DSS SOUTH CAROLINA
DEPARTMENT *of* SOCIAL SERVICES

2015-2019 Final Report

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I. GENERAL INFORMATION

I.A. COLLABORATION

Over the last five years, Child Welfare Services (CWS) has worked with the larger child welfare community to implement the goals and objectives of the 2015-2019 the Child and Family Service Plan (CFSP).

During the CFSP period, CWS used stakeholder feedback to gain insight into strategy effectiveness. At the State, regional, and County level, staff met regularly through monthly, bi-monthly, and as needed meetings with its stakeholders including the South Carolina Foster Parent Association, South Carolina Children's Trust, Citizens Review Panel (CRP), Children's Justice Act Task Force, Group homes, Licensed Private Child Placing Agencies, Foster Care Review Board (FCRB) members, Foster Parents, Guardian ad Litems (GAL), Richland County Court Appointed Special Advocates (CASA), Quality Assurance staff at Center for Child and Family Studies at University of South Carolina, and contracted providers, and others to discuss the progress and/or barriers to the goals, objectives, interventions identified under the 2015-2019 CFSP.

Many of these participants then participated in the CFSP/APSR Joint Team Planning Meetings and SCDSS Stakeholder Meetings that CWS holds annually. Engaging partners in the problem exploration and strategic planning processes has allowed the Division to strengthen conversations about improving practice and the development of practice improvement agenda, including Michelle H. consent decree, GPS Practice Model, South Carolina's CFSR Program Improvement Plan and Child and Family Service Plan (CFSP).

CWS conducts numerous informational meetings throughout the year to share information with and solicit input from Stakeholders such as the CFSR Report Out in April 2018 with the Children's Bureau, CFSR PIP Workgroups, Palmetto Association for Children and Families Conference, South Carolina Foster Parent Association Conference, National Association of Social Work Spring Symposium. Additionally, the same organizations were invited to attend Joint Planning Sessions.

CWS is working with internal and external stakeholders in the development of the 2020-2024 CFSP to ensure that stakeholders' voices are heard. Information is collected from stakeholders through various methods. Contract service providers attend Quarterly State Team Planning Meetings where they have an opportunity to voice their opinions or concerns on the bold new vision for implementing the Family First Prevention Services Act to support maltreatment prevention, federal finance reform and the future of the CFSR process. CWS also uses feedback from members of the Department of Mental Health, DAODAS, Continuum of Care, DHHS, LRADAC, SC Children's Advocacy Center, Children's Trust of SC, Palmetto Association for Children and Families, SC Foster Parent Association, Project Best, The Nurturing Center, and SCCADVASA when reporting on strategic activities for making substantial changes to existing programs.

CWS uses the Family Group Conference Evaluation Survey results in the CQI process to provide valuable information that Family Engagement Services may use in ensuring continuous quality improvement. The Family Group Conferencing model places the family at the center of the creation of a Family Plan to address the safety, permanency, and well-being of the child(ren) in question. CWS realizes that more emphasis needs to be placed on soliciting input from

families. Ensuring that the voice of the family is heard will be heavily embedded in the development of the new CFSP.

Considering the local administration of child welfare services, the leading collaborators with the state are the local DSS offices. Local Child Welfare Improvement Teams are chartered to involve local staff and community stakeholders in problem-solving processes designed to improve child welfare service provision in the Counties. Local improvement teams tackle significant issues like foster family support, recruitment, and retention as a part of South Carolina's permanency and wellbeing practice. At meetings, data was shared, and discussions included strengths, areas needing improvement, and areas to focus on for safety, permanency, and wellbeing practice. Ongoing opportunities were provided to internal and external partners, including reviewing of data and identifying the goals and objectives of this 2015-2019 Child and Family Services Plan (CFSP), as well as identifying current strengths or concerns.

Quarterly meetings are held in counties throughout the state with CWS County Directors and Regional Directors, adoption and county foster care caseworkers, and various stakeholders from FCRB, GAL, private Therapeutic Foster Home (TFC) providers, Family Group Conferencing (FGC), Family Team Meeting (FTM) providers, Community-Based Prevention Services providers, Child Assessment Center (CAC), Department of Mental Health (DMH), Department of Juvenile Justice (DJJ), Foster Parent Association (FPA), Department of Alcohol and Drug Abuse (DAODAS), and the CWS Foster Home Licensing staff. The focal point of meetings is to assess permanency plan status of children in care, adoption recruitment activities, placement stability and available foster homes, sibling placements and proximity of placements in county or out of county, informed case planning and discussion of implementation of key strategies from the 5-year plan such as Signs of Safety, Regional Intake Hubs, CBPS, etc. CWS and stakeholders discuss local gaps in service and needed support locally to close the gaps in services to shared children in their counties.

Statewide Advisory Board

In 2015, The SC Department of Social Services established a statewide Advisory Board to improve communication with a broad cross-section of community stakeholders as well as to engage stakeholders in the agency's reform process. The SCDSS Advisory Board meets quarterly to receive presentations and updates lead by the SCDSS state director and executive team. SCDSS middle level and frontline staff, foster parents, kinship caregivers and service recipients have been featured guests at board meetings. Child Welfare focused topics have included: the roles, recruitment and retention of caseworkers; foster home licensing and recruitment; kinship care; child protective services practice. At each Advisory Board meeting, the Department solicits candid feedback from attendees on the status of progress toward strategic objectives, opportunities for partnership and more. For example, at the fall 2016 Advisory Board meeting, the Department invited foster parents to be a part of a panel discussion with board members to provide an assessment of their experiences with the foster care licensing process as well as their experiences with children placed in their care.

Statewide Stakeholders Meeting

This important gathering of the child welfare community has remained a constant over the last five years. Meetings early in the CFSP period (2015-2017) involved larger general gatherings of the Child Welfare community, including CWS staff and representatives of the ACF Children's Bureau, University of South Carolina, Center for Child & Family Studies (University partner),

Allen University, Catawba Indian Nation, Children's Trust of SC, the Guardian ad Litem (GAL) Program, Carolina Youth Development Center, CASA program, Columbia Urban League, Dee Norton Lowcountry Children's Center, Foster Care Advisory Committee, Foster Care Review Board, Lutheran Services of the Carolinas, Medical University of SC, Nurturing Center, Palmetto Association for Children & Families, Palmetto Health Richland, Parents Anonymous of SC, Safe Generations, SC Center for Fathers and Families, SC Children's Advocacy Center, SC Citizen Review Panels, SC Foster Parent Association, SC Heart Gallery, the SC Department of Alcohol and Other Drug Abuse Services, the SC Department of Education, the SC Department of Health and Human Services, the SC Department of Juvenile Justice, the SC Department of Mental Health, SC Heart Gallery, SC Law Enforcement Division, SC Youth Advocate Program, the University of South Carolina, Children's Law Center (CLC), and Windwood Family Services.

By 2018, with CFSR PIP & Michelle H. Implementation plan development, annual meeting had more focused representation including more supervisors, representatives from associations representing individual contractors, kinship care advocates, traditional child welfare partners and services providers, and members of the legal community. Most recently, a statewide stakeholder meeting was held on February 15, 2019, April 10, 2019, and May 3, 2019, to update internal and external stakeholders on changes and emphases in the 2015-2019 CFSP Plan for Improvement and to obtain stakeholder feedback. In addition, stakeholders were updated on the Michelle H. Lawsuit Settlement Agreement, the South Carolina IV-E Plan Amendment Program Improvement Plan (implementation of Public Law 113-183, The Preventing Sex Trafficking and Strengthening Families Act), The Child Abuse Prevention and Treatment Act (CAPTA) Program Improvement Plan (Public Law 111-320 as amended by Public Law 114-198 The Comprehensive Addiction and Recovery Act of 2016), the CAPTA Implementation Plan for The Justice for Victims of Trafficking Act of 2015 (Public Law 114-22), the Child and Family Services Review (CFSR) Round 3, the Leadership Academy for Middle Managers, and the Continuous Quality Improvement (CQI) Practice Model Framework. The purpose of these presentations was to demonstrate how the Agency's various initiatives are interconnected and function together to improve the Child Welfare System in South Carolina. During this meeting, stakeholders were asked to participate in three (3) tabletop exercises. In each exercise stakeholders were asked to provide feedback on a different initiative: (1) Regional Intake Hubs, (2) Engagement of Non-Custodial Parents, and (3) Kinship Care.

The Department continues to strengthen staff capacity to engage in a collaborative way with families and community partners to design and deliver services.

Child Welfare Improvement Teams (CWIT)

IN 2015, CWS launched County feedback loops called the Child Welfare Improvement Team (CWIT) meetings. In CWIT meetings that occur in all 46 Counties, leadership engage the child welfare community in updates about identified strengths and challenges in local child welfare services. Invitees include members from Foster Care Review Board (FCRB), Guardian ad Litem (GAL), the South Carolina Foster Parent Association, the South Carolina Citizen Review Panel, and other County providers. These meetings replaced the previously titled "State Partners Meetings". Team members are responsible for: attending and participating in CWIT meetings; sharing their ideas and proposed solutions to problems; being responsible for action steps and assuring that they are completed; sharing the successes and lessons learned by the team with others. CWIT team meet quarterly to review data; CWIT teams uses the data reports (i.e.,

surveys, CAPPS data, Case Reviews, Federal Indicator Reports) to determine areas of need and then set goals and action steps to improve performance at the County level.

In addition to collaborations with local DSS offices, there are many existing stakeholder groups that meet regularly and provide feedback on our safety, permanency, and wellbeing goals. One of the main stakeholder groups is the Children's Justice Act Task Force (CJA). Regular meetings are also held with the South Carolina Citizens' Review Panel, South Carolina Bench Bar Committee, and the Foster Care Advisory Committee, in addition to others.

Children's Justice Act Task Force (CJA)

The Children's Justice Act (CJA) provides grants to states to improve the investigation, prosecution, and judicial handling of cases of child abuse and neglect in a manner that limits additional trauma to the child victim. As a part of this funding, states must establish and maintain a multidisciplinary task force on children's justice. The task force is comprised of representatives from selected disciplines involved in handling child abuse and neglect cases and is charged with developing, and working towards implementation of, policy and training recommendations regarding methods to better handle these cases.

Early in the CFSP period, DSS worked with The Children's Law Center on a CJA project to rewrite sections of the Human Services Policy Manual. Some policy topics with revisions that were of interest to CJA included addressing the risk of sex trafficking among children in foster care, ADA compliance, incorporating trauma informed screenings and practice, kinship care, and child fatality procedures.

Another project that supported CFSP safety goals was work on our use of alternative placement/caregivers as safety services placement. The CJA work group investigated practices to ensure that children in alternative placements remain safe and stable while maintaining and/or increasing their well-being by improving accountability and tracking of those placements. The workgroup worked to assess, investigate and make recommendations regarding the policies and procedures of alternative placements, including timelines and accountability for children's placement with kinship/alternative caregivers, length of stay and moves.

As a part of its recent work, the South Carolina Children's Justice Act Task Force has been analyzing the timely issue of DSS "safety planning" practices and the needs of kinship care placements (also known as alternative caregivers). Through the statutes, policies, and practices that inform this area of DSS's work, the agency often places children in the care of their kin or fictive kin when the biological parent's home has been determined to be unsafe. This practice is an important tool in keeping children safe while preserving families and preventing unnecessary foster care placement but reports from advocates and families suggest that several systemic issues prevent these placements from receiving the monitoring and support necessary to ensure that children in the home are safe and healthy.

Throughout the past year, CWS has been involved with other collaborative efforts that will improve outcomes and services to children and family. At statewide and regional levels, the following internal and external stakeholder groups have an essential role in the implementation of South Carolina's CFSP goals and objectives.

South Carolina Citizens' Review Panel

South Carolina's Citizens' Review Panel (CRP) evaluates CWS compliance with federal and state laws and examines policies and procedures for consistent statewide implementation. Additionally, the CRP conducts public outreach and gathers public comment on current CWS procedures and practices involving child and family services. The CRP prepares a public report annually containing a summary of its activities and recommendations for the improvement of child protection services in the state. CWS works closely with the CRP and the Director and Deputy State Director engage in regular communication with the CRP, including providing a response to the items addressed in their annual report.

The panels each selected areas of child well-being based on work that was underway from the previous year(s) or as a result of feedback from members of the community who were affiliated with or affected by child protective services. Throughout the CFSP period, members of The Lowcountry Panel continued efforts to learn more about domestic violence policies related to CPS cases and held a child abuse prevention training to engage the community. The Midlands focused primarily on public outreach as a vehicle to educate the community and receive feedback on CPS, Family engagement and foster parent licensing and retention, and kinship care. Their efforts included the launch of monthly kinship care circles. Finally, the Upstate Panel centered its work around recruiting members; case management loads; and foster home recruitment, licensing, and retention.

Court Improvement Project in South Carolina

The Court Improvement Project (CIP) in SC provides for a court liaison in every county to pre-review the court file for all DSS child abuse and neglect cases and TPR complaint. The court liaison observes court and maintains a data base of hearing outcomes and continuances. Listed below are key components of this project with descriptions.

Pre- Review: The purpose of the pre-review is to identify any item that might be missing in the court's file prior to the hearing, that, if corrected might prevent a continuance of the upcoming hearing. The court liaison notifies the DSS attorney by email of any findings of potential issues or missing items. Areas reviewed include whether the defendants been served the complaint/ petition; whether subsequent notices for hearings completed; transport orders for any incarcerated defendant are included in the file; documentation of a GAL appointment; has counsel been appointed as ordered for defendants; notices of hearings to foster parents; have youth (16 years or older) been noticed/ invited to attend, and whether orders from previous hearings are missing or if there is a judicial conflicts, etc.

Review Sheet: A Review Sheet is prepared for the judge and placed into the court file after the review is completed.

Court Observation: The court liaison observes all hearings and documents attendance by all parties (parents, attorneys, GAL and workers); findings as related to the defendants; discussion about treatment/placement plan; judicial inquiries regarding ICWA, children's safety and well-being; placement options, etc.
-If the hearing must be continued, the liaison documents the reasons for continuances as stated on the record. Additionally, the liaison documents whether a date is set rescheduling the hearing, and if so, whether notices are provided to defendants prior to leaving the court room.
-Court room observation also allows for Identification of training needs. These needs are shared with the training units for legal training for all parties including DSS case managers, legal staff and GAL volunteers.

Court Liaison Monthly Reports: Reports of number of hearings, continuances and untimely hearings are provided to each county legal team, county director, state office director, and OGC, GAL program, Office of Indigent Defense; Court Administration (who shares with all family court judges), Foster Care Review Board and Bench Bar Committee. A report that lists the numbers and reasons for continuance is also included monthly. A key goal is to look for systematic issues that may cause delays in permanency in specific counties/ circuits and assess options to remedy those issues.

In addition to providing the monthly reports, the court liaison meets with the DSS county directors, attorneys and regional team leaders to discuss individual county issues.

Bench Bar Committee: The Court Liaison Program Manager attends the Bench Bar Committee on a quarterly basis to address issues identified by the liaison program and engages the committee in efforts to eliminate barriers to timeliness.

Engaged Participation In Court (EPIC): In 2017 DSS and CIP elected to expand the scope of work to evaluate the quality of participation of all parties during the court hearings. Our title for this emphasis is Engaged Participation in Court (EPIC). Three pilot circuits were selected and meetings with the judges from those circuits were held. Surveys were sent to the judges, attorneys for DSS, GAL and defense attorneys in those circuits to evaluate items the committee identified as ones which could enhance the quality of the hearings. Questions were posed to ascertain whether certain "EPIC" events occurred during the court hearing.

Since the submission of the 2018 APSR, the South Carolina Court Liaison Project worked with the South Carolina Department of Social Services (SCDSS), Office of General Counsel (OGC) to implement improvements in their system to track the depth of the reasonable efforts presented to the court at the following hearings: Probable Cause, Merits, and Permanency Planning. The Court Liaison Project has worked with their Information Technology Division to develop reports to provide the number of Foster Parents noticed for a hearing, hearing attendance, and if Foster Parents were provided the opportunity to address the court. Finally, the Court Liaison Project is adding more details to their APPLA report to assist in ensuring that only children who are sixteen (16) years or older have a plan of APPLA.

South Carolina Department of Social Services (SCDSS) Constituent Services/Ombudsman Unit

The SCDSS Office of Constituent Services supports the Agency's mission of promoting the safety, permanency, and well-being of children and vulnerable adults, helping individuals achieve stability and strengthening families. The office's primary function is devoted to assisting members of the public who have questions or concerns about the array of programs and services administered by the SCDSS. Representatives work diligently to promote transparency and accountability by examining constituent concerns to ensure that the Agency's Child Welfare practices align with its policies and procedures, State and Federal laws, and guiding principles referred to in South Carolina as imperatives.

The greatest commitment of office representatives' time and resources is dedicated in response to inquiries related to Child Welfare Services. Representatives receive constituent concerns via phone and email, research case history in the Child and Adult Protective Services System (SACWIS/CAPSS) and facilitate communication between the concerned party and the respective Regional or County Office of the agency while maintaining confidentiality as required by statute. Based on current anecdotal trends, most child welfare constituent concerns are received from:
  o Parents with open cases;

- o Grandparents of children involved in open cases (caregivers and non-caregivers);
- o Foster and Pre-Adoptive parents;
- o Relatives and non-relatives of children in Foster Care;
- o Legislators/Office of the Governor inquiring on behalf of constituents with open cases;
- o Concerned officials from schools, public/private partner agencies, and medical institutions.

Constituent Services continues to refine measures to create a stronger infrastructure for processing and logging constituent inquiries and complaints. Presently, the office uses a logging system that affords limited tracking and data collection functions. Constituent Services has worked with the agency's internal Information Technology Unit (CAPSS) to rebuild the system with enhanced capacity to perform these functions. Constituent Services has an increased ability to collect and share verifiable data with the SCDSS Child Welfare Division that can be useful to identify practice and performance trends, as well as inform decisions about staff training, program and process redesign, and overall improvement of services to children and families.

Youth in Foster Care and Other Consumers

The SCDSS Chaffee Foster Care Independent Living Program (CFCILP) staff worked with the Federal NYTD Survey, the State Youth Advisory Board (GOALL), and the Independent Living Youth Association to garner feedback from youth in transition. Each year, GOALL youth visit all the Independent Living Youth Association's youth groups to gather feedback from youth in Foster Care and invites upper administration to attend a meeting in which they present concerns of youth in Foster Care throughout the state.

In FFY 2019, CFCIP staff will continue to meet with Independent Living Youth Associations and the State Youth Advisory Board (GOALL) to seek input on policy and programming and to extend invitations to participate in IL Advisory Committee meetings. The CFCIP staff will also invite youth to Agency meetings and events in order to provide feedback and give youth the opportunity to engage with Agency staff and partners

Foster Care Advisory Committee

The Foster Care Advisory Committee (FCAC), advises the Department in the development and implementation of the Health Care Oversight and Coordination Plan of the 2015-2019 CFSP/APSR. The medication consent process continues to be standard practice between the Agency and Psychiatric Residential Treatment Facilities (PRTF), for medication oversight for youth in Foster Care who currently reside in a PRTF. Also, the medication administration records for youth who reside in a PRTF continue to be collected and accessed by the Department's consulting Psychiatrist. The Agency is continuing work with the Department of Mental Health in the hopes of being able to obtain medication records for youth in Foster Care in the future. One of the goals of this Workgroup is the development of a Healthcare Improvement Plan. The Healthcare Improvement Plan will address timely initial screening services, periodic screening services, documentation, and health care treatment services for foster care clients in the areas of physical health, immunizations and laboratory tests, mental health, developmental and behavioral health, vision, hearing, and dental health. This workgroup has also recommended that healthcare information be added to the Guided Supervision process. The FCAC has decided that the Access to Care Workgroup would no longer be an agenda item at their meetings because access to care is an ongoing issue and efforts to recruit providers to accept Medicaid continue in identified areas. Currently, the Department plans to continue its collaboration with the Foster Care Advisory Committee.

Joint Council on Children and Adolescents

The Joint Council on Children and Adolescents is a statewide, inter-agency council addressing statewide child-related issues. There is an Oversight Council consisting of Agency heads and a Workgroup Council with Agency representatives to implement tasks and assignments. The following State Agencies were represented on the Joint Council: Department of Alcohol and Other Drug Abuse Services, Continuum of Care, Department of Disabilities and Special Needs, Department of Education, Department of Health and Environmental Control, Department of Health and Human Services, Department of Juvenile Justice, Department of Mental Health, and Department of Social Services. In addition to the State Agencies, the following organizations were also represented on the Council: Behavioral Health Services Association of South Carolina, Inc., University of South Carolina, Children's Law Center, University of South Carolina, College of Social Work, Faces and Voices of Recovery of South Carolina, Federation of Families of South Carolina, South Carolina Chapter of the National Alliance on Mental Illness, South Carolina Commission for Minority Affairs, Palmetto Association for Children and Families, South Carolina Primary Health Care Association, The Children's Trust of South Carolina, South Carolina Family Connection, American Academy of Pediatrics, University of South Carolina, College of Arts and Sciences, Blue Cross and Blue Shield of South Carolina, and Youth and Family Advocates. The Joint Council provided regional training several times per year. This training was trauma-informed and was made available through the Joint Council's website https://scjcca.expertlearning.net. The Joint Council also maintained training records. This Action Step is in the Plan for Improvement. Currently, the SCDSS plans to continue its collaboration with the Joint Council on Children and Adolescents.

Palmetto Power (P2)

Discontinued in 2016, Palmetto Power (P2) meetings were initiated in July 2011. The purpose of these state-level collaborative forums with county and state office SCDSS staff, stakeholders and private provider agencies is to focus on the state's data and to analyze how to improve child welfare practices and outcomes. Stakeholders have included such community partners as the SC Foster Parent Association, congregate care providers, SC Guardian ad Litem Program, SC Department of Alcohol and Other Drug Abuse Services (DAODAS), Foster care Review Board, Department of Education (DOE), Department of Juvenile Justice (DJJ), Department of Mental Health (DMH) and private non-profits who provide invaluable services to children and families of South Carolina.

Palmetto Power for Providers (P3)

Also discontinued in 2016, Palmetto Power for Providers (P3) meetings, conducted in collaboration with the Palmetto Association for Children and Families (PACAF), were similar to P2 meetings but are more specific to agency services and out-of-home care providers, and were held at the local and regional levels. These meetings featured in-depth analysis of the local support and collaboration in the foster care system, to identify strengths and challenges in the larger child welfare system. The SCDSS and local partner agencies and providers came together to discuss existing practices and gaps in the system coupled with localized data from the Child Welfare system. The groups identified specific actions for all stakeholders, including the CWS, to improve safety, permanency and well-being outcomes for children in care or at risk of coming into care.

Catawba Indian Nation

The SCDSS and the CIN, the only federally recognized tribe in the state of South Carolina, have a collaborative workgroup, which meets quarterly. This workgroup includes representatives of internal and external stakeholder groups including the University of South Carolina Center for Child and Family Studies (training partner), SCDSS (Policy, Recruitment of Foster and Adoptive Families, OHAN, OGC, Independent Living, Child Welfare Operations, Foster Family Initial Licensing, Office of Permanency Management, , Adoptions and York County Legal Staff), Catawba Indian Nation (Director of Social Services and General Counsel), the South Carolina Commission of Minority Affairs and Winthrop University (Adoption and Foster Family Recruitment Partner in York County, home of the CIN reservation). In addition, the South Carolina Court Improvement Project (CIP), records data on ICWA cases in their project database. They have been recording on their hearing checklists when the Judge asks about ICWA, but the CIP has not been entering this information into their database. The Court Improvement Project Liaison for South Carolina's 16th Judicial Circuit, which includes York County, have been added to this group. In addition, CIN, Director of Social Services, and Division of Child Welfare staff has regularly scheduled conference calls where they discuss issues of importance to the CIN such as the state's compliance and non-compliance with ICWA requirements and with the SCDSS Policies and Procedures.

This workgroup is involved in the implementation of the ICWA / CIN related Goals, Objectives and Interventions/ Strategies contained in the 2015-2019 CFSP Plan for Improvement and subsequent APSRs. This Workgroup is currently working on the implementation of the following Action Steps:
- 2.2.17a, b, and c. The development and implementation of multiple methods to ensure that Native American children are properly identified as Native American.
- 3.1.2i1. The development and implementation of a plan to recruit Native American Foster and Adoptive families. The Recruitment Coordinator has also been developing recruitment literature specific to Native Americans. The Recruitment Coordinator works with the Office of Permanency Management in local recruitment activities. The Office of Permanency Division is involved in local recruitment activities in support of statewide recruitment efforts.
- 4.3.5b1. The Agency's on-line ICWA training module for Caseworkers. SCDSS plans to continue collaboration with the Catawba Indian Nation through the workgroup to include the recruitment of Native American Foster and Adoptive Families, the implementation of the ICWA on-line training module, and regularly scheduled communication.

II. UPDATE ON ASSESSMENT OF PERFORMANCE, THE PLAN FOR IMPROVEMENT AND PROGRESS TO IMPROVEMENT AND PROGRESS TO IMPROVE OUTCOMES

South Carolina's assessment of performance towards meeting the CFSP safety, permanency, wellbeing, and capacity goals, objectives and outcomes is garnered and analyzed from data found in the Final Report of Round 3 Child and Family Services Review (CFSR), Child and Family Services Review Data Profile, and Quality Assurance case reviews.

The South Carolina Child Welfare Services Division developed its 2015-2019 CFSP in 2014 to meet federal requirements. The next year, the Division experienced an almost complete turnover in the Divisional leadership responsible for the development and implementation of the CFSP objectives. During this same tumultuous period, the Division experienced a change in its regional and state leadership structure; a mammoth effort to develop implementation plans in support of meeting targets of the *Michelle H.* Class action lawsuit for foster care; and the 3 year project to develop a case practice model with the understanding that the poorly implemented Signs of Safety framework was our safety practice matrix but not our practice model with clearly

articulated values, guiding principles, and core practices skills for South Carolina child welfare practice.

The goals for the 2015-2019 CFSP were not developed using a CQI process and therefore the strategies and theories of change were not clearly linked to root causes or an understanding of adaptive challenges, as evidenced by the current progress to improve outcomes.
In 2019, the new strategic direction for program improvement involves a much-improved framework for visioning, conducting assessments, and implementing planning processes. South Carolina is using several planning processes to develop a program improvement agenda.

These include:
• The five-year Child and Family Services Plan (CFSP)
• The Child and Family Services Review (CFSR) Program Improvement Plans (PIPs)
• The Child Abuse Prevention and Treatment Act (CAPTA) plan
• The Statewide Foster and Adoption Recruitment Plan
• The five-year Chaffee Independent Living Plan
• *Michelle H.* Implementation Plans
• GPS Practice Model Implementation Plan

The practice implementation challenges experienced in the last five years are valuable lessons learned about strategic planning and what will work to make current efforts more effective. What follows is a look back at 2015-2019 CFSP performance on safety, permanency, and wellbeing outcomes and infrastructure.

2015-2019 CFSP Goals	Key CFSP Strategies
Safety: Improve the quality of risk assessment and safety management of children in Child Protective Services, Family Preservation, and Foster Care cases	• Improve the timeliness of initiating investigations and reduce repeat maltreatment • Improve the initial and ongoing assessments of safety and risk to children, to protect children in the home and prevent removal; provide services to the family to prevent children's entry into foster care of re-entry after reunification • Full, statewide implementation of the Signs of Safety (SOS) in Child Protective Services, Family Preservation, and Foster Care cases, by the end of the FFY 2019 • Improve the quality of Intake decisions

Permanency: Children will have meaningful and lifelong connections with family and in the community Permanency: Build administrative capacity to support safe and thriving children in lifelong families	- Improve the permanency and stability of children in their living situations - Improve the continuity of family relationships and connections with the neighborhood community, faith, extended family, Tribe, school, and friends for children - Establish and implement caseload standards to promote the safety, permanency and well-being of children while involved with the SCDSS - Provide enhanced Leadership Development opportunities for middle managers and executive leadership across all disciplines, to enhance the implementation of child welfare practices that support permanency, safety, and well-being for children involved with the SCDSS - Strengthen Workforce Development through hiring, retention, training, and support efforts, to sustain consistency in provision of critical services that promote safety, permanency and well-being for children involved with the SCDSS - Establish and maintain a Continuous Quality Improvement (CQI) System
Wellbeing: Children will thrive when involved with SCDSS	- Enhance the capacity of families to provide for their children's needs; ensure the needs and services for the child, parents, and foster parents are identified, recommended and put into place - Ensure the physical and mental health needs of children (including dental health), are addressed - Improve the SCDSS' ability to determine if children in foster are in a stable placement, and ensure that any changes in placement that occur are in the best interest of the child, and consistent with achieving the child's permanency goals

II.A. CHILD AND FAMILY OUTCOMES
Safety

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

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

Safety Goal: Improve the quality of risk assessment and safety management of children in Child Protective Services, Family Preservation, and Foster Care cases

Safety Strategies (objectives):

- Improve the timeliness of initiating investigations and reduce repeat maltreatment
- Improve the quality of Intake decisions

CFSR- State Outcome Performance

South Carolina is not in substantial conformity with Safety Outcome 1.

The outcome was substantially achieved in 73% of the 48 applicable cases reviewed

- South Carolina received an overall rating of Area Needing Improvement for Item 1 because 73% of the 48 applicable cases were rated as Strength.
- Delays in timely face to face contacts with alleged victim children
- Reasons for delay were not due to circumstances beyond agency control

Safety Outcome 1 Performance
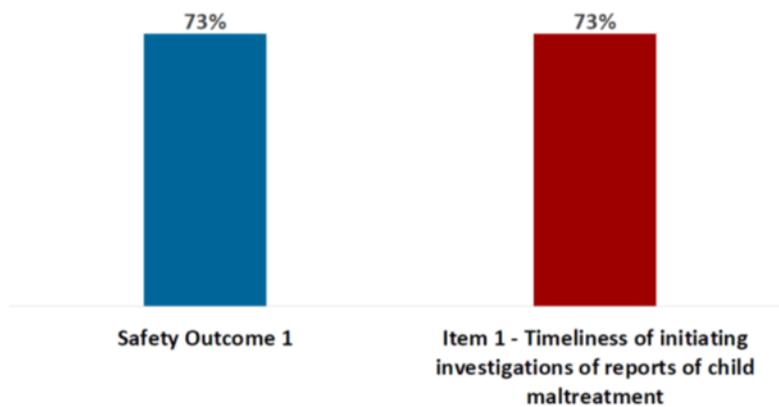
Statewide Data Indicator

Maltreatment in care (victimizations /100, 000 days in care)-National Performance 9.67

For this indicator, a lower value is desirable

South Carolina Performance - 8.11

South Carolina 's performance is statistically better than national performance

Maltreatment in Foster Care
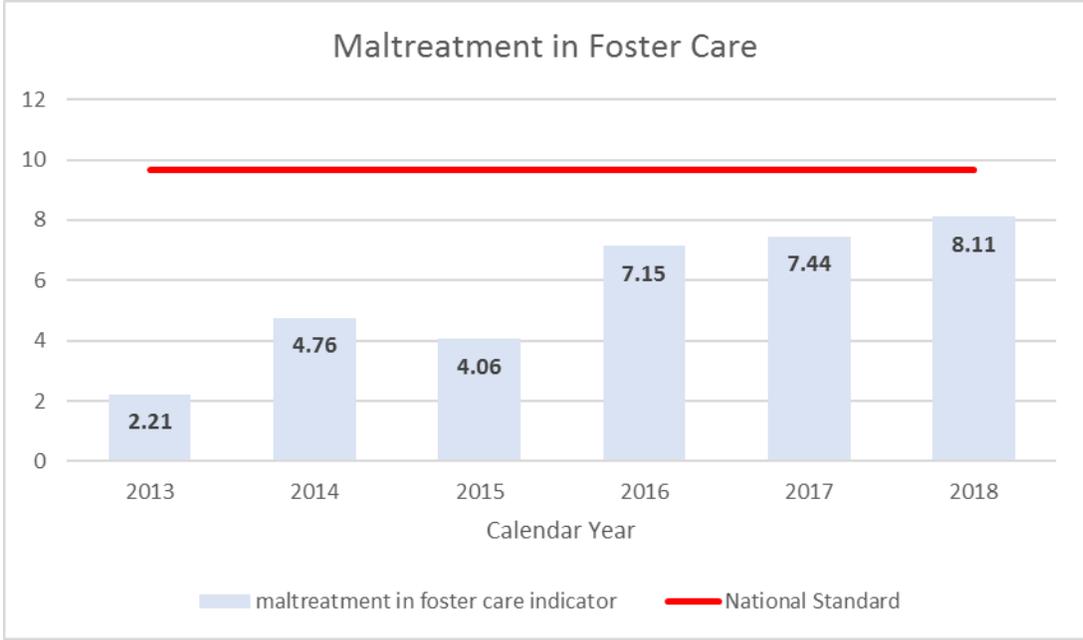
CAPSS data effective May 6, 2019 by Accountability, Data and Research

Safety Strategy

- Improve the initial and ongoing assessments of safety and risk to children, to protect children in the home and prevent removal; provide services to the family to prevent children's entry into foster care of re-entry after reunification

CFSR-State Outcome Performance

South Carolina is not in substantial conformity with Safety Outcome 2.
The outcome was substantially achieved in 33% of the 100 cases reviewed.
The outcome was substantially achieved in 48% of the 40 foster care cases, 24% of the 51 in-home services cases, and 22% of the 9 in-home services alternative/differential response cases.

Safety Outcome 2 Performance

Item 3 – Risk Assessment and Safety Management

% rated Strength
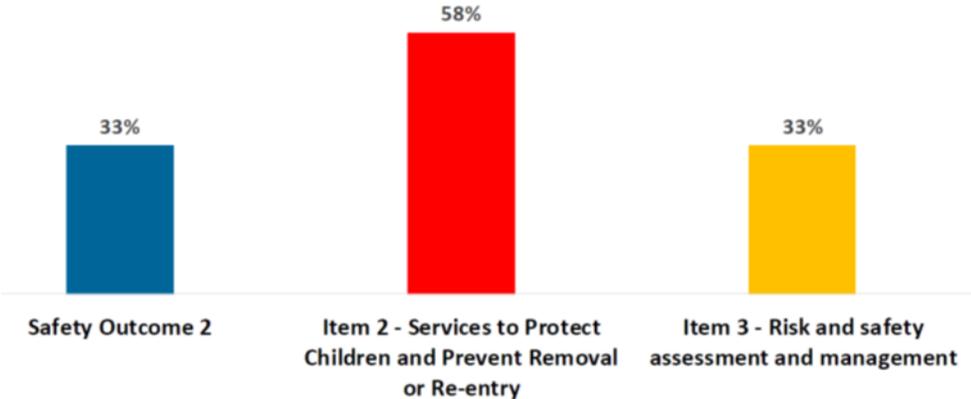
- All cases: 33%
- FC: 48%
- IH: 24%
- CBPS: 29%
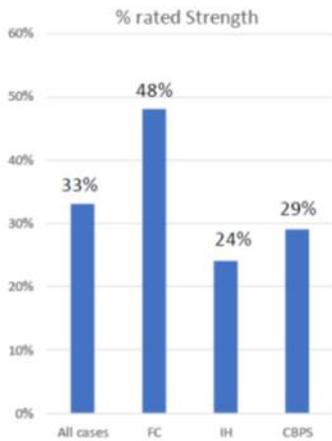
- All cases are applicable for this item
- Initial assessment: 53% of 40 cases
- Ongoing assessment: 41% of 99 cases
- Safety planning and management: 40% of 53 cases
- With the exception of safety planning, initial and ongoing assessment were of better quality in foster care cases
- Related practice area: Items 14 and 15

Children's Bureau CFSR Report 2017

Statewide Data Indicator

Recurrence of maltreatment- National Performance: 9.5%

For this indicator, a lower value is desirable.

South Carolina Performance: 9.5%

South Carolina's performance is statistically no different than national performance

Recurrence of Maltreatment

Calendar Year	recurrence of maltreatment indicator
2012	5.74%
2013	5.56%
2014	7.03%
2015	7.47%
2016	7.43%
2017	9.10%

National Standard

CAPSS data effective May 6, 2019 by Accountability, Data and Research
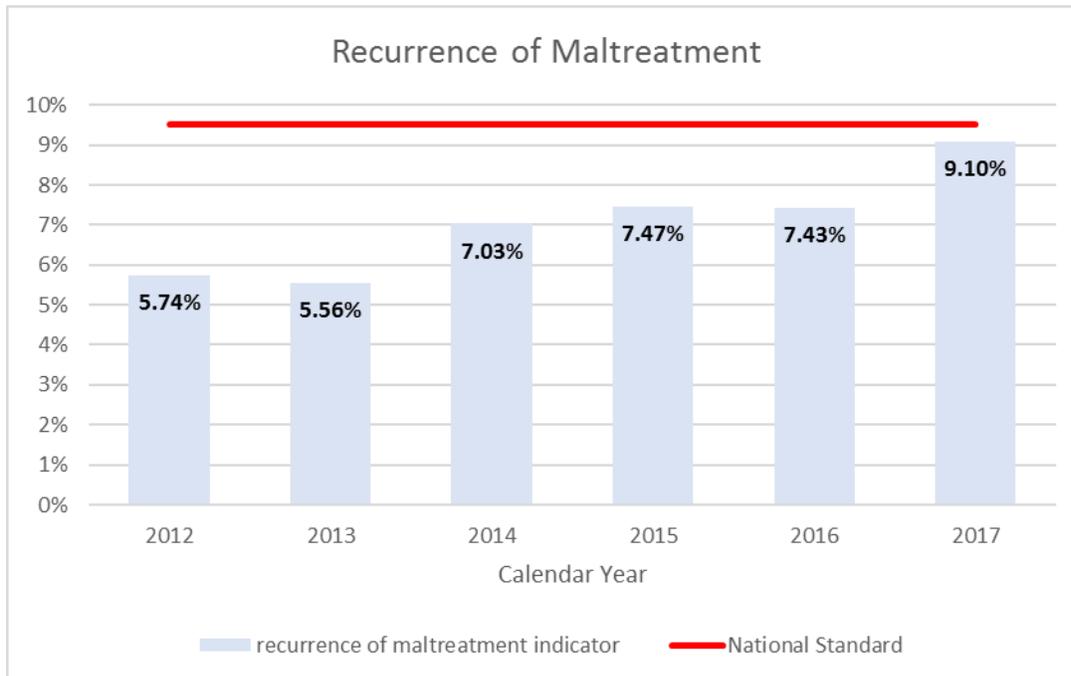
Quality Assurance Reviews

Item 1: Timeliness of investigations of reports of child maltreatment

There were 146 applicable cases for Item 1. This item had an overall rating of 75.3% strengths.

Item	Type of Case	Percentage
Item 1	Family Preservation	80.0% Strength / 20.0% Area Needing Improvement
	Foster Care	67.9% / 32.1%
	State Overall	75.3% / 24.7%

Legend
- Area Needing Improvement
- Strength
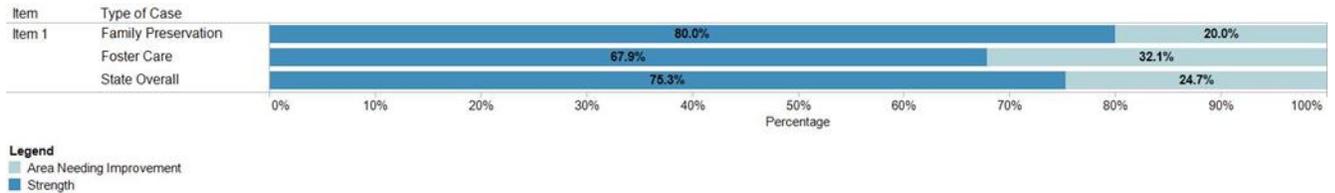
Common reasons that led to ANI ratings include:

- The agency did not make efforts to see child within the 2-24-hour time frame
- The agency did not make initial visits in timely manner
- The agency did not investigate the maltreatment report

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

For Item 2, there were 66 applicable cases with an overall rating of 51.5% strengths.

Item	Type of Case	Percentage
Item 2	Family Preservation	27.6% Strength / 72.4% Area Needing Improvement
	Foster Care	70.3% / 29.7%
	State Overall	51.5% / 48.5%

Legend
- Area Needing Improvement
- Strength
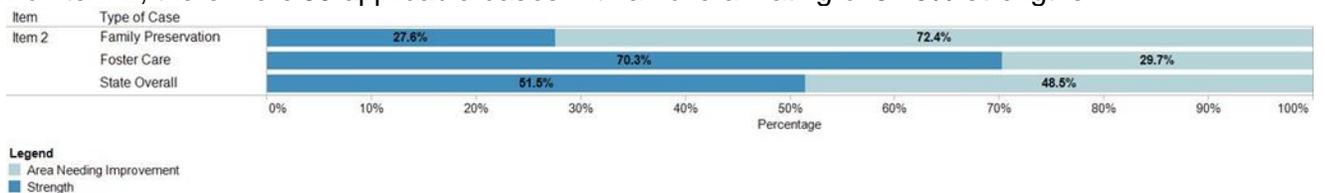
Common services that were not provided include:

- Substance abuse services
- Background check
- Domestic violence services
- Lack of safety planning

Item 3: Risk and safety assessment and management

Item	Type of Case	Percentage
Item 3	Family Preservation	29.3% Strength / 70.7% Area Needing Improvement
	Foster Care	56.6% / 43.4%
	State Overall	42.0% / 58.0%

Legend
- Area Needing Improvement
- Strength
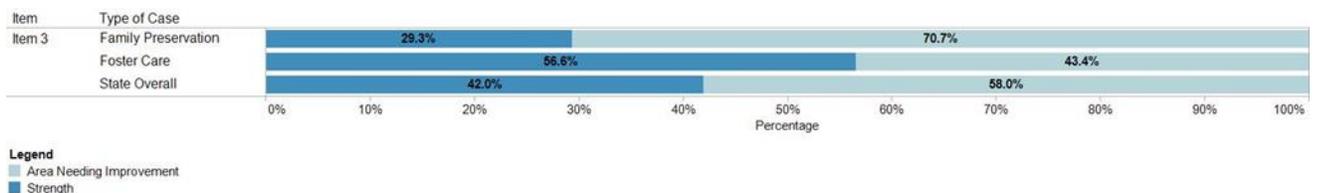
All 312 cases were applicable for Item 3. The overall rating for this item was 42% strengths.

Common reasons for an ANI include:

- No risk and safety assessment
- Lack of safety planning
- Lack of effort to ensure safety
- Lack of contact with provider to determine effectiveness of service
- Lack of face-to-face contact

Safety Strategy

- Full, statewide implementation of the Signs of Safety (SOS) in Child Protective Services, Family Preservation, and Foster Care cases, by the end of the FFY 2019

Fully Implemented

Plan for Improvement Safety Outcomes

Plans to improve South Carolina's Safety Outcomes are being developed as a part of the 2019 CFSR PIP, 2019-2024 CFSP and the implementation of a new GPS practice model.

Progress made to Improvement Safety Outcomes under the CFSP

Goal: Improve the Quality of Risk Assessment and Safety Management of Children in Child Protective Services, Family Preservation, and Foster Care Cases		
Measures		Benchmarks
CFSP 2015-2019	Strategy	Progress to date from QA Review
Objective 1: Using the baseline non-weighted, aggregate score of 82.6% for all non-PIP counties for Safety Outcome 1 in the Federal FFY 2013, the non-weighted, aggregate score for all counties will improve to **87.6% by end of FFY 2019,** with benchmarks of 1% per year improvement.	Guided Supervision	75.3% strengths
Objective 2: Using the baseline aggregate, non-weighted score of 56.0% for all non-PIP counties for Safety Outcome 2 in the FFY 2013, the non-weighted, aggregate score for all counties will improve to **61.0% by end of FFY 2019,** with benchmarks of 1% per year improvement	Family Engagement • Family Finding (FF): • Family Team Meeting (FTM) • Children Conferencing (CC) • Re-conferencing (RC):	51.5% strengths. (Item 2) 42% strengths (Item 3)
Objective 3: Full, statewide implementation of the Signs of Safety (SOS) in Child Protective Services, Family Preservation, and Foster Care cases, by the end of FFY 2019. Within FFY 2015, the SOS Implementation Team will establish the criteria for full implementation of SOS, and have	Signs of Safety	Implemented

benchmarks for the progress toward full implementation.		
Objective 4: Improve the quality of Intake decisions. A development team will be established and set baseline data of current Intake decisions and establish a measurable objective with benchmarks within FFY 2015.	Intake Hubs	Established

Permanency

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

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

Permanency Goals: Children will have meaningful and lifelong connections with family and in the community and we build administrative capacity to support safe and thriving children in lifelong families

Permanency Strategies (objectives):

- Improve the permanency and stability of children in their living situations

CFSR-State Outcome Performance

South Carolina is not in substantial conformity with Permanency Outcome 1.

The outcome was substantially achieved in 28% of the 40 applicable cases reviewed.

Permanency Outcome 1 Item Performance

Item 4. Stability of Foster Care Placement

South Carolina received an overall rating of Area Needing Improvement for Item 4 because 70% of the 40 applicable cases were rated as a Strength.

Item 5. Permanency Goal for Child

South Carolina received an overall rating of Area Needing Improvement for Item 5 because 56% of the 39 applicable cases were rated as a Strength.

Item 6. Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement

South Carolina received an overall rating of Area Needing Improvement for Item 6 because 43% of the 40 applicable cases were rated as a Strength.

Permanency Outcome 1 State Performance
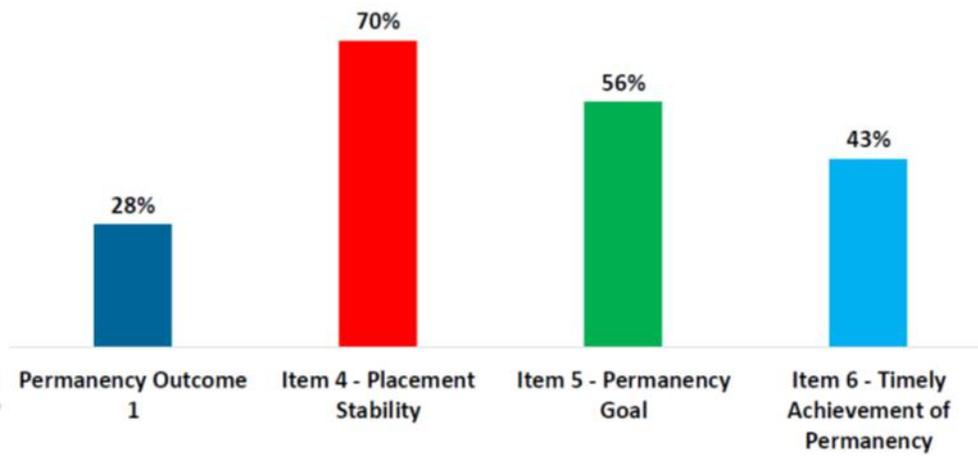
Children's Bureau CFSR Report 2017

Item 4 – Placement Stability
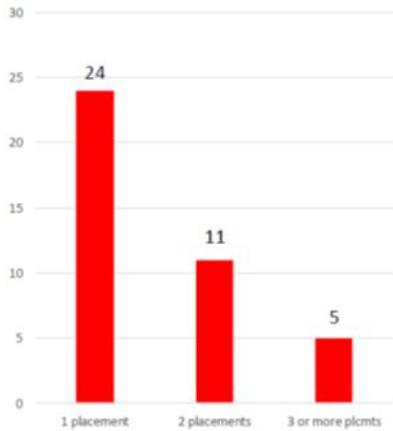
- 70% of cases rated as strength
- Child's current placement at the time of review was considered stable in 95% of cases
- In 31% of cases, placement changes were planned in an effort to achieve case goals or meet the needs of the child
- Primary reasons for unplanned moves:
  - Foster parent request for removal
  - Placements were temporary
- Related practice area: Item 12C and Foster Parent Recruitment and Retention

Item 5 – Permanency Goal for child
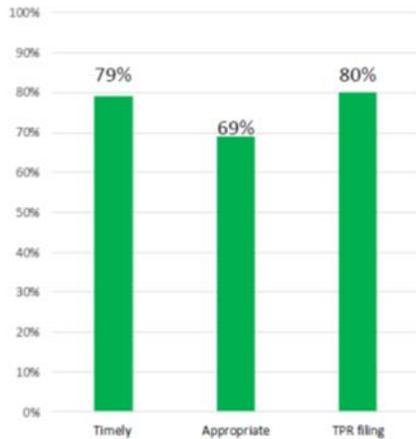
- **56% of cases rated as strength**
- **Goal Types:**
  - Reunification: 17 cases
  - Guardianship: 1 case
  - Adoption: 11 cases
  - OPPLA: 3 cases
  - Concurrent goals: 7 cases
- **Initial goals are generally established timely but not always appropriate**
- **Focus on ongoing assessment of goal appropriateness and change goals on a timely basis**
- **Engage in concurrent planning early**

Children's Bureau CFSR Report 2017

Item 6 – Achieving Reunification, Guardianship, Adoption or Other Planned Permanent Living Arrangement
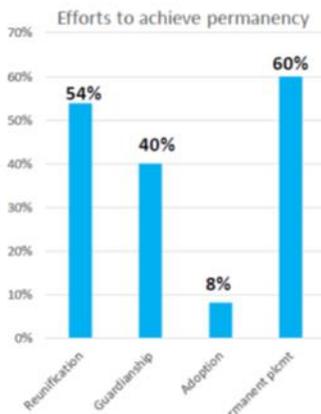
- **43% of cases rated as strengths**
- **Court and agency related delays**
  - Court continuances
  - Delays in providing key services to parents and youth
  - Focus on compliance vs behavior changes
  - Delays in completing paperwork
  - Delays in finding permanent homes
- **Related systemic factor area: Periodic reviews and permanency planning hearings**

Children's Bureau CFSR Report 2017

Statewide Data Indicator performance for Permanency

Placement stability (moves per 1,000 days in care) National Performance 4.44

For this indicator, a lower value is desirable.

South Carolina Performance 7.45

South Carolina's performance is statistically worse than national performance
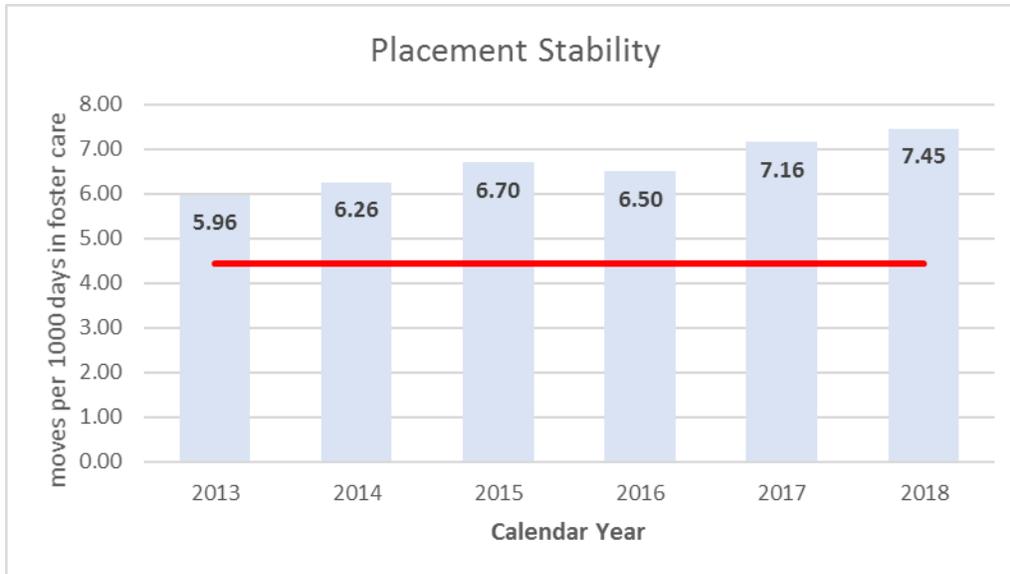
Placement Stability

CAPSS data effective May 6, 2019 by Accountability, Data and Research

Permanency in 12 months (entries)- National Performance: 42.7%

For this indicator, a higher value is desirable.

South Carolina Performance - 52.79%

South Carolina 's performance is statistically better than national performance
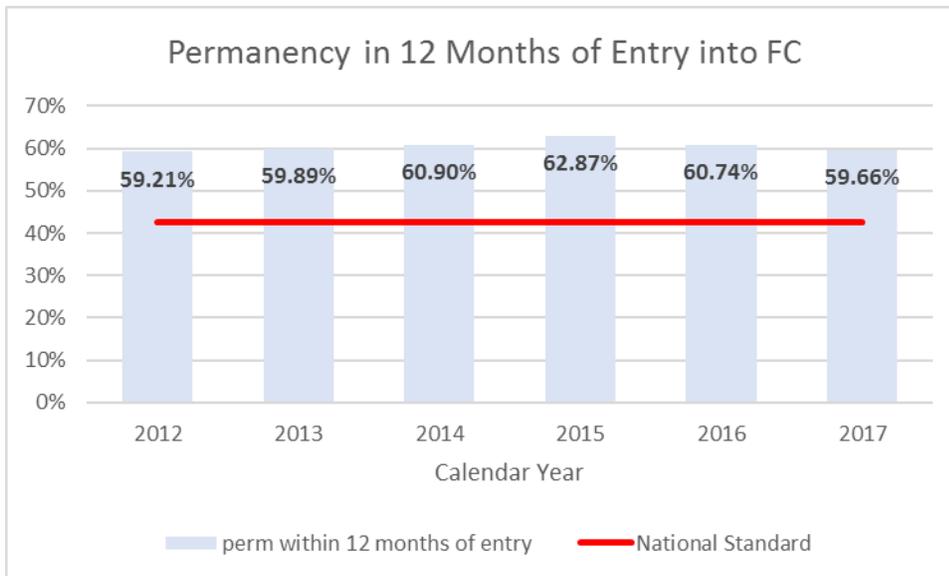
Permanency in 12 Months of Entry into FC

CAPSS data effective May 6, 2019 by Accountability, Data and Research

Permanency in 12 months for children in foster care 12-23 months- National Performance- 45.9%

For this indicator, a higher value is desirable

South Carolina Performance: 35.09%

South Carolina's performance is statistically worse than national performance
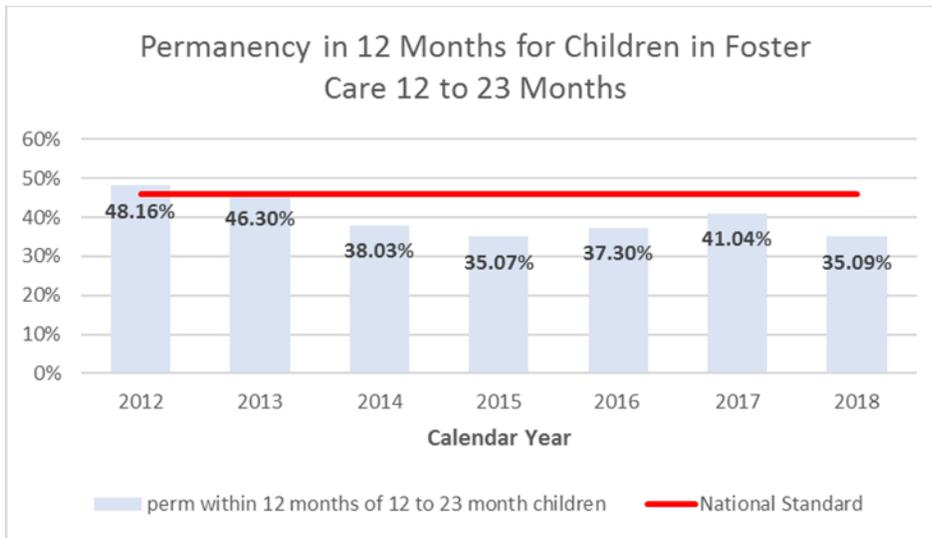
CAPSS data effective May 6, 2019 by Accountability, Data and Research

Over the past six observation periods, South Carolina has not achieved the National Standard for this indicator.

Permanency in 12 months for children in foster care 24 months or more- National Performance 31.8%

For this indicator, a higher value is desirable.

South Carolina Performance 33.08%

State's performance is statistically better than national performance
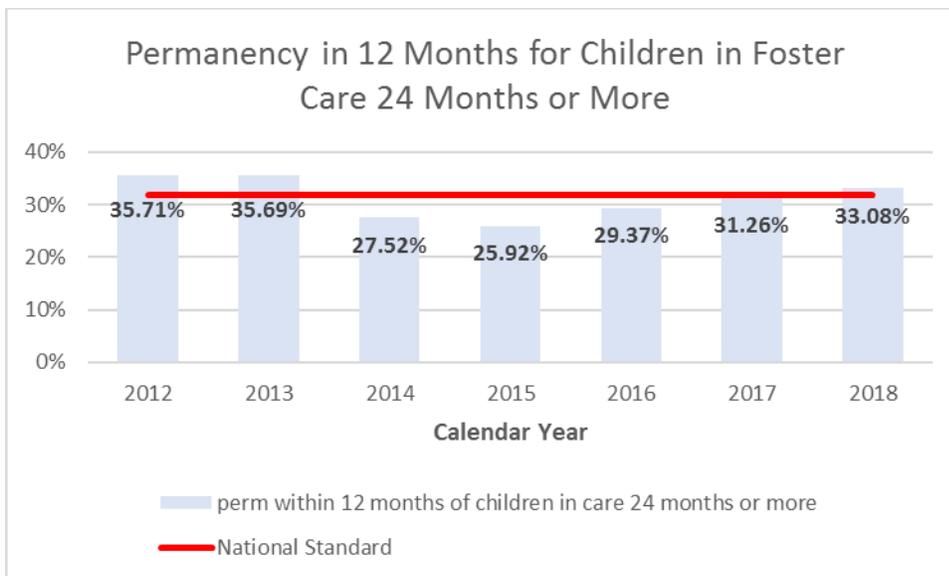
CAPSS data effective May 6, 2019 by Accountability, Data and Research

Re-entry to foster care- National Performance: 8.1%

For this indicator, a lower value is desirable.

South Carolina Performance: 7.79%

South Carolina's performance is statistically better than national performance
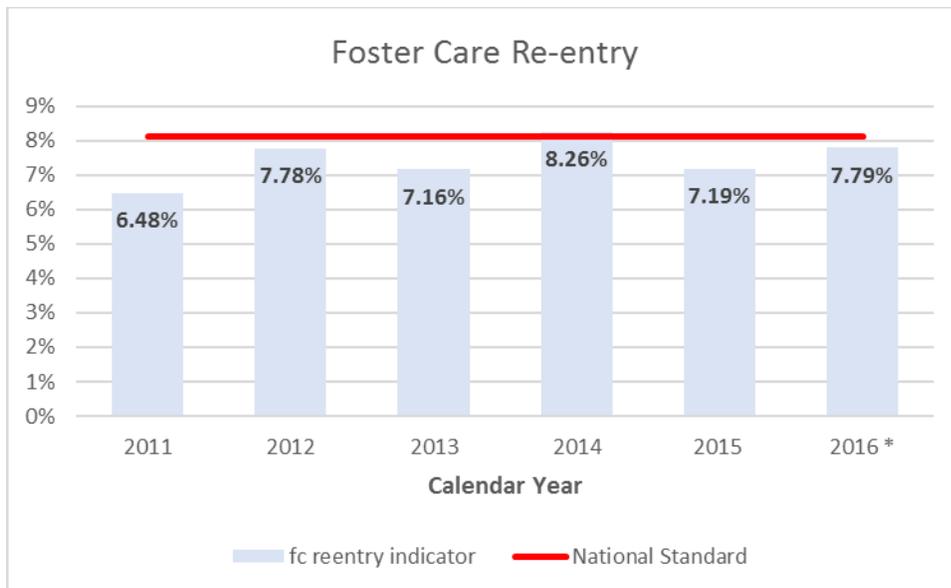
CAPSS data effective May 6, 2019 by Accountability, Data and Research

Permanency Strategy

- Improve the continuity of family relationships and connections with the neighborhood community, faith, extended family, Tribe, school, and friends for children

2017 CFSR State Outcome Performance

South Carolina is not in substantial conformity with Permanency Outcome 2.

The outcome was substantially achieved in 41% of the 39 applicable cases reviewed.

Permanency Outcome 2 Item Performance

Item 7. Placement With Siblings

South Carolina received an overall rating of Area Needing Improvement for Item 7 because 67% of the 18 applicable cases were rated as a Strength.

Item 8. Visiting With Parents and Siblings in Foster Care

South Carolina received an overall rating of Area Needing Improvement for Item 8 because 50% of the 24 applicable cases were rated as a Strength.

In 50% of the 10 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of visitation with a sibling(s) in foster care who is/was in a different placement setting was sufficient to maintain and promote the continuity of the relationship.

Item 9. Preserving Connections

South Carolina received an overall rating of Area Needing Improvement for Item 9 because 38% of the 32 applicable cases were rated as a Strength.

Item 10. Relative Placement

South Carolina received an overall rating of Area Needing Improvement for Item 10 because 50% of the 38 applicable cases were rated as a Strength.

Item 11. Relationship of Child in Care With Parents

South Carolina received an overall rating of Area Needing Improvement for Item 11 because 33% of the 18 applicable cases were rated as a Strength.

In 35% of the 17 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her mother.

In 29% of the 7 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her father
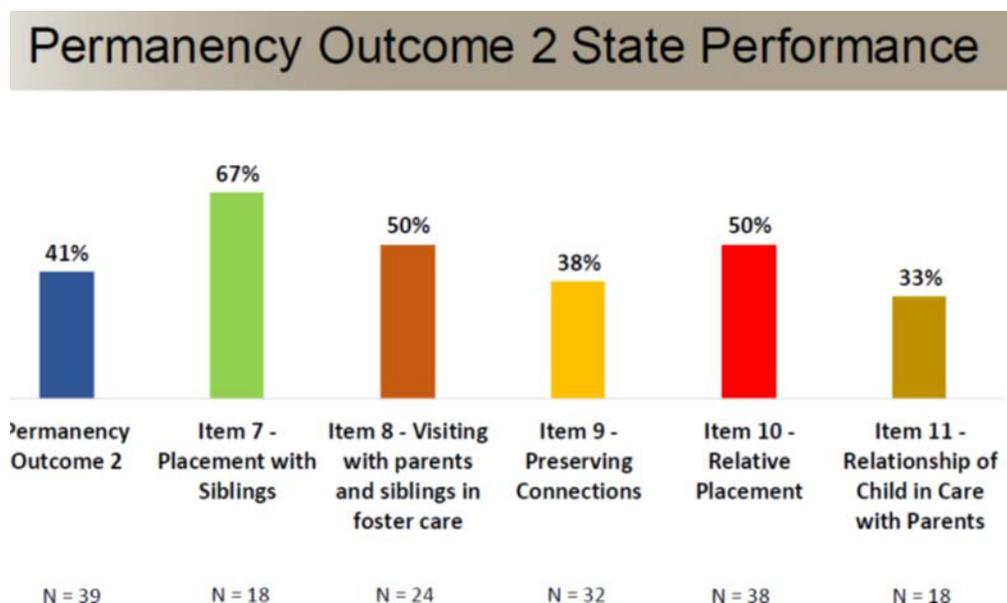
Permanency Outcome 2 State Performance

Permanency Outcome 2	Item 7 - Placement with Siblings	Item 8 - Visiting with parents and siblings in foster care	Item 9 - Preserving Connections	Item 10 - Relative Placement	Item 11 - Relationship of Child in Care with Parents
41%	67%	50%	38%	50%	33%
N = 39	N = 18	N = 24	N = 32	N = 38	N = 18

Children's Bureau CFSR Report 2017

- **Item 7: Cases were rated as strengths of 67% of cases**
  - Child placed with all siblings in only 30% of applicable cases
  - Valid reasons for siblings separation evident in only 50% of applicable cases
  - Lack of initial and continuous efforts to place siblings together
- **Item 9: Cases were rated as strengths of 38% of cases**
  - Efforts to maintain child's important connections before coming into foster care
  - Impacted by child's proximity to connections and multiple placements
  - In 97% of cases, sufficient inquiry was conducted to determine tribal affiliations
- **Item 10: Cases were rated as strengths of 50% of cases**
  - Child placed with relatives in only 13% of cases but all children were stable
  - Agency made concerted efforts to identify, locate, inform and evaluate:
    - Maternal relatives in 57% of cases
    - Paternal relatives in 37% of cases

Children's Bureau CFSR Report 2017

Quality Assurance Reviews

Item 4: Stability of foster care placement

Item 4 had 145 applicable cases with an overall rating of 75.2% strengths.
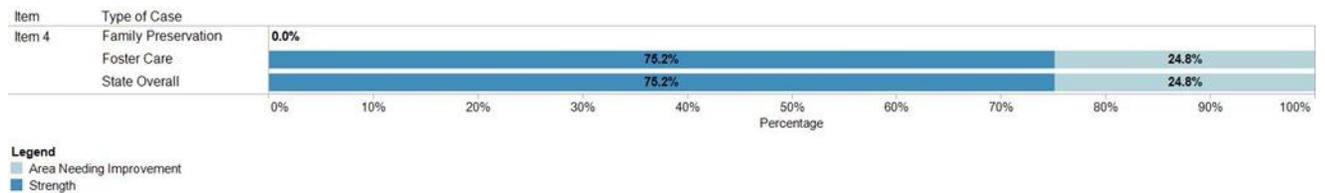
Common reasons for an ANI include:

- Capacity issues
- The placement was not stable
- Move was not done in the best interest of the child
- Placement did not meet behavioral needs of the child

Item 5: Permanency goal for child

For Item 5, there were 141 applicable cases. There was an overall rating of 57.4% strengths.
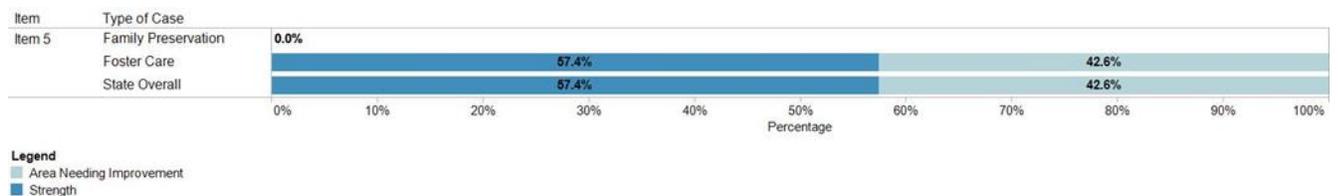
Common reasons for an ANI include:

- Permanency goal not appropriate
- Permanency goal not established timely

- Agency worked on permanency goal unrelated to the established permanency goal
- The agency did not add a concurrent goal
- The agency did not file TPR in a timely manner
- Multiple court continuances
- Challenge of working on the goal of adoption due to focus on the concurrent goal of reunification

Item 6: Achieving reunification, guardianship, adoption, or other planned permanent living arrangement

Item	Type of Case		
Item 6	Family Preservation	0.0%	
	Foster Care	48.3%	51.7%
	State Overall	48.3%	51.7%

Legend
- Area Needing Improvement
- Strength
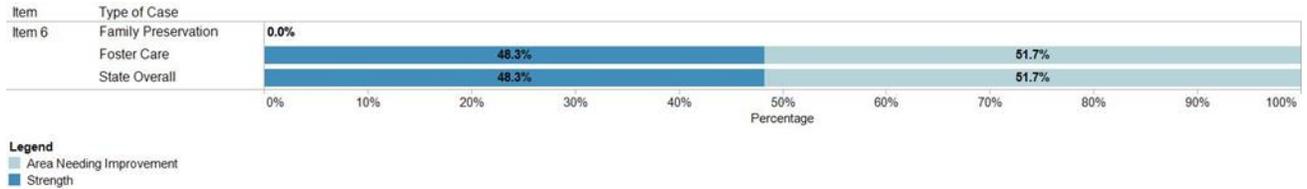
Common reasons for an ANI include:

- Permanency goal not established timely
- The agency did not make efforts to complete the goal
- The agency did not file TPR in a timely manner
- TPR not filed at all
- The agency did not assess relatives for placement
- The agency did not provide parent support services to achieve reunification
- Multiple court continuances

Item 7: Placement with siblings

Item 7 had 77 applicable cases. The overall rating for this item was 72.5% strengths.

Item	Type of Case		
Item 7	Family Preservation	0.0%	
	Foster Care	72.7%	27.3%
	State Overall	72.7%	27.3%

Legend
- Area Needing Improvement
- Strength
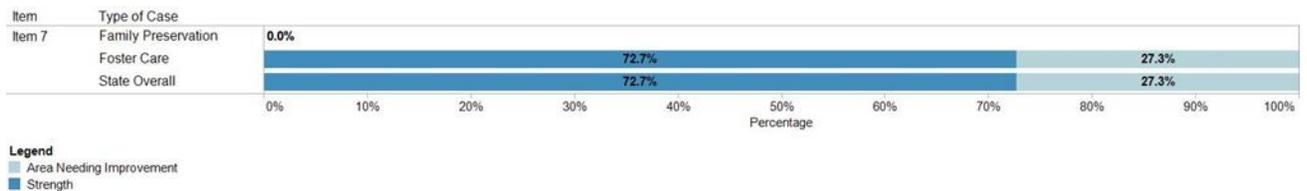
Common reasons for an ANI include:

- Concerted efforts not made to place siblings together
- Capacity issues prevented siblings from being placed together

Item 8: Visiting with parents and siblings in foster care

There were 88 applicable cases for Item 8 with an overall rating of 38.6% strengths

Item	Type of Case		
Item 8	Family Preservation	0.0%	
	Foster Care	38.6%	61.4%
	State Overall	38.6%	61.4%

Legend
- Area Needing Improvement
- Strength
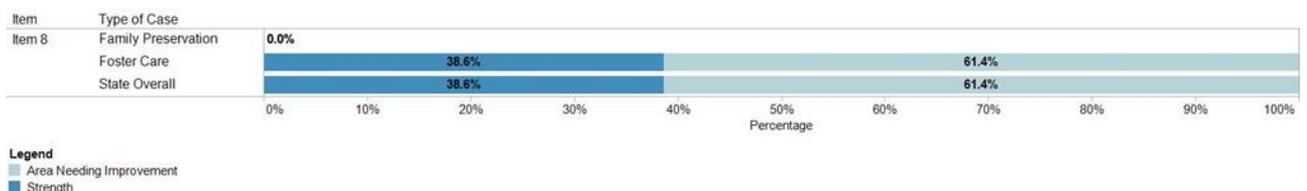
Common reasons for an ANI include:

- The agency did not encourage interaction between parent and child
- The agency did not provide appropriate time for interaction between the parent and child
- The agency did not provide therapeutic setting for the parent and child
- The agency did not observe visit between parent and child
- The agency had difficulties scheduling monthly visits with the parent consistently for the child due to staff turnover and high caseloads

Item 9: Preserving connections

Item 9 had 132 applicable cases and an overall rating of 48.5% strengths.

Item	Type of Case										
Item 9	Family Preservation	0.0%									
	Foster Care	48.5%					51.5%				
	State Overall	48.5%					51.5%				

Legend
Area Needing Improvement
Strength
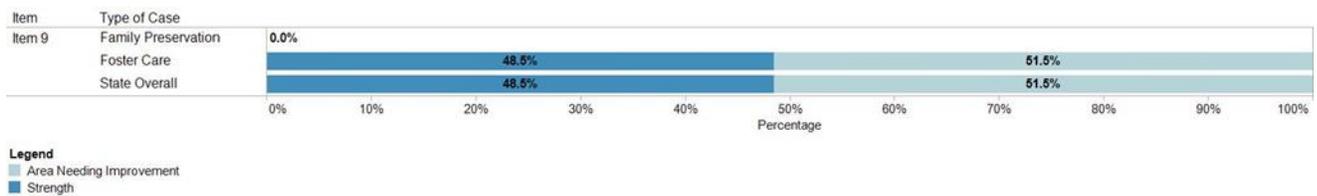
Common reasons for an ANI include:

- Lack of preserving connections with family and community
- Lack of transportation
- The agency did not provide notification to the tribe in accordance to ICWA

Item 10: Relative placement

For Item 10, 137 cases were applicable. There was an overall rating of 41.6% strengths

Item	Type of Case										
Item 10	Family Preservation	0.0%									
	Foster Care	41.6%				58.4%					
	State Overall	41.6%				58.4%					

Legend
Area Needing Improvement
Strength
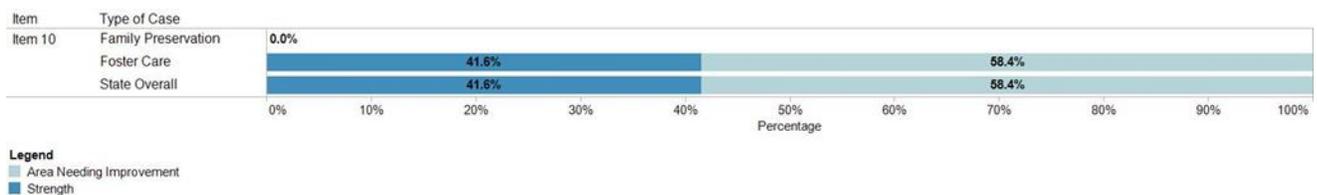
Common reasons for an ANI include:

- The agency did not identify both maternal and paternal relatives for potential placement
- Lack of agency effort to contact relatives

Item 11: Relationship of child in care with parents

A total of 72 cases were applicable for Item 11. The overall rating was 38.9% strengths.

Item	Type of Case										
Item 11	Family Preservation	0.0%									
	Foster Care	38.9%				61.1%					
	State Overall	38.9%				61.1%					

Legend
Area Needing Improvement
Strength
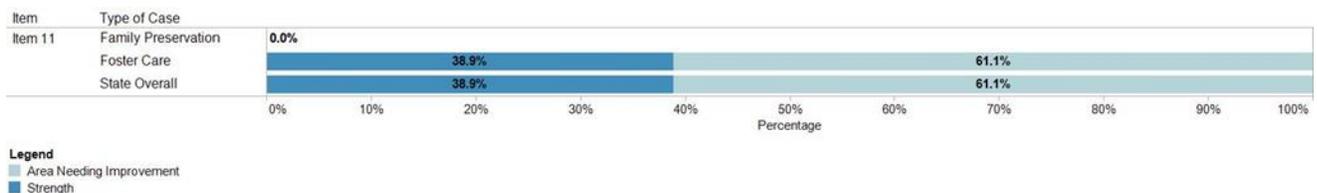
Common reasons for an ANI include:

- The agency did not invite parents to child's appointment and activities such as:

Medical appointments

School and extracurricular activities

Dental appointments

Plan for Improvement on Permanency Outcomes

Plans to improve South Carolina's permanency outcomes are being developed as a part of the 2019 CFSR PIP, 2019-2024 CFSP and the implementation of a new case work practice model.

Goal: Children will have meaningful and lifelong connections with family and in community.		
CFSP 2015-2019 Measures	Strategy	Progress to date from QA Review Benchmarks
Objective 1: Using the baseline non-weighted, aggregate score of 54.4% for all non-PIP counties for Permanency Outcome 1 in the FFY 2013, the non-weighted, aggregate score for all counties will improve to 59.4% by end of FFY 2019, with benchmarks of 1% per year improvement.	Resource Family Team Regional Diligent Recruitment Alternative Caregiver Liaisons	75.2% strengths. (item 4) 57.4% strengths (Item 5) 48.3% strengths (Item 6)
Objective 2: Using the baseline non-weighted, aggregate score of 55.9% for all non-PIP counties for Permanency Outcome 2 in the FFY 2013, the non-weighted, aggregate score for all counties will improve to 65.9% by end of FFY 2019, with benchmarks of 2% per year improvement.	Family Engagement	72.5% strengths (Item 7) 38.6% strengths. (Item 8) 48.5% strengths (Item 9) 41.6% strengths (Item 10) 38.9% strengths (Item11)
Establish and implement caseload standards to promote the safety, permanency and well-being of children while involved with the SCDSS		Established This objective specifically addresses multiple Items of the CFSR Instrument including but not limited to: Item 2, safety and risk assessment; Items 3 and 4, risk and safety assessment and management; Items 17-20, visiting with the child and parent(s) and assessment of needed services and monitoring of services.
Provide enhanced Leadership Development opportunities for middle		CFSR Systemic Factor STAFF AND PROVIDER TRAINING

managers and executive leadership across all disciplines, to enhance the implementation of child welfare practices that support permanency, safety, and well-being for children involved with the SCDSS		Area Needing Improvement
Establish and maintain a Continuous Quality Improvement (CQI) System		CSFR systemic Factor Not in Substantial Conformity Area Needing Improvement

Well-Being

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

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

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

Well-Being Goal: Children will thrive when involved with SCDSS

Well-Being Strategies (objectives):

- Enhance the capacity of families to provide for their children's needs; ensure the needs and services for the child, parents, and foster parents are identified, recommended and put into place

CFSR- State Outcome Performance

South Carolina is not in substantial conformity with Well-Being Outcome 1.

The outcome was substantially achieved in 18% of the 100 cases reviewed.

The outcome was substantially achieved in 30% of the 40 foster care cases, 10% of the 51 in-home services cases, and 11% of the 9 in-home services alternative/differential response cases.

Sub-Item 12A. Needs Assessment and Services to Children

•South Carolina received an overall rating of Area Needing Improvement for Item 12A because 49% of the 100 cases were rated as a Strength.

Item 12A was rated as a Strength in 55% of the 40 foster care cases, 47% of the 51 in-home services cases, and 33% of the 9 in-home services alternative/differential response cases.

Sub-Item 12B. Needs Assessment and Services to Parents

•South Carolina received an overall rating of Area Needing Improvement for Item 12B because 16% of the 88 applicable cases were rated as a Strength.

•Item 12B was rated as a Strength in 18% of the 28 applicable foster care cases, 16% of the 51 applicable in-home services cases, and 11% of the 9 applicable in-home services alternative/differential response cases.

•In 29% of the 85 applicable cases, the agency made concerted efforts both to assess and address the needs of mothers.

•In 22% of the 79 applicable cases, the agency made concerted efforts both to assess and address the needs of fathers.

Sub-Item 12C. Needs Assessment and Services to Foster Parents

•South Carolina received an overall rating of Area Needing Improvement for Item 12C because 66% of the 35 applicable foster care cases were rated as a Strength.

Wellbeing Strategy

- Ensure the physical and mental health needs of children (including dental health), are addressed

State Outcome Performance

South Carolina is not in substantial conformity with Well-Being Outcome 3.

The outcome was substantially achieved in 39% of the 88 applicable cases reviewed.

The outcome was substantially achieved in 43% of the 40 applicable foster care cases, 37% of the 41 applicable in-home services cases, and 29% of the 7 applicable in-home services alternative/differential response cases.

Item 12: Needs Assessment and Services to Child, Parents, and Foster Parents

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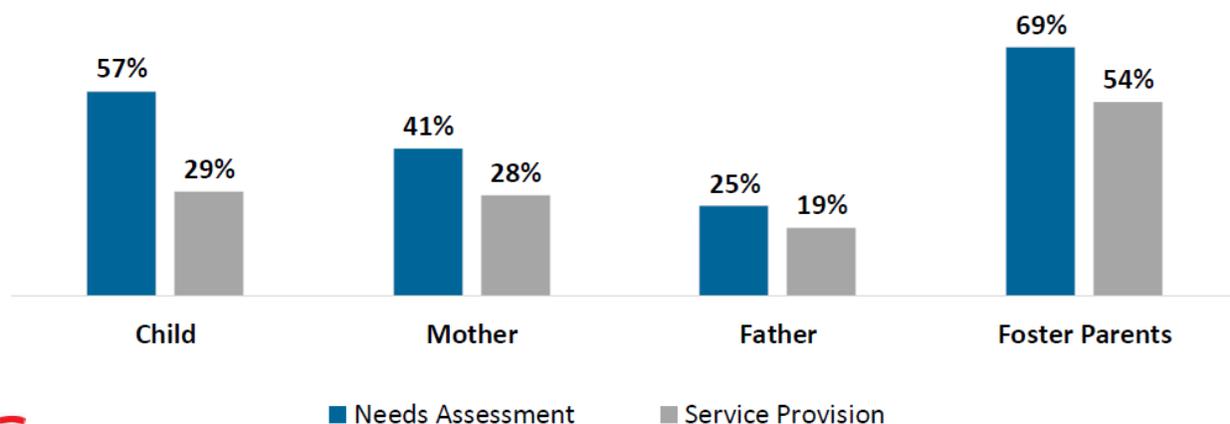
Quality Assurance Reviews

Item 12: Needs and services of child, parents, and foster parents

All 312 were applicable for Item 12. The overall rating was 18.6% strengths.

Item	Type of Case		
Item 12	Family Preservation	13.8%	86.2%
	Foster Care	24.1%	75.9%
	State Overall	18.6%	81.4%

Percentage: 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Legend
Area Needing Improvement
Strength
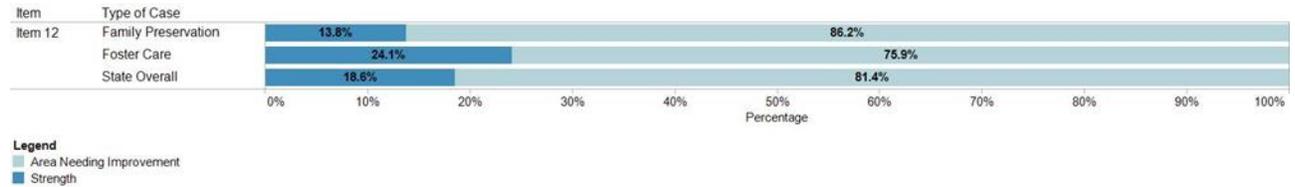
Common reasons for an ANI include:

- No initial or ongoing assessments
- No effort to provide service to the individual. Services not provided include:
- Parenting classes
- Independent living skills
- AOD treatment or classes
- Economic services
- ABC daycare vouchers
- Domestic violence victim's counseling
- Could not get in contact with the individual to provide services

Item 17: Physical health of the child

Item 17 had 216 applicable cases and an overall rating of 63.4% strengths.

Item	Type of Case		
Item 17	Family Preservation	49.3%	50.7%
	Foster Care	70.3%	29.7%
	State Overall	63.4%	36.6%

Percentage: 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Legend
Area Needing Improvement
Strength
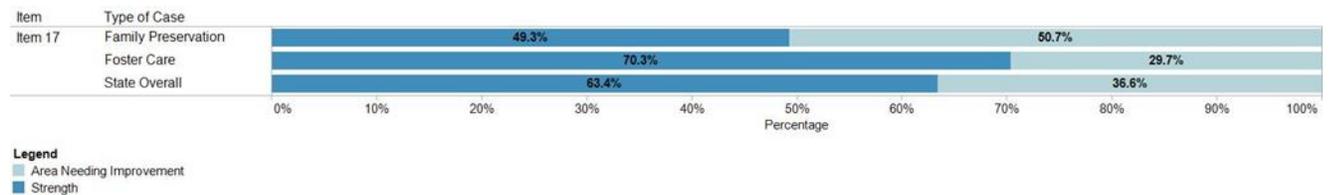
Common reasons for an ANI include:

- No physical health assessment
- No dental assessment
- No annual eye exam
- No forensic exam
- No Birth control services provided
- No Baby net assessment provided
- Lack of follow-up with medical provider
- The agency did not request medical records to assess child

Item 18: Mental/behavioral health of the child

There were 183 applicable cases for Item 18 with an overall rating of 41.5% strengths.

Item	Type of Case		
Item 18	Family Preservation	33.8%	66.2%
	Foster Care	47.2%	52.8%
	State Overall	41.5%	58.5%
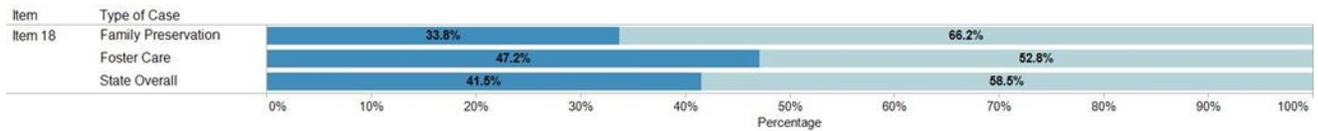
Legend
Area Needing Improvement
Strength

Common reasons for an ANI include:

- No mental health assessment
- Individual counseling
- Lack of appropriate oversight of prescription medications
- Sexual trauma therapy
- Lack of psychotropic medication monitoring

Goal: Children will thrive when involved with SCDSS		
Measures		Benchmarks
CFSP 2015-2019	Strategy	Progress to date from QA Review
Objective 1: Using the baseline non-weighted, aggregate score of 53.0% for all non-PIP counties for Well-Being Outcome 1 in the FFY 2013, the non-weighted, aggregate score for all counties will improve to 73.0% by end of the FFY 2019, with benchmarks of 4% per year improvement	Building Caseworker Competencies in Signs of Safety (SOS) Family Engagement Implementation Engaging Noncustodial Fathers	18.6% strengths (Item 12)
Objective 2: Using the baseline non-weighted, aggregate score of 59.5% for all non-PIP counties for Well-Being Outcome 3 in the FFY 2013, the non-weighted, aggregate score for all counties will improve to 79.5% by end of the FFY 2019, with benchmarks of 4% per year improvement.	South Carolina Trauma Practice Initiative Increased Access to Clinical and Medical Consultations Trauma Community Response Protocol	63.4% strengths (Item 17) 41.5% strengths (Item 18)

II.B. Systemic Factors

The statewide assessment prepared by the South Carolina Department of Social Services (DSS) and submitted to the Children's Bureau on January 31, 2017. The statewide assessment is the state's analysis of its performance on outcomes and the functioning of systemic factors in relation to title IV-B and IV-E requirements and the Title IV-B Child and Family Services Plan. The state was in substantial conformity on one of seven systemic factors, Agency Responsiveness to the Community. Additionally, the state received strength ratings on the following individual items, although the two systemic factors were not in substantial conformity overall:

- Case Review System: Items 21 (periodic review) and 22 (permanency hearing)
- Foster and Adoptive Parent Licensing, Recruitment and Retention: Item 34 (Standards Applied Equally, requirements for criminal background checks)

The other six systemic factors not in substantial conformity, with most or all items rated as areas needing improvement, included: Statewide Information System, Case Review System, Quality Assurance System, Staff and Provider Training, Service Array and Resource Development, and Foster and Adoptive Parent Licensing, Recruitment and Retention.

Percent Strengths on Item Ratings

	2017	2018	2018: Foster Care	2018: Family Preservation
Item 2: Services to Family to Protect Children in Home and Prevent Removal or Re-Entry Into Foster Care	51.3%	51.5%	70.3%	27.3%
Item 3: Risk and Safety Assessment and Management	45.1%	42%	56.6%	29.6%
Item 12: Needs and Services for Child, Parents, and Caregivers	20.9%	18.6%	24.1%	14.6%
Item 12a: Needs and Services for Child	54.9%	56.7%	59.3%	53.5%
Item 12b: Needs and Services for Parents	17.6%	17%	18.4%	18.3%
Item 13: Child and Family Involvement in Case Planning	34.7%	37.2%	49.6%	29.6%
Item 14: Caseworker Visits with Child	62.6%	59.3%	72.4%	48.4%
Item 15: Caseworker Visits with Parents	27%	30%	30.1%	31.9%
Item 18: Mental/Behavioral Health of Child	42.4%	41.5%	47.2%	34%

In 2018, 312 cases were reviewed (167 family preservation and community-based prevention services cases and 145 foster care cases). From the table, it is clear that the family preservation cases significantly contribute to the low ratings on these items.

The overall identified needed improvements should focus on quality visits and service array to have the greatest impact in all outcome areas. When reviewing all the information available, it demonstrates that caseworkers are not having frequent and quality visits with either children or parents. The lack of quality visits impacts assessments, service provision, and case planning. This is particularly evident in family preservation cases. This data points to a clear lack of safety services, especially for family preservation cases. These services are vital to preventing removal from the family home. Compared to physical health, there is a need for mental and behavioral health assessments and services, which are critical for children to successfully reunite and remain with their families and the overall well-being of children in care.

Feedback Loops

County and regional offices receive written reports on quality assurance reviews to share with community stakeholders at child welfare improvement teams that operate in 46 counties. The quality assurance unit that operates from the Office of Data, Research, and Accountability and

The Center for Child and Family Studies feed the results of Quality Assurance Case Reviews and data analyses back to County, regional, and state staff with the following reports:

- Quality Assurance Review Final Report
- Quality Assurance Review Summary Case Notes
- QA Review Case Debriefs

Best practice for County and Regional Offices is to share and communicate with staff and stakeholders using the implemented communication cycle for policy communication and implementation.

Caseworkers, supervisors, regional directors and state level managers, receive regular data reports and use the information to plan and implement changes in practice, including:

Push Reports – Reports Generated by CAPSS and emailed out Sunday Evening to those who are signed up to receive these. Every report is sent out with their corresponding CAPSS Batch report number (i.e. SC170-R01). Every Push Report can also be located in CAPSS. These are the reports designed to review at the beginning of each week to ensure data is accurate and to monitor practice on a weekly basis. These are some of the most important reporting measures to ensure accuracy and quality of practice.

Batch Analysis Reports – These are like the Push Reports but emailed out at the beginning of the next month. They look back to the previous month and show which children were not documented to be seen, which cases had no service activity, Late Permanency Planning Hearings, etc. These should be reviewed at the beginning of each month and any errors corrected and action plans implemented for deficient practice.

HS Dashboard –This one is designed to provide reports and tables around 14 key measures that should predict positive or negative outcomes for children and families. These are updated once per month with the previous month's information no longer available. These run a month behind to ensure that any information that can be corrected already has and is therefore an accurate representation of Outcome Measures. These look back for the previous years' worth of data. Therefore, utilizing the Push and Batch Analysis reports to ensure accuracy is vital. The Dashboard has two areas of note for managers. The first are the actual reports. This is the default once the Dashboard is opened and show the numerical outcomes for each measure compared by county, regionally and statewide. Second are the Queries which provide detailed tables for each report.

Unfortunately, we do not have a consistent practice of QA staff reporting the results of quality assurance review findings to child welfare improvement teams, however QA staff are available upon request for technical assistance and report outs. We also do not have structure where local child welfare improvement teams report system strengths and needs to a Regional and state office teams that acts to make improvements. Lastly, we need to consistent practice where Review teams meet with regional management, community stakeholders, and state level management to present and discuss the results of their reviews. Although the QA analysis and review leaders have completed several presentations to internal and external stakeholders

We have developed policy to require specific, written improvement plans to be developed and QA staff monitor progress towards implementing the plans through regular follow up reports and/or site meetings. That policy is pending approval and implementation.

III.A. STEPHANIE TUBBS JONES CHILD WELFARE SERVICES PROGRAM (TITLE IV-B, SUBPART 1)

Children's Trust of SC

The Children's Trust of South Carolina has continued to provide training, technical assistance and prevention messaging at both the state and local community levels. The goal of their program has been to safely reduce the number of children entering care by strengthening families and the communities in which they live by educating professional and providers about proven, evidence-based approaches to prevent child maltreatment and ensure child well-being.

In State Fiscal Year (SFY) 19-20, The Children's Trust of South Carolina continued to provide relevant, timely and appropriate offerings in all areas across the state.

While the Children's Trust of South Carolina has various functions, the SCDSS contracted with them primarily to provide the Strengthening Families Program, to families in South Carolina. Strengthening Families Program (SFP) is an evidence-based prevention program for parents and children ages 6-11 in high-risk families. SCDSS committed to ensuring this program is delivered with fidelity and has selected Children's Trust of South Carolina (CTSC) as the agency to monitor and address any issues related to implementation and fidelity.

During Child Abuse Prevention month, the Children's Trust of South Carolina provided Prevention Partners with materials for Pinwheel Gardens, including all county SCDSS offices and messaging tools to promote child abuse prevention awareness and the Protective Factors framework. The Children's Trust of South Carolina has continuously been working on a public relations campaign to ensure the prevention message is shared across the entire state along with publishing an online calendar and promoting prevention events throughout the state.

The Children's Trust of South Carolina will also maintain a website to reach child-serving professionals with the prevention message.

SC Foster Parent Association

The South Carolina Foster Parent Association (SCFPA) will support the DSS mission of safe and thriving children in lifelong families. SCFPA will partner with DSS to strengthen agency efforts to identify and support families who can provide safe and secure homes to children in foster care either temporarily or permanently. In supporting and partnering with DSS the SCFPA will provide the following services:

- Application Intake from Potential Foster and/or Adoptive Families
- Providing Orientation to Interested Families
- Scheduling Pre-service Training and Fingerprinting
- Pre-service Training of Foster Care Applicants
- Recruitment of Foster and Adoptive Families
- Continuing Education for Licensed Foster Parents
- Support of Licensed Foster Parents
- Transition Support for Children in Foster Care
- Post Adoption Support Services

The SCFPA will maintain a toll-free telephone number and a recruitment-oriented website for prospective foster/adoptive parents to utilize in applying for licensure and to inform prospective parents about the application and licensure process. The SCFPA will provide an orientation session for interested families. This orientation will be prior to pre-service training and include an overview of the child welfare system in South Carolina, the role of foster/adoptive parents in this system and the requirements to become a foster parent. The SCFPA will provide pre-service training to persons who apply to be foster parents. Applicants will receive 14 hours of pre-service training from the SCFPA as required by DSS regulations and policy. Pre-service training is designed to deepen prospective foster parents' knowledge of the South Carolina Child Welfare system and the role of foster parents in it and give prospective foster parents an understanding of childhood trauma and the behavioral and medical health care needs of children who are in foster care. The SCFPA will host at least one event per month to attract and inform persons who are interested in becoming foster/adoptive parents.

In addition to other topics specified by DSS, the SCFPA will provide ongoing training to licensed foster parents, which will include training on the Reasonable and Prudent Parent standard as specified in the Preventing Sex Trafficking and Strengthening Families Act; this training will also be available to DSS staff. Along with training on the Reasonable and Prudent Parent standard, SCFPA will provide DSS staff training on Another Planned Permanent Living Arrangement (APPLA) and transition planning for older youth. The SCFPA will also provide training to foster parents on sex trafficking, visitation and shared parenting. SCFPA will offer at least once per year in each of DSS' five regions training on trauma reaction and how it may be manifested throughout a child's development. Trauma reaction training will be open to both pre- and post-adoptive parents.

The SCFPA and DSS will work together to encourage foster parents to attend and become members of their local Foster Parent Association. SCFPA will encourage their local chapters to welcome Kinship Caregivers to their membership so Kinship Caregivers can receive the same training and peer support as licensed providers.

SCFPA will provide college and adult education or 11th and 12th grade (if their high school does not provide one for them) students with laptop computers or laptop computer bundles. The Adult Education and 11th and 12th grade High School (If they qualify) students will receive a laptop along with the needed software, a laptop bag, and a 1-year warranty. College students will receive a laptop computer bundle. This will include a laptop or desktop computer, printer, software, a laptop bag if needed, 1-year warranty, printer ink, and paper. Computers purchased under this program can be replaced every 3 years with the approval of the State Independent Living (IL) Coordinator. Along with the computers, the SCFPA will also provide youth with a College/Household shower. Under this program, Colleges can provide a list of items for review and eligible items can be purchased with the approval of the State IL Coordinator. Youth with special needs or who have reunified with their family are only eligible for bedroom and bathroom items.

The SCFPA will provide and publicize a post-adoption service dedicated email address and telephone line for adoptive families looking for information on post-adoption services and referrals for post-adoption services. When responding to calls and emails the SCFPA will gather information from the adoptive parent on presenting issues and concerns. This is done to determine if there are other issues beyond the presenting ones, which will require multiple and/or targeted referrals for service. During this initial conversation with the parent, the SCFPA

will screen for concrete needs such as mental health, social support, health care, educational services or advocacy to make the appropriate referrals. Any complaints related to DSS, which are received during this process, will be forwarded to the DSS Office of Constituent Services and DSS Regional or State Office staff as appropriate. In situations in which the screening conducted by SCFPA reveals complex needs and/or family instability, SCFPA will refer the family to the appropriate DSS Intensive Foster Care and Clinical Services (IFCCS) office. The SCFPA will also share the information they gathered on the family with the DSS IFCCS office. After completing the initial screening, the SCFPA will make referrals as needed for the following services (this list is not exhaustive): mental health, parenting support groups, health care providers, social support services, educational support services, LGBTQ programs, and teen pregnancy programs. When contacted by adoptive parents SCFPA will aid in navigating the Child Welfare system and will act as an advocate for the parents in working with Child Welfare partners.

The SCFPA shall provide a County based Resource Directory of available services including but not limited to adoption competent Mental Health providers. This directory will be made available via the Internet, email and social media and will also be distributed to DSS Regional Directors, County Directors and the State Office Licensing Director. The directory will also be available for distribution at public events and when adoptive parents contact SCFPA. The SCFPA will use social media to inform adoptive parents on resources in their community and upcoming events.

Department of Administration

The Guardian Ad Litem program is to serve as the child's voice in court. DSS provides for the training for the volunteers and attorneys who serve to represent the child in all court proceedings. The volunteers and attorneys in all counties except Richland are governed by the Department of Administration. Richland County is governed by CASA.

Medical University Hospital

This contract provides care coordination/support and education and training to foster and adoptive parents, schools and SCDSS staff to better serve children with medically complex needs, and their families in Charleston and the surrounding counties. This contract also provides social work and counseling services to include interfacing with the foster family, community agencies, the medical community, and SCDSS. It also provides care coordination to support foster families and assist in the recruitment of foster families.

USC-Columbia Campus

The University of South Carolina Center for Child and Family Studies (UofSC CCFS) utilizes IV-B part 1 funding for child welfare training of SCDSS supervisors, case managers, and attorneys. This funding is also utilized for child welfare quality assurance reviews. The funding utilized from IV-B part 1 is a general deposit for training and quality assurance reviews. Child Welfare training includes parts of Child Welfare Basics and supervisory training.

Palmetto Health Richland

Palmetto Health provides training to foster parents, specifically on medical issues and care for medically fragile children.

Medical University Hospital Authority

The Medical University Hospital Authority provides a primary care practice and care coordination with integrated behavioral health services for children in foster care.

South Carolina Heart Gallery Foundation

The Heart Gallery is a national program that uses the power of photography to help find permanent homes for children who are legally free for adoption and are currently in foster care. With community exhibits and internet photo and video displays, the Heart Gallery is a recruitment tool which increases public awareness of the need for more adoptive families. Heart Gallery staff partner with DSS staff to schedule photo sessions, plan community exhibits, respond to inquiries from interested families and provides targeted child-specific recruitment and family engagement.

The Heart Gallery will arrange a minimum of eight photo sessions per year with at least one session of each of DSS' five regions. Photo sessions will be open to any child in foster care that is legally free for adoption and for whom a potential adoptive family has not been identified. The Heart Gallery will also provide individual photo sessions for children who have special needs, which prevent them from participating at the scheduled regional photo sessions. The Heart Gallery will arrange a minimum of 75 venues per year displaying Heart Gallery photographs; there will be at least one venue in each region each quarter. Each photograph will be framed and included a biographical sketch of the child. The Heart Gallery will maintain a fully developed website for the posting of photographs and descriptions of the children along with management and tracking of inquiries from interested parties.

Heart Gallery will pre-screen received home studies against a child's background factors and placement needs and will forward appropriate studies to DSS for consideration. If a family does not appear appropriate for the specific child named in their inquiry, the Heart Gallery will suggest other children which may more appropriately fit the family. The Heart Gallery will also maintain family background information and home studies in a database, which can be reviewed to find potential matches for other children.

The Heart Gallery will expedite the application and home study process for new families responding to Heart Gallery recruitment. Heart Gallery will complete the initial intake/application submit completed applications to DSS and complete Home Studies.

Seneca Family of Agencies

The Seneca Family of Agencies will provide DSS staff with access to their search function to assist in locating extended family members of children and families who are involved in the Child Welfare system. Seneca's search function yields multiple family members from the search of one name. Seneca will provide a secure search link for employees and the contracted vendor for Family Engagement Services to submit search requests. Seneca will then have a search agent conduct a search of public records to provide a report which will include address history and phone numbers for the report subject and address history and phone numbers for possible relatives. If necessary, the search agent will also research social media, birth records and obituaries to locate possible relatives.

Palmetto Association for Children

SCDSS in conjunction with Palmetto Association for Children (PAFCAF) and Sisters of Charity Foundation held Kinship Summits across the State for two (2) years beginning in September

2017 and in September 2018. Keynote speaker, Dr. Joseph Crumley presented information to DSS (Child Welfare Staff), Community Partners, and other Stakeholders who have a vested interest in Kinship Care during both years. Kinship Coordinators served as panelists and provided insight from the agency's perspective to the agency's mission and efforts to become more "kin-first". The summits allowed for an immense amount of networking as well as granted Kinship Caregivers the opportunity to share their stories and experiences. The goal of the summits was to raise awareness of kinship care and to promote the agency's Kin-First philosophy as well as its collaborative efforts to enhance its kinship care program.

III.B. PROMOTING SAFE AND STABLE FAMILIES PROGRAM (TITLE IV-B, SUBPART 2)

Family Preservation / Family Support

For the duration of this review period, there were no specific services that were primarily geared toward family preservation or support of the family that used Title IV-B, Subpart 2 funding. However, SCDSS recognizes that the Children's Trust service contract as described in the Title IV-B, Subpart 1 section, did render services that were used to support/ preserve the family system and prevent maltreatment.

Children's Trust

See the Children's Trust service description (p.34) for additional information.

The SCDSS has also partnered with the National Youth Advocate Program (NYAP) to provide family group conferencing and team meetings to facilitate communication and empower families to participate in the decision-making process regarding the child's well-being. To fund these efforts SCDDS leverages Title IV-E funds for eligible children and state dollars for family preservation cases.

Columbia Urban League

DSS contracts with the Columbia Urban League to provide the LEVEL UP Program to a total of 400 eligible Foster Care and underserved youth who receive Temporary Aid for Needy Families (TANF) and/or Medicaid and are DSS clients. The LEVEL UP program has been recognized by Casey Family Programs as an evidence-based practice model for youth development.

The Columbia Urban League will recruit, assess, and train participating eligible youth who are between the ages of 14 and 21 for summer employment. The Columbia Urban League also develops an Individualized Case Plan for each participating youth.

Participating youth will first complete 20 hours of training (Pre-Employment Readiness Academy) and then 120 hours of employment. Through the LEVEL UP program participating youth will also receive year-round academic, employment, life skills and personal health training. LEVEL UP participants also receive housing and network building support services. The goal of the LEVEL UP program is to provide each participant with the necessary skills to make the transition from their current situation to independent living and permanency.

Of the 400 LEVEL UP participants each year at least 65% or 260 must be youth ages 14-21 who are in Foster Care.

The year-round support services provided by the LEVEL UP program focus on seven areas of critical need to youth who are transitioning out of the Child Welfare System. These seven areas

of need are as follows: Education, Employment Skills, Life Skills, Personal Health, Housing, Maintaining Supportive Relationships and Key Training. Services provided to individual participants, monthly workshops and all other activities will focus on one of the seven areas.

The LEVEL UP program will employ an Older Youth Transition Specialist who will work exclusively year-round with youth ages 17-21 who are preparing to transition out of Foster Care. The Older Youth Transition Specialist with work with these youth on securing housing, money management, establishing credit, career development, building supportive relationships, pursuing educational and vocational opportunities, finding and maintaining employment, maintaining health and transportation. The Transition Specialist will also work with the youth in the development of their transition plan.

The Pre-Employment Readiness Academy is designed to prepare participants to successfully complete the work experience component of the program. The Academy will include workshop sessions focusing on the goals and objectives of the LEVEL UP program, the program's Code of Conduct, dressing for work, office etiquette, office communication, conflict resolution, resume development, work ethics, and 21st-century job skills.

The Work Experience component of the LEVEL UP program consists of approximately 120 hours of closely supervised meaningful work experience in a professional environment. In developing worksites, the LEVEL UP program will give preference to public and non-profit sector employers such as state and local government agencies.

South Carolina Foster Care Review Board (FCRB)

The South Carolina Foster Care Review Board is a Division of the South Carolina Department of Administration designated by South Carolina law [Section 63-11-700 et. Seq. Code of Laws of South Carolina (Supp. 1996)] to review Foster Care cases every 6 months. The review is the time where the principal parties to a Foster Care case and in a child's life can discuss the case plan, the progress being made toward the resolution of the conditions which necessitated the child's removal from the home and placement in Foster Care, the achievement of treatment goals and to formulate the Review Board's plan for achieving permanency for the child.

The FCRB meeting is open to the biological and legal parents of the child, the legal guardians of the child, the parties holding legal custody or having held legal custody at the time of placement, Guardians ad Litem, Foster Parents, and Treatment Providers. A child who is in Foster Care and is 10 years of age or older shall be provided the opportunity to be part of the review. A review of the case of each child who is in Foster Care shall take place at least once every 6 months. There shall be at least one local Review Board in each of South Carolina's 16 judicial districts.

The membership of the local review board shall be citizens appointed by the Governor upon the recommendation of the county Legislative Delegation.

The review shall include the following determinations:

- o The continuing need for and the appropriateness of the current foster care placement,
- o Compliance with the Case Plan and Court Ordered Treatment Services,
- o The extent of alleviating or mitigating the conditions which necessitated removal and placement in foster care,

- An estimated date or when the child will be returned home or placed for adoption, and
- Any violations of law or policy which create barriers to achieving permanency for the child or that may lead to a less than desirable outcome for the child.

Following the hearing, the FCRB will make their recommendation and share it with DSS, the Family Court that has jurisdiction of the case and the Guardian ad Litem program. FCRB staff will then enter the recommendation and areas of concern into the DSS FCRB CAPSS Portal.

South Carolina Heart Gallery Foundation

For information on the South Carolina Hear Gallery Foundation see the South Carolina Heart Gallery Foundation section found in Update on Service Description, The Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B, Subpart I).

Department of Administration

The Guardian Ad Litem program is to serve as the child's voice in court. DSS provides for the training for the volunteers and attorneys who serve to represent the child in all court proceedings. The volunteers and attorneys in all counties except Richland are governed by the Department of Administration. Richland County is governed by CASA.

Family Reunification

The Nurturing Center INC

The Nurturing Center Inc (TNC) contract was started in FY 2016 to help provide family reunification services by providing support to families that have been affected by abuse and neglect.

TNC provided daily training services to parents and their children to facilitate reunification. The structured services provided for a family treatment plan to individualized services, but also allowed for educational and hands-on training to ensure that each parent has the skills needed to reunify with their children.

TNC utilized an evidence-based treatment, Triple P. Triple P was designed to allow our clients to gain necessary basic and parenting skills. While gaining these skills they were also increasing their knowledge on how to take preventive measures to aid in the family not reentering the system. Triple P allowed parents of various aged children to gain the necessary skills needed in a group and individual setting. Triple P encouraged and helped facilitate healthy bonds and attachments between parents and children, which is a consistent problem with our families.

This contract has ended due to concerns regarding their fidelity and will not be renewed.

Adoption Promotion and Support Services

Certified Investigators

Certified Investigators conduct home studies on potential Foster and Adoptive Families. This service includes interviewing applicants to assess parenting abilities, motivation to adopt, acceptance of child/family factors, as well as the suitability of the applicants as Foster or

Adoptive Parents, from a safety and well-being perspective. This service also includes background checks, compiling family histories, and financial verifications. The services provided through the Certified Investigators Program support the Promoting Safe and Stable Families Adoption Promotion and Support goal of providing activities and services which encourage more adoptions from the Foster Care System when adoption promotes the best interest of the child, including Pre-Adoption activities. This support is essential in assessing parenting abilities and identifying a solid match of a forever family with a child in Foster Care. During SFY2016-17, there were 269 Home Studies to support Adoptive Families and children. With the advent of our Kinship Care Program, along with the responsibility on the Agency to achieve Permanency for children, the overall impact of the Certified Investigator Program is to facilitate Permanency and achieve better outcome measures for children and families.

III.C. MONTHLY CASEWORKER VISIT FORMULA GRANTS

Leadership in South Carolina recognizes the critical importance of caseworker visits to conduct assessments and make decisions at the individual and family level and thus, have been working to systemically improve and strengthen the quality and frequency of caseworker visits. The visits grant has been used to improve the quality of caseworker visits by leadership messaging accountability, data analysis, infrastructure improvements, and practice accountability.

While CWS policies outline the basic standards for caseworker contact with children in care (Chapter 510.4 Case Planning & Management- Monthly & Ongoing Case Planning Child Contacts), there is a great amount of work being conducted to identify key barriers to timely, meaningful, and impactful caseworker contacts. To ensure that statutory performance standards are met, the agency has major reform work in process to solidify and improve agency values, practice, infrastructure and CQI around caseworker visits (*Michelle H. Consent* decree, Child and Family Services Review, and development of a new casework practice model). Along with stipulated visitation frequencies, the policy also requires that children are visited no less than is needed to assess their progress and ensure their needs are met.

Regional Directors, County Directors, and Supervisors communicate in staff meetings requirements of the law and strengthened leadership practice in reinforcing the importance of monthly face-to-face casework contacts by using batch analysis reports, human service dashboard reports, and case review findings to help staff meet benchmarks and understand visits requirements. In system reform work with *Michelle H.* and the CFSR, there is a high interest in improving supervisor staffing with case managers and helping supervisors be better coaches and mentors.

Regional and County Directors are holding supervisors accountable for conducting regular staff meetings to discuss case activity including action to visit foster children; focusing on outcomes for the monthly visits, reviewing dictation to see quality of visit, and regularly using human services dashboards, batch analysis reports and push reports to assess if staff timely completing tasks.

Supervisors are working with caseworkers to ensure that they clearly understand the required tasks that comprise a face-to-face contact with a foster child on their caseload and the importance of timely documentation of their interaction with foster children on their workload (Documentation of monthly contacts must be entered into CAPSS prior to the end of each month 510.4 Case Planning & Management Procedures: 3. Monthly & Ongoing Case Planning Child Contacts).

Caseworkers at their best, when supported and supervised, are working to improve practice in meeting with children and families to monitor children's safety and well-being; assessing the ongoing service needs of children, families and foster parents; engaging biological and foster parents in developing case plans; assessing permanency options for the child; monitoring family progress toward established goals; and ensuring that children and parents are receiving necessary services.

III.D. CHAFEE AND ETV

Independent Living Services

The South Carolina Department of Social Services (SCDSS) is the designated state agency that administers, supervises, and oversees the Chafee Foster Care Independence Program (CFCIP), and the Education and Training Voucher (ETV) Program.

The goal of the South Carolina Independent Living Program is to provide the developmental skills necessary for Youth in Foster Care to live healthy, productive, self-sufficient and responsible adult lives. The purposes of these services are to provide youth in Foster Care with opportunities to learn needed independent living skills and to increase the likelihood of a successful transition from the Foster Care System.

Through the Child Assessment in the Child and Adult Protective Services System (CAPSS), and through the administration of a life skills assessment, such as the Casey Life Skills Assessment (CLSA), the youths' Independent Living (IL) Goals are based on the specific life-skills needs of the youth. Each youth is assessed on an annual basis. These Independent Living Goals and the goal-related services are offered concurrently with the youth's Permanency Goals, regardless of their Permanency Plan(s).

Youth ages 14-18 years old in the Department's custody are eligible for Chafee funds. Youth that left the Foster Care System after reaching age 18, who have signed a Voluntary Aftercare Placement Agreement, are eligible for Chafee funds. Youth who were adopted from Foster Care at age 16 or above, and those youth who were placed in Kinship Care/Guardianship placements on or after reaching the age of 16, are eligible for all Chafee and ETV funds, with the exclusion of housing expenses. Youth may be eligible for these services if they aged out of Foster Care in other states at age 18 and moved to South Carolina for residency or educational purposes. The youth are required to complete the P.A.T.T.Y. (Providing Assistance to Transitioning Youth) Form 30206, as a part of joint planning and assessment with the foster care staff.

> ***Specific accomplishments since the submission of the 2015-2019 CFSP and subsequent APSRs***

- Implemented program changes as mandated by the Family First Prevention Services Act by revising policy, creating publications to reflect the policy changes, training agency staff and stakeholders on the name changed and program benefits.
- Mass mail out to eligible youth that was reflected in the new policy changes to inform youth of the changes to the program.
- Continued collaboration with United Way Youth in Transition Committee, which consists of more than 40 agencies (see attachment), SC Inter-Agency Homelessness, Regional Continuum of Care Agencies, etc.
- Collaborated with Urban League for youth employment opportunities;

- Participated in the NYTD Constituency Group;
- Participated in the State and Regional Human Trafficking Task Force;
- Collaborated with ABLE South Carolina and the Equip Peer Support Groups for youth with special needs;
- Continued to create partnerships with local vendors which promoted Independent Living skills, leadership skills, employment skills, education, and social skills;
- The IL staff conducted training throughout the year to Group Home Providers, the Foster Parent Association meetings, partners, Guardian ad Litem volunteers, and the SCDSS staff;
- Partnership with the FDIC to start statewide financial training to youth in foster care
- Created partnership with Midlands Technical College to implement a program to support youth in transition attending technical college with the hope of replicating statewide through the South Carolina Technical College Association.
- Working with SCDEW, WIOA/SCWorks to streamline the referral process, tracking services, and increase enrollment.
- Submitted policy for Credit Reporting and updated credit reporting forms.
- Began working with FDIC on providing a Financial Literacy Curriculum (Money Smart) using various banks throughout the State as program providers.

The SCDSS Regional IL Advocates:

- Offered technical assistance to SCDSS County staff through group training and one-on-one coaching;
- Assisted with Transition Planning Meetings;
- Monitored and reviewed the CAPSS reports for NYTD data, Transition Planning Meetings, and Independent Living goals in Domain 8 of the Child Assessment;
- Provided updates and resources/tools for Caseworkers;
- Outreach efforts directly to youth to help ensure access to and understanding of IL Services;
- Served on partnering agency and non-profit boards and committees to promote access to services benefitting transitioning youth;

Accomplishments related to the 8 CFCIP Program Purposes, not in the Update to the Plan for Improvement, since submission of 2015-2019 CFSP and subsequent APSRs.

- Collaborations with local agencies to decrease homelessness amongst youth transitioning from foster care - Purposes
- Employment support services (Workforce Innovation and Opportunity Act (WIOA) referral, Job Corps, and Vocational Rehabilitation) - Purposes 1, 2, 5, 7, 8
- Improved access for youth to Special Needs Services (ableSC, Vocational Rehabilitation, Department of Disability and Special Needs, Department of Mental Health, Leaphart Place)- Purposes 1, 2, 3, 4, 5, 6, 7, 8
- The Identity Theft Coordinator is now able to access, review and resolve discrepancies on youth credit reports.
- Developed strong partnerships with agencies and organizations enable us to serve our youth towards greater well-being outcomes in normalcy, academic success, employment

readiness, and financial literacy & stability- educational consultants, financial literacy coaches, mentors, and workforce development.
- Assisted in composing the Youth Plan and Community Impact Plan with The United Way of The Midlands Youth in Transition Initiative

Planned activities for FFY 2020

- Collaborate with Clemson University Youth Learning Institute to provide Leadership and Sibling Retreats.
- Update basic Child Welfare Basic training for IL through the University of South Carolina, Center for Child and Family Studies.
- The SCDSS IL Advocates will continue to provide training to the Foster Parents statewide.
- The SCDSS IL Team will continue to provide training to Agency staff on proper procedure for conducting and documenting the IL needs assessment through coaching and providing technical assistance, and information handouts.
- The Chafee Independent Living Program will continue to work with the SCDSS CAPSS Team to resolve all CAPSS issues related to Independent Living and NYTD.
- The IL Team will provide a Graduation Ceremony to commemorate the accomplishments of youth graduating high school and any post-secondary education.
- The IL Team will provide Quarterly Independent Living Advisory Committee Meetings with stakeholders and community partners.
- The IL Team provide training for Agency staff and youth in Foster Care on Identity Theft and credit reporting.
- The IL Team will provide Financial Literacy Workshops for young adults receiving housing assistance.
- Create a centralized Independent Living Business Office to ensure funds are being dispersed in a timely manner.
- Implement county transition specialists, who provide intensive transition planning and life skills development for older youth, support training of staff and providers, and document IL services timely and accurately.
- Integrate technology into daily work to meet youth where they are, engage their awareness and ensure access to Independent Living services.
- Restructure county youth groups and host regional youth conferences to train youth in life skills and IL services.
- Continue to provide funds for transitional services.
- Create a directive memo and policy for the referral process to SCDEW, WIOA/SCWorks to streamline the referral process, tracking services, and increase enrollment.
- Increase participation of youth in transition in policy and program improvement
- Full implementation of the credit reporting requirements for youth in foster care.

The state's plan for FFY 2020 to inform stakeholders and others of the NYTD Review for the state

The NYTD Review will be shared, as updated, with stakeholders in the Independent Living Advisory Committee Meetings, at the SCDSS Stakeholders Meetings, and through electronic copies, if requested. The NYTD Review will also be shared with Agency staff. The CFCIP staff will also share this information in their Region/County training with Agency staff, providers, and community partners/stakeholders.

How the state informed and involved partners, tribes, courts and other stakeholders related to NYTD data

The state's response is the same information as provided in the state's plan for FFY 2020.

How the state improved NYTD data collection, based on the plan outlined in the 2015-2019 CFSP and subsequent APSR submissions or NYTD Review

During the period, July 1, 2018 through June 30, 2019, the NYTD Survey Team completed the surveys of 21-year olds in Cohort 2. On October 1, 2017, the NYTD Survey Team began the survey of 21-year-old youth in Cohort 2. The survey administration for the 21-year olds continued through September 30, 2018. The surveys for Cohort 3, 19-year-old survey were completed by summer 2018. The data collection for the Cohort 3, 19-year-old survey began October 1, 2018.

The UofSC NYTD team met with the SCDSS IL Advisory Committee in March 2019 to share preliminary findings on housing and homelessness from the Cohort 2, 19-year-old survey. A summary report and infographic of findings from this wave of data collection was sent to the IL team in April 2019. Qualitative data from the surveys have also been analyzed and a report is under development. A final report of Cohort 2's data across all waves will be drafted by the end of May 2019. Analysis of the Cohort 3, 17-year-old survey began in late April/early May 2018. A preliminary report of the findings will be available in the summer of 2019. A meeting to discuss findings from past waves of data collection along with any implications for service delivery and training will take place in July 2019.

The UofSC NTYD team is currently finding ways to enhance communication with youth who take the survey. The team is exploring improvements to their Facebook page, new topics to add to the monthly listserv, and other opportunities to reach youth. By the end of FY2019, the UofSC NYTD team will begin exploring the previously collected data in more depth, including linking data from CAPSS with the NYTD survey. The UofSC NYTD team will also be exploring new ways to communicate findings with youth and the DSS IL team.

Other outreach activities provided by the UofSC NYTD Survey Team included:

- Networked with partners at the SCDSS IL Advisory Committee meetings (JUL, OCT, JAN);
- Provided NYTD youth and adult brochures and handout on the NYTD Survey Process;
- Reached out to the South Carolina Foster Parent Association (SCFPA) for posting on the SCFPA website of the launch announcement for the launch of the 21-year-old survey.
- Check of TANF, DMV/DL, Medicaid, and   SNAP programs to find youth to complete the surveys.
- Fliers sent to all workers to send out to youth.
- Networked on social media, telephone, and email regarding surveys.

How the state has used these data and any other available data in consultation with youth and other stakeholders to improve service delivery in the last year

NYTD team trained staff, administration, community partners, and care providers in understanding and utilizing NYTD data to inform practice and assess the quality of services

provided. This was accomplished through Human Service Leaders conference calls, Palmetto Association for Children and Families, SC Foster Parent Association, & the Independent Living Advisory Committee.

In reference to engaging youth from State Youth Advisory Board (GOALL) in transition planning, SCDSS IL has revised the assessment tool (formerly known as PATTY Form 30206 to Transition Planning Form 30206) to include more comprehensive planning and collaboration with the youth, and requested the form to be placed on SCDSS Server "Master Forms Index" . In addition, the IL team has reached out to provide training to community partners, care providers, guardians at litem, and other adult support systems for youth on the importance of transition planning.

Currently, the team is in the process of revising the GOALL program and will be planning to resume these groups within the next year.

Collaboration with Youth and Other Programs

- The IL team will continue to develop programming that promotes youth-adult partnerships to support sustained youth engagement efforts and strengthen programs through training youth to advocate for themselves and others, identify adult supports in their lives, and make meaningful connections
- The IL team will continue to provide and encourage multiple opportunities for youth to develop, master, and apply critical skills, including life and leadership skills through independent living leadership training
- All youth in foster care, ages 14 and up, will continue to participate in collaborative case planning and transition planning per agency policy in compliance with federal legislation
- The IL team will continue efforts to use technology and social media to engage youth in program planning and policy development
- Attended the Chafee Grantees Meeting in Washington, DC with a youth ambassador in July 2018.
- A representative of the Chafee program attended the Youth Workforce Development Symposium in Chicago (December 2018) in collaboration with SCDEW.

Activities in FFY 2019 to involve youth/ young adults in the CFCIP, CFSR, NYTD, and other related agency efforts

The IL Team will:

- Continue to meet with the Independent Living Youth Association to seek input on policy and programming,
- Continue to extend the invitation to youth to participate in the IL Advisory Committee Meetings,
- Promote youth/young adult Independent Living Conferences/regional training, and
- Strive to increase peer support amongst young adults formerly in foster care.

Activities in FFY 2019 to involve the public and private sectors in helping adolescents in Foster Care achieve independence

The SCDSS Independent Living Program will continue to partner with:

- the UofSC Center for Child and Family Studies staff; Children's Law Center, the SC Foster Parent Association; the Palmetto Association For Children and Families; Group Care Providers; SC Department of Motor Vehicles, the SC Department of Education, the SC Department of Mental Health, the SC Department of Health and Environmental Control (Adolescent Health), the SC Department of Health and Human Services (Medicaid), the State Governor's Office (the Foster Care Review Board and the Guardian ad Litem programs); SC Equality; the Department of Juvenile Justice; Columbia Urban League; Job Corp; AbleSC; State Alliance for Adolescent Sexual Health (SAASH), SC Center for Fathers and Families, Clemson University Youth Learning Institute; Sisters of Charity; Transitions Homeless Shelter, Sexual Trauma Services of the Midlands, South Carolina Citizen Review Panel; United Way of the Midlands, SC Human Trafficking Task Workforce Development, FDIC, and Federal NYTD Constituency Group.
- Created partnership with Midlands Technical College to implement a program to support youth in transition attending technical college with the hope of replicating statewide through the South Carolina Technical College Association.
- The South Carolina Foster Parent Association (SCFPA) will continue a contractual agreement with the SCDSS to provide "Household Showers" for youth who will transition from Foster Care, or "Dorm Showers" for college-bound youth. The SCFPA will continue the "On the Road Again Program" to provide donated vehicles to youth in Foster Care. They will also continue to provide care packages to college students through the Pack-A-SACK program, and laptop computer bundles for 11th-12th-grade high school and college students.
- The University of South Carolina, Center for Child and Family Studies will continue a contractual agreement to provide the NYTD Survey for youth in transition.
- The Clemson University Youth Learning Institute (YLI) contractually provided and will continue with the SCDSS to provide training opportunities in camp and retreat settings for youth, and youth empowerment conferences. The YLI staff worked with the SC CFCIP to develop curriculum that met NYTD guidelines.
- The Urban League "Level Up Program" prepared youth in Foster Care with introductory employment skills and Independent Living skills throughout the year, to include six (6) weeks of paid summer employment. The Level Up Program is a project undertaken in conjunction with the Columbia Urban League, to address job readiness, and offer a youth curriculum encompassing employment and career, individualized counseling, transportation, and mentoring. This will continue to be provided in FFY 2019.

Activities in FFY 2019 and FFY 2020 to coordinate services with "other federal and state programs for youth: abstinence programs; local housing programs; programs for disabled youth (especially sheltered workshops); and school-to-work programs offered by high schools or local workforce agencies

- Several Group Care facilities have "Independent Living" cottages designed to assist youth in the transition out of Foster Care.
- Community shelters and SCDJJ participated on the IL Advisory Committee, which meets quarterly to advise the Agency on youth access to IL services, education, and employment opportunities and community resources.
- Working with the FDIC to provide a financial literacy (Money Start) program for foster youth throughout the state by partnering with various banks to offer the classes.
- The Chafee Foster Care Independence Program:

- has been discussing options for young adult transitional living programs in order to decrease occurrences of homelessness and becoming victims of human trafficking, including sex trafficking. We will continue to seek partnerships in the community for opportunities to create and build transitional living programs;
- Will continue referrals to transitional housing facilities, such as Leaphart Place and MIRCI home for youth/young adults in transition, for youth with disabilities or special needs
- will continue its partnership with SC Vocational Rehabilitation to assist in placing youth with disabilities and developmental barriers to employment;
- will continue its partnership with Job Corps to provide additional education and career choices for youth.
- will continue its partnership with SCWorks to provide access to WIOA funds;
- will continue to collaborate with the South Carolina Interagency Coalition for the Homeless Committee Meetings;
- will continue to coordinate with the youth program at the Transitions Homeless Shelter;
- will continue to coordinate with United Way Youth In Transition Committee;
- continue to explore community options for homeless youth and opportunities to create partnerships;
- will continue its partnership with Able SC, a Center for Independent Living (CIL), an organization that offers services to empower youth with special needs and increase successful independence. AbleSC offers a broad curriculum in activities and skills training for daily life, safety and wellbeing, customized to meet individual needs.

Activities in FFY 2019 and FFY 2020 to collaborate with governmental or other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking

The Chafee Foster Care Independence Program:

- Will continue to participate in statewide and regional task force committee meetings on human trafficking;
- Is planning to help coordinate training to SCDSS staff and youth;
- Will continue to explore community options to build partnerships and develop strategies to reduce the risk of youth with Foster Care experience from becoming victims of human trafficking; and
- Will continue to collaborate with the South Carolina Coalition Against Domestic Violence and Sexual Assault (SCCADVASA), Helping Hands Healing Hearts, Lighthouse for Life, and SWITCH to increase awareness and provide services to youth in need.

Activities in FFY 2019 and planned for FFY 2020 to provide specific training in support of the goals and objectives of the states' CFCIP and to help stakeholders understand and address the issues confronting adolescents

The Chafee Foster Care Independence Program training activities in FFY 2019 and to continue in FFY 2020:

- Provide training to SCDSS County Business Office staff on IL services and the IL funds disbursement process
- The SCDSS Regional IL Advocates provide ongoing training to help foster parents, relative guardians, adoptive parents, workers in group homes, and caseworkers understand and address the issues confronting adolescents preparing for independent living;
- The IL Team trains Guardian ad Litem (GAL) volunteers statewide;
- Youth across the state are empowered with the information provided through youth groups, peer training, leadership retreats, and involvement in agency meetings;
- The IL Team provides ongoing training, daily technical assistance, and coaching regarding issues that youth face in general as well as case-by-case guidance to foster parents, relative guardians, adoptive parents, workers in group homes, case managers and youth
- The IL Team provides training for Department of Juvenile Justice on services available to former foster youth transitioning from incarceration and possible issues they may face.
- Created partnership with Midlands Technical College to implement a program to support youth in transition attending technical college with the hope of replicating statewide through the South Carolina Technical College Association.
- Partnered with the FDIC to provide financial literacy (Money Smart) training.

Consultation with Tribes

The Catawba Indian Nation is the only federally recognized Indian tribe in South Carolina. Since the submission of the last APSR, the Chafee Foster Care Independence Program has participated in three Catawba Indian Nation-SCDSS Workgroup collaborative meetings.

Efforts to coordinate the programs with tribes

The CFCIP receives reports to identify SCDSS involvement with Native American youth. The SCDSS staff consults with the staff members of the Catawba Indian Nation when a youth is identified as a member of or eligible for membership in the Catawba Indian Nation.

How the state ensures that benefits and services under the programs are made available to an Indian child

The CFCIP continues to collaborate with the Catawba Indian Nation to ensure that any and all youth in Foster Care in South Carolina that are identified as Native American Indian are informed about the CFCIP and the benefits available to eligible youth, through the state including scholarships, housing assistance, and medical services, and through the tribe. The Catawba Indian Nation published a booklet, A Brief History of the Catawba People, to inform youth identified as Catawba Indian of their cultural heritage and services available through the tribe.

All Chafee and ETV programs provided through the CFCIP are available to any Native American youth in Foster Care according to the same eligibility criteria as non-native youth. The Catawba Indian Nation and the Agency will continue to work together to provide post-Foster Care Services for Indian youth emancipating from Foster Care after reaching the age of eighteen (18) years old. A representative of the Catawba Indian Nation is the contact for youth mentor support and can be reached through contacting the Catawba Indian Nation, Director of Social Services.

Concerns raised by the tribes during consultation on accessing Chafee services and how the state plans to address these concerns

The tribe has not expressed any concerns related to accessing CHAFEE services since the submission of the last APSR.

Tribal request to develop an agreement to administer or supervise the CFCIP or an ETV program

Since the submission of the 2015-2019 CFSP and subsequent APSRs, the Catawba Indian Nation has not requested an agreement to administer or supervise the CFCIP or an ETV program.

III.E. SERVICES FOR CHILDREN ADOPTED FROM OTHER COUNTRIES

Until August 2018, SCDSS would have had to read, approve, and enter all international adoption home studies and families name into the CAPSS system. Due to changes with requirements and many international counties not allowing international adoptions SCDSS was no longer obligated to approving and entering all families' names into their database system.

DSS currently does not provide any related services to children adopted from other countries. There are several agencies that provide services to this population, however, there have been no efforts made with any of the agencies to provide an MoU to satisfy this requirement. However, SCDSS is currently reviewing their policy regarding Adoption Preservation Services to determine how request for services from families that adopt internationally.

Furthermore, DSS currently does not have a system in place to track those who were adopted from other countries that become involved with the agency for abuse and/or neglect. DSS has recently requested assistance from its Division of Technology Services (CAPSS support) to add a way to track children who have been adopted in the CAPSS system. The Division of Technology Services will start working on developing the above requested item in the near future. The permanency division within DSS has requested that this proposed request not only capture those adopted from other countries but those adopted through foster care and private domestic adoptions as well.

III.F. SERVICES FOR CHILDREN UNDER THE AGE OF FIVE

Permanency Pathways

Since the last APSR submission, South Carolina has been actively working to place children ages 0-5 in the least restrictive, most family-like settings unless they meet certain exceptions set forth in the policy. South Carolina has been successful in this work and currently, there are no children ages 0-5 placed in non-family-like settings except those who meet one of the exceptions. One of the challenges South Carolina is experiencing is the lack of foster homes within the child's county of origin. This impacts frequent and quality visitation between parents, children, and siblings.

It is crucial to have an array of foster homes within the county in which the child was removed. Children that are matched well initially tend to fare well in foster care, and likely that foster placement will adopt. Through data analysis and working with outside consultants, the agency is identifying counties where there is an insufficient number of foster home providers. Through

this work, diligent recruitment plans will be developed. Counties that identify a deficiency of foster homes for children ages 0-5 will develop strategies to address this need.

South Carolina will continue to develop more specific strategies to move children ages 0-5 to permanency sooner. Priorities will be to develop diligent county specific recruitment plans, develop and implement training to staff on quality visitation for parents, children and siblings, train foster parents/staff on shared parenting, develop and implement Kinship Care training to staff and family group conferencing partners. South Carolina will continue to correspond with other jurisdictions on additional promising practice to improve timeliness to permanency for children ages 0-5 years.

Children age 5 and under have benefited from targeted improvement efforts in adoptions. Over 50% of all finalized adoptions are on children 0-5 years old.

The goal was clearly stated to all aspects of the agency, court system, GAL and Foster Care Review Board (FCRB) to assist in any aspect of increasing permanency that fell within their venue. The SCDSS's attorneys' supervision and appointing authority was changed; Judges assisted by providing additional court time; GALs were asked to support the agency's request not to allow for court cases to be continued by the family's attorney; assistance was provided in ensuring home studies and children's background summaries were completed timely; and judges provided the agency with Adoption Day Hearings to allow for as many children as possible to be addressed.

SCDSS does not anticipate a large number of children under five to have a delay in their permanency. The agency has a specialized program for the medically fragile children to ensure they are followed closely for multiple medical, developmental or psychological issues by specialized social work staff who have lower caseloads and receive clinical support from the state's psychiatrist and from the child's medical team.

In looking forward, the agency will continue to monitor through the agency SACWIS system the number of children under five years of age who enter foster care. Monthly reports draw attention to children who do not have a permanent plan accomplished within nine months of entering care and indicate the age of children legally free for more than 90 days. The agency will require each adoption director to report quarterly to the division director all attempts to local an adoptive resource for these children. Recruitment strategies are included in the Foster and Adoptive Parent Recruitment section of this report. Adoption specialists are available to discuss children awaiting adoption with approved prospective adoptive families and to encourage families to consider children who are older or have developmental delays.

SCDSS recognizes that their foster parents adopt approximately 65% of all children adopted from foster care. Thus, an emphasis has been placed on the recruitment and retention of foster parents. Concurrent planning to identify a pre-adoptive family as early as possible into the child's placement into foster care was encouraged so the child could have earlier stability in their permanent placement when reunification was not likely.

The agency emphasized to foster parents the importance of developing a relationship with the birth family when possible to act as a resource family or a peer-to-peer role model to the birth family. The goal is to provide the child, who may be reunified with the birth family, with a

relationship, which allows for ongoing contact and support to the family from their foster parents. Should the parent's rights be terminated, the goal would be for the relationship to allow the child to have first-hand knowledge of the birth parents and the medical and social information as the child grows into adulthood.

The plan to monitor these children is through the CAPSS system and to have each adoption director to report regularly to the division director all attempts at locating an adoptive resource for the child. Recruitment of an adoptive family for these children will be on Adopt-Us-Kids, State Seedlings, Heart Gallery, Foster Parent Association and all forms of state child-specific recruitment activities.

SCDSS is monitoring all children in the foster care system to ensure they receive permanency more expediently than in the past. Emphasis has always been on moving the younger children to permanency as quickly as possible, and traditionally, the children under the age of five years have reached permanency quicker than the older children in the foster care system. SCDSS will continue efforts of ensuring the children in this population are measured and their plans are closely monitored to enhance the services needed to achieve permanency.

SCDSS and the state foster parent association provide training for workers and foster parents on medically fragile children. Additionally, the USC medical school and the Palmetto Hospital have a special interest in the medically fragile and offer specific training related to caring for these children for foster parents and workers.

County staff shall emphasize the importance of reunification to families immediately upon removal; implement a Family Group Conference; and request for court intervention when the parent is not complying with the treatment plan. The concurrent plan is to be changed to the primary plan and the case fast-tracked to monitor the outcome of the plan in a timely manner. These are monitored by monthly dash reports, conferences with country directors, meetings by the deputy director with the legal staff and contacts with all agency involved parties such as GAL, FCRB and court administration when needed to set priorities or resolve conflicts within the cases.

Services planned for children under the age of five with developmental delays include:

- Assessment of the children reflected in the numbers in the above charts to determine which special needs may be causing a delay in adoptive placements and thus the child's ability to reach permanency. Steps include:

    o Research all children by name and length of time in care for the population under age 5
    o Hold a Permanency Roundtable for these children
    o Determine how many are members of a larger sibling group to determine if that has had an impact on the length of time in care
    o Determine the number of children's whose legal status is on appeal
- Referrals for services to enhance developmental capacities. Steps include:
    o Determine through the Permanency Roundtables if the children are receiving the services needed to address their need

- o Identify any service needs that are not being met and identify a resource to assist with meeting the needs
- Referrals for Family Strengthening and Support for either the biological parent, relative or adoptive parent to enhancement timely placements. Steps include:
  - o Ensuring that all relatives have been sought and evaluated for potential placement
  - o If Medicaid Waivers or other funding sources could assist in the family in meeting the child's special needs
- Referrals for adoption recruitment that are more specific to the needs of the child:
  - o SCFPA has developed a contractual position with the agency to assist the foster parent with considering adoption for a child that perhaps in the past they were hesitant to adopt
  - o Heart Gallery has also entered into a contractual agreement with the agency to assist in specialized recruitment activities for a number of hard-to-place children. They have also contracted to complete home studies on families who inquire about a specific child
  - o GAL, Children Come First, and Foster Care Review Board will all work collaboratively in efforts to identify an adoptive family for these children
  - o Ensuring that recruitment referrals to national exchanges such as AdoptUSKids are completed as early as possible for every child who does not have an available identified adoptive family.

Age Group when adopted	#	%
<=5 years old	2115	52%
6-17 years old	1877	47%
>=18 years old	44	1%
Total	**4036**	**100%**

Age on Adoption	#	%
Infants	83	4%
1-year-olds	460	22%
2-year-olds	504	24%
3-year-olds	438	21%
4-year-olds	343	16%

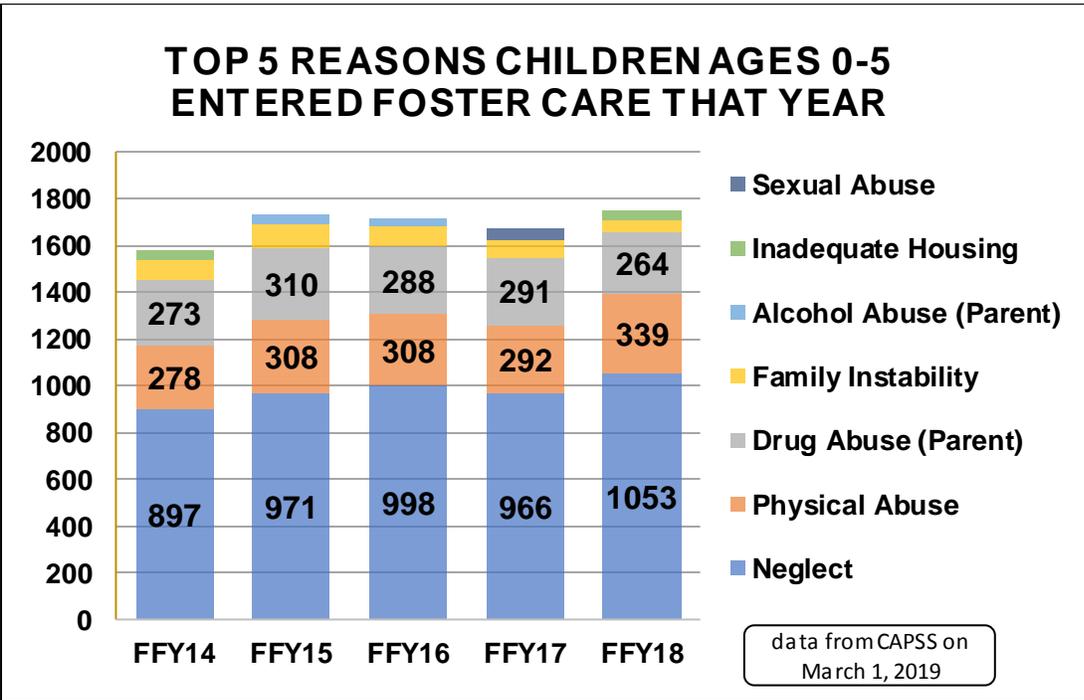|		
5-year-olds	287	14%
	2115	**100%**

The agency has developed a protocol to staff every child's case with a plan of reunification at six months and to address barriers to reunification that would prevent the completion of that plan by 12 months. Once the barriers are identified, if there are services that could enhance the family's behavioral changes within an additional three months, they must be implemented. If at nine months the situation is not showing marked improvement, a Permanency Planning Hearing is to be held and the plan for the child changed to TPR and adoption when appropriate. Full disclosure at the Family Group Conference is a must and key to helping parents and extended family members understand the importance of permanency for the children.

The SCFPA provides training on developmental milestones for foster parents. USC Training Center provides a course for staff on Developmental Milestones and recognizing developmental delays in children

- SC Foster Parent Association has a contract with the agency to provide pre-licensure training as well as ongoing training to foster parents throughout the year. Each year, statewide foster parent association training is held, and multiple topics are available for foster parents and DSS staff to attend.
- SC Association of Children's Homes and Family Services provides training for state public and private foster homes as well as group homes and institutions in SC.
- Each Certified Placing Agency provides additional training for therapeutic foster parents who provide care for medically or emotionally fragile children.
- Children's Trust, USC Medical Center and Children's Law Center each have yearly conferences that multi-disciplinary speakers attend to address a different dynamic for special needs children. Topics such as brain injuries, Fetal Alcohol Spectrum Disorders, and Autism are examples of topics addressed in past conferences. Both professional staff and foster parents may attend these conferences.

SCDSS, SCFPA, SCHG, GAL, and SCFCRB will all work collaboratively in efforts to identify an adoptive family for these children. Children in this age group for whom the plan is reunification will also receive priority with the agency. Baby Net, SC Department of Education, Head Start, Department of Disability and Special Needs (DDSN) and DHEC are all providers of services that work closely with SCDSS to ensure the agency is meeting the developmental needs of the children in agency custody.

Training has been developed to encourage worker understanding of the importance of permanency and stability on the development of the child five years of age and younger. SCDSS training partners, USC, and the SC Foster Parent Association have existing training curriculum for both foster parents and workers on the developmental milestones of children as well as the lags in development that should receive the attention of a developmental specialist. SCDSS also has been including trauma-informed practice and the effects of trauma on children, including developmental delays, in training for staff and foster parents.

TOP 5 REASONS CHILDREN AGES 0-5 ENTERED FOSTER CARE THAT YEAR

	Neglect	Physical Abuse	Drug Abuse (Parent)
FFY14	897	278	273
FFY15	971	308	310
FFY16	998	308	288
FFY17	966	292	291
FFY18	1053	339	264

Legend (top to bottom): Sexual Abuse, Inadequate Housing, Alcohol Abuse (Parent), Family Instability, Drug Abuse (Parent), Physical Abuse, Neglect

data from CAPSS on March 1, 2019

The SCDSS has targeted the zero-five population with preventive services through collaboration with the Children's Trust of South Carolina (CTSC) and other state and non-profit partners with services such as BabyNet and Strengthening Families Program.

Additionally, SCDSS has initiated a proposal to establish a statewide community-based approach to coordinate the development, implementation, and monitoring of the plan of safe care for substance-affected infants, mothers and other caregivers who come to the attention of Child Protective Services. Under this proposal, SCDSS child welfare staff and community service providers will provide case management, referral and linkage, assessment and screening, concrete aid, education and services, and recovery supports to children and families during pregnancy and up to one year after birth.

BabyNet

BabyNet is the state's early intervention agency for children birth to three years of age that falls under Part C of the Individuals with Disabilities Education Act (IDEA) (Public Law. 108-446). As required by the CAPTA 2003 reauthorization, and in recognition of the special needs of child abuse and neglect victims, these children and any known child suspected of having developmental delays, are referred to BabyNet for developmental assessments. BabyNet provides services to children in foster care that meets the state eligibility criteria under Part C of IDEA. As a federal entitlement program, services listed on the Individualized Family Service Plan are based on the needs of the family to help address the child's unique strengths and needs.

Services include, but are not limited to: Assistive technology devices and services, Audiology services, Family training, counseling, and home visits, Health services, Medical services, Nursing services, Nutrition services, Occupational therapy, Physical therapy, Psychological services, service coordination services, Sign language and cued language, Social work

services, Special instruction, Speech-language pathology services, Transportation and related costs and Vision services. Health, medical, nursing, and transportation services are only provided to the extent needed to allow parent and child to participate in the other services. As a program, which is regulated by the Elementary and Secondary Education Act (now Every Student Succeeds Act), all services provided by BabyNet must meet the definition of evidence based. The Every Student Succeeds Act defines evidence-based as a program or service which demonstrates a statistically significant effect on improving student outcomes or other relevant outcomes based on evidence from at least one well-designed and well-implemented experimental study, or demonstrates a rationale based on high quality research findings or positive evaluation that such activity is likely to improve student outcomes or other relevant outcomes; and includes ongoing efforts to examine the effects of such activity.

BabyNet measures the effectiveness of these programs at entry and exit. The progress of all eligible children receiving at least six (6) months of early intervention services is rated on the Early Childhood Outcomes as required by the U.S. Department of Education, Office of Special Education Programs. These outcomes measure the extent to which children receiving Part C services demonstrated progress and the extent to which they achieve functioning similar to same-aged peers in: developing and maintaining positive social-emotional relationships with adults and same-aged peers; acquire and use knowledge and skills and use appropriate behaviors to meet their needs. In addition, all children with an Individualized Family Service Plan must be periodically re-assessed using developmentally appropriate instruments to monitor progress on individualized functional goals.

The Office of Health and Well-Being are currently tracking BabyNet. In the past, the caseworkers were responsible for the referrals and the updates on children receiving BabyNet services. Caseworkers still make the referrals and all the regions are responsible for sending the updated forms to a worker in the Office of Health and Well-Being. This process was recently changed to allow for more continuity and accountability in ensuring services are being received.

South Carolina Voucher Program

The South Carolina Voucher Program provides childcare assistance, if funding is available, for families that have an open child protective services case, family preservation case, or for a child in an open foster care (FC) case. Children in Intensive Foster Care and Clinical Services (IFCCS) have also been approved on a case-by-case basis. Pre-adoptive parents may receive childcare while in the process of adopting a child from SCDSS custody if all other eligibility criteria are met. However, once the adoption is finalized, the SC Voucher Program is not able to provide childcare through this category. A child in Foster Care, who otherwise meets the Program criteria, is eligible for childcare through age twelve (12) years old. However, a child thirteen (13) years old through age eighteen (18), who should not be left unsupervised or who has developmental, emotional concerns or other special needs, may qualify for childcare after the age of twelve (12) years old.
In order for a foster parent to receive benefits from the SC Voucher Program, the Foster Parent must be employed, in school/training, or disabled.

A foster parent may receive childcare assistance for the baby of a child in custody when the SCDSS does not have custody of the baby. The baby is eligible if the mother (child in foster care) remained in foster care and the child resides in the mother's custody. In addition, the mother must be attending a school or employed.

Childcare vouchers for children receiving child welfare services FFY 2014 – FFY2018

Number of children who received childcare vouchers of any duration ranging from 1 – 52 weeks in:	FFY2014	FFY2015	FFY2016	FFY2017	FFY2018	5 Yr. Total
Child Protective Services	6,320	8,961	13,215	16,696	15,691	61,153
Foster Care	9,031	7,215	8,108	10,047	10,869	45,270
Total number of children in child welfare who received childcare vouchers for any duration ranging from 1 – 52 weeks.	15,351	16,176	21,323	26,743	26,830	106,423
Average monthly number of children receiving child welfare services who received childcare vouchers.	1,279	1,348	1,777	2,229	2,236	8,869

Head Start

Head Start is a free program for young children from low-income families to help them prepare for success in school–and in life. Children participate in activities that help develop educational and social skills. They also receive nutritious meals, health care, and play in a supervised setting. Head Start also provides resources and support for the child's first and most important teachers, their parents and others who care for and teach them.

There are three options: center-based, home-based, and family childcare options. The center-based option delivers a full range of services that are educational and developmental that are delivered in a classroom setting. The home-based setting consists of home visitors once a week working with parents and their children. Together, the home visitor and parents watch and think about the child. They plan ways to help the child learn using parent-child interactions, daily routines, and household materials. A small group of children, parents, and their home visitors also get together on a monthly basis for group socialization. The family childcare program option delivers the full range of educational and child development services. They are primarily delivered by a family childcare provider in their home or other family-like settings.

Children from birth to age five in foster care are categorically eligible for Head Start and Early Head Start services, regardless of income. The State Head Start Collaboration Office reports that the updated Head Start performance standards require programs to set aside slots for children in foster care for a period of time.

First Steps

Since inception, First Steps has helped young children in all 46 counties by offering school readiness services to families designed to:
- Improve children's health and well-being (prenatal to age 5);
- Support parents in their goal to serve as their children's first and best teachers;
- Provide parents with easy access to needed early interventions for children with unique development needs;
- Help parents access quality childcare for their young children;
- Promote early education programs and quality pre-kindergarten choices for families;
- Help parents transition their rising kindergarteners into school.

A First Steps Partnership serves each county in South Carolina responsible for meeting local needs and identifying collaborative opportunities to help SC's youngest learners.

Parent-Child Interaction Therapy (PCIT)

Parent-Child Interaction Therapy (PCIT) is an evidence-based, family-centered treatment program that provides parents with effective skills for managing and improving their child's behavior. This program also helps improve relationships between parents and their children. Children ages 2-7 with disruptive behavior disorders, affected by abuse/neglect, who are or have been in foster care, or recently adopted or in pre-adoptive placements are eligible for PCIT.

During the sessions, parent and child are together with a specially trained therapist. The therapist coach parents, helping them learn and practice skills from behind a one-way mirror. Sessions are weekly for 12-14 weeks.

Help Me Grow

Help Me Grow is a program that links families to existing, community-based resources and services for children at-risk for developmental, behavioral, or learning problems. This is a free resource that is available to parents of children birth to five years old who reside in Anderson, Greenville, Laurens, Oconee, Pickens, Spartanburg, Charleston, Berkeley, Dorchester, Beaufort, Jasper, and Colleton counties.

Help Me Grow supports parents by connecting them with the help they need. Developmental screenings are offered through an Ages and Stages Questionnaire (ASQ) free of charge for children ages one month to 5.5 years old. The program also offers information on general child development and parenting topics, referrals to community resources such as early intervention agencies, and developmental activities for parents to do at home to enhance their child's developmental progress. A child development expert who offers a free, confidential assessment of each child's needs delivers these services.

The Incredible Years

The Incredible Years Series is a set of interlocking, comprehensive, and developmentally based programs targeting parents, teachers, and children. The training programs are guided by developmental theory on the role of multiple interacting risks and protective factors in the development of conduct problems. The programs are designed to work jointly to promote emotional, social, and academic competence and to prevent, reduce, and treat behavioral and emotional problems in young children.

The Classroom Dinosaur Child Prevention Program covers three age levels, beginning in preschool through 2nd grade (3-8 years). Classroom lesson plans are delivered by the teacher to strengthen children's social and emotional competencies, such as understanding and communicating feelings, using effective problem-solving strategies, managing anger, practicing friendship and conversational skills, and behaving appropriately in the classroom.

Beginnings SC

Beginnings SC's goal is to ensure that every SC Child who is deaf or hard of hearing will reach their fullest potential. SCDSS refer foster children for hearing screenings to Beginnings SC through a collaboration with the University of South Carolina. Their early intervention screenings are essential to identifying hearing loss and are free of charge.

Maternal Infant and Early Childhood Home Visiting

Children's Trust administers the federal investment in home visiting for South Carolina – the Maternal Infant and Early Childhood Home Visiting (MIECHV) program. Children's Trust help determine which models to use and where the need is the greatest, and work for hand-in-hand with our partners guiding them through the technical aspects of delivering evidence-based programs, providing coaching and technical assistance.

The home visiting specialists assist mothers and their young children with a wide range of issues – including health concerns, developmental milestones, safety environment, school preparedness, and economic self-sufficiency – during home visits and pediatric visits. Home visitors generally have a background in nursing, social work, or child development.

Children's Trust supports three evidence-based home visiting models – Healthy Families America, Nurse-Family Partnership, and Parents as Teachers. Many of the program models serve at-risk, low-income mothers.

III.G. POPULATIONS AT GREATEST RISK OF MALTREATMENT

The SCDSS has identified children ages five and under (0-5) as being the population at greatest risk of maltreatment for FFY 2018. Children age five and under (0-5) have trended at an average of 38% of the total number of children in Foster Care in South Carolina during FFY 2018. Children ages 0-5 are the highest population in care. Children ages six through twelve (6-12) average an entry rate of 32% and children age thirteen through seventeen (13-17) now average 26%, a slight increase of 1% from the data reported in the 2018 APSR. The smallest percentages of children in care during FFY 2018 were youth ages eighteen through twenty (18-20) who averaged 5% of total foster care entries for the state.

The following graphs and charts present data on children in foster care by age group and year.

Age Gr	FFY14	FFY15	FFY16	FFY17	FFY18
0-3 years old	26%	27%	26%	27%	27%
4-5 years old	11%	11%	10%	11%	11%
6-12 years old	32%	32%	32%	32%	32%
13-17 years old	25%	25%	25%	25%	26%
18-21 years old	7%	5%	6%	5%	5%
	100%	100%	100%	100%	100%

How were services targeted from FY 2015-2019 for populations at greatest risk of maltreatment?

SCDSS has and continues to focus attention on the 0-5 population. This population is the most vulnerable due to their age and their inability to self-protect. SCDSS has targeted the zero-five population for maltreatment preventive services through the collaboration with Community Based Prevention Services (CBPS) and the Children's Trust of South Carolina (CTSC). CSTC provides prevention supports for children zero through 5 through its safe sleep training programs and its Nurse Family Partnership programs that are embedded into their home visiting programs. In addition, SCDSS utilizes BabyNet (referenced above) for referrals for babies ages 0 to three. Family Care Centers were also available for children to be placed with their mothers when women were in need of in-patient drug and alcohol treatment services.

Additionally, SCDSS initiated a proposal to establish a statewide community-based approach to coordinate the development, implementation, and monitoring of the plan of safe care for substance-affected infants, mothers and other caregivers who come to the attention of Child Protective Services. Under this proposal, SCDSS child welfare staff and community service providers will provide case management, referral and linkage, assessment and screening, concrete aid, education and services, and recovery supports to children and families during pregnancy and up to one year after birth.

Community Based Prevention Services (CBPS)

SCDSS has contracted with private agencies to provide services to cases that do not meet the definition of child abuse and neglect and are screened out to an alternative service that is referred to as "Community Based Prevention Services." CBPS provides voluntary services to families to link them with other contracted agencies to provide the at-risk population of children ages 0-3 and their parents with services such as child care, Head Start, and Parents Anonymous.

The Children's Trust of South Carolina (CTSC)

- **CTSC Home Visitation Services**.

The South Carolina Maternal, Infant, and Early Childhood Home Visiting (SCMIECHV) program continues to address critical areas of child well-being and safety including the coordination and delivery of critical health, child development, early learning, prevention of child abuse and neglect, and family support services through evidence-based home visiting. The CTSC (Children's Trust South Carolina) perceives MIECHV as one service strategy aimed at developing a comprehensive, quality, early childhood system that promotes maternal/infant health, safety and development, as defined in Heath Resources and Services Administration's (HRSA) Supplemental Information Request. Strategies include targeting at-risk communities, addressing community risk factors, and building on strengths in target communities.

Since being named the MIECHV designee, the CTSC has worked to create a continuum of voluntary home visiting programs that meet the needs of families across South Carolina. By coordinating efforts across agencies and always considering the sustainability of these programs, the CTSC utilized public and private dollars along with state and federal funding to

build that continuum, now well established in 21 of 46 counties. Partnerships have been built with several state agencies, local and private funders, and early childhood interventionists.

- **CTSC Safe Sleep Program**

At the request of the Joint Citizens and Legislative Committee on Children, Children's Trust formed a statewide Safe Sleep Coalition in January 2012 that continues to meet. The coalition represents more than 20 organizations convening to address rising rates of unsafe sleep practices that result in injury and death for children younger than one year old. The coalition includes hospital systems, public social service agencies, nonprofit organizations and state agencies. In September 2014, the SCDSS contracted with CTSC to further promote the safe sleeping of infants. This expanded scope led to the purchase and distribution of sleep sacks for statewide DSS use with clients.

- **Family Care Centers**

For women with children birth to 5 who are in need of drug and/or alcohol treatment, inpatient services are available to them that includes their children in their placement. These services are referred to as Family Care Centers. The Family Care Center (FCC) is a comprehensive residential treatment program that allows mothers and children to live together in a safe, rehabilitative, home-like environment that offers intensive clinical, physical and behavioral treatment, providing fully integrated services and support to women with substance abuse disorders. The highest level of professional staffing in this secure setting helps foster recovery and builds family strength that ultimately leads the families to a healthy transition back into community life.

All referrals to the Family Care Center ultimately go through the SCDSS but can be accepted from outside community partners, including Guardians ad Litem, drug and alcohol providers, Community-Based Prevention Services providers (Appropriate Response), and Family Courts. Family Care Centers are located at Epworth Children's Home in Columbia SC, Lexington SC, York, SC and in Charleston, SC. The Family Care Centers (FCCs) will continue to be a valuable resource for children and families receiving services from the SCDSS and the FCCs.

III.H. FY 2018 KINSHIP NAVIGATOR FUNDING

SC DSS received federal funding in the form of a Kinship Navigator grant, which was administered through the Children's Bureau for the purposes of enhancing a Kinship Navigator program. The funding was awarded in July 2018, in the amount of $342,151.00. The grant was posted for solicitation in March 2019, and vendors have been chosen in Richland County and the Tri-County area (Charleston, Berkeley, & Dorchester counties) to provide services in the following areas: Raising Awareness, Support Groups, ARC Training, & Training an evaluation. New Beginnings, LLC will provide Support Groups in Richland County and HALOS will provide Support Groups & ARC Training in the Tri-county area of the state. USC will provide the service of Raising Awareness by creating videos and other informational literary material; and, USC Center for Child & Family Studies will provide evaluation of the ARC training program to measure effectiveness.   The bid for ARC training in Richland County has been re-posted for solicitation, and Richland County Library will provide the service in that area. A temporary position was also filled as a result of this grant. The employee has been hired with an effective start date of May 2, 2019. The primary responsibility of this employee will be to monitor every

aspect of this grant and ensure that the chosen vendors are provided appropriate services as outlined in their Scope of Work.

SC DSS has also applied for the second round of federal funding for FY 2019 in an effort to develop a statewide, comprehensive Kinship Navigator Program. SC DSS will collaborate with Child Focus group to develop and implement this program while using the states of Florida and/or New Jersey as models due to the fact that these states' programs have been cleared and accepted through the California Clearinghouse.

III.I. ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS

Use of Adoption and Legal Guardianship Incentive Funds:

The Seneca Family of Agencies

The SCDSS contracted with the Seneca Group, LLC, to support the requirements of the Family Finding Initiative. The Seneca Group, LLC conducted manual searches of public records, to find and identify possible relatives and fictive relatives of children in care. Search requests were submitted through a secure link on the Seneca Group, LLC website. Upon receipt of requests for family finding searches, the Seneca Group, LLC assigned an experienced search agent to conduct a manual search, and then provided a report back to the SCDSS that included: addresses and listed phone numbers for the subject, possible relatives and associates of the subject with their addresses and listed phone numbers, and any neighbors with listed phone numbers of the subject's most recent address.

The Heart Gallery

To meet the ongoing goals related to increasing finalized adoptions of legally free children, the SCDSS partnered with The South Carolina Heart Gallery (SCHG) to provide enhanced, targeted recruitment; and through the Statewide Adoptions Recruitment Coordinator, enhanced coordination, communication, and participation in quarterly state Adoptions Partners collaborative meetings. The Heart Gallery is a national program that uses the power of photography to help find homes for legally free children lingering in foster care. Through community exhibits and an Internet photo display, this recruitment tool continued to increase public awareness of the need for adoptive families. The Heart Gallery photographers volunteered their time and talents to create unique portraits showcasing these children. The portraits continued to be displayed at various locations around the state, throughout the year.

The SCHG provided intensive child-specific recruitment efforts, including community exhibitions and photographic internet campaigns. The SCHG targeted specialized populations, geographic areas, and faith communities, etc., to find homes for legally free children lingering in foster care. The Department contracted with the FCRB for the SC Heart Gallery to be administered and supported by the Foster Care Review Board. The SCHG program staff worked with the SCDSS Regional Adoption Services staff to arrange photography sessions as needed, plan community exhibits, track and respond to any resulting inquiries from interested families, and provide targeted, child-specific recruitment and family engagement.

The SC Foster Parent Association Heartfelt Calling

Heartfelt Calling, developed by the SC Foster Parent Association (SCFPA), provided expedited responses to inquiries about fostering and adoption. Heartfelt Calling developed a new website (www.heartfeltccalling.org) and implemented a separate and specific toll-free number for recruitment purposes. This provided one consistent entry point into the SCDSS system for all potential Foster Families. In the past, potential Foster Parents who did not receive responses or who received greatly delayed responses to inquiries, have either gone to other organizations to find children or have given up and lost interest altogether. To address this concern, the SCFPA developed its recruitment program, Heartfelt Calling. Heartfelt Calling provided consistency and follow-up from the first contact through pre-service training.

In addition to a quick response, because consistency and continuity in recruitment of Foster and Adoptive Parents have a significant role in turning inquiries into licensed Foster and/or Adoptive Homes, the SCFPA created a position for a person experienced in child welfare to respond daily to phone calls, e-mails, and any other form of inquiry about possible Foster Parenting. The Recruitment Coordinator could answer inquiries in one working day and answered questions regarding foster care and adoption of children in SCDSS custody. In true collaboration, the Recruitment Coordinator sent the application packet, or other appropriate information to each inquirer within one working day, notified the appropriate SCDSS office and followed up to ensure that connections were made, and the process moved along.

Also, they provide family support and post legal adoption activities to families that are currently going through the adoption approval process, approved and awaiting placement of the child, those with a child placed with them, and to those who have finalized their adoptions.

Administrative Costs

SCDSS used money from the Adoption and Legal Guardianship Incentive funds to use towards items such as beds, cribs, and smoke detectors that were needed to license or approve a foster and/or adoptive family home. This cost coincides with foster family home recruitment that moves onto adoptive placements.

IV. PROGRAM SUPPORT

IV.A. TRAINING AND TECHNICAL ASSISTANCE TO COUNTIES

South Carolina continued its commitment to long-term, training/program support to its Child Welfare staff. The long-range goal of the Department's training and technical assistance is to promote individual development and advancement through programs designed to build and expand professional skills and knowledge. Per the SCDSS Human Services Policy Manual: "Each Human Service worker and Supervisor will be required to obtain twenty (20) hours of Child Welfare training per year to maintain Child Welfare Certification."

In the 2015-2019 Child and Family Services Plan (CFSP) and subsequent APSR Update to The Targeted Training Plan, many of the training activities were provided for the SCDSS staff. Training is provided by the state for new and for veteran staff on an ongoing basis. These initial and ongoing training activities were designed and implemented to ensure that the SCDSS staff has the knowledge and skills needed to carry out their duties. This includes training in Child Welfare Policies and Procedures and training in support of strategies designed to accomplish the state's Child Welfare Goals and Objectives.

Nearly all the SCDSS Child Welfare training activities for the SCDSS staff have been provided through contracts with training providers, including the University of South Carolina, Center for Child and Family Studies (CCFS) and the Children's Law Center (CLC), and through non-profit organizations. The Department's internal training staff has also provided limited training to staff and is continuously increasing their ability to provide more training.

Child Welfare Basic Training

Information describing the SCDSS Child Welfare Basic Training has been included in the 2017 APSR, submitted to the Children's Bureau on 6/30/16, on Pages 141-142. The information and analysis referenced there remain accurate. The University of South Carolina, Center for Child and Family Studies (CCFS) continued to assist the SCDSS in providing the Child Welfare Basic Training Course to all new Child Welfare Caseworkers to become certified to carry caseloads. The CCFS will continue in this role during FFY 2020. More information on the Child Welfare Basic Training has also been included in the SC CFSR 3 Statewide Assessment, submitted to the Children's Bureau on 01/31/2017, Item 27 on Pages 80-85. This information gives details on the process of going through the training, carrying a caseload during Initial Training, and how training is tracked and graded. Child Welfare Basic is currently being revamped to a three-week course. Below are training sessions that were held from July 1, 2018 – June 30, 2019:

Child Welfare Basic Training Session #	Training Dates:	Enrolled	Completed*
18-10	June 4-8; June 11-12; June 18-20; June 25-29; July 9-10; July 16-17, 2018	24	22
18-11	June 4-8; June 11-12; June 18-20; June 25-29; July 9-10; July 16-17, 2018	28	26
18-12	August 6-10; August 13-14; August 20-22; August 27-31; September 4-5; September 10; September 18, 2018	24	22
18-13	August 6-10; August 13-14; August 20-22; August 27-31; September 6-7; September 18-19, 2018	28	27

18-14	August 13-17; August 20-21; August 27-29; September 4-6; September 10; September 19-21; September 25-26, 2018	24	23
18-15	September 19-21; September 24-27; October 2-4; October 8-12; October 16-19; October 22-23, 2019	24	23
18-16	September 20-21; September 24-27; October 3-5; October 10-12; October 15-19; October 24-25, 2018	28	26
18-17	October 3-5; October 11-12; October 17-19; October 23-26; October 31 – November 2; November 7-8, 2018	23	22
18-18	October 15-19; October 22-23; October 29-31; November 5-9; November 14-15; November 20-21, 2018	16	16
18-19	November 5-9; November 13-14; November 19-21; November 26-30; December 3-6; December 11-12, 2018	29	29
18-20	November 19-21; November 26-29; December 5-7; December 12-14; December 17-20, 2018; January 2-3, 2019	24	24
18-21	November 19-21; November 26-29; December 5-7; December 12-14; December 17-20, 2018; January 2-3, 2019	24	24
19-01	January 7-9; January 14-17; January 22-24; January 28-30; February 4-7; February 11-12, 2019	28	24
19-02	January 14-16; January 22-25; January 29-31; February 4-6; February 11-14; February 19-20, 2019	24	22
19-03	January 22-24; January 28-31; February 4-6; February 11-13; February 19-22; February 26-27, 2019	24	24
19-04	January 28-30; February 4-7; February 11-13; February 19-21; February 25-28; March 4-5, 2019	24	23
19-05	March 4-6, March 11-14; March 18-20; March 25-27; April 1-4; April 15-16, 2019	28	26
19-06	March 11-13; March 18-21; March 25-27; April 1-3; April 15-18; April 22-23, 2019	24	22
19-07	March 18-20; March 25-28; April 1-3; April 15-17; April 22-25; April 29-30, 2019	24	23
19-08	March 25-27; April 1-4; April 15-17; April 22-24; April 29-May 4; May 6-7, 2019	24	23
19-09	May 6-8; May 13-16; May 20-22; May 28-30; June 3-6; June 10-11, 2019	28	
19-10	May 13-15; May 20-23, May 28-30; June 3-5; June 10-13; June 17-18, 2019	24	
19-11	May 20-22; May 28-31; June 4-6; June 10-12; June 17-20; June 24-25, 2019	24	
19-12	May 28-31; June 3-7; June 10-14; June 17-21, 2019	25	
Total number of participants		**597**	**471**

*Denotes individuals who completed training, does not reflect pass/fail.

Child Welfare Legal Basic Training

The University of South Carolina, Children's Law Center (CLC) provided this post-Certification four (4) days of Initial Training. The training involved two (2) days of presentations on the legal system and related responsibilities. During the final two (2) days of the training session, staff participated in mock hearings with a retired Family Court Judge and Attorneys. Each staff member testified and was cross-examined and received personalized feedback.

Adoptions Specialist Basic Training

Adoption Specialist Training is designed for new Adoption Specialists. Completion of this training was part of the requirements for certification as an Adoptions Investigator. This certification was separate from Child Welfare Certification. Adoption Specialist Training consisted of three (3) units delivered over the course of five (5) weeks to allow for the application of learning in the field. The first unit covered risk and safety, maltreatment typologies, and other essential topics for new Agency workers. The second unit focused on concurrent planning. The third unit focused on the recruitment of families and the placement of children. The training concluded with a final exam.

Listed below are the primary training activities provided to the SCDSS staff in Counties and Regions in FFY 2019 in support of the Goals and Objectives of the CFSP/APSR.

Training Activities in Support of Goal 1:

Improve the quality of risk assessment and safety management of children in Child Protective Services, Family Preservation, and Foster Care cases.

Objective 2- CFSR 3 Safety Outcome 2.

Improve the initial and ongoing assessments of safety and risk to children, to protect children in the home and prevent removal; provide services to the family to prevent children's entry into foster care or re-entry after reunification.

Title: B-SMART: Writing Effective Plans to Protect Children
Syllabus: This one-day training will take you through the case planning process, from case determination to development with the family. You will learn a way of writing behavioral objectives that are based on core principles of ensuring the safety of children and building on the protective capacities of caregivers. The objectives will "B-SMART": Behavioral, Specific, Measurable, Achievable, Relevant and Time-limited.

Title: Sharpening Your Skills: Writing Behavioral Objectives
Syllabus: Treatment plans are developed with families to improve family functioning, eliminate safety threats, and reduce risk. How do you shift the focus of treatment plans from service compliance to behavioral change? In this training, we will focus on recognizing the difference between service compliance and behavioral change. Participants will develop behavior-based treatment plans that enhance protective capacities and clearly identify the changes that must occur within the family.

Title: Sharpening Your Skills: Safety Planning

Syllabus: Join us to learn the ins and outs of writing safety plans to ensure the safety of children. Do you know who can and cannot be used as a protector on a safety plan? Were you aware that the term *alternative caregiver* is no longer appropriate—*kinship caregiver* should be used? We will discuss when to implement a safety plan, how to accurately complete the Safety Plan form, and most importantly the use of safety plans to control the safety threat. Opportunities will be provided to practice and receive feedback to enhance your skills and abilities to use the safety plan.

Training Activities in Support of Goal 3:

Children will have meaningful and lifelong connections with family and in the community.

Objective 2/ Progress Measure 2-Permanency Outcome2

Improve the continuity of family relationships and connections with the neighborhood community, faith, extended family, Tribe, school, and friends for children.

Title: Multiethnic Placement Act (MEPA) Online Training
Syllabus: Complying with MEPA (Multiethnic Placement Act) is an important part of assuring that foster and adoptive children have a timely path to permanency. It also contributes to their overall positive well-being. The Act prohibits discrimination based on race, color and national origin (RCNC) when selecting a child's placement and requires states to diligently recruit foster and adoptive families.

Title: Indian Child Welfare Act (ICWA) Online Training
Syllabus: The Indian Child Welfare Act (ICWA) is an important federal law to protect children who are eligible for membership in a federally recognized Native American or Alaska Native tribe. This online training will engage you to better understand and follow the law. Caseworkers have an important role throughout the casework process to inquire about tribal affiliation and follow specific steps if ICWA applies.

Training Activities in Support of Goal 4:

Build a system capacity to support safe and thriving children in lifelong families.

Objective 2 / Progress Measure 2

Provide Leadership Development opportunities for middle managers and executive leadership across all disciplines to enhance the implementation of child welfare practices that support permanency, safety, and well-being for children involved with the SCDSS.

Title: Nuts and Bolts of Effective Supervision and Leadership for Current Leaders
Syllabus: This training builds upon the knowledge and skills that current supervisors throughout the agency have from their own experiences and allows them opportunities to critically reflect on the techniques and styles that they use, and how to better hone those skills for their unit. It is not specific to any one program area; supervisors from child welfare to financial services can benefit from this training.

Nuts and Bolts July 2018-June 2019 Training Sessions:

Nuts & Bolts of Effective Supervision and Leadership: CURRENT LEADERS Training	Training Dates/Location	Enrolled	Completed
Day 1- Constructing a Team & Coaching for Success	August 2, 2018 Columbia	24	22
Day 1- Constructing a Team & Coaching for Success	August 7, 2018 Columbia	23	21
Day 2- Motivating & Mediating for Success	August 28, 2018 Columbia	24	18
Day 2- Motivating & Mediating for Success	August 30, 2018 Columbia	23	14
Day 3 – Hiring, Planning & Accountability	October 2, 2018 Columbia	26	17
Day 3 – Hiring, Planning & Accountability	October 4, 2018 Columbia	23	11
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	November 6, 2018 Columbia	23	11
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	November 13, 2018 Columbia	27	14
Day 1- Constructing a Team & Coaching for Success	May 14, 2019 Columbia	29	26
Day 1- Constructing a Team & Coaching for Success	May 17, 2019 Columbia	21	18
Day 2- Motivating & Mediating for Success	May 23, 2019 Columbia	27	22
Day 2- Motivating & Mediating for Success	May 24, 2019 Columbia	21	17
Day 3 – Hiring, Planning & Accountability	May 30, 2019 Columbia	16	
Day 3 – Hiring, Planning & Accountability	May 31, 2019 Columbia	25	
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	June 3, 2019 Columbia	19	
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	June 6, 2019 Columbia	22	
Day 1- Constructing a Team & Coaching for Success	June 7, 2019 Greenville	24	
Day 1- Constructing a Team & Coaching for Success	June 10, 2019 Florence	27	
Day 2- Motivating & Mediating for Success	June 11, 2019 Greenville	25	
Day 3 – Hiring, Planning & Accountability	June 14, 2019 Greenville	22	
Day 2- Motivating & Mediating for Success	June 18, 2019 Florence	27	
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	June 20, 2019 Greenville	22	

Day 3 – Hiring, Planning & Accountability	June 25, 2019 Florence	23	
Day 4 – Cultural Competence, Generational Differences & Professional Boundaries	June 27, 2019 Florence	23	
Total number of participants		**566**	**211**

Title: Leadership Academy for Supervisors
Syllabus: The Leadership Academy for Supervisors (LAS) is designed for motivated supervisors who are ready to become motivated leaders in their unit, their agency, and their community. Developed by the National Child Welfare Workforce Institute, LAS is an online curriculum that uses a strengths-based model to develop leadership competencies across all child welfare program areas. This initiative supports supervisors as leaders of practice change.

The curriculum also incorporates periodic face-to-face meetings called learning networks (LASLN) that supplement online learning and help build a supportive peer community of supervisors across counties. Learning modules include:

- Foundations of Leadership
- Leading in Context: Building Collaborative Efforts
- Leading People: Workforce Development
- Leading for Results: Accountability
- Leading Systems Change: Goal setting

Leadership Academy for Supervisors July 2018-June 2019 Training Sessions:

Leadership Academy for Supervisors Training Session &	**Training Dates:**	**Enrolled**	**Completed**
19-01	February 5; March 7; April 4; May 9; June 13, 2019	14	
Total number of participants		**14**	

Title: Common Sense Skills for Emerging Leaders
Syllabus: This training is designed to lay the groundwork for more advanced leadership training with professionals who have been identified by their managers as emerging leaders. Work ethic, attitude, communication skills, emotional intelligence and a whole host of other personal attributes are interpersonal skills crucial for career success.

Common Sense Skills for Emerging Leaders July 2018-June 2019 Training Sessions:

Common Sense Skills for Emerging Leaders Training Session #	**Training Dates/Location**	**Enrolled**	**Completed**
18-06	August 10, 2018 Columbia	20	18
18-07	November 2, 2018 Aiken	15	15
18-08	November 9, 2018 Charleston	21	18

18-09	November 30, 2018 Greenville	21	19
19-01	June 21, 2019 Florence	14	
Total number of participants		**91**	**70**

Objective 3 / Progress Measure 3

Strengthen Workforce development through hiring, retention, and training and support efforts to sustain consistency in the provision of critical services that promote safety, permanency, and well-being for children involved with the SCDSS.

Title: Title IV-E Online Training

Syllabus: Knowledge of Title IV-E, the relevance to casework practice, and the impact on child welfare is significant for all child welfare staff. Gathering information to determine if the youth in foster care are eligible for Title IV-E funding to meet recurring needs is a function that crosses all program areas. Policy and procedural timeframes and processes will be discussed that must be met by staff to be compliant with submitting applications timely and ensuring all information necessary to determine eligibility is provided. Participants will complete interactive modules, which emphasize understanding the varying fields on the IV-E application and the different ways to gather information to complete the application.

IV.B. TECHNICAL ASSISTANCE AND CAPACITY BUILDING RECEIVED

Technical assistance and capacity building efforts the state has received during 2015-2019 consisted of efforts to improve child welfare practice related to safety, permanency, and well-being. Additionally, coaching and consultation on projects that support the strategic and long-term goals were provided through Chapin Hall, Casey Family Programs, and the Capacity Building Center for States. SCDSS requested assistance with the development of a child welfare training plan, developing a GPS Practice Model, and data validation from Chapin Hall at the University of Chicago. The training plan will utilize the existing Learning Management System (LMS) to track the Professional Development Tracks for all child welfare staff. In addition to the Professional Development Tracks, SCDSS is researching and developing supplemental courses that child welfare staff can enroll in for additional skill building. SCDSS and Chapin Hall both agreed to pause work towards the child welfare training plan until the GPS Practice Model was completed as the strategic direction and standardizing the core knowledge, skills and competencies of a high functioning workforce were aligned and grounded within the values and principles of the GPS Practice Model. Chapin Hall was instrumental in identifying concerns within the state's current data processing system. The technical assistance provided by Chapin Hall increased understanding of data validation. Measures and protocols were recommended for the state to enhance the current data systems in place.

Casey Family Programs assisted state leadership in creating a healthy organizational culture, child welfare practice and policy improvement, obtaining structured decision making (SDM) tools and data processing system. Casey Family Programs is continuing to assist state leadership with communication and creating clarity. Casey Family Programs was critical in supporting the state with the need for clear and definitive structured decision-making tools for improving child

welfare practice. As a result, a structured intake tool is in the process of development. The structured intake tool will help assist the state with consistent screening decision-making at intake. Casey Family Programs continues to provide guidance and offer peer support to the state in the areas of improving child welfare practice and policy improvement. Casey Family Programs has assisted the state with consultations from New Jersey and Tennessee on policy and practice development. Lastly, the technical assistance provided by Casey Family Programs increased understanding of data capacity, use of date to evaluate practice, how to share data with the public to demonstrate shared ownership and improve outcomes.

The discussion to have a Program Improvement Consultant for South Carolina began in December of 2016. The Capacity Building Center for States (CBC) has assisted the state with the Child and Family Services Review (CFSR), Program Improvement Plan (PIP), the Child and Family Services Plan (CFSP), and with the developing a robust Continuous Quality Improvement (CQI) system. The initial scope of work involved supporting SCDSS in identifying, organizing, and consulting on how to prepare stakeholders for the stakeholder interviews for the CFSR. Around August/September of 2017, the CBC began the work towards PIP development, stakeholder engagement with the PIP development, and assisting the state with using data to make decisions about strategies. In March 2019, the CBC assigned a strategic consultant to assist the state with integrating all strategic work and initiatives into a unified plan to help inform the CFSP. Lastly, the CBC provided technical assistance for implementing an effective and robust CQI system within CWS.

The *Michelle H*. Final Settlement Agreement required the development of implementation plans in five key areas: Placement Needs, Health Care, Visitation, Workload, and Out of Home Abuse and Neglect. Technical assistance was acquired for three of these plans. Four independent consultants were chosen by the *Michelle H*. Co-Monitors to work with DSS on the Placement Implementation Plan. A robust plan was completed that focuses on establishing a kin-first culture; utilizing child and family teaming for case planning and placement decisions; partnering with private providers to develop a placement and service array; improving recruitment, retention and utilization of foster parents; and addressing the problem of many children being placed outside of their home county and/or region. Two consultants were chosen by the Co-Monitors to assist DSS with drafting our Health Care Implementation Plan. Work with these consultants has helped us strengthen our partnerships with the Department of Health and Human Services as well as Select Health, our MCO for foster children. Together, an implementation plan was drafted and approved that focuses on a care coordination model designed to meet the unique health care needs of children; data exchanges related to screening, assessment and treatment services for individual children, as well as psychotropic medication and gaps in care; network adequacy assessments; and health practice guidance. An additional consultant was selected by the Co-Monitors to complete a workforce assessment that would inform further development of the Workload Implementation Plan. Recommendations from this assessment were incorporated into the final plan. It is designed to further DSS' efforts to establish a well-qualified, stable workforce with manageable caseloads and workloads. It focuses on recruitment and retention strategies that include university partnerships; higher salaries for caseworkers and supervisors; a career path for caseworkers; a research-informed protocol for applicant selection; and development of our workforce, particularly supervisors. The strategies in each of the five plans, once fully implemented, are intended to improve outcomes for children in foster care and increase their safety, permanency, well-being, and stability.

The work with all consultants has strengthened the agency's efforts with engagement, communication, and clarity for frontline staff, supervisors, courts, and state stakeholders.

IV.C. STATE'S ACTIVITIES UNDERTAKEN IN FY'S 2015-2019

Through the activities undertaken in FY2015-2019 in child and family services-related research, evaluation, management information systems, and/or quality assurance systems has helped to inform service delivery and what is necessary to achieve goals and objectives related to safety, permanency, and well-being. In January 2015 the state became a defendant in a class action lawsuit brought by Children's Rights, Incorporated, Appleseed Legal Justice, and the Wyche Law Firm in the District Court of South Carolina on behalf of children who are in the state's foster care system, Michelle H. v. Governor McMaster and V. Susan Alford (Michelle H.). Soon after the filing of the Michelle H. case, South Carolina decided to enter settlement negotiations with the plaintiffs because the state had already committed to strengthening and improving the child welfare system and had begun to address areas targeted for improvement in the complaint.

After several months of negotiation, the court issued a final settlement agreement resolving all claims set forth in the complaint in June 2016. SCDSS has considered the Michelle H. settlement agreement and has utilized many components of it, in the PIP. The final settlement agreement targets five (5) major areas for improvement in the foster care system:

- caseload limits,
- visitation (case manager, siblings, parent-child),
- maltreatment in care,
- placement resources, and
- physical and behavioral health care coordination.

The 2017 Statewide Assessment provided an opportunity to gather and document information critical to analyzing capacity and performance during the statewide assessment phase of the CFSR process. Prior to the CFSR, SCDSS was already aware of critical areas that needed to be addressed. Additionally, the 2017 CFSR findings identified several key cross-cutting issues related to initial and ongoing assessments of safety/risk, engagement of family members and frequency and quality of caseworker visits with children and parents, adequate array of services in the state (especially in the rural areas), workforce concerns (including insufficient training of staff, high turnover, and high caseloads), the establishment of timely and appropriate permanency goals, concerted efforts to achieve permanency, and lastly, adoption posed the most difficult for the SCDSS and the courts to achieve. As indicated in the final report, CB determined that South Carolina was not in substantial conformity with the following Outcomes and Systemic factors:

- CFSR Outcomes: Safety 1, Safety 2, Permanency 1, Permanency 2, Well-Being 1, Well-Being 2, Well-Being 3

- CFSR Systemic Factors: Statewide Information System, Case Review System, Quality Assurance System, Staff and Provider Training, Service Array and Resource Development, and Foster and Adoptive Parent Licensing, Recruitment and Retention

The CB determined that South Carolina is in substantial conformity with the following systemic factor: Agency Responsiveness to the Community. Thus, South Carolina is required to develop

a Program Improvement Plan (PIP) that addresses each Outcome and Systemic factor determined not to be in substantial conformity.

All the major work SCDSS has underway provides an opportunity to align all major work priorities (the Family First Prevention Services Act (FFPSA), PIP, and *Michelle H.*) for the agency. The agency identified areas needed improvement through the CFSR, Michelle H., and FFPSA. SCDSS crossed walked the major areas of work with the PIP and *Michelle H.* to combined work efforts to reserve resources. While there is a focus of workforce development of supervisors within the PIP, *Michelle H.* caseloads limits prioritize the needs of case managers. Further, *Michelle H.* is targeting maltreatment in care, placement resources, and the physical and behavioral health care coordination, which all directly relates to major provisions that are required within the FFPSA.

Lastly, the PIP addresses the cross-cutting areas of assessment, engagement, permanency/judicial systems, service array, and workforce development (supervision). The PIP's primary focus is related to child welfare services practice, however; the PIP strategies addressing the systemic issues of service array, feedback loops, and CQI.

SCDSS has now modified and established new goals and objectives related to safety, permanency, and well-being. Activities undertaken in FY 2015-2019 provided an opportunity for the SCDSS to understand the challenges within the State's child welfare system. Through data analysis and quality assurance reviews, the SCDSS is better equipped to make data-driven decisions to informed and improve practice and service delivery. With the major areas of work in *Michelle H.*, the PIP, and the FFPSA the SCDSS is moving onward to a more robust and comprehensive child welfare system that is able to improve practice and drive performance.

V. CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

V.A. PROCESS TO GATHER INPUT

The Catawba Indian Nation (CIN) is the only Federally recognized tribe in South Carolina. Since the submission of the APSR, the state has met and continues to meet regularly with representatives of the CIN. Throughout the year representatives of the SCDSS and the CIN have met for consultation and collaboration. There have been three such meetings since the submission of the last APSR.

The primary purpose of these meetings is to maintain communication between DSS and CIN, to discuss ways to improve compliance with the Indian Child Welfare Act (ICWA) and to share ways to improve cooperation between the state and tribe. The goal of these meetings is to identify areas of concern and barriers to ICWA compliance and ways to overcome these barriers.

Attending these meetings were the CIN General Counsel, CIN ICWA Representative, CIN Social Services Family Therapist, CIN Social Services Director, DSS Regional ICWA Experts, DSS Office of General Counsel, DSS Families First, DSS Foster Home Licensing, DSS Adoptions, DSS Foster Family Recruitment, DSS Independent Living, DSS Policy, DSS CQI, and DSS Deputy State Director for Child Welfare.

Each region has an identified ICWA liaison, and they are referred to as SCDSS Regional ICWA Experts. A continuing aspect of the collaboration between DSS and CIN is the sharing of data. Each month DSS supplies CIN with a report generated from the DSS CAPSS (Child and Adult Protective Services System), South Carolina's SACWIS, listing all persons listed in CAPSS who had a service open for one day or more in the previous month and a tribal affiliation listed as Catawba Indian Nation. This report allows CIN to see a list of all children and families involved with DSS who are members of or eligible for membership in the CIN so they can inquire with the county office if the tribe has not been notified of DSS involvement with the child as required by DSS policy. DSS policy states that as soon as possible after the agency gathers information that the child is a member of or eligible for membership in a federally recognized tribe the worker contacts the tribal ICWA representative for the purpose of coordinating the investigation and possible placement with tribal authorities should it become necessary to remove the child from the home.

V.A. OUTCOMES OF COLLABORATION

In the last submission of the APSR, it was made known that some agency staff at the county level incorrectly believed that sharing information with CIN was a violation of the family's privacy. The quarterly meetings between DSS-CIN were reconvened with a new membership to address these concerns. It was at this time the agency had each Regional Director appoint one DSS Regional ICWA Expert, who would assist in answering questions and providing assistance on ICWA matters. An updated training was provided for workers, which do address this issue, and the issue of this has decreased.

SCDSS and the CIN Collaboration Workgroup met on September 18, 2018, January 15, 2019, and April 16, 2019. This workgroup discusses strategies to improve collaboration and cooperation between SCDSS and the CIN. Persons invited to participate in these meetings included: SCDSS the Deputy State Director for Child Welfare Services, Director of the Child Welfare Services Division of Permanency Management, SCDSS Regional ICWA Liaisons, SCDSS State Office ICWA Liaison, SCDSS Child Welfare Services Division of Performance

Management and Accountability, SCDSS Office of General Counsel, staff from various SCDSS county offices, University of South Carolina Center for Child and Family Studies, University of South Carolina Children's Law Center, SCDSS Foster and Adoptive Family Licensing, SCDSS Foster and Adoptive Family Recruitment, SCDSS State Office Division of Adoptions staff, SCDSS State Office Chafee Foster Care Program staff, SCDSS Child and Adult Protect Services System Staff (CAPSS), and the staff from the CIN Social Services Department and the CIN General Counsel. CIN Collaboration Workgroup has been instrumental in securing an ICWA Liaison in each region of the state. The ICWA Liaison serves as a point of contact for agencies to promote compliance with ICWA regulations. Lastly, the ICWA Liaison disseminates information to caseworkers of online training and resources.

VI. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN REQUIREMENTS AND UPDATE

Agency policy for Plans of Safe Care has been completed, approved and published as of October 1, 2018. Statewide training for staff regarding Plans of Safe Care and the risks of alcohol and substance abuse to unborn babies was made available to child welfare staff as of November 1, 2018. On June 10, 2019, the CAPTA CARA AMENDED PIP was submitted to the Children's Bureau. While the state was diligently advocating for H.3729 to pass, which mandated reports of all substance-exposed infants, in reviewing the South Carolina's Children's Code Sections 63-7-310 and 63-7-1660 (F)(1), the state believes these sections support the South Carolina Department of Social Services' implementation of policies and procedures to "develop the plans of safe care for infants affected by all substance use (not just the use of illegal substances)" (Child Welfare Information Gateway, 2019).

In 2019, CAPTA funds were used for the SC Citizen's Review Panel, enhancing the Strengthening Families program through Children's Trust, funding of the Statewide Child Fatality facilitator and the yearly report through DHEC, Domestic Violence training, and funding toward the development of the Intake Screening tool through the National Council on Crime and Delinquency (NCCD) Children's Resource Center and Structured Decision Making.

The Strengthening Families Program offers parenting skills for families involved with the Child Welfare system as well as those families who are involved in substance abuse treatment to prevent children from coming into the child welfare system. The funding of the statewide fatality committee team facilitator and completion of the Statewide Fatality Report represents a collaboration between several agencies in an effort to share lessons learned from all child fatalities in the state, not just fatalities in child welfare families. The Structured Decision-Making tool will assist the state in making more informed referral decisions and better assessing the need for ongoing investigations during the intake process.

VI.A. ANNUAL CITIZEN REVIEW PANEL REPORT(S)

The South Carolina Department of Social Services (SCDSS) received the CRP 2018 Annual Report and a compilation of recommendations from the Low Country, Midlands and Upstate panels. SCDSS is excited to continue to work with the CRP to ensure the safety, permanency and well-being of children. SCDSS looks forward to continued collaboration with the CRP toward improvement of the child welfare system.

The following are the CRP's recommendations and the SCDSS responses to these recommendations:

Low Country Citizen Review Panel

Domestic Violence

The Low country CRP recommends the South Carolina Department of Social Services secure a child centered, stand-alone policy on Domestic Violence, with a focus to keep the children safe and together with the Non Offending/Victim Parent, with broad definitions on the type of Domestic Violence (physical, emotional, financial, et al) and the variety of adult relationships (mom & dad, mom or dad and paramour, LGBT relationships, et al) being sensitive to race, ethnicity, gender, age, sexual orientation, education, background, religion, physical and/or mental abilities or physical appearance.

SCDSS Response:

SCDSS will review their policies, procedures and practice standards related to domestic violence and where necessary, revise to enhance clarity for the field. SCDSS policies will continue to be available online. SCDSS will continue to collaborate with the Low County CRP regarding this effort.

The Low country CRP recommends the South Carolina Department of Social Services secure Domestic Violence Training through the Safe and Together Institute, David Mandel, Founder and Executive Director, for all staff and incorporate principles and strategies learned into their policies and procedures.

SCDSS Response:

SCDSS will examine agencies who provide services to domestic violence survivors and their families. SCDSS has the division of Adult Advocacy who currently oversees grants that support services for families involved with domestic violence. Throughout the state there are various services on a county by county basis that has domestic violence resources for these families.

Although each case is unique, the CRP believes, in general, that the best place for the child is with the non-offending parent and recommends that when possible children remain in custody of the non-offending parent.

SCDSS Response:

SCDSS will review their policies, procedures and practice standards related to domestic violence and where necessary, revise to enhance clarity for the field. SCDSS policies will continue to be available online. SCDSS will continue to collaborate with the Low County CRP regarding this effort.

The Low country CRP recommends the South Carolina Department of Social Services helps ensure the offending parent is held accountable by recommending to the courts, when there is a court case involved, that the parent be included in the court-ordered treatment plan.

SCDSS Response:

SCDSS will review their policies, procedures and practice standards related to domestic violence and where necessary, revise to enhance clarity for the field. SCDSS policies will continue to be available online. SCDSS will continue to collaborate with the Low County CRP regarding this effort.

The Low Country CRP recommends the South Carolina Department of Social Services only remove the children from the home when it's absolutely necessary, and that the children are not placed with the offending/perpetrator Parent's family.

SCDSS Response:

Whether children remain in the custody of the parent who did not perpetrate the CDV will depend on certain factors including the non-offending parent's protective capacity and the best interests of the child as well as the standards set forth in the Children's Code regarding removal of a child (including S.C. Code sections 63-7-1650 and 63-7-1660).

Due to the many concerns of Adverse Childhood Experiences, The Low Country CRP recommends the South Carolina Department of Social Services offer support groups, counseling services and/or parent & child therapy to the children and the Non-Offending/Victim Parent.

SCDSS Response:

SCDSS will examine agencies who provide services to domestic violence survivors and their families. SCDSS has the division of Adult Advocacy who currently oversees grants that support services for families involved with domestic violence. Throughout the state there are various services on a county by county basis that has domestic violence resources for these families.

The Low Country CRP recommends the South Carolina Department of Social Services partner with Law Enforcement to remove Non- Offending/Victim Parents from the Central Registry.

SCDSS Response:

SCDSS will review their policies, procedures and practice standards related to domestic violence and where necessary, revise to enhance clarity for the field. SCDSS policies will continue to be available online. SCDSS will continue to collaborate with the Low County CRP regarding this effort.

Midlands Citizen Review Panel

As recommended in previous reports, the Midlands Panel recommends that DSS develops a volunteer program, which can aid in increasing and maintaining a positive image in the community. Additionally, a volunteer program can engage the public in efforts to assist youth involved in the child welfare system. Extending the agency into the community, is an opportunity to gain the perspective from stakeholders that are not directly involved with the system.

SCDSS Response:

SCDSS agrees with this recommendation and has established a kinship care advisory group to support kinship caregivers. SCDSS has created a kinship care program in the Child Welfare Services division, led by the newly appointed manager to lead the development of a comprehensive kinship care program including, navigator support, kinship foster care, kinship adoption and subsidized kinship guardianship.

Kinship Caregivers and the heightened awareness of their contributions to the care of children who are in contact with the Department of Social Services requires an increased effort in the promotion of intentional services to these families. The Midlands Panel recommends that DSS continues its efforts in training its staff and promoting a culture that provides the highest level of service to these families. It is also recommended that outreach is done beyond the awareness of caregivers, but to the larger community to educate on best practices in servicing kinship caregivers and the children in their care.

SCDSS Response:

SCDSS will continue to be responsive to requests for information about our programs and services. This team is working a detailed strategic plan to enhance the kinship program that includes development of policies, procedures, and practice standards to support implementation

of H. 3701, a bill requiring the department to inform kinship caregivers of the procedures for foster home licensure before placing a child in the caregiver's home.

Upstate Citizen Review Panel

Upon the results of the treatment plan review, to ensure that families receive a copy of their treatment plans and are aware of what services are offered, so they will have the opportunity to be successful.

<u>SCDSS Response:</u>

Human Services Policy, Chapter 5, Foster Care & Permanency Planning, Section 510.4 mandates case managers shall provide the parent with a copy of the proposed plan and explain its provisions. Immediately after the court approves the initial case plan, the Foster Care/IFCCS Worker shall provide a copy to the parent/guardian and shall reiterate that failure to remedy the conditions that caused the removal within six months may result in termination of parental rights.

Upon the results of the treatment plan review, to ensure all DSS staff members and supervisors are involved in the treatment planning process.

<u>SCDSS Response:</u>

Human Services Policy, Chapter 5, Foster Care & Permanency Planning, Section 510.4 mandates the case managers shall review the status of the case plan on a monthly basis and shall update the plan at any time if the need for a change is identified. The results of the progress review shall be documented in the child's case plan and in CAPSS dictation. The case planning meeting shall include the family, the child (if appropriate or in all cases if the child is 14 or older), and, if the child is 14 or older, any support persons identified by the child and not rejected by the agency (see above for procedures related to involvement of child/support persons). The meeting shall be a comprehensive review of the case plan and the monthly monitoring of case activities, and shall include the following topics, if applicable:

1. whether the child's placement in foster care remains necessary and appropriate;
2. the child's safety in the placement;
3. the child's permanency plan status (at least every 6 months);
4. sibling connections (see Section 510.5);
5. any reduced safety threats in the home (when reunification is the plan);
6. changes in behavior that have occurred in the family members over time that are needed to create a safe environment for the child and identification of the required changes that have not been demonstrated at the time of the evaluation (when reunification is the plan);
7. observable behaviors of the child in foster care when behaviors are resulting in disruptions in placement or educational stability;
8. any child involvement with the juvenile justice system (see Section 550.2);
9. effectiveness of current services;
10. current actions to locate absent parents, relatives, or fictive kin (see Section 510.3);
11. the child's transition to adulthood, beginning no later than age 14.

Upon the results of the review, to ensure the quality assurance process will improve and the Upstate Citizens Review Panel will serve as a partner with the Department of Social Services.

SCDSS Response:

SCDSS agrees with this recommendation and will continue to be responsive to requests of partnering with the Upstate Citizens Review Panel to conduct quality assurance process when there is proper notice and clearance of all staff participating.

VI.B. THE NEEDS OF INFANTS BORN WITH PRENATAL DRUG EXPOSURE OR FETAL ALCOHOL SPECTRUM DISORDER

SC DSS is in the process of seeking proposals to establish a statewide community-based approach to the development, implementation, and monitoring of the plan of safe care for substance-affected infants, mothers, and other caregivers, who do not meet the criteria for a screened in Child Protective Services response and/or intervention.   Successful bidders will provide case management, referral and linkage, assessment and screening, concrete aid, education, and services and recovery supports to children and families during pregnancy and up to one year after birth. The SC DSS will utilize the Agency's CAPSS Data System to track the Plans of Safe Care and the outcomes of the Plans' services. The SC DSS plans to utilize the family's personal and professional safety network to ensure the referral and delivery of services.

VII. STATISTICAL AND SUPPORTING INFORMATION

VII.A. CAPTA ANNUAL STATE DATA REPORT ITEMS

Information on Child Protective Service Workforce

Qualifications and Training

The following are education qualifications and training requirements for entry and advancement:

Department of Social Services Classification Plan

Official Title	Band	State Minimum Requirements	Agency Minimum Requirements
Program Coordinator I - (AH35)	05	A Bachelor's Degree and relevant program experience	A Master's Degree and one (1) year of professional experience in social services programs, correctional, education, business administration, general administrative management, or relevant program experience; or a Bachelor's Degree and two (2) years of professional experience in social services programs, correctional, education, business administration, general administrative management, or relevant program experience.
Program Coordinator II - (AH40)	06	A Bachelor's Degree and relevant program experience.	A Master's Degree and two (2) years of professional experience in social services programs, correctional, education, business administration, general administrative management, or relevant program experience; or a Bachelor's Degree and three (3) years of professional experience in social services programs, correctional, education, business administration, general administrative

				management, or relevant program experience.
Human Services Coordinator I - (GA50)	05	A Bachelor's Degree and professional experience in human services or social services programs.	A Master's Degree in Social Work, Social Welfare or Behavioral Science; or a Master's Degree in any other field and one (1) year of professional experience in human services or social service programs; or a Bachelor's Degree in social work, social welfare or behavioral science and one (1) year of professional experience in human services or social service programs; or a Bachelor's Degree in any other field and two (2) years of professional experience in human services or social service programs. Selected positions may prefer supervisory experience.
Human Services Coordinator II - (GA60)	06	A Bachelor's Degree and professional experience in human services or social services programs.	A Master's Degree in social work, social welfare, or behavioral science and one (1) year of professional experience in human services or social service programs; or a Master's Degree in any other field and two (2) years of professional experience in human services or social service programs; or a Bachelor's Degree in social work, social welfare, or behavioral science and two (2) years of professional experience in human services or social service programs; or a Bachelor's Degree in any other field and three (3) years of professional experience in human services or social service programs. Selected

			positions may prefer supervisory experience.
Human Services Specialist II - (GA40)	04	A High School Diploma and relevant program experience. A Bachelor's Degree may be substituted for the required program experience.	A Bachelor's Degree in Social Work, Psychology or another behavioral science.

Staff Education Levels, FFY 2019, Quarter 3

Position	Bachelor's or Higher	Come College/Business Technical	High School Graduate	N/A Missing	Total
Human Services Specialist II (GA 40)	821	11	3	1	836
Human Service Coordinator I (GA 50)	156	0	0	0	156
Human Service Coordinator II (GA 60)	38	1			39
Program Coordinator I (AH 35)	4	0	0	0	4
Program Coordinator II (AH 40)	11	0	0	0	11
Total	1,030	12	3	1	1,046

Source: SCEIS database (1J90, 91,92, 93 PCA and 1E74 PCA for OHAN)

Staff Characteristics, FFY 2019, Quarter 3

Characteristic		Total Number	Percent of Workforce
Gender	Female	916	87.5%
	Male	130	12.5%
Race/Ethnicity	Asian	1	.11%
	Black/African American	687	65.61%
	Hispanic/Latino	17	1.62%
	White	334	31.9%
	American Indian/Alaska	0	0%
	Missing/unassigned	8	.76%
Age	22-29	381	36.49%
	30-39	317	30.36%

	40-49	188	18.00%
	50-59	119	11.39%
	60+	39	3.76%
	Missing	0	0%
Highest Education	Associate	5	.48%
	Bachelor's	908	87.3%
	Completed 1 yr. College, Business, or Tech	1	.09%
	Completed 2 yrs. College, Business or Tech	0	0%
	Completed 3 yrs. College, Business or Tech	5	.48%
	Doctorate	1	.09%
	High School Graduate	3	.28%
	Master's	121	11.63%
	Missing/unassigned	1	.09%
Position Class Title	Human Service Specialist II (GA 40)	836	79.92%
	Human Service Coordinator I (GA 50)	156	14.91%
	Human Service Coordinator II (GA 60)	39	3.72%
	Program Coordinator I (AH 35)	4	.38%
	Program Coordinator II (AH 40)	11	1.07%

Source SCEIS database: (1J90, 91, 92, 93 PCA and 1E74 PCA for OHAN)

Training Requirements

Child Welfare caseworkers must be certified to perform CPS Investigation, Foster Care, Family Preservation, and Intake services. This includes Caseworkers that are county-based, regional, and caseworkers who receive Out-of-Home Abuse and Neglect Reports and perform an Out-of-Home CPS Investigation.

The state has established a minimum of twenty (20) hours of annual ongoing training for all Certified Child Welfare Caseworkers to maintain Certification. The Agency has not established what training activities are required within those twenty hours of ongoing training. For details related to Ongoing Training for Certified Child Welfare Caseworkers, see the 2018 APSR, Program Support Page 120 ff. and the CFSR 3 Statewide Systemic Factors, Item 27, Ongoing Training on Pages 90-94.

Performance Appraisal System

The Employee Performance Management System (EPMS) appraisal document is officially maintained in the employee's personnel file. All performance appraisals shall be made in writing by the employee's supervisor (the rater) who has direct experience or knowledge of the work being performed. The appraisal shall be reviewed by the next higher-level supervisor (the reviewer), unless the rater is the agency head, prior to the appraisal being discussed with the employee. The reviewer may attach additional comments to the appraisal, where the reviewer may take exception to any of the rater's appraisal points. However, the reviewer may not change the appraisal completed by the rater unless it is a County Director or Regional Manager's appraisal. Whenever an employee's job responsibilities change significantly, the appraisal document should be revised to reflect the changes. The final appraisal shall bear the signature of the rater, the reviewer, and the employee. If any party refuses to sign the appraisal, a notation shall be made on the performance appraisal of this refusal. A witness (another supervisor other than the rater or reviewer) should sign on the bottom of the front page to acknowledge that the party refused to sign the appraisal.

All covered employees shall be given an annual appraisal no more than ninety (90) calendar days prior to the employee's official review date. The official review date marks the beginning of a new review period. If an employee does not receive an appraisal prior to the official review date, the employee shall receive a "successful" rating by default. A covered employee may not be issued an overall "unsuccessful" appraisal at any time during the annual review period without following the "Substandard Performance Process." All performance appraisals shall become a permanent part of the employee's official personnel file. The supervisor shall furnish the employee a copy of the performance appraisal and copies of all pertinent attachments.

The Human Resources Management Division will provide each County or Division a listing, four to six weeks in advance, of employees who are due to an Annual Performance Appraisal. Nevertheless, it is the responsibility of the Supervisors to know when appraisals are due to on each of their employees and to plan their schedules accordingly. Supervisors and reviewing Supervisors are responsible for ensuring that their employees' evaluations are completed in advance. This includes the preparation of the Employee's Planning Stage. These are the mandatory duties of Supervisors and should be included as an essential element on each Supervisor's EPMS. Supervisors ensure that an internal procedure is established to evaluate employees under their supervision in a timely manner.

The EPMS, when used properly, is an effective management tool for communicating duties, evaluating performance, and encouraging improvement. As a result, the EPMS can have a dramatic impact on the overall quality of care and service provided by the SCDSS. The purposes of the Employee Performance Management System are:

- to provide an accurate, objective, and constructive method to evaluate employee's performance;
- to improve the work performance of employees in order to enhance efficiency and productivity for the South Carolina Department of Social Services;
- to assist management in assigning work and delegating responsibilities based on a mutual understanding of the employee's skills, abilities and the requirements of the job;
- to encourage continued growth and development of all employees;
- to maintain a documented history of the employee's performance in order to support recommendations for performance pay increases, promotions, reassignments, transfers, demotions, and dismissals;
- to provide for a formal method of communication between Supervisors and employees; and
- to provide a written agreement between the employee and SCDSS identifying specific job duties, performance characteristics, and objectives on which the employee will be appraised.

Caseload Requirements

DSS has established caseload standards in OHAN, Foster Care, and Adoptions. DSS is aware that with the rising number of investigation and cases moving into family preservation caseloads that we must identify standards to address the workload in these two areas. DSS will be exploring a methodology to establish standards for investigation and family preservation. Family Preservation is currently assigned the highest volume of children for our system and we recognized the importance of ensuring standards are adopted to equalize the workload.

The following caseload standards have been approved (adopted):

Pure caseloads:

- OHAN investigator: 1 caseworker: 8 investigations
- Foster Care caseworker: 1 caseworker: 15 children
- IFCCS caseworker: 1 caseworker: 9 children
- Adoption caseworker: 1 caseworker: 17 children
- New worker: ½ of the applicable standard for their first 6 months after completion of Child Welfare Basic

Supervisor workload:

- Foster Care Supervisor, 1 supervisor: 5 caseworkers
- Adoption Supervisor, 1 supervisor: 5 caseworkers
- Intensive Foster Care Supervisor, 1 supervisor: 5 caseworkers
- OHAN Supervisor, 1 supervisor: 5 caseworkers

Mixed Caseloads:

- Family Preservation, CPS, & Other Non-Foster Care Services: 1 to 12 families
- For Pure Foster Care: 1 to 15 class member children
- For Mixed Foster Care: 1:15 class member children & non-foster care families

Mixed caseloads are defined as having more than one type of case that includes both class-members (foster care children under 18 years of age) and non-class members.

Juvenile Justice Transfers

During this review period, the South Carolina Department of social services has created a portal as agreed upon in the MOU with the Department of Juvenile Justice on September 2017. The portal is currently in the developmental stages and will include the following scope of work:

- Business Purpose: Allow the South Carolina Department of Juvenile Justice the ability to view Foster Care records and information contained in an indicated case, subject to limitations imposed by any state or federal privacy laws.

- Functional Purpose: The Child and Adult Protective Service System (CAPSS) should create a portal to allow the Department of Juvenile Justice to view case information on a child.

- Stakeholders: The Department of Juvenile Justice will utilize the portal to view indicated case information concerning a child or a sibling of the child.

The DJJ Portal provides the following:

- Case history and related parties
- Foster Care placement type
- Last known address
- Status of parental rights
- Support Services

- Reported allegations
- Types of maltreatment and DSS actions

The Department of Juvenile Justice has also agreed to reciprocate a portal that will allow the Department of Social Service to view shared clients. This portal development has not started.

CAPSS data reflects there were 94 distinct children placed at DJJ during the calendar year 2018 with a total of 133 placements. (Some children were placed at DJJ several times.)

VII.B. EDUCATION AND TRAINING VOUCHERS

SCDSS is the only agency that authorizes ETV vouchers. These vouchers are used to assist current foster youth, former foster youth (those that aged out of foster care, reunified with family on or after their 14th birthday, and left care for kinship/guardianship or adoption on or after their 16th birthday) who are enrolled in a post-secondary school that will allow them to become independent and responsible adults. These funds are awarded based on need up to $5,000 a year for 5 years or the age of 26 years old, whichever comes first. Specific accomplishments and progress to establish, expand, or strengthen the state's postsecondary educational assistance program:

During FFY 2019, the Chafee Foster Care Independence Program:

- Worked with the SC Commission on Higher Education to promote the use of the South Carolina Needs-based Grant for Foster Care Youth. The ETV and SCNBG- Foster Care Youth applicants are cross-referenced to ensure youth apply for both opportunities;
- Collaborated with the SC Department of Education, SC Guidance Listserv (for high school guidance counselors), Carolinas Association of Collegiate Registrars and Admissions Officers (CACRAO), and with multiple SC colleges and universities;
- In an effort to recruit, retain, and support youth in post-secondary education, has partnered with educational consulting services, Woodburn Education Services, and Next Level Educational Services. These services provide guidance to students starting in high school and through the processes of college matriculation. Services include tutoring, SAT/ACT preparation, FAFSA assistance, college application, financial aid application/explanation, interest inventories for selection of major and more.
- Distributed a brochure specifically focused on the ETV. The program is also distributed promotional material to create a knowledge base about ETV funding.
- Provided other financial aid information with youth, Caseworkers, care providers, Guardians ad Litem, and adults who work with youth in our eligible population;
- Provided training to guidance counselors and career counselors about ETV benefits;
- Continued to focus on identifying eligible youth for ETV funding through CAPSS reports and NYTD Listserv;
- Mailed letters to eligible youth informing them about ETV funding;
- Provided information to youth about the 4C Able Futures Camp which provided a week-long summer camp for high school juniors and seniors to receive an on-campus college experience.

- Created partnership with Midlands Technical College to implement a program to support youth in transition attending technical college with the hope of replicating statewide through the South Carolina Technical College Association.

To date, the Chafee program staff has had the following ETV recipients:

ETV recipients for 2017-2018 School Year:

Total 153, New 36

ETV recipients for the 2018-2019 School Year:

Total 92, New 55

Note: Revision made to 2016-2017 school year to show 105 Total 50 new

Changes in the administration of the ETV Program

Since the submission of the last APSR, there have no changes in the method of administering the ETV Program.

VII.C. INTER-COUNTRY ADOPTIONS

Until August 2018, SCDSS would have had to read, approve, and enter all international adoption home studies and families name into the CAPSS system. Due to changes with requirements and many international counties not allowing international adoptions SCDSS was no longer obligated to approving and entering all families' names into their database system.

Furthermore, DSS currently does not have a system in place to track those who were adopted from other countries that become involved with the agency for abuse and/or neglect. DSS has recently requested assistance from its Division of Technology Services (CAPSS support) to add a way to track children who have been adopted in the CAPSS system. The Division of Technology Services will start working on developing the above requested item in the near future. The permanency division within DSS has requested that this proposed request not only capture those adopted from other countries but those adopted through foster care and private domestic adoptions as well.

VII.D. MONTHLY CASEWORKER VISIT DATA

(Submitted in December annually)