50 pages, excluding charts and the Assurances in 5-1a. and the CWIS data sharing agreement in 5-1b. Avoid duplication within the narrative by referencing other responses as needed.

All text must be in either 11-point Arial or 12-point Times New Roman font, and all margins (bottom, top, left, and right) must be 1 inch.

Any submissions that exceed the maximum number of pages will not be accepted.

Note: On the following page, once the county inserts its name in the gray shaded text, headers throughout the document will automatically populate with the county name. Enter the county name by clicking on the gray shaded area and typing in the name.

Crawford County

NBPB
FYs 2019-20, 2020-21 and 2021-22

Version Control	
Original Submission Date:	
Version 2 Submission Date:	
Version 3 Submission Date:	
Version 4 Submission Date:	

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Section 2: NBPB Development

1-1: Executive Summary

➤ Respond to the following questions.

- ❑ Identify challenges experienced by the County Children and Youth Agency (CCYA) and Juvenile Probation Office (JPO) as a result of the COVID-19 pandemic.

The COVID-19 pandemic created challenges for both staff and our clients. Due to the quickness in the response to COVID, staff were abruptly moved from working in the office to working remotely from home and several staff were furloughed. The majority of our staff do have either an IPAD or a laptop allowing for mobility however, our clerical did not have this luxury and had to work in the office. The challenge of working remotely was not having access to the county S:drive, where all of the forms for CYS are located. Caseworkers either had to come into the office and save what they needed on their desktop or have someone email them the information/form needed. Saving documents to the desktop is not the preferred method because if the IPAD/laptop crashes the documents located on the desktop are not retrievable. Another challenge working remotely is not having access to a printer or a scanner.

Engagement with families, providers and stakeholders was another challenge. The lack of face-to-face contact impeded family visitation and the caseworker's ability to fully engage families, providers and stakeholders. Video conferencing was an alternative used for visitation with children placed in substitute placement, independent living groups and with providers. Physical contact between parents and their children, especially when the child is an infant is imperative to bonding. The absence of face-to-face parent/child visitation may affect the length of time a child remains in care and could be an extenuating circumstance in ASFA. Internet accessibility and connectivity were a barrier. The increase usage of the internet created lag times during video conferencing and for video calls to be dropped. As for some of the older children placed in substitute care, video conferencing was not accessible and therefore the only family contact conducted was done via phone.

The court also utilized video conferencing. The courts adjusted to COVID by limiting the types of court hearings held. Contested adjudication hearings, adoption hearings and initial delinquency hearing were continued or not scheduled. Another impact in court hearings was the ability of SWAN paralegals to access the county agency. SWAN mandated the paralegals to work remotely even after the county went to phase green. The SWAN paralegals did not have access to the court documents and forms necessary to fulfill their job duties established within Crawford County Children and Youth Services. This created additional and duplicative work for the SWAN paralegals.

Another challenge affecting our clients was regarding the contracted in home providers ability to perform their contracted service amongst COVID via phone/video conferencing. In home providers were performing their job duties of parenting, counseling and home making through phone calls and video conferencing. Utilizing this type of platform to provide an in home service is not the most conducive method. The majority of in home parenting and home making providers were unable to meet the set units per family per week. COVID also caused a few of the providers to lapse in providing service.

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The last noted challenge experienced by Crawford County was the ability to place children into substitute care when the county was in phase red and yellow. A number of our placement providers refused to accept or limited the number of new youth accepted into the facility. This caused several youth to be placed outside of their community and this county. Placement outside of a youth's community hinders family visitation and connections.

Ongoing challenges stemming from COVID continue. Governor Wolf has issued a travel advisory for any PA resident who returns from a list of 15 states recommending a 14 day quarantine. County officials have implemented this advisory. To date, several employees have identified scheduled vacations within one of these selected states and will need to quarantine upon return. This presents a challenge as other employees will be requested to conduct the job duties of the individuals in quarantine. Another potential challenge that has not occurred to date is the possibility of an employee or court personal who contracts COVID-19 causing the agency or courts to shut down and staff either work remotely or quarantine. Should this occur, the Office of Children Youth and Families would be contacted for guidance and support as mandated regulations may not occur during the quarantine.

JPO COVID challenges

During this period of COVID19, Judicial Emergency Crawford County Juvenile Probation was tasked to make changes and provide extra effort in supporting and guiding the juveniles and their families. The Juvenile Probation department operated under a COVID19 action plan, which was specific in job duties, as well as supervision guidelines. This action plan provided a means for officer safety and yet allowed for continued supervision while following all Department of Health (DOH) and Centers for Disease Control (CDC) protocols. The focus was to maintain appropriate supervision of moderate to high clients that posed the most concerns.

Beginning in March 2020, Supervisor approval was needed to make face to face contact with families in emergency situations only, and was granted twice during this period to conduct drug testing for methamphetamine and cocaine usage. We felt these situations were emergency in nature and drug testing was administered with CDC protocols in place. These cases were brought to our attention by probation officers supervising the case who had received phone calls on suspected usage from a parent and an outside source. One client was clean of illegal substances, and the other client did test positive for cocaine. This violation was addressed through taking away all of his house arrest windows. A subsequent test was administered and the client was clean. Once restrictions were lifted and Crawford County entered the green phase of COVID19 in June 2020, regular routine drug testing procedures were back to normal with CDC protocol in place.

Additionally, rotation schedules were implemented for all staff members in order to allow the probation department to function daily without having the risk of a total shut down. The rotation posed problems because staff members had to work remotely from home and not all staff members had the appropriate resources to do so. Most staff had access to continue operations through the use of their county smart phones and limited Surface Pro tablets. Surface Pros were not easy to use and additional computer equipment would have been beneficial for all staff. Some staff members have reported difficulty in logging in with connectivity issues, they are an older model tablet, and they are extremely slow in operating functions. We are looking to purchase enough laptops to fully equip all 20 staff members.

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Two clerical staff were furloughed which created additional workload and burdened the remaining single clerical staff.

Officers were still attempting to address any behavior or family dynamic problems. Additionally, they were monitoring case plans and conducting evidence based interventions where appropriate by phone. This created a different style of doing probation work, which may have affected rapport with clients and families.

Many clients struggled with schools shutting down and achieving adequate grades or having the ability to complete work, as face to face instruction was not offered. Our school based officer could not make contacts at the school due to the shutdown. We assisted as best as we could and followed up with schools to help parents and guardians oversee the work. Family conflicts increased due to stress factors related to COVID19. Most service providers working with JPO converted to telehealth counseling services. This limited a provider's ability to have in home intervention, which would have been more effective.

This pandemic also limited the probation officers' ability to sanction juveniles in cases where interventions should have been implemented if regular operations were in place. Probation officers were restricted by not being authorized to shelter, detain or place clients on house arrest who were in need of a sanction. In lieu of typical sanctions, probation officers had to be creative in choosing alternative methods to deal with violations. Carey Guides and Brief Intervention Tools were utilized in some cases to address violations in place of house arrest or shelter.

The majority of residential placements, shelters and detention centers restricted entry or acceptance into their programs for incoming intake referrals. The placement facilities also had restrictions and had to create COVID19 action plans and disseminate them to the counties they service. Our department had to make follow up contact in some cases with placement facilities as procedures changed which caused some difficulty in keeping track of multiple facilities changing their protocol. Placement facilities also had to restrict family and probation officer visitations. This restriction occurred for several months, not allowing face to face visitation with either PO's or family members. Placement facilities moved to accommodate visits via video or teleconferencing with the county agency and families. All clients were unable to receive home passes due to the COVID19 restriction and it created stressors for clients and families to not have the normal visitation or family contact. In one circumstance we had a juvenile in placement that had to quarantine due to a staff member testing positive at the facility. This created additional stress on the juvenile and family. Crawford County was required to detain on a bench warrant two juveniles who absconded from Florida. These juveniles remained in shelter care for an extended period of time due to Interstate Compact restrictions not allowing for return to the home state and additional complications with transportation bans. It forced Crawford County to pay for additional shelter services longer than normal and at an increased rate for intensive services to monitor the two juveniles due to risk of absconding. Crawford County had no ability to place them in secure detention as was really needed, since those facilities were not accepting clients at the time.

Initially, COVID19 affected the intake process in that the Courts limited the majority of hearing types, unless it was for emergency purposes for approximately two months. Our department worked closely with the Judges and the Juvenile Court Hearing Officer to determine what cases could be heard and what could be delayed until a later time.

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Attorneys for the Commonwealth and defense counsel were furloughed by the County for a period of time up to approximately seven weeks. This caused delay in cases being prepared for court or attorneys being available for court hearings. Once employees were called back to the Public Defender's office as well as the District Attorney's office, we are now diligently moving forward and getting Court scheduled in a timely fashion.

Normal procedure for intake is to do in-person YLS assessments, ACES screening and the MAYSI. The officers within the intake department currently have a back log of approximately 90 cases. Ideally our intake department would like to have a case processed in 30-60 days. However, even prior to COVID19, the department was having issues with attorneys meeting with their clients, working out plea agreements with the district attorney, and getting back to the probation department so they can move forward in their intake process. In some cases, applications were received and the cases were not moving forward. According to intake, it is estimated that 80% of the issue was on the attorneys from the public defender delaying the process and 20% was on the family not doing their part. The intakes, if conducted, had to be completed by the officer over the phone. This affected the way risk assessment tools and mental health screenings, were administered, as well as, getting appropriate signatures from the client and parents for necessary release forms. The court hearings, when conducted, were also done via teleconference or videoconference, which is not normal court procedure. One downfall of having a Court Hearing on a teleconference regarding a juvenile is the inability to see reactions, body language, and demeanor which could affect a judge's decision in a case. With regard to high risk, aggressive, or juveniles who abscond, it is a positive situation to have these cases in a teleconference/videoconference setting due to not having to transport the youth to court. The back log of processing cases for court ultimately affects the waiting time and due process for juvenile cases. DNA and prints were not allowed to be administered during this time. Once the restrictions were eased, then juveniles had to report at a later time to be processed. This also has affected the line officer caseloads as some wait for new cases to begin supervision.

The community service officers were not able to run work crews or provide community service work sites with clients. Not being able to perform community service hours to work off fines and costs affected the juvenile's ability to pay and at times forced them to remain on probation longer than usual. The restitution program also could not accept any clients because community service work could not be done during this time.

COVID19 also affected businesses and other places in which juveniles could obtain employment and therefore, affected the ability to find jobs. This created issues with being able to make regular payments on fines, costs, and restitution.

The department is still currently operating under modified COVID19 action plans and will continue to do so while CDC guidelines remain in effect.

- Identify the top three successes and challenges (excluding COVID-19) realized by the CCYA since its most recent NBPB submission.

Successes

- Renovation and expansion of the office occurred in FY 19-20. The renovation was completed to meet the pending requirements outlined in the 3130 regulations

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pertaining to family to staff ratio and staff to supervisor ratio. The expansion included erecting six additional pods for caseworkers and building six offices. In addition to the expansion, CYS ongoing and CYS intake caseworkers and supervisors were moved to a combined area within the agency.

- Crawford County Children and Youth Services has reduced the number of youth placed in congregate care. This reduction is attributed to the establishment of the placement reduction team. This team meets on all children who are at risk for placement in substitute care. The team's focus pertains to safety of children, services provided, services to be implemented and if placement is necessary the least restrictive placement option. Creating a process to review placements has slowly lead to a change in agency culture regarding placement decisions and staff are beginning to buy-into this process in which they are seeking out the team members to hold the meeting. The reduction team meeting was implemented due to the states' focus on reduction of placement in March 2018. According to Crawford County Children and Youth Services general indicators, there has been an overall reduction in the percent change and CAGR in the Dependent Community Residential and the Dependent Residential Services categories. The dependent Community Residential category shows the greatest reduction. Also noted is the reduction in overall substitute placements beginning in 2018.

Challenges

- Crawford County Children and Youth Services has a compliment of 29 front line caseworkers, 17 in ongoing and 12 in intake (not including the three intake screeners). In FY 19-20, 19 caseworkers left a Children and Youth Services casework position, equating to a 66% turnover rate. The turnover rate does not include CWEL leave to which temporary staff are hired to fill the leave positions. Two caseworker positions are temporary due to CWEL. If the CWEL positions were included in the turnover rate, the turnover rate equates to 72%. The CWEL applicant in FY 19-20 was an ongoing caseworker. The turnover rate is increasing the caseworker to family ratio. Additionally, it affects the collective foundational knowledge instilled in the agency as a whole. Having less senior caseworkers to mentor new hires averts from providing quality mentorship and experiential knowledge.
- Crawford County Children and Youth Services continues to struggle with the drug epidemic of heroin. In FY 19-20, 102 families were opened for ongoing services. Of the 102 families opened, 62 of them were opened for parental substance abuse equating to 61%. This is a slight decline of 2% from FY 18-19. In FY 19-20, approximately 44 children were placed by Crawford County Children and Youth Services into substitute care. Of the 44 children placed, 24 of the children were placed due to parental substance abuse equating to 55%. Efforts to provide a coordinated continuum of care for substance use continues. Crawford County Children and Youth Services has collaborated with Crawford County Drug and Alcohol Executive Commission. A Drug and Alcohol worker is embedded within Crawford County Children and Youth Services and a contract for a D&A Certified Recovery Specialist (CRS) will be established in FY 21-22 to incorporate the grant funded functions not billable under managed care or other insurances.

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- ❑ Summarize additional information, including findings, related to the CCYAs annual inspection and Quality Services Review (QSR)/Child Family Service Review (CFSR) findings that will impact the county's planning and resource needs for FYs 2020-21 and 2021-22.

Crawford County Children and Youth Services conducted the third QSR in October 2019. The selected target population was youth age 14 and older to include youth in substitute placement and youth residing with their parent/caregiver. Topical areas identified as needing improvement included: assessment and understanding, parent and caregiver functioning, permanency and engagement/teaming. Completion of the CIP occurred at the end of 2019 and was submitted to the state. Resources needed to complete the plan will include training costs associated with retraining of the CANS/FAST, the ASQ/ASQ-SE and training in family finding. In FY 19-20, funding was allocated to provide staff with training on the Kevin Campbell Family Finding model. Due to complications/barriers in scheduling, the training did not occur.

Crawford County Children and Youth Services annual inspection occurred in July 2020. Crawford County continues to see children and collaborations are apparent in the documentation. The final annual survey and evaluation summary has not been received as of writing this section, however four citations have been discussed with the regional office. None of the citations are systemic. A plan of correction will be created and submitted to the Office of Children, Youth and Families for these citations.

- ❑ Identify the top three successes and challenges (excluding COVID-19) realized by JPO since its most recent NBPB submission.

Top 3 successes

1. One success within the Crawford County Juvenile Probation Department would be the Juvenile Justice System Enhancement Strategy (JJSES) continuation. The JJSES framework that we employ including stakeholder engagement, motivational interviewing, Pennsylvania Detention Risk Assessment Instrument, Massachusetts Youth Screening Instrument, Youth Level of Service, Case Plan Development, Evidence Based Interventions, and Graduated Response, is working. Over the course of several years, we have implemented and trained and utilized data driven tools to achieve success in the work we do. The probation staff currently utilizes in every day practice, the YLS risk assessment tool, motivational interviewing, and appropriate case plan development. The specific tools assist the probation officers by targeting the correct criminogenic need and interventions necessary to promote positive behavior change. Staff has been trained in all 18 modules of the Supervisor Briefcase, which gives proper training on how to affectively work with youth in the juvenile justice system. 12 staff members have been trained in the use of Effective Practices in Community Supervision (EPICS) and the department is looking forward to implementing this consistently in the future. Our data reflects in our YLS assessments that we are seeing positive outcomes. From initial assessment, to review, to case closing, the work we are doing is showing decreasing YLS scores throughout the course of supervision. Case closing assessments are 62.2 percent lower risk than at initial assessment. On average, with moderate risk offenders, they have a lower YLS score than an initial assessment, specifically 89.2 percent. It also shows majority of clients, 90.8 percent of clients are completing supervision without committing new offenses. Our department collected over \$20,000 in restitution last year

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to pay back to our victims. With regard to Education, 57.8% of juvenile's were attending school and passing while on supervision, 10.8 % were in GED classes, 12% graduated, and 16.9% were employed while on supervision. 77.6% of case plans included skill building and tool activities, 37.9% included cognitive behavioral group interventions and 56.9% included referral to treatment services.

2. Crawford County Juvenile Probation has been involved in a research project and has implemented a trauma informed decision protocol. The (TIDP) correlates the YLS score, the MAYSI, a mental health screen (Massachusetts Youth Screening Instrument 2 tool)and Adverse Childhood Experiences(ACES) screening tool for trauma. The TIDP cross references the scores to properly identify those children who are in need of further trauma assessment or trauma related services. This success in Crawford County has been recognized at the state level and has prompted the Juvenile Court Judges Commission to create a pilot project across the state to implement the TIDP protocol within juvenile probation departments throughout the Commonwealth. We continue to work closely with stakeholders locally at Peace for Crawford and Systems of Care to continue to move Crawford County agencies forward in trauma informed practices. Parkside Psychological is working toward training more staff in how to facilitate groups for Structured Psychotherapy for Adolescents Responding to Chronic Stress so that more of these groups can be facilitated. Juveniles we have referred for these groups in the past have reported these groups to be very beneficial to them. We have several staff trained to be trainers for ACES and continue to attend trauma trainings offered to keep our staff well-versed in trauma updates.
3. Crawford County Juvenile Probation has seen significant success in our Graduated Response program. Our probation officers have implemented incentives as a way to promote behavior change through the case plan development process. An incentive survey is completed during the intake process, which is then utilized by the supervising officer as a framework to see what motivates clients to change and promote long term positive behavior. The incentives have been given for the purpose of increasing success in school attendance, behavior, limiting curfew, decrease in drug usage, complying with appointments, completing groups, graduation, and complying with evidence based assignments. In 2019, 44 tangible rewards or incentives were distributed to juveniles to reward behavior. So far in 2020, 31 rewards or incentives have been distributed. The Graduated Response program also assists clients with gently used clothing and hygiene products when needed. We look to continue and expand this program to support and make it a continuation of practice in how we are changing the way we work with juvenile offenders.

Top 3 challenges

1. We have seen a number of cases that have led to placement in Youth Development Centers, which has not been utilized historically in several years. Youth Development Centers are the highest level of care that Juvenile Probation Departments can utilize. We have seen cases where there are significant mental health concerns, high trauma and aggression, which has led to multiple placements. Further, some of the juveniles have failed out of other programs or private institution will not accept high risk juveniles.
2. Our department has had concerns with some of our current juveniles who are in treatment for sex offenses who have needed a higher level of care. Some of the juveniles have received setbacks in treatment, which have led to lengthy placements or the need for secure sex offender treatment. Additionally, our department has

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experienced that some juveniles could not be discharged or reunified due to lack of family or community resources.

3. Our department has seen an increase in the number of clients coming on supervision or committing offenses at a younger age with a multitude of issues and significant criminal activity. Some of the issues include fire-setting, multiple criminal activity and high trauma along with family dysfunction which has led or will lead to placing younger children out of home.
- Summarize any additional areas, including efforts related to the Juvenile Justice System Enhancement Strategy (JJSES) and the data and trends related to the Youth Level of Service (YLS) domains and risk levels impacting the county's planning and resource needs for FYs 2020-21 and 2021-22.

The Crawford County Juvenile Probation Department continues to work toward enhancing the Pennsylvania Juvenile Justice System to achieve balanced and restorative justice by protecting the community, holding youth accountable for their offenses, and assisting them in developing competencies to be successful. Our probation officers work diligently toward implementing evidence-based practices as part of their daily routine. We strive to continue to improve our decision making, services, and programs.

The Crawford County Juvenile Probation Department has implemented a trauma informed decision protocol (TIDP) for all cases processed through our intake department. The YLS assessment tool is utilized along with the MAYSI and ACES screening to properly identify children through the TIDP who are in need of trauma assessments or services. Case plan development is part of supervision and engages the juvenile and family to assist in behavior change by incorporating evidence-based principles and focusing on risk, need, and responsibility. Carey Guides, Supervisor Briefcase, and Effective Practices in Community Supervision (EPICS) are also areas that probation officers have been trained in and utilize consistently with their work. Finally, Motivational Interviewing is a client-centered approach that works with individuals to motivate them to change by helping them to develop awareness of discrepancies in their lives and resolving ambivalence toward change in order to initiate and help facilitate their own desire to change. Probation staff has been trained in this area and it is used consistently to assist in behavior change. Finally, a graduated response program has been implemented in our county to utilize incentives and sanctions to foster pro social behavior and decrease non-compliance. It promotes accountability, restores victims, and helps to decrease recidivism. All of these efforts will continue to be utilized by our department to continue to enhance our mission of balanced and restorative justice through the Juvenile Justice System Enhancement Strategy.

With regard to the YLS, 155 YLS assessments were administered within the past fiscal year (2019-20). 57% of the cases were low risk, 36% were moderate risk, and 6% were high. The YLS assessment helps to guide our officers in which criminogenic needs to focus on in their case planning process. The following is a summary of our data in some domains of the YLS and what we believe we will need to address these areas:

Within the past year, 18% of juveniles scored in the moderate or high range in the Family Circumstances domain. Therefore, there will likely be a continued need for in-home family services such as Brief Services, a service designed to assist at risk families to cope with their problems and improve child care practices; and Family Preservation, a short term family-focused service designed to assist families in crisis by improving parenting and family

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functioning while keeping children safe and preventing unnecessary placement of children. Probation officers will continue to refer families to work with these providers to address family concerns as they deem appropriate with their cases. Also, we consistently continue to use Parkside Psychological Services or Cheryl Ferraro for trauma referrals. We carefully screen juveniles at the intake level to determine the need for trauma services for Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS) group or individual therapy would be referred to address these concerns. Moving forward, the probation department will continue to make referrals for the services needed above.

58% of juveniles scored in the moderate to high range in the Education domain. Evidence based interventions through the NCTI curriculum can address truancy concerns in this domain. We have three trained probation officers in the NCTI curriculum who can facilitate groups or work individually to address truancy concerns. The probation officers also can utilize EPICS, Carey Guides, and Brief Intervention tools to address other areas of concern within the school setting, such as behavior problems, adequate grades, problems with peers and teachers, or any other concerns in this domain. These interventions will continue to be utilized as deemed appropriate by the supervising probation officer to address this domain.

47% of juveniles scored in the moderate to high range in the Substance Abuse domain. Seeking Safety will be used to address the dual concerns of trauma and the substance. Substance abuse Carey Guides, as well as outpatient drug and alcohol treatment could be referred to address this area. It is anticipated that moving forward all of these interventions will be needed and continue to be utilized.

72% of juveniles scored in the moderate to high range in the Personality/Behavior domain. Aggression Replacement Therapy would be utilized as an evidence-based intervention to address this domain as well as NCTI curriculum and Justice Works VIP program. We have three trained probation officers who can facilitate ART or NCTI groups and also work individually with clients on this domain. Family Services is also a service we can utilize to work in the home to address anger management concerns. It is anticipated that all of these services will be used within the fiscal year. EPICS is also an intervention that can be used to work on this domain. We plan to begin using this more frequently with our supervisees. Some of the barriers that we have seen in facilitating groups and implementing EPICS include the following:

We have had difficulty facilitating groups at school due to problems coordinating schedules to fit the needs of all the clients referred

We have had juveniles referred from different geographic areas in Crawford County and were not able to transport them all to one site to facilitate the groups.

We have probation officers that are not able to facilitate groups after school due to second jobs or coaching sports of their own children.

COVID19 has not allowed the group to be facilitated with CDC protocols in place

EPICS is a structured appointment that has four parts to it and takes time to complete the model with fidelity. These appointments are difficult to do in a home setting with distractions and at school it takes time from the classroom.

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To address those barriers, we hope to at least be able to facilitate groups during the summer months when the schedules are more feasible. We can do individual work on the phone with clients for ART or NCTI. We may be able to facilitate a group through SKYPE if clients have the needed equipment due to COVID19.

With regard to barriers with EPICS, we do not currently have a policy written and need to work on developing one. We have some resistance from staff in implementing this model with fidelity and we need to come up with a plan in how to address this. We do have staff implementing parts of EPICS consistently, but need to work on getting buy-in and fully implementing it. If we are able to do so, we hope to see the possibility of placement reductions, if it is utilized the way the model is intended to be used.

Crawford County Juvenile Probation Department has continued to maintain positive working relationships with our stakeholders by ongoing participation in Systems of Care, Children's Advisory Counsel, Criminal Justice Advisory Board, Peace for Crawford, and the Children's Roundtable. This is a critical component of keeping our stakeholders informed on how we conduct business and continue to strive toward improving outcomes for juveniles involved in the legal system by working with other agencies who also work closely with children. We plan to continue to be actively involved in these meetings.

- **REMINDER:** This is intended to be a high-level description of county strengths, challenges and forward direction. Specific details regarding practice and resource needs will be captured in other sections of the budget submission.

1-2: Determination of Need through Collaboration Efforts

- Respond to the following questions.
 - ❑ Summarize activities related to active engagement of staff, consumers, communities, and stakeholders in determining how best to provide services that meet the identified needs of children, youth and families in the county. Describe the county's used of data analysis with the stakeholders toward the identification of practice improvement areas. Counties must utilize a Data Analysis Team as described in the NBPB Bulletin Guidelines, Section 3-4: Program Improvement Strategies. The Data Analysis Team membership should be reflective of the entities identified. Identify any challenges to collaboration and efforts toward improvement. Counties do NOT need to identify activities with EACH entity highlighted in the instruction guidelines but provide an overview of activities and process by which input has been gathered and utilized in the planning process. Address engagement of the courts and service providers separately (see next two questions).
 - ❑ Summarize activities related to active engagement of contracted service providers in identifying service level trends, strengths and gaps in service arrays and corresponding resource needs. Identify any challenges to collaboration and efforts toward improvement in the engagement of service providers in the NBPB process.

Every quarter, Crawford County Human Services holds a provider meeting. This meeting is open to any provider whom this agency contracts. This includes in home and placement providers. On June 11, 2019 during the provider meeting,

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there was a discussion about the CYS Needs Based process, how a provider can request an increase to their rate, and program implications to consider.

Children and Youth Services sends out an email every year to providers requesting information and justifications for requested increases in the NBPB year. This information provided is inputted into the budget adjustment portion of Needs Based. To ensure that every provider was given an opportunity to make changes to their program or request an increase in rates, an email went sent outlining the process that our county utilizes.

Crawford County Human Services additionally held a stakeholder meeting with in home service providers on July 21, 2020. The meeting was scheduled to have candid conversations to discuss the strengths and gaps in the current service array, evidence based programming and potential diversion programs. The conversations were guided by data derived from our database system and Hornby Zeller Associates while incorporating the facets of the Family First Act. The main purpose of the meeting was to identify services that could be either enhanced or newly implemented to reduce the number of children who enter into substitute placement, reduce congregate care, decrease the length in time for permanency, increase placement stability and decrease the number of children who re-enter care.

- Summarize activities related to active engagement of the courts in the NBPB process, specifically identification of strengths and gaps in service arrays and corresponding resource needs. Identify any challenges to collaboration and efforts toward improved engagement with the courts.

The Crawford County court administrator is an active participant in the June bi-weekly and July weekly NBPB meetings and participated in the three Stakeholder meetings held on July 21, 2020. Face to face communication with the President Judge occurred on July 30th and communication with the Juvenile Hearing Officer occurred via email. The topics of discussion surrounded around reimbursement of GAL and parent attorney's, potential improvements to the quality of legal representation, Family First Act and service array. An identified service gap was the ability for teenage youth to obtain to their driver's license. Crawford County recently awarded, through a RFP process, an IL contract to Auberle. Auberle has proposed partnering with Transportation Solutions for driver's training and driver testing for IL eligible youth.

- Identify any strengths and challenges engaging and coordinating with law enforcement on Multi-Disciplinary Investigative Teams (MDIT) and in joint investigations of child abuse.

The Multi-Disciplinary Investigative Team, (MDIT) members consist of representatives from the District Attorney's Office, (DA) Law Enforcement, Crawford County Children and Youth Services (CYS) Forensic Interviewer Juvenile Probation Office, (JPO), Child and Family Advocate and a medical provider. Law Enforcement, (LE) comprises of two Pennsylvania State Troopers and 9 other police jurisdictions working with the team. The team shares several strengths. Forth most, it is a collaborative team process. This extends far beyond the meetings. Each department respects the obstacles and boundaries of the other team members and the offices they represent. LE and CYS have excellent communication which

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remains fluid throughout the case. The DA and LE are both educated on the Child Protective Service Law, (CPSL) and respect our timeframes and mandates. CYS respects the integrity of the LE investigation and will not interfere with the investigation but will do whatever is necessary to assure the safety of our community children.

The information and outcomes gathered by members of the team are relayed at monthly meetings to assist in determining services to meet the best interest of our families and children. During meetings, members give case status updates, services offered and recommendations to meet a child's needs. The DA updates the team of prosecution status. Law Enforcement discusses progress of the criminal investigations. CYS updates the team on the status of the abuse investigations and services offered. Juvenile Probation informs the team of a juvenile offender returning home and if other children are in the residence as well as any services that are being provided, and assists in assembling safety plans in conjunction with CYS. The CFA has been instrumental in updating the team regarding family services and roadblocks in obtaining those services, as well as updating on current family status. The CFA also will follow up with outside service providers to ensure families are attending and participating as recommended by the provider. The medical provider is able to update on any exams that may have been completed on reviewed families and provides education as needed regarding medical terminology. The FI's role is to coordinate the team, develop the case review list and facilitate the meetings. A medical provider was also added to the team in 2017 upon completing her preceptorship in obtaining her Pediatric SANE certification. When available, the team has participated in joint training which has been instrumental in both team education and team building.

The MDIT has developed a working protocol that meets NCA standards. Of course, the protocols are ever changing, developing and updating as this team and agency grow. There is also an updated MOU in place between the CIC, the DA office, CYS agency, medical, Juvenile Probation and all state and local police departments. Crawford is very proud of our MDIT

Unfortunately, our team has undergone some team member changes due to turnover of other departments. Our local State police had one officer do all of the CYS cases for their jurisdiction. This worked very well and the trooper was very invested in the process. He recently accepted another position and the cases are being assigned to the three different troopers. Forming and building a strong working relationship with the new team members will occur in time.

1-3 Program and Resource Implications

- ➡ Do not address the initiatives in Section 1-3 unless requested below; address any resource needs related to all initiatives by identifying and addressing within the ADJUSTMENT TO EXPENDITURE request.**

1-3c. Service Array

Please respond to the following questions regarding the county's current service array and identification of gap areas that will be addressed through the plan:

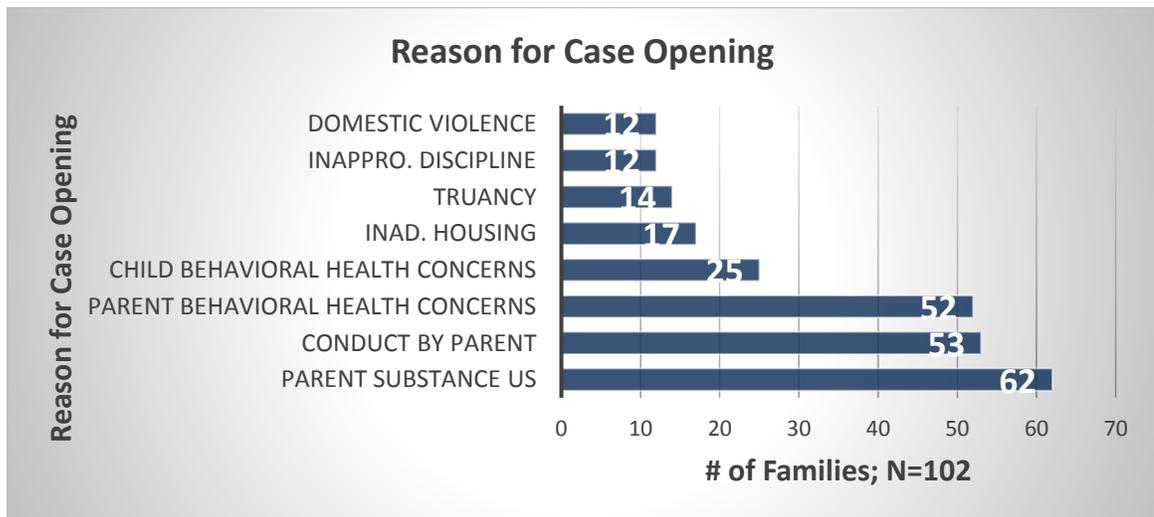
- Through the data analysis and stakeholder discussions in the development of the plan, identify any strengths in existent resources and service array available to address the needs of the children, youth and families served. Include information on any specific

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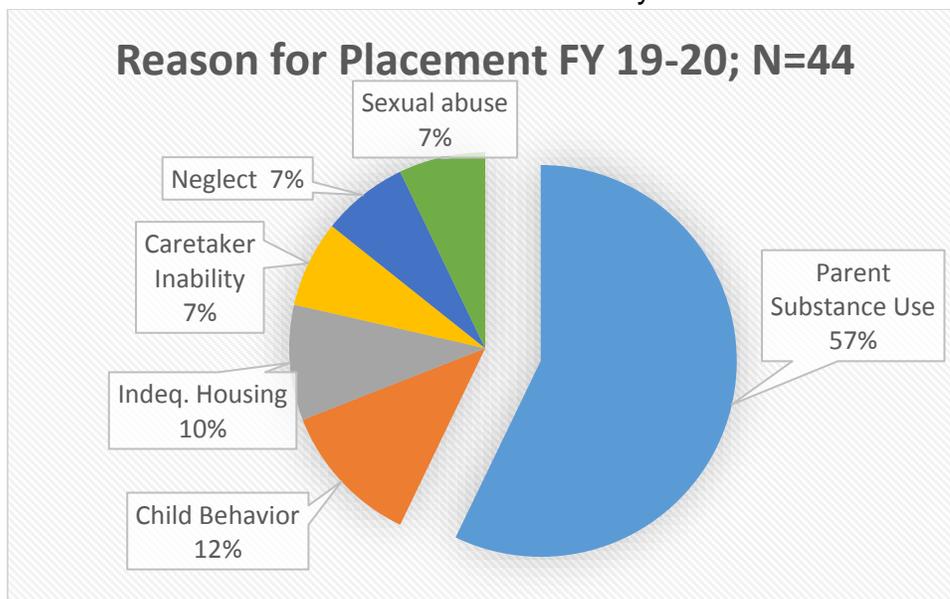
populations determined to be under served or disproportionately served through the analysis.

During the stakeholder meetings, it was identified that numerous evidence-based services are located within the county such as Multi-Systemic Therapy, Parent Child Interaction Therapy, Family Behavioral Therapy and EMDR. Other services within the county are youth anger management, SPARKS and a promising EBP Seeking Safety. Several of these programs are under-utilized by this agency. Through the discussion, it became evident of the partnership between in home and out of home providers. Providers will refer out to other services if a client or family exceeds their service array or would be better served by another agency. Family members and other family supports are included in the services and the community providers team with each other to provide the best service to a family and youth.

Below are charts and data relative to populations determined to be underserved or disproportionately served. Demographics, such as race, or ethnicity, were determined to not be indicative of populations underserved or disproportionately served. Age is an indicator for children placed in substitute care. Children age twelve and under are more vulnerable, therefore are at a higher risk level. The risk level coupled with parental substance abuse creates a higher risk for children to be placed in substitute care. Of the 44 children placed, 22 children age twelve and under were placed in substitute care due to parental substance use which impacted the safety of the child. Also noted were children between the ages of 9 to 18 whose initial placement was in a shelter, were more likely to remain in a congregate care setting throughout their placement episode.



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- Identify service array challenges and describe the county’s efforts to collaboratively address any service gaps. Identify key areas in which technical assistance may be needed.

Several challenges and gaps were identified during the stakeholder meeting. The challenges included turnover of staff at the provider and CYS agencies. Turnover in employees increase costs due to training costs, increased caseloads/families/clients served by existing employees causing increase in overtime, and increased length of time for a family/client to achieve their goals due to reestablishing a professional relationship and trust with a new staff member. Another challenge identified is the capacity to implement and sustain a trauma informed agency. Being trauma informed is an ongoing undertaking. Crawford County has been working on becoming trauma informed through a System’s of Care grant. Providers within Crawford County are able and willing to help any agency work on becoming trauma informed; however, there is a cost associated with this.

Evidence based services was the last challenge identified. Evidence based services (EBP) are difficult to sustain in a rural county. Crawford County is a class 6 county with a population of approximately 84,629 (United States Census Bureau, n.d.). The county has a total area of 1038 square miles. A larger sized county causes increased travel time to provide an in home service. This impacts the reimbursable MCO rate by reducing the cost per unit because additional travel time costs are adjusted within the rate. Other challenges to EBP’s are the cost of the training, lack of train the trainer options within the EBP, turnover at the provider level, and the lack of eligible clients/consumers to ensure the sustainability of the program is cost effective. These barriers are considered when selecting an EBP.

Service gaps identified are kinship/foster family mentors, kinship/foster home able and willing to take teenage youth or youth with challenging behaviors and dual treatment of trauma and substance abuse. Identified challenging behaviors for pre-adolescent and adolescent youth consist of physical and verbal aggression, substance use, significant mental health diagnosis’s, sexually acting out behaviors and delinquent behaviors.

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Children who exhibit behavioral challenges typically require in home services or outpatient mental health/drug and alcohol services to work with the child and kinship/foster families. Evidence based kinship/foster care services identified for children between the ages of 10-18 were discussed at the stakeholder meeting. An identified challenge to incorporating an in home service is the kinship/foster parents time availability.

The agency is requesting technical assistance in setting appropriate rates with our provider agencies.

1-3d. Overtime Rules

Please respond to the following questions regarding the county's general plan to address the federal and/or state rule:

- If impacted by the new rule(s), briefly describe the CCYAs planned response; including any plans to evaluate and potentially realign workloads, compensate additional overtime, raise workers' salaries, and limit overtime by hiring additional staff.

We have been advised by legal counsel that CCYA will not be subject to the proposed regulations.

- Describe the county's efforts to obtain and evaluate estimates from private providers regarding the impact from the proposed rule(s) on their program costs.

Emails were sent out on two separate occasions to provider agencies requesting a response on how the Department of Labor's New Overtime Rule would be impacting their agency and how they plan to deal with this change. Out of the 51 providers, 25 responded. The 9 of the 25 that did respond said the new rule would have an impact on their agency.

- As of the date of this writing, provide the names of private providers who will be receiving an increase in their contracted rate of service for FY 2021-22 because of the new rule(s).

The following providers have requested a rate increase related to the overtime rule: Adelphoi Village, Bethany Christian Services of Central PA, Bethesda Lutheran Services, Cornell Abraxas Group, Inc., Families United Network, Inc., Pathways Adolescent Center, Inc., Pressley Ridge, Taylor Diversion Program, Inc., and The Bair Foundation of PA.

- ➔ To assist in development of a resource request tied to the new rule, please use the italicized questions as a guide when developing an ADJUSTMENT TO EXPENDITURE related to CCYA employees. For an ADJUSTMENT TO EXPENDITURE related to private providers, please provide any supporting documentation from the provider that addresses the same or similar questions. Follow the instructions in the "Electronic Submission" section of the Bulletin to submit supporting documentation:
 - *How many CCYA employees will be affected by this change in regulation?*
 - *Approximately how many hours per week will need to be compensated that were not previously? At what rate(s)?*

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- *Is there a way to reduce or eliminate the need for overtime hours without affecting current operations?*
- *Are the overtime hours worked now due to vacancies? If so, could additional staffing reduce or eliminate the need?*
- *What analysis was completed to determine the direction of the agency's response to the new rule?*

1-3e. Proposed Minimum Wage Increase

Please respond to the following questions regarding the county's general plan to address the proposed minimum wage increase:

- If impacted by the proposal, briefly describe the CCYA's planned response.

County drivers will be impacted by the minimum wage increase. County plans on giving raises accordingly.

- Describe the county's efforts to obtain and evaluate estimates from private providers regarding the impact from the proposal.

Email was sent out to provider agencies requesting a response on how the Department of Labor's proposed minimum wage increase would be impacting their agency and how they plan to deal with this change. Out of the 51 providers, 25 responded. The 11 of the 25 that did respond said the new rule would have an impact on their agency.

- As of the date of this writing, provide the names of private providers who will be receiving an increase in their contracted rate of service for FY 2021-22 because of the new rule(s).

The following providers have requested a rate increase related to the overtime rule: Adelphoi Village, Bethany Christian Services of Central PA, Bethesda Lutheran Services, Cornell Abraxas Group, Inc., Families United Network, Inc., George Junior Republic of PA, Hermitage House Youth Services, Inc., Pathways Adolescent Center, Inc., Pressley Ridge, Taylor Diversion Program, Inc., and The Bair Foundation of PA.

1-3f. Continuous Quality Improvement (CQI)

For new CCYAs interested in joining the CQI effort during calendar year 2021, answer the questions found below. Interested CCYAs will receive a follow-up communication requesting the county complete a self-assessment to help the state evaluate the CCYAs level of readiness to participate in the CQI effort. The CCYA can submit the self-assessment to OCYF later.

- Briefly describe the CCYA's interest in joining the statewide CQI effort.

N/A-Crawford County Children and Youth Services implemented the QSR process in 2013.

- What is the tentative month the CCYA would be interested in conducting a QSR in 2021 if approved to join the CQI effort?

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If the CCYA is not a current CQI county and is not interested in joining the CQI efforts, describe the agency's efforts to address quality service delivery.

For CQI counties who planned to hold a QSR in calendar year 2020 but needed to defer due to COVID-19, provide the month and calendar year the CCYA is considering for their next QSR.

1-3I. Family First Prevention Services Act

Title IV-E Prevention Services Program

- Describe how the CCYA currently determines children and youth are at imminent risk of placement in foster care absent effective preventative services (i.e., does the CCYA use an assessment tool to inform this determination or does each caseworker make this decision independent of an assessment tool). This determination is currently documented on the Family Service Plan and/or petitions to the court.

It is a general practice within our agency that all children with known safety threats noted on the safety assessment that have been offset by a parental enhancement or safety plan within the home at the intake level are marked as imminent risk when transferred to the ongoing unit. This is then noted on their initial Family Service Plan. Also, if there is a pending court action for potential adjudication of a child, they are also noted as at imminent risk for placement on both their initial Family Service Plans and their court petitions. If the case has no safety threats but is assessed as high risk when the case is accepted for ongoing services or the family has been uncooperative with attempted interventions and or proposed services to alleviate these high-risk factors, then most times these children are also noted as at imminent risk on their initial Family Service Plans. For all other cases such as general protective services allegations that have lower risk factors with no safety threats and/ or truancy, these children are evaluated by the caseworker and supervisor on the case by case basis and more often are not marked as imminent risk in their initial Family Service Plan.

For all subsequent plans this determination is then based on supervisor and case manager review during monthly supervisions. During the supervisions they review the risk level from the risk assessment, any known safety threat in the home that led to an active safety plan. They also review the family cooperation and progress made with either community based and CYS funded services. They will also consider the Dynamics of the case and home environment. Consideration is also given to whether or not the family has alleviated some of the circumstances that led to the case being opened for ongoing services and any new GPS or CPS referrals that the agency has received in regards to the children prior to making the imminent risk determination.

If the supervisor and case manager feel that the imminent risk for the child reaches the level of potential placement and court involvement, our agency initiates the Placement Reduction/ Critical Case review process. The supervisor contacts the Placement Reduction Team Facilitator to set a meeting to review the case with the team. The Placement Reduction Team consists of members from each level of CYS to include case manager, supervisor, program manager, program specialists and administrative staff. There are also representatives from the MH staff at our agency, services coordination staff and the CYS legal team. If warranted, outside community based and CYS funded providers are also invited to attend the meetings. At this meeting, services and interventions that have been

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offered to the family are reviewed by the team along with dynamics on the case and any family that have been sought out as natural supports. This meeting is to assure that all efforts to have the child remain in the home of origin have been exhausted prior to placement being an option. The team must approve any placement into alternative care prior to the placement being sought unless the child was placed on an emergency basis. If the child was placed on an emergency basis, then the team meets as soon as possible after the placement to determine again if all interventions were exhausted prior to placement and if remaining in care for the youth is the only option.

- ❑ Describe the CCYAs assessment process to determine the needs of the children, youth and families being served and the selection of appropriate services to meet those needs.

Crawford County Children and Youth Services completes a risk assessment, safety assessment and FAST with each family that is opened for ongoing services. When a family is opened, a case transfer meeting is held. During this meeting, the safety and risk factors are presented along with the potential strengths identified in the FAST. At that time potential services are discussed with the entire case transfer team. These assessment tools are then reviewed in a Family Team meeting with the family along with the recommendations of the case transfer team. Then the FGDM facilitates discussion with the agency and family as to appropriate services and interventions that are available within the county for the family to access. The family is given choice as to accessing community-based services and/or CYS funded services. If a community-based service is chosen, the case manager then links the family or makes a referral for the family to that service. If it is a CYS funded service, a service authorization is completed and submitted to the provider agency for services.

- ❑ Describe the CCYAs engagement with community-based service providers regarding the selection and implementation of EBPs, regardless of their allowability under the Title IV-E Prevention Program.

Every quarter, Crawford County Human Services holds a provider meeting. This meeting is open to any provider whom this agency contracts. This includes in home services and placement services. On, June 11, 2020 during the provider meeting, there was a discussion about the CYS Needs Based process, how a provider can request an increase to their rate, and the possible program implications (2-3 a-t) to consider.

Children and Youth Services sends out an email every year to providers requesting information and justifications for requested increases in the NBPB year. This information provided is inputted into the budget adjustment portion of Needs Based. To ensure that every provider was given an opportunity to make changes to their program or request an increase in rates, an email went sent outlining the process that our county utilizes.

Crawford County Human Services additionally held a stakeholder meeting with in home service providers on June 21, 2020. The County presented that in previous years a large percentage of families have substance abuse issues and significant mental health concerns, which impair their ability to provide care for their children. It was noted how this relates to the upcoming Family First Act in that evidence based programming can be explored and be implemented in the County if the data would support referrals to a program and the program would address the concerns that led to families being involved with child welfare. The providers were asked to consider the services that are offered now at their agencies and possibly identify any gaps within the service that could address key child welfare indicators

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and present any noted gaps back to the county for further exploration. Providers were also asked if they have programming ideas or programming in other counties, which have proven effective, that the provider could present the programming to the County for consideration.

- Describe the CCYAs efforts to monitor EBP programs (regardless of their allowability under the Title IV-E Prevention Program) for fidelity to the model, collect outcome data, and analyze the data for the purpose of determining improvements to the current practice.

Crawford County has a contract monitor team that conducts on site monitors of CYS funded in-home service providers. A provider monitoring is conducted periodically by CYS. The contract monitoring team consists of the CYS fiscal technician and CYS Program Specialist and Fiscal Operations Officer. The items that are monitored include but are not limited to: Client files including Children and Youth Service Authorizations, referral packets, intake paperwork, agency service plans, monthly service reports, correspondence, etc.; Personnel Records, including clearances, and training; Monthly CYS billing summary reports; agency contact documentation sheets, service provider agency policy handbooks and board meeting minutes. A monitoring report is completed and sent to the provider with the findings from the onsite monitor. It should be noted, the invoice review process is done with every invoice received (verifying dates, rates, services, authorizations, etc.).

The majority of EBP's in Crawford County are not funded through Crawford County Children and Youth Services. Those EBP's which are funded by CYS, typically contract for ongoing training and/or oversight by the developer of the EBP or someone approved by the developer. The oversight cost is calculated and inputted into the NBPB. Outcome data is derived from the EBP's program goals or established outcomes outlined in the EBP. The EBP providers are responsible for collecting the data and sending the yearly outcomes to Crawford County Children and Youth Services. Crawford County Children and Youth Services hired a new program specialist 1 who will take advantage of the EBP monitoring training through the Child Welfare Resource Center.

- Describe how the CCYA will verify Title IV-E Prevention funds are the payer of last resort for allowable Title IV-E Prevention Services.

All contracted family and child services paid for by Crawford County Children and Youth Services is processed through a CYS Service Authorization (CSA) and inputted into the ICAMS database system. An administrative case manager is responsible for accepting, approving or denying all CSA's. This individuals ensures there is not a duplication of service, too many services provided to a family, and ensuring all services are rendered in a the most cost effective manner. This includes ensuring other forms of funds are utilized when possible. Additionally there is language in the CYS/JPO contract identifying Crawford County Children and Youth Services is the payer of last resort. This expectation will not change under the Family First Act.

- Describe any other anticipated practice and/or fiscal impact of this provision or requests for technical assistance.

Evidence Based Program selection has been a challenge to Crawford County Children and Youth Services due to educational leave of the Deputy Director. The selection process of EBP's in order to be effective should be conducted through the process of implementation science. The agency has successfully explored and analyzed the data components drilling down to the specific characteristics and demographics of a family/child served by this

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agency; however, the identification of key stakeholders to guide the exploration and the installations stages of implementation science has not occurred. The lack of groundwork in this process hinders this agency in identifying and selecting an in home EBP to impact the trajectory of this agency's trends. This agency is requesting technical assistance in implementation science for fiscal year 20-21. (Smith, Hurth, Pletcher, Shaw, Whaley, Peters and Dunlap, 2014). The financial impact will be the ability to meet the Family First Act's requirement in obtaining the specific percentage of pre-selected IV-E prevention services and therefore not being able to draw down the IV-E funding for prevention services. Another fiscal impact will be the increase in the county program reimbursable share in the Needs Based Budget due to not having established EBP's to meet the service gaps in this county.

Smith, B., Hurth, J., Pletcher, L., Shaw, E., Whaley, K., Peters, M., & Dunlap, G., (2014, March 25). ECTA center the early childhood technical assistance center: A guide to the implementation process: stages steps and activities. <https://www.implementprocess-stagesandsteps.pdf>.

- CCYAs may be considering engaging private providers or other human service agencies in the determination of eligible children and/or delivery of services under the Title IV-E Prevention Services Program as a diversion to formal child welfare involvement. To assist OCYF in determining the feasibility of this approach on a county-by-county basis, share whether this is an option the CCYA is considering and, if so, include a high-level description that addresses how the requirements under the program will be met. Be sure to address (at a minimum):
- *The role of the CCYA and the role of the other agency;*
 - *What infrastructure supports exist to enable data sharing and accurate billing (considering the payer of last resort requirement);*
 - *What assessment processes will be utilized by the other agency to determine eligibility of the child for services (i.e., that the child is at serious risk of placement in foster care or a pregnant, expecting or parenting youth in foster care);*
 - *What assessment processes will be utilized by the other agency to determine the needs of the child and select the appropriate Title IV-E Prevention Service;*
 - *Who is responsible for completion of the prevention plan;*
 - *How safety of the child and the effectiveness of the service in mitigating the risk to placement in foster care will be periodically assessed while the child is receiving services; and*
 - *The circumstances under which the child will be referred to the CCYA for additional services.*

Crawford County Children and Youth Services currently provides diversionary services for families and youth who are experiencing truancy, child behavioral issues and/or youth with complex emotional and behavioral health issues. The programs serving this population are Truancy Prevention Program (TPP), YAPWORX, Multi-systemic Therapy (MST), Family Group Decision Making (FGDM) and High Fidelity (HiFi) Wraparound. MST and HiFi wraparound are evidenced based programs. Currently these programs are utilized both in conjunction with Crawford County Children and Youth Services (CYS) and own their own accord without Crawford County Children and Youth Services involvement.

TPP and YAPWORX are programs utilized by the school system to reduce and/or eliminate truancy prior to truancy reaching the level of CYS involvement. MST is a

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program funded by the local managed care organization or CYS for pre-delinquent youth. HiFi wraparound is a CYS funded program for youth with complex emotional and behavioral health issues, who are involved in multiple child-serving systems. FGDM is an approach that positions the family as experts and leaders in the decision-making about their children's safety, permanency and well-being. The families create a plan on how to meet the safety, permanency and well-being of the children. Multiple system partners can refer families and youth to MST, FGDM and HiFi wraparound services. A Child Service Authorization (CSA) or referral form is filled out for each service paid for by CYS. The authorization is kept on a tracking form and referred to for billing authorizations. Encounter forms are necessitated out of the CYS contract and are a requirement for service. COVID has affected the completion of encounter forms and this agency is working on a solution.

Crawford County Children and Youth Services wants to expand the diversion program to divert families, youth and children from entering into the Child Welfare system by utilizing all contracted services in the service array for diversion. The services would include but not limited to Family Behavioral Therapy, Family Preservation, Brief Services or anger management services. The below outline of the diversionary program is in draft form. The preliminary outlined process needs to be analyzed and piloted to determine which components are effective and where iterative changes are required.

Diversion Program

- CYS receives a report of abuse or neglect.
- CYS completes the General Protective Services and/or Child Protective Services investigation.
- Allegations deemed validated but do not rise to the level of accepting for service or a lower level of Moderate risk.
- An internal meeting is held to determine if the family is appropriate for the diversion program.
- A Family Group Decision Making Meeting is held with the family, the family supports, CYS and suggested/mandated prevention services to develop a prevention plan.
- The development of a prevention plan is utilized by the family and selected preventative services based upon the risk, FAST, and safety factors gathered by the CYS caseworker.
- CYS caseworker completes a CSA form and give the form to the CYS program specialist and CSA caseworker.
- The CSA caseworker will log the service authorization on an excel spreadsheet or on the diversion tab in ICAMS depending upon which method is utilized.
- The CSA caseworker is fluent in funding streams for services and will discuss funding issues relative to CYS being payer of last resort with the CYS program specialist.
- The selected service providers will conduct the authorized service with the family. If the family refused to participate in the service, a referral will be made to CYS for potential re-investigation.
- The CSA maximum length of authorization is 6 months from the date of the prevention plan. If an extension in service is needed, another FGDM meeting will occur to include CYS.

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- The CYS program specialist will create outcome for the diversion program and tabulate the pre-selected outcome data every six months.

Congregate care funding limitation

- Describe the CCYAs engagement with the courts and legal staff regarding this provision.

Beginning in June, Crawford County holds bi-weekly meetings to develop the NBPB. The courts are invited to take part in this process. The court administrator is present at the majority of the meetings. Email communication between CYS and the Juvenile Hearing officer ensued regarding the limitations of funding for congregate care and the strengths and gaps in the current service array. A meeting with the President Judge and the court administrator occurred on July 31, 2020. The discussion entailed the provisions of the Family First Act and the limitation in funding for congregate care.

- Describe the engagement with JPO regarding Shared Case Responsibility youth impacted by this provision.

Juvenile Probation is an active stakeholder in the Needs Based process. The director of Juvenile Probation attends the majority of the Needs Based meetings convened to discuss the development of the narrative and budget while analyzing the direction of the CYS agency. This coupled with quarterly shared case meetings between JPO and Crawford County Children and Youth Services has contributed to the partnership between the two agencies. JPO and Crawford County Children and Youth Services does not anticipate an impact on shared cases. The placing agency on shared case youth is decided based on the facts of the case not on funding purposes. This process will not change.

- Describe the engagement with placement service providers regarding the voluntary option to become certified as a specialized setting.

Crawford County conducts quarterly provider meetings with all contracted direct care providers. At these meetings, upcoming initiatives and changes are discussed with the providers. Family First discussions occurred at meetings scheduled on December 2018, March 2019, June 2019 and June 11, 2020. Providers were given information in to how the changes would impact child welfare and offered the opportunity to further discuss this with the county. Providers were encouraged to bring programming ideas to the County so that they could be examined and determine if it is a need of the families being served by child welfare. An email was sent to the three local congregate care settings, Keystone, Pathways and Hermitage House, to obtain to their decisions on becoming a specialized setting. Hermitage House is the only provider listed above who will be applying to become a specialized service.

Crawford County also conducts a quarterly meeting with the most frequently used placement setting, Bethesda Lutheran Services. At these meetings, Family First is frequently discussed and programming surrounding the Act is also discussed. Bethesda Children's Services has opted to become a specialized setting in July of 2021.

- Describe any practice changes being implemented at the county level to ensure that congregate care placement is appropriate based on the child or youth's needs. For example, is agency leadership being involved in decisions regarding congregate care placement.

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In attempts to reduce the congregate care population, Crawford County Children and Youth Services incorporated a placement reduction/critical case review process in 2018. The placement reduction team consists of members from each level of CYS to include case manager, supervisor, program manager, program specialists and administrative staff. There are also representatives from the Mental Health staff at our agency, services coordination staff and the CYS legal team. If warranted, outside community based and CYS funded providers are also invited to attend the meetings.

Any ongoing case with a youth that may be at risk for placement into congregate must be presented to the team at a placement reduction/critical case review meeting. At this meeting, services and interventions that have been offered to the family are reviewed by the team along with CYS assessment tools, dynamics on the case, family or natural supports that have been sought and any less restrictive placement settings that have been attempted. This meeting is to assure that all efforts to have the child remain in the home of origin or current less restrictive care setting have been exhausted prior to congregate care placement being an option. The team must approve any placement into congregate care prior to the placement being sought unless the child was placed on an emergency basis. If the child was placed on an emergency basis, then the team meets as soon as possible after the placement to determine again if all interventions were exhausted prior to placement and if remaining in congregate care for the youth is the only option. The team will then either approve the congregate care placement or will offer alternative options and recommendations for the case manager and supervisor to attempt prior to placement. If recommendations are offered rather than placement, the team will often schedule a follow up meeting to address if the alternative interventions are effective to avoid congregate care placement.

Our agency has seen our congregate placement numbers decrease over the past year and a half since the implementation of this process. The agency as a whole has become more effective at providing appropriate services for our families, more diligent in seeking families natural supports and more critical in our review of the agency's assessments tools when determining for potential congregate care placement. The agency has seen the effectiveness of this process and plans to continue to utilize this process.

When congregate care is determined to be appropriate for a child, the team then continues the critical discussion as to what type of facility or setting should be utilized. There are limited congregate care facilities within our immediate area for our agency to utilize. Each of these facilities offers their own unique types of services and some specialized treatments within their agency setting for the children placed into their care. The team as a whole will discuss the various needs of the youth in comparison to the specialized services offered within each facility. The team then makes recommendations for placement based on the critical review of the case to the caseworker, supervisor and placement program specialist as to what facility appears more appropriate to address the youth and family needs. Those top listed facilities are the facilities that are then contacted for potential referral and placement. Overall, not only is the need for congregate care placement reviewed and determined by the team, but if placement is inevitable, which facility is utilized is determined by the placement reduction/critical case team to assure that the most appropriate facility and services are utilized to address the youth's needs

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- Describe any other anticipated practice and/or fiscal impact of this provision or requests for technical assistance.

The limitation of congregate care funding is anticipated to have a negative financial impact on this agency and county. There continues to be a lack of foster homes for teenagers and children under the age of 12 who exhibit physical aggression, homicidal/suicidal ideations, drug use and fire setting behaviors. Discussions have begun with kinship/foster care providers regarding the need to recruit and enhance the services and support kinship/foster parents. The county is requesting funding for the EBP Keep Safe program. The Keep Safe program is listed in the California Clearinghouse <https://www.cebc4cw.org/program/keep-safe/>.

1-3o. Title IV-E Reimbursement for Legal Representation Costs for Children and Parents in Dependency Proceedings

- Is there interest by the county agency financially responsible for legal representation costs for parents in dependency proceedings in developing an MOU with the CCYA to draw down Title IV-E funds?

Crawford County Courts and Children and Youth Services discussed this venture on July 30, 2020. It was decided that we do want to pursue the MOU for legal representation costs for parents in dependency proceedings

- If yes, what change(s) will be made to improve the quality of legal representation in dependency proceedings?

If awarded legal representation costs for parents in dependency proceedings, Crawford County Court would request two additional positions allowing for a total of five parent attorneys. The increase in total overall number of parent attorneys would decrease the amount of conflict issues due to the multiple parties involved in the juvenile court dependency hearings. The increase in multiple parties is caused by family units who are comprised of multiple parents and may include other parties such as grandparents.

Crawford County is not currently involved in the Family Engagement Initiative (FEI), but did request funding in FY 19-20 to begin the process. Crawford County Children and Youth Services budgeted and was awarded funding for the Kevin Campbell Model of the Family Finding Training. Due to scheduling challenges, the training was not able to be scheduled, however, there are components of the FEI our county would like to initiate. The additional parent attorneys would allow families access to consultation from a lawyer prior to filing with the courts in hopes to alleviate the need for juvenile dependency procedures. The logistical aspects of this process and selection criteria needs to be developed. Another improvement to the quality of legal representation includes a family's access to consultation of an attorney through the life of a Child Welfare case once a family has entered into juvenile court proceedings.

Section 2: General Indicators

2-1: County Fiscal Background

- Indicate whether the county was over or underspent in the Actual Year and reasons why.

Crawford County

County projects to be underspent mainly due to the COVID-19 pandemic. We had employees that were furloughed. We also had lower costs related to facility and transportation expenses due to employees working remotely.

- Is over or underspending anticipated in the Implementation Year? Explain why.

No, we are not anticipating under/over spending. If we are underspent, it will be primarily due to contracts not being finalized and over projecting placements needs for the upcoming quarters.

We do have a backlog of juvenile hearings related to the COVID-19 pandemic which could potentially cause an unanticipated increase in juvenile placement expenses.

- Address any changes or important trends that will be highlighted as a resource need through an ADJUSTMENT TO EXPENDITURE submission.

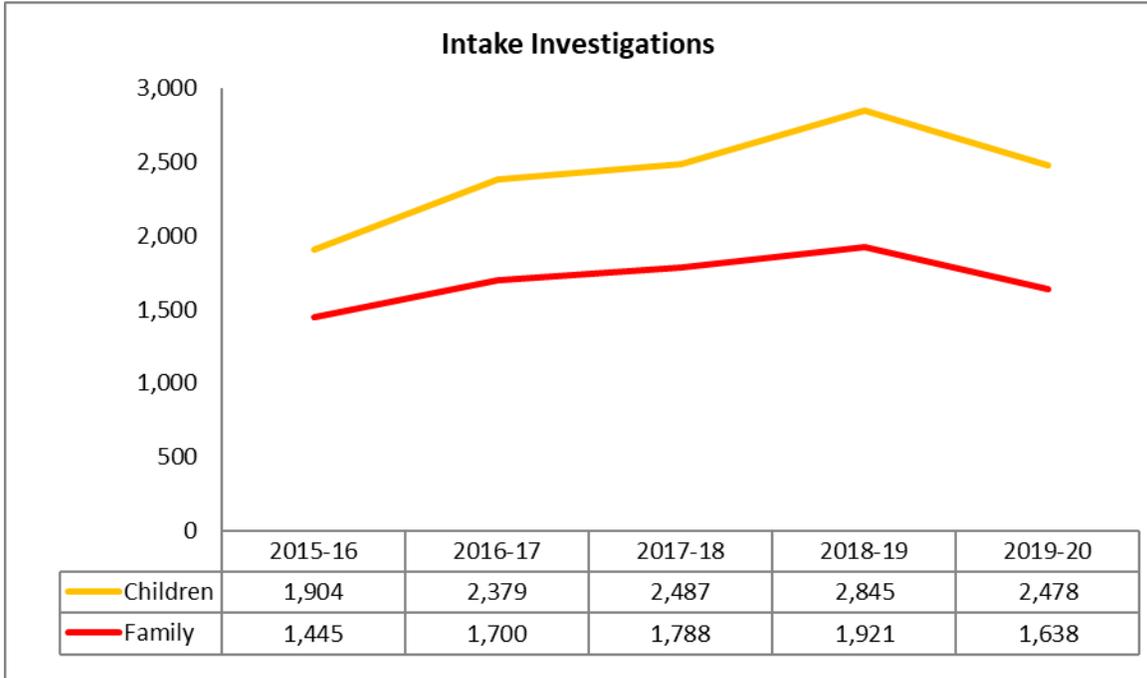
- Additional employees and/or allocation changes for current employees
- Provider rate increases
- Family Advocate
 - Chairs for interview room
 - Interviewer contract increase
 - Family Advocate contract
- Family First
- Statewide Trauma Informed
 - Trainings/model implementation
 - Additional employee??
- COVID additional expenses – some expenses are not in base expenses due to being paid for through other means
 - Janitorial & cleaning supplies costs for full 12 months
 - Masks
 - Air purifiers & filters for HS office space only – HVAC system is shared throughout building which is not completely occupied by CYA.
- Foster Family retention & recruitment through coalition
 - Appreciation dinner
 - Radio ads
- Data cards for families to enable remote visitations/meetings
- Increase in clothing allotments from \$250.00 to \$500.00
- SWAN networking meeting

- ⇒ **PLEASE NOTE: Capture any highlights here that are not addressed in the Program Improvement Strategies narrative (Section 2-4)**

Crawford County

2-2a. Intake Investigations

Insert the Intake Investigations Chart (Chart 1).

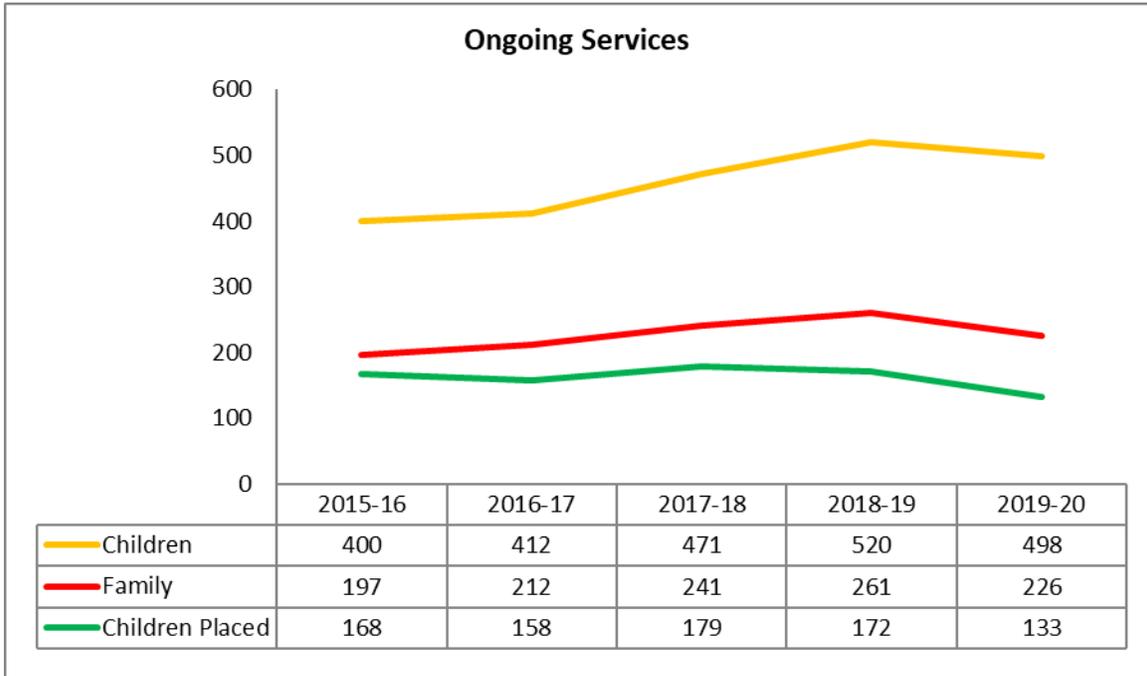


Click to Paste HZA chart

Crawford County

2-2a. Ongoing Services

Insert the Ongoing Services Chart (Chart 2).

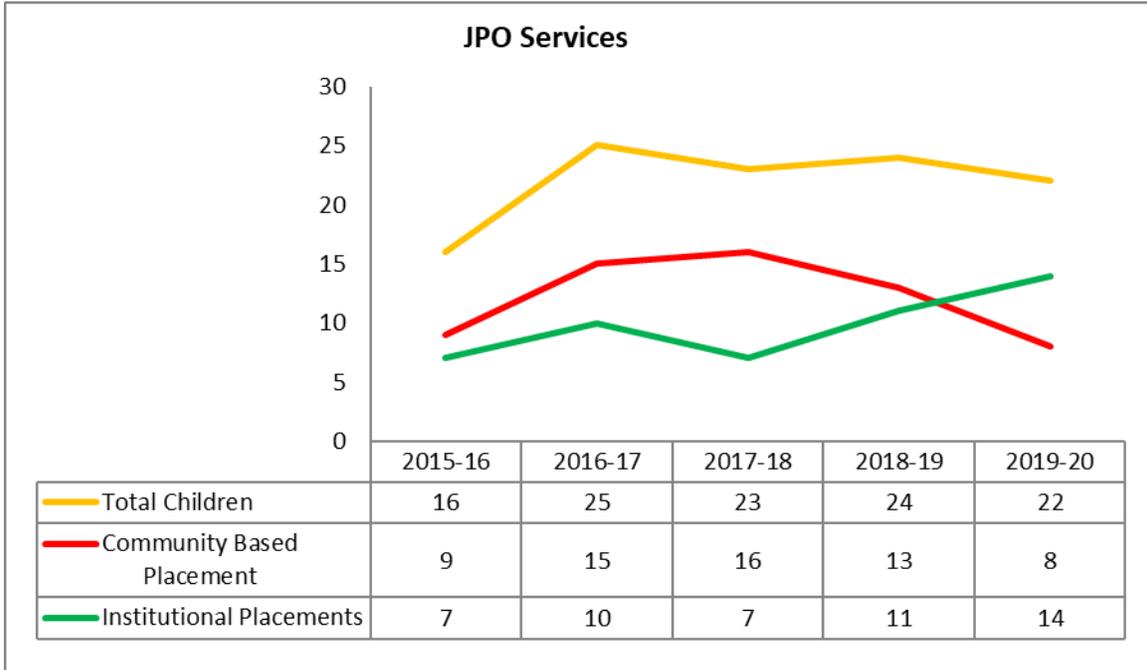


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Crawford County

2-2a. JPO Services

Insert the JPO Services Chart (Chart 3).

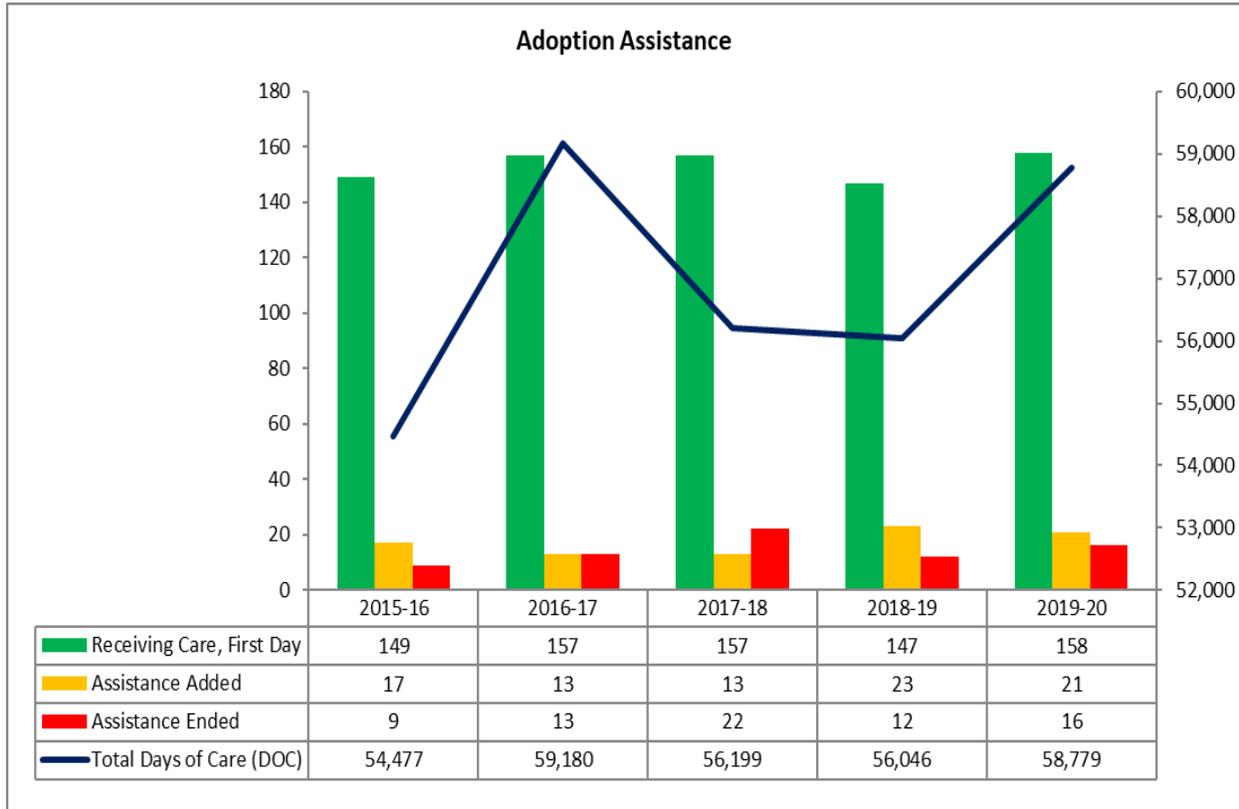


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Crawford County

2-2b. Adoption Assistance

Insert the Adoption Assistance Chart (Chart 4).

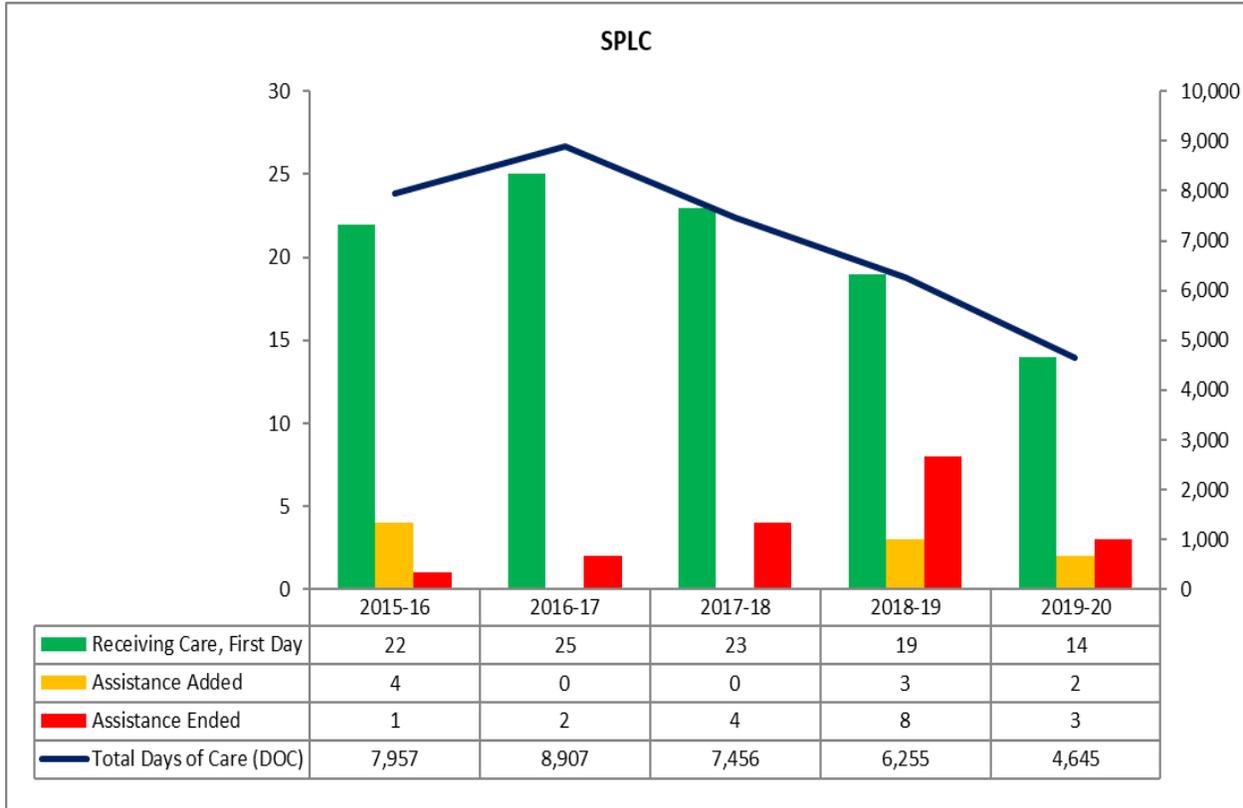


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Crawford County

2-2c. Subsidized Permanent Legal Custody (SPLC)

Insert the SPLC Chart (Chart 5).

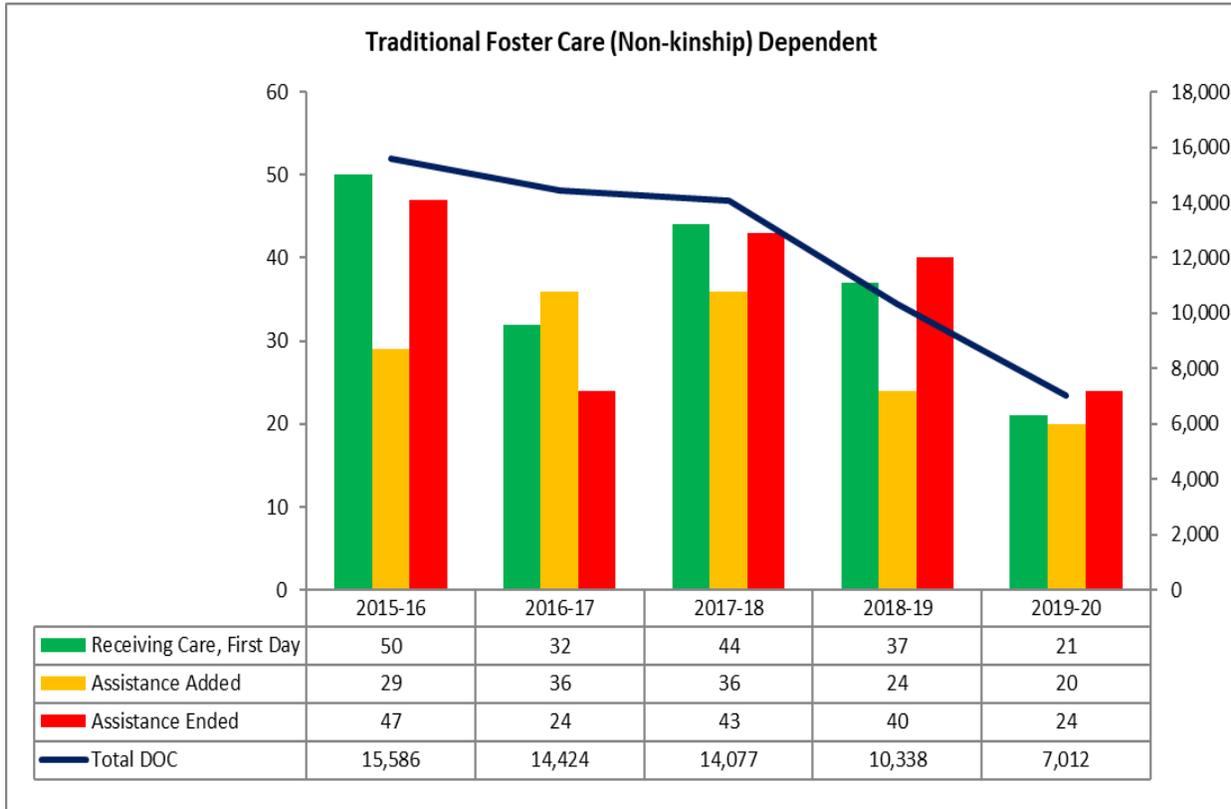


Click to Paste Chart

Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

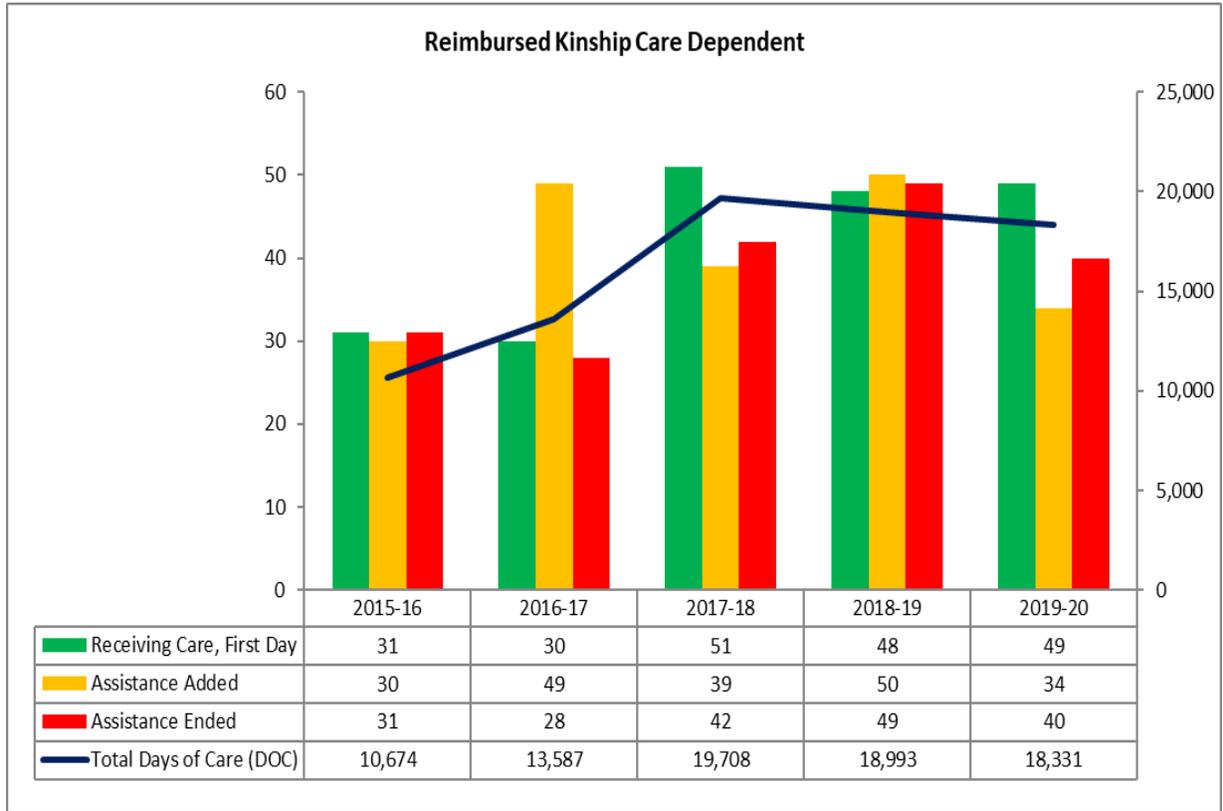


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

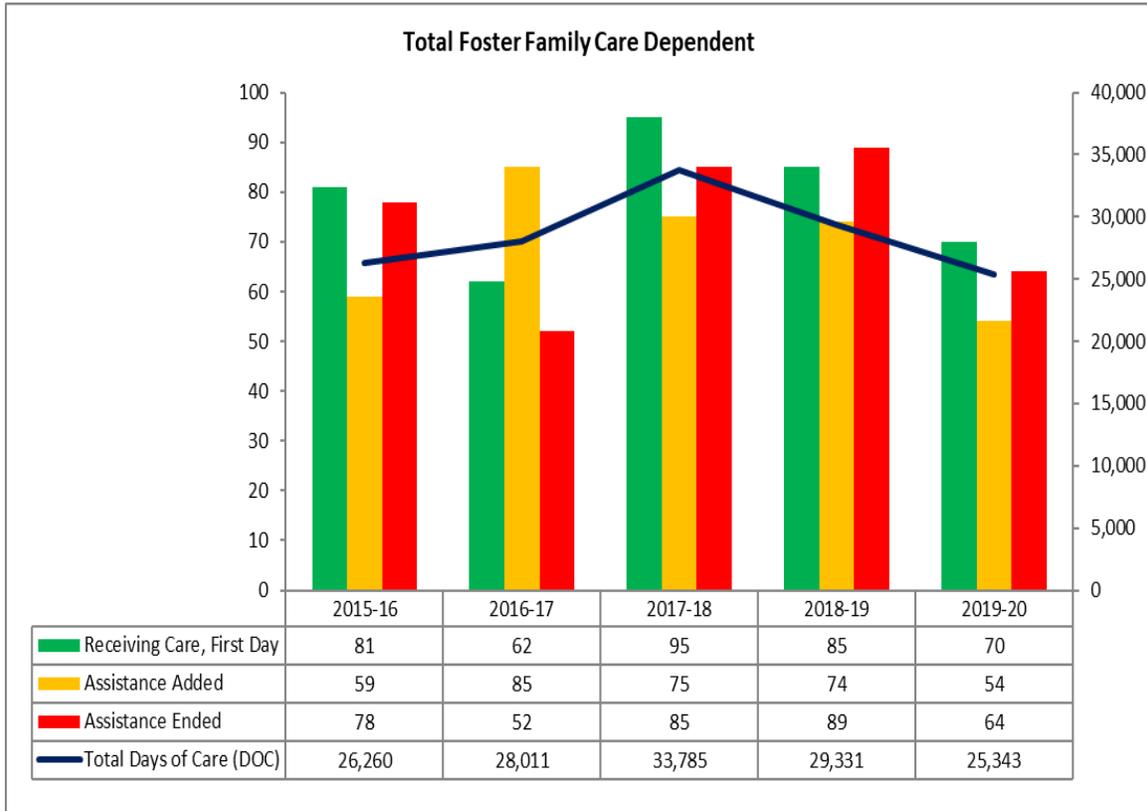


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

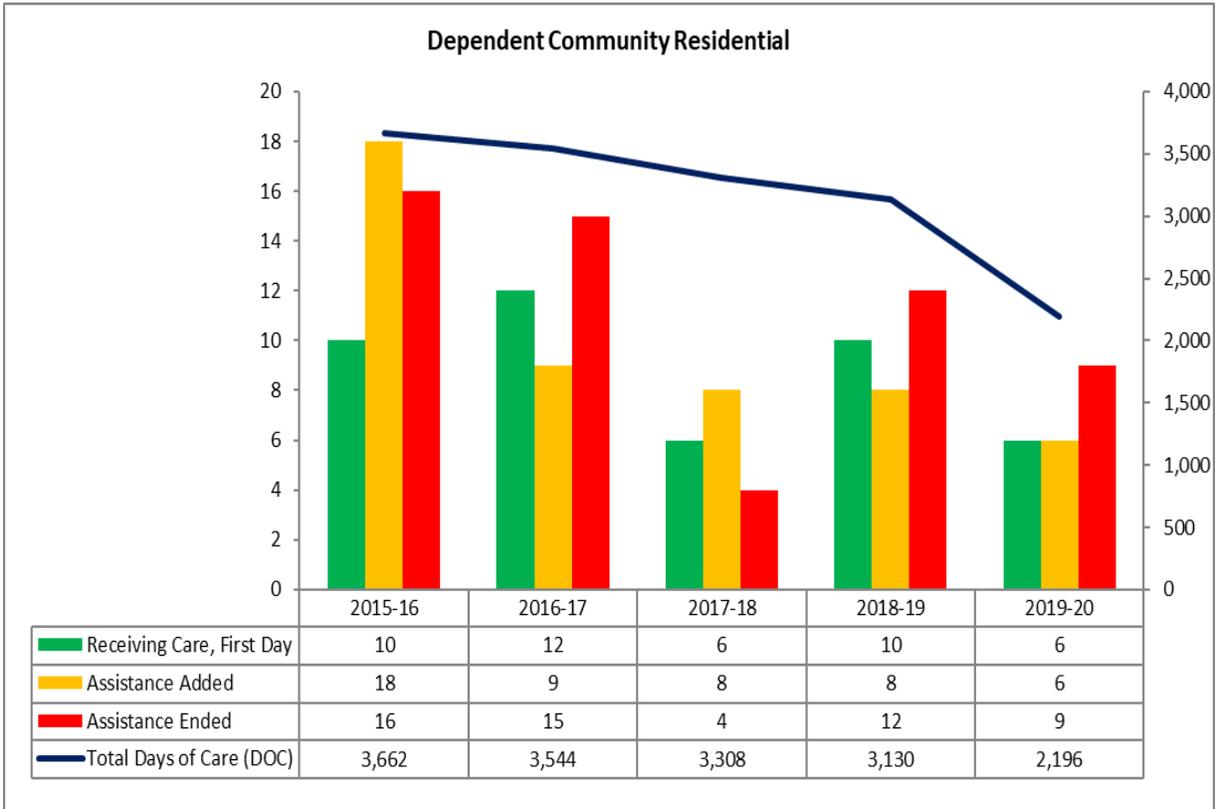


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

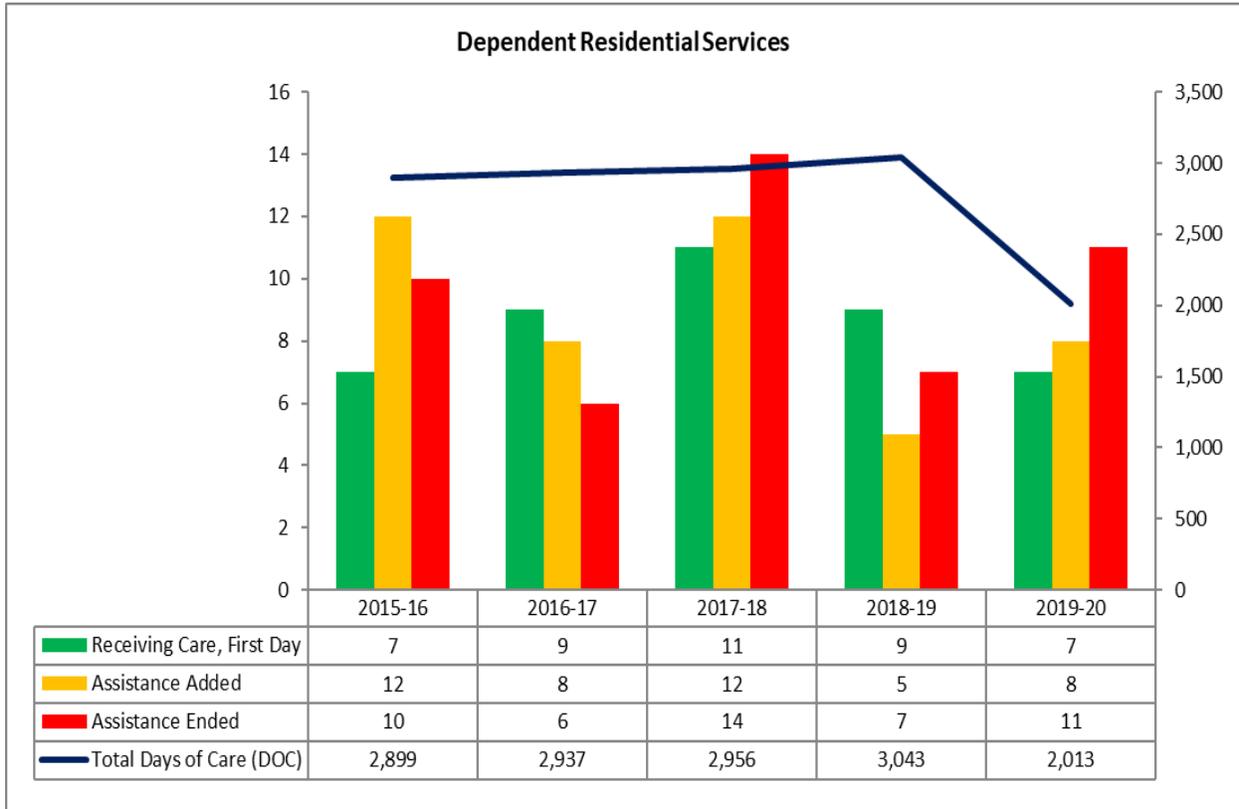


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

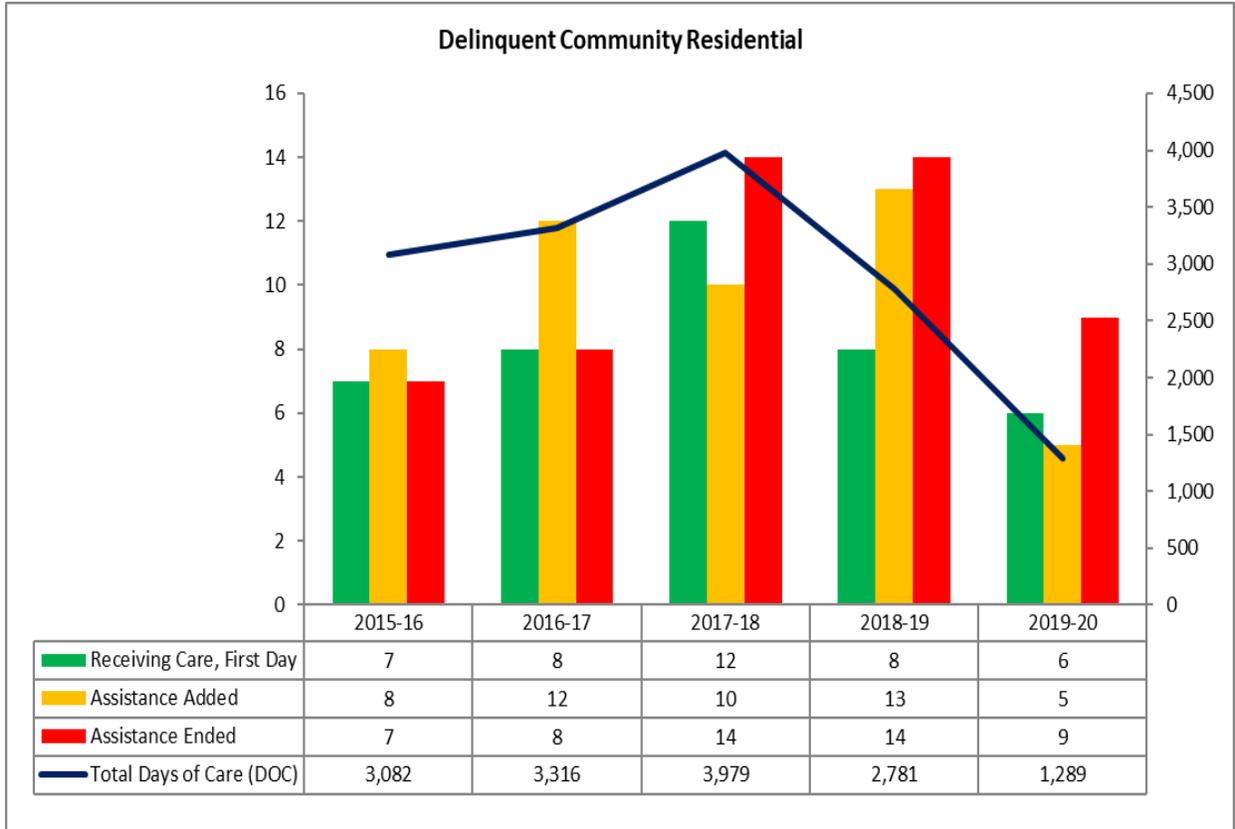


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

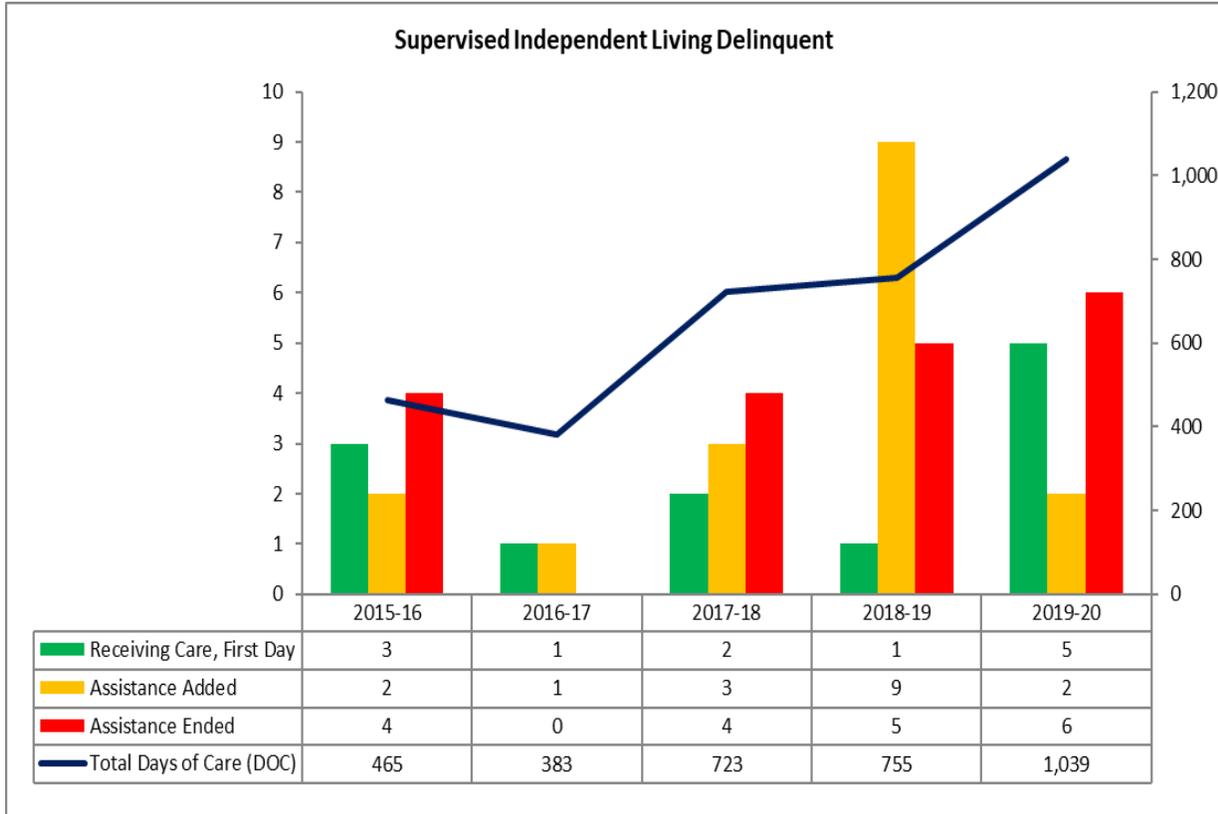


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

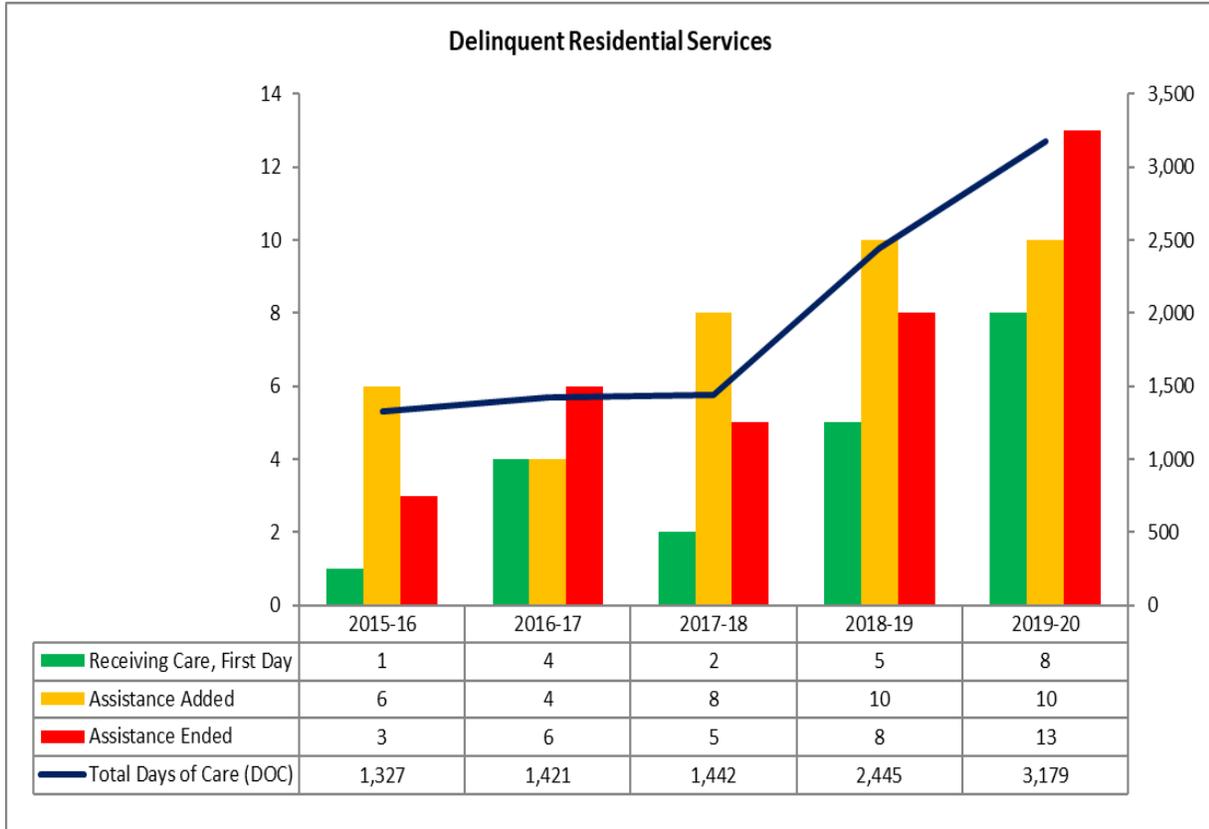


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

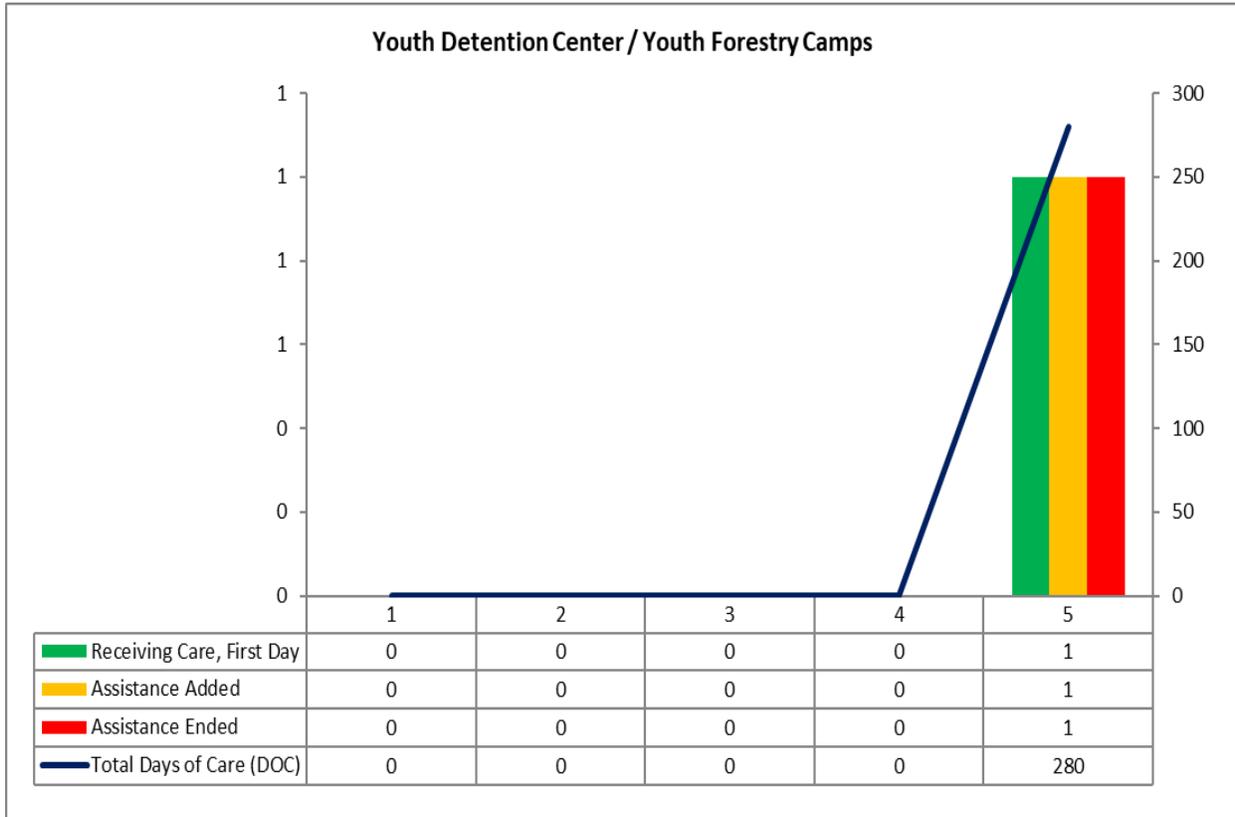


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Crawford County

2-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 6-22).

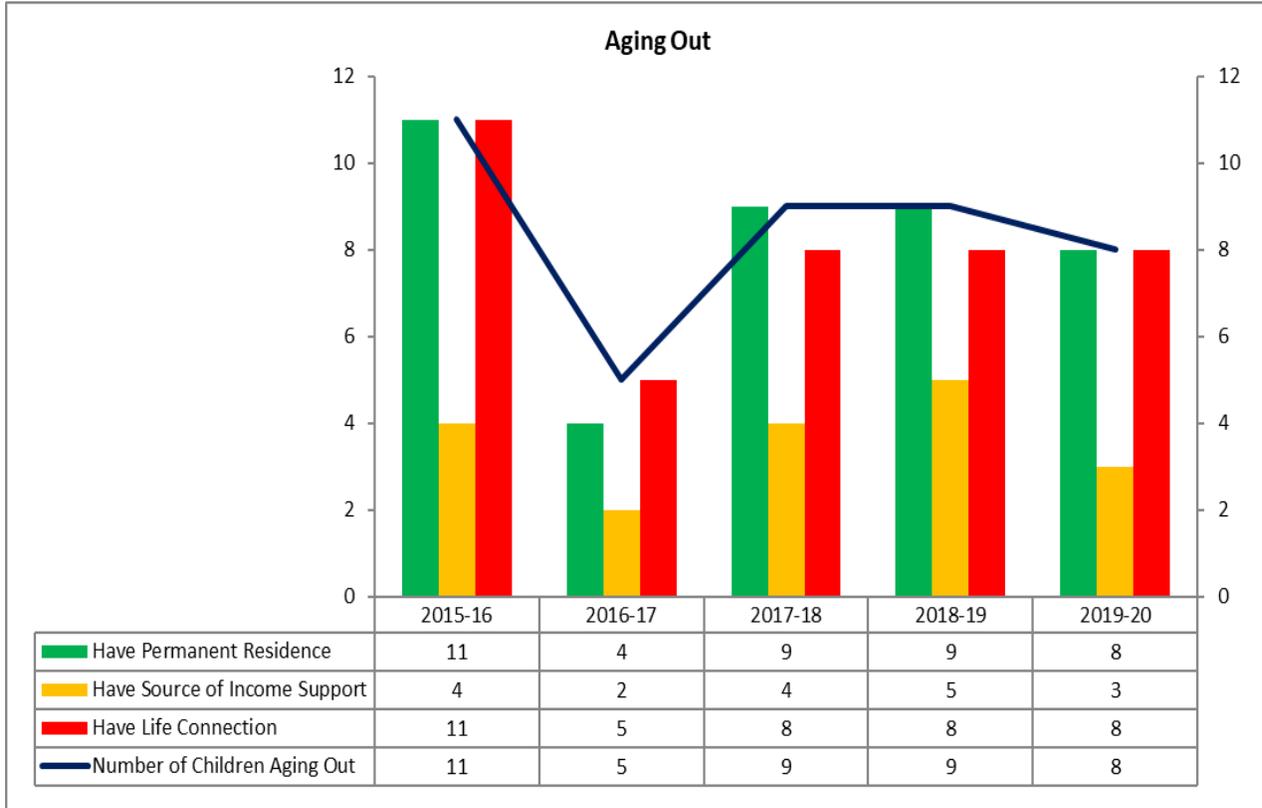


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Crawford County

2-2e. Aging Out

Insert the Aging Out Chart (Chart 23).



Click to Paste Chart

Crawford County

2-2f. General Indicators

Insert the complete table from the *General Indicators* tab. **No narrative** is required in this section.

3-2: General Indicators

"Type in BLUE boxes only"

County Number:

Class:

Note: % Change and CAGR are calculated using the oldest reported figure (not 0) and the most recent fiscal year.

Crawford County

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Narrative insertion

Copy Part 2 for
Narrative insertion

Copy Part 3 for
Narrative insertion

3-2a. Service Trends

Indicator	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	% Change	CAGR
Intake Investigations							
Children	1,904	2,379	2,487	2,845	2,478	30.1%	6.8%
Family	1,445	1,700	1,788	1,921	1,638	13.4%	3.2%
Ongoing Services							
Children	400	412	471	520	498	24.5%	5.6%
Family	197	212	241	261	226	14.7%	3.5%
Children Placed	168	158	179	172	133	-20.8%	-5.7%
JPO Services							
Total Children	16	25	23	24	22	37.5%	8.3%
Community Based Placement	9	15	16	13	8	-11.1%	-2.9%
Institutional Placements	7	10	7	11	14	100.0%	18.9%

3-2b. Adoption Assistance

Indicator	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	% Change	CAGR
Adoption Assistance							
Receiving Care, First Day	149	157	157	147	158	6.0%	1.5%
Assistance Added	17	13	13	23	21	23.5%	5.4%
Assistance Ended	9	13	22	12	16	77.8%	15.5%
Total Days of Care (DOC)	54,477	59,180	56,199	56,046	58,779	7.9%	1.9%

3-2c. SPLC

Indicator	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	% Change	CAGR
Subsidized Permanent Legal Custodianship							
Receiving Care, First Day	22	25	23	19	14	-36.4%	-10.7%
Assistance Added	4	0	0	3	2	-50.0%	-15.9%
Assistance Ended	1	2	4	8	3	200.0%	31.6%
Total Days of Care (DOC)	7,957	8,907	7,456	6,255	4,645	-41.6%	-12.6%

Crawford County

3-2d. Placement Data

Indicator	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	% Change	CAGR
Traditional Foster Care (non-kinship) - Dependent							
Receiving Care, First Day	50	32	44	37	21	-58.0%	-19.5%
Assistance Added	29	36	36	24	20	-31.0%	-8.9%
Assistance Ended	47	24	43	40	24	-48.9%	-15.5%
Total DOC	15,586	14,424	14,077	10,338	7,012	-55.0%	-18.1%

Traditional Foster Care (non-kinship) - Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total DOC	0	0	0	0	0	0.0%	0.0%

Reimbursed Kinship Care - Dependent							
Receiving Care, First Day	31	30	51	48	49	58.1%	12.1%
Assistance Added	30	49	39	50	34	13.3%	3.2%
Assistance Ended	31	28	42	49	40	29.0%	6.6%
Total Days of Care (DOC)	10,674	13,587	19,708	18,993	18,331	71.7%	14.5%

Reimbursed Kinship Care - Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Foster Family Care - Dependent (Total of 2 above)							
Receiving Care, First Day	81	62	95	85	70	-13.6%	-3.6%
Assistance Added	59	85	75	74	54	-8.5%	-2.2%
Assistance Ended	78	52	85	89	64	-17.9%	-4.8%
Total Days of Care (DOC)	26,260	28,011	33,785	29,331	25,343	-3.5%	-0.9%

Foster Family Care - Delinquent (Total of 2 above)							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Non-reimbursed Kinship Care - Dependent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Non-reimbursed Kinship Care - Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Alternative Treatment Dependent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Alternative Treatment Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Crawford County

Dependent Community Residential								
Receiving Care, First Day	10	12	6	10	6	-40.0%	-12.0%	View Chart
Assistance Added	18	9	8	8	6	-66.7%	-24.0%	
Assistance Ended	16	15	4	12	9	-43.8%	-13.4%	
Total Days of Care (DOC)	3,662	3,544	3,308	3,130	2,196	-40.0%	-12.0%	

Delinquent Community Residential								
Receiving Care, First Day	7	8	12	8	6	-14.3%	-3.8%	View Chart
Assistance Added	8	12	10	13	5	-37.5%	-11.1%	
Assistance Ended	7	8	14	14	9	28.6%	6.5%	
Total Days of Care (DOC)	3,082	3,316	3,979	2,781	1,289	-58.2%	-19.6%	

Supervised Independent Living Dependent								
Receiving Care, First Day	0	1	2	4	1	0.0%	0.0%	View Chart
Assistance Added	1	3	3	1	3	200.0%	31.6%	
Assistance Ended	0	2	1	4	1	-50.0%	-20.6%	
Total Days of Care (DOC)	72	643	755	707	325	351.4%	45.8%	

Supervised Independent Living Delinquent								
Receiving Care, First Day	3	1	2	1	5	66.7%	13.6%	View Chart
Assistance Added	2	1	3	9	2	0.0%	0.0%	
Assistance Ended	4	0	4	5	6	50.0%	10.7%	
Total Days of Care (DOC)	465	383	723	755	1,039	123.4%	22.3%	

Juvenile Detention								
Receiving Care, First Day	0	0	0	1	0	-100.0%	-100.0%	View Chart
Assistance Added	3	4	3	4	3	0.0%	0.0%	
Assistance Ended	3	4	2	5	3	0.0%	0.0%	
Total Days of Care (DOC)	36	40	33	177	22	-38.9%	-11.6%	

Dependent Residential Services								
Receiving Care, First Day	7	9	11	9	7	0.0%	0.0%	View Chart
Assistance Added	12	8	12	5	8	-33.3%	-9.6%	
Assistance Ended	10	6	14	7	11	10.0%	2.4%	
Total Days of Care (DOC)	2,899	2,937	2,956	3,043	2,013	-30.6%	-8.7%	

Delinquent Residential Services								
Receiving Care, First Day	1	4	2	5	8	700.0%	68.2%	View Chart
Assistance Added	6	4	8	10	10	66.7%	13.6%	
Assistance Ended	3	6	5	8	13	333.3%	44.3%	
Total Days of Care (DOC)	1,327	1,421	1,442	2,445	3,179	139.6%	24.4%	

Secure Residential (Except YDC)								
Receiving Care, First Day	1	2	0	2	4	300.0%	41.4%	View Chart
Assistance Added	3	1	2	2	2	-33.3%	-9.6%	
Assistance Ended	2	3	0	0	2	0.0%	0.0%	
Total Days of Care (DOC)	719	803	372	1,154	911	26.7%	6.1%	

Youth Detention Center / Youth Forestry Camps								
Receiving Care, First Day	0	0	0	0	1	0.0%	0.0%	View Chart
Assistance Added	0	0	0	0	1	0.0%	0.0%	
Assistance Ended	0	0	0	0	1	0.0%	0.0%	
Total Days of Care (DOC)	0	0	0	0	280	0.0%	0.0%	

3-2e. Aging Out Data								
Indicator	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	% Change	CAGR	
Aging Out								
Number of Children Aging Out	11	5	9	9	8	-27.3%	-7.7%	View Chart
Have Permanent Residence	11	4	9	9	8	-27.3%	-7.7%	
Have Source of Income Support	4	2	4	5	3	-25.0%	-6.9%	
Have Life Connection	11	5	8	8	8	-27.3%	-7.7%	

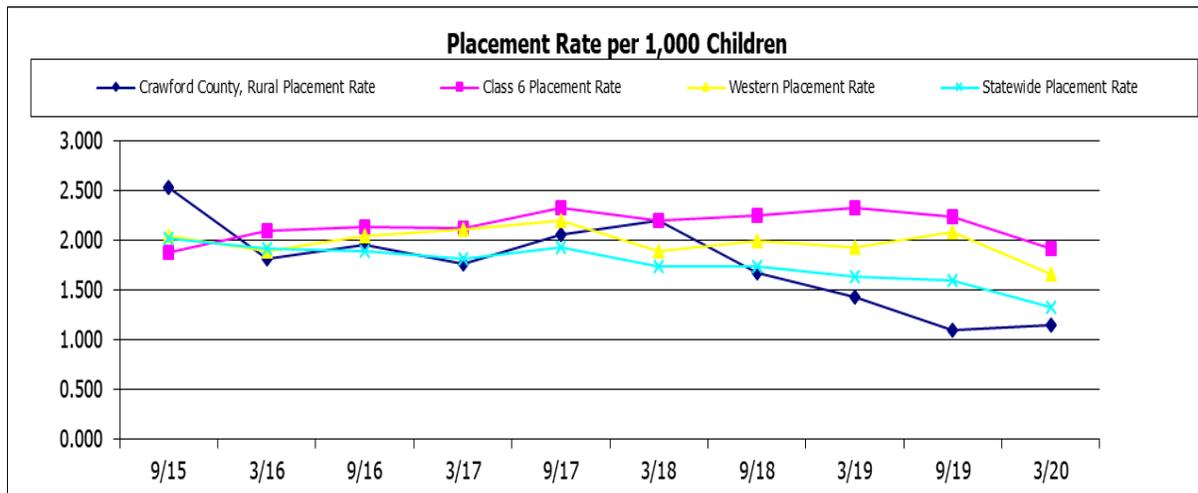
Crawford County

2-2g. through 2-2i. Charts

- ☞ NOTE: The section is optional and applies to CCYAs and/or JPOs.
- ☞ NOTE: If inserting charts, identify the data source and parameters and include only one chart per page.

- ☐ Insert up to three additional charts that capture the drivers of county services and supports the county's resource request. For example, these charts may be related to prevention or diversion activities or may be specific to areas or demographics that are driving influences on county resources and practices.

- ☐ Counties may use data charts as provided by PCG or any other county data available. County specific charts outside of PCG data charts must clearly identify the source of the data.



[Click to Paste Chart](#)

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Crawford County

Chart Analysis for 2-2a. through 2-2i.

- **NOTE:** These questions apply to both the CCYA and JPO.
- ☐ Discuss any child welfare and juvenile justice service trends and describe factors contributing to the trends noted in the previous charts.

Intake and Ongoing

Crawford County Children and Youth Services experienced a significant decrease in the number of GPS and CPS referrals in FY 19/20 in comparison to FY 18/19. There was a 35% decrease in the number of GPS referrals and a 32% decrease in the number of CPS referrals received in March, April and June of 2020 compared to last year. The percentage excludes GPS referrals on ongoing cases. The decline in the number of referrals are attributed to COVID. It is surmised the lack of access to children by mandated reporters and providers partially impacted the decrease in reporting. The decline in the number of referrals influenced the number of children and families opened for ongoing services. It is expected the number of referrals to Children and Youth Services will return to normal when if Crawford County remains at or above the Green phase.

Kinship care

The trend for kinship care dependent has steadily increased through the last fiscal years. This trend can be attributed to a binary factor. The agency is focusing on kinship care and the Judges and Hearing Officer are asking about kinship in hearings for youth who are placed in substitute placement. These factors have increased the caseworker's awareness and knowledge on kinship. As kinship care increases, traditional foster care decreases. As of June 2020, there are 44 children in kinship care out of the 87 children who are placed in substitute care.

Residential and Community Residential

The trend for dependent Community Residential has shown a dramatic decrease in the days of care, with fluctuations in assistance added and assistance ended. Factors affecting the trends are the lack of available Community Residential Rehabilitation (CRR) homes in this area and a lack of foster homes for children with escalated behaviors such as sexually acting out, self-harm, homicidal/suicidal ideations, complex trauma and physical aggression.

Other Factors

Crawford County Children and Youth Services implemented two strategies several years ago, which can be attributed to the factors influencing the trends of Crawford County. Approximately two and a half years ago, Crawford County Children and Youth Services implemented a Placement Reduction Meeting. This team consists of the Deputy Director, both Program Managers, the CASSP coordinator, the CYS Placement Program Specialist, the CYS Program Specialist, the Service Authorization representative, an Ongoing Supervisor and a FGDM Program Specialist. The original purpose of this meeting was to review any child over the age of 13 who is at imminent risk of entering out of home placement. The team reviewed the current circumstances of the case, the safety and risk factors present and reviewed other key case information. The team was responsible to authorize the necessity of out of home placement for the older youth. The meeting was held prior to the placement of the youth. The meeting's main purpose was oversight of placement into congregate care. Then the meeting morphed to incorporate another

Crawford County

component, preventative placements. The additional focus was identified through data collection. The process now includes meetings for every family opened for ongoing services. These initiatives are possible due to three years ago when Crawford County Children and Youth Services created a placement specialist position. The placement specialist positions main job duties surround the placement of children in the least restrictive placement setting and ensuring the Every Student Succeeds Act is adhered. These two strategies have attributed to the decline in the overall monthly number of youth in substitute placement.

During the past year, staff received the safety assessment booster training and risk assessment training. The trainings were part of our POC associated with Crawford County Children and Youth Services annual inspection. While the training was a refresher for some employees, it brought to the forefront the process of asking the furthering questions. Asking furthering questions helps the case workers garner the appropriate information about a family and enables them to make the most appropriate case decisions.

Crawford County Children and Youth Services experienced an astounding 72% turnover rate in caseworker positions. This coupled with the hire of three new supervisors has influenced our service delivery in areas such as holding three-month internal permanency meetings to discuss, develop and monitor a plan for a child to achieve permanency.

Juvenile Probation Office

Delinquent Community residential

The 5 year trend has shown a steady increase in this category of placement through 2017-2018 and then a downward trend in the amount of days of care for this chart. We have seen an average of between 8-15 kids enter this placement over the past few years. Placements such as George Junior, Keystone, Perseus House, and Andromeda House were used for shorter term programs which typically are completed within a six month time frame. We also consistently utilized the Hermitage House HIP program over the 5year trend. Many individuals were placed in the ADAPT program for sex offender treatment. Sex offender treatment typically is 12 months or longer if there is no identified discharge resource which could have led to our increase in days of care over the 2015-2018 trend. The downward trend we believe is related to less kids in care and successful discharge after a period of six months. We anticipate moving forward to continue to use this category of placement for our sex offenders, sexual offender assessments, and some short term programs in a least restrictive setting. Historically we have seen approximately 8-10 kids yearly needing sex offender treatment or assessments and expect this to continue. Short term programs will continue to be utilized when interventions in the community are not successful and a lower level of care is needed to address ongoing violations of supervision. These placements are typically 6 months of stay.

Supervised independent living

This chart shows a slight decrease and then a steady increase in the days of care for this placement. The downward trend is likely attributed to less juveniles needing this type of placement setting and clients completing the program and returning home within the typical 6 month time frame. The increase is supporting the fact that we had more clients needing this level of care and entering this placement setting. Longer days of care is attributed to remaining in care with no discharge resource. Moving forward we intend to continue to

Crawford County

utilize this level of care for some of our older youth who have no living options and individuals transitioning from a higher level of care.

Secure residential except YDC

Throughout the 5 year trend you see a slight increase, a decline in days of care and then a significant increase again. We had several clients placed in this setting through 2015-2017 and then released home and then we are down to one client in care which shows the decline in days, 2017-2018. Then a significant jump of days due to several clients placed and remaining in care for the remaining year trend. We see an average of 2-3 kids entering this placement setting which typically is 12 months or longer. Mid Atlantic Secure and Cove Prep are two placements we utilized when the clients had issues with lesser restrictive placements and remained in this setting to complete it or moved to a YDC. Less restrictive programs refused continued treatment and asked for their removal. These youth would not be accepted in any other program other than YDC. We expect to continue to use this category of placement setting for our higher risk clients, aggressive behaviors, absconders and those who fail to adjust to a lower level of care. We have also used this placement setting for fire setters.

Delinquent Residential

Over the 5 year trend we have seen a steady rise. This category of placement is often used for drug and alcohol placements. We saw a significant amount of cases enter into Summit Academy, Abraxas and New Outlook for drug and alcohol treatment and then at intervals, less clients needing this level of treatment. We previously utilized Glenn Mills for placements. However, this facility has shut down and we are no longer using it, which led to alternative placements being utilized and thus some decline. We anticipate continued usage of this level of care for the majority of our juveniles utilizing illegal substances, and more intensive setting for those individuals not adapting to a lower level of care.

Juvenile Detention

Over the 5 year trend we have consistently had 3-5 clients in per year and typically stay approximately 10 days in this category. In 2017-2018-2018-2019 a significant jump is attributed to several clients who remained in secure detention based on awaiting processing of criminal charges from another jurisdiction. One was a run risk, awaiting to transfer to a secure placement setting. Another client remained in detention due to awaiting for approval for an MA funded program to address his significant mental health. He needed very specific treatment and no other facility would take him at the time. The final client remained due to run risk and awaiting placement acceptance. We will continue to need the average of approximately 4 kids yearly to enter secure detention. This placement is needed to hold juveniles in secure detention who are a run risk, FTA from other placements, aggressive, and who meet the criteria on the PADRAI to enter secure detention.

Youth Development Center

Over the past five years we had not utilized this placement setting until recent. We have had a few clients with significant aggressive behavior that resulted in FTA from less restrictive settings. They have also had complex issues related to mental health, trauma and family dysfunction. One particular case could not be accepted into other secure residential programs and had a significant history of aggression and absconding. No other placement alternatives were found for these juveniles. This placement setting may not be utilized often. However, we have recently seen quite a few juveniles needing this level of care.

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JPO Services

The five year trend shows a continued usage of services to address in home family dynamics are being utilized in an attempt to prevent placement. House arrest is also a preventative measure to address violations of supervision as well as alternative to removal from home. Within the past year we have serviced 4 clients through Brief Services, 4 clients for sexual offender treatment, but there is a continued need to acquire funding to support in home services, community based sex offender treatment, trauma counseling, ART, SPARCS groups, NCTI curriculum, etc. Prior practice of implementing services into the home was initiated by intake and immediately ordered for services. However, new practice has occurred in which line probation officers are building rapport and beginning the case plan process within 30 days of supervision. This practice has allowed some clients to self - correct without the need of in home services. Evidence based programs and groups need to be consistently facilitated for preventative measures to aid in development of skills to help assist in improving outcomes and possibly reducing placement costs. Furthermore it allows the officer to have additional incite on whether or not to refer for in home services. Other evidence based interventions are being utilized and skill development through the case planning process has allowed success in client cases where in home services may have not been needed. Community based treatment and psychosexual assessment still need to be referred for those clients who may be more eligible for treatment in the community vs residential placement. Polygraphs are utilized from time to time to assist with treatment barriers. House arrest was utilized over the past year for 17 clients. One psychosexual assessment was needed in the past year. Parkside Psychological and a private trauma counselor are utilized for trauma treatment as well as sex offender therapy. Funding for all of these services will continue to be necessary and appropriate moving forward. Community based placements are utilized when interventions in the community fail and continued violations occur. Institutional placements are utilized as a higher level of care and when other community and less restrictive placements have failed. We also consistently use this placement for sex offenders. We have seen an average of 9-16 kids placed over the 5 year trend in community based placements and expect that to continue. Further, in the 5 year trend, 7-14 kids are placed in institutional placements and expect this to continue as well.

- Describe what changes in agency priorities or programs, if any, have contributed to changes in the number of children and youth served or in care and/or the rate at which children are discharged from care.

Children and Youth Services

As stated above, Crawford County Children and Youth Services implemented two strategies, which can be attributed to the factors influencing the trends of Crawford County. Approximately two and a half years ago, Crawford County Children and Youth Services implemented a Placement Reduction Meeting. This team consists of the Deputy Director, both Program Managers, the CASSP coordinator, the CYS Placement Program Specialist, the CYS Program Specialist, the Service Authorization representative, an Ongoing Supervisor and a FGDM Program Specialist. The original purpose of this meeting was to review any child over the age of 13 who is at imminent risk of entering out of home placement. The team reviewed the current circumstances of the case, the safety and risk factors present and reviewed other key case information. The team was responsible to authorize the necessity of out of home placement for the older youth. The meeting was held prior to the placement of the youth. The meeting's main purpose was oversight of placement into congregate care. The meeting converged into critical case review which

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incorporates the component, preventative placements. The additional focus was identified through data collection. The process now includes meetings for every family opened for ongoing services. These initiatives are possible due to three years ago when Crawford County Children and Youth Services created a placement specialist position. The placement specialist position's main job duties surround the placement of children in the least restrictive placement setting and ensuring the Every Student Succeeds Act is adhered. These two strategies have attributed to the decline in the overall monthly number of youth in substitute placement. It should be noted, buy in to these processes took time. However, Caseworkers and supervisors are preparing for the meetings, and the culture of placement as last resort is beginning to adhere.

Juvenile Probation Office

The Crawford County Juvenile Probation Department implemented a placement team and peer to peer meetings several years ago. This procedure has not changed in quite some time, and neither have our priorities. The primary focus of our work is guided by our Youth's Level of Service Assessment. The primary focus of our expectations from our service providers in the community and placement setting is to also focus on the needs identified in the YLS. Our probation officers work very closely with our service providers and placements to ensure this is what is being achieved. It is immediately addressed with our service providers and placement facilities if they are missing any treatment areas at the initial ISP meeting. It is a collaborative process. The Juvenile Court Judges Commission has aligned the Juvenile Justice System Enhancement Strategy framework to have service providers offer evidence-based programming in their contracts with the county and this has been in place since 2010. We don't believe it has a huge impact on the number of kids we service or the rate in which they are discharged. When we have our placement team meetings, we ensure all interventions have been utilized prior to placing a juvenile. We continue to service many children in the community and placement setting, that has not changed. The rate of discharging juveniles from care is dependent upon their progress in treatment and recommendations for treatment needed in the community to successfully transition home.

The Crawford County Juvenile Probation Department uses the Youth Level of Service (YLS) assessment to help guide the probation officer to engage the family and juvenile to appropriately target criminogenic needs through the case planning process. Concerns marked in the Family Circumstances domain and the Substance Abuse domain have often helped probation officers identify the need for services in the home or in the community. The case planning process involves the probation officer, the juvenile, the family, the provider, and the placement facility. The probation officer will share the YLS assessment results with all of the individuals involved in the case planning process. When adequately addressing the top criminogenic needs, better outcomes are more likely. The priority is for the probation officer to ensure the service providers are working on the appropriate YLS domains and targeting the right areas.

When juveniles are treated in the community, the YLS assessment is shared with the service provider to work collaboratively on establishing goals to reduce risks in those identified domains. It is a team approach and family engagement is key with the probation officer and service provider. Priority of the programs is to address the identified needs and help to reduce risk levels.

When interventions fail and violations continue, common practice is to schedule a peer-to-peer or placement team meeting to determine what an appropriate plan of action is, or if

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placement should be considered. Placement decisions are based on the YLS and addressing domains to reduce risk and recidivism rates.

The Trauma Informed Decision Protocol has helped guide our intake department in identifying youth who are in need of trauma services. It allows us to more effectively screen for trauma and identify juveniles needing trauma treatment much earlier in the case progression. The increased trauma needs we have identified have led other community agencies to become more trauma aware and realize the depth of the trauma need in our community is much greater than previously identified. Parkside Psychological Services, for one, has identified that they are in need of getting more therapists trained to provide trauma services and are working to do so.

Evidence-based practices are utilized in the community and the placement setting.

Placement decisions are a last resort when all other interventions in the community have failed and violations continue. The least restrictive options are chosen when discussing appropriate placement recommendations with our placement team. Juvenile and family input is taken into consideration, but the final decision is determined by the placement team. Placements are chosen by how they can adequately address YLS domains in their programs.

When juveniles are discharged from care, a discharge meeting is held with the probation officer and placement facility to determine appropriate discharge recommendations 30 days prior to returning the juvenile to the community. Referrals to service are determined by the team to transition juveniles back home with the hope of success. Juveniles are not returned home until they have successfully completed their programs and usually have a series of successful home passes. The rate of discharging juveniles from care is dependent upon their progress in treatment and recommendations for treatment needed in the community to successfully transition home.

- Provide a description of children/youth placed in congregate care settings.

Children and Youth Services

Individual data for twenty-seven youth was collected. For each youth, the data categories collected were: age, case number, date of most recent removal, lists of placements, caregiver marital status, caretaker family structure, removal reasons (both AFCARS and court ordered), JPO involvement, child's race, child's behavioral health/diagnosis's, LGBTQ, physical disability of child, parental behavioral issues/diagnosis's, services prior to placement and BHRS services offered or being delivered.

There were 27 children who resided within the congregate care setting at some point in time during the 19-20 fiscal year. Seven of these children came from an intact family setting with either a married or unmarried couple but the majority came from a Single parent setting with the single parent being primarily a female. Most of these children had experienced some significant trauma and the records reflect that more often than not either the parent, child or both had some significant MH diagnosis and were involved in a form of MH treatment prior to placement and while in placement. All the children placed were between the ages of 10 and 20 with the majority being 15-18 years old. The most common reasons for removal were child behavior or caregiver inability to cope. Seven of these children were considered shared case with Juvenile Probation and 6 of these shared cases were JPO driven congregate care

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placements. Other demographics to be considered were race and LGBTQ dynamics. Within this group of 26 children, 21 were Caucasian with the other 5 being biracial and 4 of them were identified as LGBTQ youth. Seven of these 26 youth were eventually placed into foster or kinship care that is intended to be permanent while 5 of them were reunified with a parent. The most overwhelming trend that was noted is that unfortunately 14 children have consistently remained in congregate care and will mostly likely age out of the system while still in congregate care.

Children placed in a congregate care type setting exhibited the following behaviors broken out by age range.

Children 9-12	Children 13-15	Children 16-18
Inappropriate Language/ Swearing	Suicide ideations/self-harming	Defiant behaviors/ arguments with caregivers
Physical aggression	Truancy	Lack of CRR homes
Homicidal/suicidal ideations	Drug use	Parent not willing to take child back in home
Mental Health Diagnosis	Drug possession charges/ convictions	Inappropriate sexual comments
Fire setting	Sexual abuse on siblings/ others	Self-harming
RTF recommendation	Lack of foster/kinship home	Truancy
Lack of CRR homes	RTF recommendation	Underage drinking
Truancy	Homicidal ideations	Suicidal ideations
Inability to control anger	Expulsion from school	Sexual abuse on siblings/ others
Drug usage		
Elopement/run away		

Juvenile Probation Office

Currently 10 out of 12 youth in placed in congregate care are Caucasian and all are male. The ages range from 13-19.

We find that many of our youth have suffered trauma in some form or another be it physically, mentally, or sexually.

Crawford County JPO have identified over the past few years an increase in the number of youth with complex needs. These include significant mental health concerns and substance use.

Youth who are placed in congregate care under Juvenile Probation are youth who have shown serious physical aggression toward others and have physically assaulted a peer, a JPO staff, and law enforcement personnel.

Illicit drug and alcohol use whether selling or for self-medication has contributed to some of our youth being placed and in need of treatment.

Many of these youth are in need of healthy coping skills.

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Sex offenders are placed especially for the safety of the community and they receive specific treatment in certain appropriate congregate care settings.

- ❑ Identify the service and treatment needs of the youth counted above with as much specificity as possible.

Children and Youth Services

More often than not the youth placed into the congregate care setting are youth that struggle with ongoing behavioral issues. The most common behavior that is noted is both verbal and physical aggression toward themselves and others. They often lack healthy coping skills and effective communication skills. These youth demonstrate a need for services to address these problem areas. One must also consider the trend that the parents of these youth also are noted to have ongoing MH issues and also struggle with a lack of healthy coping skills and effective communication skills. This makes for a unique dynamic and there appear a lack of available and effective services such as MST and Trauma Certified counselors within the community setting to address the family needs to prevent placement. When the need for placement outside the biological home is identified, there are a lack of trauma trained resource homes willing and capable of managing these behaviors. This then leads to congregate care placements. Within the facilities there are limited services and therapy to address the familial issues and ongoing dynamics within the home of origin that need to be resolved for these children to return home. (Trauma Counseling, timely and intensive family therapy)

Juvenile Probation Office

The juveniles listed above are involved in sex offender treatment, secure sex offender treatment, independent living, drug and alcohol placement, fire setter treatment, Youth Development Center treatment, and finally treatment authorized by the mental health system.

These placement programs additionally offer multiple services including but not limited to mental health treatment with a psychiatrist, group and individual therapy, Thinking for Change, Seeking Safety, Aggression Replacement Therapy, Family Therapy, Trauma, drug and alcohol, independent living services, and equine therapy. A multitude of areas are addressed in these cases.

The sex offenders placed could not be treated in the community due to victims residing in the home and community safety concerns. The one is in secure sex offender treatment and had multiple violations in a less secure sex offender program. One sex offender will be released once he finds appropriate housing.

In some of the cases juveniles were failing out of other treatment programs due to not progressing in treatment, absconding, aggression issues, criminal activity, trauma concerns, and continued criminal activity. One was returned to the community and violations led to re-entry into another program. Safety concerns were also a factor in returning some of these kids home.

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One juvenile sex offender is getting treatment at the ADAPT program and is also receiving educational programming, independent living, family component, ADAPT sex offender treatment, relapse prevention, Eye Movement Desensitization and Reprocessing (EMDR) for trauma, and victim awareness.

One juvenile could not remain clean and had school issues and aggressive issues. Outpatient therapy failed and therefore inpatient was recommended. He is receiving drug and alcohol treatment, Aggression Replacement Training, victim awareness, Thinking for Change, Gun and Violence education program, med management, education, and the family component to be addressed in placement.

One juvenile is receiving treatment at George Junior to include cognitive behavioral therapy (CBT), trauma therapy, reality therapy, med management, education and family counseling. One sex offender is working on the following at Hermitage House IL: education, independent living skills, family, competency, ADAPT treatment and ART.

One juvenile placed at Hermitage House is receiving education, Casey Life skills, family, competency development, prosocial skills, ART and med management.

One sex offender in secure treatment is in sex offender treatment, group therapy, DBT, disclosure and future planning, Independent Living, conflict group, education and personal care.

One fire-setter is receiving treatment to include addressing the fire setting behaviors, family, education, clarity/ownership, self-regulation, victim awareness, peers, drug and alcohol, anger management, CBT, life skills

Two juveniles are currently in Youth Development Center and will receive arise anger management, thinking for change, art, cognitive behavioral health, project toward no drug abuse, forward thinking, family component and education.

The fire-setter had safety concerns and multiple criminal charges as well as a trauma background.

2 Mental health placements were authorized by a psychiatrist and Beacon Behavioral Health Services and are receiving treatment through the mental health system.

There were no real barriers identified to treating these cases in the community, the safety of the community in the majority of these cases was what led to placements and violations of supervision.

Crawford County has multiple community providers that can meet the need of our juveniles, but in these cases, placements were the best and safest options.

☞ The below questions may assist in development of a response:

- *What are the service and treatment needs?*
- *Why can those services and treatment needs not be met in the community?*
- *What barriers exist to accessing service and treatment needs in the community?*

☐ Please describe the county's process related to congregate care placement decisions.

As stated above, Crawford County Children and Youth Services implemented two strategies, which can be attributed to the factors influencing the trends of Crawford County. Approximately two and a half years ago, Crawford County Children and Youth Services implemented a Placement Reduction Meeting. This team consists of the Deputy Director, both Program Managers, the CASSP coordinator, the CYS Placement Program Specialist, the CYS Program Specialist, the Service Authorization representative, an Ongoing Supervisor and a FGDM Program Specialist. The original purpose of this meeting was to

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review any child over the age of 13 who is at imminent risk of entering out of home placement. The team reviewed the current circumstances of the case, the safety and risk factors present and reviewed other key case information. The team was responsible to authorize the necessity of out of home placement for the older youth. The meeting was held prior to the placement of the youth. The meeting's main purpose was oversight of placement into congregate care. The meeting converged into critical case review which incorporates the component, preventative placements. The additional focus was identified through data collection. The process now includes meetings for every family opened for ongoing services. These initiatives are possible due to three years ago when Crawford County Children and Youth Services created a placement specialist position. The placement specialist position's main job duties surround the placement of children in the least restrictive placement setting and ensuring the Every Student Succeeds Act is adhered. These two strategies have attributed to the decline in the overall monthly number of youth in substitute placement. It should be noted, buy in to these processes took time. However, Caseworkers and supervisors are preparing for the meetings, and the culture of placement as last resort is beginning to adhere.

The Crawford County Juvenile Probation Department schedules a placement team meeting when a decision for placement on a juvenile case is being considered. This is typically when violations are occurring and interventions are failing in the community, or if new serious charges are filed. Placement decisions are also considered when a juvenile is not succeeding in a placement or a placement is requesting a juvenile be removed, and other placement options are being considered.

The supervising PO will schedule a team meeting and invite the Chief of Juvenile Probation, the two supervisors of the department, and several probation officers including two intake officers, two line officers, and the after-care officer, who handles most of the juveniles in placement. Some other line probation officers also sit in the meetings from time to time and also provide input. Most of the officers involved in the decision making, and including the two supervisors, have 15-20 years of experience in the field. The aftercare officer has a lot of input along with the line probation officers who deal directly with the placement facilities and are experts in the programs offered. If the juvenile is involved with an outside agency or CYS they are often invited to the meeting as well. The youth and family are not part of the treatment meeting, but their input is taken into consideration when the final decision is made.

The probation officer will give an overview of the case and the concerns that bring the placement consideration or placement move to the table. The team confirms that all least restrictive measures have been considered and all community and evidence-based programming has been utilized. The congregate care placement selection is based on a number of factors, including a history of absconding, the number and seriousness of charges, the need for community protection, and matching the YLS domains with the placement facilities' programming. The decision is based on the discussion of the team and the placement that can best meet the needs of the juvenile in the least restrictive placement. There is usually agreement with the team on a final decision for placement. However, if there is discrepancy, the final decision is made by the Chief of Probation.

☞ The below questions may assist in development of a response:

- *What policies are in place to guide decision making?*
- *Who oversees and is part of the decision?*

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- *Are youth involved in the decision-making? If so, how?*
- *How is the decision reviewed?*

- Describe any practice changes that will be implemented to ensure that the congregate care funding limitation in FFPSA will not result in dependent children entering the juvenile justice system.

No practice changes will be implemented based on funding limitations in FFPSA. Quarterly shared case meetings between JPO and Crawford County Children and Youth Services has contributed to the partnership between the two agencies. The placing agency on shared case youth is decided based on the facts of the case not on funding purposes. This process will not change.

- How has the county adjusted staff ratios and/or resource allocations (both financial and staffing, including vacancies, hiring, turnover, etc.) in response to a change in the population of children and youth needing out-of-home care? Is the county's current resource allocation appropriate to address projected needs?

Crawford County created three additional positions in FY 18/19, an Intake Caseworker 2, Case Aide and an Intake Clerical. The new Intake Caseworker position was approved 8-8-19 and the New Intake Clerical and Case Aide were approved on 04-17-19 but hired in FY 19-20. A full time Fiscal Officer 3 was hired in FY 19-20. Prior to this, a Fiscal Officer position was shared between the county and Crawford County Human Services.

The Intake worker was created for a twofold reason; to offset and reduce the number of intake cases each worker is assigned and for intake caseworkers to take over truancy GPS's. Truancy GPS's prior to the created intake position were assessed by an ongoing caseworker. The ongoing caseworker position remained and was converted to manage cases continued for services only.

The clerical position was created to allow each intake unit, which consists of four caseworkers and one supervisor, to each have an assigned clerical. In the intake department of Crawford County Children and Youth Services, there were three units but only two clerical. Due to the amount of paperwork mandated, two clerical were unable to fulfill the job duties within the allotted hours of work set forth in the union contract and therefore the clerical position was created. The case aide position was created and assigned to the intake unit. This position helps to offset duties such as drug screening in the office, serving court documents, conducting supervised visits and sending faxes.

COVID impacted Crawford County Children and Youth Services both financially and by the ability to rely on FY 19-20 case load data. For approximately two months, Crawford County Children and Youth Services furloughed staff and overtime was decreased due to an administrative order, ordering placement visits to occur through teleservices. This impacted the financial spending of the agency.

Case load data was skewed by COVID. Fiscal year 19-20 Intake GPS referrals (excluding GPS referrals on-going cases) decreased by 14% ($1314/1137=.865$; $1-.865=.135$) and CPS referrals decreased by 13% ($538/468=.869$; $1-.869=.131$) overall in comparison to fiscal year 18/19 data. The decrease in case count correlates to the assumption additional casework

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positions are not needed. However, this is not an accurate depiction of the need within Crawford County Children and Youth Services.

The mathematical equation the state utilizes to calculate the caseworker to caseload ratio does not provide an accurate depiction of caseworker/caseload count. This is based on the two FCM positions, three intake screeners, a supervisor position who does not supervise caseworkers and the 72% turnover rate in caseworker positions. Three of the CW 2 positions are solely screener positions who do not carry a caseload. Two ongoing positions are Family Case Managers (FCM) who provide both CYS and Blended Case Management services. The two FCM positions are to carry no more than 8 cases. It should also be noted, there are eight CYS supervisors, but one supervisor is categorized as the training supervisor. This position does not supervise any caseworkers. New hires are not able to carry a caseload until module 4 safety assessment is completed. The expectation of new hires is to gradually increase their caseload size based on the completion of Foundations and on the new hire's ability to provide case management services.

INTAKE Caseloads FY 19-20

INTAKE Caseloads 18-19

Total Cases FY 19/20	Average Case-load size	Total Case-Worker Count	1:15 Ratio (based on current hire)	1:15 ratio (based on full complement)	Total Cases 18/19	Average Case size	Total CW	1:15 Ratio (based on current hire)	1:15 ratio (Based on full complement)
151	15.1	10	2	0	145	14.5	10	1	0
163	18.1	9	4	0	167	16.7	10	2	0
178	19.8	9	5	0	181	18.1	10	3	1
183	22.9	8	5	1	191	19.1	10	4	1
191	11	11	3	1	198	19.8	10	4	2
191	11	11	5	1	160	14.54545	11	2	0
196	14	12	3	2	169	15.36364	11	3	0
186	16.9	11	3	1	146	14.6	10	2	0
182	16.5	11	2	1	162	18	9	3	0
145	13.9	11	1	0	180	20	9	4	0
116	10.5	11	0	0	172	19.11111	9	3	0

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151	13.7	11	1	0	184	16.72727	11	3	1
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Cases pulled the 21st of every month

Intake has 12 caseworkers and three screeners (classified as caseworkers)

1:15 ratio based on current hire and present caseload

number calculated for additional caseworkers based on CW's hired at time of data pull and adding any cases in a caseload over 15.

1:15 ratio based on full compliment

Number calculated for additional caseworkers based on caseloads of 15 divided into total case count pulled on the 21st day of each month.

Case carrying supervisors not included in Caseworker count but cases supervisors were carrying were counted in overall case count

ONGOING Case load FY 19-20

ONGOING case load FY 18-19

Total Cases FY 19-20	Average Caseload size	Total CW	1:15 ratio (based on current hire)	1:15 ratio (based on full complement)	Total open cases FY 18-19	Average caseload	Total # of CW	1:15 ratio (based on current hire)	1:15 ratio (based on full compliment)
135	7.9	17	0	0	153	9.56	15	0	0
135	7.9	17	0	0	147	9.19	15	0	0
137	8.8	16	0	0	141	9.4	14	0	0
142	8.4	17	1	0	134	7.44	17	0	0
132	8.3	16	0	0	127	7.06	16	0	0
122	7.6	16	0	0	132	7.33	16	0	0
127	9.1	14	0	0	130	7.22	16	0	0
128	8.5	15	0	0	123	7.24	14	0	0
131	9.4	14	0	0	126	7.41	14	0	0
138	9.9	14	0	0	131	8.73	13	0	0
137	8.6	16	0	0	133	8.87	12	0	0
135	9	15	0	0	136	8.5	13	0	0

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Cases pulled the 21st of every month
Ongoing has 17 caseworkers

1:15 ratio based on current hire and present caseload
number calculated for additional caseworkers based on CW's hired at time of data pull and adding
any cases in a caseload over 15.

1:15 ratio based on full compliment
Number calculated for additional caseworkers based on caseloads of 15 divided into total case count
pulled on the 21st day of each month.

Case carrying supervisors not included in Caseworker count but cases supervisors were
carrying were counted in overall case count

Last year, Crawford County Children and Youth Services requested additional caseworker
positions and one supervisor because of the 3130's regulation revisions and based on the
hypothesis of an increase in the number of children and youth remaining in care due to the
length of treatment for substance use/abuse. This request was denied. Crawford County
Children and Youth Services is currently allocated 35.54 CW 2 & 3 positions. Based on a time
study Crawford County Children and Youth Services currently has 34.28 CW 2 & 3 staff allowing
one Caseworker position to be created.

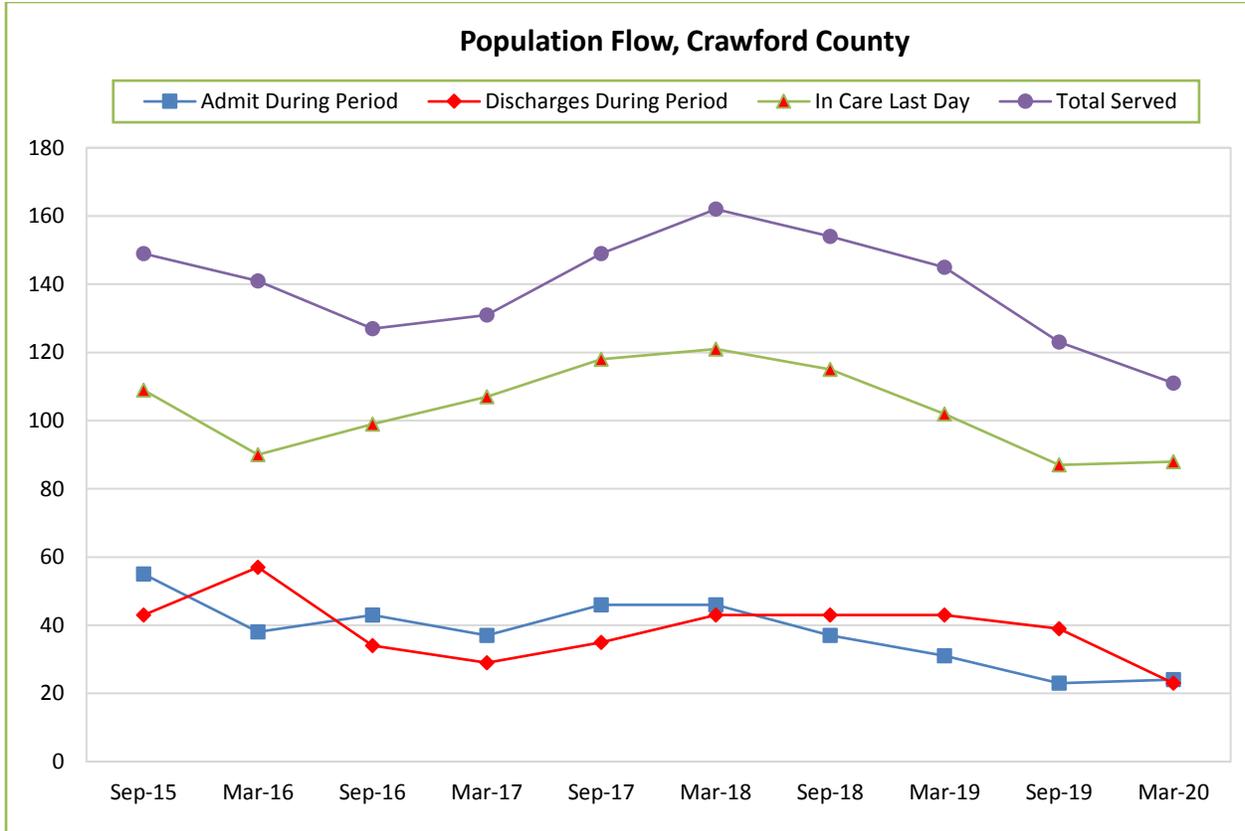
Crawford County Children and Youth Services is projecting an increase in the number of intake
referrals and the number of cases being served by the ongoing Children and Youth Services
department in FY 21-22 as FY 19-20 was an anomaly due to COVID. Crawford County
Children and Youth Services is requesting in addition to the one extra CW position, three
additional Caseworker 2 positions paid at a Caseworker 3 level and one supervisor. This allows
the agency the flexibility to hire three intake caseworkers (caseworker 2's paid as a caseworker
three) and a supervisor to oversee them. The other caseworker 2 will become a floating
caseworker position utilized as a mentor. As turnover occurs, the floating caseworker will
handle a small caseload, mentor new staff and transfer the caseload to the new worker when
the new worker has been trained. This position is needed as this agency was not in full
complement status during the last fiscal year or the year before. The justification for the
additional positions is based on last years Needs Based submission and the charts provided
within that Needs Based submission.

2-3a Population Flow

Insert the Population Flow Chart

Click to Paste Chart

Crawford County

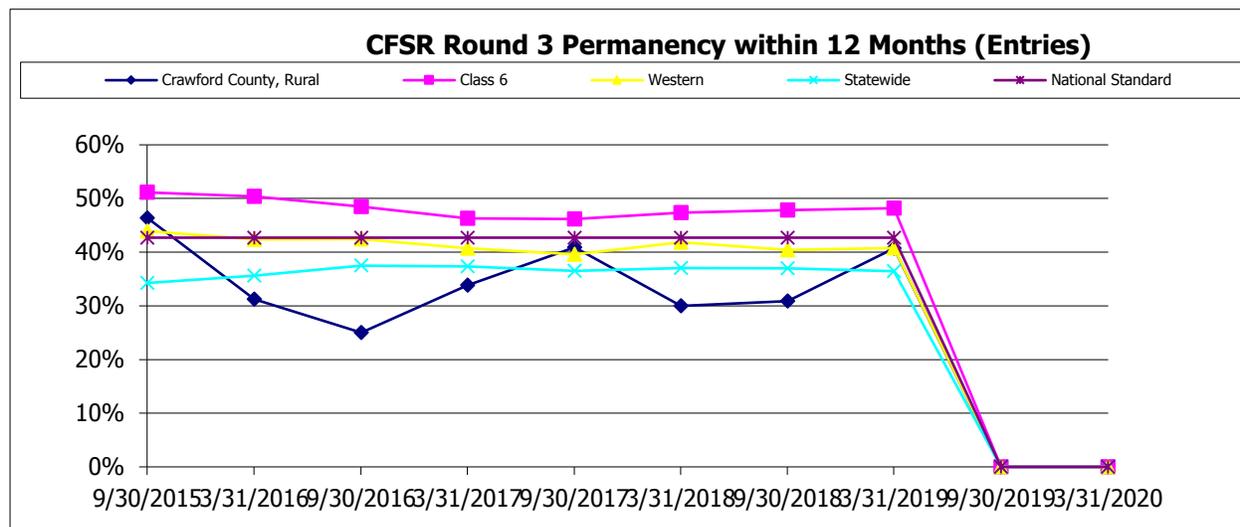


Crawford County

2-3b Permanency in 12 Months (Entry)

Insert the Permanency in 12 Months (Entry) Chart

Click to Paste Chart



	9/30/15	3/31/16	9/30/16	3/31/17	9/30/17	3/31/18	9/30/18	3/31/19	9/30/19	3/31/20
Crawford County, Rural	46%	31%	25%	34%	41%	30%	31%	41%	*	*
Class 6	51%	50%	48%	46%	46%	47%	48%	48%	*	*
Western	44%	42%	42%	41%	40%	42%	40%	41%	*	*
Statewide	34%	36%	37%	37%	36%	37%	37%	36%	*	*
National Standard	43%	43%	43%	43%	43%	43%	43%	43%	*	*

This indicator reports on the percentage of children and youth who enter care in a 12-month period and discharged to permanency within 12 months of entering care. The national performance standard is 40.5%. A higher performance of the measure is desirable in this indicator.

Does the county meet or exceed the national performance standard?

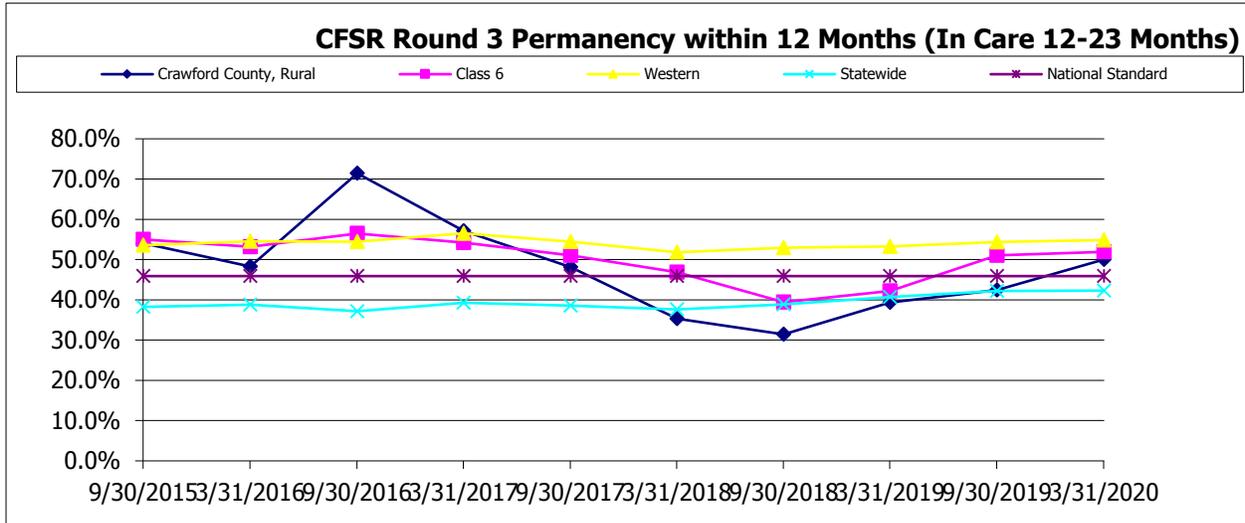
Crawford County has met the National Standard in September of 2015, September of 2017 and March of 2019.

Crawford County

2-3c. Permanency in 12 Months (in care 12-23 months)

Insert the Permanency in 12 Months (in care 12-23 months) Chart

Click to Paste Chart



	9/30/15	3/31/16	9/30/16	3/31/17	9/30/17	3/31/18	9/30/18	3/31/19	9/30/19	3/31/20
Crawford County, Rural	54.1 %	48.3 %	71.4 %	57.1 %	48.1 %	35.3 %	31.4 %	39.4 %	42.4 %	50.0 %
Class 6	55.0 %	53.2 %	56.5 %	54.2 %	51.0 %	46.9 %	39.4 %	42.2 %	51.0 %	51.9 %
Western	53.6 %	54.5 %	54.4 %	56.5 %	54.5 %	51.8 %	53.0 %	53.3 %	54.4 %	54.9 %
Statewide	38.2 %	38.8 %	37.2 %	39.3 %	38.6 %	37.6 %	38.8 %	40.7 %	42.2 %	42.3 %
National Standard	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %	45.9 %

This indicator measures the percent of children and youth in care continuously between 12 and 23 months that discharged within 12 months of the first day in care. The national performance standard is 43.6%. A higher percentage is desirable in this indicator.

Does the county meet or exceed the national performance standard?

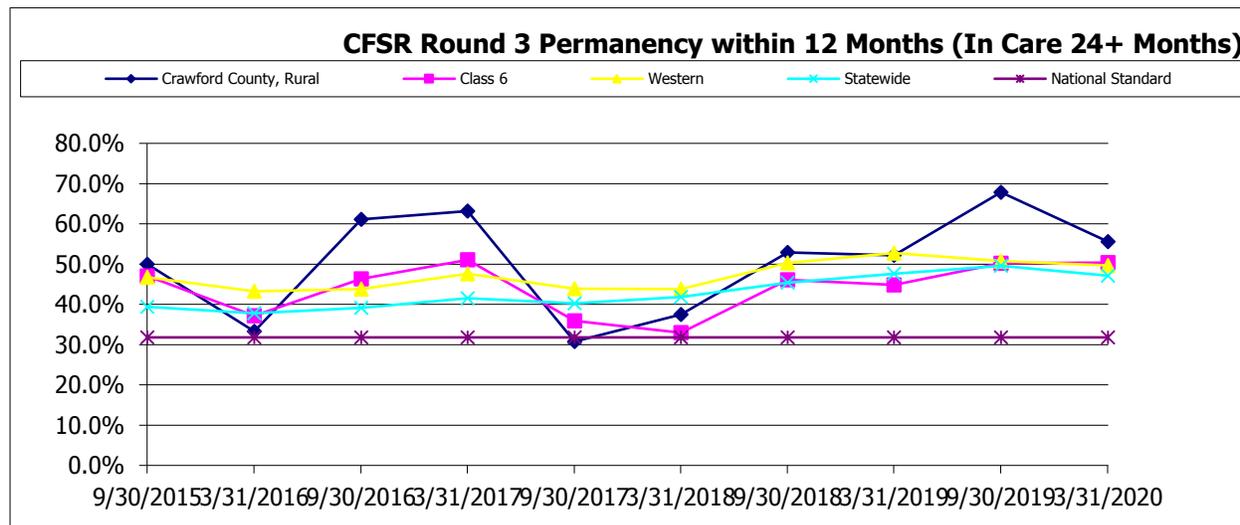
Crawford County met the National Standard between September 2015 to September 2017 and again in March of 2020.

Crawford County

2-3d Permanency in 12 Months (in care 24 Months)

Insert Permanency in 12 Months (in care 24 Months) Chart

Click to Paste Chart



	9/30/15	3/31/16	9/30/16	3/31/17	9/30/17	3/31/18	9/30/18	3/31/19	9/30/19	3/31/20
Crawford County, Rural	50.0 %	33.3 %	61.1 %	63.2 %	30.8 %	37.5 %	52.9 %	52.2 %	67.9 %	55.6 %
Class 6	47.1 %	37.2 %	46.3 %	51.1 %	35.9 %	33.0 %	46.1 %	44.9 %	50.2 %	50.3 %
Western	46.8 %	43.2 %	43.8 %	47.6 %	43.9 %	43.8 %	50.3 %	52.8 %	50.8 %	49.7 %
Statewide	39.4 %	37.8 %	39.2 %	41.5 %	40.3 %	41.9 %	45.4 %	47.6 %	49.6 %	47.1 %
National Standard	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %	31.8 %

This indicator measures the percent of children who had been in care continuously for 24 months or more discharged to permanency within 12 months of the first day in care. The national performance standard is 30.3%. A higher percentage is desirable in this indicator.

Does the county meet or exceed the national performance standard?

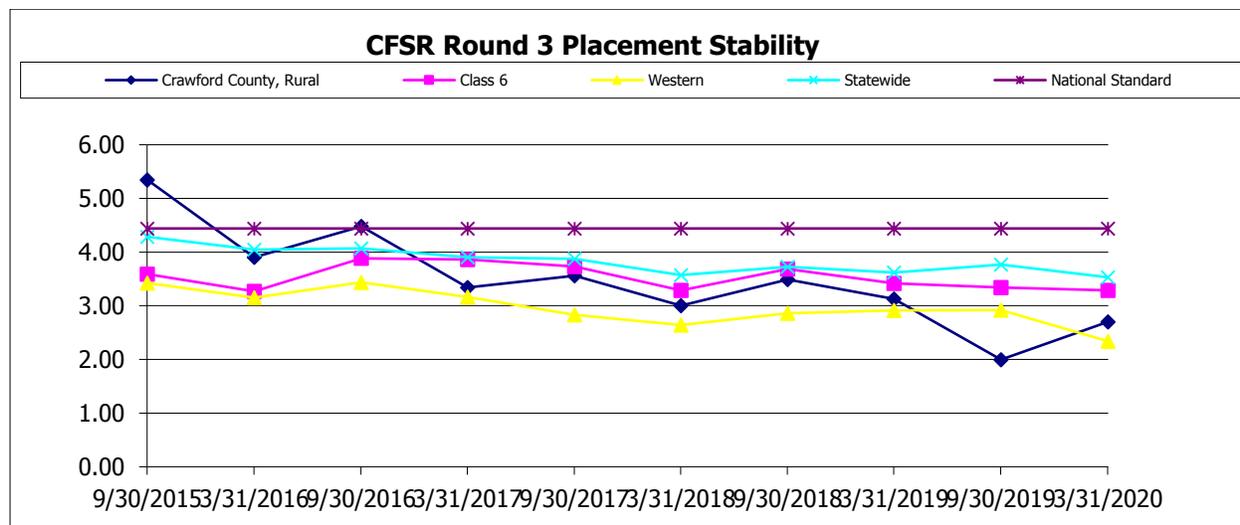
Crawford County has met the National Standard since September of 2015.

2-3e Placement Stability (Moves/1000 days in care)

Crawford County

Insert the Placement Stability (Moves/1000 days in care) Chart

Click to Paste Chart



	9/30/15	3/31/16	9/30/16	3/31/17	9/30/17	3/31/18	9/30/18	3/31/19	9/30/19	3/31/20
Crawford County, Rural	5.35	3.90	4.48	3.34	3.56	3.00	3.49	3.13	2.00	2.70
Class 6	3.59	3.27	3.88	3.86	3.73	3.29	3.68	3.42	3.34	3.29
Western	3.42	3.15	3.44	3.16	2.83	2.64	2.86	2.91	2.92	2.34
Statewide	4.29	4.05	4.07	3.90	3.88	3.57	3.73	3.62	3.77	3.53
National Standard	4.44	4.44	4.44	4.44	4.44	4.44	4.44	4.44	4.44	4.44

This indicator measures the rate of placement moves per 1,000 days of foster care for children and youth who enter care. The national performance standard is 4.12 moves. A lower number of moves is desirable in this indicator.

Does the county have less placement moves than the national performance standard?

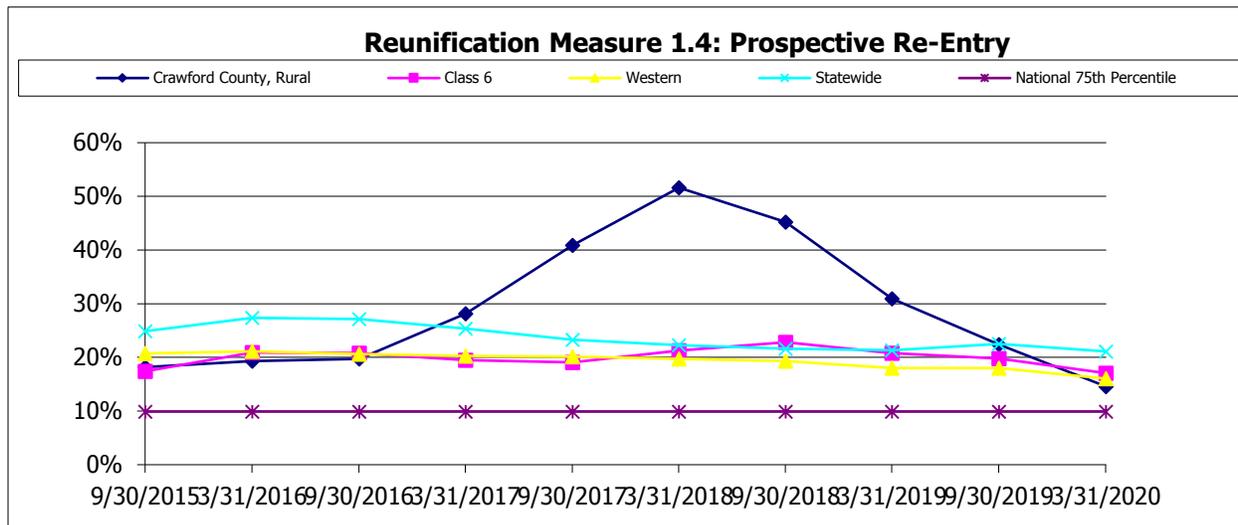
Crawford County has met the Nation Standard since March of 2016.

2-3f Re-entry (in 12 Months)

Insert the Re-entry (in 12 Months) Chart

Crawford County

Click to Paste Chart



	9/30/15	3/31/16	9/30/16	3/31/17	9/30/17	3/31/18	9/30/18	3/31/19	9/30/19	3/31/20
Crawford County, Rural	18%	19%	20%	28%	41%	52%	45%	31%	22%	15%
Class 6	17%	21%	21%	19%	19%	21%	23%	21%	20%	17%
Western	21%	21%	21%	20%	20%	20%	19%	18%	18%	16%
Statewide	25%	27%	27%	25%	23%	22%	22%	21%	23%	21%
National 75th Percentile	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%

This indicator measures the percent of children and youth who re-enter care within 12 months of discharge to reunification, live with a relative, or guardianship. The national performance standard is 8.3%. A lower percentage is desirable in this indicator.

Is the county's re-entry rate less than the national performance standard?

Crawford County does not meet the National Standard for Re-entry.

2-4 Program Improvement Strategies

Crawford County

Utilizing the analysis of practice performance, service levels and service trends, counties must identify areas for practice enhancement and strategies for outcome improvement. For FY 2021-22, counties will fully evaluate their performance in achieving permanency and stability for children and youth who enter placement. The analysis of current practices and services toward meeting the national performance standard for timeliness to permanence, re-entry and stability in placement will identify areas in which targeted program improvement is warranted. This analysis will also help to identify areas of technical assistance needed at the county level to address challenges identified. In addition, the areas of technical assistance identified on the county level across all counties in the commonwealth will help to identify areas that need addressed through a statewide focus. As part of the analysis, counties should take a holistic view of the data available to them, including information in the data packages provided, county-specific data, general indicators, etc.

As part of the data packages, counties were also provided data regarding:

- re-entry and reunification for dependent children and youth only (no SCR);
- children whose placement stay was 30 days or less;
- the number of children entering foster care for the first time who were in previous adoptions; and
- removal reasons for children and youth in placement.

Counties that do not meet or exceed national performance standard must identify program improvement strategies based on their analysis. It is recognized that all counties have a continual focus on improving practice toward improved outcomes for the children, youth and families serviced; as such, counties that meet/exceed the national performance standards are not exempt from this section and must identify their program improvement strategies. Based on the county analysis of the data presented in 2-2a through 2-2i and 2-3a through 2-3f, as well as other county data reviewed, counties should also consider other areas in which program improvement strategies have been identified. The following questions and steps outlined below will assist counties in identifying priority outcomes and identification of practice improvement strategies.

1. DATA ANALYSIS TEAM MEMBERS

List the members of the data analysis team supporting the agency's efforts to make data-informed decisions, including the development of program improvement strategies:

Crawford County Children and Youth Services

One Program Specialist 2, two Program Specialist 1 and Deputy Director collected and organized individual data based off the charts above. An internal meeting was held to identify common themes associated with Re-entry, Permanency for children within 12 months (in care 23-24 months) and Permanency for children within 12 months (in care 24+ months) and Placement stability.

A root cause analysis was completed last year for the exact same areas of improvement. A stakeholder meeting was conducted on July 21, 2020 to review and discuss last year's fish bone/root cause analysis and the program improvement strategies were reviewed and revised. Invited to the meeting were:

Cindy Knight-CASA

Anita Robinson-Crawford County Drug and Alcohol Commission

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Lynn McCumber-CHAPS
Mickey Zelasco-CASSP Coordinator
Jill Kish-Student Assistance Program (SAP)
Michele Johnston-Counseling and Associates counselor
Bonnie Studor-OCYF regional Rep.
Barb Clark-Early Intervention
Rick Schiffer-Mars Home for Youth-supervisor of HiFi Wraparound
Joe Barnhart-System of Care
Heidi Shiderly-Court Administrator
John Boeckman-JPO director
Paul Beebe-FGDM coordinator
Brian Shoop-CYS program manager
Frank Kasper-CYS program manager
Colleen Groger-CYS program specialist
Julie Gunsallus-CYS program specialist
Misty McGowan-Crawford County Human Services Fiscal accountant
Kelly Schwab-Crawford County Human Services Deputy Director
Jason Nesbit-Director of Center for Family Services
Bernice Leonard-Parkside Psychological

2. ANALYSIS

The analysis phase consists of two iterative steps: data analysis and root cause analysis. Initial data analysis can begin the root cause analysis process and the root cause analysis process often requires additional data analysis as one continues to seek more information about why a problem exists.

DATA ANALYSIS

In addition to utilizing the analysis of the national performance standard for timeliness to permanence, re-entry and stability in placement, the county should consider conducting additional analysis to define problems to be addressed.

The county may consider conducting analysis to determine if children and youth who do not achieve permanency in 12 months, do not have placement stability (less than four moves), and do not re-enter care differ from those who DO. The following questions should be considered in this analysis.

- Are there any distinctions in age, gender, race, disabilities, etc.?

Placement stability

Children placed in kinship/foster homes who experience placement instability primarily occur due to personal reasons of the kinship/foster parent, policy violation, child aggression or a placement move to a pre-adoptive home.

Kinship/foster parent personal reasons includes: kinship/foster parent medical concerns, work schedule or mental health of kinship/foster parent. Policy violations include: safety plan violation, child protective services referral, use of physical discipline and substance abuse. Age, race and gender of a child are not distinctive in placement instability.

Placement instability for older children are correlated to lack of family like placement options for older children. Children placed in shelter or congregate

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care tend to remain longer in placement and endure more placement moves. There are very few CRR homes options in the area, limited foster homes willing to take in older youth, and a of lack of kinship/foster home options appropriate for the children who exhibit aggressive or self-harming behaviors.

Permanency within 12 months (entries)

Permanency within 12 months of placement is achieved at a higher rate for children between the ages of 0-5. Another distinction is males achieve permanency at a higher rate than females. Removal reasons do influence the permanency rate. Children removed for neglect, child behavior problems, and parental alcohol abuse achieve permanency at a higher rate than other removal reasons. Children removed for child drug abuse, parental incarceration, and caregiver inability to cope do not achieve permanency within 12 months.

Permanency within 12 months (placed b/t 12-23 months)

For children in placement during this time period, it was discovered that most were between the ages of 9 to 18 years old. There was no distinction between races or gender. It was noticed that most were still in care due to personal reasons of the foster/kinship home. Personal reasons meaning that the kinship/foster home did not understand the issues the children may face since being removed from their home. Some of these reasons include: child's mental health, defiance, delinquent behaviors, physical/verbal aggression, truancy, and running away.

Permanency with 12 months (placed 24+ months)

For Children in placement during this time period it, it was discovered that the ages also ranged from as young as 9 years to as old as 20 years. Most of the children were older. There was no distinction between races or gender. Children that were in placement during this time frame also appeared to be due to the same reasons as the children placed for 12-23 months. However, the children from ages 13 to 20 also were demonstrating some sexually acting out behaviors, homicidal/suicidal ideations, and self-harming behaviors that the foster/kinship homes were not equipped to handle.

Re-entry

The last three fiscal years data was reviewed; this equated to 30 youth. Of the youth who re-entered care, 15 of these children were at age 13 and older. Eleven of the children re-entered care due to child behavior and 7 children in this age bracket returned home with no CYS paid services. For the children who did receive service, the services implemented were MST, Brief Services, YAP truancy, D&A assessment and Mentoring.

Fourteen children who re-entered care were age six and under. Thirteen of these children re-entered care due to parental substance use/abuse impacting the child's safety. Services implemented in the home at time of discharge from placement were Family Behavioral Therapy, Neuropsych evaluation, D&A assessment and anger management services.

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- Are there differences in family structure, family constellation or other family system variables (for example, level of family conflict, parental mental health & substance use)?

Children age 11 and under are typically placed for parental substance use/abuse impacting the safety of a child. Children 12 and older who are placed in a congregate care or shelter setting typically are from a single parent home and are placed due to child behavioral reasons. Parental and child mental health diagnosis is prevalent in the majority of children placed in congregate/shelter care.

Children achieving permanency is impacted by parental substance abuse. For the last three years, this county has been affected by the drug epidemic. It is the number one reason for a family to be opened for ongoing services and one of the main reasons for lack of permanency for youth placed between 12 and 24 months and 24+ months. Recovery in substance use/abuse can be time consuming and has stumbling blocks of relapse and lapses. There is no predetermined amount of time to reach recovery according to NIH (2018). It will require multiple episodes of treatment (NIH, 2018). Recovery in and of itself falls outside of the AFSA timeframes.

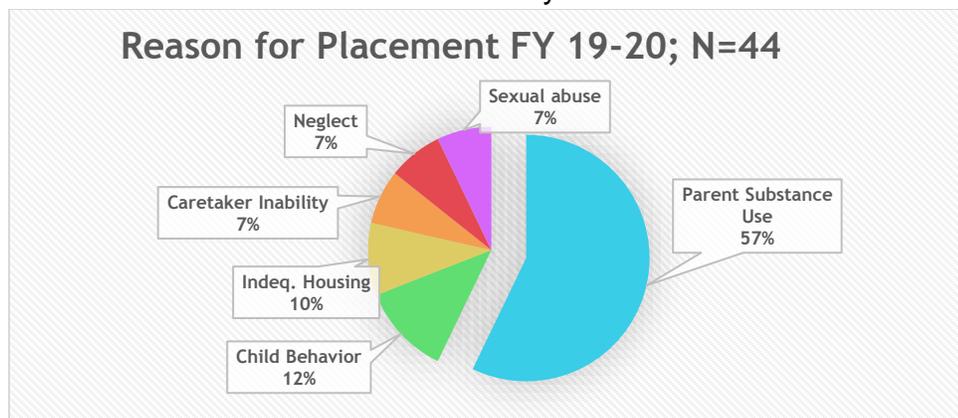
NIH. (January 2018). Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition) How Long Does Drug Addiction Treatment Usually Last. Retrieved from <https://www.drugabuse.gov/publications/principles-drug-addiction-treatment-research-based-guide-third-edition/frequently-asked-questions/how-long-does-drug-addiction-treatment>

- Are there differences in the services and supports provided to the child/youth, family, foster family or placement facility?

While Children and Youth are working with the families, they do have access to more services than those that are not. Children and Youth does have mentoring for families navigating the system that just began. While foster families have some services in place, this is still an area that is lacking. If a child is in placed in foster or kinship care they do have access to CYS services however, this is more geared towards the parents in hopes of returning the child home. When cases move towards adoption, some of those services are closed out and the foster parents/kinship parents do not have support. It was spoken about having a foster/kinship mentor in the future. This may help bridge gaps for these individuals and help keep children in homes for longer periods of time or possibly forever and not resulting in failed adoptions.

- Are there differences in the removal reasons for entry into placement?

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Parental substance use is the primary factor impacting children age 12 and under who are placed in substitute care. Youth age 13-18 are typically placed due to child behavior and parent's inability to care for the youth. A small portion of youth 13-18 are placed due to sexual abuse of others.

- ❑ Are there differences in the initial placement type?

Kinship care is the primary placement for children age 0-11. When kinship is not identified or available, children are placed into foster care. As of writing this narrative, kinship care equates to 51% of total children in placement. Children, age 12-18, who enter into substitute care and are placed in a shelter, typically, remain in a congregate care setting throughout their placement episode and are the children who are not achieving permanency within 12 months (12-23 months in care and 24+ months in care).

Results from this analysis can serve as the starting point for root cause analysis though the team will engage in additional data analysis as the root cause analysis progresses and the team seeks further understanding of why a problem exists.

ROOT CAUSE ANALYSIS

The team will need to use a systematic approach to identify root causes and develop an approach to respond to them. There are various root cause analysis techniques to support the team's efforts. The "5 Whys" is a technique used in the analysis phase of the Six Sigma DMAIC (Define, Measure, Analyze, Improve, Control) methodology whereby repeatedly asking "why" allows the users to differentiate symptoms from the root cause of a problem. The "5 Whys" can be used individually or as a part of the fishbone (also known as the cause and effect or Ishikawa) diagram. The fishbone diagram helps users explore all potential or real causes that result in a single defect or failure. The technique(s) selected is up to the team.

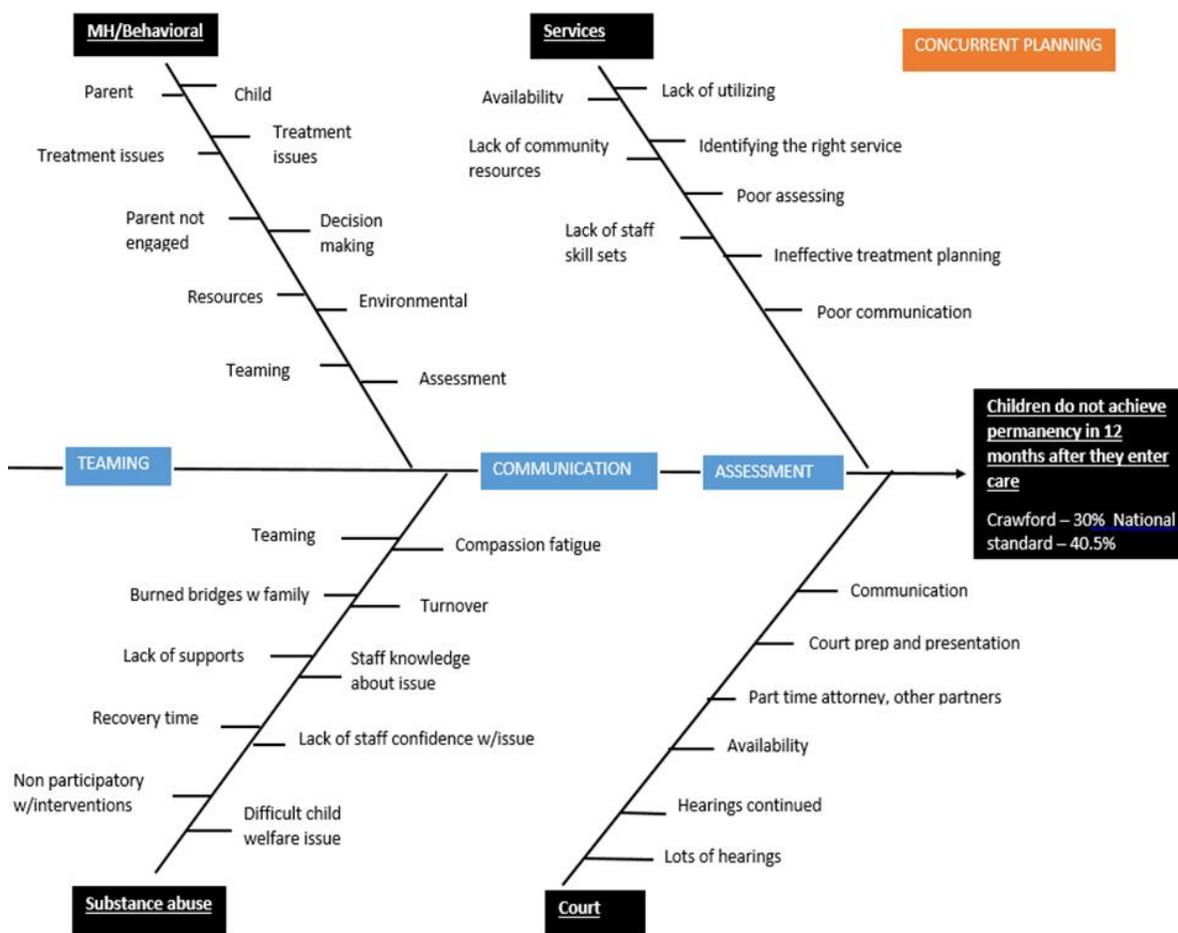
- ❑ Counties should describe how their analysis process progressed, including what data was reviewed, how the data was analyzed, and resulting findings as well as the identified root causes.

Crawford County utilized the HZA/PCG CFSR indicator data to review the three strategic areas that the County will work to improve. The team that initially worked on the root cause analysis and reviewed placement tracking data

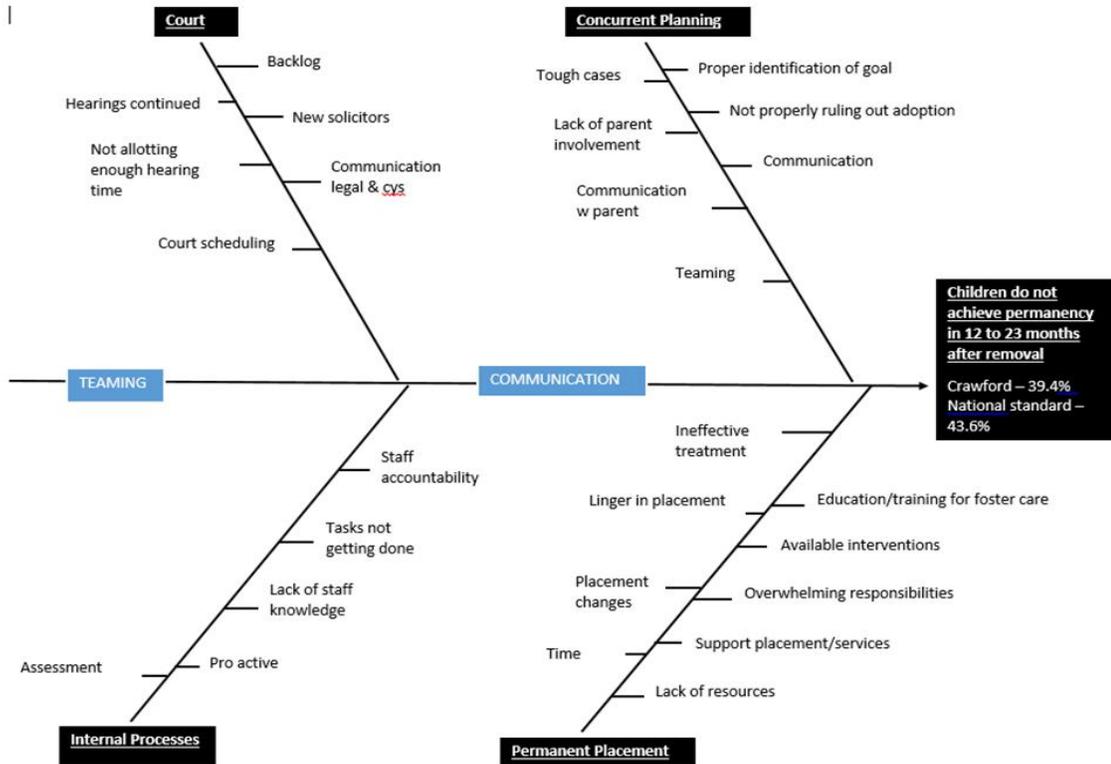
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completed monthly by the placement program specialist. The data captured in the monthly reporting includes the number of children in each placement setting (AFCARS reporting data), the number of children who enter out of home care which includes the removal reasons, total exits from out of home placement and the total re-entries for each month. The placement lists are broken down even further to include a list of names for each child in placement for the month and then includes all the indicators previously mentioned.

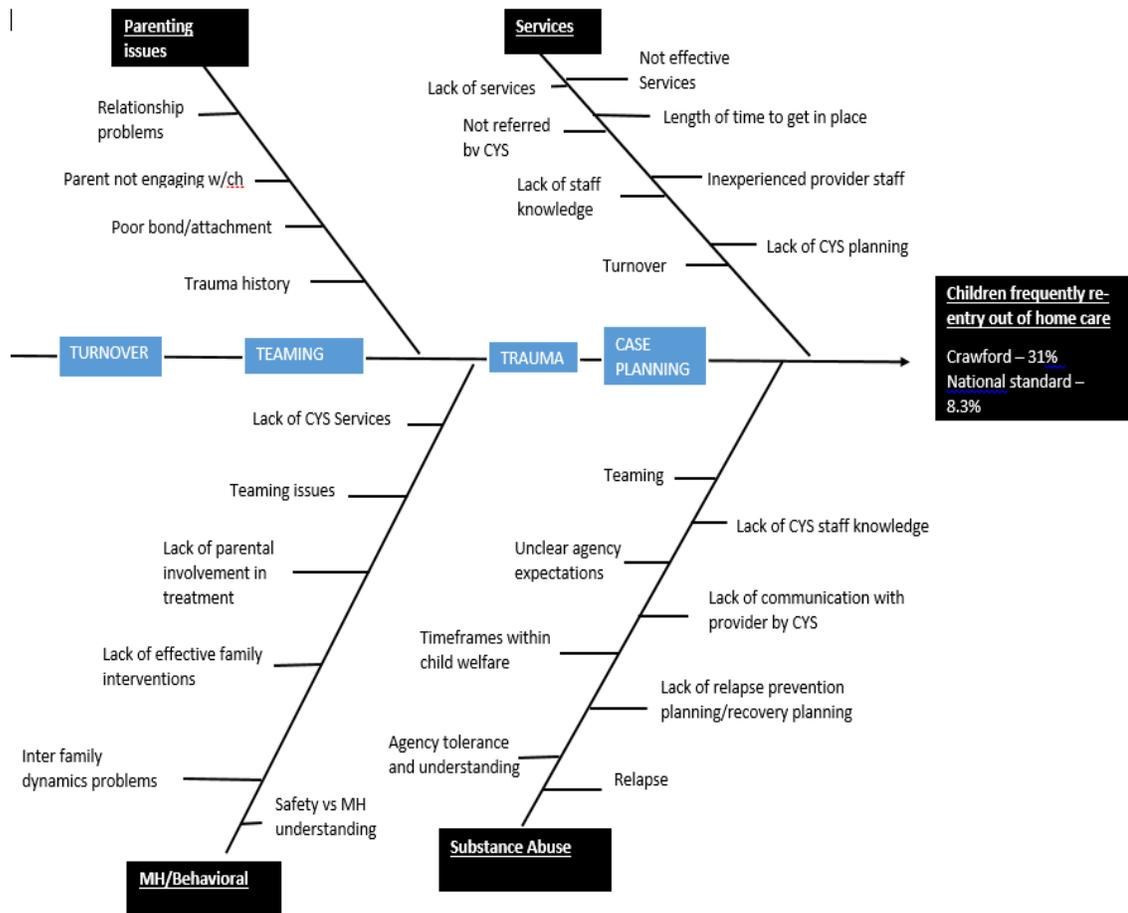
The data analysis team had anecdotal information for many of the children and instances that regarded placement and also re-entry. The team reviewed the three indicators and broke down each indicator into 4 major categories for each problem area. The team then reviewed and discussed each major category. The agreed last year's root cause analysis is consistent with the current data.



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3. PROGRAM IMPROVEMENT STRATEGIES AND ACTION STEPS TO BE IMPLEMENTED AND MONITORED:

Copy and complete the table below as needed to describe the strategies the county will implement to achieve each desired outcome related to the root causes identified above. Provide rationale for how each strategy will contribute to the achievement of each outcome. Several strategies may be identified for each outcome. Communication with staff and partners should be considered critical action steps, as should the analysis of county and provider capacities in implementing change.

Outcome #:

Related performance measures, if applicable:

Strategy:	Children achieve Permanency within 12 Months (entries) - Reunification
Action Steps with Timeframes (may be several):	1. The County will train staff and CSR providers in the Family Finding model. <u>Timeframe:</u> Spring 2021

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	<p>2. A policy and procedure will be created for the process to serve parents for court proceedings. <u>Timeframe:</u> December 2020.</p> <p>3. The current permanency meeting agenda will be enhanced to have the team review timeframes of court hearings, witness time and preparation. <u>Timeframe:</u> January 2021.</p> <p>4. The county will request through the NBPB FY 21-22 in the PAPP or the evidenced based program budget excel sheet, a program to support and provide service to kinship/foster families by giving caregivers effective tools for dealing with their child's externalizing and other behavioral and emotional problems including trauma and to support them in the implementation of those tools <u>Timeframe:</u> August 2020</p> <p>5. The county will implement the service to support kinship/foster homes who accept teenage youth. <u>Timeframe:</u> October 2021</p>
<p>Indicators/Benchmarks (how progress will be measured):</p>	<p>Measures will be reviewed annually through HZA needs based data.</p> <p>A 5% increase in teenage youth accepted into kinship/foster homes</p>
<p>Evidence of Completion:</p>	<p>Approved policy for serving parents/acknowledgment sign off form from staff.</p> <p>Permanency meeting agenda revised</p> <p>Staff and CSR training certificate for family finding training</p> <p>Final allocation of funding for a service to provide support to kinship/foster care who accept teenage youth.</p> <p>Approved contract for program supporting teenage kinship/foster homes.</p>
<p>Resources Needed (financial, staff, technical assistance, etc.):</p>	<p>CWRC Family Finding Training Approved funding allocation for kinship/foster home program</p>
<p>Current Status:</p>	
<p>Monitoring Plan:</p>	<p>Tracking will be created for permanency meetings and will be reviewed at monthly supervision between the caseworker and supervisor.</p>

Outcome #:

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Strategy:	Reducing Re-Entry – Reducing the number of children who re-enter out of home care after a reunification.
Action Steps with Timeframes (may be several):	<ol style="list-style-type: none"> 1. If a placement of a child becomes necessary, the case will be reviewed by the County’s placement reduction team. <u>Timeframe:</u> ongoing. 2. Family team meetings will be offered to families 30 days prior to the child returning home on a trial home visit. <u>Timeframes:</u> December 2020 3. Family team meetings will include Drug and Alcohol providers and the parents/caregivers D&A relapse plan in circumstances which substance use has been identified. <u>Timeframe:</u> January 2021 4. A 14 calendar day “check in” meeting will occur when a child is on a trial home visit to monitor any plans and services and adjust to any new identified needs of the family and youth. <u>Timeframe:</u> January 2021 5. The County will invite cross system partners to include providers not funded by CYS who are involved with the family to the placement reduction team meetings. <u>Timeframe:</u> September ongoing.
Indicators/Benchmarks (how progress will be measured):	<p>Measures will be reviewed annually through HZA needs based data.</p> <p>Target – reduction to 10 to 15%</p>
Evidence of Completion:	<p>Case notes dictating family team meetings</p> <p>Increased attendance to placement reduction meeting by providers</p>
Resources Needed (financial, staff, technical assistance, etc.):	<p>Allocated CYS funding for a certified recovery specialist through Crawford County Drug and Alcohol Executive Commission.</p>
Current Status:	
Monitoring Plan:	<p>Data will be reviewed at the quarterly drug and alcohol meeting with Crawford County Drug and Alcohol Executive Commission.</p> <p>Data will be reviewed at the monthly program specialist, supervisor and administration meeting.</p> <p>The ongoing program manager will review with the ongoing supervisor’s cases that would be discussed at the placement reduction meeting.</p>

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Outcome #:

<p>Strategy:</p>	<p>Children achieve Permanency within 12 Months (in care 24+ months) - Reunification</p>
<p>Action Steps with Timeframes (may be several):</p>	<ol style="list-style-type: none"> 1. The County will utilize Permanency Round Tables (PRT) which will occur ongoing. <u>Timeframe:</u> County already involved in initiative, anticipated ongoing participation for foreseeable future. 2. The County will train staff and CSR providers in the Family Finding model. <u>Timeframe:</u> Spring 2021 3. The current permanency meeting agenda will be enhanced to have the team review timeframes of court hearings, witness time and preparation. <u>Timeframe:</u> January 2021. 4. The county will request through the NBPB FY 21-22 in the PAPP or the evidenced based program budget excel sheet, a program to support and provide service to kinship/foster families by giving caregivers effective tools for dealing with their child's externalizing and other behavioral and emotional problems including trauma and to support them in the implementation of those tools <u>Timeframe:</u> August 2020 5. The county will implement the service to support kinship/foster homes who accept teenage youth. <u>Timeframe:</u> October 2021 6. The county will utilize the newly created foster home through Bethesda Children's Home for children with complex trauma. <u>Timeframe:</u> September 2020
<p>Indicators/Benchmarks (how progress will be measured):</p>	<p>Measures will be reviewed annually through HZA needs based data.</p> <p>Permanency Round Table data will be reviewed by County staff and the PRT core team when the data becomes available.</p> <p>A 5% increase in teenage youth accepted into kinship/foster homes</p> <p>A 10% increase in permanency for children in placement within 12 months (In care 24+ months)</p>
<p>Evidence of Completion:</p>	<p>Permanency meeting agenda revised</p> <p>Staff and CSR training certificate for family finding training</p>

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	<p>Final allocation of funding for a service to provide support to kinship/foster care who accept teenage youth.</p> <p>Approved contract for program supporting teenage kinship/foster homes.</p> <p>Approved contract with Bethesda Children’s home new foster home.</p>
Resources Needed (financial, staff, technical assistance, etc.):	<p>CWRC Family Finding Training</p> <p>Approved funding allocation for kinship/foster home program</p>
Current Status:	
Monitoring Plan:	<p>Monitored through the monthly permanency round tables and the core permanency round table teams.</p> <p>Tracking will be created for permanency meetings and will be reviewed at monthly supervision between the caseworker and supervisor.</p> <p>Hornsby Zeller data will be reviewed with staff bi-annually.</p>

For Program Improvement Areas that were identified in the FY 2020-21 NBPB Submissions, please review them and incorporate the ones that fit with one or more of the outcomes identified above. For those that do not fit, complete a new template section(s). This approach encourages development of a single plan which encompasses all your improvement efforts.

Section 3: Administration

3-1a. Employee Benefit Detail

- Submit a detailed description of the county’s employee benefit package for FY 2019-20. Include a description of each benefit included in the package and the methodology for calculating benefit costs.

Employee fringe benefits in Crawford County consist of FICA @ 7.65% of wage, life insurance at a cost of 11 cents per \$1,000 (Union \$20,000 – Non-Union \$20,000 – Department Head \$25,000), and medical insurance benefit is individual \$738.31 per month and family \$1,728.21 per month.

3-1b. Organizational Changes

- Note any changes to the county’s organizational chart.

One fiscal tech was reclassified to an Accountant and an intake CW 2 paid as a 3 was created and hired.

3-1c. Complement

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- Describe what steps the agency is taking to promote the hiring of staff regardless of whether staff are hired to fill vacancies or for newly created positions.

Crawford County Human Services, Children and Youth Services (CYS) promotes the hiring of staff through a variety of ways. CYS formed a partnership with Edinboro University and takes advantage of being a teaching site for interns. We have consistently had interns from the CWEB program as well as social work majors who are not in these programs. The majority of interns who have their final internship at this agency are hired.

The agency also participates in job fairs in efforts to recruit staff. This activity has not been as successful as anticipated.

A flyer was created to encourage community members to apply for a job at the agency. The flyer includes the civil service steps.

- Describe the agency's strategies to address recruitment and retention concerns.

Turnover remains a challenge as we have experienced a lot of turnover this past year. A monthly meeting called Agency Improvement Meetings (AIM) was created to assist in identifying and finding solutions to concerns brought up by caseworkers. This meeting is challenged with resolving some of the concerns within the agency. The members create community activities as well as creating opportunities for employees to give back to the community through donations and such. They also schedule agency luncheons at different places to eat within our community. This gives new employees an opportunity to meet others from different departments.

In addition, onboarding and orientation is an ongoing evolving project. We continue to improve in this area and work with the trainings offered by the University of Pittsburgh Child Welfare Resource Center as well as providing in-house trainings. We often acclimate the new caseworker to the culture and provide social integration while they are attending trainings and given tools to perform casework duties. They often experience many aspects of child welfare prior to being assigned a case. Court appears to be a very scary part of caseworker responsibilities. Therefore, we give the caseworkers additional training specifically to reduce courtroom stress experienced by caseworkers. A case weighing system was put in place, rating each case so that they can be distributed evenly as possible to the caseworkers. Each caseworker attends the caseworker Safety simulation training offered by the University of Pittsburgh's Child Welfare Resource Center. This training not only makes the caseworkers more mindful of their field experiences but also gives them safety tips for various situations.

Administration and supervisors recognize, now more than ever, the trauma that the child welfare professional experiences. In response to this we offer an Employee Assistance Program and we encourage caseworkers to utilize this program. We also train caseworkers on vicarious trauma and the cost of empathy and provide them with wellness activities, as well as a relaxation room for debriefing and separation. There is a vicarious trauma committee in place who provides guidance in this area. There is opportunity for caseworkers to discuss their own trauma and traumatic aspects of the job with a licensed psychologist once a week. Annually we celebrate caseworker appreciation, and the director reads the governors proclamation and recognition is given to the caseworkers on this day. In addition, we offer caseworkers the opportunity to attend the CWEL Program and send at least one caseworker per year. We do offer flexible hours for the caseworkers and offer internal mobility as well as promotional possibilities. There is a safety committee to address

Crawford County

safety concerns in the office and field. All the caseworkers have technology such as laptops and smart phones to help them to make their job easier and more efficient. While paperwork reduction was being analyzed here, the state did decrease and made changes to the Safety assessment intervals.

Each fall we take on two social work students to complete an internship with us. This has been very helpful to the hiring process and training new staff for a year to prepare to be child welfare caseworkers. During this time, the student also has a chance to determine if this kind of work is what they want to do.

We have made some modifications to the on-call procedures; the caseworker is now on-call for only two days in a row and if they are on-call on Sunday it is only one day. This procedure was put into place rather than a caseworker being on call the evenings Monday-Thursday or Friday- Sunday. This appears to be a better plan for the caseworkers. In addition, a late worker position was created to deal with the end of the day calls. This is on a rotation of the intake caseworkers. This was developed to prevent the on-call caseworker from becoming overwhelmed. Another improvement was the initiation of Critical Case Review, which helps a caseworker with case direction. The Critical Case Review team is made up of professional members from different departments and have various backgrounds.

This county is required to hire by civil service rules and from the civil service testing results. This may create some barriers for us as to hiring the right person for the job. In an effort to promote the civil service test, agency members attend job fairs and make presentations to college students. Civil Service made adjustments during the year, which made this process a little rocky. They changed the website, which may have caused some confusion. They now also do not require testing, so no one has to go and take a test. Rather they are now scoring applicants based on their previous experience. Once applicants are made available to the agency for hiring, we are only given three names. The interview questions were modified to make sure the applicant has a good understanding of child welfare.

We began to utilize "stay interviews" to elicit why key employees continue to maintain being employed as a child welfare caseworker. In addition, we would like to find ways to help overworked caseworkers feel valued by recognizing them and giving contingent awards. We are gathering data currently but will analyze the data both qualitative and quantitative.

Section 4: Required & Additional Language

➤ 4-1a. Assurances

The following pages include assurance forms to be completed by counties. These forms are included:

- Assurance of Compliance/Participation
- Documentation of Participation by the Judiciary
- Assurance of Financial Commitment and Participation

The following forms must be signed and submitted in hard copy to:

Office of Children, Youth and Families
Division of County Support
Health and Welfare Building, Room 131

Crawford County

625 Forster Street
P.O. Box 2675
Harrisburg, Pennsylvania 17105-2675

And

Mr. Richard Steele
Juvenile Court Judges' Commission
Pennsylvania Judicial Center
601 Commonwealth Avenue | Suite 9100
Harrisburg, Pennsylvania 17102-0018

**ASSURANCE OF COMPLIANCE/PARTICIPATION FORM
DOCUMENTATION OF PARTICIPATION BY THE JUVENILE COURT**

The Assurance of Compliance/Review Form provided in this bulletin must be signed by the County Executive or a majority of the County Commissioners, the Juvenile Court Judge(s) or his/her designee, the County Human Services Director, the County Children and Youth Administrator, and the County Chief Juvenile Probation Officer, and submitted with the FY 2021-22 Needs-Based Plan and Budget submission.

The Assurance of Compliance/Review Form has two signatory pages. The first page is for the County Human Services Director, the County Children and Youth Administrator, the County Chief Juvenile Probation Officer, and the Juvenile Court Judge(s) or his/her designee. This page must be submitted at the time of the county's implementation plan and needs based plan submissions. The second page is for the signatures of the County Executive or a majority of the County Commissioners. It must be submitted at the time of the county's financial budget submission and must contain the financial commitment of the county.

COUNTY: Crawford County

These assurances are applicable as indicated below.

Fiscal Year 2021-22 Children and Youth Needs-Based Plan and Budget Estimate; and

Fiscal Year 2020-21 Children and Youth Implementation Plan

Note: A separate, signed Assurance of Compliance/Participation form must accompany the Children and Youth Implementation Plan and the Needs-Based Plan and Budget when they are submitted separately. This Assurance of Compliance/Participation form cannot be modified or altered in any manner or the Children and Youth Implementation Plan and the Needs-Based Plan and Budget will not be accepted.

COMMON ASSURANCES

I/We hereby expressly, and as a condition precedent to the receipt of state and federal funds, assure that in compliance with Title VI of the Civil Rights Act of 1964, Section 504 of the Federal Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, the Pennsylvania Human Relations Act of 1955 as amended, and 16 PA Code, Chapter 49 (Contract Compliance Regulations):

1. I/We do not and will not discriminate against any person because of race, color, religious creed, ancestry, national origin, age, sex, sexual orientation, or disability:
 - a. In providing services or employment, or in our relationship with other providers;
 - b. In providing access to services and employment for handicapped individuals.
2. I/We will comply with all regulations promulgated to enforce the statutory provisions against discrimination.

I/We assure that these documents shall constitute the agreement required by Title IV-E of the Social Security Act 42 U.S.C. § 672 (a)(2) for foster care maintenance, adoption assistance, and subsidized permanent legal guardianship payments.

I/We assure:

- The County Children and Youth Agency and Juvenile Probation Office have the responsibility for placement and care of the children for whom Title IV-E foster care maintenance, adoption assistance, and subsidized permanent legal guardianship payments are claimed;
- The County Children and Youth Agency/Juvenile Probation Office will provide each child all the statutory and regulatory protections required under the Title IV-E agency, including permanency hearings, case plans etc.;
- The agreement between the Office of Children, Youth and Families and the County Children and Youth Agency/Juvenile Probation Office shall be binding on both parties; and
- The state Title IV-E agency shall have access to case records, reports, or other informational materials that may be needed to monitor Title IV-E compliance.

I/We understand that any Administration for Children and Families disallowance incurred as a result of county noncompliance with Title IV-E foster care maintenance, adoption assistance, subsidized permanent legal custodianship, or Title IV-E administrative claim requirements will be the responsibility of the county.

I/We assure that all information herein is true to the best of my/our knowledge and belief based on my/our thorough review of the information submitted.

EXECUTIVE ASSURANCES

In addition to the Common Assurances,

I/We assure that I/we have participated in the development of the Plan, agree with the Plan as submitted and that all mandated services if funded by the Plan will be delivered.

I/We assure that these Plans comply with the "Planning and Financial Reimbursement Requirements for County Children and Youth Social Services Programs" as found in 55 PA Code Chapter 3140.

I/We assure that, when approved by the Department of Human Services, the attached Children and Youth Implementation Plan and Needs-Based Plan and Budget, including any new initiatives, additional staff and/or increased services and special grants that are approved, shall be the basis for administration of public child welfare services for all children in need under Article VII of the Public Welfare Code, 62 P.S. § 701 et seq., as amended.

I/We assure that, where possible, the county will cooperate with state efforts to maximize the use of federal funds for the services in this Plan.

I/We assure that all contracts for the provision of services addressed herein will require the providers to comply with Chapter 49 provisions (contract compliance regulations).

I/We assure that expenditure of funds shall be in accordance with these Plans and estimates, and Department of Human Service regulations.

I/We assure that services required by 55 PA Code 3130.34 through 3130.38 will be made available as required by 55 PA Code 3140.17 (b)(2).

I/We assure that the capacity of both the county and the providers has been assessed and it is my/our judgment that it will be adequate to implement the Plan as presented.

I/We assure all Title IV-E foster care maintenance, adoption assistance, and subsidized permanent legal custodianship payment eligibility requirements are met for the specified children, not merely addressed by the agreement.

I/We assure that the County Children and Youth Advisory Committee has participated in the development of this Plan and has reviewed the Plan as submitted.

I/We assure that representatives of the community, providers, and consumers have been given the opportunity to participate in the development of this Plan.

I/We assure that the county programs that affect children (e.g. Mental Health, Intellectual Disabilities, and Drug and Alcohol) have participated in the development and review of this Plan.

I/We understand that the accompanying budget projections are based on estimates and that the amounts may change when the state budget is adopted and final allocations are made.

I/We understand that substantial changes to the Plans subsequent to Departmental approval must be submitted to the Regional Office of Children, Youth and Families for approval.

I/We assures the Plan was made available for public comment prior to submission and that any comments were considered before the Plan was submitted. I/We assure that all new Guardians Ad Litem (GAL) have/will complete the pre-service training prior to being appointed to represent a child. If the GAL has not completed the pre-service training, costs incurred for representation of children by this GAL will not be claimed.

I/We assure that the County Children and Youth Agency is in compliance with all credit reporting agency requirements regarding the secure transmission and use of confidential credit information of children in foster care through electronic access for operation by counties where no agreement exists between the county and credit history agency. This also includes limiting online access to users approved by the Office of Children, Youth and Families for the explicit use of obtaining credit history reports for children in agency foster care.

**COUNTY ASSURANCE OF COMPLIANCE AND PARTICIPATION
DOCUMENTATION OF PARTICIPATION BY THE JUVENILE COURT**

**THE SIGNATURES OF THESE COUNTY OFFICIALS REPRESENTS AN ACKNOWLEDGEMENT OF COUNTY
COMMITMENT TO ADHERE TO THE COMMON AND EXECUTIVE ASSURANCES CONTAINED IN THE
PRECEEDING PARAGRAPHS**

County Human Services Director

_____	_____	_____
Name	Signature	Date

County Children and Youth Administrator

_____	_____	_____
Name	Signature	Date

County Chief Juvenile Probation Officer

_____	_____	_____
Name	Signature	Date

DOCUMENTATION OF PARTICIPATION BY THE JUDICIARY

In addition to the Common Assurances:

I/We assure that I/we had the opportunity to review, comment, and/or participate to the level desired in the development of the Children, Youth and Families' Needs-Based Plan and Budget.

I/We assure that the plan accurately reflects the needs of children and youth served by the juvenile court.

I/We assure that the Juvenile Probation Office has actively participated in the development of the Children, Youth and Families' Needs-Based Plan and Budget.

Judicial Comments:

Juvenile Court Judge(s)/ Designee

_____	_____	_____
Name	Signature	Date

_____	_____	_____
Name	Signature	Date

COUNTY ASSURANCE OF FINANCIAL COMMITMENT AND PARTICIPATION

THE SIGNATURES OF THESE COUNTY OFFICIALS REPRESENTS AN ACKNOWLEDGEMENT OF COUNTY COMMITMENT TO ADHERE TO THE COMMON AND EXECUTIVE ASSURANCES CONTAINED IN THE PRECEEDING PARAGRAPHS AS WELL AS COUNTY COMMITMENT TO PROVIDE THE LOCAL FUNDS SPECIFIED IN THE PLAN AS NECESSARY TO OBTAIN THE MATCHING STATE AND FEDERAL FUNDS BASED ON THE COUNTY'S PROPOSAL. THE LOCAL FUND COMMITMENT AS PROVIDED IN THE COUNTY'S PROPOSAL TOTAL \$ 2,653,422.00.

Signature(s)

County Executive/Mayor

_____	_____	_____
Name	Signature	Date

County Commissioners

_____	_____	_____
Name	Signature	Date

_____	_____	_____
Name	Signature	Date

_____	_____	_____
Name	Signature	Date