

State of Alabama
Department of Human Resources
2026 Annual Progress and Services Report



State of Alabama
Department of Human Resources
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Update to the Vision and Collaboration

Vision and Collaboration

As the designated Title IV-E B agency, the Department of Human Resources (DHR) oversees this plan guided by the core belief that children must be safeguarded from abuse and neglect. Whenever possible, the goal is to preserve and strengthen families so they can provide safe, stable, and nurturing environments for their children. Service interventions are to be based on a set of beliefs about outcome-based practice that is both strengths-based and family focused and underscore the importance of comprehensive assessments and individualized planning on behalf of the children and families that come to the attention of the Department.

The Department remains committed to ongoing collaboration efforts with various stakeholders. All stakeholders are racially diverse and have representation that mimics the state population. The collaborations that are ongoing/planned between the agency and various community partners include the Alabama Judicial & Child Welfare Collaboration Project. The project includes ongoing work around the iCAN project, local and state QA committees, the Alabama Child Welfare Collaborative Initiative, the Alabama Department of Child Abuse & Neglect Prevention, the Alabama Foster/Adoptive Parent Association, and others that are outlined in the APSR. It is our belief that collaborations lead to better outcomes for children and families as they help address several critical areas of practice, including prevention of child abuse, well-being of children, placement stability and timely achievement of permanency. The Department works with the IL youth, as they participate in panels at both the Judicial and Supervisor's Conferences each year. The Dream Council meet monthly and meet annually with the Commissioner. During these meetings, the youth freely discuss issues and needs that they see with the child welfare system and ways they feel would improve the quality of services provided. These ideas were used to formulate the 2025-2029 CFSP as well as other projects for the department.

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

Quality Assurance Division and Family Service Division met with the Family Services Committee for the Director's Association on September 19th. The discussion included topics on probate court adoption investigation, TIPS Co Leader trainers, finding ways to collaborate with social security to reduce time consumption. The Committee was informed of the submission and approval of the APSR and CFSP. Additionally, the Directors were provided information on the Disaster Plan and the Training Plan.

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

chapter for Prevent Child Abuse America and is the state's lead agency for federally funded Community-Based Child Abuse Prevention (CBCAP) programs as part of CAPTA.

The Office of Adoptions and Office of Foster Care meet quarterly with Heart Gallery Alabama, Alabama Pre/Post Adoption Connections (Children's Aid), and the Alabama Foster/Adoptive Parent Association (APAC). In these meetings we discuss training opportunities/upcoming trainings, staff updates/changes. Services provided for pre and post adoption, photo shoots for children available for adoption, and any concerns that we may have. The Office of Adoptions also meets at least twice per year with Alabama Pre/Post Adoption Connection (APAC) to network and provide time for our office and APAC to discuss any concerns about services, partnerships, and any barriers to providing services. If there are identified barriers, we work together to come up with plans to work around those barriers.

ADHR was invited by Casey Family Programs to participate in the Child Welfare Mayoral Cohort meeting on October 2nd. There were three like cohorts invited: Jackson, Mississippi, Gary, Indiana, and Birmingham, Alabama. The Child Welfare Mayoral Cohort is a powerful alliance of visionary leaders dedicated to transforming the lives of children in their communities. The child welfare system is a network of public agencies and private organizations providing services to promote the well-being of children.

In preparation for the Round 4 CFSR, Quality Assurance Division initiated discussion with youth with lived experience via the DREAM Council Ambassadors to develop a yearly survey for ILP age youth in the foster care system to assess the strengths and needs of the child welfare system. Past survey options were shared with the ILP Coordinator to share with ambassadors from the DREAM Council. Based on feedback provided in November 2024, a new survey was developed in an online format via Microsoft forms and shared with the DREAM ambassadors to test on 3/21/2025. After another round of feedback, final changes were made with the survey and presented to the staff from Family Services and Quality Assurance Division for comment on 4/18/2025. Surveys are expected to roll out by the end of fiscal year 2025 and to be utilized yearly to monitor CQI/QA processes. Questions are designed to address safety, permanency, and well-being outcomes and systemic factors from the CFSR.

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

Update to the Assessment of Current Performance in Improving Outcomes

Alabama successfully completed the CFSR Round 3 by meeting all Measurement Plan indicators and effectively executing its Program Improvement Implementation Plan. In collaboration with the Children's Bureau, the state has initiated CFSR Round 4. As a "year 4 state," Alabama has submitted a letter of intent for a state-led review scheduled between October 1, 2026, and March 31, 2027. Currently, Alabama is in the process of preparing its Statewide Assessment.

As an update to its performance since the CFSP, the state assessed its February 2025 CFSR Data Profile performance. The trends noted are that the state has maintained steady performance in most areas however has shown a decline in Maltreatment in Foster Care, Permanency in 12 Months for Children Entering Foster Care and Reentry in Foster Care in 12 months.

Alabama DHR continues to focus on relative placement to assist with reducing a child's time in care. In October 2024, there were 720 children in care with a permanency goal of relative placement. Although their permanency goal was relative placement, it did not include Kinship Guardianship. In September FY 2024, there were 222 children with a permanency plan of Kinship Guardianship, 668 children with permanency plan of permanent relative placement with transfer of custody to the relative, and 17 children with a permanency plan of permanent relative placement with DHR retaining custody. The department's implantation and utilization of more Kinship Guardianship case plans throughout the state will increase permanency more efficiently while maintaining family connections for children who have entered care. Kinship Guardianship will ultimately decrease the number of children who have re-entered care as viable relatives are being used for child permanent placement and safety. Increasing permanency staffing within local departments will initiate the continuous monitoring of children who remain in care and plan for the achievement of permanency of each individualized child to be obtained in a timely manner. Lastly, Alabama DHR's implementation of employing case management technicians will assist workers with achieving permanency and safety in cases timelier. Case management technicians are also being used to secure initial information for foster children such as birth records, medical records, and Medicaid for children in care. Case management technicians also can attend medical visits, supervise visitation, and assist with transport of foster children. Due to the workers having case assistance, safety of children can be assessed more often. Case management technicians are also being utilized to assist with income applications and initial appointments for Social Security regarding children who are placed with relatives that do not consider Kinship Guardianship. Due to the introduction of case management technicians, early documentation to begin ICPC can be completed, obtaining records and case information can be achieved quicker, maintaining family connections with visits can occur more often, and ultimately child safety will, and permanency will increase.

Statewide Data Indicator	National Performance Target	Alabama's Observed Performance 2024	Alabama's Observed Performance 2025	RSP Feb 2024	RSP Feb 2025	Better/Worse/No Different from National Performance Feb 2024	Better/Worse/No Different from National Performance Feb 2025 Trend arrow across two years
Recurrence of maltreatment	9.7%	5.2%	4.6%	6.9%	6.2%	Better	Better
Maltreatment in foster care	9.07	8.79	9.73%	11.61	12.84%	Worse	Worse
Permanency in 12 months for children entering foster care	35.2%	43.4%	42.4%	43.7%	43.0%	Better	Better
Permanency in 12 months for children in foster care 12- 23 months	43.8%	47.7%	41.8%	47.6%	42.0%	Better	No different
Permanency in 12 months for children in foster care 24 months or more	37.3%	36.0%	34.9%	36.5%	34.3%	No Different	Worse
Reentry to foster care in 12 months	5.6%	5.6%	6.8%	5.9%	7.1%	No Different	Worse
Placement stability	4.48	6.27	7.51	6.13	7.30%	Worse	Worse
Information from Child and Family Services Review (CFSR4) Data Profile February 2024 and February 2025							

CFSR Outcomes

The information below reflects the strengths and concerns related to performance on each outcome and systemic factor, including a brief update on current or planned activities targeted at improving performance.

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

In FY 2024, Alabama's Electronic Report Distribution (ERD) INVS 218A report showed First Victim Contacts were 83.19% for initial timely contacts for the state. As of December 31, 2024, 39/67 counties had over 100% timely contacts and 12/67 were above 86% with the statewide average being almost 96%. This data is tracked through the CCWIS system and reported on monthly via Alabama's Electronic Report Distribution system reports. State DHR provides supports to county offices to facilitate ongoing conformity with the expectation that children will be seen within the appropriate time frames. The Office of CPS monitors compliance through regular review of the monthly reports which track child victim contact time frames. Feedback is provided to county level management as appropriate.

The Quality Assurance Division conducted Onsite Review in 15 counties in FY2024. 9 out of 15 Counties received a Strength rating in Timeliness of Initiating Investigations based on a review of 12-months of ERD data regarding First Victim Contacts for each County, information provided in the County Self-Assessment(s), OSRIs completed, and a random record review of child maltreatment investigations and alternative responses.

In FY2024, timeliness of initiating investigations, known as “first victim contacts”, in investigations (CANs) and alternative responses (Prevention Assessments) were assessed in random reviews from 15 Counties. A safety assessment tool is completed for each County to document any trends. A total of 170 CANs and 170 Prevention Assessments were reviewed. First victim contacts were timely in 89% of the reviewed CANs and Prevention Assessments. Ten out of 15 Counties reviewed had timely contacts in at least 90% of the reviewed CANs and Prevention Assessments.

The timeliness of initiating investigations of reports of child maltreatment were also assessed in OSRIs completed during Onsite County Reviews in FY2024. In FY2024, investigations were initiated timely in 20 out of 21 applicable cases (95%). There were no patterns in the late contacts other than lack of concerted efforts to locate all identified children within the specified timeframe. In the 170 child abuse investigations (CANs) and 170 alternative responses (Prevention Assessments) reviewed during FY2024 in Safety Assessments from Onsite Reviews, 80% were entered within 72 hours of receipt. In 326 out of 340 (96%) intakes reviewed, there was sufficient information gathered at intake to make necessary decisions regarding the response timeframe and allegations. Concerns were noted in 5 out of 15 Counties regarding documentation of family’s participation in financial programs at intake. In 8 out of 15 Counties reviewed, there were concerns regarding lack of follow-up with reporters for additional information.

While there is sufficient evidence to show that child welfare staff have the information needed to initiate investigations, delays of intake entry may be negatively impacting the ability of frontline staff to develop additional strategies in locating children timely if their initial efforts were unsuccessful.

Concerns were specifically identified in 2 Counties regarding the child maltreatment reports received after hours or ensuring on-call staff are continuing efforts to locate children. In two other Counties, concerns were noted that additional efforts to contact children face-to-face were not documented when initial attempts were unsuccessful. The timeliness of initiating investigations of reports of child maltreatment were also assessed in OSRIs completed during Onsite County Reviews in FY2024.

Based on feedback provided by Counties in their County Self-Assessments, common concerns noted among Counties regarding low contact success rate in ERD reports included: transient families (22 Counties), untimely data entry of the contact with child prior to report run dates (14 Counties), and incorrect data entry of child contact (9 Counties).

In QRIs reviewed by County QA committees during the following calendar years, there was no pattern of untimely initiation or contacts with children subject to child maltreatment investigations or alternative responses. Aggregate data from ERD, targeted reviews of investigations and

alternative responses, and OSRIs suggests Alabama performs well in making timely first victim contacts. Improvements can be made in the thoroughness of intake documentation and the timeliness of data entry of all intake information and efforts to make face-to-face contact. Some counties may benefit from technical support on correct and timely data entry to ensure ERD reports are capturing the agency's work correctly.

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

Based on a review of the OSRIs completed and the Practice Performance report for FY2024, there were practice differences in concerted effort to prevent home removal or re-entry to foster care based on case type—foster care (50% Strength Rating in 12 applicable cases) and in-home (67% Strength Rating in 15 applicable cases). Based on a review of rating summaries from this item, practice concerns were noted that services were not discussed or arranged with families in a timely manner to mitigate the risk and safety concerns. Specifically, substance abuse, mental health, or domestic violence services were not often initiated until after the investigation or alternative response had been resolved and referral to open for case management was initiated. As a result, removal from the home became necessary to protect the child. Delays in transferring the family's involvement from the investigation and assessment phase toward service provision contributed consistently to the needs identified.

Based on the Practice Performance Report for FY2024 from the CFSR OMS, risk and safety assessment and management (Item 3) performed better in foster care cases (55% Strength rating in 31 applicable cases) compared to in-home cases (38% Strength rating in 16 applicable cases). Specific concerns noted included lack of private, individual interviews with children in cases; lack of thorough, on-going assessment of all living environments for identified children; and lack of on-going discussions with every caregiver regarding issues related to safety. Within in-home services cases, concerns were noted in the on-going assessment of risk and safety as opposed to the initial concerns related to ensuing age-appropriate children in sibling groups are interviewed privately and individually to ensure safety is thoroughly assessed. In calendar year 2024, QRI data revealed that Alabama rated a strength in 138 out of 145 applicable cases for item number 2 with seven cases rating an area needing improvement. In item 3, Alabama rated a strength in 223 out of 244 cases with 21 cases rating as an area needing improvement.

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

Children in foster care in Alabama as of FY 24 experienced an average of 4.71 placement moves over the span of their time in care; this was a slight increase from FY 23.

In FY2024, placement stability was assessed in 15 Counties as part of the state's on-site review process. 11 out of 15 Counties received a Strength in placement stability based on ERD data, OSRIs completed, and stakeholder information. In FY 2024, Collaborative work between State Office of Recruitment and Home Care Support and Jefferson County DHR yielded over 50 newly approved foster homes. The success is attributed to community partnership for class location, regular follow up on inquiry calls and availability of TIPS class as well as statewide partnership. The Offices of Foster Care and ILP continues to collaborate to provide case consultation that includes brainstorming on services that might stabilize a placement before a disruption.

As it relates to permanency goals for children, the OSRI completed in FY 2024 had an overall strength rating of 54.84%. There were many factors of concern to include, prolonged use of reunification /guardianship when circumstances indicated they were not viable options. Additionally, permanency and concurrent goals were not updated based on case circumstances. Goal of Reunification is not terminated timely once efforts to reunify were exhausted, and goals of Adoption were not added timely despite evidence the agency and court had exceeded ASFA timeframes and Reunification or Guardianship were not viable permanency options. In OSRIs completed in FY 2024, there were barriers impacting the achievement of permanency. OSRI scores and QRI scores reflect regression in timeliness to achieve permanency. Based on the Practice Performance Report for FY2024, a common issue identified was lack of concerted efforts to achieve adoption in a timely manner. Alabama DHR will continue to work on permanency for children as mentioned in the CFSP 2025-2029.

The following ratings were observed in the OSRI for items 4, 5 and 6.

Item 4: Stability of Foster Care Placement			
	FY2024	FY2025	FY2026
Applicable Cases	31		
Strength %	87.1%		
Item 5: Permanency Goal for Child			
	FY2024	FY2025	FY2026
Applicable Cases	31		
Strength %	54.84%		
Item 6: Achieving Reunification, Guardianship, Adoption, or Another Planned Permanent Living Arrangement			
	FY2024	FY2025	FY2026
Applicable Cases	31		
Strength %	32.3%		

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

Of the most recent county reviews via Quality Assurance, 12 out of 15 counties showed a strength in this area. The overall item ratings are based upon decisions made by QA staff after a comprehensive review with the inclusion of OSRIs, Stakeholder Interviews, ERD data, and Permanency Assessments. At the end of FY 2024, 592 (46.7%) sibling groups were placed together, and 676 (53.3%) sibling groups were not placed together. Based on the review of the County Self-Assessments submitted for FY2024, the most given reasons for separation of siblings included:

- Lack of available space/foster homes
- Behavioral or medical needs of one or more children requiring specialized treatment
- Behavioral/Safety concerns between the siblings
- Siblings with different paternal relatives unwilling to accept placement of unrelated children
- Homes unwilling to accept teens or sibling groups with large age gaps.

Visitation with parents and siblings in foster care rated a strength in 54% (14 out of 26) OSRIs completed in FY 2024. This rating was an improvement over the PIP baseline (25%) established in the CFSR Round 3. Preserving Connections was a Strength in 65% (20 out of 23) of applicable OSRIs completed in FY 2024.

There is also agreement in the ratings between the OSRIs conducted by QA Program Specialists with the QRIs conducted by County QA Committee in preserving significant connections for children in foster care. Proximity of child's placement to the county of origin and use of relative placements to facilitate contact with extended family are two avenues for additional investigation to address barriers to preserving connections.

Alabama DHR continues to focus on relative placement to assist with reducing a child's time in care. In October 2024, there were 720 children in care with a permanency goal of relative placement. Although their permanency goal was relative placement, it did not include Kinship Guardianship. In September 2024, there were 222 children with a permanency plan of Kinship Guardianship, 668 children with permanency plan of permanent relative placement with transfer of custody to the relative, and 17 children with a permanency plan of permanent relative placement with DHR retaining custody. Alabama DHR is continuing its efforts to raise awareness and educate families about the Kinship Guardianship process. The Department has added a Kinship QR code to our brochures and posters and have seen an increase of the use of the Kinship Guardianship Program.

Onsite Review OSRI ratings for FY2024 for items 7-11.

	FY2024	FY2025	FY2026
Item 7: Placement with Siblings	93%		
Item 8: Visiting with Parents and Siblings in Foster Care	54%		
Item 9: Preserving Connections	65%		
Item 10: Relative Placement	67%		
Item 11: Relationship of Child in Care with Parents	38%		

Wellbeing Outcome 1- Families have enhanced capacity to provide for children's needs.

The assessment of needs and provision of services in relation to parents continues to be an area of focus for Alabama. In the 15 County Onsite Reviews conducted during FY2024, all 15 Counties received an ANI rating in needs and services for children, parents, and foster parents overall. However, 12 out of 15 received a Strength in needs assessment and services to children (Item 12A), and 13 out of 15 Counties received a Strength in needs assessment and services to foster parents. Based on the OSRI data provided, improvements are needed in efforts to engage parents to assess their needs and arrange appropriate services. Efforts were more likely present with both mothers and fathers in in-home services cases than in foster care cases. A few factors are more likely present in foster care cases compared to in-home services which may serve as immediate barriers to the agency's work with parents. First, parents' needs are likely more complicated in foster care cases than in in-home cases which resulted in the child's removal from the family home. Second, supports and services are less likely to be in place at the time of agency involvement in a foster care case than an in-home cases. If either were present, the need to remove the child from the home would be lessened. Third, children are more likely to remain in the care of a parent or a caregiver of the parents' choosing when managing an in-home case compared to a foster care case. This lessens the trauma of parent-child separation but also lessens the family's conflict with the agency. Both can serve as barriers to initially overcome in case management in foster care cases. Although performance appears better in in-home than in foster care cases in working with parents, the same cannot be said in assessing and arranging services to meet the social and emotional needs

of children. The focus of OSRIs on a single target child in foster care OSRI compared to the entire sibling group in in-home OSRIs may explain some of the issue. Agency assessments may be addressing some but not all children in the in-home case. Caseworkers are also more likely to conduct initial and on-going formal and informal assessments of children's needs than to arrange appropriate services to address identified needs in both foster care and in-home cases.

Result from QRIs were also reviewed for any trends

	FY2024	FY2025	FY2026
Item 12: Needs and Services of Child, Parents, and Foster Parents	21%		
Item 12A: Needs Assessment and Services to Children	75%		
Item 12B: Needs Assessment and Services to Parents	18%		
Item 12C: Needs Assessment and Services to Foster Parents	79%		

Result from QRIs were also reviewed for any trends

	CY2024	CY2025	CY2026
Item 12 applicable cases	244		
% Strength	76%		
Item 12A applicable cases	244		
% Strength	91%		
Item 12B applicable cases	195		
% Strength	79%		
Item 12C applicable cases	141		
% Strength	94%		

While ratings in QRIs conducted by County QA Committees were higher across each sub-item compared to OSRIs conducted by QA Program Specialists, there are some similarities specifically as to the improved performance in assessing and arranging services for children and foster parents performed significantly better than assessments and services for parents. There are barriers to engaging parents to assess and arrange services which may not be present in work with children and foster parents.

In the 15 County Onsite Reviews, 4 Counties received a Strength in child and family involvement in case planning. Concerns were noted regarding on-going efforts to engage parents and age-appropriate children to prepare them for case plan meetings and ensure their participation in meetings. Agency efforts to involve parents in case planning often included compliance-driven case practices oriented in determining what the family has or has not accomplished rather than on partnering with parents to develop the plan that works best for their family and meaningfully discussing and addressing barriers to the family's achievement of case goals.

OSRI ratings for FY2024 were also obtained to monitor any progress in case practice:

	FY2024	FY2025	FY2026
Item 13: Child and Family Involvement in Case Planning	50%		
Item 14: Caseworker Visits with Child	50%		

Item 15: Caseworker Visits with Parents	40%		
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Based on the data obtained from the OSRIs conducted, mothers and fathers were more actively involved in case planning in in-home services cases compared to foster care cases. The likelihood of one or both parents residing with the children in the home is higher in an in-home services case. As caseworkers are more likely to ensure caseworker visits with children are occurring in general, it is also more likely that caseworkers are engaging parents in their home to gain their participation in the case planning process. However, children are more actively involved in foster care cases than in in-home cases. It is possible these differences are based on the rating requirements and the children in focus. In-home services cases address case planning with all developmentally appropriate children whereas foster care OSRIs focus on a single target child. Additional review is needed to explore this key difference. 11 out of 15 Counties received a Strength in caseworker visits with child during their onsite review. OSRI ratings for FY2024 were also obtained to monitor any progress in case practice. In the OSRIs completed in FY 2024, Caseworker Visit with Parents had an 39% Strength rating in 43 applicable cases. Considerable progress has been observed regarding the quality and frequency of caseworker visits with parents.

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

ORSI and QRI data shows that the state has rated a Strength consistently in the recent years. Concerns noted in OSRIs completed in FY2024 included delays in developing behavioral plans in school settings when such behaviors interfere with academic progress; delays in arranging speech therapy; and untimely referrals for special education assessment when deficits are observed. Efforts to assess and arrange services were more readily observed in the in-home services cases than in the foster care cases reviewed. Overall, assessments were more likely to be completed timely and accurately than the arrangement of needed services.

There were noted examples of positive case practices in most cases including referrals to Early Intervention to address developmental delay concerns and arranging educational supports such as tutors and reading coaches through school systems. The department continues to have an assigned (SEAP) State Department of Education Advisory Panel Member. The Deputy Director of Recruitment and Home Care Support serves on the stakeholder and public engagement subcommittee. The purpose of the panel is to advise the (SEA) State Education Agency on issues related to special education and to promote communication and cooperation among individuals involved with children and youth with disabilities. Our member advocates on behalf of biological parents, foster youth and foster parents.

OSRI results from FY2024 are noted below for item 16.

	FY2024	FY2025	FY2026
Item 16: Educational Needs of Children	67%		

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

Performance was monitored through the completion of OSRIs and Onsite Reviews by the Quality Assurance Division in FY2024. Out of 15 Onsite Reviews, 12 Counties received a Strength rating in their ability to assess and address the physical and dental needs of children. Documentation of medication monitoring including discussions related to the benefits and side effects of medicine with age-appropriate children and caregivers were common concerns with the 3 Counties who did not receive a Strength rating. The assessment of dental health needs and oversight of medications for physical health needs were the most observed reason for ANI ratings. Oversight of medication

considers not only the maintenance of medication logs but also on-going discussion of the risks, benefits, and side effects of the medication. Although these concerns are noted infrequently, they remain an area of focus to improve case practice.

County QA committees also monitored performance in their case reviews. Overall performance was similar in foster care and in-home cases with 2 exceptions. Physical health and dental health assessments were conducted timely and when needed in each of the in-home cases. Common issues noted in the reviews conducted by local QA committees included lack of documentation of dental services and missing medication logs. Out of 15 Onsite Reviews in FY2024, 6 Counties (40%) received a Strength rating in their ability to assess and address the mental and behavioral needs of children. Documentation of medication monitoring including discussions related to the benefits and side effects of medicine with age-appropriate children and caregivers were common concerns for 7 Counties with an ANI rating. Challenges arranging psychological evaluations were noted in 4 Counties with an ANI rating in their Onsite Review—3 of which are rural Counties with challenges accessing mental health providers. Congregate Care Staffing was revamped in May 2024 and occur approximately every 45 days until the child has stepped down from their intensive placement. County Department child welfare staff, SDHR Children and Family Services staff, Resource Management staff and Quality Assurance staff have discussions around permanency as well as efforts towards the child being able to step down from intensive placement.

Performance from the OSRIs in assessing and addressing the physical health needs of children is noted below:

Item 17 OSRI Ratings	Applicable Cases	Strengths	ANIs	Strength %
FY2024	37	30	7	81%
FY2025				
FY2026				

Performance from the OSRIs in assessing and addressing the mental and behavioral health needs of children is noted below:

Item 18 OSRI Ratings	Applicable Cases	Strengths	ANIs	Strength %
FY2024	23	11	12	48%
FY2025				
FY2026				

Systemic Factors

Statewide Information System

During FY 2024, each FACTS user was given the opportunity to provide feedback on their experience with FACTS. Feedback received was used to determine what modifications would be most impactful in the application as well as in the ERD reports and Dashboards. To further improve the quality of data collected, the most recent Data Quality Plan Biennial Review concentrated on documentation of required plans of safe care and documentation of incident dates for alleged child abused/neglected. The correctness, timeliness, completeness of these areas will be assessed. Individual counties where discrepancies are identified will receive technical support, and yearly

statewide trainings will address commonly reported data quality concerns. Alabama has made the following updates to the FACTS system:

06/24/2024	MULTIPLE NEICE CHANGES <ul style="list-style-type: none"> • Admin Screen Grid size/column changes • Admin Details Screen download status • Home Study Request Alert Emails added
11/7/2024	Incident Date added to Allegation Screen (NCANDS)*
03/21/2025	Additional Functionality added to FHD Data Fix Screen
03/31/2025	Kinship Folder added to File Cabinet*
04/24/2025	Plan of Safe Care Validations added*

Case Review System

Stakeholder interviews and OSRI were conducted in 15 Counties during fiscal year 2024 to address Alabama's Case Review System. Common practices observed in Counties with a strength rating included:

- Case plans were documented, located in case files, and distributed after each meeting.
- Addendums were noted to be updated and stored the families individualized service plan.
- Case plan meetings were held at locations and times convenient for all pertinent team members.
- Parents were encouraged to participate during case plan meetings by the agency.
- Absentee forms were provided with meeting invitations to obtain feedback from team members who could not attend.

The counties that needed improvement had issues around timely meetings, updating plans when needs or circumstances changes, timely distribution of case plans to members, and lack of involvement of the full case plan team. The ISPs were not meaningful and planned as they were often held at/after court and were not strengths based.

Additionally, there were concerns around periodic reviews, permanency hearings, timely TPR filings and notice of hearing and reviews to caregivers.

Common practices observed in Counties with a strength rating for periodic reviews included:

- Judicial Reviews held every 6 months and documented in FACTS
- Court reports were submitted timely.
- Counties had an organized system to monitor when judicial reviews were due.
- Counties had regular contact with their court system to ensure judicial reviews were scheduled timely

Practice observed in counties needing improvement included:

- Judicial review orders contained inaccurate information.
- Court reports were not provided to the court timely.
- Counties did not have a formal process to track when judicial reviews were due.
- Judicial Review orders were not issued by the court timely or could not be found in agency records.

Common practices observed in Counties with a strength rating for permanency hearings included:

- Ongoing collaboration between the court system and DHR to ensure hearing were scheduled timely and important parties were included.

Practice concerns observed included:

- Court reports were not provided to the court timely.
- Permanency hearings were continued.
- Permanency hearing orders were not issued in a timely manner following hearings or could not be found in agency files.
- Counties did not have a formal process to track upcoming permanency hearings to ensure hearings occurred within 12 months of home removal or the previous permanency hearing.

Alabama continues to provide ongoing training around Individualized Service Plans and Permanency and Timely TPR filing.

Quality Assurance System

Alabama updated its CQI/QA process in October 2024 to include the completion of 75 OSRIs every 6 months to ensure the state can meet requirements for a State-led Review. Through the first 6 months (October 2024-March 2025), 75 OSRIs in 36 different counties were completed. This surpasses both the number of OSRIs completed in FY2024 (48) as well as the number of counties (15) receiving a review. CFSR Leadership meetings occurred on 10/16/2024, 11/20/2024, and 12/16/2024 to identify trends in agency practice and develop interventions with Counties. Planned calls with County Directors and QA Coordinators occurred on 1/13/2025 and 2/5/2025 to highlight areas of concerns and orient Counties toward improved case practice.

The Quality Assurance Division reviews Plans of Safe Care on a regular basis to ensure policy is followed. The Office of Data Analysis provides requested samples for review. Results of the reviews have been used in CFSR Leadership Meetings in October 2024-December 2024 to inform decisions regarding enhancements to the CCWIS. In April 2025, new hard stops have been developed within the CCWIS to ensure proper data entry of plans of safe care prior to the closure of any investigation. The QA Division will continue to review plans of safe care. It is not expected to see specific improvement in these reviews because of this intervention until April 2026 when the sampling frame for the plans of safe care will begin in April 2025.

Maltreatment in care has been an identified need for Alabama in Statewide Data Indicator reporting in FY2020, FY2021, and FY2022. On 1/18/2024, guidance was provided to Counties regarding the necessity of entering incident dates into maltreatment reports and how to determine incident dates. On 11/7/2024, system enhancements were added to FACTS to add mandatory fields where allegations are added which address whether the child victim was in the custody of DHR at the time of the alleged abuse and the actual or estimated date/time of the alleged maltreatment. These fields had been previously optional. Hard stops were added to FACTS to prevent adding any allegations for any alleged child victim if either the child's custody status or the estimated or actual incident were not addressed.

In January 2023, the State QA unit transitioned to the use of the Round 4 OSRI in the OMS. In FY2024, OSRIs were conducted through Onsite Reviews conducted in 15 Counties which resulted in only 48 OSRIs completed. Beginning in October 2024, the State QA Unit altered its process to

ensure 75 OSRIs (42 FC and 33 IH) are completed every 6 months from a random sample from districts from across the state.

Following the completion of a District Review, finalized OSRIs are submitted to the respective County for utilization in the completion of the County Self-Assessment which is submitted by each County for each half of the fiscal year. Each County also receives a brief high-level summary of the strengths and needs identified. Counties with multiple cases reviewed during its District Review also receive a State Rating Summary and Practice Performance Report for the OSRIs completed to assist in reviewing the information quickly and identifying trends. Counties are given the opportunity to schedule calls with reviewers to discuss the specific findings from the OSRI Reviews.

The Deputy Commissioners in Field Administration, Family Services Division, and Quality Assurance Division are included in the correspondence so they can stay abreast of trends in counties and districts based on the OSRI ratings. Deputy Commissioners were also included previously with the OSRI results from the Onsite Reviews conducted in FY2024.

Each year, Quality Assurance Division supplies the overall results from OSRIs to include the State Rating Summary, Practice Performance Report, and Item Rationale Statements for each item in the OSRI for the year. Results from District Reviews including any specific underlying trends are presented to the State's Quality Assurance Committee which meets quarterly. Committee members are given the opportunity to explore the data, request additional information regarding underlying concerns, and recommend additional actions or interventions. Data is mined from the OMS MIDAT to explore any trends based on demographics as well as any item interactions. There are plans to present trends in OSRIs to address issues relating to timely TPR filing, written case plan development, plans of safe care, and permanency planning in 2025 through trainings offered to County Directors and QA Coordinators.

Alabama has made significant progress in achieving Criterion 1A, 1B, 1C, 1D, 1E, 1F, and 2F. A plan has been developed with the Children's Bureau regarding the timeline to submit information regarding Alabama's capacity to complete a State-led CFSR. Alabama has a written plan in place to ensure any staff completing OSRI responsibilities as reviewer or QA staff have been trained. Alabama shared its initial draft of the training plan and training slides with Children's Bureau staff on 10/10/2024 for additional review. Children's Bureau staff indicated no concerns with the plan during the CFSR Planning session on 11/15/2024. Since then, the training plan has been updated to address changes in staff availability as well as updates to the ELA. The training plan has been developed so any newly identified individuals can be trained in the completion of the OSRI as a reviewer or QA staff. Staff within the State QA Unit can lead these trainings privately as new reviewers from County staff are identified.

In January 2023, the State QA unit transitioned to the use of the Round 4 OSRI. To assist in this transition, the State QA Unit completed the following trainings in the Round 4 E-learning Academy (ELA): Layla Morgan Mock Case; OSRI Parts 1, 2, and 3; Item 2; Item 3; Item 5; and Parent and Caregiver Applicability. Staff also completed the QA Overview, QA Reviewer, and QA Staff modules which were added to the ELA in October 2024.

All reviewers have completed OSRI Training through the Round 4 ELA and have followed the training plan utilized for new reviewers. To demonstrate Alabama's ability to conduct reviews with the OSRI, Alabama has agreed for the Children's Bureau to conduct secondary oversight of OSRIs beginning in January 2025. Monthly calls with the Children's Bureau are planned in association with secondary oversight to enhance the capacity of Alabama's reviewers and QA staff. Additionally, Alabama has agreed to consult with the Children's Bureau on an as needed basis when any other guidance may be needed.

The shift from an individual county focus by the QA Unit to district model is designed to ensure Alabama can effectively ensure Criterion 2C is met prior to Round 4 CFSR. The county composition in each district will be based on the Alabama Association of County DHR Districts (AACDHR) except for Jefferson which will be reviewed separately as the largest metro site in Alabama. This model was used to complete the Round 3 PIP. 75 OSRIs will be completed every 6 months--42 foster care cases and 33 in-home cases. Each of the 9 Districts will have 7 OSRIs (4 foster care and 3 in-home), and Jefferson will have 12 OSRIs (6 foster care and 6 in-home). The use of the same districts from the Round 3 PIP will allow for on-going monitoring of trends in specific regions of the state. In-home and foster care cases are randomly selected from the universe of cases which meet the case selection criteria in the CFSR Guide utilizing the same sampling frames which roll every quarter on the fiscal year (October-September). An oversample is also provided using the same sampling frames for each district review which is four times the size of the needed sample.

Alabama utilizes written feedback loop via a Microsoft Teams group for individuals who are trained or in process for training in the OSRI. Reviewers and QA staff can post questions in the Teams chat regarding their OSRIs and seek guidance on the best application of the OSRI to the case circumstances. Chats are closed once a determination is made on how to proceed. These loops are archived in the Teams forms. Additional resources for the OSRI are also stored in the Teams forms. Updates are periodically made to the Forms as needed. Guidance and tips based on any OSRI on Secondary Oversight Meetings with Children's Bureau are also added to the chat to keep all reviewers and QA staff as up to date as possible.

Alabama has written instructions that outline the process for reviewers to follow when a safety concern and defines and resolves conflicts of interest among review participants. Alabama has a written protocol for case-related interviews of key informants on every case and case-specific exceptions to conducting interviews. Alabama's safety concern, conflict of interest, case elimination, and case-related interviews guidelines are provided to reviewers and QA staff during orientation training. Each were developed based on the CFSR Round 4 Procedures Manual. When Counties are notified, a case has been selected for an OSRI, the County also receives a copy of Alabama's Case Review Process and Guidelines which addresses 1C, 1D, 1E, 1F, and 2F from the Appendix A: State-Led CFSR Case Review Criteria from the CFSR Procedures Manual.

In preparation for the Round 4 CFSR, Quality Assurance Division initiated discussion with youth with lived experience via the DREAM Council Ambassadors to develop a yearly survey for ILP age youth in the foster care system to assess the strengths and needs of the child welfare system. Past survey options were shared with the ILP Coordinator to share with ambassadors from the DREAM Council. Based on feedback provided in November 2024, a new survey was developed

in an online format via Microsoft forms and shared with the DREAM ambassadors to test on 3/21/2025. After another round of feedback, final changes were made with the survey and presented to the staff from Family Services and Quality Assurance Division for comment on 4/18/2025. Surveys are expected to roll out by the end of fiscal year 2025 and to be utilized yearly to monitor CQI/QA processes. Questions are designed to address safety, permanency, and well-being outcomes and systemic factors from the CFSR.

The Quality Assurance Division administers a Citizen's Review Panel composed of members from the State QA Committee. The Citizen's Review Panel focuses its work on Child Death Reviews specifically children who were 3 months or younger at the time of death. Findings from the reviews have been informed to assist in on-going reviews of plans of safe care.

The Director of Family Services for the Poarch Band of Creek Indians is appointed to serve on the State Quality Assurance Committee. Likewise, she also sits as a local member of the Escambia County Department of Human Resources. Counties administer local Quality Assurance committees which routinely review county system data, conduct case reviews, and assess strengths and needs. County QA committee members are appointed by the County Director. They must either work or live in the County they are appointed. In December 2024, a role of County QA members was developed to identify the scope of involvement from local community members. In the 67 Counties, 553 unique individuals are appointed to committees which include 177 service providers who work with children and families served by DHR, 128 educators, 33 members of the local faith community, 33 members of law enforcement, and 25 members of the legal profession such as judges or CASA volunteers. Many individuals are retired professionals in the community. As part of the CQI/QA processes, County staff share regularly collected data as part of the County Self-Assessment with the committee to identify strengths and needs of the child welfare system. These assessments form the basis for the development of County Improvement Plans which in turn are monitored through the continued updates to the County Self-Assessment every 6 months. Case reviews are conducted by committee members via a Quality Review Instrument (QRI) which is an analog to the OSRI. Feedback loops are also generated from each of these reviews with county staff. Results from the QRI are required to be reported in the County Self-Assessment to help identify needed interventions and monitor progress.

As a result of information developed through the District Reviews and reviews of plans of safe care, the QA Division planned informational sessions with County Directors and QA Coordinators with the support of the Family Services and Field Administration. The CFSR Planning Meetings between Family Services and Quality Assurance Division in late 2024 served as the impetus to revise interventions to improve case practice. The training targeted specific areas including the documentation of plans of safe care, permanency and concurrent planning, judicial reviews and permanency hearings, and written case plan development. Meetings were scheduled via Zoom on 1/10/2025, 1/13/2025, 1/21/2025, and 2/5/2025.

Staff and Provider Training

The Office of Child Welfare Training (OCWT) is responsible for training social work and supervisory staff in county departments in the basic child welfare skills curriculum. 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. Striving Toward Excellent Practice (STEP) continues to be the curriculum Alabama DHR uses for new child welfare worker training. OCWT has partnered with Real Academy and is utilizing the Simulation, Training, Education, and Policy for Ultimate Preparedness (STEP-UP) curriculum for new child welfare workers. STEP-UP is currently in the pilot phase in Jefferson County. Alabama DHR continues to provide ongoing training for employees in collaboration with several vendors and SDHR Field Administration Office.

Alabama DHR continues to utilize the Trauma Informed Partnering for Permanence and Safety (TIPS) or Deciding Together curriculum for prospective foster family homes/adoptive resource applicants. *Refer to the training plan for additional information on staff training.*

Service Array and Resource Development

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

Alabama continues to utilize Intensive In-Home Services (IIHS). The services are available in all 67 counties. There are currently 661 IIHS slots statewide and there is not a waitlist. Families can receive services in the county in which they reside. As of December 31, 2024, 444 families were being served through IIHS programs around the state. The IIHS services focus on achieving the outcome of successful permanency for children in a family setting through either family preservation or reunification programs utilizing evidenced-based programs. These programs have the flexibility to design individualized services that are family-driven and youth/child focused. Services are customized for delivery in the least restrictive manner. Programs are in areas with a high concentration of families in need of services to address their safety and stability. There is a statewide ability to provide accessible and linguistically responsive services using translators and interpreters as needed for child welfare activities such as child abuse/neglect assessments and general service intake matters. Alabama Children's Justice Task Force continues training that involves Family Violence and Safety in Child Protective Services, Substance Abuse Assessment Training and Multidisciplinary Team Building Training. The Family Violence and Safety in CPS provides basic information on the dynamics of Family Violence and how it impacts children's lives. The Substance Abuse Assessment Training focus on identifying substance misuse in the home and assessing child safety in households where substance misuse is identified. The Multidisciplinary Team Building Training strengthens the relationships among team members and increase the effectiveness of the teams.

Alabama Department of Child Abuse and Neglect Prevention secures resources to fund evidence-based community programs committed to the prevention of child maltreatment, advocates for children and the strengthening of families. Alabama's partnership with Alabama Pre/Post Adoption Connection (APAC) is used to prepare our children and families for adoption finalization. All our adoptive families have access to trainings and access to counseling through this partnership. Our Wendy's Wonderful Kid Recruiters also familiarize themselves with community resources in their assigned regions to help families access needed resources. Gaps in

resources are usually related to limited accessibility in certain areas, the increase in telehealth services has been beneficial to children in these areas.

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

The Family Assistance (FA) Program is Alabama's time-limited cash assistance initiative designed to support low-income families with children. In Fiscal Year (FY) 2024, an average of 5,832 families received monthly assistance, encompassing approximately 10,903 children and 2,682 adults. During the same period, the Alabama Coalition Against Domestic Violence (ACADV) received 338 domestic violence referrals through the SAIL program. These referrals originated from all Department of Human Resources (DHR) programs as well as the broader community, with the majority coming from FA eligibility workers utilizing a standardized domestic violence screening tool.

ACADV provided support to 380 SAIL participants during FY 2024. Of those, 175 individuals obtained employment with assistance from the program. Additionally, financial assistance was extended to 338 low-income individuals through the coalition's efforts.

Agency Responsiveness to Community

Alabama DHR is committed to engaging with internal and external stakeholders. The State QA Committee and County QA Committees are significant partners to this end. The State QA Committee has representation of stakeholders across the state that meet on a quarterly basis. Members are appointed by the Commissioner of DHR. Members come from partners with the Children's Aid Society; Alabama Department of Child Abuse and Neglect Prevention; Auburn University Department of Sociology, Anthropology, and Social Work; Poarch Creek Band of Indians; Alabama Foster and Adoptive Parent Association; and Alabama Network of Children's Advocacy Centers. Members also include current and former foster or adoptive parents; a County QA Coordinator; and a County Director. Quarterly committee meetings are held to address practice concerns across the state.

Each County DHR is responsible for recruiting and appointing local individuals to serve on the local QA committee. These individuals must work or live in the County to be eligible to serve on that committee. Local QA committees operate with independence from the County DHR in several ways. Local QA committee members complete case reviews utilizing the Quality Review Instrument (QRI) developed by the QA Division and based on the Onsite Review Instrument (OSRI). Sampling of cases are based on the preferences of the local QA committee and can be completed to focus on specific topics or areas of interest such as services for older foster care youth, foster care cases with adoption as the permanency goal, etc. During the review of the case, local QA committee members interview relevant case participants including youth, parents, relatives, caregivers, foster parents, service providers, and DHR staff. The local QA committee debriefs the ratings for the QRI with a quorum present to ensure accuracy of the ratings. Additionally, a feedback loop is utilized between county staff and the local QA committee

following each QRI which addresses specific needs or case practice concerns which were identified by the QA committee during the debriefing of the QRI. County staff must provide responses to the local QA committee to address these concerns which are then discussed at a subsequent QA committee meeting. The feedback loop closes once the local QA committee has determined the responses or actions taken by the county staff are sufficient to address any needs or concerns. The feedback loop process ensures both strengths and needs of the County DHR are identified and any concerns observed by any stakeholder or the QA committee itself are addressed. Each county office has a QA committee with stakeholder representation. As of the end of calendar year 2024, County QA committees were composed of 568 members. Composition by role is listed below:

Role in Community	Number of Committee Members
Service Provider	177
Education	128
Other	126
Law Enforcement	33
Faith Community	33
Foster Parents	25
Legal	25
Medical	20

QA committee members who identified their role as “Other” include retired community members, lay individuals, former foster parents, and current or retired DHR staff from program areas not associated with child welfare such as SNAP, TANF, and Family Assistance.

The Office of Quality Assurance conducted 15 county onsite reviews in FY2024 to evaluate the quality of services and the outcomes achieved by children and families which included stakeholder interviews. Stakeholders interviewed included juvenile court judges, juvenile probation officers, related and unrelated foster parents, GALs, law enforcement, education personnel, CAC staff, and community service providers. Birth parents, relative caregivers, and youths are interviewed during OSRIs and QRIs when appropriate. OSRI results from county onsite reviews are shared with county directors, DAS, and county QA committees. The QRI results are shared with the county director, supervisor, and worker.

Birth parents, relative caregivers, and youths are also provided an avenue to give input through satisfaction surveys. Surveys are developed in coordination between the local QA committee and County staff to address specific areas of concern or to ensure on-going monitoring. Examples include surveys following case plan (ISP) meetings, investigations, or case closure. The local QA committee reviews the results of the satisfaction surveys.

Foster and Adoptive Parent Licensing, Recruitment and Retention

The Alabama Department of Human Resources maintains a record of inquiries from prospective foster parents spanning January through December. The calendar year total for 2024 was 2, 921. The Department has upheld a strong partnership and contractual agreement with the Alabama Foster and Adoptive Parent Association to enhance outcomes for children through collaborative training sessions, regional meetings, and a range of recruitment initiatives. Additional details regarding the diligent recruitment of foster and adoptive parents are available in the Targeted Plans section of Alabama’s report.

Update to the Plan for Enacting the State’s Vision and Progress Made to Improve Outcomes

See Appendix A for an update on the Strategic Plan.

Update on the Service Descriptions

Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)

Wendy’s Wonderful Kids

The Dave Thomas Foundation for Adoption (DTFA) award grants to public and private adoption agencies to hire adoption professionals who implement proactive, child-focused recruitment programs target exclusively on moving America’s children who have been waiting the longest out of Foster Care.

Wendy’s Wonderful Kid Recruiters maintain an active caseload of twelve to fifteen children and use the Child-Focused Recruitment Model to match the children with adoptive families.

The emphasis of the Child- Focused Recruitment Model is using a case dig method to go back and revisit every person with the child has a prior relationship. The Recruiter uses email, letters, phone calls to reach out to the people identified to try to reconnect the person with the child if appropriate. Even if the adoption is unable to finalized prior to the child reaching adulthood, the individual has re- established connections that can last a lifetime. We have seen children reconnected with family members, prior caseworkers, and previous foster parents. These relationships give the children a sense of purpose and acceptance. The families that can proceed with adoption go through the State’s licensure requirements to be a State approved adoptive home. Alabama continues to have success with the DTFA grant and has been granted permission to expand the grant and now has seven recruiters. Wendy’s Wonderful Kids Recruiters are responsible for serving children who are legally free for adoption and have a permanency plan of either Adoption with No Identified Resource (ANIR) or APPLA (but maintain a desire to be adopted). With the expansion, approximately eighty-four children are assigned on the Wendy’s Wonderful Kids caseload. The Recruiter is responsible for building rapport with the children during monthly face-to-face visits and using the information they learn during visits to recruit an adoptive family that can meet the child’s needs. During the face-to-face visits Recruiters are building the children’s self-esteem and helping them become ready for adoption through education about mental-health, permanency, and social skills, and relationships. Alabama has experienced some barriers which includes family members that are deemed appropriate for the child not wanting to move forward with licensure. Some of our teenagers have experience failed adoptions before, and do not want to consider being adopted again so they advocate for the permanency plans to be changed so active recruitment does not continue. We are overcoming these barriers through better education and training through our Pre/Post Adoption Connection Services (APAC) and using tools to unpack the reasons for hesitancy regarding adoption of our teens.

Services and Data on Children Adopted from Other Countries *(sections 422(b)(11) and 422(b)(12) of the Act)*

Post Permanency support services are available to all children and families in the State of Alabama who have achieved permanency through adoption. Alabama Department of Human Resources contracts with Children’s Aid Society to offer Alabama Pre and Post Adoption Services (APAC),

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

The APAC team is available Monday through Friday, from 8:30 a.m. to 5:00 p.m. Counselors working with families often check email or phone after hours and on weekends and respond quickly. In FY 2024, there were zero children adopted from other countries/entered state custody.

Services for Children Under the Age of Five (section 422(b)(18) of the Act)

The Department has completed the following activities to reduce the length of time children under the age of five are in foster care without a permanent family. Permanency staffing and reviews are done on a county-by-county basis. These are currently be conducted in 34 of the 67 counties in the state. County staff can also contact the Office of Foster Care to request individual case/county staffing as needed. In addition to county staffing, staff have been pulled to work in county offices so that counties can continue to ensure the safety of the families and children they serve. Services for these children continue to be in place and will remain available. Examples are counseling, referrals, transportation, and other needs that may expedite permanency. The Department explores legal risk placements for adoptions of children under the age of five that have the permanency plan of ANIR. Data is collected concerning the number of children placed in their home or relative placements. There is also monthly tracking of foster parent adoption. Adoption Placement Specialists are available to assist in recruitment for children under the age of 5 who need a legal risk placement. These are children who are in foster care, but TPR has not yet occurred. Once a potential match is located, staffing meetings are held with the county of origin to determine if the county feels this match is appropriate. If a match is approved, then the adoption placement specialist coordinates a placement, including needed services, with the county and the potential adoptive parents. Services include counseling, medical services, after school/recreational services, and any other need identified by the county and family.

- Services are recommended through individualized service plans within foster care and family preservation services. The services are recommended and DHR will complete the referrals for the families or initiate them through a service provider. Services include:
- Head Start Child Development and Early Learning
- Women, Infants and Children, WIC (supplemental nutrition program for pregnant women and their young children)

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

Average Length of time in care for Children Exiting Care (Ages 0-5) in:	Months
FY2024	14.39
FY2025	
FY2026	

Children Ages 0-5 at Time of Discharge	Percentage of Children Ages 0-5 at Time of Entry
FY2024 42.5%	FY2024 47.92%
FY2025	FY2025
FY2026	FY2026

Entry Reasons for Children Ages 0-5	FY 2024
Drug Abuse (Parent)	53.66%
Physical Abuse	14.76%
Neglect	27.24%

Efforts to Track and Prevent Child Maltreatment Deaths (section 422(b)(19) of the Act)

The State of Alabama Department of Human Resources Guidelines for Reporting Child Deaths and Near Fatalities requires that counties must notify the State DHR Office of Data Analysis within one working day following the receipt of child death or near fatality information. A standardized reporting form is utilized across the state that collects information required to be reported in annual NCANDS submissions. Office of Data Analysis staff monitor the completion of child death and near fatality investigations to determine which ones should be included in annual reporting. A unique data base is maintained to document and track child death and near fatality information across time. The circumstances of the child fatality are entered into our CCWIS system as a CAN report and multi-disciplinary teams confer during this process. Multi-Disciplinary teams are composed of DHR staff, law enforcement, district attorneys, medical professionals, and county

corners. Alabama receives reports of child deaths from many reporters including law enforcement, hospitals, and the public.

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

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

Alabama also has a State Child Death Review Team composed of 28 members. The Alabama Department of Human Resources and the Alabama Department of Public Health are two of the departments represented on the state team. This team reviews the circumstances and underlying factors of all non-- medical infant and child deaths to identify those deaths that could possibly have been prevented. The state team is responsible for coordination and efficient operation of the review process using the following causes of death: Sudden Infant Death Syndrome, Motor Vehicle Involvement, Fire Related Deaths, Suffocation Related Deaths, and Weapon Related Deaths.

Alabama has a Governor's Task Force on Infant Mortality which was created in 2017 to address the infant mortality rate in Alabama. In June 2018, the State of Alabama Infant Mortality Reduction Plan was adopted and allotted funding to combat infant mortality as a pilot program which included 3 counties (Montgomery, Macon, and Russell counties) that would focus on nurse visitation programs, safe sleep initiatives, utilization of a screening tool to identify substance use, depression, and domestic violence. According to the Alabama Department of Public Health, in 2023 the top three causes of death were: 1. Congenital malformations (deformations and chromosomal abnormalities), 2. Disorders related to short gestation and low birth weight, not elsewhere classified, and 3. Sudden infant death syndrome. The three leading causes of infant

deaths accounted for 42.3% of infant deaths. The data below reflects the number and rate per 1000 live births.

Overall Infant Mortality Rate* (INFANT MORTALITY ALABAMA (alabamapublichealth.gov))	2022	2023
Montgomery	10.2	10.3
Macon	7.0	0.0
Russell	6.3	12.2
Alabama	6.7	7.8
Total Infant Deaths and Infant Mortality Number by County*	2022	2023
Montgomery	30	29
Macon	1	0
Russell	5	9
Alabama	391	449

Data Source: Alabama Department of Public Health Amy.McAfee@adph.state.al.us and/or Alabama Vital statistics <https://www.alabamapublichealth.gov/healthstats/publications.html>
Requests for Data- vsdata@adph.state.al.us

MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

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

Family Preservation

One service provided via contract is Intensive In-Home Service (IIHS). These programs provide short term intensive in-home interventions in all 67 counties in Alabama to help alleviate situations and conditions within families where removal of children from the home is imminent or the plan is for the child to return home after being in foster care. Providers may serve families for 6-9 months and may request extensions from SDHR if additional service time is needed. Families also receive aftercare services for 90 days and are tracked at 3, 6, 12, and 24 months. There are 10 vendors who provide IIHS services in the state with a total of 661 slots which did not increase from 2024. In FY 24, there were 444 families receiving intensive in-home services with 243 receiving services for Reunification and 201 receiving services for Family Preservation. Children in need of services are provided services through our Investigation and Child Protect Services units. The needs of each family are assessed, and the services needed are implemented through the ISP process to help children be maintained in their own home or the home of a relative but not in foster care.

Family Support

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

A total of six of the nine agencies that receive the funds are Family Resource Center. Through grant funding from the Alabama Department of Child Abuse and Neglect Prevention, the Alabama

Network of Family Resource Centers (ANFRC) has provided in depth Family-Centered Coaching training to 93 staff at Family Resource Centers and promoted the use of Family Centered Coaching by leading 5 Community of Practice sessions that were attended by 132 staff members. Family Centered Coaching is a set of strategies, tools, and resources that help human service organizations reinvent how they engage with families by shifting from what services an organization offer to what a family needs. Additionally, the grant supports ANFRC in working intensely throughout the year with 12 agencies that are adding to their capacity to serve families and obtain certification standards to be a Family Resource Center in the network. Lastly, ANFRC’s grant supports them in coordinating day-long Strengthening Families trainings through local Family Resource Centers that reached 221 community members from child welfare, education, counseling, law enforcement, health care, and other fields.

Family Service Centers Data:

1st Q		2nd Q		3rd Q		4th Q		FY 24 Total	
DHR	Non-DHR	DHR	Non-DHR	DHR	Non-DHR	DHR	Non-DHR	DHR	Non-DHR
433	8070	492	7539	1001	3315	1001	3315	2450	28255
								30,705	

Adoption Support

Alabama partners with Heart Gallery Alabama to actively recruit for our waiting children who received a permanency plan of adoption with no identified resource and termination of parental rights have occurred. Children are provided with professional photo and video shoots to showcase their desires for a forever family. Heart Gallery’s Hope from the Heart Program ensures that each child on the Heart Gallery has their birthday celebrated. The Hope from the Heart Program provides youth with birthday cakes and gifts to ensure that they feel loved and supported on their special day. The program is led by the Heart Squad, a group of committed volunteers who want to make a positive impact. Heart Days is a new initiative that was started in 2024, this programs mission is to make connections for foster youth that have a goal of adoption. Licensed adoptive families serve as volunteers and programs such as Back to School Shopping, Art Days, Game Days, etc. take place where these organic interactions can lead to a potential adoptive match. The Heart Gallery has helped finalize twenty-seven adoptions during this reporting period and there are currently thirty-three children potentially placed.

Pre/Post Adoption Services continues to be provided by Children’s Aid Society under the title APAC (Alabama Pre/Post Placement Adoption Connection). The Pre-Adoption services include TIPS/Deciding Together Training, Home Study Approval, matching children with pre-adoptive families, and the finalization of adoptions. Pre-Adoption orientation was attended by 457 families. APAC served 33 families comprised of 45 individuals completed TIPS/DT through TIPS/Deciding Together and the approval of home studies. APAC assisted in the finalization of eleven children into seven adoptive families and assisted in matching 25 children with 17 separate families.

The Post Adoption Services include counseling, family advocacy, crisis intervention, and training. APAC also offers adoptive family support groups, a library of resources for adoptive families, and other special events. The agency provided 872 individuals with Post Adoption Services. During the Fall, APAC hosted 2 special events called “Pictures in the Park”. Families were invited to attend and have professional family photographs taken. The events were held at local venues in

two areas of the state. APAC staff offered activities for families while they waited their turn to be photographed. APAC also continues to partner with an equine therapy agency in the area to offer sessions and activities for children and families.

APAC provided trainings to 1,930 individuals, to include in-person and live interactive virtual trainings. Topics included, “How Childhood Family Trauma Affect Parenting,” “Adolescent and Childhood Grief Part 1: Understanding the Impact,” Adolescent and Childhood Grief, Part 2: The Role of the Caregivers and Supportive Aid, “Interventions for Problematic Sexual Behavior,” “Education Support for Struggling Learners,” and “Thriving Through Self and Community Care.” In addition, 375 individuals were served through the Trained Therapist events and 170 individuals attended the 19th Annual Permanency Conference which included 117 DHR staff. The annual Permanency Conference is a collaborative event with APAC and SDHR. The conference is available to child welfare staff from across the state. APAC brings in national experts in the field of adoption, grief and loss, attachment and other areas to support adoptive, foster and kinship families as well as the professionals that support them. DHR provides workshops on topics relevant to child welfare.

These services help strengthen adoptive families and provide necessary support to ensure the adoptions are successful. Families are referred to these services through county workers and State Adoption Placement Specialists. Families can better understand the trauma history of the child/children in their home and implement techniques to better manage behaviors. The low number of adoption disruptions shows the services are working. Satisfaction data is also collected via surveys by APAC, and the surveys are shared with the Department.

Services Decision-Making Process for Family Support Services

Family Resource Centers served 4,855 individuals this past fiscal year – a 24% increase over the 3,931 individuals served in FY23. Additionally, GED graduates grew from 61 in FY23 to 129 in FY24, which is a 112% increase. A total of 1,034 unemployed participants gained employment and an additional 294 underemployed participants secured higher wages or transitioned to full-time employment. Finally, 244 participants earned vocational credentials, and 317 individuals completed various workforce-related certificates.

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

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

payment by voucher reimbursement. CBCAP funds have been prioritized to support the HEARTS program because we know children with disabilities are at least three times more likely to be abused or neglected than their peers without disabilities, and they are more likely to be seriously injured or harmed by maltreatment.

Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act)

In the past 12 months, 40.7% of all children entering care had Parental Drug Abuse among their entry to care reasons. When looking at children aged 0 through 5 that percentage is 59.2%. Alabama DHR partners with drug courts where available to monitor and court order parents into treatment. The courts and drug court give oversight to random drug screening as well as participation in recovery programs to help parents reduce the safety risks to their children. Alabama uses in-home and out of home safety plans when appropriate to lower the risk to children while still allowing the youngest of our children to bond with their parents because visitation is much less complicated when a safety plan is put in place. Intensive in-home services are also used in cases in which young children and substance affected parents are involved. These programs allow children to be placed back in their home with several visits a week to ensure safety. Alabama is working toward a better tracking system for referrals requiring plans of safe care through the data analysis unit. Representatives from Alabama DHR sit on committees for a variety of community partners that work with at risk families including the Governor's task force for Safe Sleep, Children's Justice Act Grantees Peer Group and Children's Policy Councils around the state. Alabama DHR also partners with the Alabama Department for the Prevention of Child Abuse and Neglect which funds regional Family Resource Centers to serve at risk families. Alabama has not seen any major shift in trends identifying those most at risk. The demographics of children in care align with the demographics of the state.

Kinship Navigator Funding (title IV-B, subpart 2)

Kinship Navigator Program continues to be implemented directly as a program under the Family Service Division of Alabama Department of Human Resources. The Deputy Director for The Office of Recruitment and Home Support serves as the current liaison. This full-time staff is responsible for responding to Kinship Navigator website e-mail inquiries as well as answering our toll-free hot line calls.

Alabama DHR used FY24 funds to cover ongoing maintenance of our navigator website, personnel cost and community awareness advertising. The navigator website serves as our official information and referral tool. The site provides information regarding how to apply for benefits, support groups, news useful to Kinship families as well as those families caring for children outside the foster care system. Funds were also used for personnel cost for retired staff that are responsible for training and supporting kin families throughout the state. Updated Kinship family videos, posters, brochures and laminated QR codes were also purchased.

Kinship caregivers are made aware of kinship navigator programs and resources by visiting our website- Navigator.alabama.gov or by calling (844) 4ALA-KIN. We have dedicated staff that answers both website inquires and hotline calls. We continue to produce our laminated Kinship Guardianship Desktop Tool that has been shared with all 67 counties as well as local community and family resource center partners. This tool is also provided during quarterly special education advisory board meetings, Foster and Adoptive Parent annual conferences, Judges and GAL

conferences and all annual DHR conferences. Caregivers are also made aware of resources from county child welfare and family assistance program staff.

As of May 6, 2025, Alabama had five thousand, nine hundred (5,900) children in out of home care. Also on that date, there were five hundred seventy-six (576) children placed in the homes of relatives; three-hundred seventy-six (376) of those children were placed in a related foster home and two-hundred sixty-eight (268) children had the permanency plan of Kinship Guardianship. To date, Alabama has seen a 19.64% increase in Kinship Guardianship Permanency Planning. Alabama has applied to participate in the FY 2025 Title IV-B kinship navigator program and plans to hire additional part-time staff to expedite the approval process and service delivery of concrete supports for Kinship families.

Monthly Caseworker Visit Standards and Formula Grants

Caseworker visit grant monies have been utilized for iCAN county team meetings, iCAN Advisory Committee meetings and Alabama's Judicial Child Welfare Summit. Each of these meetings include caseworkers, supervisors, the county director, the local Juvenile Court judge, Guardians ad litem and other attorneys. The purpose of each of these meetings is to help the court and DHR problem solve on any areas within the county that are resolvable with conversation and action plans and raise the capacity of the workers and supervisors. At each of these meetings, the importance of engagement with families through meaningful caseworker visits is discussed and from the prospective of each of the members. Meaningful caseworker visits are the basis for measuring change in families. In these meetings, there is always discussion around the important information caseworkers gain during visits, the visits that must be completed and how to best convey that information to the courts. Caseworkers engage with fathers, mothers, maternal and paternal relatives to assess for placement, foster /adoptive parents for permanency or collaterals for information on a family is the basis for all the information we gather to assess and monitor strengths, needs, and change and to report that to the Individualized service plan team or the court for guidance and input on services and case plans. Alabama DHR plans to utilize the money from the Monthly Caseworker Visit Grant over the next five years to continue the work with iCAN county team meetings and iCAN Advisory Committee meetings and to fund the Alabama's Judicial Child Welfare Summit. The Judicial Child Welfare Summit is held yearly and involves collaboration between AOC, Casey Family Programs and DHR. A small judicial group convened on August 26th and 27th, 2024. Attendees included: The Casey Family program, SDHR, AOC, local Juvenile judges, and DHR directors from Talladega County, St. Clair County, Tuscaloosa County, Shelby County, Macon County, Jackson County, Lee County, and Elmore County. AOC provided data to the judges related to continuances, timely setting, and disposition. DHR provided state-wide and local data on Finalized Adoptions, Entry to care reasons by age, children in care ages and permanency plans.

The Judicial Child Welfare Summit was held December 9-11, 2024. Attendees included Juvenile Judges, County Directors, County management staff, Guardians ad Litem, DHR attorneys, State DHR staff, Administrative Office of Courts, etc. There were approximately 50 of the 67 counties represented with comprised just over 200 attendees. The ratings for the training were on a scale of 1 to 5 to indicate degree of satisfaction with 1 being the lowest score and 5 being the highest score. The lowest score was 4.34 and the highest was 4.83. These ratings indicate that the Judicial Child Welfare Summit attendees believed that the training was a value to them. Training topics

included legal updates, high acuity youth and placements, youth panel, state and local data discussion, and leadership for a lifetime.

Progress Reporting for the other Grants and Requirements Coordinated through CFSP/APSR

Adoption and Legal Guardianship Incentive Payments (section 473A of the Act)

Alabama has consistently been awarded Adoption (and Legal Guardianship) Incentive funds for moving children to permanency. The Department divides the funds between each of the 67 counties, where each county receives a base amount of funding. Counties are then awarded supplemental funds based on the number of adoptions they completed the prior fiscal year. Adoption and Legal Guardianship Incentive Funds have been utilized to support training, to strengthen and support staff and stakeholder capacity, and to achieve permanency through adoption. In addition, funds have been used for expanding the pre- and post-adoptive services to families and enhancing statewide recruitment efforts. If a county's allotment is exhausted or obligated, a protocol is in place to ensure they can secure more funds through the Office of Adoption. The State Office utilizes a portion of these funds to pay for recruitment and public awareness activities. Heart Gallery of Alabama's contract and the contract for CAS/APAC's pre-adoption contract, which provides for recruitment, training/preparation, and home studies for families interested in adopting children meeting the Department's special needs definition, are funded through these monies as well. Both agencies, as well as the county departments, focus a substantial amount of the recruitment activities in faith-based settings.

Each county contacts the Office of Adoption Subsidy and Support when they need to utilize the funds. The State Office of Adoption Subsidy and Supports ensures these funds are utilized to promote permanency of children. Some examples of uses of Adoption Incentive Fund are:

- recruitment activities to support the development and training of resources,
- to obtain specific services for adoptive families,
- trainings for the county staff around adoption issues
- to meet specific needs of children that will aid in their being adopted whose permanency plan is adoption
- to purchase fliers and banners for recruitment
- to purchase equipment to train foster/adoptive families
- for items needed for children in pre-adoptive placements such as special hospital beds, medical equipment, furniture, and suitcases

There hasn't been any changes, issues or challenges encountered to the plan outlined in the 2025-2029 CFSP for timely expenditure of the funds.

Adoption Savings (section 473(a)(8) of the Act)

Alabama has used the CB method for calculating the Adoption Savings each year. The spending of the Adoption Savings is done by the Finance Division for services including psychotropic medication review team to support positive permanent outcomes for children in foster care. Alabama further uses adoption savings to fund adoption and kinship guardianship subsidy payments and legal fees toward adoption and kinship guardianship for children who are not eligible for IV-E subsidy payments.

Family First Prevention Services Act Transition Grants

Alabama received FFPSA Transition Grant funding in the amount of \$8,564,571.00. Alabama has used the funds for specialized placement resources to provide psychiatric community-based home services for youth ages 5 to 20 with psychiatric disturbances and/or behavioral issues. The primary outcomes for these youth are safety, permanency, and well-being.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (section 477 of the Act)

Description of Program Design and Delivery (section 477(b)(2)(A) of the Act)

Alabama Department of Human Resources administers the Chafee program as a state-administered, county-managed program providing direct and indirect services to youth ages 14-20 whom the Department holds custody. As of March 1, 2025, there were 1772 young people in foster care age 14 to 20. The Department continues to provide consultation and support to youth up to age 23, who exits the State's foster care system after age 18 on a case-by-case basis in partnership with our county office staff. Alabama DHR has provided information to former foster youth who were in care in other states and request services when they arrive in Alabama.

Between September 2024 and March 2025, the Department has held three Regional ILP meetings which hosted 137 foster youth. These Regional Meetings were led in part by the Alabama Dream Ambassadors, who serve as the State's Youth Advisory Board. IL skill training around money management, internet safety and job skill development were conducted. At the end of each meeting, youth are divided by age group and discussions are held related to "All Things ILP". These sessions give time for our IL staff and Ambassadors to talk through case management topics, IL resources and allows for feedback to things that are working and not working in the system of care. The prevailing trend from our meeting with our youth statewide, is the lack of timely receipt of funding related to allowances, participation in IL events and other activities. The Department has learned of the breakdown in timely funding of IL support. State IL Consultants have followed up with county staff to address this concern and help counties implement improved processes to help youth get IL funding support timely. Our department will continue to develop strategies with our administration and our county office staff to improve turnaround times related to IL funding. New contracts with Transitional (TLP) and Independent Living Program (ILP) placement providers were initiated beginning October 1, 2025. The Office of ILP held an in-person meeting with these providers on October 9, 2024. These meetings help us create and maintain partnerships with those specialize placement providers who are working with IL aged youth. Additionally, the ILP staff has quarterly meetings with providers, to discuss standards/expectations, roles/responsibilities and how to complete reports, discharge request and exceptions for placement guidelines. The Department has been working to schedule one-on-one meetings with the providers to review their programs services and protocols. A joint meeting was held during our annual ILP Networking Conference in April. The theme of our 2025 conference was "Building IL Together". During the conference, county staff were able to network with contract providers and state partners who serve IL aged youth. The conference included discussions on how attendees can partner to develop win-win scenarios for youth, how we can better prepare support post foster care and what distinct services are being offered by our various Transitional and Independent Living placement providers.

This ongoing involvement and engagement of youth as equal partners, provides the context of positive youth development. Events and activities managed by State ILP create a positive experience through inclusion of all youth. Creating positive environments where interactions between youth are encouraged within our camps and regional meetings allow youth to feel safe and cultivates positive relationships. Throughout this last year, our youth advisory council provided input toward building stronger structure for youth who enter independent living placements. They were able to be meet with administrative staff at our staff office along with other youth in Transitional and Independent Living placements to explore things that worked well in the programs and areas that needed some improvement. Updated requirements for these placement types included stronger emphasis on developing post care supports and clearer skill requirements for those entering these programs. The youth advisory council also assisted with updating and giving input for the state-wide survey that will go out to all IL aged youth.

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

Serving Youth/Young Adults Across the State (section 477(b)(2)(B) of the Act)

Alabama ILP is administered in the same manner across the State guided by Family Services policies. The Department has one contract for Independent Living Support Services (ILSS) which is currently held by Children's Aid Society of Alabama. The ILSS contract consist of partnership work with the Office of ILP to provide IL support services to Alabama foster youth ages 14 - 20 and former Alabama Foster youth ages 18-25. It includes two, three-day camps for foster youth; an ILP Networking conference for DHR staff, providers, and partners; Regional IL meetings and trainings and the ongoing development and coordination of services with the Alabama DREAM Ambassador program. A second contract is held by Embrace Alabama Kids for Alabama Educational Assistance Programs (AEAP). AEAP provides the economic and personal supports

eligible youth need to attend and complete post-secondary training and education programs through the Fostering Hope Scholarship (FHS) and Alabama Educational Training Voucher Program (ETV).

Serving Youth of Various Ages and Stages of Achieving Independence

The focus of our Independent Living Program is to provide youth with needed skill development through services and supports that promote healthy interdependence. The Department's ILP Framework consist of a list of over 100 skills youth should possess in to help them to transition to adulthood successfully. The Framework is simply an extensive but not exhausted list of skills that can be referenced during all levels of case planning to aid in the creation of meaningful goals and actions steps. This list of skills becomes the common language between our youth, workers, caregivers, providers, staff, and court officials. Individualized work begins with an assessment completed by county staff that highlights youth's current priorities. Areas covered in the Framework, that also connect to the Youth Assessment Summary and Transition Plan are an evaluation of Personal Growth and Social Development, Family Support and Healthy Relationships, Health Education and Risk Prevention, Education, Employment/Career Preparation, Money Management, Home Management, Transportation and other Daily Living Skills. The Youth Assessment Summary (YAS) functions as the State's one page assessment tool that identifies if a youth is aware, learning or doing a skill tied to the ILP Framework. The YAS is the beginning of the IL process being completed by youth when they turn or enter foster care pass the age of 14. Youth are assessed in skill development within a 3-stage process of awareness of skills, learning the skill and doing the skill. County staff are encouraged to update the assessment every six months in connection to the ISP, as a tool to track the youth's progress in learning needed skills. The ILP Framework and YAS work in partnership to the Individual Service Plan (ISP) and the Alabama Transition Plan. Using the stated tools, youth 14 - 16 years old are introduced to the ILP program with a focus on outcomes. Use of the Transition Plan for 14–16-year-old is optional as case management implements the information obtained in the Youth Assessment Summary into the youth's case plan or ISP. The YAS provides a section on Current Priorities so that youth can be served according to their individual needs. The current priorities section ties to the youth's ISP and maps out needed services to help advance skill development to the next stage.

The Alabama Transition Plan is an 8-page working document that is developed with the youth's involvement and maps out how they plan to exit foster care. The Plan is required by policy to be implemented for all youth ages 17 and older as they plan out steps to leave foster care at age 21, or sooner when appropriate. The plan is developed with the youth's involvement, allowing them to work through their choices as they prepare for adulthood at their pace. County workers and providers are encouraged to review the Transition Plan monthly during the case management visits to help keep focus of the youth's path and work through their decisions as they are preparing for adulthood. Provider treatment plans should also include references and connection to the Transition Plan. Each section of the Transition plan connects to the sections of the ILP Framework and should be completed at the pace of the youth. Every section does not have to be completed at one time; some areas will be added as the plan is developed. As they work through the plan, youth are guided through their short-term priorities and long-term vision while identifying specified individuals by name in the "Who can help you?" section. The Alabama Transition Plan is mandatory to be completed on all youth 17 years and older to help them develop their own plan for exiting foster care. IL youth at any age are free to begin working the plan, but it is mandatory

at age 17. State Office of ILP staff monitor compliance with completion of the transition plans monthly. The plan is designed to be developed with the youth's involvement to work through their choices as they are preparing for adulthood. As they complete the plan, it should map out the direction and next steps for where the youth is going and how they plan to get there.

The ILP Framework, YAS, Alabama Transition Plan, along with an IL Transitional Discussion Guide are presented as the State's ILP Case Management Tools.

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

As of March 1, 2025, the Department held custody of 289 youth who were 18 years old, 147 youth who were 19 years old, and 90 youth who were 20 years old. Youth aged 18 - 21 are not typically referred to as "extended foster care" but viewed as a continuation of services needed to best prepare for aging out of Alabama's Foster Care system. Efforts to expand services to those older youth have resulted in the development of a self-secured placement type. Self-secured placements are designated for those 18 - 20-year-olds, who might want to live in a non-licensed, non-traditional placement. Decisions to move forward with this type of placement would include ISP team and requires all adults residing in the placement complete a CA/N Clearance and a Criminal History background check through ABI/FBI. The provider would be listed according to who the young adult is living with. Youth 17 years and older are also provided the option of Independent Living-Contracted and Independent Living-Non-Contract placements. Contract placements provide a placement with a vendor who provides services to the youth in their own or shared apartment. Non-Contracted placements allow youth to live in an apartment of their own choosing where they can undertake self-sufficiency while managing their own living expenses. All three of these placement types allow for youth to maintain IV-E Medicaid eligibility. These services are supported with Room and Board IL financial support. The Department monitors these expenses and do not allow them to exceed the 30% allowed use of Chafee funds. As youth in these placements prepare to age out of care, vendors work to transition the placements to the youth so they can maintain housing post-foster care.

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

"pod," and only individuals participating in the program are allowed to live within the pod. TLP placements can also be provided in approved foster homes.

The Department currently has 11 providers with approximately 109 slots for youth in TLP placements. We have 7 providers with 126 slots for youth in ILP placements. Youth who leave the Department's custody after reaching 18 years of age are eligible to return to the Department's care prior to reaching 21. Upon reaching age 18 and leaving care, youth are eligible for most services of those who age out at age 21. To assist youth beyond age 21, policy allows for the use of IL funds up to six months for youth who age out of care within 30 days of their 21st birthday, provided the services are mapped out in their closing ISP. County Office are encouraged to include a Transitional Letter that list out all the services available to a youth leaving care. This letter should be accompanied by a document listing verification of the youth's dates in care. These items will assist them moving forward. The Department is also working to add links within the ilconnect.org website that will provide opportunity for youth who move to Alabama after exiting foster care to request services.

Collaboration with Other Private and Public Agencies (section 477(b)(2)(D) of the Act)

County Office are encouraged to directly procure services and supports from public and private sectors to help youth in foster care achieve independence. State ILP also works to develop supports that can be provided statewide or beneficial throughout adjoining counties. The Department's partnership with Alabama Medicaid allows youth who left care after reaching age 18, to receive a seamless service for medical needs. The State's IL Coordinator serves as the liaison to assist youth living outside of Alabama obtain Medicaid in another State. They also assist eligible youth who have entered Alabama from other States seeking Medicaid. The Department provides data sharing with Alabama Medicaid of youth who are eligible for Medicaid through age 26 so they can receive seamless health care. Once out of care, youth simply apply once and then are contacted annually directly by Alabama Medicaid to keep their insurance active.

The Department has two primary partnerships for support services to youth with housing needs after or just prior to leaving foster care. The first is a non-profit agency, Second Shift Alabama who serve all youth between the ages of 18 -25, even if they have not been in foster care. Second Shift provides transitional housing assistance by locating and paying for housing to prevent homelessness of youth. They also provide Life Skills Education through vocational and financial coaching; mentorship through connecting youth to a caring stable adult and provide Basic Care Services. These services are designed for youth preparing to leave foster care and include emergency assistance in the form of a gift card or other non-currency provision like household goods or support in seeking employment, finding resources, continuing education, and planning for parenthood. Youth Towers is our second primary housing partner. This non-profit strives to ensure the disadvantaged Jefferson County young people become economically secure through a continuum of care that promotes a positive and productive outcome. Their programs include Street Outreach of the unsheltered, rapid re-housing, transportation and career and job preparation.

The Department has maintained a partnership with the Alabama Department of Housing and Urban Development to provide support through the Foster Youth to Independence (FYI) program since February 2021. Since this partnership, over 100 referrals have been made to the 16 Public Housing Authorities for housing vouchers for youth who were homeless or at risk of homelessness. The

Department continues to partner with Second Shift Alabama and Youth Towers along with the FYI program to address housing needs of youth leaving foster care who had not established stable placement through the IL program placements.

The Department was also able to provide information about SNAP exceptions for youth experiencing homelessness and exiting foster care through the website. Alabama does not deny nor terminate independent living services to youth who otherwise meets the eligibility criteria but temporarily reside outside of Alabama.

Determining Eligibility for Benefits and Services (section 477(b)(2)(E) of the Act)

There are no changes since the submission of the 2025-2029 CFSP. Eligibility criteria is established through state's policy to provide support services to youth aged 14-21 and who are in foster care.

Education and Training Vouchers (ETV) Program

Alabama DHR's contract provider changed from Foster Care to Success to Embrace Alabama Kids October 1, 2024. Through our current contract with Embrace Alabama Kids, financial assistance is provided from the federal and state funding to eligible youth who are enrolled in postsecondary certificate or accredited undergraduate (associate or bachelor's) degree program. The Alabama ACT No. 2015-121 provides the Department with state funding through the FHS to cover tuition and required fees for eligible current or former foster youth in Alabama. Under the Promoting Safe and Stable Families Amendments of 2001, the Department receives funding annually through ETV to assist eligible foster youth and former foster youth so they can pursue studies at colleges, universities, and vocational training institutions. ETV allows for the Department to expand and supplement assistance to those youth also receiving FHS so they can begin, continue, or complete their educational and vocational goals. For those who do not meet the FHS eligibility, ETV becomes the primary means to assist these young adults with their postsecondary educational needs. Youth eligible for these services can apply annually through our electronic application platform, www.fosteringhopeal.org. The Department then verifies eligibility for both educational assistance programs. Information provided to youth as they apply for FASFA, also directs them to the potential for funding. Embrace Alabama Kids works with the eligible youth and respective educational agency to assure the total amount of educational assistance to youth under this or any other federal assistance program does not exceed the total cost of attendance nor that there is any duplication of benefits under this or any other federal or federally assisted benefit program. Embrace Alabama Kids also makes ETV funding available to eligible youth from other states who move to Alabama and apply for ETV, if they have not already received ETV from another State or State agency. Embrace Alabama Kids is required to maintain a database related to individual and cumulative data to provide an annual count and roster of ETV and FHS recipients.

Consultation and Coordination Between States and Tribes

Alabama DHR maintains ongoing collaboration with the federally recognized tribe, the Poarch Band of Creek Indians (PCI) whose office is in Atmore, Alabama. The tribal contact, Amanda Montgomery and Alabama DHR's Family Services Director communicate to schedule trainings, planned visits, and meetings.

The Inter-Agency agreement between the Poarch Band of Creek Indians and the Department remains in place with no changes needed. The agreement details who is responsible for protecting

children who are enrolled in the Tribe, who is responsible for providing services to tribal children, and steps to take if tribal children are brought to the attention of DHR. The agreement also details guidelines for court involvement if it becomes necessary.

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

Alabama DHR and the Tribe's staff met face to face on May 20, 2025, and discussed service needs and gaps in collaboration between the Department and the Tribe. PCI reported most of the services they provide to families are preventative services such as assisting with bills, transportation, and childcare. They reported no barriers for providing services other than mental health services. Due to the ruralness of the area there is not a lot of mental health services available. PCI can offer any services needed to tribal families and children based on a need. PCI reported they can utilize services on the reservation such as the Poarch Creek Community Center which is also a Boys and Girls Club, drug court, and a sober living home. A day substance treatment center was recently open on the reservation for members coming out of sober living. This facility has staff on hand which includes a substance abuse counselor. When services are not available on the reservation, referrals are made to outside agencies. There were no reported gaps with collaboration with the Department, as the tribe is in frequent contact with Escambia County DHR, where the reservation is located. Representatives from PCI serve on the Escambia County Quality Assurance Committee, where they assist in record reviews and offer feedback to the county regarding casework and policy issues. Amanda Montgomery, Family Services Director of PCI, is also on the State QA committee. PCI currently has 3 foster homes and no children in foster care currently. They are providing services to 3 children however none are of the age of 14 or older. The Tribe is an active stakeholder for Alabama DHR with full access to all information regarding services and supports available through Chafee to young people. There are no restrictions regarding the Tribal members accessing any benefits or services available to all other youth in the state. Collaboration for events and joint activities with the Poarch Band of Creek Indians, Director of Family Services, has been maintained through quarterly contact.

Alabama will provide the Tribe with a copy of the 2026 Annual Progress and Service Report upon final approval. A copy of the APSR will be emailed to the Tribal Liaison, per the Agreement. Documents from the Tribe to DHR will be sent to the Director of Family Services.

CAPTA State Plan Requirements and Update

Alabama State Liaison Officer (SLO)

Nora Williams, Program Manager, Child Protective Services

State DHR – Children & Family Services

50 Ripley Street

Montgomery, AL 36130

334.242.9500

Nora.Williams@dhr.alabama.gov

There have been no substantive changes to state laws or regulations that would affect the state's eligibility for the CAPTA State Grant.

Citizen Review Panel

The Department has created 3 new panels that consist of community members and stakeholders. Each panel will examine policies, procedures, and practices of the State and local agencies related to their chosen topic.

See Appendix B for panels' recommendations and the Department's responses.

Use of Grant Funds

CAPTA funding provides salaries and benefits for 3 Program Specialists, 1 Social Service Caseworker, and 1 retired state employee. CAPTA funding also pays for travel for CPS staff to attend the annual Children's Justice Grantee meeting that was held set to be held in Rockville, Maryland on March 31, 2024; however, this event cancelled.

Alabama does not create a separate document for plans of safe care. As a state, we have several working agreements with families to provide safety and services in which we incorporate a plan of safe care. In any referral, if it is determined that a safety threat exists, the worker assesses the family's ability to make a safety plan with the department to maintain the safety of the child by providing a person who is vetted and can be responsible for the safety of the child/children while the parents maintain custody and work with the department to increase their protective capacities, thereby lowering the safety threat to the child/children. Alabama also uses an Individual Service plan for every family with whom we open a case to list the safety concerns, the permanency plan, the services that will be provided by the agency to lower the safety threat, and the agreement of the parents and any stakeholders to anything for which they are responsible. Alabama incorporates plans of safe care into each of these documents by including services like drug screens, drug assessments, and supervised visitation. The Individualized Service Plan includes a multi-disciplinary outreach and coordination as the plan is developed in partnership with the family, service providers, teachers, doctors, attorneys' relatives and other DHR program staff involved with the family. The team members are invited to participate in the ISP process to allow input and feedback to reach the established ISP goals. Meetings maybe conducted at any mutually agreeable and accessible location which maximizes the family's opportunity for participation. The location of each ISP meeting is provided to all team members to allow them to prepare for and participate in the meeting.

Alabama has divided the state into 5 regions, each of which is assigned a child protective service program specialist. Their primary job is to support the county to which they are assigned by consulting on complex case issues in intake, investigations and in home services and completing the Administrative Record Reviews (ARR) for their counties to ensure clients receive due process. As a part of the consultation and ARR process, the specialist makes note if a plan of safe care was necessary, completed, and is currently being monitored. If one is needed but not completed, they immediately notify the county director and the CPS program manager to discuss a plan for correction.

1. Intake, assessment, screening, and investigation of reports of child abuse or neglect and procedures for appealing and responding to appeals of substantiated reports of child abuse or neglect.

The primary plan for CAPTA funds continues to be maintain the CAPTA due process requirement through the Administrative Record Review (ARR) process. The ARR process allows for any person, not entitled to an Administrative Hearing, who has an Indicated disposition to request a record review. This program improves the child protective services system by establishing procedures for appeal and responding to appeals of substantiated/indicated reports of abuse and neglect. CAPTA funding has been the cornerstone of many of the projects that continue to grow as well as protect children. This includes the Central Registry/Adam Walsh Act. Importantly, due process for those individuals with indicated/substantiated child abuse/neglect reports is one of the largest services provided. The record review process allows the Agency to identify and review Plans of Safe Care and determine if appropriate referrals/services are implemented. In addition, Plans of Safe Care are monitored through the Safety Assessments completed each year.

The Administrative Record Review program is a partnership between the county departments and the state office. State office and ARR reviewers and the county director or designee review the case record, and any information submitted by the person allegedly responsible for abuse/neglect (PARAN) to determine if the record supports a finding of abuse or neglect. The PARANs are given written notice of their right to an ARR. They are informed that the review process will be completed by a DHR independent panel, members of which are not directly involved in the case and have authority to overturn the decision of the worker/supervisor if the record does not support the finding of abuse or neglect. A total of 1208 ARR's were completed, 1083 were upheld and 187 were overturned.

The State Central Registry on Child Abuse and Neglect continues to be widely used by potential employers who work with children, mostly young children in a daycare setting, to screen applicants for employment and for the screening of foster and adoptive parents. The ARR process is critical to ensure the safety of childcare providers throughout Alabama. CPS staff continues to assist in providing accurate information to other states who are requesting Adam Walsh Clearances so pending placements can be completed timely. From October 2023 – September 2024, the Office of CPS conducted 48,126 Child Abuse and Neglect Clearances.

2. Enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response.

The Department continues to recognize that supervision is crucial to good social work practice. We continue to work on increasing the capacity of supervisors to assist their staff in making sound decisions around safety planning, case planning, and using the comprehensive assessment to improve case practice and case outcomes. The Department has created a Safety Assessment Desktop tool as well as conducted specialized training on Intake, CA/Ns, and Safety Assessments including Plans of Safe Care to counties by request. The Department continues to utilize a prevention track as a differential response, in that reports taken as preventions are assessed as not rising to a level of a child abuse/neglect report, and yet a safety assessment by department staff (using defined initial contact time frames) is still conducted. If an assessment finds that child abuse or neglect is occurring in the home, then the assessment is reclassified as a Child Abuse and Neglect report, and those policies and procedures then apply.

3. The services to be provided to individuals, families, or communities, either directly or through referrals aimed at preventing the occurrence of child abuse and neglect.

The Department continues to support Alabama's Parenting Assistance Line (PAL). The PAL is a collaborative service of the University of Alabama Child Development Resources and the Alabama Children's Trust Fund. When citizens call the toll-free number, 1-866-962-3030, a Parenting Resource Specialist provides helpful information and support. Callers can also request free literature. The PAL website can be accessed at <http://pal.ua.edu/>. Community Based Child Abuse Prevention The Alabama Department of Child Abuse and Neglect Prevention (ADCANP) uses Community-Based Child Abuse Prevention funds to support various parent education and support programs, also referred to as CBCAP. This includes two programs that service the underserved population of incarcerated mothers through prenatal and parent education classes, doula support, and opportunities for the mothers to stay connected with their children. CBCAP funds also support Children's Aid Society in providing the EPIC parenting classes to pregnant and parenting runaway and homeless youth through the Project Independence program, as well as providing the class in Spanish to parents in the Hispanic and Latino communities. Finally, CBCAP funds support the Alabama Parenting Assistance Line that provides information and support via phone call, texting, or chatting online to anyone in Alabama wanting to become a more confident parent.

CBCAP funds also support parents by funding a Healthy Families America home visiting site in Tuscaloosa, Alabama. This home visiting model, offered through Prevent Child Abuse America, is implemented across the United States and internationally through its comprehensive accreditation and training program that yields significant research showing positive outcomes for families. Until recently, Alabama had only one Healthy Families America site, but the use of CBCAP funds enabled a second site. Additionally, CBCAP funds support the ongoing efforts of the Alabama Parental Advisory Council, a 9-member council of diverse parents across the state who further parent involvement in the planning and implementation of the agency's prevention programs and activities.

CBCAP dollars help serve Alabama's children with disabilities through seven HEARTS respite programs. The HEARTS respite program is offered across the state through United Cerebral Palsy affiliates and offers vouchers for respite services to parents of children with disabilities up to age 19, which allows the parent a short break from caring for a person with a disability or chronic illness so that can take care of themselves, their other children or spouse, or to tend to their own medical/personal needs. The purpose of the program is to reduce the stress of full-time caregiving associated with raising a child with a disability or with special healthcare needs, strengthen families, and reduce social isolation.

Another critical use of the funds will be for the Alabama Network of Family Resource Centers (ANFRC) to develop new Family Resource Centers in underserved areas of the state, as well as increase the capacities of existing centers through the Family Centered Coaching training and the Standards of Quality for Family Strengthening and Support training. Finally, funds will go to Charles Henderson Child Health Center to "address ACES (Adverse Childhood Experiences) and toxic stress in youth and families" among the community they serve in Troy, Alabama. This work is led by a local pediatrician who identifies and assesses patients exhibiting signs of ACES and develops a treatment plan for them. The program provides positive parenting workshops and

therapeutic expression sessions for children that include art therapy, yoga, and creative writing therapy. These innovative efforts to foster a “resilient community” for the children and families served are not being offered in any other community in the state.

4. Referral of Infants and Toddlers (under 36 months) to Alabama’s Early Intervention System (AEIS)

Child welfare staff, under provisions in CAPTA, shall refer all infants and toddlers from birth to 36 months, with indicated abuse/neglect reports received on or after June 25, 2004, to AEIS. The Alabama Early Intervention System, a division of the Alabama Department of Rehabilitation Services, is funded under Part C of the Individuals with Disabilities Education Act (IDEA). Early Intervention evaluates infants and any toddlers to identify those with a 25% delay in the major areas of development (e.g., physical, social, adaptive, cognitive, or communication skills) or a diagnosed condition likely to lead to delay and provides early intervention supports and services to eligible children.

An AEIS-DHR CAPTA referral form is required for all children who meet eligibility requirements (i.e., must be under 36 months at time of indicated disposition). Due process requirements must be completed for the PARAN before disposing of a CAN assessment and before sending the DHR-FCS-2121 to Child Find. Referrals are sent directly to the attention of ADRS/EI, 602 South Lawrence Street, Montgomery, Alabama 36104, or faxed to (334) 293-7393. Alabama Early Intervention System staff may contact the DHR caseworker for additional information needed to process the referral. Under Code of Alabama 1975 § 26-14-8 © (9) child welfare staff can share information with AEIS. Refer to Child Protective Services Policies and Procedures, Central Registry, E. Use and Disclosure of CAN Information. Referrals to AEIS are documented in the service case record. Parental consent is not required when making referrals to AEIS, but the referral should be discussed with the parents or primary caregiver. Alabama Early Intervention System assumes responsibility for obtaining written parental consent needed before AEIS can conduct an evaluation for referred infants/toddlers not in the custody of the Department. Child welfare staff shall pursue parental consent only when the referred infant/toddler is in the custody of the Department.

Note: Part C of IDEA recognizes foster parents as surrogate parents eligible to give written consent for evaluation when an infant/toddler is in foster care. Child welfare staff are not recognized as surrogate parents under Part C and therefore cannot give written parental consent for children in foster care even if DHR holds custody. To satisfy both AEIS and Departmental consent requirements for children in foster care, both the foster parent(s) and child welfare worker must sign the consent forms. The CCWIS report to generate data on this item is still under development. In all CAN reports where there is a child victim under 36 months, who is also indicated to have been abused or neglected, the referral is required before the investigation can be disposed.

The Department continues to work closely with the Alabama Early Intervention System to ensure that children are appropriately referred for services. The two agencies believe that it is important to heighten the awareness of line supervisors about the need for appropriate referrals to the Early Intervention Programs and increase awareness of services available to benefit children who are victims of child abuse/neglect who may have a developmental delay.

Of the 412 referrals made in FY 2024, 307 found no concerns. Eight children were already in the system; five children were activated for a Child Find referral. Fifty-six children were closed by Early Intervention with no further action needed, and 31 were closed due to unsuccessful contact. There were 2 referrals sent to Early Intervention that were children over the age of three years. For the referrals that were closed or had no contact, the department fully assessed and offered/provided services.

5. Policies and procedures regarding the use of differential response, as applicable

Code of Alabama 1975 § 38-2-6 (10) mandates that DHR seek out and aid minor children in the state who are in need of its care and protection. Furthermore, Code of Alabama 1975 § 26-14-2 clarifies the legislative intent that protective services shall be made available in an effort to prevent further abuse and neglect, and to safeguard and enforce the general welfare of such children. Child Protective Services' primary role is to intervene when suspected child abuse/neglect reports are received; however, there are situations when individuals contact DHR to report what they consider abuse/neglect, but the information they provide:

- Does not rise to the level of child abuse/neglect according to statutory and departmental definitions; or
- Is insufficient to determine whether a CAN report exists

When these situations occur and the intake information reveals the children may be at risk of maltreatment, the information is considered a CPS Prevention referral, and an evaluation of the child/family situation is needed. The evaluation process is known as CPS Prevention assessment. Preventions are taken as a differential response to utilize a different approach to assess and identify the strengths and needs of the family and develop strategies for meeting their needs. Preventions are taken while there has been no reported maltreatment to provide services to families to prevent maltreatment from occurring. Many services are provided to families via the differential response, such as referrals to counseling, financial assistance, and others as needed. Risk of maltreatment is defined, for purposes of this policy, as "family conditions or circumstances that, if left unchanged, can cause child abuse/neglect." The CPS Prevention process is designed to determine whether ongoing protective services are needed to prevent child maltreatment. At any time, safety threats or abuse/neglect are discovered during the CPS Prevention process, child welfare staff must follow CAN Assessment Policies and Procedures.

Number of Families that Received a Differential Response as a Preventative Service During the Year:

The data for prevention reports received is as follows:

FY	Preventions Received	Number of Children Involved
2024	9762	13880

*Data Source: Alabama's FACTS System

*Preventions are Alabama's Differential Response

6. Guardians Ad-Litem (GAL)

Every child who is the subject of an open case in Juvenile Court is assigned a Guardian ad Litem by the Juvenile Court in the county in which the case is filed. In Alabama, a GAL must be an attorney and must be certified through the Administrative Office of Courts (AOC).

AOC staff has conducted GAL certification and recertification training sessions since grant year 2003-2004 to fulfill the requirements of 42 U.S.C.A. Section 5106a(b)(2)(B)(xiii) and Ala. Code 1975, § 12-15-304 (c) that all guardians ad-Litem must be trained as to their role. The federal law conditions the Department of Human Resources' receipt of CAPTA monies on an assurance in the form of "certification" by the Governor that the state has a state law or a program including items listed in Section 5106a(b)(2)(B) which includes that GAL in these cases be trained in their role. This training requirement is just for GAL who wish to represent children in dependency and termination of parent's rights cases and not for GAL who may be appointed in domestic relations, probate, or other type cases. It is required by policy that all GAL's are to receive notice of ISP's. All children who are involved with the Court in Alabama are appointed a GAL at the initial hearing. This is monitored via supervisory review. The Deputy Commissioner for Family Services at SDHR or her designee attend every training.

As of June 1, 2025, there were 974 attorneys on the master GAL appointment list. Judges bring GALs to the annual Judicial Summit that is held in the Fall of each year.

The Comprehensive Addiction and Recovery Act of 2016 (CARA)

On July 22, 2016, the President signed into law P.L. 114-198, The Comprehensive Addiction and Recovery Act of 2016 (CARA). This Act aims to address the problem of opioid addiction in the United States. Amendments to CAPTA's provisions relating to substance exposed newborns and Plans of Safe Care were thereby enacted. County Directors continue to communicate with local medical providers, hospital staff, and substance abuse professionals to discuss the requirement that DHR is to be contacted in all cases when a medical determination has been made that a newborn has been affected by substance abuse or withdrawal symptoms. Plans of Safe Care are included in CAN investigations and/or the ISP process. Plans of Safe Care are not separate documents. They are plans that are built into Safety Plans or Case Plans (ISPs) as a case is investigated or opened for services. Substance exposed infants are tracked in the FACTS system at the initial contact with a family. Steps to ensure substance exposed children are carried throughout the life of the investigation or case as are necessary and are documented in Safety Plans or ISPs. In Prevention Assessments, (Alabama's differential response), if children are found to have been exposed to substances, Plans of Safe Care are utilized at that time. Alabama's FACTS system captures and tracks Plans of Safe Care. Plans of Safe Care are included on the Quality Child Welfare Practice review tools and are monitored through Safety Assessment reviews, random record reviews, and peer reviews.

Alabama's FACTS system captures parental substance abuse as an entry reason into care and which substance(s) were involved. There is also a Plan of Safe Care court in two counties, Jefferson, and Jackson. This is being provided through a grant, and the AOC is heavily involved. The referral process allows for the Courts to become involved with expectant mothers who are struggling with addiction prior to the birth of the baby to provide preventative services. The Agency does not have a mechanism to track costs related specifically to CARA. There is not a code on the work sampling forms to capture Plan of Safe Care or related duties, but rather this would be captured under Case Management. The Office of Child Protective Services continues to

gather data to track the numbers of reports involving Substance Exposed Infants, coupled with the Agency’s response and delivery of needed services and supports. The QCWP Case Review Tool for Foster Care and CPS cases addresses whether there was evidence that Plans of Safe Care were formulated for children born affected by substance use. Feedback is then immediately shared with the county as needed.

The Department continues to track the data in FACTS. The Plan of Safe Care courts have not resumed currently. Clients are referred to a Safe Care program that provides wrap around services to mothers who have children that were substance exposed at birth. In addition, there are instances in which a plan of safe care does not constitute ongoing services provided by DHR. For example, a relative gets custody, children are adopted, and families are linked to community resources. There were no changes to policy or practice concerning plans of safe care. The plan of safe care is incorporated in the Individualized Service Plan. It is monitored and evaluated by child welfare staff regularly to determine its effectiveness in producing desired outcomes. The state of Alabama did not identify any issues in implementing the provisions, and there was no technical assistance needed. Alabama has not participated in a CB site visit relating to the development of plans of safe care for infants born and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder.

Number of children referred to CPS under Policies and Procedures Established to Address the Needs of Infants Born with and Affected by Illegal Substance Abuse, Withdrawal Symptoms, or a Fetal Alcohol Spectrum Disorder (number of children with each of the identified symptoms/allegations who were subjects of a child abuse/neglect report received by the Department). Data and time frames are provided below for the number of children in CAN reports received by allegation for the following allegations (Note: Referral Intake date was the method used to assign children to the yearly cohort groups):

- Chemical Endangerment (methamphetamine)
- Positive for Drugs at Birth / Drug Withdrawal
- Positive Test for Alcohol at Birth / Fetal Alcohol Syndrome

FY	TOTAL	Chemical Endangerment	Positive-Drugs at Birth	Positive-Alcohol at Birth/FAS
2024	779	289	479	11

Data Source: Alabama’s FACTS system

2024: 755 Unique children, 23 had multiple allegations

SDHR continues to work in conjunction with the Children’s Justice Task Force to implement the Substance Abuse Assessment Training. The Substance Abuse Assessment two-day training was held four times in FY 2024. All the trainings were held in Montgomery, which is centrally located. At the request of supervisors and staff, the final training was held at a new location in the northern portion of the state to improve attendance and limit travel for the northern counties. The trainings were held on December 4-5,2023, February 26-27, May 20-21, July 22-23, 2024. The training attendees are child welfare staff, supervisors, and administrative staff and focuses on the complex nature of families that are struggling with issues of substance use and how to assess child safety in

these cases. This training continues to educate our staff on the importance of understanding and monitoring substance abuse to guide in the implementation of Plans of Safe Care. Additionally, this training supports the idea of using the multidisciplinary approach when assessing and working with families struggling with substance use issues. The training increases the knowledge of substance use assessment services throughout the state and encourages communication between child welfare services and substance use assessment providers to better meet the needs of families. This training also works to address personal bias, specifically unconscious bias, when assessing families and child safety, specifically as it relates to substance use. Training evaluations continue to reflect very high scores from attendees on the content, structure, and activities provided during the training. Exceptionally high scores in increased knowledge and skills, increase in decision-making skills, increase in job competence, and usefulness in day-to-day work supported the continuation of this training project. 86 people were trained during these 4 trainings. An additional four trainings are scheduled for FY 2025.

Child Fatality and Near Fatality Public Disclosure Policy

Family Service Administrative Letter No. 7452, dated March 19, 2015, addresses the reporting and public release of records in cases of child fatality or near fatality. It was released to County Directors of Human Resources on March 30, 2015, for immediate implementation. The DHR Guidelines for reporting child deaths and near fatalities included guidance on the composition of county Human Resources Child Death Review Committees and procedures for child death reviews. It includes:

- Cause, date (of death/near fatality), and circumstances regarding the child's fatality or near fatality
- Age, gender, and race of the child
- Child welfare involvement with the child/family during the 12 months prior to the date of the child's death or near-fatality incident. Identification of other pending referrals/open cases on the child/family at the time of death or near fatality
- A description of any other child welfare involvement with the child/family during the 12 months prior to the date of the child's death or near fatality incident
- The review process will consist of an objective discussion by the Review Committee of DHR's involvement with the family and an analysis of the Department's performance as it relates to policy, procedures, services, and best practices, etc.

Upon request for disclosure, information regarding child fatalities or near fatalities will in turn be provided by the Office of Data Analysis.

CAPTA Annual State Data Report Items. Information on Child Protective Service Workforce:

Alabama's Child Protective Service professionals and requirements for employment are as follows:

- **Social Service Caseworker I:**
Bachelor's degree from an accredited college or university in any major
- **Social Service Caseworker II:**
Current permanent status as a Social Service Caseworker I, a bachelor's degree from an accredited college or university in any major, and two years' experience as a Social Service Caseworker I

- **Social Worker I:**
Bachelor's degree in social work from a social work program accredited by the Council on Social Work Education and eligibility for licensure as issued by the Alabama Board of Social Work Examiners
- **Social Worker II:**
Current permanent status as a Social Worker I, two years' experience as a Social Worker I, and an active LBSW as issued by the Alabama Board of Social Work Examiners
- **Senior Social Worker I:** Master's degree from a social work program accredited by the Council on Social Work Education and eligibility for licensure as issued by the Alabama Board of Social Work Examiners
- **Senior Social Worker II:**
Current permanent status as a Senior Social Worker I, two years' experience as a Senior Social Worker I, and an active LMSW licensure
- **Service Supervisor I:**
Bachelor's degree from an accredited four-year college or university in any major AND three (3) years of professional social work experience in child protective services, adult protective services, child/adult foster care, and/or adoption operations.
OR
Bachelor's degree from an accredited* four-year college or university AND 30 semester or 45 quarter hours in social or behavioral science courses AND two (2) years of professional social work experience in child protective services, adult protective services, child/adult foster care, and/or adoption operations.
- **Service Supervisor II:**
Current, permanent status as a Service Supervisor I, a bachelor's degree from an accredited college or university in a social science or any major with at least 30 semester or 45 quarter hours in social or behavioral science, and two years' experience as a Service Supervisor I
- **Senior Social Work Supervisor I:**
Master's degree in social work from a social work program accredited by the Council on Social Work Education, current permanent status with DHR as a Social Service Caseworker I or II, Social Worker I or II, Senior Social Worker I or II, Service Supervisor I or II, or Human Resources Program Specialist, and two years of professional social worker experience in child welfare and/or adult services in a public welfare agency
- **Senior Social Work Supervisor II:**
Master's degree in social work from a social work program accredited by the Council on Social Work Education, current permanent status with DHR as a Senior Social Work Supervisor I, two years of professional social worker experience in child welfare and/or adult services in a public welfare agency, and an active LMSW licensure as issued by the Alabama Board of Social Work Examiners.

All workers are required to complete initial training Striving Toward Excellent Practice (STEP) Foundations, which consists of approximately 40 hours of training. STEP: Foundations is based on five foundation concepts: the belief that people can change; respecting the family's culture; joining with families; building partnerships with birth families; and foster/adoptive families in parenting; and working with families in an ecological (systems) framework. After the initial STEP Foundations courses, workers may attend specific modules of STEP which include Intake, Case Management, Investigation, and Adoption. The STEP trainings also include an On-the-Job Training component designed to strengthen the learning process for new workers.

After working with the Department for the times specified above in the classification descriptions, workers are eligible for promotion to the Supervisory level of employment.

Demographic Information for CPS Workforce

- Service Supervisor I (50223, 94 employees)
- Service Supervisor II (50259, 107employees)
- Senior Social Work Supervisor I (50224, 25employees)
- Senior Social Work Supervisor II (50275, 29 employees)
- Social Worker I (50248, 86 employees)
- Social Worker II (50257, 72 employees)
- Social Service Caseworker I (50246, 536 employees)
- Social Service Caseworker II (50250, 280 employees)
- Senior Social Worker I (50221, 64 employees)
- Senior Social Worker II (50258, 26 employees)
- Total: 1,319employees

RACE	SEX	COUNT
AMERICAN INDIAN	F	3
	M	0
ASIAN	F	1
	M	0
BLACK	F	605
	M	74
HISPANIC	F	14
	M	0
HAWAIIAN	F	0
	M	0
NO RESPONSE	F	18
	M	3
TWO OR MORE	F	14
	M	1
WHITE	F	547
	M	39
TOTAL	F	1,202
	M	117
GRAND TOTAL		1,319

***State Of Alabama Personnel as of 04/15/2025**

Information On Caseload/Workload Requirements

Child Abuse and Neglect Investigations: 12 new reports per worker per month

Ongoing child protective service cases (families): 18 per worker

Alabama's CPS workforce is often cross trained in other areas of child welfare, including foster care and adoption, as many counties in the state do not have "specialized" staff. Many county child welfare workers conduct child abuse and neglect investigations, work ongoing child protective service cases with families, work foster care cases, and conduct adoptions.

Alabama's system is not currently set up to track the specific degree held by each worker. Typically, these classifications: Senior Social Worker Supervisor I and II, Senior Social Worker I and II, hold master's degrees or higher, and these classifications, Service Supervisor I and II, Social Worker I and II, and Social Service Caseworker I and II, hold bachelor's degrees. In the future, Alabama will seek to use LETS (Learning, Education, and Training System) to track the specific degrees held by each worker, as well as courses taken.

CAPTA Annual State Data Report Items. Juvenile Justice Transfers:

DYS youth are referred to as children that exited foster care with an exit reason of commitment to the Department of Youth Services (DYS). The following information was obtained from Alabama's statewide information system (FACTS) and is based on the child's documented exit from care reason. During FY 2024, 12 youth in DHR custody were committed to DHS.

Updates to Targeted Plans within the 2025-2029 CFSP

Foster and Adoptive Parent Diligent Recruitment Plan (section 422(b)(7) of the Act)

See Appendix E for Foster and Adoptive Parent Diligent Recruitment Plan update

Health Care Oversight and Coordination Plan

Alabama's Health Care Oversight and Coordination Plan documents the requirement meeting the needs of children in foster care. The Alabama Psychotropic Medication Review Team (APMRT) 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. There are no changes or additions needed to the plan. In FY 2024, APMRT members worked 58 cases which included 32 behavior cases and 26 medication review cases for children in foster care. *See Appendix F for a copy of Alabama's Health Care Oversight and Coordination Plan*

Disaster Plan

Alabama had one major disaster, Hurricane Helene, in FY 2024. A Presidential declaration of an emergency for the state was issued on September 26, 2024. The governor filed a state of emergency on January 14, 2024, due to winter weather for 25 out of the 67 Alabama counties. No department staff were activated during these times.

In the event Alabama is affected by a natural disaster, plans are in place to identify, locate, and continue the availability of services for children under state care or supervision. Further, plans are in place to ensure a response to new child welfare cases, to remain in communication with caseworkers and other essential child welfare personnel, to preserve essential records, coordinate services, and share information with other states.

Staff of the Department of Human Resources are required to assist during times of disaster in the state. Each staff member completes disaster training annually. The Department has procedures in place to ensure that all citizens of the state who need child welfare services during a disaster receive those services timely, no matter their racial, ethnic, or socioeconomic background.

A copy of Alabama's disaster plan was submitted with the 2025-2029 CFSP. There were no changes or updates required to ensure uninterrupted essential agency operations during a public health emergency. *See Appendix C for a copy of Alabama's Disaster Plan.*

Training Plan

There are no updates to Alabama's Training Plan.

See Appendix G for a copy of Alabama's Training Plan

Financial Information

Payment Limitation: Title IV-B, Subpart 1:

The Alabama Department of Human Resources utilized FY 2005 Child Welfare Services (CWS) funds to assist the state in providing Protective Services and Foster Care Maintenance.

Alabama's Federal allotment for IV-B, subpart 1, payments in FY 2005 was \$1,172,618. State funds used to match Federal allotment for payments in FY 2005 was \$390,873. Total payments made for assistance in FY 2005 was \$ 13, 170, 324.59.

Payment Limitation: Title IV-B, Subpart 2:

For FY 2026, the state affirms that the following percentage breakdown will be spent:

- Family Preservation Services: 30%
- Family Support Services: 25%
- Family Reunification Services: 20%
- Adoption Promotion and Support Services: 25%

Payment Limitation: Title IV-B, Subpart 2:

The total Title IV-B, Subpart 2 funds in FY 2023 was \$5,959,331, compared to the 1992 base year's figure of \$2,792,630. Alabama does not expect any challenges in expending Title IV-B Subpart 2 funds in a timely manner in FY2025.

Posting of/Contact Person for the APSR

Upon approval by the Children's Bureau, Alabama's 2026 APSR will be posted on the DHR website, where it can be accessed as shown below.

<https://dhr.alabama.gov/child-protective-services/consolidated-child-family-services-plan/>

Contact Person

Davidra Bowman, BS

Office of Child Welfare Policy

State of Alabama Department of Human Resources-Family Services Division

50 North Ripley Street, Montgomery, AL 36130

334-353-3008

davidra.bowman@dhr.alabama.gov

Appendices

Appendix A	Strategic Plan
Appendix B	Citizen Review Panels Recommendations and Responses
Appendix C	Disaster Plan
Appendix D	Foster and Adoptive Parent Diligent Recruitment Plan
Appendix E	Foster and Adoptive Parent Diligent Recruitment Plan 2026 APSR Update
Appendix F	Health Care Oversight and Coordination Plan
Appendix G	Training Plan
Appendix H	Annual Reporting of Education and Training Vouchers Awarded
Appendix I	CFS Parts I, II, III, Excel
Appendix J	CFS Parts I, II, III, PDF

Frequent Used Acronyms

ABI- Alabama Bureau of Investigation
ACADV- Alabama Coalition Against Domestic Violence
ADCANP- Alabama Department of Child Abuse and Neglect Prevention
ADHR- Alabama Department of Human Resources
AEIS- Alabama's Early Intervention System
ANFRC- Alabama Network of Family Resource Centers
ANI- Area Needs Improvement
AOC- (Alabama) Administrative Office of Courts
APAC- Alabama Post Adoption Connections
APMRT- Alabama Psychotropic Medication Review Team
APPLA- Another Planned Permanent Living Arrangement (see section on Permanency Goals)
APSR- Annual Progress and Services Report
ASFA- Adoption and Safe Families Act
CAC- Child Advocacy Center
CAPTA- Child Abuse Protection and Treatment Act
CA/N- Child Abuse/Neglect Report
CARA- Comprehensive Addiction and Recovery Act
CBCAP- Community-Based Child Abuse Prevention
CCWIS- Comprehensive Child Welfare Information System
CFSP- Child and Family Services Plan
CFSR- (Federal) Child and Family Services Review
CIP- (Alabama) Court Improvement Program
CPS- Child Protective Services
CQI- Continuous Quality Improvement
CRP- Citizen Review Panel
DHR- Department of Human Resources (Alabama's public child welfare agency)
DT- Deciding Together
DTFA- Dave Thomas Foundation for Adoption
DYS- (Alabama) Department of Youth Services
ERD- Electronic Report Distribution
ETV- Education and Training Voucher Program
FA- Family Assistance
FACTS- Family, Adult, and Child Tracking System (Alabama's SACWIS)
FC- Foster Care
FCS- Family and Children's Services
Flex Funds - Funds that are allocated to County OHR Offices for implementation of county-based services
GAL- Guardian Ad Litem (court-appointed attorney for children in foster care)
ICPC- Interstate Compact on the Placement of Children
IDEA - Individuals with Disabilities Education Act
IH- In Home
ILP - Independent Living Program
ISP- Individualized Service Plan (Alabama OHR Case Planning Process)
LEA- Law Enforcement Agency
LETS- Alabama's Learning, Education, & Training System
MD Team- Multi-Disciplinary Team - Team of professionals called on to staff cases (often involves law enforcement, the D.A.'s office, the CAC and OHR staff)
MIDAT- Multi-Item Data Analysis Tool
OCWT- Office of Child Welfare Training

Frequent Used Acronyms

OMS- Online Monitoring System
OSA- Other State Agency
OSRI- On Site Review Instrument
PA -Public Assistance
PIP -Program Improvement Plan
PSSF -Promoting Safe and Stable Families, Title IV-B, subpart 2 QA Quality Assurance
QA- Quality Assurance
QRI- Quality Review Instrument
SDHR State Department of Human Resources
SEA- State Education Agency
SEAC -Special Education Action Committee, Inc.
SEAP- State Department of Education Advisory Panel
STEP -Striving Toward Excellent Practice -Initial training for new child welfare workers
TANF-Temporary Aid to Needy Families
TIPS -Trauma Informed Partnering for Safety and Permanency -preparation curriculum for prospective foster/adoptive parents
TPR- Termination of Parental Rights