

2026 APSR Addendum for Posting

- Strategic Plan
- Citizen Review Panel
- Disaster Plan
- Foster and Adoptive Parent Diligent Recruitment Plan
- Health Care Oversight and Coordination Plan
- Training Plan
- Annual Reporting of Education and Training Vouchers Awarded

CFSP Strategic Plan				
Goal 1: Improve the quality of risk assessment and safety management of children with an open referral, an open Child Protective Service case or an open Foster Care case.				
Rationale: To accurately assess the safety and well-being of children involved with the Alabama Department of Human Resources.				
Objective 1: Alabama will reduce statewide average time until initial contact with child victim from current average of 72 hours back to 48 hours.				
Rationale: Any time child abuse/neglect is reported to the department, the children involved are considered at risk of harm until the worker has made contact and assessed the risk to the children. Alabama's time to FVC is within policy but the number of hours to contact has slowly edged higher.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Improve the quality of intake decisions to ensure complete information is obtained and proper screening decisions are made.	QA safety assessment review of screen outs and response times at intake should show correct decisions	Annual CPS training	Surveys from annual CPS training and individual county trainings.	CPS program specialists will monitor and evaluate through completion of QA safety assessments.
Reduce statewide average time until initial contact with child victim from current average of 72 hours back to 48 hours.	<p>2025: reduce time of first victim contact from 72 hours to 66 hours.</p> <p>2026: reduce time of first victim contact from 66 hours to 60 hours.</p> <p>2027: reduce time of first victim contact from 60 hours to 54 hours.</p> <p>2028: reduce time of first victim</p>	<p>Send memo to county directors reminding them to review contact requirements and best practice</p> <p>Train at annual CPS conference for workers</p> <p>Add an additional small group</p>	N/A	<p>CPS program specialists will monitor and evaluate through completion of QA safety assessments.</p> <p>Agency will monitor through semi-annual data collection by county</p>

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	contact from 54 hours to 48 hours. 2029: maintain time of first victim contacts at 48 hours.	supervisor training for CAN supervisors and train on this		
Objective 2: Improve the quality of Intake decisions				
Rationale: To accurately determine a response time, intake workers must have information that impacts risks to the safety of children. The risk to children determines whether the report is taken as a CAN, or a prevention and the response time assigned to each report.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Train workers and supervisors on the importance of asking questions and searching agency records to gain quality information to make accurate decisions on CANs vs preventions and determining response times.	40% of workers/ 80% supervisors trained annually	Develop and implement annual small group training for CAN supervisors Annual CPS training for workers	Training satisfaction survey	N/A
Objective 3: Ensure child safety during child abuse/neglect investigations and preventions.				
Rationale: The safety of children is assessed based on the totality of information gathered as a part of the CAN investigation. CAN investigations shall be completed and disposed or suspended within a 60-day time frame. When a CAN is overdue, some portion of the investigation is not complete and accurate safety decisions cannot be made.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Reduce the number of overdue CAN's and preventions statewide.	2025: Reduce overdue CANs/preventions from 573 to 556	N/A	Work with directors to develop work plans for workers with overdue CAN's and preventions.	Monitor data on initial assessments through QA findings Monitor special query that is pulled from data monthly with overdue CANs and preventions.

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	<p>2026: Reduce overdue CANs/preventions from 556 to 540</p> <p>2027: Reduce overdue CANs/prevention from 540 to 524</p> <p>2028: Reduce overdue CANs/preventions from 524 to 510</p> <p>2029: Reduce overdue CANs/preventions from 510 to 497</p>		Work with counties to hire staff up to their staffing allowances	Monitor ERD reports that alert when 30-day contact is not made.
Conduct supervisor training in small groups that specifically addresses initial assessment to improve initial risk assessments in investigations and preventions.	QA safety assessments errors should reduce.	Develop and implement annual small group training for CAN supervisors	n/a	Organize and facilitate small group discussions; provide feedback reports to county leadership
Ensure workers are making 30-day contact with children with open referrals and prevention while pending.	Create a tracking system to monitor 30-day contact with children with open referrals and prevention	n/a	Work with county directors on the importance of 30-day contact	Monitor ERD reports that measure
<p>Objective 4: Ensure child safety in open CPS Cases by providing appropriate services to families with open CPS cases to prevent children's entry or re-entry into out of home care and ensuring Plans of Safe Care are completed in each case in which an infant is born substance affected.</p>				

Rationale: When a case is opened to CPS, a risk to child safety has been identified and is being mitigated by some factor while the child remains in the custody of their parents. Appropriate services are critical to child safety and prevention of children from entering out of home care. Infants are the most vulnerable children in which the department comes into contact; and in cases of maternal substance abuse, the department must make and monitor a plan to keep the infant safe while still allowing the family to bond with their baby.

Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Add a field in FACTS to enter services provision.	Begin implementation by 5/2025- Increase the percentage of Plans of Safe care entered in required cases over 5 years.	Annual CPS training Develop and implement annual small group training for CAN supervisors	n/a	Monitor through data analysis when a referral is received in a situation in which a Plan of Safe Care is required

APSR Updates:

- **2025:** The Department is working to cut FVC time in FY 25 from 72 hours to 66 hours, however, the average FVC increased from 70.1 hours in FY 23 to 99.8 hours in FY 24. Two training sessions for CPS workers occurred, from March 25-27 and April 9-11, 2025. The March training included 43 workers, while 60 attended the April session. The number of overdue CA/N cases and preventions rose from an average of 573 in FY 23 to 797 in FY 24. As of April 24, 2025, the agency added a new step to FACTS. It now requires a Plan of Safe Care before closing a referral when these three conditions are met: the Person Identified at Risk (PIR) is under 1 year old, the reporter is a medical professional, and either the Substance Affected box is checked or one of these allegations is made: positive alcohol test at birth or fetal alcohol syndrome, positive drug test at birth or drug withdrawal, or chemical endangerment involving methamphetamines.

The Department notice a significant increase in the FVC hours and overdue CA/Ns and Preventions. The Department is working to have the numbers trend in the right direction by hiring more staff which include, case technicians and temporary workers. Employees were used to help distressed counties. SDHR Office of CPS will continue to provide feedback to county level management as appropriate. QA will be monitor FVC using their assessment tool.

Goal 2: Reduce the number of months in care by 5% for children who have been in care >24 months and whose permanency plan are Adoption with no Identified Resource (ANIR).

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Rationale: Ideally, permanency for children should be reached in under 24 months. Children with ANIR get most of their inquiries and matches in the first few months of being available for adoption. Alabama believes that revisiting former stakeholders in the child's life could increase the potential for permanency or at least build support systems for children who have been in care >24 months.				
Objective 1: Move children to permanency who have been in care >24 months				
Rationale: Children need to achieve permanency in a timely manner to decrease their time in custody.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Create a master list of children who have been in care >24 months and whose permanency plan are ANIR and no resource has been identified.	2025: Reduce the number of children on the master list by 1%. 2026: Reduce the number of children on the master list by 1%. 2027: Reduce the number of children on the master list by 1%. 2028: Reduce the number of children on the master list by 1%. 2029: Reduce the number of children on the master list by 1%.	Train foster care program specialists on deep record dives	n/a	Monitor the master list.
Complete deep record dives on the children on the master list.	2025: complete reviews on 20% of children identified	n/a	Replace staff that has moved to other	n/a

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	<p>on original master list</p> <p>2026: complete reviews on 40% of children identified on original master list</p> <p>2027: complete reviews on 60% of children identified on original master list</p> <p>2028: complete reviews on 80% of children identified on original master list</p> <p>2029: complete reviews on 100% of children identified on original master list</p>		positions to become fully staffed	
Complete Accurant searches on each parent to determine that all relatives have been contacted in cases of children on the master list.	Complete searches in the same cases that are reviewed per year.	n/a	Add another person with access to Accurant	n/a
Send letters to anyone identified as a relative or a support in the cases of children on the master list.	Send letters in the same cases that are reviewed per year.	n/a	Develop a form letter for identified stakeholders.	n/a

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Assess or reassess anyone who responds with interest.	Assess responses in the same cases in which letters are sent	n/a	n/a	Hold monthly staffings with FCS director or designee and specialists assigned this duty beginning 2025
Overcome any barriers by being flexible in requirements as long as safety is not compromised.	Address barriers as identified in cases as they are reviewed.	n/a	n/a	n/a
APSR Updates: <ul style="list-style-type: none"> • 2025: A master list with 343 children in all has been made. By confirming that the permanency plan is correct and suitable for the children on the list, the Office of Adoptions is attempting to clean up this list. In order to link children with adoptive resources and/or develop additional supports for these children, in-depth investigations into these records have started and will continue throughout 2025. Relatives identified through in-depth case investigations receive letters. Accurint searches are being used by the department as part of the case plan for children with ANIR. 				

Goal 3: Enhance placement stability for children in foster care by reducing the number of unplanned placement changes by 15% over the next five years, with an annual target reduction of 3%.				
Rationale: Alabama believes that increasing the number of foster homes available for placement provides every county more opportunity to match children with foster parents who are uniquely qualified to meet their specific needs. Alabama further believes that children placed in foster family homes find permanency through foster parent adoption timelier and with less moves than children who are not placed with a family and whose plan is then ANIR.				
Objective 1: Increase the number of foster/adoptive homes in the state over the next 5 years.				
Rationale: Alabama believes that the number of foster families approved and available to take placement of children is extremely important in placing children within close proximity to their home of origin and with their siblings. Children who are placed with their siblings and in close proximity to their home of origin experience less loss and trauma and thus have fewer behavioral problems which often cause unplanned moves.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Recruit, train and approve more foster homes in Alabama	2025: 50% of counties have 50% of the number of approved foster homes as children in care.	n/a	Work with counties on improving the quality of diligent recruitment plans.	Monitor the number of approved foster/adoptive homes in Alabama

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	<p>2026: 60% of counties have 50% of the number of approved foster homes as children in care.</p> <p>2027: 70% of counties have 50% of the number of approved foster homes as children in care.</p> <p>2028: 80% of counties have 50% of the number of approved foster homes as children in care.</p> <p>2029: 90% of counties have 50% of the number of approved foster homes as children in care.</p>			
Increase the access for families to be trained using Deciding Together when TIPS is not an option		n/a	Hire more Retired state employees (RSE) to conduct Deciding Together with families for whom TIPS is a barrier	Monitor the number of DT trainings conducted by RSE's.
Objective 2: Increase the use of behavior analyst for children in foster care.				
Rationale: Children's behavioral problems often cause multiple moves in foster care.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Send a memo to county directors reminding them of the behavior analyst unit and encouraging their use in	2025: Send the memo to directors	n/a	n/a	Use the new FACTS enhancement that monitors service provision to ensure referrals are made in required cases.

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foster care cases in Jefferson, Autauga, Montgomery, Macon, Shelby, Chilton, and Russell.	<p>2026: Increase use of behavior analysts by 1%.</p> <p>2027: Increase use of behavior analysts by 1%.</p> <p>2028: Increase use of behavior analysts by 1%.</p> <p>2029: Increase use of behavior analysts by 1%.</p>			
Require a behavior analyst review cases of all children who entered foster care due to the child's behavior issues in Jefferson, Autauga, Montgomery, Macon, Shelby, Chilton, and Russell counties.	<p>2025: create a tracking system of all children who enter care due to child's behavior problem or parent's inability to cope.</p> <p>2026-2029: refer and track reviews by BA</p>	Train foster parents on BA process with Alabama Foster/adoptive Association	n/a	Monitor the number of unplanned moves by children who have been reviewed.
Objective 3: Increase the number of children exiting care to Kinship Guardianship in place of relative placement with relative receiving custody.				
Rationale: Alabama believes that Kinship Guardianship is a more stable permanent placement for most children who leave custody with a relative caregiver.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Increase provisional approvals for relatives on initial placement in foster care	See an increase in provisional approval	Train workers and supervisors on provisional approval for relatives.	n/a	Monitor the number of children in relative foster family homes
Pull a query of children in non-licensed relative placements.	See an increase in the percentage of children exiting care to Kinship Guardians	n/a		Monitor the number of children exiting care to Kinship Guardians

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<p>Determine the barrier to KG in those case.</p> <p>Overcome the barrier by policy exceptions when appropriate and the use of Retired state employees to conduct DT.</p>	<p>2025: Plan training</p> <p>2026: Pull query of children</p> <p>2027: Increase the number of children exiting care to KG by 3%.</p> <p>2028: Increase the number of children exiting care to KG by 3%.</p> <p>2029: Increase the number of children exiting care to KG by 3%.</p>			
<p>APSR Updates:</p> <ul style="list-style-type: none"> 2025: The Office of Recruitment and Home Care Support in collaboration with the Office of Quality Assurance and Office of Data Management conducts quarterly zoom calls with counties. Some of the information discussed during these calls includes self-assessment of licensing, recruitment and retention. Specific emphasis is placed on each counties identified goal for newly approved homes. This is achieved by counties reviewing data of the population of youth in care by age and race as well as number of pending foster homes and reasons for closure. <p>A unified recruitment plan was also shared this fiscal year with pilot counties to create a more cohesive outcome focused recruitment tool. This document adds additional data to support county findings as well identify any trends or specific areas of need.</p> <p>Our RSE- Retired State Employees continue to be a great addition for assisting counties throughout the state conducting (DT) Deciding Together training's. Collectively our RSE's trained seventy-six families fiscal year 2024. Two additional RSE's were added which now brings our total to seven. We continue to recruit RSE's to assist in this vital role.</p> <p>The Office of Recruitment and Home Care Support and the Office of Data Management continues to collaborate quarterly in reviewing relative placement entries and exits. This data is also discussed during quarterly county zoom calls.</p>				

Goal 4: Strengthen information available through ilconnect.org to assist youth with needed resources.				
Rationale: Young people use the internet and apps more frequently to gain information more often than other ways of communication.				
Objective 1: Strengthen information available through ilconnect.org to assist youth with needed resources				
Rationale: Resources are ever evolving, and the information must stay current to be effective.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
<p>Explore what resources are currently available.</p> <p>Create relevant categories for easy searches.</p> <p>Update resource information on site.</p>	<p>The Office of ILP will work with contract provide to revise, update, and monitor information on the site.</p> <p>2024: Establish baseline of service categories needed.</p> <p>2025: Establish information needed in various categories of need.</p> <p>Ongoing: Update resources as available or as a need is presented.</p>	N/A	N/A	Office of ILP in partnership with contracted IL service provider and lived-experience youth to establish needed information and how to present it appropriately.
APSR Updates: <ul style="list-style-type: none"> 2025: The Department utilizes the website www.ilconnect.org as the reference point for information about independent living services in Alabama. The website is managed by our Independent Living Support and Service provider, Children's Aid Society (CAS). During monthly meetings with Children's Aid Society, resources and supports are presented for the purpose of adding and updating the sites information. In partnership with the webpage managed by CAS, the Department utilizes Facebook, Instagram and have developed an 				

ILConnect App to help disseminate State ILP information.

Goal 5: Enhance feedback loops in the State's CQI system to ensure the flow of communication between divisions.

Rationale: Alabama DHR must work together to achieve the goals of the agency. When divisions communicate, goals and measures can be achieved.

Objective 1: Enhance County practice by improving communication between divisions.

Rationale: The Quality Assurance division and Family Services division each measure and review different data and from different sources. Communication between the divisions will mean more accurate data to measure strengths and needs in individual counties.

Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
1. Collect data from QA and data analysis divisions. 2. Compile it in a way that is usable for statewide comparison.	<p>2025: QA will compile a list of data for comparison.</p> <p>2026: QA will request the same data from Data analysis.</p> <p>2027: Data Analysis will develop queries to supply the data. QA will schedule quarterly meetings.</p> <p>2028: Quarterly meetings will begin</p> <p>2029: Plans will be made to use the</p>	N/A	N/A	<p>QA division will develop a data list for review</p> <p>QA will request the same statewide data from the data analysis division</p>

	data collected to enhance practice			
Objective 2: Enhance County practice by improving communication between divisions				
Rationale: The Quality Assurance division and Family Services division each measure and review different data and from different sources. Communication between the divisions will mean more accurate data to measure strengths and needs in individual counties.				
Activity (Strategy)	Measure of Progress	Staff Training	Technical Assistance/Evaluation	Implementation Supports
Conduct quarterly CQI meetings to share trending data with other SDHR divisions and stakeholders	To be determined	N/A	N/A	QA will schedule quarterly meetings to discuss FSD and QA will develop plans to use the data as it is reviewed to enhance county practice
APSR Updates: <ul style="list-style-type: none"> • 2025: During FY2024, QA Division (QAD) provided Summary of Findings and Recommendations and an Executive Summary of each County Onsite Review to Family Services Division (FSD) and Field Administration (FA) for their review. Summary of Findings and Recommendations reports include detailed reports from a Safety Assessment, Permanency Assessment, and Foster Home Resource Record Review. Completed OSRIs from the Onsite Review were also sent to FSD and FA District Administrative Specialist (DAS)/HR Regional Manager were included in debriefings held with each County during the week of the Onsite Review. Beginning in October 2024, QAD forwarded results from OSRIs conducted during District Reviews included summaries of standout strengths and needs for each County reviewed to FSD and FA at the conclusion of each District Review. Additionally, data obtained from reviewing plans of safe care are forwarded to FSD and FA. <p>In December 2024, QAD supplied the State Rating Summary containing the results of all OSRIs, Practice Performance Report, and Item Rationale Statements for each item for all OSRIs completed in FY2024 to FSD for their review. Results from the Onsite Reviews in 15 Counties were provided to FSD as well.</p> <p>Meetings were held in October, November, and December 2024 to orient FSD and QAD regarding preparation for the CFSR and any trends in case practice which need additional investigation with Counties.</p> <p>As a result of these initial planning meetings between FSD and QAD, a CFSR orientation with all County Directors and QA Coordinators was held on 1/13/2025 and 2/5/2025. These meetings addressed practice concerns observed by QAD and FSD and provide guidance on measures Counties can proactively take to address these concerns. Data from FY2025 Q1 OSRI reviews were</p>				

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shared. QAD has begun building data plans for the CFSR Statewide Assessment which will overlap with data tracked in the APSR and CFSP. Data planning sessions with the Children's Bureau are set to begin in March 2025 to further assist in this collaboration.

Citizen Review Panels

Panel One -Dependency vs. Delinquency

Recommendations

1. A delinquent child should not be in the care of DHR, but in the care of DYS.
2. We do not feel that it is appropriate for DHR to be handling delinquent/criminal behaviors.
3. There needs to be some real talks and funding put into place at a state level with DYS so they can properly treat and care for these children. Then at a local level to provide additional community support for these children and families.
4. If a Delinquent Child is in the care of DHR they need to be receiving the same services as they would if they were in DYS custody (Behavior Management, Therapy, etc..) and that therapy should be at the cost of DYS not DHR
5. DHR needs to have dedicated employees who seek out supportive services in communities. They need to know what resources are out there and how to refer to them.
6. DHR also needs to evaluate current partnerships to see what changes have been made to services and ensure they are still available.
7. Foster families need to be aware of community resources and supportive services, especially if they have delinquent children in their care.
8. Foster families need a mentorship program to help assist them in caring for dependent children and delinquent children. Maybe even have respite services offered.
9. Foster families need adequate training.

Department's Response

1. The department concurs.
2. The department concurs.
3. The department concurs.
4. DHR does not have the ability to provide those types of services to delinquent youth and foster families are not equipped to manage their behavior while their behavior is modified.
5. Each county has an allotment for a worker whose job is to seek out and community services for children who come into contact with the department
6. Each county's resource development worker is tasked with that responsibility
7. The department concurs and believes that birth families should also have that information available.
8. The department does not believe that delinquent children should be cared for by foster families. DHR policy defines and provides for respite care for foster families. They must request it and are informed of this in initial training. TIPS classes are required prior to a family becoming approved. They are facilitated by a DHR employee and a foster/adoptive parent with the plan that that experienced foster/adoptive parent will become a mentor for the class members and that class members will also form supportive friendships through the experiences created in class.

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9. Foster families are required to complete a 30-hour trauma informed pre-training prior to becoming foster parents.

Panel Two-Child Deaths

Recommendations

1. Stress the importance of recognizing signs for quick help and support
2. Collaborating with local social services agencies to assess the family's needs and provide essential support and resources.
 - connecting them with counseling services, financial aid, and parenting classes to help address any underlying issues impacting the family's well-being
3. Implement specific protective measures to ensure the safety and well-being of the child.
 - developing a safety plan that outlines steps to be taken in case of emergency, conducting regular home visits to monitor the situation, and working with law enforcement if there are concerns about potential risks to the child's safety
4. Engage the child in supportive activities, such as therapy or mentoring programs, to promote their emotional health and resilience.
5. Critical need for a thorough and empathetic strategy when addressing allegations of child abuse and neglect
6. Meticulously evaluated, taking into account the unique circumstances and needs of the child involved.
 - By implementing fair process that prioritizes the child's well-being, we can ensure that vulnerable children receive the necessary protection and support.

Department's Response

1. To whom?
2. Alabama is a differential response state. Anyone who is brought to our attention because they need services can be helped by referrals to community services or the department can open a prevention to assess and provide any services needed.
3. The department has child abuse/neglect policy that specifies response times for critical situations and emergencies. This takes into account the reporter, the alleged perpetrator's access to the child and the vulnerability factors of the child. Any child with an open referral or case by DHR must be seen every 30 days or monthly depending on the type of case that is open. Each county has a working agreement with law enforcement that details the working relationship between the department and the law enforcement agency.
4. The department conducts Individual Service Plans with every family to discuss the needs of the family and the services that will be implemented to meet those needs; therapy and mentoring are some of the programs usually implemented.
5. The department has policy that directs our practice and we provide trauma informed training to our staff on a regular basis.
6. Any referral made to the department is assessed based on many things including vulnerability of the child/children involved.

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Panel Three- Worker Retention

This group only met once and never met again. The department attempted to engage members and arrange meetings including virtual meetings but the group dissolved on it's own prior to any recommendations being made.

Recommendations

Department's Response



Disaster Plan

Child and Family Services Plan

2025-2029

Alabama DHR's Disaster Plan

I. Introduction

Section 422(b)(16)(A)-(E) of the Act requires that states have in place procedures explaining how the state programs assisted under title IV-B, subparts 1 and 2, and title IV-E, would respond to a disaster, in accordance with criteria established by the Secretary.

II. Identify, locate, and continue availability of services for children under state care or supervision who are displaced or adversely affected by a disaster.

Alabama DHR will implement these following steps:

- Identify the affected areas of the state. Designate one liaison from each of the local county departments to be point of contact for inquiry by foster care providers who are displaced or adversely affected by disaster. Providers will contact the local county liaison by following the Department's after hours on call procedure policy. The appointed liaison will conduct on site visits to determine if there are any displaced children or families. A dashboard for State Office Admin was updated to provide real time updates of a list of any child placed in a county or region.
- The liaison will determine whether any staff members are affected by the disaster and which staff members may be available for contacting providers (foster homes, shelters, group homes, residential facilities).
- The liaison will maintain contact with Emergency Management Service.
- It is the liaison's responsibility to provide shelter staff with a contact should the following circumstances come to their attention:
 - a) children in the custody of state of Alabama
 - b) foster parent from state of Alabama
 - c) children in the custody of another state
 - d) foster parent from other state
 - e) any children without parent or legal guardian
 - f) any reports of child abuse and neglect related to children receiving shelter services
- The Department requires each foster home to develop a fire safety evacuation plan and a plan to be implemented in the threat of a natural disaster. The foster parents shall assure that, consistent with their ability to comprehend, foster children understand the plan. The plan will include, but is not limited to, instructions about the following:
 - a) When to dial 911.
 - b) A description of two or more means of exit from each floor level used for sleeping by foster children.
 - c) When to open the door into a hall and when to exit through a window.
 - d) The designation of a central meeting place outside the home.
 - e) A means of evacuating children who need assistance.
 - f) Leaving personal belongings behind in a situation that is a threat to safety.
 - g) Other emergency procedures:

- The licensee shall maintain a comprehensive list of names and telephone numbers, posted by the telephone for emergency situations. The list shall include the name and telephone number of each child's parent(s)/guardian(s) (if applicable), each child's doctor, law enforcement, fire department, hospital, poison control, Department of Human Resources, caregivers, and substitutes.
- A written emergency evacuation plan to be reviewed with the foster child and posted in a prominent place in the home. (e.g., on refrigerator or family bulletin board) The plan should contain the evacuation and care of the children in case of fire, tornado, serious accident or injury, or power failure shall be established and posted in a conspicuous place in the home. The licensee shall inform substitutes and all caregiver(s) of his/her duties and responsibilities in case of emergency. A written statement, signed by each substitute and caregiver, verifying that he/she has been informed of emergency procedures shall be on file in the home.
- The licensee and each caregiver shall have current Infant-Child Cardiopulmonary Resuscitation Certificate (CPR) from the American Red Cross, the American Heart Association, the National Safety Council or Health & Safety Institute. In addition, foster parents may obtain CPR training through other means such as local fire departments, emergency medical technicians, nursing instructors at local junior colleges/other nursing programs or county extension offices. CPR completed on-line is not accepted for foster parent approval. A current First Aid Certificate is also required. Copies of the certificates shall be on file in the home and foster parent record.
- The licensee shall post the poison control center's toll-free number on or near the telephone. The toll-free number is 1-800-222-1222. When a child is suspected to have swallowed a toxic substance, the licensee shall immediately contact the poison control center. Documentation of the poison control center's instruction shall be placed in the child's file with the date, time, and details of the incident.
- The foster home must maintain first aid supplies. Examples of items to be kept include assorted bandages, gloves, alcohol, peroxide, gauze pads, antiseptic cream, cotton balls/Q-tips, etc.

III. Respond to new child welfare cases in areas adversely affected by a disaster and provide services in those cases

Alabama DHR will implement these following steps:

- If communication lines have not been disrupted, local child welfare agencies will continue to receive notifications of child abuse, neglect, and dependency.
- If child welfare staff cannot physically reach a child in need, the local child welfare agency will notify the various law enforcement agencies, who will handle immediate calls requested by child welfare services.
- When appointed liaison visit shelters established by Red Cross or Emergency Management Services, they will assess whether there are any children and families needing child welfare services. They will be responsible for referring those children and families for appropriate services.

- Because Alabama is a coastal state, the need to assess displaced children from other states in the region is recognized. Contact will be established with other states that may have been affected by the natural disaster.

IV. Remain in communication with caseworkers and other essential child welfare personnel displaced because of a disaster

Alabama DHR will implement these following steps:

- The Department recognizes that the effect the disaster has had upon Department staff must be assessed very soon after the disaster occurred. The staff liaison appoints someone to maintain contact with staff members and assess what services they may need. This includes assessing any stress reactions staff may have and obtaining help for them to work through their feelings. Staff who may have been personally affected by the disaster, but are working with the victims of the disaster, may have stress reactions and may need help to work through their feelings.

V. Preserve essential program records

Alabama DHR will implement the following steps:

- Identifying and protecting vital records, systems, data management software, and equipment (including sensitive, restricted, or confidential data as defined by the department pursuant to existing regulations) is necessary to perform essential functions and activities and to reconstitute normal department operations following an emergency. The table below lists vital files, records, and databases by department, and denotes if they are sensitive, restricted, or confidential. The State's Information Technology (IT) Contract provides for complete support of application and database operations which include daily system backups and outage restoration. All applications that are maintained by the State's IT Outsourcing Contactor are covered under the IT agreement. Applications that are maintained by a separate 3rd Party Provider and reside on servers outside the support of the State's IT Agreement will need to be reviewed individually to determine the contracted system availability, backup, and restoration times supported by the Provider.

Vital File, Record, or Database: Original Location	Form of Record (e.g., paper, electronic)	Duplicate Copy Location	Person(s) Responsible for Maintenance, Retrieval, and Security	Able to Access from Alternate Location? (Y/N)	Record Security- Sensitive (S), Restricted (R), or Confidential (C)
Department COOP	Paper and Electronic	Office of EWS/Safety	Key COOP Staff	Y	S
Personnel Files	Paper and Electronic	SPD	Key COOP Staff	Y	R/C
Departmental Records	Paper and Electronic	SDHR and County Offices	Key COOP Staff	Y	R/C
SCI-II /OACIS / ADDI / client records	Paper and Electronic	SCI-II: Sterling Forest, NY OACIS/ADDI: RSA Data Center	Program Manager Office of Information Technology, Kyndryl, and ISD Staff	SCI-II: Y OACIS/ADDI: Y	S/R/C
EBT records	Paper and Electronic	DHR	EBT Program Manager	N	S/R/C
Child Care Licensing Files	Paper and Electronic	CCMS: RSA Data Center	Individual Consultants/Asst. Director Office of Information Technology and ISD Staff	Y - electronic record	C
Exempt Provider Files	Paper and Electronic	None	Individual Consultants/Asst. Director	Y - electronic record	C
Licensing Historical Files	Paper	None	Asst. Director	N	C
Minimum Standards for Day Care Centers and Nighttime Centers	Paper and Electronic		Asst. Director	Y	Public
Minimum Standards for Day Care Homes Nighttime Homes	Paper and Electronic		Asst. Director	Y	Public
Health and Safety Guidelines for Facilities Participating in the Child Care Subsidy Program	Paper and Electronic		Program Manager	Y	Public

Vital File, Record, or Database: Original Location	Form of Record (e.g., paper, electronic)	Duplicate Copy Location	Person(s) Responsible for Maintenance, Retrieval, and Security	Able to Access from Alternate Location? (Y/N)	Record Security- Sensitive (S), Restricted (R), or Confidential (C)
Health and Safety Guidelines for Out of School Time Facilities Participating in the Child Care Subsidy Program	Paper and Electronic		Program Manager	Y	Public
EHS-CCP, Child Care Partner files	Paper and Electronic		Program Manager	Y - electronic record	C
EHS-CCP Program Policies and Procedures	Paper and Electronic		Program Manager	Y	Public
Head Start Performance Standards	Paper and Electronic		Program Manager	Y	Public
EHS-CCP Contractor Files	Paper and Electronic		Program Manager	Y - electronic record	C
Child Care Subsidy Program Contractor Files	Paper and Electronic		Program Manager	Y - electronic record	C
Child Care Subsidy Program Policies and Procedures Manual	Paper and Electronic		Program Manager	Y	Public
CCDF State Plan	Paper and Electronic		Program Manager	Y	Public
Time and Attendance System Files	Paper and Electronic		Program Manager	Y - electronic record	C
Assistance Payments Manual	Paper and Electronic	iDHR	Program Manager	Y	Public
JOBS Program Policy Manual	Paper and Electronic	iDHR	Program Manager	Y	Public
TANF State Plan	Paper and Electronic	ADHR Website	Asst. Director	Y	Public
Caseload Reduction Credit Report		S Drive	Asst. Director	N	Public
FACTS	Paper and Electronic	SDHR	ISD Staff	Y	S/R/C

Vital File, Record, or Database: Original Location	Form of Record (e.g., paper, electronic)	Duplicate Copy Location	Person(s) Responsible for Maintenance, Retrieval, and Security	Able to Access from Alternate Location? (Y/N)	Record Security- Sensitive (S), Restricted (R), or Confidential (C)
CPS - CAN Files	Microfilm, Electronic	SDHR	CPS Staff	N	S/R/C
APS and CPS - Case Records	Paper	County Office and SDHR	APS and CPS Staff	N	S/R/C
APS and CPS - Policy Documents	Paper and Electronic	SDHR	APS and CPS Staff	N	C
**CPS - Data Base – On Base Client	Electronic	SDHR	CPS Staff	Y	S/R/C
***CPS - Admin. Review Database	Electronic	SDHR	CPS Staff	Y	S/R/C
Adoption – (Ward) State Permanent File	Paper	County	CPS Staff	N	S/R/C
FACETS (client records)/IEVS (SSA and IRS data)	Electronic	IBM Data Center 300 Long Meadow Road Sterling Forest, NY, 10979, USA	Program Manager Office of Information Technology, Kyndryl, and ISD Staff	Y	S/R/C

* Information Systems Division is responsible for maintaining an electronic backup file offsite.

** Used to track – Child Abuse/Neglect clearance forms (1598s) released to potential employers

*** Used as the permanent storage for child abuse/neglect cases where an Administrative Record Review is conducted

VI. Coordinate services and share information with other states

The State ICPC Office is responsible for assisting the local county departments in contacting other states regarding sharing information and coordinating services. Alabama DHR maintains an electronic database of children involved with ICPC. The State ICPC Office will assist local county offices in contacting out of state Child Welfare Offices to coordinate communication with parents, family, and attorneys of out of state children. State ICPC staff will work with local points of contact to collect, and share, as appropriate, pertinent information regarding children and families receiving ICPC services; including initial location and relocation information, previously identified well-being needs, status, and new needs, need for services and the communities' ability to provide, and ability to communicate with supervising agency and family members.

NOTE: The Alabama Emergency Management Agency has the overall responsibility for coordinating preparedness activities in the state, while the Alabama Department of Public Health (ADPH) has the responsibility for emergency preparedness in the state that relates to medical and social services in the event of public health threats and emergencies. Public Health provides education to help people prevent disease and injury. They work with businesses, organizations and individuals on preparedness and prevention activities. ADPH publishes a booklet on emergency preparedness and maintains a web site. It should also be noted that the "Shelter and Mass Care Support Strategy Plan" was signed by the Governor along with a number of representatives from State or County (governmental and non-governmental) agencies. This plan articulated the following vision, and established goals designed to achieve the stated vision: *A statewide sheltering and mass care effort that engages all levels of government and the nonprofit and private sectors, so that when a disaster threatens or strikes the State of Alabama, we collectively meet the sheltering needs of Alabama disaster victims and, as directed by the Governor, victims of other states.*



Foster and Adoptive Parent Diligent
Recruitment Plan
Child and Family Services Plan
2026 APSR Update

Introduction

Alabama's Department of Human Resources (DHR) has developed a comprehensive Foster and Adoptive Parent Diligent Recruitment Plan in alignment with ACYF-CB-PI-24-02. This plan addresses the specific needs for foster and adoptive homes, ensures equitable access to recruitment resources, and employs diverse methods for reaching potential foster and adoptive parents.

Alabama utilized available data to identify and describe the characteristics of children who need foster homes. Using this data, strategies have been developed to reach all parts of the community using digital marketing and other methods. All prospective foster and adoptive parents have access to DHR website, which list each county offices contact information as well as hours of service. Prospective foster and adoptive parents can also submit inquiries from DHR's main sites and partner sites. DHR follows up with all inquiries to provide information on becoming a foster parent and provides information on licensing agencies throughout the state. The agency maintains a non-discriminatory fee structure, including free pre-service training and background checks. The department does not charge any fees for the application or participation in the foster or adoptive parent programs. This policy ensures that financial barriers do not impede prospective parents from applying.

All staff members have access to DHR's staff training site (LETS). Trainings can be viewed from this site as well as provide data on how many staff members viewed and completed the training. The agency is researching the need to add additional trainings that would enhance staff's knowledge and work with the community. To eliminate any language barriers, the agency has contracted with providers to provide translation and interpretation services.

Procedures for a timely search for prospective parents for a child needing an adoptive placement, including the use of exchanges and other interagency efforts, provided that such procedures ensure that placement of a child in an appropriate household is not delayed by the search for a same race or ethnic placement. The goals in this plan were derived after careful analysis of available data. Alabama has a tracking system in place that tracks foster and adoptive homes from inquiry to licensure. Program Specialist with the Office of Recruitment and Home Care (ORHCS) are responsible for ensuring that all counties are contacting all prospective foster and adoptive parents who make an inquiry within 10 working days. Program Specialists conduct quarterly meetings with the county offices to review and monitor county recruitment plans, inquiry data and to provide feedback. We will ensure all 67 counties are tracked and included in the one plan by incorporating collective data themes and areas of need from quarterly County self-assessments. The ORHCS, Office of Quality Assurance and selected County Resource staff will collaborate on the development of a uniform diligent recruitment plan document. This document will be piloted in the six pilot counties this fall.

The Office of Recruitment and Home Care Support will also monitor and track recruitment efforts by utilizing data collected from the state's electronic report distribution system, the state's dashboards systems, and by ad-HOC reports requested from the Office of Data Analysis.

CHARACTERISTICS OF CHILDREN NEEDING FOSTER AND ADOPTIVE HOMES

As of March 2, 2025, there are 5,863 children and youth in care, of which 56% are white/Caucasian, 37% are black/African American, 0.1% are American Indian or Alaskan Native, 5% identify as Bi-Racial/Multi-Racial and less than 1% of children identified as Asian, Hawaiian, or Guamanian. 6% of children in foster care identify Hispanic as their ethnicity.

Table 1. AL Children and Youth in Foster Care by Race as of 03/04/2025

Race	Number of Children and Youth	Percentage
American Indian or Alaskan Native	8	0.14%
Asian	13	0.22%
Bi- Multi-Racial	303	5.17%
Black/African American	2172	37.05%
Guamanian or Chamorro	18	0.31%
Unable to Determine/Other	52	0.89%
Vietnamese	6	0.10%
White/Caucasian	3291	56.13%
Total	5863	100.00%

Table 2. Ethnicity of Children in Foster Care as of 03/04/2025

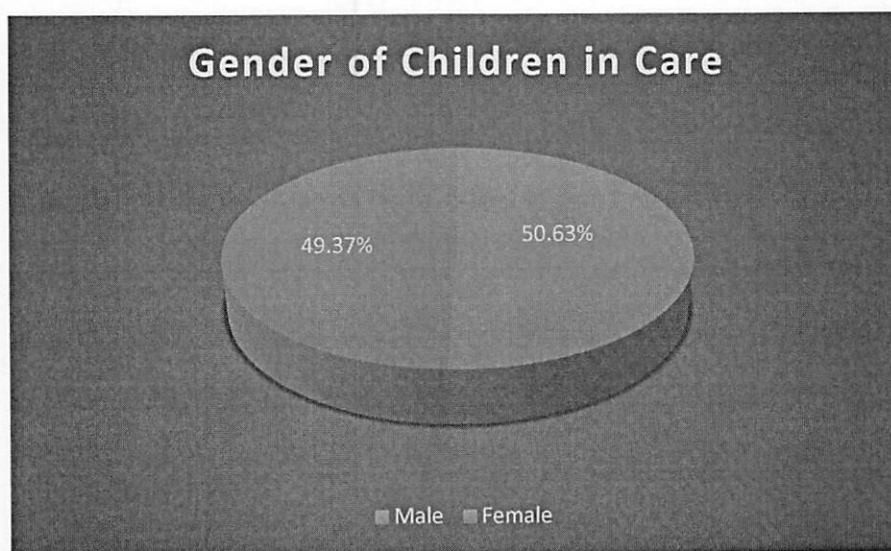
Ethnicity	Number of Children and Youth	Percentage
Hispanic	370	6.31%
Not - Hispanic	5373	91.64%
Other (Unknown, Unable to Determine etc.)	120	2.05%
Total	5863	100.00%

Table 3. Age of Children in Foster Care as of 3/4/25

The largest group in foster care (27%) is between 0 and 3 years of age, followed by children ages 7-12 (24%) and youth ages 13-16 (20%).

Age	Age Breakdown of Children in Foster Care	Percentage
0-3	1577	26.90%
4-6	825	14.07%
7-12	1420	24.22%
13-16	1166	19.89%
17+	874	14.91%
Total	5862	100.00%

Gender of children in care a (as of 03/04/2025)



Placement

Most children in care are placed in licensed family foster homes. Alabama DHR advocates for kinship placements as the initial and primary option, with 14% of children in such placements.

Alabama DHR acknowledges that there are areas of the state that have a greater need around recruitment and retention of foster homes. Alabama has identified pilot counties who are assigned a state level Program Specialist to assist with developing county recruitment plans and technical issues.

Of Traditional Foster Home vs Number of Children in Care for Top Five Counties

<u>County</u>	<u># Of County Approved Traditional Foster Homes</u>	<u>Number Of Children Entering in Foster Care</u>
<u>Jefferson</u>	<u>171</u>	<u>264</u>
<u>Etowah</u>	<u>87</u>	<u>170</u>
<u>Madison</u>	<u>123</u>	<u>185</u>
<u>Calhoun</u>	<u>58</u>	<u>123</u>
<u>Mobile</u>	<u>103</u>	<u>247</u>

The 5 counties with the highest # of children entering Care over the past 12 mos. (February 2024 to February 2025) and # Traditional Foster Homes by County – County approved only – As of 02/10/25.

Demographic info on Approved foster homes as of 02/10/25

<u>Marital Status</u>	
<u>Married</u>	<u>65.84%</u>
<u>Single</u>	<u>34.16%</u>

County Approved – Traditional Foster Homes Only

<u>Foster Parent Age</u>	
<u>19-25</u>	<u>1.42%</u>
<u>26-35</u>	<u>24.78%</u>
<u>36-45</u>	<u>37.06%</u>
<u>46-55</u>	<u>21.79%</u>
<u>56+</u>	<u>14.95%</u>

County Approved – Traditional Foster Homes Only

State of Alabama – Foster & Adoptive Parent Diligent Recruitment Plan

2025-2029 CFSP

Goal 1: Based on the demographics of children currently in care and the need for placement assistance by counties, the department will work to increase foster/adoptive and kinship homes licensed by the state for children residing in counties with high entry to care numbers and children who display behavioral difficulties and/or who have mental health diagnoses.

Rationale: The department has identified these as a need based on available data for children currently in care.

Objective 1: Implement a plan to accurately capture foster home capacity (number of available beds in home/number children licensed for). Alabama currently captures accurate number of licensed homes, but the capacity of the home is inconsistent for county to county. The number of children the foster home is licensed for would be a more accurate depiction of the state's ability to place children in foster home.

Action Plan	Measure of Progress	Responsible	Timeframe
Establish a mandatory capacity screen in FACTS under provider availability that would reflect the number of beds/ foster children the foster parent is licensed for.	<p>Track the number of completed capacity screens and compare provider capacity with current needs.</p> <p>Collect feedback from caseworkers on the usefulness and accuracy of the capacity data.</p>	FACTS Staff with support from Office of Data Management. The office of Data Management will work with FACTS staff members in making enhancements to FACTS. Once the field is ready for deployment, FACTS staff will develop a production release notice detailing the enhancements which will be provided to all FACTS users via email and placed on	October 2025 implementation with monthly tracking to start 1/1/26.

		the FACTS helpdesk site.	
Establish foster parent satisfaction surveys to assess the needs of current foster/adoptive families and children. These surveys will assist the state in addressing concerns to prevent foster home closures and increase retention.	<p>Number of surveys distributed and completed, trends in retention rates.</p> <p>Analysis of open-ended survey responses to identify common issues and areas for improvement.</p>	<p>State Management Office of RHCS Staff</p> <p>Office of Data</p> <p>County Management</p> <p>AFAPA</p> <p>County Resource Staff</p> <p>Responses will be tracked by Office of RHCS and reviewed with state office management staff as well as county management staff to recommend and discuss address noted concerns.</p>	<p>June 2025 implementation</p> <p>Surveys will be sent six months after initial licensure and every six months thereafter.</p> <p>Should a foster/ adoptive family choose to close their home at any time during the licensing period, they will be given an exit survey.</p>
Develop a diligent recruitment planning advisory committee including ILP youth, foster parent representatives, and community partners.	<p>Number of meetings held attendance records.</p> <p>Feedback from committee members on the effectiveness and impact of meetings.</p>	<p>State Management Office of RHCS Staff</p> <p>County Management</p>	April 2025; biannual meetings through 2029.
Complete field in FACTS to track the initial licensing date of foster homes.	Number of homes with tracking fields completed; average length of	<p>State Management Office of RHCS Staff</p> <p>Office of Data Management</p>	May 2025; ongoing tracking through 2029.

	time home has been licensed. Caseworker feedback on the accuracy and usefulness of the tracking tool.	County Management	
Objective 2: Increase the number of foster homes to a 3:1 ratio of beds to child by 2029.			
Action Plan	Measure of Progress	Responsible	Timeframe
Use Geomapping to identify specific communities for targeted recruitment based on where children enter care.		State Management Office of RHCS Staff Office of Data Management County Management	May 2025; ongoing analysis and recruitment through 2029.
Collaborate with communities that represent the demographics of children in care and who are open to taking children with challenging behaviors and practices.	Number of collaborations and recruitment events conducted; number of foster homes recruited from these communities. Feedback from community partners on the effectiveness of recruitment efforts.	State Management Office of RHCS Staff Office of Data Management County Management	May 2025; ongoing efforts and review through 2029.
Encourage the county offices to Utilize the established referral incentive (\$100) offered to existing foster parents Who	Analysis of data collected from Number of referrals made;	County Management	ongoing review through 2029. The state will update the current foster/adoptive

refer new foster and adoptive home applicants.	number of new foster homes approved due to referrals. Feedback from foster parents on the referral process and incentive effectiveness.		home application to include the question: "Were you referred by a current foster parent"?
Incorporate current foster parents into TIPS pre-service training through panel nights.	Number of panel nights conducted with current foster parents serving as panel members. Participant feedback on the value of hearing from current foster parents.	State Management Office of RHCS Staff County Management	May 2025; ongoing evaluation through 2029.
The department will develop foster/ adoptive parent orientation webinars.	Number of webinars conducted number of attendees. Survey results from participants on the effectiveness and clarity of the information provided.	State Management Office of RHCS Staff County Management	May 2026; ongoing quarterly review through 2029.
Rationale: Orientation webinars will allow the department to reach interested applicants			

across the state to provide information regarding children in foster care and the requirements to become a foster parent so that informed decisions can be made prior to making an application and attending TIPS trainings. They will also aid in tracking data.			
Implement mandatory Tools of Choice trainings as part of yearly CEU requirements.		State Management Office of RHCS Staff Selected County Management	January 2025; annual review through 2029.
Objective 3: Utilize diverse methods for disseminating general and child-specific recruitment information.			
Action Plan	Measure of Progress	Responsible	Timeframe
Raise awareness through social media, television, radio, printed materials, and community recruitment events.	Engagement metrics (e.g., clicks, shares, impressions); number of inquiries received. Analysis of the effectiveness of different recruitment channels based on feedback and engagement.	State Management Office of RHCS Staff Office of Data Management County Management	October 2024; ongoing analysis and adjustment through 2029.
Expand the use of Wendy's Wonderful Kids for child-specific recruitment.	Number of child-specific recruitment efforts and successful placements.	Office of Adoption	May 2024; weekly tracking through 2029

	Feedback from recruitment efforts on the success and challenges of finding homes for specific children.		
Utilize entry-to-care data to recruit homes in areas where children are entering care.	<p>Number of new foster homes in targeted zip codes; reduction in placement delays in these areas.</p> <p>Assess the impact of targeted recruitment efforts on placement stability.</p>	<p>State Management Office of RHCS Staff</p> <p>Office of Data Management</p> <p>County Management</p>	Oct 2024 ; ongoing monitoring through 2029.
Develop and maintain a foster parent recruiter call list.	<p>Number of recruiters on the list; frequency of use in recruitment events.</p> <p>Feedback from recruiters on their effectiveness in recruitment efforts.</p>	<p>State Management Office of RHCS Staff</p> <p>County Management</p>	Oct 2024 then monthly October 2024; ongoing updates through 2029.
Create a Youth Recruitment Team comprised of ILP and former foster youth.	Successful development of Youth Recruitment Team.	<p>State Management Office of RHCS Staff</p> <p>County Management</p>	May 2025 Implementation

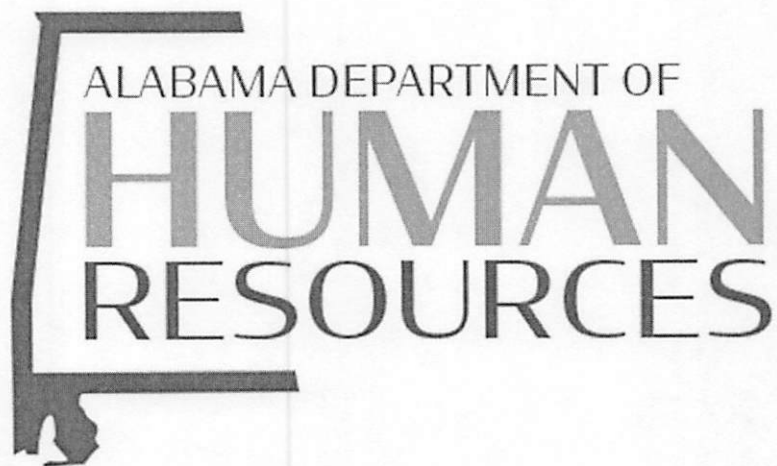
Objective 4: The Office of Recruitment and Home Care Support (ORHCS) will continue to support statewide recruitment and licensing of foster and adoptive homes.

Action Plan	Measure of Progress	Responsible	Timeframe
Conduct quarterly meetings counties to monitor recruitment, retention, and compliance	<p>Number of meetings held</p> <p>compliance rates with licensing standards.</p> <p>Feedback from counties on challenges and improvements in recruitment and compliance.</p>	Office of RHCS Staff	May 2024; quarterly reviews through 2029.
Utilize the Weekly Recruitment List to follow up with inquiring individuals.	<p>Number of inquiries followed up on; number of new applications received.</p> <p>Assess the responsiveness and effectiveness of follow-up efforts.</p>	Office of RHCS Staff	May 2024; weekly tracking through 2029.
Explore expansion opportunities to increase access to TIPS & DT training.	Increase in the number of families being DT trained and number of TIPS classes offered per year.	<p>Office of RHCS Staff</p> <p>Identified Pilot County Management</p>	May 2024 then quarterly through 2029.
Streamline licensure /training paperwork and condense any repetitious request for information.	Implementation of more digitalized forms	<p>State Management</p> <p>Office of RHCS Staff</p>	<p>July 2025 then quarterly through 2029.</p> <p>State will use existing software or purchase</p>

	and required paperwork. Feedback from TIPS participants on the ease of use and effectiveness	Office of Data Management Identified Pilot County Management	new software that will assist in digitalizing current forms. All other forms including those created by individual counties will become obsolete and counties will receive a memorandum advising of the updated forms and their immediate use.
Develop a licensing/recruitment/retention desktop tool to assist staff.	Statewide implementation of desktop tool.	State office Management/Office of RHCS Staff Identified Pilot County Staff	March 2025 implementation; updated as needed through 2029.
APSR Update: <ul style="list-style-type: none"> • 2025: Statewide recruitment events continue to be held throughout the state by each county. Innovative recruitment videos were developed for both traditional recruitment and kinship guardianship. Printed materials were also updated with a new QR code that now tracks and collects data when it is scanned. DHR branding is also shown at collegiate events at several Alabama colleges/universities. <p>Staff from QA and ORHCS met in January 2025 to collaborate on a statewide foster/adoptive parent survey. Staff discussed survey questions, additional potential stakeholders and lived experience youth to include, as well as finalized the survey delivery method and roll out dates. A pilot group was interviewed at the AFAPA annual conference May 2025. Findings will be shared in future writings.</p>			
Goal 2: Train Staff to Work with all community members			
Objective 1: Implement additional trainings			
Action Plan	Measure of Progress	Responsible	Timeframe
Conduct training at annual conferences and review training effectiveness.	Successful training sessions and positive feedback from participants.	AFAPA State Management, Office of RHCS Staff	Annual Reviews from April 2025 Through 2029

Objective 2: Address linguistic barriers.			
Action Plan	Measure of Progress	Responsible	Timeframe
Continue contracts for interpreter services and translate documents.	Service usage, feedback from caseworkers, and effectiveness of translations.	State Management/Resource Management Division	Quarterly reviews starting January 2025.
APSR Updates: <ul style="list-style-type: none"> • 2025: Annual training was provided by DHR staff on kinship guardianship, monetary incentives for current foster parents and reasonable and prudent parenting at permanency conference and the Alabama Foster and Adoptive Parent Association annual conference April and May 2025. Training evaluations were positive as evidenced by overall 4.8 ratings out of 5. 			
Goal 3: Ensure Timely Search for Adoptive Parents			
Objective 1: Utilization of exchanges and interagency efforts			
Action Plan	Measure of Progress	Responsible	Timeframe
Feature children on Adopt Us Kids and Alabama Heart Gallery when the case plan is adoption with no identified resources. Streamline document submission and monitor delays in adoption processes.	Timeliness of adoptions and effectiveness of document handling.	Office of Adoption, State Management, Office of Data Management	May 2024 then weekly Ongoing from October 2024 through 2029.
APSR Updates: <ul style="list-style-type: none"> • 2025: There are no updates available. 			
Goal 4: Apply licensing standards equally			
Objective 1: Provisionally licensed foster home approvals will be completed in compliance with state policy. Ensure compliance with state policy for provisionally licensed homes.			
Action Plan	Measure of Progress	Responsible	Timeframe

Document all provisionally licensed homes in FACTS and review during quarterly meetings.	Compliance with documentation and approval standards.	State Management Office of RHCS Staff Office of Data Management County Management	December 2024 then quarterly
APSR Updates: <ul style="list-style-type: none"> • 2025: There are no updates available. 			
Goal 5: Timely Processing of Home Study Requests from Other States			
Objective 1: Implement procedures for timely processing.			
Action Plan	Measure of Progress	Responsible	Timeframe
Collaborate with relevant offices to ensure accurate data capture and timely processing of home studies.	Analysis of data to identify the data home study request received, processed, and assigned. Data analysis of requests and processing timelines.	State Management Office of RHCS Staff Office of Data Management County Management	May 2024 then quarterly Quarterly review starting January 2025 through 2029.
APSR Updates: <ul style="list-style-type: none"> • 2025: The ICPC office has collaborated with APHSA (American Public Human Services Association), AAICPC, and other states to work toward permanent placements. Collaboration has also been achieved with the FACTS/IT team to work on producing an ERD report for ICPC to assist in capturing home studies received/sent and processed. Alert systems have been put in place for a status on requests to other states as well as local county offices. Alabama ICPC also requested and received a grant for 233,410.00 which has been utilized to change ICPC's existing CMS NEICE computer system to the Clearinghouse computer system, effective June of 2023. The annual ICPC conference which provides training and Federal updates on the implementation of the ICPC process will continue to be attended. The date completed home study requests are received and processed is logged on internal spread sheets as well as the 003X ICPC report which follows worker assignments. 			



Health Care Oversight and Coordination Plan

Child and Family Services Plan

2025-2029

Alabama DHR's Health Care Oversight and Coordination Plan

I. Introduction

Section 422(b)(15)(A) of the Act requires states to develop a plan for the ongoing oversight and coordination of health care services for children in foster care(Health Care Oversight and Coordination Plan). States must develop the plan in coordination with the state Title XIX (Medicaid) agency, and in consultation with pediatricians and other experts in health care, and experts in and recipients of child welfare services.

The Alabama Department of Human Resources has required for many years that children coming into care receive health care services when they enter care and during their stay in care. To achieve this, the Individualized Service Plan process was developed to assure that health care needs and/or strengths are addressed for each child in care. Through this process, county departments ensure health care needs are assessed and identified and that health services are received when needed. Quality Assurance efforts in each county may bring health care professionals together to enhance the health care services for children in care.

II. Schedule of Initial and Follow-Up Health Screenings

When a decision is reached that out-of-home care is necessary, arrangements are to be made for a medical examination before a child is placed in foster care. The purpose of the initial medical examination is to:

- Record a brief medical history;
- Document the child's medical condition upon entry into care, including visible injuries;
- Determine whether the child is free from contagious disease; and
- Identify needed medical concerns and care needed.

It is preferable that a medical examination be made prior to the child's entry into care. If this is not possible, the examination must be made within 10 days after placement. The initial examination may be obtained through EPSDT (Early and Periodic Screening, Diagnosis, and Treatment Services also known as the MediKids Program) Medicaid Screening if the child is eligible for Medicaid or by a physician or pediatrician. Inter-periodic screening (in between regularly scheduled screenings) must be provided when a medical condition is suspected, or a condition has worsened or changed sufficiently enough that further examination is medically necessary. An inter-periodic screening may be performed based on a request by the patient or guardian or based on the provider's professional judgment relative to medical necessity.

Dental Care

All Medicaid eligible children are to have a dental examination under Medicaid Screening (Early Periodic Screening & Diagnostic Treatment). Annual dental examinations are recommended. These should begin no later than three years of age. Children who do not qualify for Medicaid will have a dental examination authorized through the ISP with payment through local flex funds after other resources have been explored and exhausted.

If the dental examination indicates a medical necessity for braces and or other orthodontic care, local funds may be used for this. Medicaid does not pay for braces except in rare and unusual circumstances. Medicaid requirements state that braces must be a medical necessity and documentation from a health care provider must show evidence of the medical necessity. The caseworker must obtain approval from Medicaid. Any third-party insurance should be explored to determine whether this insurance covers braces. The ISP team must determine this is a needed service before payment can be pursued. If a child is fourteen or older needs braces and the need can relate to one or more of the Chaffee outcomes and the ISP states, there is a need for braces, ILP funds can be explored.

Monitoring and Treatment of Ongoing Health Care Needs

All children and youth in the Department's legal custody are required to have a primary care physician to serve as the child's "medical home". The health care needs of a child(ren) in care should be continuously assessed during their time in foster care. The ISP team will assess the health care needs(emotional, physical, and mental) of a child(ren) through contacts with and reports from the child's health care provider and foster care provider. The ISP team shall include, at the minimum, the age-appropriate children, the parents, the DHR Worker, the primary caregiver or foster care provider, and other individuals requested by the children or family. Team composition may also include relatives, other past or present caregivers, service providers, teachers, and other DHR program staff involved with the family (e.g., JOBS or Adult Services worker, case aide). The child's Guardians-ad-Litem (GAL) is also invited to be part of the ISP team. The Comprehensive Family Assessment shall include developmental information related to functioning(emotional, medical, and physical).

Unless otherwise recommended by the pediatrician, the following guidelines are recommended in determining the frequency of medical examinations for foster children:

<u>To 1 year</u>	<u>1 year to 2 years</u>	<u>2 years through 18 years</u>
at 1 months	at 18 months.	at age 2 years and annually thereafter
at 2 months		
at 4 months		
at 6 months		
at 9 months		
at 12 months		

It is through the ISP team process that a child's health needs, once identified through EPSDT or other medical screenings or procedures, are monitored and services/treatment avenues are established. The child's assigned caseworker is responsible for scheduling follow up medical appointment if there is a need identified during the initial screening. Medical professionals may be ISP team members working with the child and family. Providers of health care services are identified by team members and a specific plan made to access the health care provider.

In collaboration with Alabama Medicaid Agency, the Alabama Coordinated Health Network(ACHN) is a program that work with Medicaid to coordinate the care of Medicaid recipients and assist them with

making better choices to have better health outcomes. It is a single care coordination delivery system that effectively links patients, providers, and community resources. There are currently seven ACHN regions operating in Alabama that focus on primary care, maternity, and family planning to help participants reach their health goals. The ACHN participants includes:

- **General Medicaid Population(including former foster children and current foster children)**
- **Family Panning/Plan First(women ages 19-55 and men 21 and older)**
- **Maternity Care recipients**

The statewide system will manage care coordination services now provided by 12 maternity program, six health home programs and ADPH staff in 67 counties. Care coordination referrals may be requested by providers, recipients, or community sources. Care coordination services may be provided in settings of recipient's choice to include providers offices, hospital, ACHN entity office, public location or in the recipient's home. Care Coordination Services include:

- Screening and assessment of recipient needs.
- Assist recipients in obtaining transportation or applying for Medicaid.
- Help recipient with appointments or appointment reminders.
- Coordinate and facilitate referrals.
- Educate or assist recipients with medication or treatment plans.
- Help recipients seek care in the appropriate setting (e.g., office vs ER).
- Facilitate communication between patient and care providers.
- Help recipients locate needed community services.

The ACHN operates in 7 regions across the state. See map below



III. Medical Information Update and Sharing

Infants and children under 3 years of age who are the subject of an indicated child abuse/neglect investigation must be referred to the AEIS for evaluation. There is a formalized DHR referral process in place for this to occur. As part of the initial EPSDT or the initial medical when a child enters care, infants, and children under 3 years of age should be screened for developmental delays and referred to AEIS.

In Alabama the Foster Parent Bill of Rights, Code of Alabama, 1975 § 38-12A-2(7) provides that foster parents must be provided with health history information that is known by the Department at the time of placement. "When the Department knows of such information after placement, the Department shall make that information available to the foster parent as soon as practicable." Foster parents will need to be made aware of the following:

- All health problems including allergies, bedwetting, emotional problems;
- Both prescribed medications and regularly administered over the counter medications and the purpose of the medicine;
- Special diets or food allergies;
- Pediatrician's name and/or primary health care provider along with the telephone number; and
- Verification of health insurance--private insurance, Medicaid card or Medicaid number.

Foster parents are members of a child's ISP team, in accordance with Department policy. They are to be informed of follow-up medical appointments and referrals. Approved foster parents and related caregivers of children in the temporary or permanent custody of the Department are authorized to complete and sign certification forms for the WIC Program.

IV. Mental Health Needs of Children in Foster Care

The ISP and Comprehensive Family Assessment process is utilized to identify strengths and needs of children and their families, identify steps and services to address needs, and determine the least restrictive environment in which a child's needs may best be met. The ISP team shall be fully involved when assessing the need for, and appropriateness of, inpatient services. Before a child enters inpatient placement, concurrence must be received from State DHR. Placements that are more restrictive than foster family homes include therapeutic foster homes, moderate residential treatment facilities, acute psychiatric hospitals, and intensive residential treatment facilities.

Best child welfare practice requires that any behavior modification program employed in the treatment or management of a child's behavior be individualized and meet certain standards, including, but not limited to, the following:

- Program relies primarily on rewards instead of punishment;
- Program be based on a careful assessment of the antecedents of the behavior that the program is designed to change; and
- Program is consistently implemented throughout the day, including in school, residential and leisure activity settings.

Alabama DHR utilizes a Residential Placement Intake Protocol to provide guidance on and concurrence with the placement of children into certain programs. The Protocol addresses emergency residential placements and the completion of a Multi-dimensional Assessment Tool (MAT) when a child needs either a Therapeutic Foster Care (TFC) placement or placement in a moderate residential facility. Continuous oversight and monitoring of children receiving treatment in more restrictive settings is performed using the MAT to determine the continued need for the placement. Intensive residential treatment requires completion of a "Certification of Need for Services" by a qualified professional in addition to completion of a MAT to determine the continued need for this level of treatment.

Criteria For Prescription of Medication for Mental Health Reasons

Medication prescribed for mental health reasons may only be administered to children when (a) the informed consent of the parent, legal custodian/guardian, or the foster parent who is legally authorized to provide consent and (b) the informed consent of the child (age 14 or older) has been obtained. The child and adult(s) whose consent is sought will be provided sufficient information to permit them to make an informed decision. Consent may be withdrawn at any time; however, a child's refusal to consent may be overridden by a court of appropriate jurisdiction. If it appears that psychotropic medication will be used to address crises in a periodic, on-going pattern with the child, informed consent must be obtained from the child (age 14 or older) and the parent(s), legal custodian, guardian, or foster parent who is legally authorized to provide consent. The reasons for using psychotropic medication, its expected benefits, and the potential side effects should be explained in terms understandable to the child and parents along with any significant alterations in dosage. The children's and parents' preferences and requests for alternative interventions should be considered and documented in the children's DHR records and their medical records.

[NOTE: The term "parent" as used here means the child's biological, or adoptive parent, or the primary caregiver from whom the child in care was removed.] Prescriptions for psychotropic medication must be written by a licensed physician who is trained in the use of such medication with children and adolescents. If the physician prescribing the psychotropic medications for the child is other than the child's primary physician, there should be consultation with the child's primary physician. When psychotropic medication is used as a treatment intervention, it must be administered only as prescribed by the physician writing the prescription. Psychotropic medication is to be carefully and closely monitored by the child's physician and the ISP team for both desired effects and potential side effects. Monitoring should include information received from the child, parent(s), and caregivers.

A qualified physician must complete a thorough assessment of the child before prescribing medication. This assessment (especially a psychiatric assessment) should be comprehensive and include history, direct observation of the child, and all pertinent information from the school, parents, foster parents, therapists, and pediatrician. This will require effective communication from all the stakeholders in the child's life. The assessment is performed to determine the appropriateness of prescribing the medication and to establish baseline data for monitoring its effects. The physician shall conduct a physical examination of the child, review the child's medical history and other relevant evaluations (e.g., medical, psychiatric, psychological) and obtain input from the child's parent(s)/caregiver(s), the DHR worker, and other relevant service providers and school personnel. The children's and parents' preferences and requests for alternative interventions should be considered by the physician as informed consent is required prior to administering medication.

The physician should be a member of the ISP team with input at times being obtained through written report, telephone calls, etc. If the physician is a consultant to a service provider, the provider and the child's DHR worker shall ensure the physician is aware of the caregiver's capabilities, appropriate alternative treatment interventions, and the changing needs of the child and family. In a crisis where the child will seriously harm self, harm others, or cause substantial property damage, medication may be administered without informed consent upon an order by the treating physician and in accordance with generally accepted medical standards. There must be documented evidence in the child's record that in the physician's professional judgment, the harm or substantial property damage will occur without the benefit of the medication and that less restrictive interventions are not therapeutically indicated. The child's physical and psychological condition must be frequently monitored by the physician or an appropriate staff member or other provider following administration of the medication.

The dispensing of Prescribed as Needed (PRN) psychotropic medication can only be allowed if in compliance with a physician's approved protocol and the order is documented in the child's medical file of the provider's record and the child's DHR case record. PRN medications administered to address a child's behavior two or more times a week for three consecutive weeks will result in a comprehensive review of the child's individualized service and behavior management plans and the incidents, factors, and rationales for such PRN medication use.

V. Oversight of Prescription and Over the Counter Medicines/Protocol

Individuals providing daily care for children in care must take precautions in administering medications to children in their care. While every child has individual health needs, there are consistent measures that shall be taken in administering medication to children in the care of the Department. The following should be discussed with all out-of-home care providers.

Over the Counter Medications

Out-of-home providers shall follow the procedures listed below when administering over-the-counter medications to children in care.

- Carefully read the manufacturer's product information before administering any over the counter medication.
- Underscore the importance of paying close attention to product labels, particularly precautions and contraindications.
- Administer over-the-counter medication to a child only if the product information indicates the medication is safe for the age child to whom it is being administered
- Administer medications according to the manufacturers' recommended dosage and in the manner prescribed by the manufacturer (e. g. by teaspoon, entire pill, and capsule) unless the child's doctor has given written instructions that vary from this.
- When preparing to administer over-the-counter medication, reread the labels to assure that the medication is safe for the age of the child.
- Check the expiration date on the medication container. Out-of-date medication shall not be administered.
- Certain medical conditions contraindicate the use of over-the-counter medications. In these situations, the foster parent and the child's worker shall consult with the child's doctor before administering any over the counter medications.

Prescription Medications

Out-of-home providers shall follow the procedures listed below when administering prescription medications:

- Because individuals react differently to medications, give prescription medication only to the child for whom it is prescribed.
- Some pharmacies will add a discard date to prescription labels, although this is not required. Any "left over" prescription medication should be discarded.
- Give the medication as directed by the child's doctor.
- If the child appears to have an adverse reaction to the medication, notify the doctor who prescribed the medication for the child. The adverse/allergic reaction to the medication should be documented in the child's/patient's medical record. The foster parent also needs to notify the child's DHR social worker about the reaction, and especially if the child is allergic to the medication. Documentation of the adverse/allergic reaction should be made in the DHR case record.
- Maintain a log (DHR 2073) of all prescription medications administered to a child as required in the Minimum Standards for Foster Family Homes.

As stated in the Minimum Standards for Foster Family Homes,

"All medications shall be secured in a locked storage area that is inaccessible to small children." In the event of an accidental overdose or adverse reaction to either an over-the-counter medication or a prescribed medication, the Children's Poison Control Center toll free telephone number 1-800-292-

6678 should be contacted. The regular Poison Control Center, toll free telephone number 1-800-222-1222, may also be contacted.

Psychotropic Medication / Monitoring Protocol:

The psychotropic medication and monitoring protocol was implemented in October 2016 in a continued effort to minimize placement moves and reliance on psychotropic medication as a behavioral control. The project began with an introductory training for seven pilot counties, as follows: Montgomery, Autauga, Elmore, Macon, Bullock, Russell, and Lee. Presently, the APMRT team provides behavioral services to 10 catchment counties, consisting of Montgomery, Elmore, Autauga, Macon, Bullock, Russell, Lee, Chilton, Jefferson, and Shelby. The Alabama Psychotropic Medication Review Team (APMRT) consists of a part-time Child Psychiatrist, a Nurse Practitioner, and two Board Certified Behavioral Analysts. The APMRT has provided medication review services, recommendations, or one of three types of behavioral services (behavioral services with a formal medication review, behavioral services without a medication review, or preventative behavioral services for children not currently on any psychotropic medications). The APMRT Team will review monthly medication data provided through a partnership with the Alabama Medicaid Agency; identify young people who are too young to be prescribed psychotropic medications, prescribed too many medications of the same or similar classes and too many medications, per set criteria. They will contact the county office, share their concerns, and begin consultation to decrease reliance and use and provide behavioral support as a mechanism to safely reduce use of medications, when appropriate. The APMRT teams provides medication review services to all counties in the State of Alabama.

VI. Health Care Needs of Youth Aging Out of Foster Care

The ADHR recognizes the need to provide specific support for older youth currently in foster care and/or who will be exiting care due to their age. Therefore, the Office of Permanency, through the Independent Living and Foster Care program, will provide increased focus and support to caseworkers in addressing health care planning for this population. Education through training and other forums will be provided to build capacity of staff and providers serving older youth in addressing and planning for the youth's oversight of health care needs.

The expectation is that prior to emancipation from foster care, youth are to have a personalized transition plan that would include addressing oversight of their health care needs. Through the Individualized Service Planning process staff will develop a specific plan with the youth which addresses the following:

- A transition plan developed no later than 90 days prior to the date on which the child is expected to age out of the system.
- Providing education and information regarding designating another individual, i.e., a health care proxy, to make health care treatment decisions on the youth's behalf should the youth

be unable to participate in such decisions and does not have or want a relative otherwise authorized under State Law to make such decisions.

- Providing education and information as to the option to execute a health care power of attorney, health care proxy, or similar document recognized under State law.
- Providing medical information and documents to the youth which are available to the agency.

The Department has a responsibility to educate and prepare youth to have the capacity of overseeing their individual health care needs. This can only be accomplished through ongoing efforts to engage youth around a transition plan that is timely and specific.

VII. Assessing Health and Well-Being of Children in Foster Care

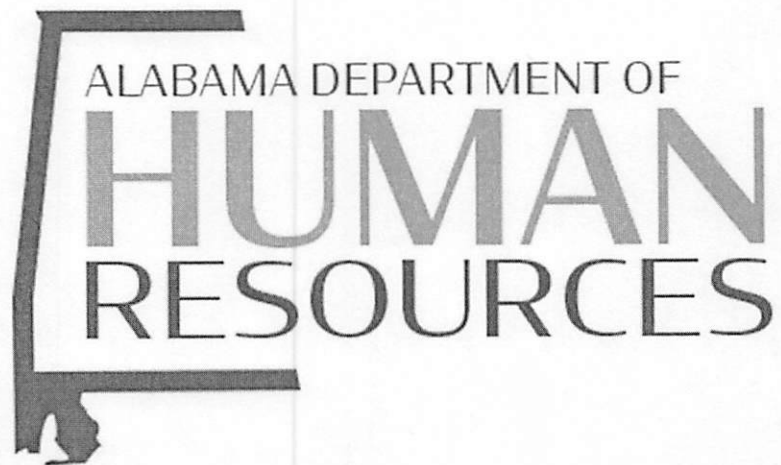
The Office of Quality Assurance (QA) is tasked with the responsibility to assess the Health/Physical Well-Being and Emotional Well-Being of children in the system. This is a two-fold approach comprised of periodic case reviews by state QA team members, as well as county-specific QA teams operating in each of the 67 counties, that conduct a continuous review of records in their own county. These county teams often include physical and mental health professionals serving as reviewers, or as part of the reviews.

Children should achieve and maintain good health status, consistent with their general physical condition. Healthy development of children requires that basic physical needs for proper nutrition, clothing, shelter, hygiene, and medical/dental care are met daily. Preventive health care should include immunizations, dental hygiene, and screening for possible physical or developmental problems. The central concern here is that the child's physical needs are met and that special care requirements are provided as necessary to achieve optimal health status. This also includes follow up with appropriate sub-specialists, other health care providers and therapists. Adult caregivers and professional interveners in the child/youth's life bear responsibility for ensuring that basic physical needs are being met and that health risks, chronic health conditions, and acute illnesses are adequately addressed in a timely manner.

Emotional well-being is essential for adequate functioning in a child's daily life settings, including school and home. To do well in school and in life, a child should: present a major emotional pattern appropriate to time, place, person, and situation; have a sense of belonging and affiliation with others rather than being isolated or alternated; socialize with others in various group situations as appropriate to age and ability; be capable of participating in major life activities and decisions that affect him/her, including educational activities; and, be free of or experiencing reduced major clinical symptoms of emotional/behavioral/thought disorders that interfere with daily activities.

For a child with mental health needs who requires special care, treatment, supervision, or support to make progress toward stable and adequate functioning at school and home, the child should be receiving necessary services and demonstrating progress toward adequate functioning in normal settings. Some children may require assistance or services to improve communication, social, and problem-solving skills to be successful. Other children may require special behavioral interventions, medications, and/or wraparound supports (such as behavior aides, access to a therapist when needs

arise, etc.). Timely and adequate provisions of supports and services should enable the child to benefit from his/her education and enjoy the routine activities of childhood.



Training Plan

2025-2029

Alabama Child Welfare Staff and Provider Training

I. Introduction

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.

II. Description of Initial In-Service Training Program for New/Reassigned Staff

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 prerequisite 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. This initial training takes approximately 4 classroom weeks to complete, with on the job training components provided by county supervisors in between the classroom sessions. Outlined in the table below are the number of sessions and participants that have attended each module thus far in FY 2024.

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

The average length of time between an employee's start date and the date that employee began STEP training was 16 days.

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. 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.

STATEWIDE INFORMATION SYSTEM (FACTS) TRAINING

FACTS has been incorporated into the new STEP training so that workers will learn the skills needed to document the work they are doing in Intake, Investigation, Case Management and Adoption. OCWT continues to offer counties specialized county-based training regarding skill development in using our automated system to best support the work our child welfare workers are doing with families.

Trauma Informed Partnering for Safety and Permanence (TIPS) Leader Certification Training

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.

DHR Supervisory Management Training

An important quality of successful supervision is the ability to be an effective leader. Every leader can be a supervisor, but every supervisor cannot be a leader. DHR Supervisory Management Training was developed by The Child Welfare Policy and Practice Group to provide more information regarding leadership for Supervisors. This 4-day training will help build supervisory capacity by providing supervisors with the day-to-day skills needed to perform their duties including how to manage staff performance. Effective supervision can improve child and family outcomes.

DHR Supervisor Management Training was presented during the onset of FY24. Two sessions were provided to new and experienced supervisors.

TRAINING	# OF STAFF TRAINED	COUNTY REPRESENTATION
DHR SUPERVISORY MANAGEMENT TRAINING - NORTH	12	9
DHR SUPERVISORY MANAGEMENT TRAINING - CENTRAL	12	10

DHR Learning Education and Training System (LETS)

Required modules are to be viewed by staff at the directive of one's supervisor. Some of these include Active Shooter Preparedness Training; Confidentiality in the Workplace; Language Assistance; Service & Safety from Threatening Behavior; Safety in DHR Facilities

There is approximately 31 different training topics in the state's training information management system, LETS. This includes participation from all 67 county DHR offices child welfare staff and SDHR staff and trainings are completed yearly.

Chafee Foster Care Independence Program (CFCIP) Training

Alabama DHR provides comprehensive, innovative, and relevant training to our youth, providers, county, and state staff, foster parents, judges and interested community stakeholders. We conduct annual networking opportunities for ILP staff, providers, and community stakeholders. We will continue to provide regional trainings to the county related to independent living policy and procedures and NYTD. We will provide online trainings as deemed appropriate using our LETS training system. Youth will be provided annual leadership and ILP training. Youth will participate in national conferences annually and in monthly trainings around the state. We will continue, in partnership with AFAPA, APAC, and Children's Aid Society, to educate potential foster and adoptive parents regarding the need and benefits of providing care and becoming permanent connections for our older youth.

Training Checklists

The training checklists that follow provide information on current plans for the years covered by the 2025-2029 CFSP. The estimated number of participants and estimated costs that are shown for each training activity reflect the totals per each year of the CFSP, not the collective totals for the five-year period.

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Alabama Foster and Adoptive Parent Association (AFAPA) will provide an Annual AFAPA Conference, two mini-conferences, and other county and/or regional training sessions as needed/requested. FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input type="checkbox"/> Development of Maintenance of Case Plan |
| <input checked="" type="checkbox"/> Hearings and Appeals | <input checked="" type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input checked="" type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input checked="" type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☒ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: AFAPA leadership/members and invited speakers

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three
Hours: 15
Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input checked="" type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input checked="" type="checkbox"/> Child Care Agency Staff | <input checked="" type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: 80,000.00

Cost Allocation Methodology: Training cost are part of overhead(supplies, printing, notebooks, etc. Cost is directly charged(such as travel of employees, trainers' salaries & fringe benefits) are distributed according to IV-E/IV-B penetration rate.

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Alabama DHR conducted an annual Child Protective Service Training for 150 front line child protective service staff. FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input checked="" type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☒ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☐ Other: AFAPA leadership/members and invited speakers

Indicate Duration:

☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three days

Hours: Click or tap here to enter text.

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: 174,512.00

Cost Allocation Methodology: Training cost are part of overhead(supplies, printing, notebooks, etc. Cost is directly charged(such as travel of employees, trainers' salaries & fringe benefits) are distributed according to IV-E/IV-B penetration rate.

Applicable Funding Source:

- | | | |
|------------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input checked="" type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Adoption Incentive Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: The Trained Therapist Network provides training to mental health professions that see families and children served by the Department. The training is coordinated by Children's Aid Society/APAC. There are two sessions each year. One in four sites throughout the state and another in two sites. FYs 2025-2029

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input checked="" type="checkbox"/> Case Management |
| <input checked="" type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Nationally and regionally known experts

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Two
Hours: Click or tap here to enter text.
Credit Hours Earned: 5.5 CEU Credit

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input checked="" type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input checked="" type="checkbox"/> Child Care Agency Staff | <input checked="" type="checkbox"/> Child Placement Agency Staff |
| <input checked="" type="checkbox"/> Other State Agency Staff: JJ, MH, DD, etc. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): | |

Cost

Estimated Total Cost: \$18,000.00

Cost Allocation Methodology Direct charges to IV-B-2(PSSF) grant.

Applicable Funding Source:

- | | | |
|---------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input checked="" type="checkbox"/> IV-B-2 (PSSF) | <input type="checkbox"/> IV-E Chafee ILP | <input checked="" type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: The Supervisor Conferences for FYS 2025-2029, will address issues such as Prevention, Permanency Planning, Family Centered Practice, Outcome Based Supervision/practice.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input checked="" type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input checked="" type="checkbox"/> Case Management |
| <input checked="" type="checkbox"/> Referral to Services | <input checked="" type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input checked="" type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Various

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Two
Hours: Click or tap here to enter text.
Credit Hours Earned: 7.5 CEU Credit

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: \$264,000.00

Cost Allocation Methodology Training cost is part of overhead(supplies, printing, notebooks, etc.). Direct training cost(such as travel of employees, trainers' salaries & Fringe benefits) go into a pool and are distributed according to IV-E/IV-B Penetration Rate.

Applicable Funding Source:

- | | | |
|------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input checked="" type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input checked="" type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input checked="" type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Adoption Incentive Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: The Annual Youth Leadership Training is scheduled each year to provide leadership training to the State's DREAM Ambassadors, DREAM Council Leaders and Youth Advisory Council Leaders from across the state. It is designed to provide direct leadership training to our youth focusing on working with Judges, legislators, social workers, and administrators to promote youth advocacy. FYS 2025-2029

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Children's Aid Society

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three
Hours: 10
Credit Hours Earned:

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: \$40,000.00

Cost Allocation Methodology Cost are directly charged to grant through our contract with Children's Aid Society.

Applicable Funding Source:

- | | | |
|------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input checked="" type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Adoption Incentive Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Attendance by Family Services staff members to Wendy's Wonderful Kids Summit. The grantee(Alabama DHR) must ensure that recruiters and supervisor for Wendy's Wonderful Kids, a program of the Dave Thomas Foundation for Adoption attends WWK yearly summit. The Summit provides training in topics and recruiters and supervisor. AL FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input checked="" type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Coordinated by the Dave Thomas Foundation for WWK

Indicate Duration:

☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three days

Hours: Click or tap here to enter text.

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input type="checkbox"/> Other Community Staff (medical, legal, LEA): Click or tap here to enter text. | |

Cost

Estimated Total Cost: \$25, 443.00

Cost Allocation Methodology: Cost is directly charged to grant for travel, per diem, registration, and materials.

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Family Services staff members attendance at National ICAMA Conference in FYs 2025-2029. The Interstate Compact on Adoption and Medical Assistance(ICAMA) is the avenue for Medicaid to be open for adopted children with active subsidy agreements when they move across state lines. The networking with other state administrators assist in the efficiency and effectiveness in maintaining open Medicaid for adopted children when they move to another state. Training for 2024 was held June 4th-6th . FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☐ Other

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three days
Hours: Click or tap here to enter text.
Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input type="checkbox"/> Other Community Staff (medical, legal, LEA): Click or tap here to enter text. | |

Cost

Estimated Total Cost: \$7,227.32

Cost Allocation Methodology: Cost is directly charged for travel and per diem.

Applicable Funding Source:

- | | | |
|-----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input checked="" type="checkbox"/> Other, Specify Adoption Incentive Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Children's Justice funds are awarded to counties applying for funds for multi-Disciplinary teams to attend the International Symposium on Child Abuse in Huntsville, AL FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: As arranged by Symposium /Conference Planners

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Five Days

Hours: Click or tap here to enter text.

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): medical, legal, police | |

Cost

Estimated Total Cost: \$175,000.00

Cost Allocation Methodology: Cost is directly charged to grant for travel, per diem, registration and materials, conference speakers(for regional conferences).

Applicable Funding Source:

- | | | |
|-----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input checked="" type="checkbox"/> Other, Specify Children's Justice Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: There's two ILP Conference Style Camps held each summer to provide training and education to ILP foster youth. The first camp for 14–16-year-old foster youth and a second for 17–20-year-old foster youth. The camps are held at various location across the state, utilizing college campuses when possible. Young people receive training and education regarding health, Medicaid, educational goal setting, NYTD, team building, working with adults, permanent connections, etc. in a camp setting. FYs 2025-2029

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input checked="" type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Children's Aid Society

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: 3

Hours: 8

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: 185,000.00

Cost Allocation Methodology: Cost is directly charged to grant through the contract with Children's Aid Society.

Applicable Funding Source:

- | | | |
|------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input checked="" type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Adoption Incentive Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: The annual ILP Networking Conference convenes county ILP coordinators and staff working with ILP Youth and providers across the state. Attendees are provided training regarding, goal, meaningful relationships, guide to youth independence, medication advocacy and management, drug trends and youth, recognizing child trafficking including sex, labor, and online predators.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input checked="" type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☐ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: Children's Aid Society

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: Three Days

Hours: 6 hours a day

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input checked="" type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input checked="" type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input checked="" type="checkbox"/> Child Care Agency Staff | <input checked="" type="checkbox"/> Child Placement Agency Staff |
| <input checked="" type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input checked="" type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input type="checkbox"/> Other Community Staff (medical, legal, LEA): Foster Youth | |

Cost

Estimated Total Cost: 80,000.00

Cost Allocation Methodology: Costs are directly charged through our contract with Children's Aid Society.

Applicable Funding Source:

- | | | |
|--------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input checked="" type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Click or tap here to enter text. | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: National Social Work Enrichment Program(NSEP) is a six-week program for rising high school juniors and seniors in foster care. The youth live on the college campuses for the six weeks to experience on campus life, with opportunities for mini careers in Social Work and participate in various social and culturally, enriching activities. The program is an opportunity for youth to gain knowledge of post-secondary education, thereby increasing interest in educational advancement and the likelihood of obtaining gainful employment. The program has increased our youths' high school graduation rates and interest in attending college and success at remaining in college. FYs 2025-2029.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input checked="" type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☐ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☒ Public/Private University: Public
☐ Other: AFAPA leadership/members and invited speakers

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: 42

Hours: 6

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): ILP Foster Youth | |

Cost

Estimated Total Cost: \$235,500.00

Cost Allocation Methodology: Participation provides foster youth an opportunity to have a short-term collegiate experience enhancing their knowledge regarding what to expect when they move forward to higher education. Youth participate in and become members of Toastmasters and are provided sexual safety training. Participants also experience weekly college tours and develop job skills.

Applicable Funding Source:

- | | | |
|--------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input checked="" type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input type="checkbox"/> Other, Specify Click or tap here to enter text. | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Substance abuse training is a planned expenditure of Children's Justice Grant funds for FY 2025-2029. The two-day training will be held in three (3) regions of the state. The goal of the training will be to increase the knowledge of assessment workers and Law Enforcement staff regarding the indicators that a family has substance abuse issues.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input checked="" type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☐ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☒ Other: to be determined

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: 2

Hours: 6 per day

Credit Hours Earned: Click or tap here to enter text.

Indicate the Audience to Receive Training:

- | | |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input type="checkbox"/> Child Placement Agency Staff |
| <input type="checkbox"/> Other State Agency Staff: Click or tap here to enter text. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): LEA | |

Cost

Estimated Total Cost: 75,000.00

Cost Allocation Methodology:

Applicable Funding Source:

- | | | |
|-----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> IV-B-1 (CWS) | <input type="checkbox"/> CAPTA | <input type="checkbox"/> IV-E Foster Care |
| <input type="checkbox"/> IV-B-2 (PSSF) | <input type="checkbox"/> IV-E Chafee ILP | <input type="checkbox"/> State Only, (mark if other than non-Fed match) |
| <input type="checkbox"/> IV-E Adoption | <input type="checkbox"/> TANF | <input type="checkbox"/> SSBG |
| <input checked="" type="checkbox"/> Other, Specify Children's Justice Funds | | |

CHECKLIST FOR ADDRESSING TRAINING ACTIVITIES/EVENTS UNDER THE TITLE IV-B PLAN

Brief Description of Training Activity: Children's Justice Grant funds will be used to provide two(2) sessions of Family Violence and Safety in CPS for FY 2025-2029. Each of the 2, two-day sessions will focus on providing basic information on the complex dynamics of Family Violence and a basic understanding of how domestic violence impacts children's lives and what that means for CPS intervention. The two-day training is provided to County Multidisciplinary Team Members, other state agencies, DHR county and state office staff.

Indicate which, if any, of the specifically allowable Title IV-E administrative functions this training activity addresses:

- | | |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> IV-E Eligibility Determination or Redetermination | <input checked="" type="checkbox"/> Placement of Child(ren) |
| <input type="checkbox"/> Rate Setting | <input checked="" type="checkbox"/> Development of Maintenance of Case Plan |
| <input type="checkbox"/> Hearings and Appeals | <input type="checkbox"/> Case Management |
| <input type="checkbox"/> Referral to Services | <input type="checkbox"/> Recruitment/Licensing of Foster/Adoptive Homes/Institutions |
| <input type="checkbox"/> Prep/Participation in Judicial Determinations | <input type="checkbox"/> Data Collection and Reporting |

Indicate Setting/Venue for Activity:

- ☒ Classroom (In-Person)
☐ Virtual (Instructor Led)
☐ Independent (Self Study)

Proposed Provider of Training:

- ☒ In-House Agency Staff
☐ Public/Private University: Click or tap here to enter text.
☐ Other

Indicate Duration:

- ☒ Short Term ☐ Long Term

Days/ Number of Hours of Training:

Days: 2
Hours: 10 per day
Credit Hours Earned: 8

Indicate the Audience to Receive Training:

- | | |
|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Staff of State/Local agency administering the State Plan | <input type="checkbox"/> Current/Prospective Foster/Adoptive Parents |
| <input type="checkbox"/> Relative Guardians | <input type="checkbox"/> Volunteers |
| <input type="checkbox"/> Staff of state licensed/approved childcare institutions | <input type="checkbox"/> Staff of Abuse/Neglect Courts |
| <input type="checkbox"/> Child Care Agency Staff | <input checked="" type="checkbox"/> Child Placement Agency Staff |
| <input checked="" type="checkbox"/> Other State Agency Staff: JJ, MH, DD, MDT Teams, etc. | |
| <input type="checkbox"/> State Licensed/approved CW agencies providing services to Foster/Adopted Children | |
| <input checked="" type="checkbox"/> Other Community Staff (medical, legal, LEA): Medical legal, Law Enforcement | |

Cost

Estimated Total Cost: \$83, 190.02

Annual Reporting of Education and Training Vouchers Awarded

Name of State/ Tribe: Alabama

	Total ETVs Awarded	Number of New ETVs
<u>Final Number: 2023-2024</u> School Year (July 1, 2023 to June 30, 2024)	268	122
2024-2025 School Year* (July 1, 2024 to June 30, 2025)	379	96

Comments:

*in some cases this might be an estimated number since the APSR is due on June 30, the last day of the school year.