Alabama Department of Human Resources'

Child and Family Services Plan (CFSP)

2025 - 2029



State of Alabama
Department of Human Resources
June 30, 2024

Child and Family Services Plan: 2025-2029

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I. General Information

A. STATE AGENCY ADMINISTERING PROGRAM

The Alabama Department of Human Resources (DHR) is designated by the Governor as the Agency to administer the Social Services Block Grant (Title XX), Title IV-B and Title IV-E Programs. DHR administers the IV-B, subpart two, Promoting Safe and Stable Families plan and supervises services provided by the Department and purchased through community service providers.

The Family Services Division (FSD), with oversight from the Deputy Commissioner for Children and Family Services, has primary responsibility for the social service components of the Title IV-E plan and programs that include A) Independent Living Services, B) the Title IV-B plan and programs for children and their families funded through the Social Services Block Grant, and C) the Child Abuse Prevention and Treatment Act (CAPTA). There is additional involvement from other key offices within the Department. Reporting to the Deputy Commissioner of Quality, the Quality Assurance Division (QAD) has a lead role in promoting and ensuring Continuous Quality Improvement (CQI) in DHR's child welfare programs. The Resource Management Division (RMD) is responsible for regulatory and residential licensure functions, procuring/contracting services for the child welfare continuum, utilization review, and family preservation/support services. The population served by DHR includes dependent children, youth, and their families, as well as in-home children, families, and youth receiving prevention and intervention services to ensure safety, permanency, and well-being.

Central to the organizational structure within the Children and Family Services Division and Quality Divisions are two management teams comprised of managers and supervisors from each of the offices in the respective divisions. These two teams of staff members serve as the leadership body of each division and have the responsibility for carrying out the overall vision through ownership of the goals, priorities, and desired outcomes(see organizational chart in the appendix).

B. VISION STATEMENT

The Department of Human Resources (DHR), as the designated Title IVE-B Agency, administers this plan based on the philosophy that children should be protected from abuse and neglect and, whenever possible,

families should be preserved and strengthened to nurture and raise children in safe, healthy, and stable environments. Service interventions are to be based on a set of beliefs about outcome-based practice that is both strengths-based and family focused and underscore the importance of comprehensive assessments and individualized planning on behalf of the children and families that come to the attention of the Department. At the core of these beliefs are the following principles:

- Children belong with their families whenever they can safely live at home
- Child maltreatment is an expression of an underlying, unmet need
- Most parents love their children and want to care for them
- All individuals have worth, deserve respect, and are capable of change
- All children need to experience permanency in their lives; and when children cannot continue to live
 at home, they still need their families as well as meaningful relationships and enduring community
 connections.

The Child Welfare Mission Statement is as follows: "The Alabama Department of Human Resources will help families receive the least disruptive services they need, when they need them, and for only as long as they need them in order to maintain children in - or return them to - a safe, stable home." The state Child and Family Services Plan for abused, neglected, and at-risk children and their families is intended to operationalize beliefs through developing goal-directed services that are individualized and needs-based and designed with the following desired outcomes in mind:

- Treat families as partners in parenting and protecting their children
- Respect parents and their children and focus on the family and on the family's strengths
- Services are matched to meet identified needs and vary in levels of intensity needed to keep children safe and assure their well-being
- Services are coordinated between service provider and agencies to meet the multiple needs of children and their families
- Services are delivered in culturally sensitive ways

- Services are accessible to children and families
- Address systemic barriers to accessing needed services
- Support families through services and to strengthen families so they may safely care for their children.

GUIDING PRINCIPLES AND PRACTICE MODEL

Family Services and Quality Divisions are responsible for developing, operating, monitoring, and sustaining a system of child welfare services in accordance with its goals and principles:

- Children will be protected from abuse and neglect.
- Children will live with their families whenever possible and when that cannot be achieved through the provision of services, children will live near their homes in the least restrictive environment that can meet their needs.
- Children will achieve stability and permanency in their living situations.
- Children will achieve success in school and become stable, gainfully employed adults.

C. <u>COLLABORATION</u>

Alabama DHR continues to incorporate internal and external stakeholders in the Child and Family Service Plan (CFSP) process. All stakeholders are racially diverse and have representation that mimics the state population. The collaborations that are ongoing/planned between the agency and various community partners include the Alabama Judicial & Child Welfare Collaboration Project. The project includes ongoing work around the iCAN project, local and state QA committees, the Alabama Child Welfare Collaborative Initiative, the Alabama Department of Child Abuse & Neglect Prevention, the Alabama Foster/Adoptive Parent Association, and others that are outlined in the CFSP. It is our belief that collaborations lead to better outcomes for children and families as they help address several critical areas of practice, including prevention of child abuse, well-being of children, placement stability and timely achievement of permanency. The Department works with the IL youth, as they participate in panels at both the Judicial and Supervisor's Conferences each year. The Dream Council meet monthly and meet annually with the Commissioner. During these meetings, the youth freely discuss issues and needs that

they see with the child welfare system and ways they feel would improve the quality of services provided. These ideas are used to formulate the 2025-2029 CFSP as well as other projects for the department. Each of our Citizen review panels has a current and former foster youth as a member.

The Department works collaboratively across units and divisions to improve the safety, well-being, and permanency for families and children. The Office of Foster Care, the Office of Independent Living and Recruitment/Home Care Support continues its partnership with the Office of Quality Assurance and the Office of Resource Management around the issues of placement stability and support. This collaboration will assist the Department with obtaining better outcomes.

The Department continues to partner with the Children's Justice Task Force (CJTF). During this reporting period, many trainings were held including Substance Abuse training for agency staff to focus on the complexities of substance use and how to assess for safety in these cases and Family Violence Assessment and Safety in Child Protective Services for DHR staff, law enforcement, and domestic violence shelter staff. CJTF completes a needs survey which is used to develop trainings in partnership with Alabama DHR. The needs survey is used to develop goals and the trainings are included in the CFSP activities.

Alabama's partner agency is The Alabama Department of Child Abuse and Neglect Prevention (ADCANP), a stand-alone state agency created by an Act of the Alabama Legislature in 1983 to address the State's growing problem of child maltreatment. The ADCANP secures resources to fund evidenced-based community programs committed to the prevention of child maltreatment and advocates for children and the strengthening of families. The ADCANP also serves as the state chapter for Prevent Child Abuse America and is the state lead agency for federally funded Community-Based Child Abuse Prevention (CBCAP) programs as part of CAPTA.

Alabama has one federally recognized tribe, the Poarch Band of Creek Indians (PCI) whose office is in Atmore, Alabama. Alabama and the Tribe met face to face on May 7, 2024. During this meeting, the Alabama and Tribe discussed the potential goals and objectives for the upcoming CFSP. We discussed with the Tribe the importance of them having an active role in the provision of feedback and development of goals and

objectives. Alabama's tribal contact is Amanda Montgomery, Family Services Director. The Family Services Director serves as the liaison between the Department and the Tribe to schedule trainings, planned visits, and meetings. All contact persons for the Department and PCI were updated and shared at the most recent face-to-face meeting.

Representatives from PCI serve on the Escambia County Quality Assurance Committee, where they assist in record reviews and offer feedback to the county regarding casework and policy issues. Amanda Montgomery, Family Services Director of PCI, is also on the State QA committee.

The Inter-Agency agreement between the Poarch Band of Creek Indians and the Department remains in place with no changes needed. The agreement details who is responsible for protecting children who are enrolled in the Tribe, who is responsible for providing services to tribal children, and steps to take if tribal children are brought to the attention of DHR. The agreement also details guidelines for court involvement if it becomes necessary.

Alabama continues to be in compliance with ICWA mandates. There is an excellent working relationship between the Tribe and the Department. Alabama has a standalone ICWA policy that details the requirements of working with tribal families and children, which is available to all staff statewide via DHR Family Services policy. If there are changes to ICWA law and/or DHR policy, that information is disseminated to DHR staff statewide. ICWA is also included in the record review tool used by staff from the Office of Quality Assurance so that if any discrepancies are noted, they can be addressed with staff.

The PCI reservation is in Escambia County, which has the most frequent contact with the tribe. Both PCI and Escambia County DHR report having a good working relationship. The county office and PCI share information fluidly between themselves. Both PCI and Escambia County regularly check with one another if information about a family is needed or if verification of enrollment in the tribe is needed. Both agencies can make reports to the other and are able to cooperate in providing services to local families, both enrolled and not enrolled. DHR is also available regularly to answer any child welfare related questions the Tribe may have. Per the agreement between the State and the Tribe, PCI is responsible for providing services to tribal children.

These services include case review, prevention services, and services for children in foster care. If children who are living off the reservation become involved with the Department, the Tribe can assume jurisdiction and provide services as they find necessary. Currently, prevention caseloads for PCI providers are between 10-15 families. PCI can offer any services needed to tribal families and children based on a need. There are no barriers for provided services noted at this time. If there is not a service available on the reservation, then referrals are made to outside agencies. PCI can provide transportation and other services to families and children as well, including financial assistance. New to the reservation since the last submission, the Tribe now has a sober living house that is available for parents who have completed drug/alcohol rehabilitation to assist with adjustment to being home and resuming the parenting role. PCI currently has 5 foster homes and no children in foster care currently. Typically, if a child is removed from a parent, they are placed with relatives, and services are provided as needed. PCI makes every effort to keep children with family rather than placing them in foster care and use the Tribal Court System if needed. The Department has provided PCI with a list of dates and times for Train the Trainer sessions for Trauma Informed Partnering for Safety and Permanence (TIPS) for licensing foster homes. The Tribe also has a preschool and Boys & Girls Club that provide services to children who reside on the reservation and those who are not enrolled. The Boys & Girls Club currently serves anywhere from 300-500 children. Staff on the reservation are required to complete Mandatory Reporter training offered online by the Department and they make reports as required.

Alabama will provide the Tribe with a copy of the 2025-2028 CFSP and the 2020-2024 Final Report upon final approval. Copies of the APSR and the CFSP will be emailed to the Tribal Liaison, per the Agreement. Documents from the Tribe to DHR will be sent to the Director of Family Services.

The collaboration between Alabama DHR and Children's Bureau has been beneficial during the preparation of the CFSP 2025-2029. Alabama's federal partners have provided aid and support through the CFSP planning process. The guidance that was provided included ways to strengthen the APSR,

creating the CFSP with focus on Assessments, CAPTA, Chafee and Diligent Recruitment of Foster/Adoptive Parents, technical assistance, reviewing drafts, and participation in state performance data discussions.

Collaboration with the Courts

Alabama DHR staff works closely with the Administrative Office of Courts (AOC) staff to address policies and practices of both the court system and the child welfare system. The Department and AOC have frequent contact and meet via iCAN team meetings. DHR has included the courts through many strategies such as iCAN meetings and annual Judicial Summits. iCAN county teams, comprised of DHR and Court staff, are now meeting in 24 of our 67 counties. The iCAN meeting is a collaboration between juvenile judges and child welfare staff that is designed to identify and address barriers to safety and permanency. The goal of iCAN is to reduce the number of children in care, with each team having a unique focus on their specific needs. The AOC has a vested interest in assisting local counties with data while also taking part in team meetings. Alabama DHR will continue to add additional counties to the iCAN county teams in the future.

SDHR is an active participant in meetings as part of the Court Improvement Plan. Individuals from SDHR and local DHR attend the formal CIP meetings to engage with stakeholders. Information learned from these Court Improvement Plan meetings varied from lessons learned through appeals which can look at child safety, well-being, and permanency; how practice and law directly impact child safety, well-being and permanency; new law or revision of law that would provide better opportunities for child safety, well-being and permanency; effective legal representation; etc. SDHR incorporated information from this project into the CFSP in hopes of providing trainings for our front-line workers, supervisors, directors, and judges. A goal is to use information from the CIP to better relationships and communications between local judicial systems and local DHR which would provide the desired outcomes for children and families. A goal is to use the Child Welfare/Judicial Summit with specific training focus. The annual strengths, successes, trends, and barriers noted by AOC and DHR steers the training focus. Data will be used to discuss local, State and National aspects of child welfare. The Court Improvement Project team is kept apprise of the planning of the Summit and provided an update at the conclusion. Our mission is to promote competence in the judiciary and child welfare through conveying information, facilitating interaction, and changing institutional culture to

remove obstacles between children and their forever families. We pursue our goal through facilitating judicial and child welfare collaboration and the use of data to inform solid practice and foster shared outcomes. Our work includes a joint review of local county child welfare and judicial data, an examination of data trends, and thoughtful dialogue about strategic solutions. Through a series of statewide and regional summits, on- site technical assistance, and consultation to county judicial/child welfare team, we implement these solutions in our relentless pursuit of ensuring Alabama's children and families are safe and strong.

II. Assessment of Current Performance in Improving Outcomes

engagement with birth parents with emphasis on fathers as well.

A. Child and Family Outcomes

2019. The Program Improvement Plan (PIP) was approved on December 1, 2019, with an implementation date of December 1, 2019. The CFSR identified several positive trends and practices in Alabama but there were areas needing improvement to strengthen Alabama's child welfare system. Specifically, Alabama was not in substantial conformity with the 7 systemic factors and only scored substantial conformity in one out of seven outcome areas. Alabama recognizes the need for continued work on engaging with "lived experience individuals." Alabama plans to continue working on

Alabama participated in Round 3 of the Child and Family Services Reviews (CFSR), conducted between July

	National	Alabama's		Better/Worse/No
	Performance	Observed	RSP	Different from
Statewide Data Indicator	Target	Performance		National
				Performance
				Better
Recurrence of maltreatment	9.7%	5.2%	6.9%	

Maltreatment in foster care				Worse
	9.07	8.79	11.61	
Permanency in 12 months for children	1			Better
entering foster care	35.2%	43.4%	43.7%	
Permanency in 12 months for children ir	1			Better
foster care 12- 23 months	43.8%	47.7%	47.6%	
Permanency in 12 months for children in	1			No Different
foster care 24 months or more	37.3%	36.0%	36.5%	
				No Different
Reentry to foster care in 12 months	5.6%	5.6%	5.9%	
Placement stability				Worse
	4.48	6.27	6.13	
Information from Child and Family Se	rvices Revi	ew (CFSR4) Da	ta Profile Februar	y 2024

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

According to the CFSR Statewide Data Indicator, Alabama's risk standardized performance (RSP) on Maltreatment in foster care was 11.61 and the national performance was 9.07. Alabama rating was worse than the national performance. Meanwhile, Alabama's rating was better than the national performance of 9.7% regarding recurrence of maltreatment with an observed performance of 5.2% and a risk standardized performance rating of 6.9%. Item 1: Timeliness of initiating investigations of reports of child maltreatment. Child safety is paramount for Alabama's child welfare system. Repeat maltreatment is monitored throughout the year through ERD reports and quarterly queries that are provided to county and state administration. The timeframe for initiating face-to-face contact with a child who has been identified as an alleged victim of child maltreatment continues to be based on present or impending danger and responses to all child

maltreatment reports are made within the timeframes established by agency policies or state statutes. The Department's policy requires an immediate response (within 12 hours but as soon as possible after a report is received) or a 5-day response time (within 5 days but as soon as possible after a report is received) for making contact with children and

families. This information is tracked through our FACTS system down to the minute for contact with the child identified at risk. This area has been a strength for Alabama and will continue to be an area of focus to maintain.

In FY 2023, Alabama's Electronic Report Distribution (ERD) showed First Victim Contacts were 85.97% in timeliness. This is a slight decrease from FY 2022 which showed 87.23% timely contacts statewide. Though the exact reasons for the drop in timeliness of contact are not currently known, it is suspected that errors in report tracking, human error in entering timely information, or a decrease in staff across the state are all contributing factors. However, ERD report INVS 218A currently shows that for FY 2024 the Department is at 83.16 % for initial timely contacts for the state. The Quality Assurance Division's case record reviews around safety assessment were completed in four counties October-December 2023 which reflected an area of strength for three counties. Of the counties reviewed, three had a rating above 90% with one being at 100%. The reviews have revealed that child welfare staff are making contact with children identified being at risk of abuse/neglect within the designated timeframes mandated by policy. However, there are areas that need improvement. Areas that have been identified as needing improvement are that additional information could be gleaned at the initial intake to facilitate timely contacts such as additional identifying information, other people who may have information about the family, and additional ways to contact families. The most common barrier that child welfare workers face with making timely initial contacts is the transient lifestyles of families that come to the Department's attention. Worker retention has also been a contributing factor in timely and correct data entry for timely initial contacts.

As of December 31, 2023, 38/67 counties had over 100% timely contacts and 13/67 were above 86% with the statewide average being almost 96%. This data is tracked through the CCWIS system and

reported on monthly via Alabama's Electronic Report Distribution system reports. State DHR continues to provide supports to county offices to facilitate ongoing conformity with the expectation that children will be seen within the appropriate time frames. The Office of CPS monitors compliance through regular review of the monthly reports which track child victim contact time frames. Feedback is provided to county level management as appropriate. Reviews by CPS program specialists continue to have a focus on obtaining the most accurate information available at intake and feedback is provided to county staff when reviews indicate more instruction is needed. Response times are tracked, through the random reviews noted above. As of March 1, 2024, 5 counties had Safety Assessment reviews for the period of 7/1/23-10/1/23. The overall timely contact rating for these 5 counties was 90%. This shows that counties continue to rate well above 90% overall in making timely first victim contacts. This is monitored through the Office of Quality Assurance assessment tool.

Repeat Maltreatment

Repeat Maltreatment is monitored throughout the year through ERD reports and quarterly queries that are provided to county and state administration.

2019	2020	2021	2022	2023	First 20
					2024
4.60%	4.80%	4.40%	4.70%	4.20%	4.13%

These percentages are derived from calculating all children with and INDICATED CA/N who has also had a previous INDICATED CA/N within the past 12 months.

Child and Family Outcome: Safety Outcome 2 -Children are safely maintained in their homes whenever possible and appropriate.

Item 2: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care

Item 3: Risk and Safety Assessment and Management

Alabama's has recognized some strengths regarding risk and safety assessment and management.

Strengths noted since the last CFSR are, appropriate in-home and/or community-based services are being

provided to families and children to preserve the family unit. Pertinent information is being gathered through forensic interviews, law enforcement contacts, medical providers, and other partner agencies as needed. Administrative Record Reviews are being conducted and detailed feedback is being provided to county staff for improvement. Alabama needs to continue to make improvements in services to families to protect children in their home and prevent removal or re-entry into foster care. Parental/caretaker substance abuse continues to be a leading reason for departmental involvement with families as well as being an entry reason into out of home care. Alabama is seeking additional resources for this area of concern to include seeing an increase in drug court programs and other services both in-patient and outpatient. For FY 2023, 1,307 referrals were received with allegations of substance abuse with 1,448 children involved in the investigations. There were 1,634 entries to foster care due to substance abuse. Children can have multiple entry into care reasons, but the initial referral may not have included the allegation of substance abuse at intake but was later identified during the assessment. Additionally, there was also work needed around risk and safety assessment and management. Challenges that have been noted over this reporting period: assessments are at times focused only on the initial allegation received, frontline staff and supervisors are often inexperienced, although services provided are appropriate there may be a need for more services to address underlying conditions. Collateral contacts that can offer supports are not always identified and utilized to provide safety and supports. A lack of services available for substance abuse and mental illness can be issues in some rural areas. In the FY 2023 OSRIs, 40% (8 of the 20 applicable cases) were rated a strength regarding Item 2 and 40% (17 of the 43) applicable cases were rated a Strength regarding Item 3.

QRI data provides the following insight on applicable cases reviewed for Items 2 and 3.

YEARS	2021	2022	2023
Item 2 applicable cases	109	146	145
Strength #	102	142	139

ANI#	7	4	6
% Strength	94%	97%	96%
Item 3 applicable cases	169	222	219
Strength #	154	202	204
ANI#	15	20	15
% Strength	91%	91%	93%

Alabama has preventive programs to help prevent removal of children by providing the family with services to ensure the child's safety while remaining in the home. One of the programs is the Intensive In-Home Services program (IIHS). Families that come to the attention of the Department due to reports of child abuse/neglect can receive services to prevent maltreatment and to learn appropriate parenting skills. The IIHS services is a short term intensive, home based, intervention program used to empower families, minimize their dependence on the child welfare system and to prevent children from being removed from their homes. Intensive in-

Home Services providers work with families on areas of need identified with the ISP team; those services include but is not limited to parenting, substance abuse, anger management etc. Alabama currently has 661 IIHS slots statewide which include preservation services and reunification. Slots are filled based on referrals from county offices and can be made statewide. Currently, there is not a waitlist and referrals are being made continuously according to family's needs. The chart below shows the utilization by regions and slots for each region. The regions are determined based on the proposal evaluations.

Utilization by Region		Contract Slots
Central	31.79%	44
East	53.75%	50
East Central	64.10%	77

Jefferson/Shelby	83.11%	103
Northeast	83.79%	81
Northwest	67.94%	99
Southeast	74.55%	61
Southwest	53.26%	79
Tuscaloosa Hub	52.92%	36
West Central	93.20%	31

Information in the chart is derived from Resource Management Division.

Alabama Office of Child Protective Services will continue to provide safety assessment trainings to county child welfare staff to improve Safety Outcomes.

The following Safety Assessment trainings were completed during 2023 by the Office of Child Protective Services. These trainings serve as an extra support to help build capacities in workers/supervisors. The number of staff members in attendance represent the number of child welfare staff that signed up for the training in the counties listed.

Safety Assessment Trainings Completed

aff 20	Escambia,CW staff	Baldwin,	Intake & CA/N	9/13/23
	bile	Clarke, Mo		
aff 16	Escambia,CW staff	Baldwin,	Safety assessment	9/14/23
	bile	Clarke, Mol		
aff 12	Escambia,CW staff	Baldwin,	Intake & CA/N	9/20/23
	ı, Mobile	Washington		
aff 18	cambia, CW staff	Baldwin, Es	Safety assessment	9/21/23
	, Mobile	Washington		
18 <u>18 </u>		ŕ	Safety assessment	9/21/23

Due to the concerns surrounding safety, improving the quality of risk assessment and safety

management will be addressed as goal one in the 2025-2029 CFSP.

Child and Family Outcome: Permanency Outcome 1- Children have permanency and stability in their living situations.

Alabama continues to utilize many strategies to ensure that successful permanency achievement for children continues to trend in an upward direction.

Children having permanency and stability in their living situations continues to be a focus for Alabama DHR. Children in foster care in Alabama as of 09/30/2023 experienced an average of 4.59 placement moves over the span of their time in care. In FY 2022 the average number of placement moves was 4.5. The number of placements children experience is captured via Alabama's FACTS system and changes are reflected in FACTS each time placement changes. We recognize that moves can be traumatic on children and efforts are constantly being made to have the first foster care placement the best and final foster care placement for children. Information gathered from FACTS queries.

	Sep-17	Sep-18	Sep-19	Sep-20	Sep-21	Sep-22	Sep-23	Jun-24
Average# of placements for children in care	3.94	3.89	3.96	3.98	4.16	4.21	4.38	4.75

The QA site reviews from September 2022 through March 2023, showed 8 out of 10 counties reviewed had a Strength in the stability of foster children. Some areas of concern include barriers to receiving services, especially in rural areas where there are limited resources available to assist foster/adoptive parents. Large sibling groups, along with the need to place children with complex behavioral and/or mental health needs often lead to difficulty in locating suitable placements or lead to foster/adoptive parents being unable to care for a child that they initially thought they could maintain in their homes. Developmental disorders, such as Autism, have been a barrier for placement. Currently, there are a limited number of families willing to

accept and can care for children with Autism. As of September 2023, there were 84 children in foster care with autism spectrum disorder. The Department continues to explore trauma assessment tools to be used during foster care placements as well as increased trauma informed training for child welfare staff and foster care providers. Alabama DHR continues to implement new marketing strategies including digital media campaigns and new recruitment strategies at sporting events to engage with potential foster care providers that are willing to meet the needs of the children in care. At the State level, program specialists in the Office of Recruitment and Home Care Support continues to track and collaborate with seven counties as part of a recruitment project. In fiscal year 2023 there were 2,714 inquires. The Offices of Foster Care and ILP collaborate to provide case consultation that includes brainstorming on services that might stabilize a placement before a disruption. Consequently, foster care placement stability will be addressed in goal 3 of the CFSP for 2025-2029.

QRI data below provides the following insight on applicable cases reviewed for Items 4, 5, and 6 over the last three years.

YEARS	2021	2022	2023
Item 4 applicable cases	118	142	143
Strength #	104	127	129
ANI#	14	15	14
% Strength	88%	89%	90%

Item 5 applicable cases	117	142	143
Strength #	93	120	122
ANI#	24	22	21
% Strength	79%	85%	85%

Item 6 applicable cases	118	142	143
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Strength #	95	120	119
ANI#	23	22	24
% Strength	81%	85%	83%

As it relates to permanency goals for children, the OSRI completed in 2023 had an overall strength rating of 51.85%. There were many factors of concern to include, prolonged use of reunification /guardianship when circumstances indicated they were not viable options. Additionally, permanency and concurrent goals were not updated based on case circumstances. Child welfare staff and supervisors continue to assess for appropriate permanency goals for children for timely permanency of children. Some of the activities that Alabama will use to address areas of concerns: continue to staff cases monthly of children placed in intensive congregate care for 11 months or longer to ensure placement remain appropriate, continue to stress the importance of contacting all known relatives in the beginning of the case when training workers and supervisors and continue partnerships with Alabama Administrative Office of Courts to focus on children who remain in care after 12 months with specific focus on those children age 10-14. There will be focus on removing barriers to permanency related to kinship care. The noted strengths related to reducing the time in care for children aged 10-14 is the Office of Foster Care's work to support permanency best practice working with County DHR offices. Child welfare staff provide the Parents of Children in Foster Care (ASFA timeline pamphlet) produced in cooperation with the Alabama Administrative Office of the Courts. The pamphlet is available in both English and Spanish.

Based on the 27-foster care OSRIs completed in 2023, there were barriers impacting the achievement of permanency. In the 27-foster care OSRIs reviewed in 2023, the permanency and concurrent goals were:

Reunification:	2 (7.4% }
Guardianship:	2 (7.4%)
Adoption:	7 (25.9% }

APPLA: 3 {11.1%}	
Reunification and Guardianship	p: 9 {33%}
Reunification and Adoption:	2 {7.4%}
Reunification and APPLA:	0 {0%}
Adoption and Guardianship:	1 {3.7%}
Guardianship and APPLA:	1 {3.7%}
Adoption and APPLA: 0 {0%)

The below table captures the length of time until discharge to the respective permanency goals for FY 2023.

Time to permanency for	Average	Median	Average	Median
Federally recognized	Days in	Days in	Months in	Months
discharge reasons	Care	Care	Care	in Care
Adoption	1009	877	34	29
Kinship Guardianship	623	532	21	18
Return to Parent	344	250	11	8
Relative Placement	292	186	10	6

Data Source for chart and data listed above: Alabama DHR CCWIS System Children that entered care during the FY 2023.

Sep-23			
Permanency Plan	Average Days in Care	Average Months in Care	
Adoption	977.45	32.58	
Kinship Guardianship	429.34	14.31	
Return to Parent	449.39	14.98	
Relative Placement	468.39	15.61	

Data Source for chart and data listed above: Alabama DHR CCWIS System

Some of the noted barriers were limited case planning with parents regarding permanency and concurrent plans, locating transient parents and arranging reunification services for parents in a timely manner. Alabama

DHR noted timely filing of TPR petitions in 9 out of 12 foster care OSRIs, timely judicial reviews and

permanency hearings, documented efforts locating maternal and paternal relatives to achieve guardianship

and increased use of Kinship Guardianship to facilitate permanency. Alabama plans to address the reduction

of time in care in goal 2 of the CFSP for 2025-2029.

Child and Family Outcome: Permanency Outcome 2 The continuity of family relationships and

connections is preserved.

Permanency Outcome 2 focuses on the continuity of family relationships and connections being

preserved. Attention to sibling placement and connections has been a focus of the Office of QCWP,

FC/ILP, Adoptions, Training, and Policy for years. The curriculum for formal training, the policy that

supports practice, and best practice in the field focus on the fundamental needs of children to be with,

nearby, or connected to their siblings. When QSR or other review activities occur, counties are given

feedback about placements, and data regarding sibling placements is discussed/monitored at the

supervisory level. Of the most recent county reviews via Quality Assurance 9 out of 10 counties showed

a strength in this area. Alabama's baseline performance at the beginning of CFSR Round 3 reviews was 75%

and at the end of the review periods, the percentage was 80%. These numbers continue to show progress

towards ensuring that siblings are placed together when appropriate. The Department is also able to track

visits with siblings via our FACTS system, however this information is only as accurate as what is entered

into the system. Other ways of monitoring sibling visits include record reviews and supervisory

conferences.

Of the most recent county reviews via Quality Assurance, 14 out of 15 counties showed a strength in this area.

The overall item ratings are based upon decisions made by QA staff after a comprehensive review with the

inclusion of OSRIs, Stakeholder Interviews, ERO data, and Permanency Assessments. In the County onsite

reviews in 2023, the findings from those reviews related to Permanency Outcome 2 are as follows:

Item 7: 93.33% STR

Item 8: 40.00% STR

19

Item 9: 66.67% STR

Item 10: 53.85% STR

Item 11: 31.82% STR

QRI data provides the following insight on applicable cases reviewed for Items 7-11 for the last three years.

YEARS	2021	2022	2023
Item 7 applicable cases	65	70	77
Strength #	59	58	69
ANI#	6	12	8
% Strength	91%	83%	90%

Item 8 applicable cases	98	111	112
Strength #	78	92	85
ANI#	20	19	27
% Strength	80%	83%	76%

Item 9 appliable cases	114	134	130
Strength #	89	107	114
ANI#	25	37	16
% Strength	78%	80%	88%

Item 10 applicable			
cases	108	123	128
Strength #	89	108	117
ANI#	19	15	11
% Strength	82%	88%	91%

Item 11 applicable			
cases	97	103	101
Strength #	77	87	82
ANI#	20	16	19
% Strength	79%	84%	81%

At the end of 2023, 643 {51.2%} sibling groups were placed together, and 613 (48.8) sibling groups were not placed together. Common issues reported by Counties in their bi-annual County Self-Assessments for separation of siblings included:

- Behavioral or medical issues of one or more children requiring specialized treatment,
- Safety concerns between the siblings,
- Paternal relatives unwilling to accept placement for children who have a different biological or alleged father,
- Siblings who have different fathers who are unwilling to accept placement of their child's siblings,
- Lack of foster homes willing/able to accept large sibling groups, and
- Lack of foster homes willing to foster sibling groups with large age gaps.

An incentive that Alabama DHR has utilized with families willing to accept sibling groups of 4 or more children is to pay enhanced payments. In 2023, OSRI Item 7 was rated in 15 foster care cases. In this review, 14 {93.33%} were rated Strength with 1 (6.67%} rated as an area needing improvements. Based on these 15 OSRIs, the target child was placed with all siblings in foster care during the PUR in 7 OSRIs. In 7 of the remaining 8 OSRIs in which the target child was placed separately from siblings in care, reasons for separation included:

- Conflict between the children which could not be managed with services,
- Permanency needs of one of the siblings,
- Subsequent birth of target child's sibling(s) after the target child had entered care, and
- Lack of foster homes capable of accommodating a sibling group of 3 children.

The overall 2023 rating regarding placement with siblings is higher than the initial CFSR Round 3 PIP baseline rating of 76% as well as the measurement periods during CFSR Round 3. As it relates to visits with parents and siblings in foster care and preserving connections, the following points are noted for this review period: Visiting with Parents and Siblings in Foster Care was a Strength in 40% (10 out of 25) of OSRIs completed in 2023. This represents an improvement over the PIP baseline (25%) established in CFSR Round 3 and higher than 6 out of 12 Measurement Periods during CFSR Round 3. The following observations were made in the Practice Performance Report:

- Concerted efforts were made to support visitation between siblings with sufficient frequency and quality in 50% (4 out of 8) of applicable OSRIs. There were no reported instances in which siblings never had any visits. Visitation was less than weekly in 6 out of the 8 OSRIs.
- Concerted efforts were made to support quality visitation between the target child and mother in 68.42% (13 out of 19) of applicable OSRIs.
- Concerted efforts were made to ensure the frequency of visitation between the target child and mother in 54.55% (12 out of 22) of applicable OSRIs. There were 3 OSRIs in which the birth mother did not have any visitation. The most likely pattern of visitation for mothers was less than once per month.
- Concerted efforts were made to support quality visitation between the target child and father in 66.67% (4 out of 6) of applicable OSRIs.
- Concerted efforts were made to ensure the frequency of visitation between the target child and mother in 40% (4 out of 10) of applicable OSRIs. There were 4 OSRIs in which the target child did not have any visitation with a known father. The most likely pattern of visitation for fathers was less than once per month.

Preserving Connections was a Strength in 66.67% (18 out of 27) of OSRIs completed in 2023. This too exceeded the PIP baseline as well as each Measurement Period during CFSR Round 3. Among the 9 OSRIs rated an ANI, concerns included:

- Lack of contact with known extended relatives and siblings not in care,
- Absence of support by the agency to facilitate contact between relatives and children,
- A general lack of discussion with age-appropriate children regarding their important connections.

Observed strengths in the OSRIs included:

- Maintaining children in their community of origin and school system,
- Involvement of maternal and paternal relatives in visitation,
- Visitation with siblings who are not in care,

Sibling visits are tracked in the FACTS system, however many of them are not being logged (this could be due to lack of familiarity with the process of documenting them). More emphasis is needed to ensure that these visits are documented timely and accurately.

Alabama DHR continues to focus on relative placement to assist with reducing a child's time in care. In October 2023, there were 731 children in care with a permanency goal of relative placement. Although their permanency goal was relative placement, it did not include Kinship Guardianship. In FY 2023, there were 295 children with a permanency plan of Kinship Guardianship, 706 children with permanency plan of permanent relative placement with transfer of custody to the relative, and 25 children with a permanency plan of permanent relative placement with DHR retaining custody. The state of Alabama continues to pay Kinship Guardianship assistance payments to relatives who become approved as a related foster family homes. They can be provisionally approved and begin receiving a payment immediately or if they do not meet the requirements for provisional, they can begin receiving payments as soon as they are approved as a foster home (meeting the same criteria as unrelated foster families). Once the child has been in the home for a minimum of six months, Kinship Guardianship can be finalized by the court. Our data can be found below:

REPORTING PERIOD	NUMBER OF CHILDREN	NUMBER OF PROVIDERS
	RECEIVING GAP*	(FAMILIES)*

FY 2023	11 1178	531

Point in time, not cumulative for the entire reporting period; Data Source: Alabama's FACTS system.

Alabama DHR will focus on bringing awareness and education to families regarding the Kinship Guardianship process. As a result of these efforts, we have seen an increase of the use of the Kinship Guardianship Program, but additional work is needed in this area. Alabama continues its collaboration with Family Resource Centers and United Way 211 to increase public awareness and service delivery regarding Kinship services and supports. The department works to bridge some of these gaps and meet some of these needs for families by updating our Kinship Navigator Website regularly with useful resource links to assist kinship families as well as publicizing our 1-844-4ALA-Kin number. Alabama Department of Human Resources (SDHR) has plans to host a Kinship Community Fair Summit with Kinship families and community stakeholders and partners. We also have planned a series of trainings throughout the state in 2024 for county resource staff only. The first Foster Care Resource Worker Conference is scheduled for April 29-May 1, 2024, in Mobile, AL. The Department will continue to provide Kinship training for all staff to help them understand the ease and benefits of developing a kinship guardian for a case. This training will be reinforced at the annual Permanency Conference, the annual Supervisor's Training as well as the annual Child Welfare/ Judicial Summit to educate and reinforce both new and veteran staff and court officials about the benefits of developing a kinship guardian in foster care cases. Additionally, Alabama plans to work on adding videos to our Kinship Navigator Website to share information about DHR financial services, legal representation, educational information, and other helpful resources. Alabama DHR will address this as an objective in goal 3 of the 2025-2029 CFSP.

Well-Being Outcome 1: Families have enhanced capacity to provide for children's needs.

The assessment of needs and provision of services in relation to parents continues to be an area of focus for Alabama.

Item 12: Needs/Services of child, parents, and foster parents

• In 18 applicable in-home cases, documentation reflected an adequate assessment of children's needs in 11/18

cases (61%).

- In 21 applicable in-home cases, there was an assessment of ongoing service needs in 13/21 cases (62%).
- In 26 applicable foster care cases, there was an assessment of ongoing service needs in 17/26 cases (65%).

For QCWP case reviews completed statewide from October 2022-June 2023, the findings are as follows:

In 19 applicable in-home cases, there was documentation that parents were engaged in the ISP process in 11/19 cases (58%).

Item 13: Child/Family Involvement in Case Planning

In 24 applicable foster care cases, there was documentation that parents were engaged in the ISP process in 16/24 cases (67%).

Although there has been some increase in this area, it continues to be a focus for Alabama DHR.

Alabama continues to emphasize in trainings with caseworkers the importance of engaging with both parents in discussing the planning goals in the ISP for a more positive impact on families.

Item 14: Caseworker visits with Child

Caseworker visits with child/children continues to be made each month and are both scheduled and unannounced visits to the child's living environment. Some visits include exploration of goals and examination of any changes. Caseworkers continue to contact children and families through telephone calls as well. Visits to children in other settings may occur to provide opportunities for private discussions.

Caseworker Visit Data

FY	Caseworker Visits Completed	Caseworker Visits completed in
		Home
2019	97.30%	99.70%
2020	96.90%	99.60%
2021	95.90%	99.70%
2022	95.27%	99.49%
2023	95.50%	99.46%

QCWP reviews were completed statewide from October 2022-June 2023 with the following findings:

In 21 applicable In-home cases, safety and well-being were monitored during monthly visits in 17/21 cases {81%}.

In 26 applicable foster care cases, safety and well-being were monitored during monthly visits in 24/26 cases {92%}.

In 21 applicable in-home cases, children perceived their well-being as a priority during visits in 14/21 cases {67%}

In 26 applicable foster care cases, children perceived their well-being as a priority during visits in 24/26 cases {92%}.

In the 45 OSRIs completed in 2023, Caseworker Visits with Child had a 69% Strength Rating. While still lying down with the OSRI items, the QCWP unit utilizes a different tool that is structured differently than the OSRI. However, similar trends were identified when rating caseworker visits. There were concerns about children not being seen individually and privately, lack of quality visits, and lack of documentation of visits or delays in narrative entry caused influenced these unfavorable ratings

Item 15: Caseworker Visit with Parents

The frequency and quality of visits between caseworkers and parents should be sufficient to ensure the safety, permanency, and well-being of the child/children to promote achievement of case goals. Alabama recognizes that there is a difference between caseworker visits with mothers and those visits with the fathers. This information can be tracked by Alabama's FACTS system and will be monitored for the next five years. Alabama continues to focus on improving visits with birth parents with additional emphasis on fathers. Alabama will provide trainings on the importance of meaningful caseworker visits with parents. Additionally, Quality Child Welfare Practice staff, will continue to conduct ongoing reviews in the county and provide feedback to county staff and supervisors to enhance the quality of visits with parents. In the 34 applicable cases completed in FY 2023, Caseworker Visit with Parents had an 82% (28 out of 34)

ANI Rating. QRI data provides the following insight on applicable cases reviewed for Item 15.

YEARS	2021	2022	2023
Applicable Cases	148	172	168
Strength #	109	127	114
ANI#	39	45	54
% Strength	74%	74%	68%

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

The assessment of educational needs for children continues through record reviews and child-specific directives and feedback conducted by the OQCWP and Quality Assurance reviews. The Office of QCWP random reviews revealed that workers are involved in the educational outcomes for children. In 18/26 applicable foster care cases reviewed, 16 had evidence of assessment of children's education needs (89%). ORSI data shows that in FY 2023 74% (20 out 27) cases rated a Strength on Item 16 and QRI data shows that the state has rated a STRENGTH consistently in the recent years for Item 16.

YEARS	2021	2022	2023
Item 16 applicable			
cases	121	141	155
Strength #	107	132	142
ANI#	14	9	13
% Strength	88%	94%	92%

We will continue to assess the educational needs for children through record reviews and more engagement with the school. The Department continues to collaborate with the State Department of Education regarding Every Student Success Act. The Department's liaison for case concerns and inquires is the Deputy Director of

the Office of Recruitment and Home Care Support. Collaboration with our local Federal Programs Education liaison continues to be a vital link to resolving ESSA case concerns brought to our attention from county offices and it helps our foster youth who are being enrolled in school without delay. To meet the educational needs of children in care, county DHR offices collaborate with their local education department and submit written educational plans for foster youth annually. The plans continue to be a good resource between our county offices and LEAs and has provided equitable resolutions to concerns that have been expressed in the past. Alabama DHR will continue to express the importance of this collaboration for continued success. The State Office liaison represents the department on the Special Education Advisory Panel (SEAP) to provide input in the development and implementation of policies related to the provision of educational services for children with disabilities who are in foster care. It also guarantees participation in assessing identified areas of need in federal monitoring reports regarding various educational needs of Alabama's foster children.

Well-Being Outcome 3: Children receive services to meet their physical/mental health needs.

Well-Being Outcome 3 focuses on the physical and mental health needs of children in foster care. Overall, the outcome was determined to be substantially achieved in 52% of the CFSR cases. The OSRI reviews completed in districts across the state identified that the physical health needs of children were being met in most cases. Children and Family Services and Quality Assurance Division specialists continues to stress the importance of physical health and well-being of children in care. In 2023, 35 OSRIs were completed which were applicable in Item 17 for physical health of the child. Item 17 had a 70.37% Strength rating in foster care OSRIs and 50% Strength rating in in-home OSRIs. QCWP case reviews completed statewide from October 2022-June 2023, the findings are as follows:

In 18 applicable in-home cases, documentation reflected an adequate assessment of children's needs in 11/18 cases (61%). Of the 7 that did not include an adequate assessment, 4 were lacking an assessment around the child's dental needs.

In 26 applicable foster care cases, 20 had evidence of assessment of children's physical needs (77%).

In 26 applicable foster care cases, 8 had evidence of assessment of children's dental needs (31%). In May 2024, 30.34% of children in Foster Care had a dental appointment entered in FACTS. EPSDT screenings are being completed timely and maintained in case records. Counties have access to pediatricians, dentists, and optometrists to meet the physical needs of children. Any specialized physical needs or children, such as surgery or ongoing medical conditions, are met through the appropriate provision of services.

Mental/Behavioral Health of Child in foster care continues to be a focus for Alabama. Behavioral Analysts employed by Alabama DHR continue to provide support to counties to meet the behavioral health needs of children in care. The Department has noted areas of concern which include:

- Delays arranging psychological evaluations for children
- Lack of monitoring for progress and measuring for effective outcomes
- Lack of provider notes or no evidence provider notes have been reviewed by agency
- Delays, or disruptions in service provision due to lack of resources or implementation of the ISP
- Limited availability of mental health services.

State DHR Behavioral Analysts, the Office of Foster Care, Resource Management Division, and State QA MAT assessors conducted round table congregate care staffing with the counties for children who have been in intensive placement for 11 months or longer to discuss needs, barriers, and next steps via conference calls. Cases are reviewed via FACTS by SDHR staff and reviews are followed up with a conference call to county staff to discuss progress and barriers to a step down to a less restrictive placement for children as well as their permanency goals. The Multi-Dimensional Assessment Tool (MAT) is also used by state staff to discuss recommendations made through the MAT assessment. For FY 2023, on average there were 87 cases staffed monthly by SDHR OFC, Behavioral Analysts, county staff, and program staff. • 26 OSRIs were completed in 2023 which were applicable in Item 18 for mental/behavioral health of the child. Item 18 had a 58% Strength rating—65% in foster care OSRIs and 44% in in-home OSRIs. Overall, reasons for ANIs included lack of appropriate assessments of mental and behavioral health, no concerted efforts to refer child to needed services, and lack of sufficient oversight of mental health medications. OCWP case reviews were completed statewide

from October 2022-June 2023, the findings are as follows:

In 18 applicable in-home cases, documentation reflected an adequate assessment of children's needs in 11/18 cases (61%). Of the 7 that did not include an adequate assessment, 3 were lacking an assessment around their MH needs.

In 19 applicable foster care cases, 15 had evidence of assessment of children's mental/behavioral needs (79%).

In 21 applicable in-home cases, there was an assessment of ongoing service needs in 13/21 cases (62%).

In 26 applicable foster care cases, there was an assessment of ongoing service needs in 17/26 cases (65%).

Although there were areas of concerns noted, there was also strengths noted regarding Well-Being Outcome

- 3. Some of the noted strengths in this area included:
- Workers are aware of children's medications including needs and side effects
- Works are following up with caregivers to assess the effects of medications
- Medication logs are kept by providers
- Immunizations are up to date for children
- Evidence of workers assessing behavioral issues
- Discussion of behavioral or mental health concerns with caregivers

Item 18	Item 18 Applicable	Item 18	Item 18	Strength
	Cases	Strengths	ANIs	%
Calendar Year 2021	63	22	41	34.92%
Calendar Year 2022	46	21	25	45.65%
Calendar Year 2023	26	15	11	57.69%
Calendar Year 2024 (Jan-July	14	5	9	35.71%
2024)				

Data in the chart above is from the OSRI.

Item 18 applicable			
cases	111	126	138
Strength #	87	103	116
ANI #	24	23	22
% Strength	78%	82%	84%

Data in the chart above is from the QRI.

Alabama DHR will address behavioral health services for children in foster care in goal 3 of the 2025- 2029 CFSP.

B. Systemic Factors

1. Information Systems

Alabama's automated child welfare system known as Family, Adult, and Child Tracking System (FACTS) is a standardized, comprehensive way to manage child welfare information. Its objectives are to: improve outcomes for children, adults, and families, improve practice, strengthen management, improve decision-making, improve reporting, and provide accurate and timely case information. This system has the capability to capture and report information about each child's removal status, demographic characteristics, location, permanency goals, and is easily accessible in FACTS at any given time. The FACTS system is available to all child welfare caseworker, supervisors, managers, and administrators statewide. During periods of maintenance when FACTS is not available for data entry, users are still able to utilize FACTS Downtime to search for child abuse and neglect history, access child removal status, demographic characteristics, location, and permanency goals. The worker assigned to the case is responsible for all data entry. Supervisors have access to cases assigned to workers that they supervise and can enter and update any information as it relates to the case and the four key data areas (status, demographics, characteristics, location, and goals). Specific fields in FACTS are designed to capture current information regarding children's foster care status, current location, placement type, and permanency goal. Fields are also present throughout the system that capture demographic characteristics of children involved with the agency. Data entries into FACTS are time

sensitive and upon entry a date and time stamp are created so that data may be monitored for timely entry. Reports and queries run regularly on the states Electronic Reports Distribution system (ERD) to monitor the timeliness of data entry. This information is readily available to workers and supervisors. Reports monitor process such as the timeliness of the ISP meeting and the creation of permanency goals for children and families. These reports are utilized by state, regional and county administrators to identify areas in which improvement efforts will be directed. Reports and queries can be customized to meet individual county or regional needs.

The following is an example of data related to timeliness that is utilized:

From ERD Report FC375A

This report looks at timeliness of initial ISP documentation which includes the creation of permanency plans.

Timely Initial Individualized Service Plan		
July 2022	July 2023	July 2024
94.72%	92.47%	93.87%

Another example is From ERD Report FMSV370

This report looks at the timeliness of Caseworker Visit Documentation for CPS cases.

Timely Documentation of Caseworker Visits for CPS Cases – entered within 45 days			
July 2022 July 2023 July 2024			
97%	95%	93%	

ERD Reports and queries are also utilized to identify and correct missing or incorrect data. A missing placement summary is sent to counties monthly so that any missing placements can be identified and entered correctly into the system. Additionally, a validation process occurs within FACTS to ensure that the correct placement is documented. This validation must be approved by both the worker and the supervisor for specific placement types. An e-mail reminder is sent to workers and corresponding supervisors at regular intervals

until the validation process is completed.

Other reports and queries monitor accuracy and completeness of data entered in the system.

For example, the FC055 report is a comprehensive report that tracks a variety of information regarding children in foster care. It was created to improve the ease of access for workers and supervisors to pertinent child welfare information. The FC055 reports client level data including Most Recent Case Plan Review Date, Addendum Review Date, Current Placement Type, Permanency Goal, Education, EPSDT and dental appointment information. Workers and supervisors can confirm accuracy of child specific data and utilize summaries to identify missing data such as missing placement type. Additional ERD reports and queries are available and utilized to capture timeliness of caseworker documentation in the system, completeness of placement and permanency goal information, and accuracy of demographic information.

Careful review by Office of Data Analysis staff provides opportunities for any discrepancies to be discovered. The Office of Data Analysis reviews ERD reports regularly to ensure they are consisted across time and across reports. The ERD query is spot checked twice a month. For example, the FC055 report that is available on ERD is also run in a query version and checked for accuracy each month. If an inconsistency is identified, the cause is researched and corrected.

Further analysis by individual counties allows for an additional review of accuracy. When an issue is reported, the report or query is examined to see what was not pulled correctly and adjustments are made to ensure accuracy.

An assessment is currently being completed in partnership with the Office of Quality Assurance to identify any additional administrative data supports needed to support continuous quality improvement efforts. Additionally, input is regularly solicited from end users to identify opportunities to improve the ways that information is entered into and collected by FACTS and the reports and queries that are generated from that information.

FACTS programmers have corrected many of the data extraction issues noted in the AFCARS PIP and continue to work on addressing all issues. FACTS users are required to verify the completeness and accuracy

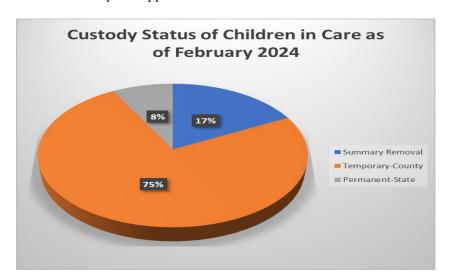
of the AFCARS data they have entered each month via an AFCARS report that is generated on the state's reports system. The Office of Data Analysis and the FACTS IT Division worked collaboratively to evaluate the states CCWIS system during the previous year to determine the capacity to collect and report on new data elements required by the AFCARS 2020 Final Rule. Coding updates were initiated for data elements that could be extracted from fields already existing in the system. CCWIS enhancements were designed and incorporated into FACTS to collect data that was not previously collected by the system. Some of the areas that fields and coding were updated include demographic information on adoptive parents, ICWA related information, and additional information regarding conditions present when children enter foster care. Data collected from these additional fields will be utilized to inform the state where progress toward goals is sustained and identify and highlight where goals are not being met or sustained. During 2022-2023 reporting period enhancements were completed to facilitate capturing data for the AFCARS 2.0 changes. A summary of enhancements created in the FACTS system 2023-2024 is listed below:

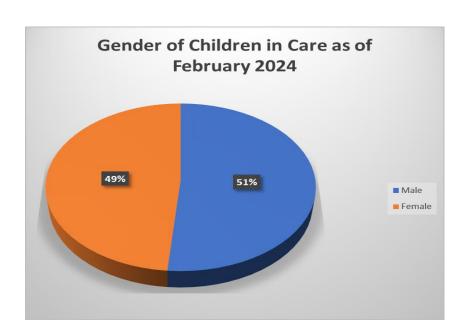
- Adding information that updated ICWA documentation.
- Updating picklist values to allow documenting reasonable accommodations.
- Fields were added to the Home Removal Screen to document prior adoptions and prior episodes of Kinship Guardianship as well as updated picklists that so that information about additional conditions at time of removal could be documented.
- Fields were added to the client general information screen as well as the client health information screens to document whether a child had ever fathered or bore a child.
- Ethnicity pick lists were updated to allow documentation if child was abandoned.
- Fields were added to multiple screens that allow documentation of the steps in the TPR process
- Modifications were made so that multiple episodes of missing or runaway could be documented.
- Modifications were made to allow capturing additional information about sex trafficking prior to and/or during current home removal episodes.
- An existing field in the client education section was modified that allowed documentation of IFSP's

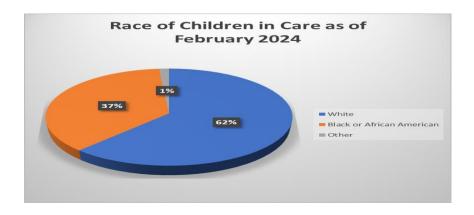
for children receiving early intervention services.

• Additional Enhancements to FACTS completed during the current reporting period included disabling a reserved placement checkbox.

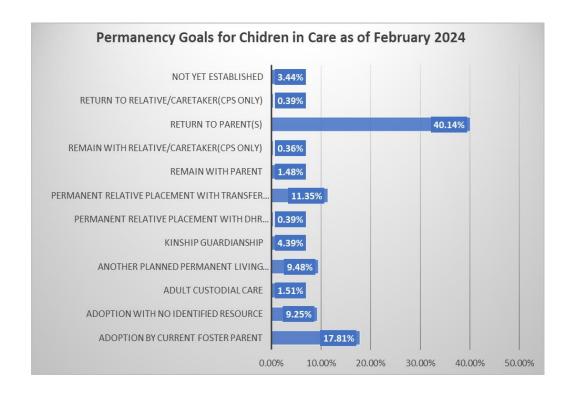
The next Data Quality Plan Biennial Review will focus on data elements that are related to goals identified in the CFSP to further improve the quality of data collected. Areas of review will be assessed for accuracy, timeliness, and completeness. Technical assistance will be provided to individual counties where discrepancies are noted and frequently noted data quality issues will be included in annual statewide trainings. Additionally, The States Data Quality Committee will review data currently available and evaluate its effectiveness in measuring progress toward achieving and maintain CFSP goal progress. Some examples of FACTS functionality that provides status, characteristics, placement location, and permanency goals are provided in the charts below. Data provided in these charts was taken from reports that run regularly on the state's reports application which is available to all staff statewide.







Placement Type	# of children in placement type.	Percentage
Adoptive Home	104	1.77%
Child Care Institution	378	6.43%
DYS Oper/Lic Facility	13	0.22%
Foster Family Home	3290	55.97%
Foster Family Related Home	224	3.81%
Group Home	297	5.05%
Hospital	22	0.37%
MH Operated or Licensed Facility	44	0.75%
Missing Placement	119	2.02%
Nursing Home	13	0.22%
Other	57	0.97%
Out of State Residential Treatment Facility	12	0.20%
Own Home	168	2.86%
Psychiatric Hospital	42	0.71%
Related Home	557	9.48%
Runaway	97	1.65%
Shelter	6	0.10%
Therapeutic Foster Care	366	6.23%
Transitional Living	68	1.16%
Unrelated Home Court Ordered	1	0.02%
Total Children	5878	



2.Systemic Factor: Case Review System

Overall, there is evidence that case plan meetings are being held timely and as needed as cases evolve and needs change. Addendums are being completed timely as well. There is evidence from internal and external stakeholder interviews that participants are given the opportunity for their opinions to be heard by the case plan team. Case plans are being documented in FACTS, copies of the documents are in the paper files, and copies of the case plan are being distributed to parties at the close of each case plan meeting. However, onsite reviews completed June 2023-March 2024, showed three counties scored 60% (strength) and two counties scored 40% (area needing improvement). The counties that needed improvement had issues around timely meetings, change in needs, copies of plans not being distributed to team members timely, and the case plan did not involve children and their families. The ISPs were not of sustenance as they were often held at/after court and were not strengths based.

Dates of review: September 2022 – May 2024 (27 counties reviewed)

Item 20: Written Case Plan Development

17 Strength

10 Area Needing Improvement

Strengths observed

Case plans held per policy timeframes and when needed for changes

Needs observed

Narratives regarding case plan meetings lacked details

Ensure case plans address all areas needed for the child and family

Both

For all appropriate stakeholders to be present for the meeting or their input included

Item 21: Periodic Reviews

- 21 Strength
- **6** Area Needing Improvement

Strengths observed

Judicial Reviews held every 6 months and documented in FACTS

Needs observed

Collaborate with the court to ensure judicial review orders are accurate.

Ensure accurate court reports provided to the court timely

Item 22: Permanency Hearing

- 22 Strength
- 5 Area Needing Improvement

Strengths observed

Ongoing collaboration between the court system and DHR

Needs observed

Ensure accurate court reports provided to the court timely

Item 23: Timely TPR Filing

The County files for termination of parental rights (TPR) proceedings in accordance with required provisions.

- 12 Strength
- 15 Area Needing Improvement

Both strengths & needs

Monitor ASFA timeframes to determine when to file TPR

Compelling reasons documented clearing when TPR is not appropriate.

Item 24: Notice of Hearings and Reviews to Caregivers

- 20 Strength
- 7 Area Needing Improvement

Strengths observed

Documentation supported foster parent and caregivers are invited to participate in court proceedings

In general, foster parents and caregivers present at court proceedings were able to provide input, including through the caseworker or GAL

Needs observed

Ensure age-appropriate children are able to be involved, including the potential for alternate ways for their input to be heard if not allowed into the court hearing.

3. Systemic Factor: Ouality Assurance System

Alabama has a Quality Assurance system operating in jurisdictions with CFSP services. Alabama's Quality Assurance system is in place statewide. Alabama's CQI system was rated as an ANI in the round 3 CFSR. Currently, State QA Program Specialists conduct county specific onsite reviews utilizing the OSRI and OMS. Approximately 15 counties are reviewed per year by the State QA Unit, with 3 cases per county reviewed for an approximate total of 45 cases reviewed per year. Information obtained from the review is shared with the county through a debriefing meeting as well as in writing. Individual counties have a staff member identified as a Quality Assurance Coordinator, and there are Quality Assurance Committees. The

County QA committee completes case reviews through Quality Review Instruments (QRIs). The QRI mirrors the OSRI, collecting case information for Outcomes and Case Review Items. County QA committee members completing QRIs debrief the QRI with the County QA committee and county staff to review the findings. After county debriefing, the QRIs are reviewed by State QA staff and entered in the QRI database. OSRIs are entered in OMS when complete. The QRI database, along with the OMS allow for reports to be run as needed. In both the state onsite review and county QRI process, individual interviews are conducted with relevant stakeholders involved in the case, including the identified child and family.

Alabama's Quality Assurance system provides relevant reports. Information obtained through county reviews and OSRI completion are shared with counties and SDHR management through a written report. Data from the OMS is shared with management when requested.

Each county has an assigned QA Specialist from the State QA Unit. Specialists provide ongoing training, consultation, and technical support for county QA functions including training on QRI completion. Quarterly meetings are facilitated by QA Specialists with their assigned counties. The meetings are designed to share developments in CQI processes and provide support to County QA Coordinators regarding the functioning of their County QA system.

Alabama's Quality Assurance system has standards to evaluate service quality and identify strengths and needs of service delivery. The OSRI and QRI reviews performed allow for review of the quality of services provided, and to identify strengths and needs of the service delivery system. In addition, counties are to complete a biannual County Self-Assessment, which includes a review of best practice indicators addressing safety, permanency, well-being, and systemic factors. The County Self-Assessment mirrors the OSRI in terms of areas assessed. It provides a targeted review by each county of their case practice, as well as assisting the county identify the strengths and needs of their service delivery. Counties collect data from the period of review and use this to assess performance. From this assessment, priority areas are identified by the county and addressed through a County Improvement Plan (CIP). This plan outlines goals with specific, measurable steps to address the priority areas. The CIP is assessed biannually with county staff, QA Specialists, and other

State staff as needed.

Alabama DHR acknowledge that there are areas of the Quality Assurance System that could be strengthened. This specifically is related to Alabama's QA system using the information collected to identify strengths and needs of service delivery and the implementation and evaluation of program improvement measures. The current model of State QA reviews will shift from individual county focus to a district focus effective October 1, 2024. This will allow State QA specialists to increase the number of OSRIs completed to approximately 150. County QA Committees will have the flexibility to complete a selection of QRIs, special studies, or stakeholder surveys that best fit their county's needs. The combination of the State QA reviews, and County QA activities will continue yielding both qualitative and quantitative data essential to assessing performance and outcomes, increasing the data available for review.

The feedback loop between State DHR leadership, county staff, children and families, and external stakeholders needs strengthening. SDHR divisions and external stakeholders need to be involved consistently to discuss and analyze qualitative and quantitative data, assessing practice strengths and needs. Input from internal and external stakeholders has been utilized to inform what system and reporting enhancements should be planned, implemented, and prioritized. One example has been the modification of a reserve placement checkbox to reduce the instances of user error and improve reporting. Monthly CQI meetings will be initiated in July 2024, including management from the Quality Assurance and Family Services Divisions. Representatives from the Children's Bureau are assisting with this initiative, as Alabama has not routinely analyzed data together across divisions. This is necessary to have a clear understanding of the state's performance and to ensure program improvement initiatives are in line with areas of concern identified through the data. A meeting is scheduled with the Children's Bureau on June 21, 2024, to begin forming plans for these division CQI meetings.

Currently, the State QA Unit has a program manager and 6 full-time QA Specialists who have been conducting OSRIs and entering the information into the OMS. All 7 individuals were trained in the OSRI tool by JBS in preparation for the Round 3 CFSR and participated in completion of OSRIs during the Round 3 PIP. In January

2023, the State QA unit transitioned to the use of the Round 4 OSRI. To assist in this transition, the State QA Unit completed the following trainings in the Round 4 E-learning Academy: Layla Morgan Mock Case; OSRI Parts 1, 2, and 3; Item 2; Item 3; Item 5; and Parent and Caregiver Applicability.

The shift from an individual county focus by the QA Unit to district model is designed to ensure Alabama can effectively ensure Criterion 2C is met prior to Round 4 CFSR. The county composition in each district will be based on the Alabama Association of County DHR Districts (AACDHR) except for Jefferson which will be reviewed separately as the largest metro site in Alabama. This model was used to complete the Round 3 PIP. 75 OSRIs will be completed every 6 months--42 foster care cases and 33 in-home cases. Each of the 9 Districts will have 7 OSRIs (4 foster care and 3 in-home), and Jefferson will have 12 OSRIs {6 foster care and 6 in-home).

Additionally, Alabama has met Criterion 1C, 10, 1E, 1F, and 2F. Alabama has written instructions that outline the process for reviewers to follow when a safety concern and defines and resolves conflicts of interest among review participants. Alabama's QA unit is currently using the OSRI to measure and monitor conformity for CFSR purposes. Alabama has a written protocol for case-related interviews of key informants on every case and case-specific exceptions to conducting interviews. Lastly, Alabama also has a written case elimination protocol.

There are a few needs which Alabama is coordinating with the Children's Bureau to address in preparation for CFSR Round 4. Alabama does not currently meet Criterion 1A and 18 regarding training of additional adjunct reviewers and QA staff or the feedback loop for all review participants of questions regarding the application and use of the OSRI. Alabama is currently developing both the training and feedback loop to ensure Criterion 1A and 18 are met more than 6 months before Round 4 CFSR. Criterion 2A, 28, 2D, and 2E still must be established, implemented, and verified. The State QA Unit is in the process of coordinating with its Data Analysis Unit regarding the provision of uniform sampling process and methodology in Criterion 2.

4. Systemic Factor: Staff Training

The Office of Child Welfare Training (OCWT) is responsible for training social work and supervisory staff

in county departments in the basic child welfare skills curriculum. The OCWT unit consists of 6 trainers and a Program Manager.

OCWT provides initial classroom training for all new child welfare workers and supervisors, provides train the trainer sessions to staff, foster parents, and child placing agency providers allowing them to train prospective foster and adoptive parents across the state.

Initial Staff Training

Striving Toward Excellent Practice (STEP) is the current curriculum for new child welfare worker training. STEP: Foundations is the initial training module, and all new child welfare staff are required to attend this training. Staff are enrolled into this training upon their employment, and this is managed through the online Learning, Education, and Training System (LETS). There are additional modules in which staff can be enrolled by their supervisors/directors depending on their unit assignments within the county. These modules include Intake, Investigations, Case Management, and Adoption. Some modules have pre-requisite requirements before staff can be enrolled. Workers can be registered to attend one or all these modules depending on their assigned responsibilities and the decision of county management. Outlined in the table below are the number of sessions and participants that have attended each module thus far in FY 2024.

TRAINING	NUMBER OF SESSIONS	NUMBER OF STAFF	NUMBERS OF COUNTIES
	DURING FY24	TRAINED DURING FY24	WITH STAFF
	(OCTOBER-JUNE 2024)	(OCTOBER-JUNE 2024)	ATTENDING
STEP FOUNDATIONS	17	228	42
STEP INTAKE	7	89	32
STEP INVESTIGATION	10	116	38
STEP CASE	10	102	40
MANAGEMENT			
STEP ADOPTION	7	27	19

STEP allows workers to understand the core concepts of work with families (engaging & joining, giving feedback, genuineness, respect for cultural differences, understanding the cause of abuse & neglect). It does not prepare them quite as well for the concrete, hands on piece of the work, such as determining appropriate response times, how to assess a situation to determine safety and take actions to ensure safety, determining appropriate referrals to other agencies, gathering, analyzing, and organizing information to create a professional assessment of a family. OCWT is partnering with Real Academy in creating an updated training curriculum for new child welfare workers. This training will include classroom training related to child welfare concepts, policy, and practical day to day application of policy in child welfare activities. Simulated learning experiences will be included to allow child welfare workers to practice these newly learned concepts in a controlled environment and received feedback on their performance. Upon implementation of the training program, an evaluation component will be included, following up with workers and their supervisors at specific time periods after training completion, to assess the effectiveness of the training program in providing basic skills and knowledge needed for new workers to perform their job duties. Data regarding timeliness for new workers to complete initial training will also be captured.

On-Going Staff Training

Ongoing training for employees will be offered in collaboration with several vendors and SDHR Field Administration office. Training will be offered in a classroom setting and via LETS. Ongoing training topics will include but is not limited to: Family Violence and Safety in Child Protective Services, Supervisor Training for Foster Care & Resource Supervisors, Permanency Conference and Child Protective Service training. Ongoing trainings will be held to ensure that all staff maintain the needed skills and competencies to be effective in assisting children and families to achieve positive outcomes.

Course	# Complete	# Incomplete	Total	% Complete
Active Shooter	3681	13	3694	99.65%

ADA	1403	16	1419	98.87%
Confidentiality	3653	19	3672	99.48%
Emergency Duties	3679	23	3702	99.38%
Facilities Safety	3670	25	3695	99.32%
Threatening Behavior				
Safety	3635	26	3661	99.29%
Language Assistance	1255	22	1277	98.28%
TCM/IV-E	1331	29	1360	97.87%
Behavioral Services	1417	15	1432	98.95%

Foster and Adoptive Parent Training

All prospective foster family home/adoptive resource applicants must attend and successfully complete Trauma Informed Partnering for Permanence and Safety (TIPS) or Deciding Together before receiving approval as a foster family home/adoptive resource. The purpose of TIPS/Deciding Together is to provide prospective foster parent/adoptive resources with an understanding of the kinds of issues and situations they will need to manage as foster parent/adoptive resources. TIPS/Deciding Together is a mutual process for both the prospective foster parent/adoptive resources and the county's resource staff to jointly assess the applicant's current parenting skills and the ability to develop the skills necessary for successful fostering/adopting. TIPS has a thirty (30) hour preparation component held over ten (10) weeks which also satisfies the Minimum Standard requirements for thirty {30} hours of pre-service training. Deciding Together, a derivative of TIPS, is a one-on-one in-depth home study process for families who cannot participate in group meetings because of their schedules or there are not enough applicants to conduct a group in a county/region. Deciding Together requires at least seven (7) family consultations, and the worker and family will need to establish a schedule.

Co-Leader Training participants are surveyed at the end of the training course. Alabama recognizes there is a

need to develop a survey for both county staff and providers as well as foster/adoptive parents to be completed approximately 6 months after their initial placements to determine the effectiveness of TIPS and how well the training prepared them for placements.

The Office of Child Welfare Training provides Leader Certification Training in Trauma Informed Partnering for Permanence and Safety (TIPS) for Prospective Foster/Adoptive Parents to county staff and foster parents and to qualified staff of licensed child placing agencies who will lead groups of foster/adoptive applicants through the process leading to licensure or approval. The Office of Child Welfare Training continues to partner with other certified "Trainers of Leaders" to deliver the leader certification training. TIPS/Deciding Together certification is another curriculum designed for use with foster/adoptive families and is delivered by the Office of Child Welfare Training. Deciding Together is a foster/adoptive preparation and selection process designed for use with individuals/families whose geographic location or circumstances of employment prohibit attendance at the 10 weeks of group meetings included in TIPS.

Refer to the training planfor additional information on staff training.

5. Systemic Factor: Service Array

Alabama DHR is committed to expanding the service array and developing quality services that can be accessible to children and families statewide. The University of Alabama at Birmingham Family Wellness Court combines therapeutic interventions and treatment with personal responsibility and accountability to positively impact the recovery, reunification, permanency and safety of children, parents, and families. This program serves parents with Substance Abuse Disorder who have either lost custody of their children or are at risk of having them removed. County DHR staff and Family Wellness Court case managers collaborate to deliver individualized services tailored to the needs of each participant and family. The program provides case management services, peer recovery supports, and substance abuse assessments and interventions.

The Alabama Child Welfare System embraces the philosophy of service delivery in home-based or community-based settings, while maintaining the child in the most appropriate environment. If there is an

incident of maltreatment, a determination must be made to see if it's in the best interest of the child to remain with his/her family or to be placed in an alternate setting. If there is a safety threat present but the child can remain in his/her home safely, services must begin immediately.

Alabama continues to utilize Intensive In-Home Services (IIHS). The services are available in all 67 counties and the number of slots to serve families increased. There are currently 661 IIHS slots statewide and there is not a waitlist. Families can receive services in the county in which they reside. As of December 31, 2023, 421 families were being served through IIHS programs around the state. The IIHS services focus on achieving the outcome of successful permanency for children in a family setting through either family preservation or reunification programs utilizing evidenced-based programs. These programs have the flexibility to design individualized services that are family-driven and youth/child focused. Services are customized for delivery in the least restrictive manner. Programs are in areas with a high concentration of families in need of services to address their safety and stability. Services for children/youth are recommended through the ISP process. The ISP team determines the needs of any child and family. The ISP team is led by the county DHR office and partners with others, including the child/family and others from the community, to determine which providers can best meet the child/family needs, with an emphasis on out of home care. The Multi-Dimensional Assessment Tool{MAT) is completed on children whom the county is referring to Therapeutic Foster Care and Moderate providers to determine the most appropriate level of care. The county office provides information to the MAT assessor around the child's needs. The information provided includes a current psychological with a DSM Axis I diagnosis, a comprehensive family assessment, a review of behaviors occurring within the last 30 days, and a summary of the child's needs. If a child is placed in Therapeutic Foster Care or in an Intensive residential placement, a review MAT must be completed every 9 months. If a child is placed in a Moderate placement, a review MAT must be completed every 6 months. There is a statewide ability to provide accessible and linguistically responsive services using translators and interpreters as needed for child welfare activities such as child abuse/neglect assessments and general service intake matters. The Department has recently released RFPs

requesting additional providers for interpreter/translation services. There is a gap in the number and accessibility of direct service providers (e.g., private therapists, mental health professionals, etc.) who speak the language or dialect of children and families, which impacts the capacity to provide individualized services, but counties are instructed to use interpreter services in the provision of those services. In terms of general practice delivery, staff demonstrate cultural sensitivity to the diverse, primarily Hispanic, populations. The development/use of a culturally competent framework or model of practice, provided through training, and reinforced through ongoing supervision would better promote statewide responsiveness.

The Resource Management Division monitors all contract provider services. The Request for Proposal {RFP) is utilized for all service provisions procured in the state of Alabama unless there is an existing interagency agreement of Memorandum of Understanding (MOU) authorized by the Commissioner. The RFP process includes a review of each proposal submitted by the potential providers and grading of each proposal by select county and state office staff. The scores are submitted to the Office of Procurement and a selection process is used to determine the awarded contracts. The sites are located where there is a high concentration of families needing services to address their safety and stability issues. Alabama continues to work on individualizing services for children and families. The gaps in services are determined by length of stay, discussion with counties and trends/issues they see, and reviewing data regarding placements. Alabama collaborates with Department of Mental Health to develop services for youth aged 17-20 who are mentally ill and behaviorally challenged and children with a diagnosis of autism spectrum disorder, have an IQ under 70, and have behavioral challenges at home and in the community (this area of concern will be addressed in the 2025-2029 CFSP as goal 3). The Department of Mental Health has developed intensive home-based services for children from birth to age 20 with autism spectrum disorder or autism spectrum disorder with co-occurring intellectual/developmental disabilities. These services include intensive care coordination, therapeutic monitoring, behavioral support, in-home therapy, family support, and peer support provided to the child in the setting in which the child resides or a community setting. During FY 24, 20 mental health centers around the state received funds for the development of new school based mental health programs or the expansion of existing school based mental health services. There are currently 115 school systems and 18 community mental health centers participating in the school-Based Mental Health Collaboration Program and a little over 11,000 youth have received services for the 2023-2024 school year, per the Alabama Department of Mental Health. This is an increase of 18 school systems participating in the program this year. A goal of this program is to ensure that children across the state have access to comprehensive mental health services, including early intervention, prevention, and treatment services. Services utilization is not captured in the case specific OSRIs or QRIs completed.

The data in the chart below is from Onsite reviews only.

Year	#Onsite Reviews	#Strengths	#ANI	
2022	5	5	0	
2023	15	11	4	
2024	8(through June)	7	1	

Percentage of Services Offered			
		PERCENT	
TYPE OF SERVICE	Number Offered	OFFERED	
Clothes/Shoes	2074	16.62%	
Baby Products	1515	12.14%	
Identification	1509	12.10%	
Transportation	1311	10.51%	
Individual Psychoeducational Services	1136	9.11%	
Drug Screening/ Assessment	783	6.28%	
Sitter Services	549	4.40%	
Diagnostic Testing	634	5.08%	
Family Counseling	488	3.91%	

Gifts	377	3.02%
Medically Fragile Payments	394	3.16%
Other	357	2.86%
Child Day Care	337	2.70%
Medication	145	1.16%
Food	174	1.39%
Medical Treatment	129	1.03%
Mental Health Consultation/Coord.	121	0.97%
Individual Counseling	263	2.11%
Individual Family Support	160	1.28%
Enhanced Foster Care Services	20	0.16%
TOTAL	12,476	

^{*}Note: Total reflect the number of services that are documented within the FACTS system. Other services including free and/or contract services may not be represented in the chart.

PLACEMENT RESOURCES

Therapeutic Foster Care and TFC with Enhanced Services: These providers continue to work with the Resource Management Division and counties in placing our children in need of TFC in the most appropriate settings. There are 10 providers of TFC in the state. There are not sufficient TFC homes willing to accept and maintain older teens/young adults and children with more significant behavioral/mental health issues.

Total Number of Children in TFC as of 12/31/2023	227
Total Number of Children in TFC-E as of 12/31/2023	122
Total:	349

Residential facilities are licensed and appropriately able to provide and/or access appropriate services for the children with greater needs than can be met in a foster family home setting. Congregate Care placements are being monitored in several ways. The Certificate of Need from a physician and concurrence from the ISP team, and a provider recommendation letter are all required for placement in intensive residential facilities. The Resource Management Division assists counties in locating appropriate placements through centralized intake. Approval by the Deputy Commissioner of Quality, the Deputy Commissioner of Family and Children Services and the Special Assistant to the Commissioner must be requested by the county director, the case must be staffed with the county director and approval must be given for the placement of children 12 or younger in basic or intensive placements. Family Services must also review and approve any TFC placement of a child aged 5 or younger. The Department is continuing to emphasize that discharge planning begins at the time of placement, so we can ensure that work is done to match children with the most appropriate, least restrictive placement as soon as it is appropriate based on the needs of each child.

SDHR FAMILY ASSISTANCE DIVISION-TANF

The SDHR Family Assistance Division administers programs pursuant to the Temporary Assistance for Needy Families (TANF) Block Grant. Services and benefits are provided consistent with the four statutory purposes of the Block Grant and encourage the care and support of children in their own homes or in the homes of relatives by furnishing temporary financial assistance and other services to strengthen and maintain family life.

Family Assistance (FA) Program

This is Alabama's time limited cash assistance program for low-income families with children. Adult recipients of FA and certain former recipients are also served by the JOBS Program which provides services and assistance with finding and retaining employment. Supportive services include assistance in overcoming barriers to employment, increasing marketable skills and employability, gaining and/or retaining employment to transition from welfare to work. The Department contracts with the Alabama Coalition Against Domestic Violence to provide services to TANF eligible clients who may be victims of domestic violence. Services are provided statewide under a program known as the Special Assessment, Intervention, and Liaison (SAIL)

Project. The SAIL program provides services to families involved with domestic violence to help them remove barriers to becoming self-sufficient in a safe manner. Services are provided through a Domestic Violence Specialist who conducts assessments, provide counseling, and assists with safety planning. Services are available as needed to all counties that do not have an on-site Domestic Violence Specialist. Referrals come from DHR programs and from the community. Alabama DHR has received lots of referrals coming from FA eligibility workers because of a domestic violence screening tool. The coalition assist participants acquire employment and provides financial assistance to low-income individuals.

Alabama Fatherhood Initiative (AFI)

The Alabama Fatherhood Initiative includes 20 projects statewide that are funded through a partnership with the Family Assistance and Child Support Divisions of State DHR and the Alabama Department of Child Abuse and Neglect Prevention/The Children's Trust Fund that provide a variety of services to custodial and non-custodial parents and legal guardians. During FY 2023, DHR funding provided Fatherhood services in 49 counties and served a total of 1,730 participants, 551 of whom were employed. The Department of Child Abuse and Neglect Prevention provides oversight through a minimum of three site visits to each site to ensure compliance. These visits include a document review of required credentials/training, followed by a programmatic visit and an annual financial review onsite. Locally, each program is required to form a network of public, private, non-profit, and faith-based organizations that work together to help custodial and noncustodial parents and legal guardians develop positive relationships with their children and to enhance their ability to support their children. These programs provide counseling, education, and employment opportunities. Each program is required to maintain a positive partnership with their county DHR and other community partners. Each group must meet quarterly with their local county DHR office and representatives from child support court in the counties that receive services. The local programs also report child support collection numbers, and the number of individuals served each month via a monthly reporting form. All programs report monthly to Auburn University as part of the evaluation component for programs funded by the ADCANP to ensure

that outcomes are being met.

The Fatherhood Programs are funded with TANF dollars through a MOU between DHR and ADCANP. All TANF Fatherhood Programs are funded through a competitive process. Each program focuses on workforce development and placement, parent education and support, case management, child support education and payment, and strengthening healthy relationships for families. Referrals are made through all DHR programs, community agencies, child support court, and self-referrals. Noncustodial and custodial parents and legal guardians are assessed immediately upon referral. Participants attend weekly parenting classes and workforce development components as directed by the program facilitator. These components are job readiness, job placement, GED classes, credential skills training, and other adult education and training components. Participants sometimes need additional referrals/resources for mental health, substance abuse, and vocational rehabilitation services. The goals are to help participants develop the skills needed to support their children financially and emotionally.

Family Service Centers

The Family Service Centers are administered by the Family Preservation and Support Services (FP/SS) Programs, funded by Title IV-B, Subpart 2, "Promoting Safe and Stable Families Act". Family Service Center sites are in targeted counties/communities where there is a high concentration of families in need of services to address their safety and stability issues. The location of the Family Service Centers is determined through the RFP process. Each center assesses the community and collaborates with DHR in developing programs that meet the needs of the community and focus on the prevention of Child Abuse/Neglect by providing educational services, job training, parenting, etc. Service interventions are based on the following set of beliefs about children and their families:

- Children belong with their families if they can live safely at home
- Most parents love and want their children
- Most maltreatment is an expression of an underlying, unmet need
- Most people can change

- All children need to experience permanency in their lives
- When children cannot continue to live at home, they still need community connections

Core services provided by Family Service Centers are based on a comprehensive assessment process that results in goals identified by the families. The goal of these services is to strengthen and empower families so they can meet the needs which led to the occurrence of child maltreatment. Case management services are provided as a part of core services to facilitate access and follow-up. The variety of quality assurance processes in place indicates that most of the centers are meeting community needs and enabling families to become safe and stable.

The Department is partnering with Family Service Centers to implement Workforce Development Programs at 25 FRCs across the state. Each center works with their county office to enroll people in the A-RESET program, which provides participants with a small stipend while they work with the center to improve employability through components such as work readiness and job search. Family Service Centers also utilized TANF funds to support eligible participants with a variety of services, including GED preparation, job training, parenting classes, relationship education, and emergency services.

The Department strives to provide services to children and families that are individualized based on the needs of the child/family. The assessment begins with information gathered in the comprehensive family assessment and is presented in the ISP with families. The Department's mission is to provide services to families when they need it, as frequent as needed and in a timely manner. There is funding available to all 67 counties to be used for the provision of individualized services authorized by the ISP team.

6. Systemic Factor: Agency Responsiveness to the Community

Alabama DHR is committed to engaging with internal and external stakeholders. Each county office has a QA committee with stakeholder representation and the State QA Committee has representation of stakeholders across the state that meet on a quarterly basis. The Office of Quality Assurance conducts approximately 15 county onsite reviews each year to evaluate the quality of services and the outcomes achieved by children and families. The Office of QCWP continues to conduct random case record reviews

with county supervisors across the state. The review tool used provides detailed information that will be beneficial to the supervisor to use during worker/supervisor conferences. These reviews give OQCWP the opportunity to work one-on-one with supervisors to help them understand how to engage and empower their works to produce family centered case work that is in line with policy. The Office of QCWP also provides support to supervisors across the state in structuring individual conferences with their workers. This is an avenue to support supervisors and their caseworkers to discuss needed services to address the underlying conditions of families that come to the attention of the Department. Those outcomes should be beneficial to staff retention, thus offering stability with families and community partners. The Alabama Department of Human Resources has continued with its process for community consultation through its quality assurance operations. Birth parents, relative caregivers, and youths are interviewed during OSRIs and QRIs when appropriate. The OSRIs are completed during county onsite reviews by the State QA unit in conjunction with county staff that has been trained in the OSRI process and QRIs are completed by the local QA committees. The OSRI results from county onsite reviews are shared with county directors, DAS, and county QA committees. The QRI results are shared with the county director, supervisor, and worker. Birth parents, relative caregivers, and youths are also provided an avenue to give input through satisfaction surveys and each county DHR has an independently functioning QA committee. While each county QA committee completes QRIs to measure and monitor outcomes for children and families, it is an expectation that each committee also complete stakeholder interviews annually to measure and monitor systemic issues. Stakeholders interviewed include juvenile court judges, juvenile probation officers, foster parents, law enforcement, education personnel, service providers including mental health and child advocacy centers, attorneys, and Guardians-ad-litem, and

Agency staff. Information and any resulting recommendations from OSRIs, QRIs, and stakeholder interviews are provided to each county department to strengthen their practices toward better outcomes.

7. Foster and Adoptive Parent Licensing, Recruitment and Retention

The department's licensing standards are outlined in policy to ensure that state licensing standards are applied

equally to all licensed or approved foster family homes in the state. Licensing checklists developed from policy are available for use by resource workers. To improve functioning, the department plans update these checklists and distribute them to all counties for use during initial and semiannual reviews as well as provisional foster family home approvals. The updated checklist will include a list of all licensing requirements, required documents, outline timeframes for approval, reviews, and re-approvals. These checklists will also outline foster family continuing education requirements and provide a list of approved CE activities. Updates to current checklist will assist in ensuring that state standards are applied equally across all jurisdictions and to ensure that provisional foster family home approvals are completed in compliance with state policies. The Department and contracted providers still train, assess, and approve traditional and therapeutic foster homes according to the Minimum Standards for Foster Family Homes. All foster homes in the state are approved by any of three entities. The county DHR office may approve traditional foster homes as well as kinship homes located in their specific county. Contract entities offering Therapeutic Foster Care (TFC) will approve all homes providing services under the agency's purview.

Child Placing Agencies (CPAs) may approve foster homes for private placements, DHR placements, or a combination of private/OHR placements. CPAs must ensure compliance with Minimum Standards for Foster Family Homes. The Department's Resource Management Divisions completes at a minimum 2 site visits annually per licensed provider to ensure Minimum Standards are followed. There has not been any license suspended or revoked in the last three years. If the CPA licenses TFC homes, the Alabama Therapeutic Foster Care Manual must also be followed. Residential care facilities must comply with the Minimum Standards for Residential Child Care Facilities. Child Placing Agencies are reviewed by SDHR Resource Management Division at a minimum twice a yearly for compliance.

Licensing site visits are facilitated and, if there are issues noted, a deficiency letter with the completed site visit report is sent to the provider with the expectation of the provider sending a plan to correct the deficiencies or proof that the deficiency has been corrected. The Resource Management Division provides the provider with a list of all deficiencies, a copy of the site visit report, and the date that a

response is expected to be received from the provider. If the provider refuses to comply with correcting the deficiencies, then a corrective action plan may be implemented.

Resource Management Division's Office of Licensing will review initial, or renewal applications and all supporting documentation provided by providers to determine the next actions to be taken. Resource Management conducts announced and unannounced visits for contracted and licensed providers.

The Office of Licensing provides technical assistance, consultation, training, and interpretation of the Minimum Standards to prospective and existing providers. The Office of Recruitment and Home Care provides the same for traditional foster homes and kinship related homes.

The Department maintains an Office of Criminal History that ensures compliance with applicable federal regulations. Criminal History Check letters of Suitability are on the Resource Record Review checklist. Alabama Bureau of Investigation (ABI) and Federal Bureau of Investigation (FBI) criminal record checks and Central Registry Child Abuse/Neglect (CAN) clearances shall be completed for each foster parent, adoptive parent, and staff members of child placing agencies and residential childcare facilities. The results of the criminal history checks must be received and deemed suitable prior to approval of foster care and adoptive parents. All applicants and holders of a childcare license or six-month permit, all applicants for employment in a paid or voluntary position, and all current employees in paid or voluntary positions must be suitable and of good moral character to operate or work in a childcare facility and child placing agency. Any staff family members living in the home or visiting overnight in the children's living units shall also be of good character and suitability and as such, a criminal background check shall be obtained for these persons as well. Approved foster homes are reviewed at least annually with documentation provided to the state office by each County Director indicating full compliance. As it relates to changes in households and new criminal charges within the licensing periods, the licensee shall inform the Department of any criminal convictions and criminal charges involving the licensee, household members, substitutes, caregivers, domestic workers, and other persons who have contact with the children or unsupervised access to the children, which occur after a license/permit is obtained. Such reports shall be

made within 24 hours and followed by a written report within five (5) days. This information shall be kept on file by the Department. Alabama DHR ensures the safety of foster care and adoptive placements by working collaboratively with community partners. In addition to DHR, law enforcement, the courts, mental health agencies, physicians, school, day care centers, medical facilities, and public health agencies will have occasions to observe the results of child abuse and neglect. If safety issues are identified in a foster home, they are assessed immediately, and dispositions are made within 30 days. When children have been placed in an adoptive home and report that they were abused or neglected while in a previous placement or in their birth parents' home, the county department receiving the report shall notify SDHR Office of Adoption.

The Office of Recruitment and Home Care Support (R&HCS) provides support to all 67 counties. The Department's CCWIS system captures demographic information regarding children in care such as the reason they entered care, age, race, gender, and school system. Information is pulled from this system and utilized to recruit in specific areas. Counties submit recruitment plans which are reviewed by Recruitment Consultants to ensure that strategies are targeted to meet the child characteristics and of the children in care in their county. The same data regarding child characteristics are used to develop the states recruitment plan. For example, information regarding the school system of foster parents can be matched to a foster youth's original school of origin. This information is used to apply best interest determinations when working with local education agencies. State office staff collaborate with our county offices to support their efforts related to recruitment and retention by participating in recruitment efforts at sporting events, festivals, and community events that families frequent. Specialists are responsible for responding to each assigned county's Weekly Recruitment Tool (WRT), scheduling Trauma Informed Partnering for Permanency and Safety Training (TIPS) and reviewing county specific data for measurable outcomes in their annual recruitment plans. The Office of Recruitment and Home Care Support Staff also offer training, services, and supports to our foster parents. The Office of Adoption partners with several stakeholders in public awareness activities and in their efforts to recruit additional foster and/or adoptive families. These stakeholders include adoption, foster care and ILP staff, members and volunteers of heart Gallery

Alabama, Children's Aid Society's APAC program, Wendy's Wonderful Kids Recruiters and the Alabama Foster and Adoptive Parent Association. Geography is not a barrier to achieving permanency for children in the custody of the Department. The children with TPR and a goal of Adoption No Identified Resource are included in photo listing web sites and Alabama receives and responds to any inquiries. The inquiries on that site are a good mix of both in-state and out-of-state families. The inquiries received and responded to through www.adoptuskids.org are primarily from out-of-state families.

The expeditious processing of referrals will allow permanency for children in a timely manner and reduce delays which are a barrier to permanent placement of children. We will continue to monitor workflow of staff. Tracking is accomplished through internal spreadsheets that are maintained. Barriers to processing include case crises, worker absence, and increased workload. The chart below shows the inquiry data for the full calendar year for 2022 and 2023.

Full Calendar Year 2023 (Jan 1 - December 31)	2491
Full Calendar Year 2022 (Jan 1 - December 31)	2390

Alabama Foster/ Adoptive Parent Association

The Department has maintained a strong partnership and contract with the Alabama Foster/Adoptive Parent Association to support improved outcomes for children through joint training sessions, regional meetings, and various recruitment activities.

Additional information on the diligent recruitment of foster and adoptive parents can be found in Alabama's Targeted Plans section.

III. Plan for Enacting the State's Vision

Introduction

The Alabama Department of Human Resources will help families receive the least disruptive services they need, when they need them, and for only as long as they need them in order to maintain children in or return them to a safe, stable home. Alabama's plan for enacting the State's vision has three strategic priorities. The three priorities describe strategies Alabama will implement to improve safety, permanency, and well-being outcomes.

Alabama will collaborate internally and with external stakeholder that includes the court system, providers, tribes, and those with lived experience to develop and assess the implementation and achievement of the goals for the 2025-2029 CFSP.

The state meets regularly with each of these groups and will continue to receive input from them toward the development of the current goals and any revision that might be necessary through 2029. Additional information on the goals can be found in Appendix K-2025-2029 CFSP Strategic Plan.

IV. Services

A. Child and Family Services Continuum

Alabama continues to utilize Intensive In-Home Services (IIHS). The services are available in all 67 counties and the number of slots to serve families increased. There are currently 661 IIHS slots statewide. As of December 31, 2023, 421 families were being served through IIHS programs around the state. The IIHS services focus on achieving the outcome of successful permanency for children in a family setting through either family preservation or reunification programs utilizing evidenced-based programs. These programs have the flexibility to design individualized services that are family-driven and youth/child focused. Intensive in-home services are available to families for longer periods of time th.an 4-6 weeks as previously allowed in in Continuum of Care and FOCUS programs. All services are customized for delivery in the least restrictive manner. Programs are in areas with a high concentration of families in need of services to address their safety and stability. Alabama's child and family services continuum includes prevention and awareness to the public, intensive in-home services which consist of family preservation for families with open child protective services case, reunification services for those families with children placed in an out of home placement, adoption placement and post placement services.

Alabama DHR partners with The Children's Trust Fund, an agency dedicated to promoting resources and services that prevent child abuse and neglect and improve overall child well-being in the state. Children's Trust Fund organize child abuse prevention month activities yearly in April. Children's Trust Fund prevention programs include Parent Education and Home Visiting, Respite care, Fatherhood Program and Youth Focused Programs.

Child Abuse and Neglect CA/N) Intake is designed to receive information from the community about children who are allegedly abused/neglected. During this process, child welfare workers collect, analyze, and make decisions about the intake information received to determine if the information meets DHR's statutory obligations described in the Code of Alabama 1975. When the intake information reveals children may be at risk of maltreatment the information is considered a CPS Prevention Referral and evaluation of the

child/family situation is needed. The CPS Prevention process is designed to determine whether on-going protective services are needed to prevent child maltreatment. During the CPS Prevention process, child welfare staff assess the parent/primary caregiver's protective capacities to sufficiently protect the children.

	FY2020	FY2021	FY2022	FY2023
CANs Received	26311	26980	27786	25790
Completed CANs	27123	26556	27249	26824
CPS Cases open on 9/30	5124	4656	4373	3842
Preventions Received	9927	9323	9864	9510
Completed Preventions	9145	8181	8567	8487

Permanency planning is a case planning process for children in the child welfare system. It includes It includes taking systematic, prompt, purposeful, and decisive action to maintain children in a permanent and stable living arrangement with their own family, or when that is not possible, to secure a permanent living arrangement through placement with relatives, an adoptive family, or another planned permanent living arrangement. Permanency planning shall be implemented through the ISP process as described in Individualized Service Plan Policy. Decisions impacting children's permanency status are made in a series of steps involving the children's/family's ISP team members and the juvenile court.

Code of Alabama 1975, \S 44 – 2 – 20, Interstate Compact on the Placement of Children (ICPC) provides for Alabama, Department of Human Resources, to be the "appropriate public authority" to administer the "Interstate Compact on the Placement of Children." This compact governs both children brought into, and children going out of state and is binding in all fifty (50) states, including the Virgin Islands and the District of Columbia.

Adoption supports the concept that children are to be free from maltreatment when that is not possible in their birth families. Timely achievement of adoption provides a child with commitment, stability, and feelings of belonging which make for a smooth and successful transition into adulthood. AL DHR uses the Families 4 Alabama's Kids (AL-KIDS) to facilitate matches between persons interested in adoption and children who

are legally free for adoption.

Adoption services provided on behalf of a child who is legally free for adoption include recruitment and study of prospective adoptive homes; preparation placement of the child; supervision of the child's placement; other post-placement services; legal services (e.g., reporting to the court and supervision of a child for whom an adoption petition has been filed in Probate Court); purchase of adoption placement services for children with special needs; and information and referral services.

Transitional and independent living programs provide youth who are in the Department of Human Resources (DHR) custody and residing in foster care with multiple opportunities to prepare them to live independently, self-sufficiently, and integrate into society. The goal of transitional and independent living programs is to provide older youth in foster care with the support, instruction, and opportunities to practice the necessary independent living skills and acquire the knowledge to become productive adults.

B. Service Coordination

There is a statewide ability to provide accessible and linguistically responsive services using translators and interpreters as needed for child welfare activities such as child abuse/neglect assessments and general service intake matters. There is a gap in the number and accessibility of direct service providers (e.g., private therapists, mental health professionals, etc.) who speak the language or dialect of children and families, which impacts the capacity to provide individualized services. In terms of general practice delivery, staff demonstrate cultural sensitivity to the diverse, primarily Hispanic, populations. The development/use of a culturally competent framework or model of practice, provided through training, and reinforced through ongoing supervision would better promote statewide responsiveness in this regard. Services for children/youth are recommended through the ISP process. The ISP team determines the needs of any child and family. The ISP team is led by the county DHR office and partners with others, including the child/family and others from the community, to determine which providers can best meet the child/family needs, with an emphasis on out of home care. The Multi-Dimensional Assessment Tool (MAT) is completed on children whom the county is referring to Therapeutic Foster Care and Moderate providers to determine the most appropriate level of care. The county office provides information to the MAT assessor around the child's needs. The information

provided includes a current psychological with a DSM Axis I diagnosis, a comprehensive family assessment, a review of behaviors occurring within the last 30 days, and a summary of the child's needs. If a child is placed in Therapeutic Foster Care or in an Intensive residential placement, a review MAT must be completed every 9 months. If a child is placed in a Moderate placement, a review MAT must be completed every 6 months. The Resource Management Division monitors all contract provider services. The gaps in services are determined by length of stay, discussion with counties and trends/issues they see, and reviewing data regarding placements. Current gaps that are seen are services for youth aged 17-20 who are mentally ill and behaviorally challenged and children with a diagnosis of autism spectrum disorder, have an IQ under 70, and have behavioral challenges at home and in the community. The Department of Mental Health has developed intensive home-based services for children from birth to age 20 with autism spectrum disorder or autism spectrum disorder with co-occurring intellectual/developmental disabilities. These services include intensive care coordination, therapeutic monitoring, behavioral support, in-home therapy, family support, and peer support provided to child in the setting in which the child resides or a community setting. During FY 23, 20 mental health centers around the state received funds for the expansion of school based mental health services. There are currently 97 school systems and 18 community mental health centers participating in the school-Based Mental Health Collaboration Program, per the Alabama Department of Mental Health. This is an increase of 17 school systems participating in the program this year. A goal of this program is to ensure that children across the state have access to comprehensive mental health services, including early intervention, prevention, and treatment services.

Alabama Children's Justice Task Force continues training that involves Family Violence and Safety in Child Protective Services, Substance Abuse Assessment Training and Multidisciplinary Team Building Training. The Family Violence and Safety in CPS provides basic information on the dynamics of Family Violence and how it impacts children's lives. The Substance Abuse Assessment Training focus on identifying substance misuse in the home and assessing child safety in households where substance misuse is identified. The Multidisciplinary Team Building Training strengthens the relationships among team members and increase the effectiveness of the teams.

Alabama Department of Child Abuse and Neglect Prevention secures resources to fund evidence-based community programs committed to the prevention of child maltreatment, advocates for children and the strengthening of families.

C. Service Description

Alabama's partnership with Alabama Pre/Post Adoption Connection(APAC) is used to prepare our children and families for adoption finalization. All our adoptive families have access to trainings and access to counseling through this partnership. Our Wendy's Wonderful Kid Recruiters also familiarize themselves with community resources in their assigned regions to help families access needed resources. Gaps in resources are usually related to limited accessibility in certain areas, the increase in telehealth services has been beneficial to children in these areas. For additional information on service description, please refer to section titled Service Array.

D. Stephanie Tubbs Jones Child Welfare Services Program

Wendy's Wonderful Kids

The Dave Thomas Foundation for Adoption (DTFA) award grants to public and private adoption agencies to hire adoption professionals who implement proactive, child-focused recruitment programs target exclusively on moving America's children who have been waiting the longest out of Foster Care. Wendy's Wonderful Kid Recruiters maintain an active caseload of twelve to fifteen children and use the Child-Focused Recruitment Model to match the children with adoptive families.

The emphasis of the Child- Focused Recruitment Model is using a case dig method to go back and revisit every person with the child has a prior relationship. The Recruiter uses email, letters, phone calls to reach out to the people identified to try to reconnect the person with the child if appropriate. Even if the adoption is unable to finalized prior to the child reaching adulthood, the individual has reestablished connections that can last a lifetime. We have seen children reconnected with family members, prior caseworkers, and previous foster parents. These relationships give the children a sense of purpose

and acceptance. The families that can proceed with adoption go through the State's licensure requirements to be a State approved adoptive home. Alabama continues to have success with the DTFA grant and has been granted permission to expand the grant and now has seven recruiters. Wendy's Wonderful Kids Recruiters are responsible for serving children who are legally free for adoption and have a permanency plan of either Adoption with No Identified Resource (ANIR) or APPLA (but maintain a desire to be adopted). With the expansion, approximately eighty-four children are assigned on the Wendy's Wonderful Kids caseload. The Recruiter is responsible for building rapport with the children during monthly face-to-face visits and using the information they learn during visits to recruit an adoptive family that can meet the child's needs. During the face-to-face visits Recruiters are building the children's self-esteem and helping them become ready for adoption through education about mental-health, permanency, and social skills, and relationships. Alabama has experienced some barriers which includes family members that are deemed appropriate for the child not wanting to move forward with licensure. Some of our teenagers have experience failed adoptions before, and do not want to consider being adopted again so they advocate for the permanency plans to be changed so active recruitment does not continue. We are overcoming these barriers through better education and training through our Pre/Post Adoption Connection Services (APAC) and using tools to unpack the reasons for hesitancy regarding adoption of our teens. Alabama will explore placement stability with the 2025-2029 CFSP.

1. Services for Children Adopted from Other Countries

The Alabama Department of Human Resources contracts with Children's Aid Society to offer Alabama Pre and Post Adoption Services (APAC), a statewide program designed to stabilize adoptive families, prevent disruptions, and enhance the overall well-being of all adoptive children including those adopted internationally.

Once a particular child has been identified for a family, APAC's adoption navigators can provide placement support and help the family understand more about the child or children they may adopt. APAC staff discuss the child's history with the family to ensure the family is equipped to meet the child's

needs. APAC's counselors can work with the family before placement to address their fears and expectations and discuss how they will meet the child's needs. Once the child is placed, counselors can help the family adjust and address any issues that arise. APAC conducts a comprehensive psychosocial assessment with families before they receive counseling services. The same adoption-competent clinician who will be providing counseling meets with the family weekly at least three times. Meetings can be held in the family's home, by telehealth, or in the office. The counselor gathers information to complete a standardized template that examines the reason the family sought support, the child's functioning and history, the family's support system, parenting style, and more. At APAC, parents are viewed as the guiding force behind the assessment, so counselors meet with them alone twice before meeting with the family together. After the third meeting, the counselor completes a treatment plan that was developed in collaboration with the family/child that guides the counseling to be provided and identifies other services that may be helpful.

APAC's master's level, certified adoption-competent clinicians provide counseling to support adoptive families before finalization and after. Counseling is designed to provide guidance, coping strategies, and emotional support as families navigate the intricacies of adoption. Sessions-held in the APAC offices, in the family home, or by telehealth, based on the family's preferences-can be with the parents alone or with the entire family. Much of the focus of counseling is on teaching parents to be a therapeutic resource for the child, with counselors providing information about how parents can stay regulated and be the agents of change. Services typically last three to six months but can be extended or restarted if the family situation requires it.

APAC counselors often help families navigate or coordinate services as part of counseling services. They review the treatment plan with families every six months. The APAC team is available **Monday through**Friday, from 8:30 a.m. to 5:00 p.m. Counselors working with families often check email or phone after hours and on weekends and respond quickly.

APAC offers crisis intervention sessions for families facing immediate challenges or uncertainties

regarding their adoption. Staff guide families to emergency services and can meet with families more quickly or more often in times of crisis.

APAC offers in-person parent groups that meet in each region of the state, providing education and social interaction for adoptive families and prospective families who have an approved home study. Groups are jointly facilitated by adoption navigators (who serve families before placement) and counselors (who serve families before and after finalization). Facilitators plan for a specific topic each month but allow for flexibility to let the parents drive the direction of the discussion and to provide each other with peer support. APAC also offers children's groups, with discussion topics for older children (such as handling questions about adoption, fairness in the family, or sibling issues) and activities for younger children. APAC also hosts a private, closed Facebook group through which parents can support one another. As part of the counseling service, APAC clinicians helps families understand and address educational challenges. Counselors can attend school meetings with families if they request it.

APAC staff work with the families they serve to develop their own support network, including through support groups or Facebook groups.

APAC offers virtual and in-person training sessions for parents and professionals on a variety of adoption-related topics. The agency hosts an annual statewide conference for Alabama DHR staff and other adoption and foster care professionals. They also host two annual Train-the-Trainer workshops for professionals to help them provide more effective mental health services to the entire adoption community.

APAC special events are informal networking opportunities where adoptive families connect with one another, have fun, and learn about APAC's services. At least one event is held in each region each year. Each year, the program hosts Camp APAC, a four-day camp for adopted children and their siblings ages 9 to 18. Campers can spend time with other children who have similar backgrounds, while parents enjoy a few days of respite.

2. Services for Children Under the Age of Five

Source Child Maltreatment 2022 (hhs.gov)

In reviewing data, children ages 0-5 enter care due to substance misuse by parents at a rate almost double any other entry reason. Based on that information, Alabama has partnered with Children's' Justice Task Force to create and present training for front line workers around substance abuse. We plan to continue our partnership in Jefferson and Jackson Counties with drug court.

According to the 2022 Children's Bureau Child Maltreatment report, Alabama had 545 Infants with Prenatal Substance Exposure (IPSE) in 2022. Two of those were in reference to Alcohol Abuse, 542 were for Drug Abuse, and 1 was screened out IPSE.

In Alabama, children ages 0-5 move to permanency at almost the same rate as they enter care. We know that as children age, their time in foster care increases. The Department continues to work to move the youngest children in out of home care to permanency as quickly as possible. Alabama believes that children should be raised in their family of origin whenever possible. Workers and the judiciary have been trained over the last year around the importance of establishing paternity as quickly as possible to begin assessing paternal as well as maternal relatives and we understand that permanency can be achieved by return to parent or relative placement more expeditiously than other permanency plans. The department has also conducted numerous trainings that have included the provisional approval in the beginning of an alleged dad's relatives. The FACTS system was updated to track return to mom, dad, maternal relatives, or paternal relatives so that we can begin to assess the effectualness of the prioritizing of establishing and engaging fathers and paternal relatives. Over the next five (5) years, there should be good data to update our progress and to track the time to permanency for each subcategory of parents or relatives.

As a state, Alabama dually approves our foster homes as approved to foster and adopt if appropriate, which eliminates the need to update the home study or approval to include adoption if that becomes the plan. In cases in which a child under 5 is in a foster home and the ISP team decides to seek TPR but the foster parents are not interested in adoption, the office of adoption is notified and immediately begins looking for a legal risk placement. A legal risk placement is an adopt only home who is open to taking placement of a child in which the department is seeking TPR or TPR is on appeal and the child is not legally free for adoption at the time of placement. There has been progress observed with the county staffing and as a

result work is being completed to continue expanding the staffing statewide to include children ages 4-10 without regard to the length of time in care. The average length of time in care for children discharged, aged 4-10 in FY 2023 was 17.98 months.

Children & Family Services partners with specific state organizations who serve children ages 0-5 and their families and work to address the developmental needs of the children. Referrals are made to each of these agencies when working with families who have young children.

- Head Start Child Development and Early Learning
- Women, Infants and Children, WIC (supplemental nutrition program for pregnant women and their young children)
- Department of Child Abuse and Neglect Prevention/Children's Trust Fund- Programs: Cribs for Kids, Mentoring New Moms, and Jefferson County Pilot Project to Prevent Child Maltreatment, Baby Box
- Early Intervention (reviews developmental needs by utilizing a checklist for children from birth to age five)
- Wendy's Wonderful Kids (recruits for an appropriate match for foster care children under age five)
- Alabama School Readiness Alliance (receives appropriations for pre-K programs).
- Individual Service Plans
- Behavioral Analysts supports and assessments
- Protective Service Daycare
- Information and Referrals

Average Length of time in care	Months
for Children Exiting Care (Ages	
0-5) in:	
FY2021	13.94
FY2022	14.44

FY2023	14.7

Children Ages 0	Percentage of Children Ages 0-5 at Time of Entry		
FY 2023	37%	FY 2023	48%

Entry Reasons for Children Ages 0-5	
Drug Abuse (Parent)	52%
Physical Abuse	16%
Neglect	28%

3. Efforts to Track and Prevent Child Maltreatment Deaths

Child maltreatment fatalities reported to NCANDS are those children whose death has been reported to the department to have been caused by child abuse/neglect. Child death and near fatality reports are most often received from mandated reports such as medical professionals, medical examiners, corners, law enforcement and other community partners who are required to report suspected child abuse and neglect. Child death reports are taken and investigated per Alabama Child Welfare Policy. These allegations are investigated with the assistance of law enforcement and any other agency or individual that may have information related to the child's death. The State of Alabama Department of Human Resources Guidelines for Reporting Child Deaths and Near Fatalities requires that counties must notify the State DHR Office of Data Analysis within one working day following the receipt of child death or near fatality information. A standardized reporting form is utilized across the state that collects information required to be reported in annual NCANDS submissions. Office of Data Analysis staff monitor the completion of child death and near fatality investigations to determine which ones should be included in annual reporting. A unique data base is maintained to document and track child death and near fatality information across time. The circumstances of the child fatality are entered into our CCWIS system as a CAN report and

multi-disciplinary teams confer during this process. Multi-Disciplinary teams are composed of DHR staff, law enforcement, district attorneys, medical professionals, and county corners. Alabama receives reports of child deaths from many reporters including law enforcement, hospitals, and the public.

Whenever a child dies or there is a near fatality, and the department has had contact with the family within the last 12 months, the county department must complete a child fatality or near fatality form and send to management and legal at State DHR for review and monitoring of the case. The case is immediately reviewed by upper management to determine if the county has correctly assessed the allegations, safety threats to other children in the home and protective capacities of caregivers. These are reviewed periodically by management to discern any trends of inaccurate assessments.

Each county in Alabama also has a child death review team. County child death reviews must be completed in situations where a child death occurred due to alleged child abuse or neglect and the Department has any child welfare involvement with the child or the child's family within 12 months prior to the date of the child's death. The purpose of the child death review is to strengthen and improve future child welfare practice. The review should be comprehensive and evaluate system performance prior to the child's death. Any recommendations resulting from the review should be specific and focused solely on remedial efforts to prevent future deaths. The make-up of the county teams includes the county director or designee, the county QA coordinator, a county QA Committee member, a State Office of Quality Assurance Division's representative, and a Regional State Office Representative from the Family Services Division, Office of Administrative Record Reviews. This review process is to begin within 30 days of the receipt of a report of a child death unless good cause is established due to unusual or extraordinary circumstances. The review must include at a minimum a case record review and a meeting of the child death review committee. The review process consists of an objective discussion of DHR's involvement with the family and an analysis of the Department's performance as it relates to policy, procedure, services, and best practices. The final report should be completed within 90 days of the county department being notified of the child's death.

Alabama also has a State Child Death Review Team composed of 28 members. The Alabama Department

of Human Resources and the Alabama Department of Public. Health are two of the departments represented on the state team. This team reviews the circumstances and underlying factors of all non-- medical infant and child deaths to identify those deaths that could possibly have been prevented. The state team is responsible for coordination and efficient operation of the review process using the following causes of death: Sudden Infant Death Syndrome, Motor Vehicle Involvement, Fire Related Deaths, Suffocation Related Deaths, and Weapon Related Deaths.

Alabama has a Governor's Task Force on Infant Mortality which was created in 2017 to address the infant mortality rate in Alabama. In June 2018, the State of Alabama Infant Mortality Reduction Plan was adopted and allotted funding to combat infant mortality as a pilot program which included 3 counties {Montgomery, Macon, and Russell counties} that would focus on nurse visitation programs, safe sleep initiatives, utilization of a screening tool to identify substance use, depression, and domestic violence. According to the Alabama Department of Public Health, in 2022 the top three causes of death were: 1. congenital malformations(deformations and chromosomal abnormalities), 2. sudden infant death syndrome, and 3. Disorders related to short gestation and low birth weight, not elsewhere classified. The three leading causes of infant deaths accounted for 39.3% of infant deaths. The data below reflects the number and rate per 1000 live births.

Overall Infant Mortality Rate* (INFANT MORTALITY	2019	2020	2021	2022
ALABAMA 2018 (alabamapublicheaIth.gov)				
Montgomery	10.1	11.5	10.1	10.2
Macon	12.9	5.4	11.1	7.0
Russell	9.7	2.6	6.2	6.3
Alabama	7.7	8.5	7.6	6.7
Total Infant Deaths and Infant Mortality Rates by County*	2019	2020	2021	2022
Montgomery	32	36	31	30
Macon	2	1	2	1
Russell	8	2	5	5
Alabama	449	491	443	391

Data Source: Alabama Department of Public Health Amy. McAfee@adph.state.al.us and/or Alabama

Vital statistics https://www.alabamapublichealth.gov/healthstats/publications.html Requests for Data- vsdata@adph.state.al.us

E. Marylee Allen Promoting Sage and Stable Families

Family Preservation, Family Reunification, Family Support are services provided under Title IV-B, subpart 2 funding expenditures.

Family Preservation

One service provided via contract is Intensive In-Home Service (IIHS). These programs provide short term intensive in-home interventions in all 67 counties in Alabama to help alleviate situations and conditions within families where removal of children from the home is imminent or the plan is for the child to return home after being in foster care. Providers may serve families for 6-9 months and may request extensions from SDHR if additional service time is needed. Families also receive aftercare services for 90 days and are tracked at 3, 6, 12, and 24 months. There are 12 vendors who provide IIHS services in the state with a total of 661 slots which did not increase from 2023. In FY 23, an average of 428 families were served. As of February 12, 2024, there were 428 families receiving intensive in-home services with 256 receiving services for Reunification and 172 receiving services for Family Preservation. Children in need of services are provided services through our Investigation and Child Protect Services units. The needs of each family are assessed, and the services needed are implemented through the ISP process to help children be maintained in their own home or the home of a relative but not in foster care.

Family Support

Alabama provides family support to our residents through our partnership with the Alabama Department of Prevention of Child Abuse and Neglect. This agency funds nine Family Resource Centers through the Family Preservation and Support Services (FP/SS) Programs, funded by Title IV-B, Subpart 2, "Promoting Safe and Stable Families Act".

Family Resource Center sites are in targeted counties/communities where there is a high concentration

of families in need of services to address their safety and stability issues. Each center assesses the community and collaborates with DHR in developing programs that meet the needs of the community and focus on the prevention of Child Abuse/Neglect by providing educational services, job training, parenting, etc. This is an ongoing partnership with services that are continually adapting to the needs of the community. The Alabama Network of Family Resource Centers is hosting a series of Strengthening Families workshops across the state through the end of 2024.

Family Service Centers Data

1 st	Q	2 nd Q		3 rd Q		4 th Q		2023
DHR	Non- DHR	DHR	Non- DHR	DHR	Non- DHR	DHR	Non- DHR	Total
7	265	20	251	19	210	17	295	1084
23	62	86	18	58	11	52	12	322
17	1326	19	1994	11	1646	11	1890	6914
26	720	31	479	33	129	29	358	1805
2	245	0	319	0	84	0	262	912
5	1643	5	492	5	683	5	1038	3876
4	31	11	74	18	68	15	80	301
313	655	298	789	309	934	203	935	4436
DHR-2	26	Non-DI 9948	IR-	12	713	31	190	10,920
					•		·	30,570

Adoption Support

The Department employs seven (7) Adoption Placement Specialists who work with children who are available for adoption with no identified resource. These specialists actively seek out adoptive resources that can meet the specific needs of the children on their caseloads. They offer supports via calls and visits during the pre-adoptive process. They further provide links to services the family may need such as Alabama's Pre/Post Adoptive Connection (APAC) agency. These specialists also travel to for out of state visits and placements when an out of state resource is identified. Alabama partners with APAC to provide services to families that adopt, both preadoption and post adoption to include counseling, training classes, and general supports.

Alabama partners with the Heart Gallery Alabama to actively recruit for our waiting children. Children are provided with professional photo and video shoots to showcase their desires for a forever family.

Alabama policy provides that children who are in foster care and available for adoption can be adopted by their current foster parents. Foster parents are given priority when a child becomes available for adoption as the child already has an established relationship with that family. Supports and services are provided to the foster family by the local county workers as well as state office workers when necessary. These supports include monthly visits from their child's case worker, regular visits from the foster family's resource worker, and any services (e.g., therapy, medical needs, educational needs, etc.) the child would need to ensure the placement remains stable and to ensure the child's well-being.

1. Services Decision-Making Process for Family Support Services

The Alabama Department of Child Abuse and Neglect Prevention {ADCANP}, also known as the Children's Trust Fund (CTF), was created by the Alabama Legislature in 1983 to address child maltreatment. The ADCANP is the lead agency for federally funded Community-Based Child Abuse Prevention (CBCAP) programs as part of CAPTA. Partnership agencies are chosen by the "Request for Proposal" process.

The ADCANP partners with the Alabama Network of Family Resource Centers (ANFRC) to provide community-based supports and services to families and children. There are approximately 23 Family Service Centers located throughout the state with nine of Family Service Centers receiving funding from the Department. The FRCs are in areas where services are limited to those in the area which include a few rural counties. The centers values include stability for children, individualized services to families, strengths-based partnerships with families, collaborative approach with families and other agencies, a focus on equity for all, a localized approach to meet the individual needs of those served, prevention first, and a commitment to high quality operational standards.

Alabama's Network of Family Resource Centers offer services via the Strengthening Families strategy, which includes building 5 key Protective Factors: parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children. Along with these factors, family resource centers also offer workforce development including assistance in obtaining employment and/or GED certificates, arts/dance lessons, and housing assistance.

Centers are also able to make referrals to other local agencies if there are other needs or resources families may need that cannot be provided through the centers.

The Department collaborate with family resource centers to implement Workforce Development Programs at 25 FRCs across the state. Each center works with their county office to enroll people in the A-RESET program, which provides participants with a small stipend while they work with the center to improve employability through components such as work readiness and job search. Family Resource Centers also utilized TANF funds to support eligible participants with a variety of services, including GED preparation, job training, parenting classes, relationship education, and emergency services. DHR provides ongoing technical assistance to support the WFD programs. FRCs served 3,931 participants last fiscal year, with 61 earning GEDs, 1,157 gaining employment or improving their employment, and 1,100 attending parenting classes.

The Alabama Department of Child Abuse and Neglect Prevention (ADCANP) uses CBCAP funds to support various parent education and support programs. This includes two programs serving the underserved population of incarcerated mothers through prenatal and parent education classes, doula support, and opportunities for the mothers to stay connected with their children. CBCAP funds also support Children's Aid Society in providing the EPIC parenting classes to pregnant and parenting runaway and homeless youth through the Project Independence program, as well as providing the class in Spanish to parents in the Hispanic and Latino communities. The EPIC parenting classes include topics such as understanding children and their behavior, encouragement and self-esteem, and effective discipline. The Children's Aid society has offices in Birmingham, Huntsville, Mobile, and Montgomery.

Finally, CBCAP funds are used to support 7 HEARTS Respite programs located at United Cerebral Palsy Centers across Alabama. The HEARTs program which stands for Help Emergency and Respite Treatment Service is designed to provide respite care for families of children with special needs up to age 19. A voucher system enables parents to secure a caregiver of their choosing with payment by voucher reimbursement. CBCAP funds have been prioritized to support these HEARTS programs because we know

children with disabilities are at least three times more likely to be abused or neglected than their peers without disabilities, and they are more likely to be seriously injured or harmed by maltreatment.

Alabama also utilizes Intensive In-Home Services through the Family Service centers. These intensive services are available in all 67 counties of the state. Over the last year, the available in-home services slots remained at 661 with 428 families served. These services are geared toward family preservation or reunification in the home setting.

2. Populations at Greatest Risk of Maltreatment

Alabama recognizes that many factors contribute to the maltreatment of a child, parent functioning, child functioning, family dynamics and family support or outside stressors. In Alabama, children whose parents abuse substances can be at a greater risk for maltreatment. When infants are born who are substance affected, Alabama has the option of accepting a prevention to assess the situation and possibly provide services or accepting a child abuse/neglect report and assessing for safety in that way. All workers must complete a plan of safe care in those cases. Our Family and Children's Tracking System (FACTS) requires it as part of the case information prior to resolving the referral. In the past 12 months, 43% of all children entering care had Parental Drug Abuse among their entry to care reasons. When looking at children aged 0 through 5 that percentage is 53.97%. Alabama DHR partners with drug courts where available to monitor and court order parents into treatment. The courts and drug court give oversight to random drug screening as well as participation in recovery programs to help parents reduce the safety risks to their children. Alabama uses in-home and out of home safety plans when appropriate to lower the risk to children while still allowing the youngest of our children to bond with their parents because visitation is much less complicated when a safety plan is put in place. Intensive in-home services are also used in cases in which young children and substance affected parents are involved. These programs allow children to be placed back in their home with several visits a week to ensure safety. All these programs will continue in the CFSP 2025-2029. Alabama is working toward a better tracking system for referrals requiring plans of safe care through the data analysis unit. Representatives from Alabama DHR sit on committees for a variety of community partners that work with at risk families including the Governor's task force for Safe Sleep, Children's Justice Act Grantees Peer Group and Children's Policy Councils around the state. Alabama DHR also partners with the Alabama Department for the Prevention of Child Abuse and Neglect which funds regional Family Resource Centers to serve at risk families. Alabama has not seen any major shift in trends identifying those most at risk. The demographics of children in care align with the demographics of the state.

F. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

In Alabama DHR's caseworker visitation policy, Alabama DHR outlines the standards for the content and frequency of caseworker visits. This policy set forth that in person worker/child visits will occur every month with children in out-of-home care who are under the responsibility of the state. Alabama requires that children in intensive level program be seen twice per month at a minimum. The content of the visits is described in detail in this policy and states that visits should well-planned and focused on issues pertinent to the plans for the child and the visits ensure safety, permanency, and well-being of the children. Meaningful worker visits are professional consultative visits that are expected to provide opportunities for private discussion with the developmentally verbal child. Additionally, worker visits are to be of such substance and duration as to promote the following outcomes: monitor children's safety and well-being, assessment of the ongoing service needs of children, families, foster parents and the provisions of services in a timely manner, engagement of birth and foster parents in developing ISPs and involvement in ISP meetings, assessment of permanency options for the child, monitor family progress toward ISP goals and help children understand that their well-being is a priority to their caseworker. These monthly visits may be scheduled or unannounced and it is recommended that some be unannounced to have a more accurate assessment of the child's care and whether the child's needs are being met.

Caseworker visit grant monies have been utilized for iCAN county team meetings, iCAN Advisory Committee meetings and Alabama's Judicial Child Welfare Summit. Each of these meetings include caseworkers, supervisors, the county director, the local Juvenile Court judge, Guardians ad litem and other attorneys. The purpose of each of these meetings is to help the court and DHR problem solve on any areas within the county that are resolvable with conversation and action plans and raise the capacity of the workers and supervisors. At each of these meetings, the importance of engagement with families through meaningful caseworker visits is discussed and from the prospective of each of the members. Meaningful caseworker visits are the basis for measuring change in families. In these meetings, there is always discussion around the important information caseworkers gain during visits, the visits that must be completed and how to best convey that information to the courts. Caseworkers engage with fathers, mothers, maternal and paternal relatives to assess for placement, foster /adoptive parents for permanency or collaterals for information on a family is the basis for all the information we gather to assess and monitor strengths, needs, and change and to report that to the Individualized service plan team or the court for guidance and input on services and case plans. Alabama DHR plans to continue utilizing the money from the Monthly Caseworker Visit Grant over the next five years to continue the work with iCAN county team meetings and iCAN Advisory Committee meetings and to fund the Alabama's Judicial Child Welfare Summit. The Judicial Child Welfare Summit is held yearly and involves collaboration between AOC, Casey Family Programs and DHR. The next scheduled threeday summit will be held in December 2024 where topics such as collaboration, permanency, timeliness, and utilizing data in practice will be discussed. This work has been a beneficial way to problem solve and discuss possible plans of action within the county. The common goal of the groups is to promote timely permanency for children in care.

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

Agency Administering Chafee

Alabama Department of Human Resources is responsible for administering the Chafee program. Although Alabama's Independent Living Program (ILP) is state-administered, it is a county-managed program providing direct and indirect services to youth ages 14 - 20 whom the Department holds custody. As of

April 1, 2024, there were 1805 young people in foster care age 14 to 20. Program and services are administered and supported through the State Office of Independent Living Program with services carried out by the 67 County Offices of the Department of Human Resources. Services available are designed to assist in skill development to guide toward success as adults. This is accomplished by providing independent living services for all eligible youth as authorized in their ISP and concurrent with efforts to achieve their specific permanency.

Program Design and Delivery

It is the goal of State ILP to build capacity and sustainability of support to County Offices through joint collaborations and partnerships of their local community resources that provide services to 14 - 20 years old. The State Office of ILP consist of a Program Manager, the Statewide IL Coordinator, two Statewide IL Consultants and two Fostering Hope Scholarship Mentors. The overall role of the State ILP team is to provide and develop services, supports, training and consultation to the County Offices. State IL Consultants work closely with county staff to help assess individual needs of IL age youth with an emphasis on those youth ages 17 - 20. Monthly check-in and quarterly staffing with County Offices of youth 17 and older are part of the work of the IL Consultants. Various statewide events are coordinated and can be attended by youth through support of their County Office. These events step out the services available on the county level but create a larger environment for youth to engage and learn about ILP services. Regional youth events are also utilized to assist County Offices with building a structure in their area that will continue.

Creating and maintaining partnerships with those who are working with IL aged youth cultivates effective collaboration and is key to our ongoing strategic plan. Quarterly meetings provide an opportunity for effectively engaging these partnerships as we move toward common goals and development of long-term strategies. The annual ILP Networking Conference, held the first week each April, is our primary collaboration point, as it brings together county staff, contract providers and community partners at the same time. During the 2024 ILP Networking Conference there was an Open Forum held to discuss

the different areas of the States ILP plan. County staff, placement providers and several service providers along with State Office of ILP staff were present for the forum. Discussion centered on 5 specific areas which included: disseminating available resources; stronger inclusion of lived-experienced youth; strengthen supports to youth aging out of care at 21; development of additional resources; and how to handle some of the unique special cases that arise when youth are leaving care. Follow up forums will be established ongoing to establish clear goals and steps for achieving these identified areas.

Inclusion of current and former Alabama foster youth is a part of these partnerships. Additional input from the youth voice is achieved through their representation at all State organized conferences, use of Roundtable Discussions, Youth Speak Out (set up like a town-hall meeting) opportunities at all State ILP organized events and through our Alabama DREAM Ambassador program. Compensation for youth involvement is managed through the State's contract with Children's Aid Society of Alabama. All youth who give input are provided a daily incentive and transportation compensation when appropriate. Alabama's DREAM Ambassadors provided various points of advocacy, including a structure review of housing provided to older youth in care and steps toward the development of stronger peer supports. Additional areas related to improved LGBTQ support and legislative efforts toward making transportation options more acceptable are still being developed through the Ambassador Program. The Department has an ongoing priority on prevention of discrimination and educational sensitivity for LGBTQ individuals. Our statewide IL camps include breakout sessions designed to hear from LGBTQ youth and we have individuals in the LGBTQ community on our Alabama DREAM Ambassador team. The Department provides consultation and supports to counites along with peer support that is available through current and former lived-experience youth. The Department is working to build a better knowledge base, improve cultural competency and expand capacity to serve those youth who are a part of the LGBTQ community. Funding is always available for youth to participate in community-based support groups.

This ongoing involvement and engagement of youth as equal partners, provides the context of positive youth development. Events and activities managed by State ILP create a positive experience through

inclusion of all youth. Creating positive environments where interactions between youth are encouraged within our camps and regional meetings allow youth to feel safe and cultivates positive relationships. The Department utilizes an established ILP Framework in ongoing case management, using a Youth Assessment Summary as a snapshot of where youth are regarding life skill development. Additional principles of Positive Youth Development, including engagement and bonding, will be added to training and consultations to county and IL provider staff. Information from NYTD data is provided annually to our staff statewide through our ILP Networking Conference, Peer to Peer virtual meetings and to our Alabama DREAM Ambassadors during their annual Leadership Retreat. Data from the surveys are also shared during our annual judicial summit and the Alabama Foster and Adoptive Parent Association conference. State ILP training always includes discussion of NYTD to provide guidance on helping youth complete the surveys. The Department also utilizes social media to provide data information and encourage input from youth out of care. Efforts to connect with youth completing the survey timely is ongoing. Although we work through County Offices initially, the State ILP team conducts the final effort to connect and engage with youth to assure compliance with completion. State oversight provides specified timeframes for county engagement to collect the information from youth, while financial incentives are funded through Chafee to support youth involvement in the NYTD surveys. The State is working to develop an interface with our FACTS system and Chafee partners to capture data that will also improve the collection of data not typically available through regular case management. The Office of ILP is working to establish links within ilconnect.org that will guide youth to available resources within and around their county of residence. Several resources utilized for this effort is the Alabama Care Network, Alabama Medicaid Resources, Alabama Workforce Development and Alabama Possible.

Serving Youth Across the State

Alabama ILP is administered in the same manner across the State guided by Family Services policies. The Department has one contract for Independent Living Support Services (ILSS) which is currently held

by Children's Aid Society of Alabama. The ILSS contract consist of partnership work with the Office of ILP to provide IL services to Alabama foster youth ages 14 - 20 and former Alabama Foster youth ages 18-25. It includes two, three-day camps for foster youth; an ILP Networking conference for OHR staff, providers, and partners; Regional IL meetings and trainings and the ongoing development and coordination of services with the Alabama DREAM Ambassador program. A second contract is held by Foster Care to Success for Alabama Educational Assistance Programs (AEAP). AEAP provides the economic and personal supports eligible youth need to attend and complete post-secondary training and education programs through the Fostering Hope Scholarship (FHS) and Alabama Educational Training Voucher Program (ETV).

Much of Alabama is considered rural which can be problematic to providing services statewide consistently. Fifty-five of the sixty-seven counties in Alabama, represented about 55% of the population, are considered rural. Efforts are made ongoing through State IL consultants to provide supports based on need and viability. Despite the differences between areas considered rural, data provided through the Rural Health Information Hub shows only a slight increase of need between what they consider Metro and Nonmetro Counties (2022). Their report shows 8.6% of Alabama residents lack health insurance (Kaiser, 2022). With an estimated poverty rate in rural Alabama as 19.7%, compared with 15.3% in urban areas of the state and 17.2% of the rural population showing not completed high school, while only 11.2% of the urban population lacks a high school diploma, trends demonstrate consistent needs in population despite county location. Research to develop additional partnerships across the state is ongoing. State ILP partners with counties as needed to help recruit and develop services where needed.

Serving Youth of Various Ages and Stages of Achieving Independence

The focus of our Independent Living Program is to provide youth with needed skill development through services and supports that promote healthy interdependence. The Department's ILP Framework consist of a list of over 100 skills youth should possess in to help them to transition to adulthood successfully. The Framework is simply an extensive but not exhausted list of skills that can be referenced during all levels of case planning to aid in the creation of meaningful goals and actions steps. This list of skills

becomes the common language between our youth, workers, caregivers, providers, staff, and court officials. Individualized work begins with an assessment completed by county staff that highlights youth's current priorities. Areas covered in the Framework, that also connect to the Youth Assessment Summary and Transition Plan are an evaluation of Personal Growth and Social Development, Family Support and Healthy Relationships, Health Education and Risk Prevention, Education, Employment/Career Preparation, Money Management, Home Management, Transportation and other Daily Living Skills. The Youth Assessment Summary (YAS) functions as the State's one page assessment tool that identifies if a youth is aware, learning or doing a skill tied to the ILP Framework. The YAS is the beginning of the IL process being completed by youth when they turn or enter foster care pass the age of 14. Youth are assessed in skill development within a 3-stage process of awareness of skills, learning the skill and doing the skill. County staff are encouraged to update the assessment every six months in connection to the ISP, as a tool to track the youth's progress in learning needed skills. The ILP Framework and YAS work in partnership to the Individual Service Plan (ISP) and the Alabama Transition Plan. Using the stated tools, youth 14 - 16 years old are introduced to the ILP program with a focus on outcomes. Use of the Transition Plan for 14–16-year-old is optional as case management implements the information obtained in the Youth Assessment Summary into the youth's case plan or ISP. The YAS provides a section on Current Priorities so that youth can be served according to their individual needs. The current priorities section ties to the youth's ISP and maps out needed services to help advance skill development to the next stage.

The Alabama Transition Plan is an 8-page working document that is developed with the youth's involvement and maps out how they plan to exit foster care. The Plan is required by policy to be implemented for all youth ages 17 and older as they plan out steps to leave foster care at age 21, or sooner when appropriate. The plan is developed with the youth's involvement, allowing them to work through their choices as they prepare for adulthood at their pace. County workers and providers are encouraged to review the Transition Plan monthly during visits to help keep focus of the youth's path and work through their decisions as they are preparing for adulthood. Provider treatment plans should

also include references and connection to the Transition Plan. Each section of the Transition plan connects to the sections of the ILP Framework and should be completed at the pace of the youth. Every section does not have to be completed at one time; some areas will be added as the plan is developed. As they work through the plan, youth are guided through their short-term priorities and long-term vision while identifying specified individuals by name in the "Who can help you?" section. The Alabama Transition Plan is mandatory to be completed on all youth 17 years and older to help them develop their own plan for exiting foster care. IL youth at any age are free to begin working the plan, but it is mandatory at age 17. State Office of ILP staff monitor compliance with completion of the transition plans monthly. The plan is designed to be developed with the youth's involvement to work through their choices as they are preparing for adulthood. As they complete the plan, it should map out the direction and next steps for where the youth is going and how they plan to get there.

The ILP Framework, YAS, Alabama Transition Plan, along with an IL Transitional Discussion Guide are

presented as the State's ILP Case Management Tools. An introductory training video of these tools is available in the Departments LETS system and training on these tools is conducted ongoing. The Department's ILP Desktop Tool also captures the details of the ILP Case Management tools as an additional way to assist workers. These tools are referenced in all training completed by the Office of ILP.

The Department has opted to provide services and assist youths who have aged out of foster care and have not passed 23 years. These direct supports, which includes the same services available to the youth still in care, are handled through the County Offices on a case-by-case bases with the approval of the State Office of ILP. Youth are currently able to obtain IL assistance up to six months after exiting care if they leave care within 30 days of their 21st birthday. The Department also provides a \$1000 aftercare payment along with additional set-up cost established by their ISP team as they transition out of care. The Department's State funded educational assistance program also provides support to youth receiving funds through the Fostering Hope Scholarship. Educational supports are provided to youth through the age of 26 to help them adapt to independent living, academics, and other collegiate activities.

As of April 1, 2024, the Department held custody of 281 youth who were 18 years old, 165 youth who were 19 years old, and 75 youth who were 20 years old. Youth aged 18 - 21 are not typically referred to as "extended foster care" but viewed as a continuation of services needed to best prepare for aging out of the Alabama Foster Care system. Efforts to expand services to those older youth have resulted in the development of a self-secured placement type. Self-secured placements are designated for those 18 -20-year-olds, who might want to live in a non-licensed, non-traditional placement. Decisions to move forward with this type of placement would include ISP team and requires all adults residing in the placement complete a CA/N Clearance and a Criminal History background check through ABI/FBI. The provider would be listed according to who the young adult is living with. Youth 17 years and older are also provided the option of Independent Living-Contracted and Independent Living-Non-Contract placements. Contract placements provide a placement with a vendor who providers services to the youth in their own or shared apartment. Non-Contracted placements allow youth to live in an apartment of their own choosing where they can undertake self-sufficiency with while managing their own living expenses. All three of these placement types allow for youth to maintain IV-E Medicaid eligibility. These services are supported with Room and Board IL financial support. The Department monitors these expenses and do not allow them to exceed the 30% allowed use of Chafee funds. As youth in these placements prepare to age out of care, vendors work to transition the placements to the youth so they can maintain housing post-foster care.

Specialized placements known as the Transitional Living Program (TLP) is designed for youth who are ready to enter a phase of care that will eventually transition them to an independent living placement type. TLP affords youth an opportunity to practice basic independent living skills in a variety of settings with decreasing degrees of supervision. Youth who are at least 16 years of age and have a permanency plan of APPLA are eligible for this type of placement. TLP placements may be offered through a variety of residential on-campus living arrangements where youth can practice independent living skills with decreasing degrees of care and supervision. Apartment living may also be considered when the apartments are grouped together in what is known as a "pod," and only individuals participating in the program are

allowed to live within the pod. TLP placements can also be provided in approved foster homes.

The State Office of ILP is also working to provide skill development to IL aged youth in intensive level placements through quarterly meetings. Efforts are being made for the development of services to guide these youth as they are meeting their mental health and behavioral goals so they can transition to IL placements. The Department currently has 10 providers with approximately 250 slots held by IL aged youth. Many of these youth need increased IL skill focused as they prepare to leave those placements due to age restrictions. Youth who leave the Department's custody after reaching 18 years of age are eligible to return to the Department's care prior to reaching 21. Upon reaching age 18 and leaving care, youth are eligible for most services of those who age out at age 21. To assist youth beyond age 21, policy allows for the use of IL funds up to six months for youth who age out of care within 30 days of their 21st birthday, provided the services are mapped out in their closing ISP. County Office along with providing Federally required documents to the youth, are encouraged to include a Transitional Letter that list out all the services available to a youth leaving care. This letter should be accompanied by a document listing verification of the youth's dates in care. These items will assist them moving forward. interagency partnerships assure former foster youth from other states who move to Alabama after exiting foster care have access to available services. The Department is also working to add links within the ilconnect.org website that will provide opportunity for youth who move to Alabama after exiting foster care to request services.

Collaboration with other Private and Public Agencies

County Office are encouraged to directly cultivate services and supports from public and private sectors to help youth in foster care achieve independence. State ILP also works to develop supports that can be provided statewide or beneficial throughout adjoining counites. The Department's partnership with Alabama Medicaid allows youth who left care after reaching age 18, to receive a seamless service for medical needs. The State's IL Coordinator serves as the liaison to assist youth living outside of Alabama obtain Medicaid in another State. They also assist eligible youth who have entered Alabama from other

States seeking Medicaid. The Department provides data sharing with Alabama Medicaid of youth who are eligible for Medicaid through age 26 so they can receive seamless health care. Once out of care, youth simply apply once and then are contacted annually directly by Alabama Medicaid to keep their insurance active.

The Department has two primary partnerships for support services to youth with housing needs after or just prior to leaving foster care. The first is a non-profit agency, Second Shift Alabama who serve all youth between the ages of 18 -25, even if they have not been in foster care. Second Shift provides transitional housing assistance by locating and paying for housing to prevent homelessness of youth. They also do Life Skills Education through vocational and financial coaching; mentorship through connecting youth to a caring stable adult and provide Basic Care Services. These services are designed for youth preparing to leave foster care and include emergency assistance in the form of a gift card or other noncurrency provision like household goods or support in seeking employment, finding resources, continuing education, and planning for parenthood. Youth Towers is our second primary housing partner. This non-profit strives to ensure the disadvantaged Jefferson County young people become economically secure through a continuum of care that promotes a positive and productive outcome. There programs include Street Outreach of the unsheltered, rapid re-housing, transportation and career and job preparation. In February 2021, the Department initiated a partnership with the Alabama Department of Housing and Urban Development to provide support through the Foster Youth to Independence (FYI) program. Since that time over 100 referrals have been made to the 16 Public Housing Authorities for housing vouchers for youth who were homeless or at risk of homelessness. The Department has partnered with Second Shift Alabama and Youth Towers along with the FYI program to address housing needs of youth leaving foster care who had not established stable placement through the IL program placements.

All services, supports and resources for youth in the Departments custody can be found through social media and website managed through the ILSS contract with Children's Aid Society of Alabama. Youth can find needed resources like housing options, educational assistance, and career opportunities through www.ilconnect.org. The Department was also able to provide information about SNAP

exceptions for youth experiencing homelessness and exiting foster care through the website. Alabama does not deny nor terminate independent living services to youth who otherwise meets the eligibility criteria but temporarily reside outside of Alabama. Eligibility criteria is established through state policy to provide support services to youth according to age 14-21 and who are in foster care. The Department will cooperate in any national evaluations of the effects of the programs in achieving the purposes of Chafee.

Education and Training Vouchers (ETV) Program

The Department utilizes a contract provider to manage the Education and Training Vouchers (ETV) Program along with management of our State funded Fostering Hope Scholarship (FHS). Through our current contract with Foster Care to Success, financial assistance is provided from the federal and state funding to eligible youth who are enrolled in postsecondary certificate or accredited undergraduate (associate or bachelor's) degree program. The Alabama ACT No. 2015-121 provides the Department with state funding through the FHS to cover tuition and required fees for eligible current or former foster youth in Alabama. Under the Promoting Safe and Stable Families Amendments of 2001, the Department receives funding annually through ETV to assist eligible foster youth and former foster youth so they can pursue studies at colleges, universities, and vocational training institutions. ETV allows for the Department to expand and supplement assistance to those youth also receiving FHS so they can begin, continue, or complete their educational and vocational goals. For those who do not meet the FHS eligibility, ETV becomes the primary means to assist these young adults with their postsecondary educational needs. Youth eligible for these services can apply annually through our electronic application platform, www.fosteringhopeal.org. The Department then verifies eligibility for both educational assistance programs. Information provided to youth as they apply for FASFA, also directs them to the potential for funding. Foster Care to Success works with the eligible youth and respective educational agency to assure the total amount of educational assistance to youth under this or any other federal assistance program does not exceed the total cost of attendance nor that there is any duplication of benefits under this or any other federal or federally assisted benefit program. Foster Care to Success also makes ETV funding available to eligible youth from other state who move to Alabama and apply for ETV, if they have not already received ETV from another State or State agency. Foster Care to Success is required to maintain a database related to individual and cumulative data to provide an annual count and roster of ETV and FHS recipients.

Chafee Training

State ILP offers alternating training opportunities between regional consultations and specific County Office training. October 2023 concluded the Department's seventh regional consultation which began in September 2022. During the consultation, which was aimed at County Office staff, we shared an overview of All Things IL, which included "Best Next Steps" for youth graduating high school and exiting from care and a youth perspective on engagement with older youth. State ILP began in February 2024 providing basic IL training during Regional ILP Meetings for foster parents, staff, and providers. State ILP will also present at the annual Alabama Foster and Adoptive Parent Association training held in May 2024. Additional training opportunities to address LGBTQ, issues confronting youth preparing for a successful transition to adulthood and how we can best assist youth make permanent connections with a caring adult are being developed. County specific training will be provided beginning in the fall of 2024. Video training on IL services and IL case management tools are also being developed to be viewed online by the end of 2025.

Consultation and Coordination between States and Tribes

State ILP has partnered with our one Federally recognized Tribe, the Poarch Band of Creek Indians annually for IL sponsored events. In January 2022, a Life After High School Transition Fair was hosted by the Poarch Band of Creek Indians. This partnership brought in various regional educational supports, schools, and certification programs to highlight opportunities offered to graduating seniors. In October 2023, the Escambia County Regional ILP meeting was hosted on the reservation. The Tribe is an active stakeholder for Alabama DHR with full access to all information regarding services and supports available to young people. There are no restrictions regarding the Tribal members accessing any benefits or services available to all other youth in the state. Collaboration for events and joint activities with the Poarch Band of Creek

Indians, Director of Family Services, Ms. Amanda Montgomery, has been maintained through quarterly contact. During the last collaboration. Ms. Montgomery reported a desire to reestablish a youth leadership group in the tribe and once that had been completed, she would reconnect for further consult. The tribe has not requested to develop any agreement with respect to Indian children.

Collaboration with Tribes

For a description on how AL DHR partners and collaborates with the Poarch Band of Creek Indians, please see section C, Collaboration.

VI. Targeted Plans

Disaster Plan

See Appendix B for a copy of Alabama's Disaster Plan.

Foster and Adoptive Parent Diligent Recruitment Plan

See Appendix C for a copy of Alabama's Foster and Adoptive Parent Diligent Recruitment Plan.

Health Care Oversight and Coordination Plan

See Appendix D for a copy of Alabama's Health Care Oversight and Coordination Plan.

Training Plan

See Appendix E for a copy of Alabama's Training Plan.

VII. Financial Limitations

Title IV-B, Subpart 1:

The Alabama Department of Human Resources utilized FY 2005 Child Welfare Services (CWS) funds to assist the state in providing Protective Services and Foster Care Maintenance. Alabama's Federal allotment for IV-B, subpart 1, payments in FY 2005 was \$1,172,618. State funds used to match Federal allotment for payments in FY 2005 was \$390,873. Total payments made for assistance

in FY 2005 was \$ 13, 170, 324.59.

Title IV-B, Subpart 2:

The state and local spending figure for the Title IV-B, Subpart 2 programs in FY 2022 was \$5,955,297, compared to the 1992 base year's figure of \$2,792,630.

Alabama does not expect any challenges in expending Title IV-B Subpart 2 funds in a timely manner in FY2025.

See Appendices for the CFS Parts I, II and III Excel and PDF Forms.

Appendices

Organizational Charts Appendix A Appendix B Disaster Plan Foster and Adoptive Parent Diligent Recruitment Plan Appendix C Health Care Oversight and Coordination Plan Appendix D Appendix E Training Plan Appendix F CAPTA Assurance Appendix G John H. Chafee Assurance Appendix H **ETV** Assurance Appendix I CFS Parts I, II and III, Excel Appendix J CFS Parts I, II and III, PDF Appendix K Strategic Plan

Frequent Used Acronyms

AA/N- Adult Abuse/Neglect Report

ABI- Alabama Bureau of

Investigation

ACADV- Alabama Coalition Against Domestic

Violence ADAP- Alabama Disabilities Advocacy

Program

AFAPA- Alabama Foster and Adoptive Parent

Association AOC- (Alabama) Administrative Office of

Courts

APAC- Alabama Post Adoption Connections

APPLA- Another Planned Permanent Living Arrangement (see section on Permanency

Goals) APSR- Annual Progress and Services Report

ASFA- Adoption and Safe Families

Act CAC- Child Advocacy Center

CAPTA- Child Abuse Protection and Treatment

Act CAS- (Alabama) Children's Aid Society

CAIN- Child Abuse/Neglect Report

CFA- Comprehensive Family

Assessment CFSP- Child and Family

Services Plan

CFSR- (Federal) Child and Family Services

Review CFCIP- Chafee Foster Care Independence

Program CIP- (Alabama) Court Improvement

Program

CRP-Citizen Review Panel

CPS-Child Protective

Services

DHR- Department of Human Resources (Alabama's public child welfare

agency) DCAP- (Alabama) Department of Child Abuse Prevention

DMH- (Alabama) Department of Mental

Health DYS- (Alabama) Department of Youth

Services EA- Emergency Assistance

ERD- Electronic Report Distribution

ETV- Education and Training Voucher

Program FA- Family Assistance

FACTS- Family, Adult, and Child Tracking System (Alabama's

SACWIS) FC- Foster Care

FCS- Family and Children's Services

Flex Funds -Funds that are allocated to County OHR Offices for implementation of county-based services FSD- Family Services Division (of the Alabama State Department of Human Resources)

GAL- Guardian Ad Litem (court-appointed attorney for children in foster

care) HIPPA- Health Insurance Portability & Accountability Act

ICPC- Interstate Compact on the Placement of Children

IDEA -Individuals with Disabilities Education Act

IEP- Individualized Education Plan (established at schools for children in special education)

ILP -Independent Living Program

ISP- Individualized Service Plan (Alabama OHR Case Planning Process)

JOBS -Work/Education Program

LEA/OSA -Law Enforcement Agency/Other State Agency

Frequent Acronyms continued

LETS-Alabama's Learning, Education, & Training System

MAPP- Model Approach to Partnerships in Parenting

MAT- Multi-dimensional Assessment Tool

MD Team- Multi-Disciplinary Team - Team of professionals called on to staff cases (often involves law enforcement, the D.A.'s office, the CAC and OHR staff).

MN Team- Multi-Needs Team of professionals called upon to staff cases where more than one agency is involved with a child and family.

OQCWP- Office of Quality Child Welfare Practice

PA -Public Assistance

Protocol- Alabama Instrument used to conduct a QSR

PIP -Program Improvement Plan

PSSF -Promoting Safe and Stable Families, Title IV-B, subpart 2 QA Quality Assurance

QAD- Quality Assurance Division

QSR -Qualitative Service Review (a process whereby the record of a particular child/family is reviewed, interviews are conducted with the relevant persons involved with the child/family).

RD- Resource Development

SOHR State Department of Human Resources SACWIS- Statewide Automated Child Welfare Information System

SEAC -Special Education Action Committee, Inc.

STEP -Striving Toward Excellent Practice -Initial training for new child welfare workers

TANF-Temporary Aid to Needy Families

TCM- Targeted Case Management (Medicaid reimbursement)

TFC- Therapeutic Foster Care

TIPS -Trauma Informed Partnering for Safety and Permanency -preparation curriculum for prospective foster/adoptive parents