

Fiscal Year 2019-20 Needs- Based Plan & Budget

Commonwealth of
Pennsylvania

Office of Children, Youth
and Families

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

Budget Narrative Template

The following pages provide a template for counties to use to complete the narrative portion of the Fiscal Year (FY) 2019-20 Needs-Based Plan and Budget (NBPB). All narrative pieces should be included in this template; no additional narrative is necessary. Detailed instructions for completing each section are in the NBPB Bulletin, Instructions & Appendices. As a reminder, this is a public document; using the names of children, families, office staff, and Office of Children, Youth and Families (OCYF) staff within the narrative is inappropriate.

The budget narrative is limited to a MAXIMUM of 50 pages, excluding charts. All text must be in either 11-point Arial or 12-point Times New Roman font, and all margins (bottom, top, left, and right) must be 1 inch. Any submissions that exceed the maximum number of pages will not be accepted.

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

Philadelphia

NBPB
FYs 2017-18, 2018-19 and 2019-20

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

Section 2: NBPB Development

Throughout this document, “DHS” refers to the “Philadelphia Department of Human Services”.

2-1: Executive Summary

- Respond to the following questions.

The City of Philadelphia Department of Human Services continues to work toward achieving the four goals of Improving Outcomes of Children: more children and youth maintained safely in their own homes and communities; more children and youth achieving timely reunification or other permanence; a reduction in the use of congregate care; and improved children, youth, and family functioning.

Our overarching focus is on rightsizing both the child welfare and the juvenile system while prioritizing safety, permanency, and well-being. This includes safely diverting children and families; increasing the use of prevention services to avoid out-of-home placement; increasing the use of kin and other family placements when placement is necessary; and prioritizing safe and timely permanency. Our goal is to find the best match of service for children and families.

- ❑ Identify the top three successes and challenges realized by the County Children and Youth Agency (CCYA) since its most recent Needs-Based Plan and Budget (NBPB) submission.

Philadelphia Department of Human Services’ top successes include:

1. CUA Scorecard: In October 2017, as part of its commitment to transparency and best outcomes, Philadelphia DHS also published its first CUA Scorecard. The CUA Scorecard is meant to track the quality of services that lead to best outcomes for children and youth, recognize areas in which CUAs are doing well, and identify where they need additional support. The first CUA Scorecard provided baseline data for FY 2016-17, allowing Philadelphia DHS to assess current CUA performance and how to measure improvement over time. The CUA Scorecard process invites public accessibility and provides the framework for accountability. Performance at the six-month mark reflects improvements. The scorecard provided a road map for CUAS and resulted in overall improvement. All CUAs have improved their performance over the first six months of the CUA Scorecard compared to the baseline. Quarterly “Closing the Loop” review and technical assistance sessions are continuing, and Philadelphia DHS is on target to issue the first annual CUA Scorecard report in the fall of 2018. Please see the Program Improvement Strategies section of this narrative for additional information on the CUA Scorecard and other monitoring/practice improvement strategies.
2. Field Screening Unit: In August 2017, Philadelphia DHS implemented field screening units to conduct secondary screenings on reports with the goal of safely diverting families from investigation. Since their inception, the field screen units have achieved great success in diverting children and families from the child welfare system. Please see the Program Improvement Strategies section of this narrative for additional information.
3. Improving Outcomes for Children (IOC) evaluation: In October 2017, the Child Welfare Policy and Practice Group completed an independent audit of the Improving Outcomes for Children (IOC) System Transformation and affirmed that “the goals of

Philadelphia

Improving Outcomes for Children with a focus on decentralized, community-based delivery of services are strengthening the local child welfare system. Due to contributions and the leadership from DHS and the CUAs, structural progress has been increasing, and the workforce is stabilizing.” (See Final Report, Evaluation of the Improving Outcomes for Children Transformation in the Child Welfare System in Philadelphia, October 2017, p. 8; <https://www.phila.gov/hhs/PDF/IOC%20Evaluation%20Final%20Report.pdf>.) Many of the recommendations for improvement were areas that Philadelphia DHS already recognized and had begun to address. Recommendations are discussed further in the Program Improvement Strategies section of this narrative.

The primary challenges that Philadelphia DHS is addressing are:

1. Rightsizing the child welfare system and juvenile justice system including reducing the number of children and youth in placement: Philadelphia is addressing this challenge by ensuring that decisions are assessment-based; ensuring that there is a sufficient array of community-based prevention, diversion, and supportive services to meet our families’ needs; ensuring that standards are clear, the quality of practice is monitored, and technical assistance provided when necessary. Please see the Program Improvement Strategies section of this narrative for additional information.
2. Reducing the length of time to permanency for children and youth in out-of-home care: Philadelphia DHS is addressing this issue with programs and interventions such as Rapid Rehousing for families whose primary issue is lack of housing, rapid permanency reviews, use of Accurint to identify kin, supporting sufficient staffing for the City of Philadelphia Law Department. Please see the Program Improvement Strategies section of this narrative for additional information.
3. Reducing the time to finalized adoption: DHS is addressing this challenge by working with internal and external partners to identify barriers, clarifying and revising responsibilities and time frames, and supporting the work of Philadelphia City Solicitors in Accelerated Adoption Review Court (AARC). Please see the Program Improvement Strategies section of this narrative for additional information.
4. Reducing the number of older youth aging out of the system without permanency: Philadelphia DHS is addressing this challenge through plans to complete Accurint searches for all youth in congregate care for whom there isn’t a visiting or permanency resource and for children and youth in foster care placements for whom kin have not been identified, and by increasing use of SWAN services. Please see the Program Improvement Strategies section and the Accurint section of this narrative for additional information.

- ☐ Summarize additional information, including findings, related to the CCYAs annual inspection. Quality Services Review (QSR)/Child Family Service Review (CFSR) findings that will impact the county’s planning and resource needs for FYs 2018-19 and 2019-20.

Philadelphia DHS received a renewal of its full license from PA DHS. DHS continues to emphasize kinship placements for children and youth. Currently, 56% of the children placed in a foster family home setting are with kin. We continue to have success reducing the use of congregate care. Children and youth placed in congregate care settings in Philadelphia on June 30, 2018 constitute approximately 11% of all children in out-of-home placement. We have been having success with our resource parent

Philadelphia

recruitment strategy, including a successful phone bank partnering with NBC/10-Telemundo/62.

In order to address the needs of the children and families that are served by Philadelphia DHS, DHS is requesting increases in funding for the following items:

- CUA contracts: to fully fund the ten families to one Case Manager ratio, increases in liability insurance premiums, additional labor costs, and increased costs around family engagement for family team conferencing.
- Foster Care Recruitment: to expand and enhance our marketing to recruit resource parents to help with our planned reduction of congregate care.
- Transportation Costs: to assist with transportation of children and youth to school when they need to move from their home of origin.
- Placement Costs: to fully fund changes in per diem costs designed to allow children and youth to receive quality care that is close to home.
- Prevention Service: to fund the social service portion of the Support Team for Education Partnership (STEP) a collaboration between DHS, the Philadelphia Department of Behavioral Health and Intellectual disAbility Services, and the School District of Philadelphia to provide intervention and support to at-risk children, youth, and their families and address issues that may lead to truancy, removal from school, or increased risk for other dependency issues or delinquency involvement.
- Prevention Services: to increase the capacity of each of the Prevention Anchor Programs to address safety, permanency, and well-being needs of children, youth, young adults, and families in order to divert them from formal child welfare, prevent placement, stabilize permanencies, and support positive outcomes for transitional age youth and young adults.
- Family Finding: to expand the capacity to located kin resources for children and youth.
- Training: to enhance and improve capacity among child welfare providers.
- Custody Evaluations: to assist with stabilizing families and diversion from the formal child welfare system.
- Legal Assistants: to assist our Law Department with filing of petitions and preparation for Court with the ultimate goal of shortening the time to permanency for children and families.
- Family First Prevention Service Act: to fund costs associated with a project to evaluate existing services and, where possible, certify them as “well-supported,” as defined by the FFPSA.
- Forensic Evaluations: to increase capacity and reduce waitlists for evaluations that inform social work and Court decisions regarding services needed for a child or youth, parent, caregiver, or family.
- Quality Visitation Review: to contract with a qualified vendor to conduct a third-party Visitation Audit. This Audit will enable DHS to validate internal Quality Visitation processes and identify additional practice areas for quality assurance.

- ☐ Identify the top three successes and challenges realized by the Juvenile Probation Office (JPO) since its most recent NBPB submission.

Although the nature of Juvenile Justice Services is somewhat different from those of child welfare, the goals and priorities parallel those of CWO and IOC:

Philadelphia

- Safely reducing the number of youth removed from their communities and ensuring that youth engaged in the juvenile justice system are in the least restrictive settings to support their needs.
- Increase the use of community-based solutions.
- Reducing the length of stay for those youth who are placed.
- Reducing reliance on institutional placement for youth who require placement.
- Reducing recidivism through strong post-discharge services, improved youth competencies, and family functioning.

The Philadelphia County Juvenile Probation Office, Juvenile Justice Services, and Family Court consider the top three successes since the last submission to be:

1. Graduated Response: Aligned with reducing the utilization of secure detention and reducing the population in residential placements, Graduated Response is one of the components associated with the third stage of JJSES. In Phase one of the pilot, families and youth responded positively when incentives were earned and they were given recognition when complying with court-ordered conditions. Please see the Program Improvement Strategies section of this Narrative for additional information.
2. The Post-adjudication Evening Reporting Center: The Post Adjudicatory Evening Reporting Center, which has been in operation nearly three years, continues to produce promising results and has, in fact, been recognized by the PA Juvenile Court Judges Commission (JCJC) as the “Community Based Program of the Year”. Consistent with our goal of reducing unnecessary reliance on institutional placements, this program serves as an effective alternative to such placements while at the same time delivering a robust menu of high quality evidence-based practices to the youth participants.
3. School Police Diversion Program: The School Police Diversion Program, now well into its fourth year, continues to produce positive results with school arrests having decreased by 71% since the program’s implementation. Interestingly, we are showing a steady decline in the number of diversions, only 308 having taken place this past fiscal year. Many of these diversions were for weapons possession and for possession of small amounts of marijuana. These declines suggest to us that instead of bringing to the attention of law enforcement the kind of student misconduct which previously prompted that level of intervention, schools are figuring out ways to address the youth’s misbehavior internal to their respective schools and without the imposition of arrests and the associated collateral consequences.

All of these programs help to achieve county goals of safely diverting youth from more intensive levels of intervention, such as detention.

Philadelphia’s most immediate challenges since the last submission are considered to be:

1. Improving, monitoring, and ensuring the quality of the services to JJS youth, including ensuring length of stay in a program is consistent with top needs identified by YLS. See Program Improvement Strategy section for additional detail.
2. Needing to further reduce the number of youth in placement and the need to enhance the ability of providers to meet the needs of the youth.
3. Providing respite care for youth on general probation or involved in Juvenile Treatment Court (JTC) who require abbreviated residential placements of two to 30 days. See Chart analysis section for additional detail.

Philadelphia

4. Identifying and being responsive to the service needs of direct file juveniles coming back to the juvenile justice system from the adult system. See Program Improvement Strategy section for additional detail.

- ❑ Summarize any additional areas, including efforts related to the Juvenile Justice System Enhancement Strategy (JJSES) and the data and trends related to the Youth Level of Service (YLS) domains and risk levels impacting the county's planning and resource needs for FYs 2018-19 and 2019-20.

The programs and priorities of DHS' Juvenile Justice Services Division are focused on providing access to high quality programs which prevent or divert young people from formal penetration of the juvenile justice system; ensuring that the formal system meets their criminogenic needs when penetration does occur; and providing high quality programs and services to support successful reintegration and decrease the likelihood of recidivism. DHS continues to work collaboratively with the Court and the Juvenile Probation Office (JPO) to accurately assess the level of risk and service need posed by delinquent youth. This, in turn, informs the type, intensity, and length of programming warranted for producing the best outcomes for pre- and post-adjudicated youth.

As in the previous fiscal year, the Philadelphia Juvenile Justice Services Center (PJJSC), Philadelphia County's secure detention facility, was fully licensed subsequent to the annual PADHS audit. The facility continues to provide safe, secure, humane, and trauma-informed services for the youth in its custody, meeting the array of educational, medical, social services, and behavioral health needs with which many of these youth present.

Philadelphia County continues to make significant strides in its juvenile justice reform efforts, driven largely by Pennsylvania's Juvenile Justice System Enhancement Strategies (JJSES) and its commitment to the eight core strategies of the Juvenile Detention Alternatives Initiative (JDAI). The four stages of JJSES implementation are fluid, and currently, Philadelphia is in between stages two, three, and four of JJSES. During stage two of the JJSES, Philadelphia implemented the use of an evidence-based risk assessment tool, the Youth Level of Service (YLS).

Philadelphia continued its commitment to the Annie E. Casey Foundation's Juvenile Detention Alternative Initiative (JDAI) by focusing on safely reducing reliance on secure confinement. JDAI works to strengthen the Juvenile Justice System through a series of interrelated reform strategies. Successful task force collaboration has resulted in the following tangible policy reforms: 1) the implementation and ongoing evaluation of the Detention Risk Assessment Instrument which objectively screens all newly arrested youth to determine who can be safely supervised in the community; 2) the continued success of the pre-adjudicatory Evening Reporting Center (ERC) to serve as an alternative to detention; 3) the design and development of the city's first post-adjudicatory ERC to serve as a community-based alternative to placement; 4) the piloting and ongoing development of a system of graduated responses used by Juvenile Probation Officers to reinforce positive behavior change; and 5) continued partnership with the Philadelphia Police Department to implement the Police Diversion Program that diverts youth with minor offenses in the school environment to Intensive Prevention Services to avoid formal penetration of the system.

Philadelphia

Outcomes for Philadelphia's most disadvantaged youth while under probation supervision continue to trend positively. In 2017, the Juvenile Probation Department restructured its geographic districts to create two new units, piloted a Graduated Response System, and designed, developed, and opened the Post-Adjudicatory Evening Reporting Center (ERC). To address the complex needs of vulnerable children touching both the dependent and delinquent streams in the Juvenile Division, and to appropriately assess risk so that suitable services may be carefully chosen for youth, the Cross-over Unit and the Youth Level of Service (YLS) Unit were created. Global Positioning System monitoring was used successfully as an alternative to both detention and placement, and to support safe supervision of juveniles who have touched the system.

Finally, in an effort to support the work being done to reduce the number of youth in placement, Philadelphia County anticipates that there will be an increased need for intensive prevention services, intensive supervision, and in-home detention services. See Chart analysis section for details.

DHS is requesting funding in the following areas to support its efforts in achieving its goals:

- Full funding of Youth Detention Counselor staffing positions at the Philadelphia Juvenile Justice Services Center to meet staffing ratios during all shifts as mandated by the State and Court Order and to meet security needs during transportation, intake, activities, etc.
- Continued funding to support Graduated Response incentives.
- Funding to expand the success of the Post-adjudicatory Evening Reporting Center.
- Funding to develop a Post-Discharge Reporting Center to support high risk youth returning to the community from residential placements. While the recidivism data for this cohort is still being collected and analyzed, we hope that by developing such a Center we can strengthen the reintegration process for these youth, intervening early and with substantive linkages. This, we believe, will enhance their timely connection to programs and resources that support their remaining crime-free, reducing then the likelihood of cycling to detention and placement.
- Funding to develop a respite program to support the Court's graduated response philosophy.
- Funding to develop a Day Center, in partnership with the School District of Philadelphia and Community Behavioral Health, as an alternative to costlier, less targeted residential placement for girls involved in the Juvenile Justice System.
- Funding for additional Global Positioning System units to further support alternatives to detention and placement.
- Funding to support expected increase in intensive supervision, in-home detention, and intensive prevention services due to anticipated changes in sentencing of juveniles.
- Funding to support a juvenile assessment and processing center (the HUB) to support the needs of youth who are detained by the Police.
- Funding to support a dedicated Restitution Fund to give youth an opportunity to resolve outstanding restitution obligations that serve as a barrier to closing their probation cases.

Philadelphia

- **REMINDER:** This is intended to be a high-level description of county strengths, challenges and forward direction. Specific details regarding practice and resource needs will be captured in other sections of the budget submission.
 - Counties may attach any County Improvement Plan (CIP) for detail and reference attachment.
 - Counties participating in the CFSR may attach any CFSR reports from the federal Online Monitoring System (OMS) and reference attachment.

2.2a&b: Collaboration Efforts and Data Collection Details

- Respond to the following questions.

- ☐ Summarize activities related to active engagement of staff, consumers, communities, and stakeholders. Identify any challenges to collaboration and efforts toward improvement. Counties do NOT need to identify activities with each entity highlighted in the instruction guidelines but provide an overview of activities and process by which input has been gathered and utilized in the planning process.

Internally, DHS Executive Cabinet meets weekly for Divisional status updates, discussion, and strategic planning around areas of focus or concern, and assignment of tasks and deadlines. Act 33 recommendations are discussed at this table and assigned to Executive staff for action when necessary.

Leadership also meets regularly with outside stakeholders at the following types of meetings:

- Child Welfare Oversight Board Meeting/Quarterly Public Data Meeting.
- Local Court Roundtable where the DHS Commissioner serves as co-chair.
- Child Advocate and Parent Advocates meeting with the DHS Commissioner.

Each Philadelphia DHS Division holds regular staff meetings. The Division of Child Welfare Operations, which includes both DHS and CUA operations, was established in September 2016 and holds monthly meetings. The Child Welfare Deputy Commissioner and Operations Directors hold a joint monthly meeting with DHS and CUA Supervisors called Supervising for Excellence Supervisory Learning Series. The purpose of the joint supervisor meetings is to strengthen and integrate best practice among our Child Welfare Operations system; we offer training hours through DHS University as well as substantive content during our mandatory monthly meetings. Trainings that have been offered to both DHS and CUA staff during these monthly meetings include:

- In-Home Safety Best Practice.
- Out-of-Home Safety.
- Safety from a Well-Being Perspective.
- Safe Case Closure.
- Older Youth Transition Planning.
- Dependency Court.

It is our intention to continue to inform our supervisory staff through these monthly meetings to help build stronger practice methods as well as build on the collaboration between CUA and DHS staff. CWO will continue to work with DHS University to develop the supervisory curriculum. Our focus for the upcoming sessions/topics will be:

- Closing the Loop Practice Trends: The Supervisor's Role in Addressing Poor Performance Indicators to Improve Practice Across the System.

Philadelphia

- High Profile/Act 33 Case Practice Reviews.
- Kinship Care.
- ICPC Process.
- The Three Levels of Supervision.
- Safety, Permanency and Well-Being Through the Eyes of Supervision.

Additionally there is a monthly meeting with DHS Administrators and CUA Case Management Directors, chaired by a CWO Operations Director and a monthly meeting with DHS Directors and CUA Directors. Over the past year, the Commissioner and Executive Staff met monthly with the CUA CEOs. DHS and CUA management have various internal all-staff meetings.

Each CUA is required to have a Community Advisory Board whose purpose is to advise the particular CUA as to how it is immersing itself in the community, what the specific needs of the community are, and how the CUA can help address them, among other things. Their membership is made up of community members and community business owners, school principals, and prominent leaders in the community. These meetings occur monthly.

The CUAs are also required to have a minimum of three Parent Cafes a month. These Cafes have been very successful and well attended by community members, both DHS-involved and not, and are only one type of the many community engagement activities planned by individual CUAs (or jointly by CUAs) that have taken place throughout Philadelphia.

Every year approximately 250 – 300 youth age out of placement without permanency. To combat this, Philadelphia DHS is actively engaged in a collaborative effort with the “Philly Homes 4 Youth Coalition” which is charged with reducing homelessness for older youth in the city of Philadelphia. The coalition is comprised of 30 plus partners, including legal, youth and homeless advocate communities, provider communities, and public agencies. Currently, DHS University is engaged in long-term strategic reform work with coalition members around transition planning, board extensions, and resumption of jurisdiction.

DHS has placed greater emphasis over the past year on the Quality Parenting Initiative (QPI) as an integral part of broader efforts to strengthen the foster care system and retain resource parents. QPI brings together resource parents, youth, biological parents, CUAs, provider agencies, attorneys, and staff across several DHS divisions, with a particular focus on elevating the voices of the resource parents. QPI members are working on better communication and information-sharing, building relationships between resource and biological families, improvements to resource parent trainings, and promoting the resource parent voice in court. As part of a national network of QPI sites, Philadelphia has been selected to host the 2019 national conference in recognition of the innovative work that Philadelphia QPI is doing. It is expected that resource parent retention and placement stability will be positively impacted by the work of QPI.

This year there was continued collaboration among the Department’s Juvenile Justice Services Division, Juvenile Probation, the Defender Association, District Attorney’s Office, School District, PADHS, and other stakeholders in the continued implementation of several core strategies of the Juvenile Detention Alternatives Initiative (JDAI).

Philadelphia

The Deputy Chief of Juvenile Probation along with DHS' Director of Court and Community Services co-chair monthly Court and Community Services Planning Group meetings. These meetings represent an opportunity to communicate across systems news about important developments in the field, information about resources available for serving the Philadelphia's juvenile justice population, and discussions about systematic challenges and solutions.

The DHS/JJS leadership team actively participates in the bi-weekly Youth Review Meeting, convened at Family Court. These meetings include participation by line JPOs, DHS CWO representatives, Defender Association, the District Attorneys' Office, CBH, and others, and serve as opportunities for collaboration on specific cases as well as systemic challenges.

DHS/JJS actively participates in the Systems of Care work being lead by the City's Department of Behavioral Health and Intellectual disAbilities (DBHIDS), collaborating with family members and youth who are or have been the recipients of our services. Additionally, we have maintained throughout this year the collaborative relationship with the Office of Addiction Services (OAS) such that their "**Engaging Males of Color**" (**EMOC**) continues to provide monthly wellness sessions to the youth in our custody at the Philadelphia Juvenile Justice Services Center (PJJSC). The goal of the program is to improve the health status of males of color by increasing behavioral health literacy and access to resources and services. The program also seeks to reduce stigma and known disparities and build system capacity in order to sustain wellness.

Philadelphia's Juvenile Probation Management Team is involved in several collaborations and committee meetings throughout the county and the state of Pennsylvania.

Participation in the following committees furthered Juvenile Probation's mission. Statewide committees include the Juvenile Court Judge's Commission (JCJC) Technology Committee, Graduated Response, Regional Planning Committee, the Pennsylvania Justice Network, and the Pennsylvania System of Care Collaboration. Management Team members also collaborated with the 100 Day Challenge, a City program which prevents young adult homelessness, Youth Fatality Review, Re-entry Programming for youth returning from residential care, and the Juvenile Detention Alternative Initiative (JDAI), which includes subcommittees for Disproportionate Minority Contact and Victim and Community Support. Ongoing collaboration includes the STOP/Domestic Violence Law Enforcement Collaboration, the Violent Injury Collaboration, the Youth Violence Reduction Partnership, and regular meetings with Philadelphia Police.

- ☐ Provide a detailed description of how data sources are selected and how the data is analyzed.

Use of data from the Hornby-Zeller Data Package is required by the Needs Based Plan and Budget Guidelines and Narrative Template. Cognos queries of the Temporary Data Warehouse are used to access most of the remaining data items listed in the table in the following section. DHS data and trend analysis is conducted by the Performance Management and Technology Division (PMT), Data Analytics Unit, using descriptive

Philadelphia

statistics and identifying any patterns using computer applications. To help with that analysis, we use SPSS, Stata, and Excel. In addition, service trends and projections will be presented to Philadelphia DHS, JPO, and Family Court leadership for review and for input on how programmatic priorities may affect service trends.

Since the Data Warehouse was lost in December 2014, the relative ease and flexibility of accessing and analyzing data was severely constrained. Philadelphia DHS has built an interim, functional Warehouse that has allowed an accelerated rate of data report production for CUAs and DHS. Concurrently, DHS is building a new, state-of-the art Data Warehouse, which will be operational by October 1, 2018 and will allow DHS to conduct more sophisticated data analytics. DHS has begun development of the Integrated Case Management System (ICMS), which will enable full integration of multiple child welfare practice data sources, easy user navigation, and user-based data management and reporting capabilities. Finally, DHS is working on interim and long term strategies to reduce errors in AFCARS reports and expects that errors will be eliminated or minimized after the migration of Legacy FACTS in FY2018-19.

- ☐ Identify data sources used in service level, needs assessment, and plan development.

Resource	Data Collected	Date of Data
FACTS / FACTS ²	General Indicators, Ongoing Services, JPO Services, Placement Data, Congregate Care, Re-entry, Demographics, Permanency, Fostering Connections questions (Aging Out), Investigations, Days of Care.	July 2018
Hornby-Zeller Data Package	Population Flow, Prospective Permanency, and Re-entries.	July 2018

- Counties may attach Implementation Team membership, Child Welfare Demonstration Project (CWDP) Advisory Team membership, or similarly named stakeholder group list to supplement these responses. With these attachments, counties will not need to identify each stakeholder group who collaborated with the plan development unless not specifically identified in the attachment.

2.3 Program and Resource Implications

- **Do not address the initiatives in Section 2.3 unless requested below; address any resource needs related to all initiatives by identifying and addressing within the ADJUSTMENT TO EXPENDITURE request.**

2-3e. Overtime Rule

Requests for resources should be included as an Expenditure Adjustment. Please respond to the following questions regarding the county's general plan to address the proposed rule:

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

Philadelphia

Any changes at the state level proposed by the Governor to the overtime salary threshold are not applicable to City of Philadelphia departments.

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

At this time, the County is investigating which classes of private providers' employees will be affected by the proposed rule. Once clarity is obtained, the County will work with providers to understand potential financial and operational impacts.

- ☐ As of the date of this writing, provide the names of private providers who will be receiving an increase in their contracted rate of service for FY 2019-20 as a result of the new rule.

This will be determined based on the outcome of the process described above. The County hopes to provide more detail as part of a FY2019-20 expenditure adjustment request.

- ☞ To assist in development of a resource request tied to the new rule, please use the italicized questions as a guide when developing an ADJUSTMENT TO EXPENDITURE related to CCYA employees. For an ADJUSTMENT TO EXPENDITURE related to private providers, please provide any supporting documentation from the provider that addresses the same or similar questions. Follow the instructions in the "Electronic Submission" section of the Bulletin to submit supporting documentation:
- *How many CCYA employees will be affected by this change in regulation?*
 - *Approximately how many hours per week will need to be compensated that were not previously? At what rate(s)?*
 - *Is there a way to reduce or eliminate the need for overtime hours without affecting current operations?*
 - *Are the overtime hours worked now due to vacancies? If so, could additional staffing reduce or eliminate the need?*
 - *What analysis was completed to determine the direction of the agency's response to the new rule?*

2-3g. Continuous Quality Improvement (CQI)

For new counties interested in joining the CQI effort during calendar year 2019, please answer the questions found below. Interested counties will receive a follow-up communication requesting the county complete a self-assessment to help the state evaluate the county's level of readiness to participate in the CQI effort. The county can then complete and submit the self-assessment to OCYF at a later date outside of the NBPB process.

- ☐ Please briefly describe your county's interest in joining the statewide CQI effort.

Philadelphia is a current CQI county. See below.

- ☐ What is the tentative month your county would be interested in conducting a QSR in 2019 if approved to join the CQI effort?

Philadelphia is a current CQI county. See below.

Philadelphia

- ☐ Would you or any of your staff be interested in serving as reviewers for a 2018-2019 QSR to learn more about the CQI/QSR process?

Philadelphia is a current CQI county. See below.

For current CQI counties, please provide the month and calendar year the county is considering for your next QSR.

Philadelphia County's next QSR is scheduled for December 2018.

2-3n. Family First Prevention Services Act

- ☐ Describe the anticipated practice and fiscal impact of this legislation assuming the state opts in to the use of Title IV-E for prevention services and there are no delays requested in implementation.

The Family First Prevention Services Act (FFPSA) significantly alters how local jurisdictions allocate and receive reimbursements. Philadelphia DHS believes that due to the anticipated significant negative fiscal impact of implementation, and the need to further plan for the development of new programs, the state should delay implementation until after October 2019. Two primary service areas are impacted by FFPSA: prevention services and congregate care.

Prevention Impacts.

Philadelphia DHS is including a number of new initiatives as part of its FY2018-19 and FY2019-20 budget adjustments and requests funding in order to support successful implementation of FFPSA.

At the time of this submission, there has been insufficient guidance and clarity regarding crucial components of the legislation, such as what practices may be considered "well-supported," to allow Philadelphia County to identify practice changes in detail. As a result, Philadelphia DHS will be working to identify, assess, develop, implement, and evaluate potential or existing programs, but will not likely complete this process before the earliest implementation date. **The County respectfully requests funding beginning in FY2019-20 to support an approximately three-year project to evaluate existing services and, where possible, certify them as "well-supported," as defined by the FFPSA.** In addition, the IT Grant submission includes a request to support fully integrating Prevention Services into the new ICMS case management system in order to allow us to better track outcomes.

If the State does not delay implementation, the FFPSA would become effective on October 1, 2019, only 14 months from the date of this submission. Given the time it will take to select and certify "well-supported" evidence-based programs, at this time Philadelphia DHS is adding or expanding Prevention Services based on their effectiveness at diverting children, youth and families, not whether they are considered "well-supported" under the FFPSA (See Program Improvement Strategies section for details regarding Prevention Services).

Philadelphia

In order to fully prepare for implementation, DHS plans to issue an RFP for a research partner to evaluate prevention and child welfare programs that currently exemplify promising practices to certify them as Evidence Based Programs that meet the criteria of the FFPSA. DHS is requesting funding for this provider.

Congregate Care Impacts.

FFPSA strongly incentivizes the reduction of congregate care placements, a goal currently being successfully realized by Philadelphia County. Through use of clear guidelines about the use of this level of care and a mandated approval process, Philadelphia DHS Child Welfare Operations has reduced dependent congregate care placements from 22% in 2012 to 11% in 2018. Prioritizing resource family placement and further reducing the use of congregate care, continues to be a goal of the Improving Outcomes for Children System Transformation.

In order to meet these goals and support successful implementation of FFPSA, Philadelphia DHS is including a number of new initiatives among our FY2018-19 and FY2019-20 funding requests. These include additional resources for foster parent recruitment to create alternatives to congregate care as well as practice changes to regularly review existing congregate care placements that exceed 14 days in duration.

Despite these efforts, the fiscal impact on Philadelphia County and the state is expected to be significant if FFPSA is implemented in October 2019. Even with our greatly reduced use of congregate care, Philadelphia DHS projects to spend approximately \$75 million on congregate care per diems for Fiscal Year 2018-19. If FFPSA were implemented today, the portion of that cost covered by Title IV-E would be reduced by approximately \$18 million, with about \$12 million of this cost shifting to the State (Act 148) and the remaining \$6 million covered by Philadelphia County's General Fund. A more precise estimate of Title IV-E revenue changes will be included as an FY2019-20 revenue adjustment.

As a result of this legislation, states are now required to describe activities to reduce the length of time to permanency for children under age 5 and the activities undertaken to address the developmental needs of all vulnerable children under age 5 who receive services under Title IV-B or Title IV-E funding.

- ☐ Has the county experienced any challenges over the course of the past fiscal year related to achieving timely permanency for children under the age of 5? If so, please briefly describe these challenges and, if available provide any supporting data.

Philadelphia has experienced delays in moving children of all ages to permanency. Much of the delay can be attributed to the transition from a dual case management system to a single case management system with community-based providers. At the same time, the system also experienced a significant rise in the number of reports and cases accept for service.

- ☐ If the county has experienced challenges, please briefly discuss any strategies the county has put in place to help improve time to permanency for children under the age of 5. You may refer to the *Program Improvement Strategies* section of the Narrative Template if these strategies are discussed there.

Philadelphia

Philadelphia DHS is utilizing a multi-prong strategy to address our delays to permanency. These strategies include: Rapid Permanency Reviews, Rapid Rehousing, adoption process analysis and increased focus during supervision on expediting permanency.

- ☐ Please identify and provide a brief description of any specific services/programs the county is utilizing (or plans to utilize) to help address the developmental needs of children under the age of 5 who receive in-home or out-of-home child welfare services. You may refer to the *Program Improvement Strategies* section of the Narrative Template if these services/programs are discussed there.

DHS is currently working with the Department of Behavioral Health to ensure that all children, ages zero to three, who are in placement are referred for an early intervention evaluation. Using planned data matching, DHS will more easily identify those children in need of evaluation for early intervention services.

2-3o. Educational Success and Truancy Prevention

- ☐ Describe the impact Every Student Succeeds Act (ESSA) has had on the agency since implementation.

In response to ESSA mandates, DHS created a dedicated unit within its Education Support Center consisting of six ESSA Education Liaisons and one Supervisor to manage ESSA consults, troubleshoot, advocate, streamline supports, and coordinate Best Interest Determination (BID) conferences for DHS youth entering placement or experiencing placement disruption. In FY 2017-18, ESSA Education Liaisons were realigned so that four Liaisons manage consults for DHS youth attending schools within Philadelphia County, and two Liaisons manage consults for DHS youth in out-of-county placements, returning to Philadelphia county schools, Residential Treatment Facilities, and acute-partial hospitalizations.

Over the past year, Child Welfare Operations' requests for ESSA consults before and after placement have increased. In the first three quarters of FY2017-18, the Education Support Center held 661 BID conferences. As displayed in the table below, the number of conferences held increased each quarter, with an overall increase of 151% in the number of conferences held in FY 2017-18 in Q3 compared to Q1. Since the ESSA BID conferences were launched in the spring of 2017, and are a relatively new process, it is expected that the number of conferences held will continue to grow as more CWO staff become aware of the process and request conferences.

ESSA BID Conferences

ESSA BID Conferences	Q1	Q2	Q3	Total Q1-Q3
Youth remains in school of origin	75	133	211	419
Youth transferred to another school	46	103	93	242
Total	121	236	304	661

Philadelphia

While the number of ESSA BID Conferences continued to increase each quarter, there is a gap between the number of ESSA BID Conferences held and the number of children with placement disruptions. There is also room for improvement regarding notification of placements or placement disruptions occurring afterhours. The Administrator of the DHS Education Support Center's Education Stability and Childcare section meets with CRU and Hotline leadership to address the importance of ongoing communication and identify strategies to increase alerts to ESSA from CRU and Hotline staff. There is a plan to extend the meeting to DHS and CUA Case Management leadership to increase notification for placement disruptions. During FY 2018-19, DHS will continue to work to ensure that BID conferences are held in all required situations.

Last year, Philadelphia DHS identified training across all systems as a need to ensure that child welfare staff and other stakeholders are informed and understand the new ESSA provisions. Since then, Philadelphia DHS University (DHSU) finalized the online Learning Management System - ESSA Training, and it is now available for DHS, CUA, and sub-contracted Provider staff to become familiar with ESSA guidelines and supports. This summer, the Education Support Center will work with DHSU to identify ways to integrate this training into its new hire orientation as well as implement a system to ensure that all case management staff are trained.

- ☐ Provide the number of children who attended their home school district under ESSA in FY 2017-18.

As highlighted in the table above, 419 (63%) of the 661 children and youth for whom BID Conferences were held in FY2017-18 Q1-Q3 were able to remain in the school of origin.

- ☐ Describe any barriers your agency has encountered since the implementation of ESSA and/or technical assistance needs the agency has related to these provisions.

Transportation concerns continue to present a significant challenge. As mentioned in last year's submission, Philadelphia DHS is proposing to engage a supplemental transportation service that can be accessed immediately, a particular necessity for children and youth placed after hours or on an emergency basis. Funds would be used for immediate service for the time between placement and when School District of Philadelphia (SDP) transportation begins or when the School District of Philadelphia is unable to provide transportation. Funding would also be used for cost sharing with the SDP when they would not normally provide transportation services, such as for children in kindergarten. Since last year's submission, DHS Leadership has engaged in on-going discussions with the School District of Philadelphia's Finance and Transportation Department to assess whether it is a viable option for DHS to use the SDP's transportation vendors and for potential cost sharing opportunities. **Philadelphia DHS respectfully requests funding to support transportation of children and youth.**

In the early stages of implementation of the provisions of ESSA, several additional barriers were identified. Some of these barriers have been resolved, and Philadelphia DHS is working collaboratively with its partners to resolve others.

- Some LEAs had not identified a Foster Care Liaison point of contact. The ESSA Unit now has Foster Care Liaison (FCL) points of contact for all school districts.

Philadelphia

- LEAs do not have the ability to hold BID meetings during the summer months, so there is a backlog of children and youth for whom BID meetings need to be held. Some LEAs have identified an alternate during the summer months. The ESSA unit proactively inquires about a summer substitute point of contact before the close of the school year.
- There are some communication and role confusion issues which affect:
 - Meeting timelines as outlined in the ESSA regulations due to LEA non-responsiveness or differences in interpretation of the ESSA guidance.
 - Providing transportation support aides for children and youth with special needs. In FY 2017-18, Philadelphia DHS and the School District of Philadelphia (SDP) crafted transportation protocol to outline transportation support aides for children with special needs.
- Training regarding the ESSA guidance and requirements has not yet reached all stakeholders. More LEAs appear to be aware of the requirements and are advocating under ESSA. Online training is now available to Philadelphia DHS, CUA, and provider staff through Philadelphia DHS University's LMS system.
- Transportation between counties has not been consistent. This is still a challenge, but there has been some case-by-case success based on existing cross-collaborative work with the School District of Philadelphia (SDP) who interfaces with the out-of-county LEAs. Philadelphia DHS and the SDP are actively working on enhancing the transportation protocol that will include cross-county transportation.

Section 3: General Indicators

3-1: County Fiscal Background

- ☐ Counties that exceeded their Act 148 allocation, resulting in an overmatch situation, in FY 2017-18 should describe the practice and fiscal drivers that impacted the county's level of resource need. Address the impact the FY 2017-18 program and spending history had on the projected utilization of the allocation and additional resource needs for FY 2018-19.

Philadelphia expects to exceed our Act 148 allocation in FY 2017-18, based on the County's 4th quarter Act 148 invoice. The largest factor pushing Philadelphia into overmatch was that the State issued a memorandum, after the FY2017-18 final allocation, authorizing an increase in the allowable fringe benefit reimbursement rate from 53% to 83%. The second driver is Philadelphia DHS' participation in the Title IV-E Child Welfare Demonstration Project (CWDP). The capped nature of the CWDP forces expenses that could normally be reimbursed by Title IV-E to be shifted onto Act 148 instead, driving up county reliance on that source.

- ☐ Counties that did not spend all their Act 148 allocation in FY 2017-18 should describe the practice(s) that impacted the county's level of resource need and address any projections for underspending in FY 2018-19.

This question is not applicable.

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

Philadelphia

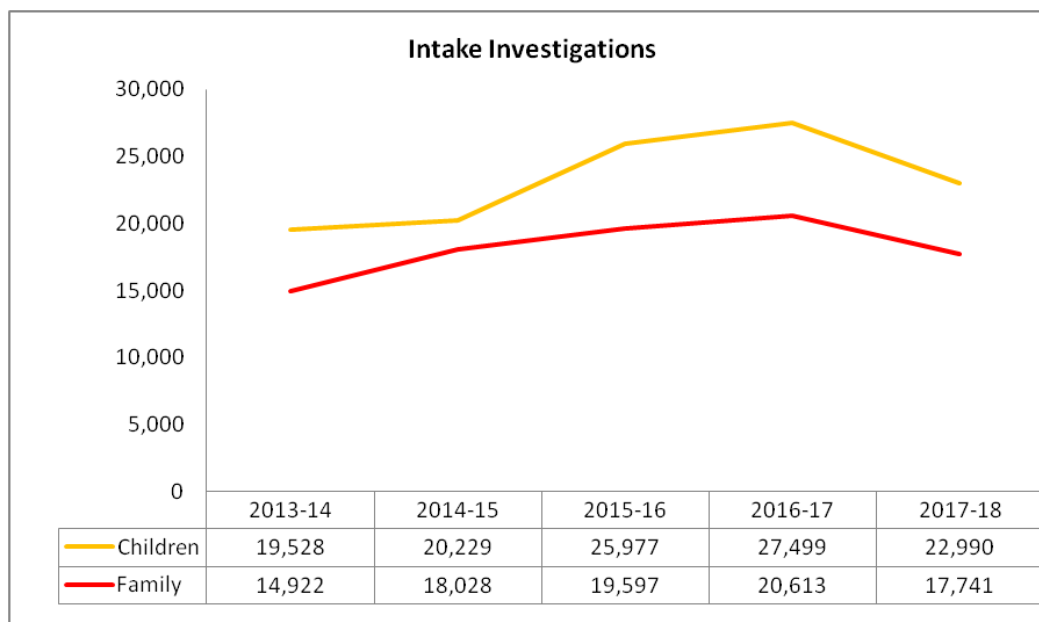
There are a number of changes which Philadelphia DHS will highlight as a resource need through adjustments to expenditures in FY 2018-19. These changes can be grouped into several broad categories:

- Changes to placement provider costs based on newly approved per diems, updated placement population projections, changes to State Youth Detention Center/Forestry Camp costs, and an increase in certain very high cost placements due to extraordinary needs of selected youth and a reduction in CBH-funded RTF beds.
- Changes to professional service provider costs, mostly at the CUAs to account for fully funding a caseload to case manager ratio of 10:1, liability insurance premiums, performance-based contracting, and costs related to the resolution of an employee lawsuit.
- Costs incurred through a new contract between the city and its two major unions, as well as a revised projection of costs at the Philadelphia Juvenile Justice Services Center (PJJSC).
- Annualization of several initiatives that were approved and began in FY 2017-18 (per diem rate increases, additional Solicitors, and new Specialized Behavioral Health scopes).
- Projected costs of compliance with proposed state laws, including Senate Bill 1129 and the costs related to notice in termination of parental rights proceedings.
- Changes to child clearance costs.
- Necessary improvements to county facilities.
- Training and professional development for staff and providers.
- Adjustments to account for programs initially approved in FY 2017-18 for which no expenditures were made, but that will be operational in FY 2018-19.

- **PLEASE NOTE: Capture any highlights here that are not addressed in the Program Improvement Strategies narrative (Section 3-4)**

3-2a. Intake Investigations

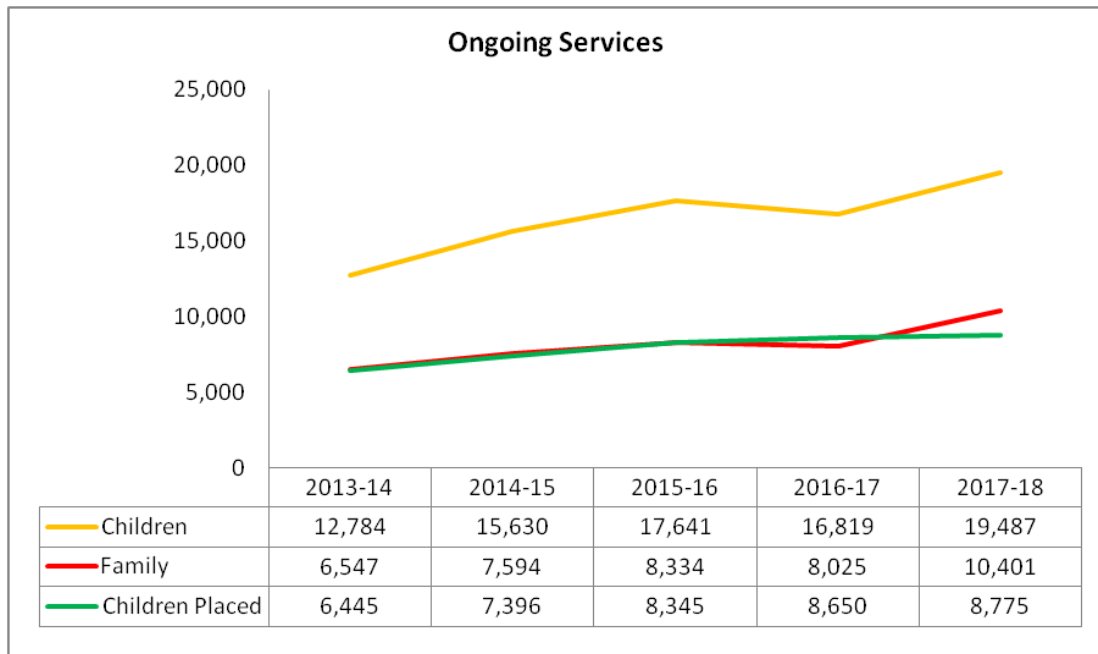
Insert the Intake Investigations Chart (Chart 1).



Philadelphia

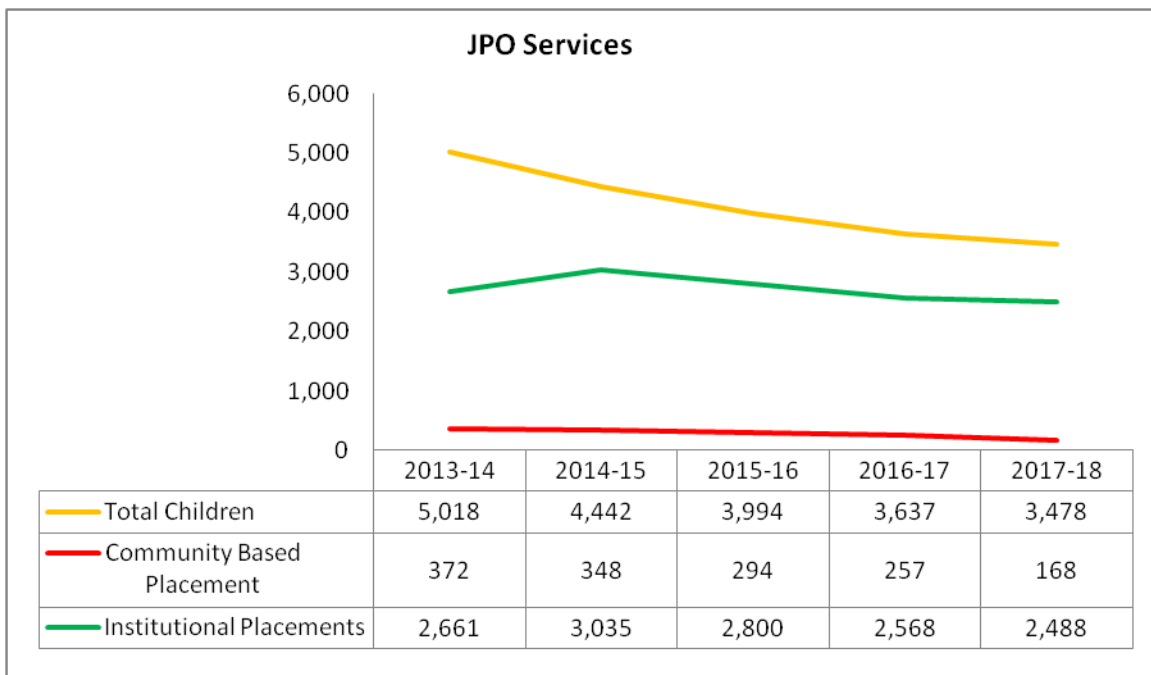
3-2a. Ongoing Services

Insert the Ongoing Services Chart (Chart 2).



3-2a. JPO Services

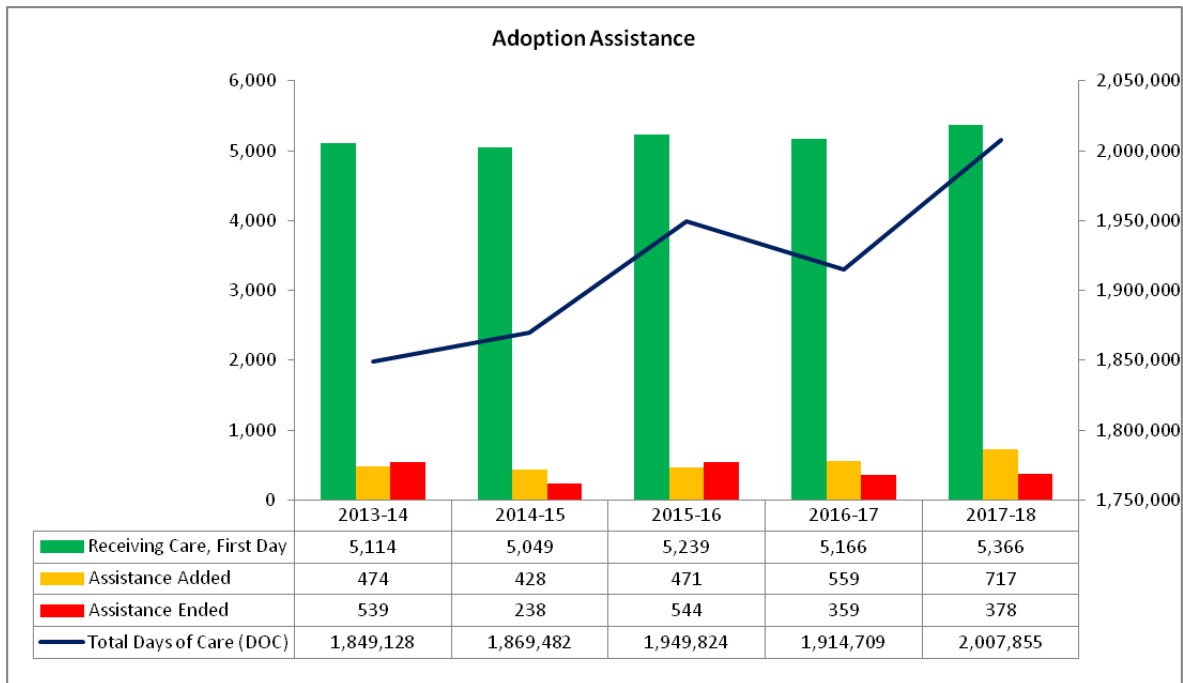
Insert the JPO Services Chart (Chart 3).



Philadelphia

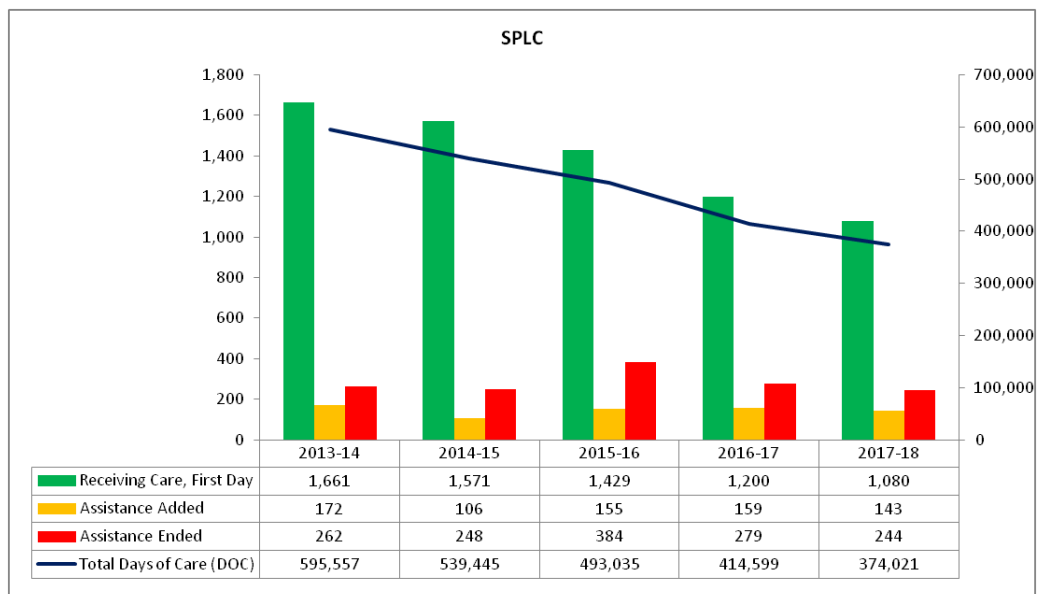
3-2b. Adoption Assistance

Insert the Adoption Assistance Chart (Chart 4).



3-2c. Subsidized Permanent Legal Custody (SPLC)

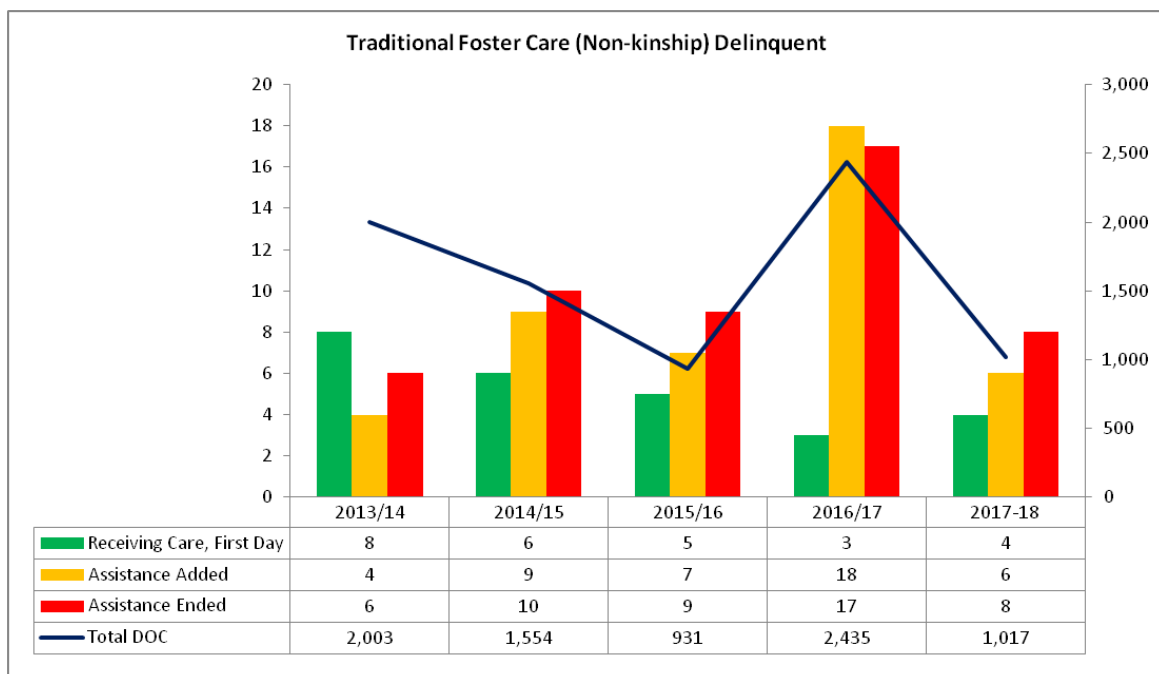
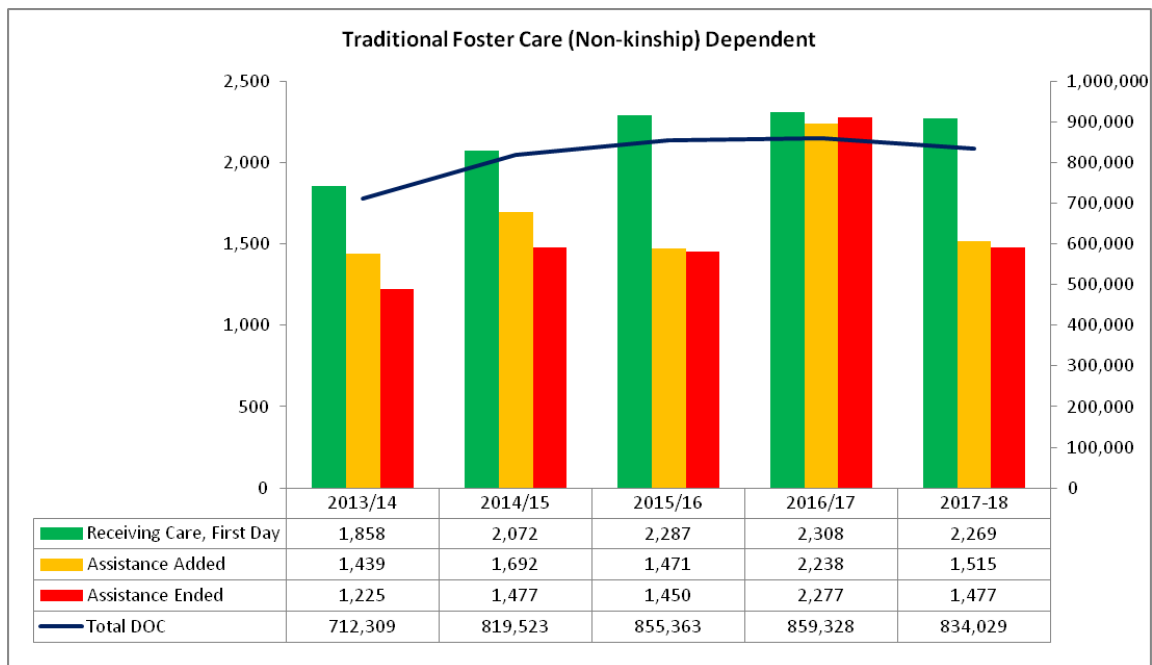
Insert the SPLC Chart (Chart 5).



Philadelphia

3-2d. Out-of-Home Placements: County Selected Indicator

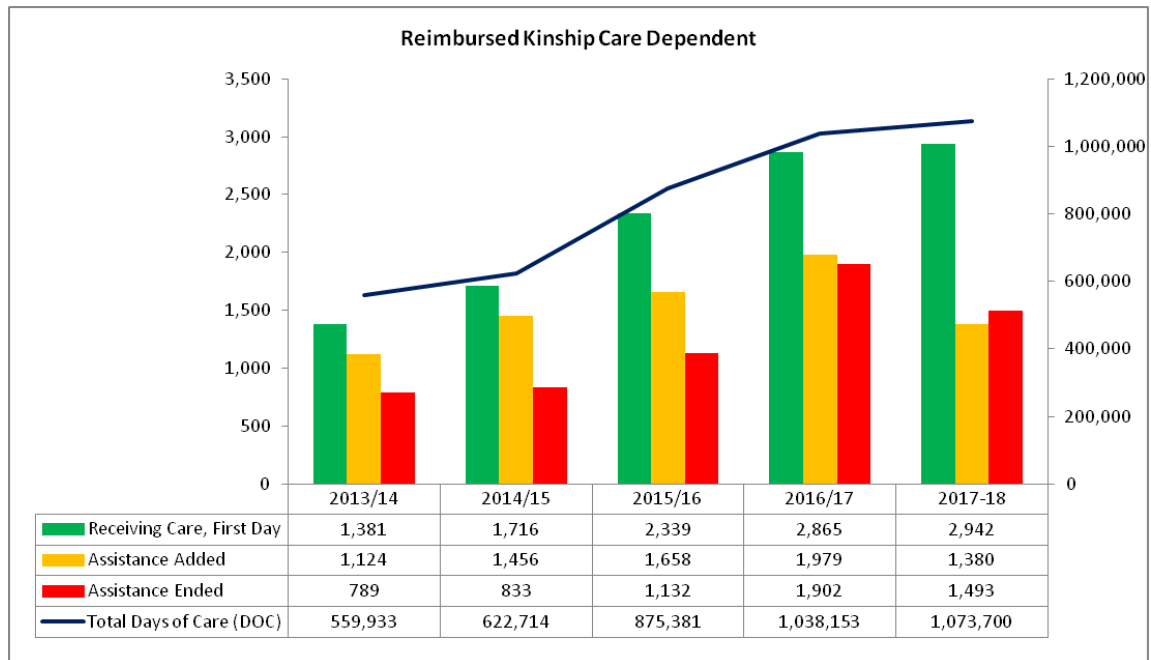
Insert charts related to out-of-home placements where trends are highlighted (Charts 6-7).



Philadelphia

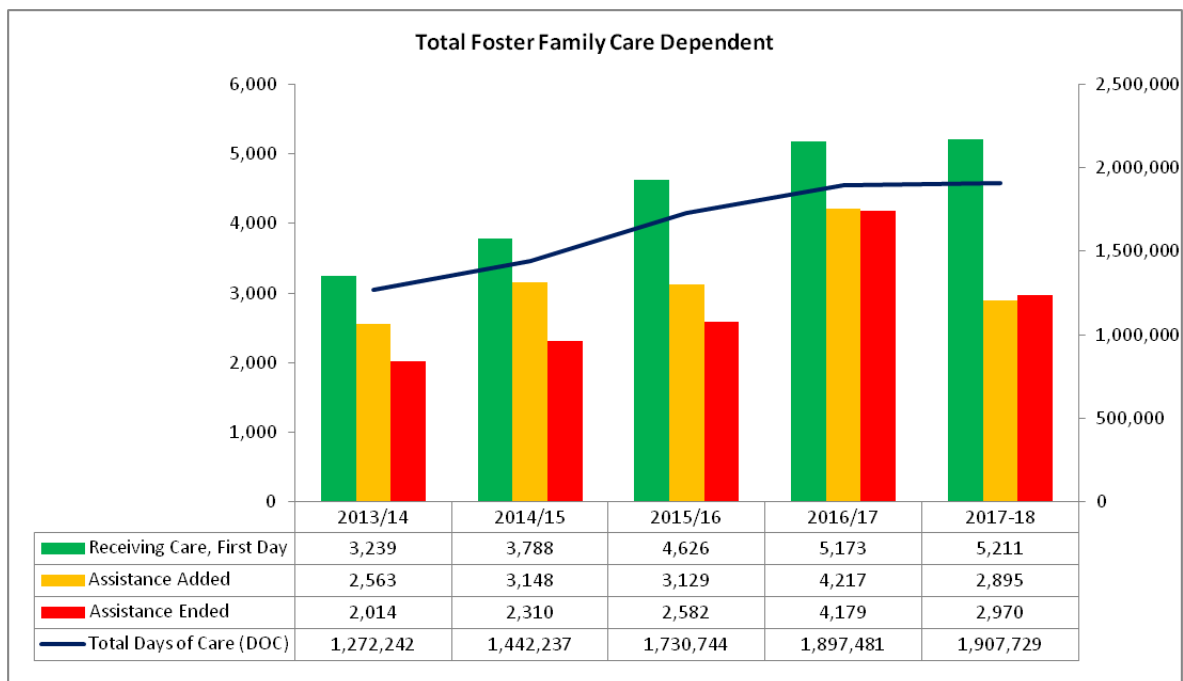
3-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Chart 8).

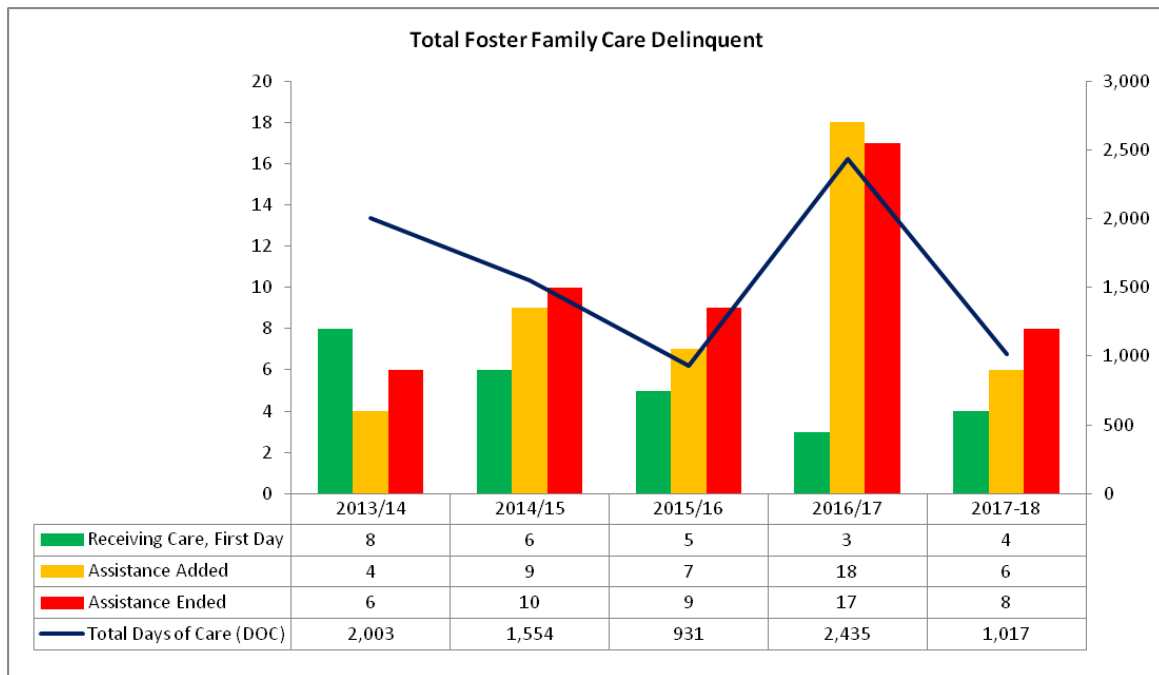


3-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 10-11).

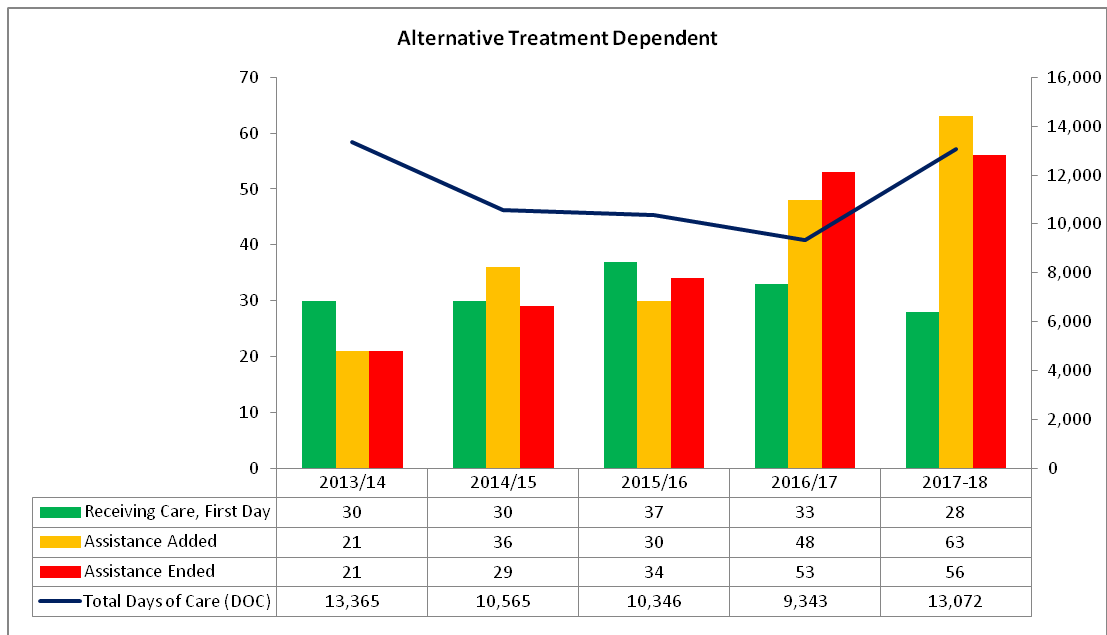


Philadelphia



3-2d. Out-of-Home Placements: County Selected Indicator

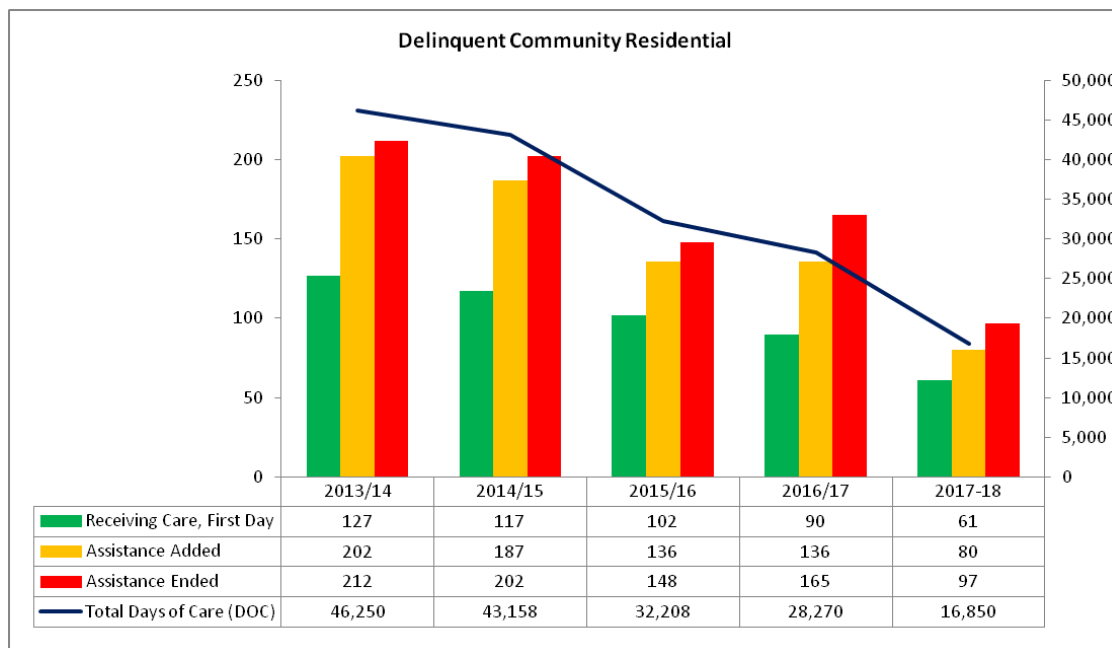
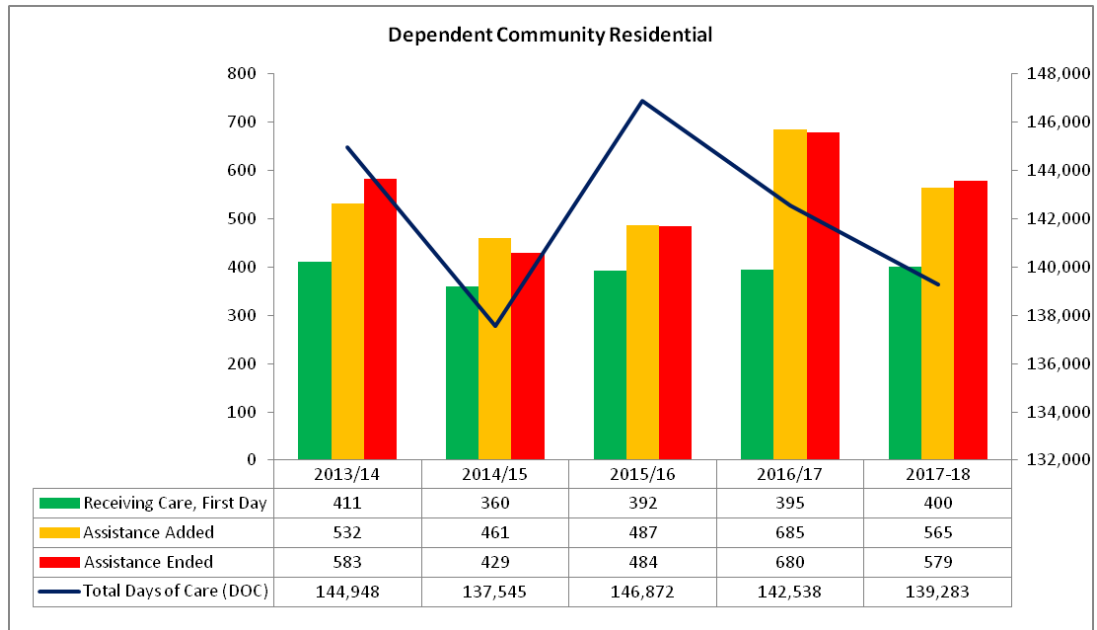
Insert charts related to out-of-home placements where trends are highlighted (Chart 14).



Philadelphia

3-2d. Out-of-Home Placements: County Selected Indicator

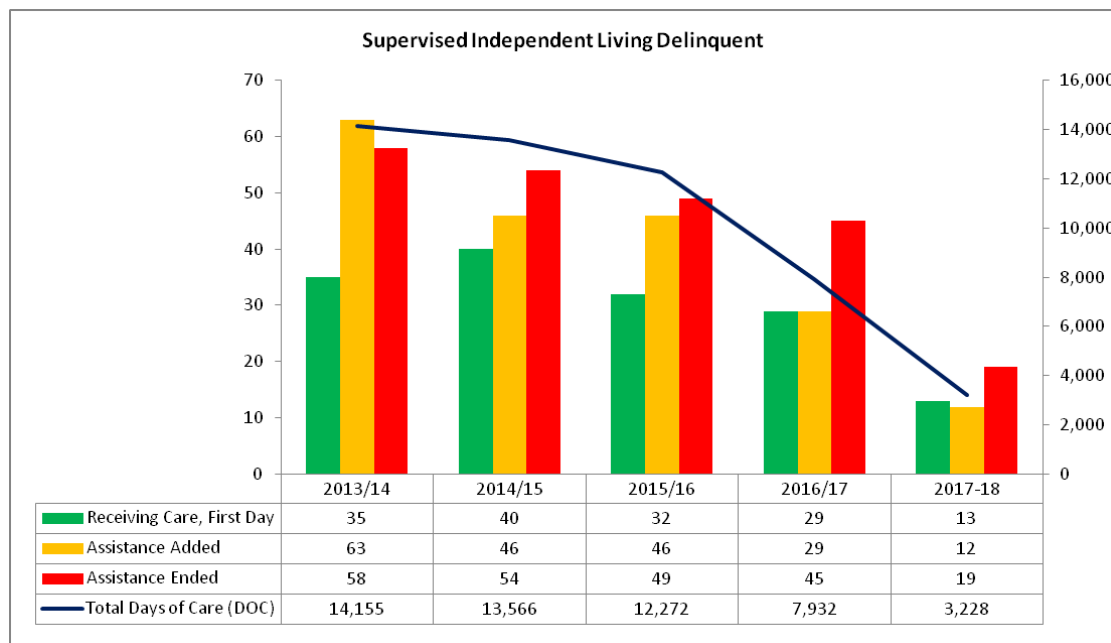
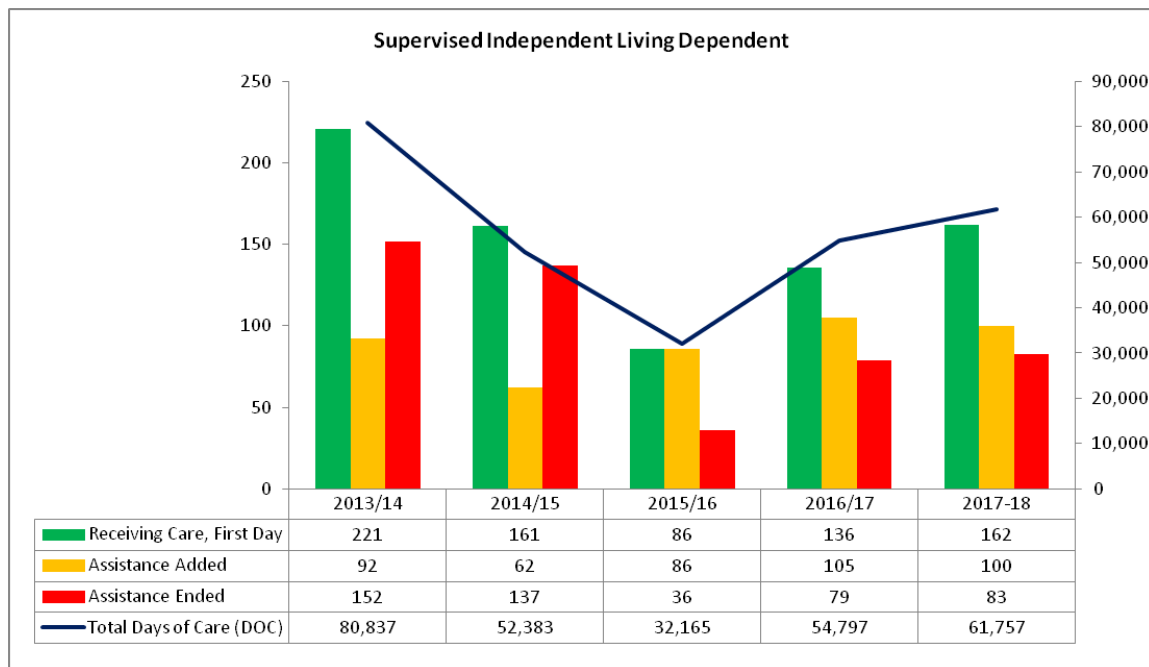
Insert charts related to out-of-home placements where trends are highlighted (Charts 16-17).



Philadelphia

3-2d. Out-of-Home Placements: County Selected Indicator

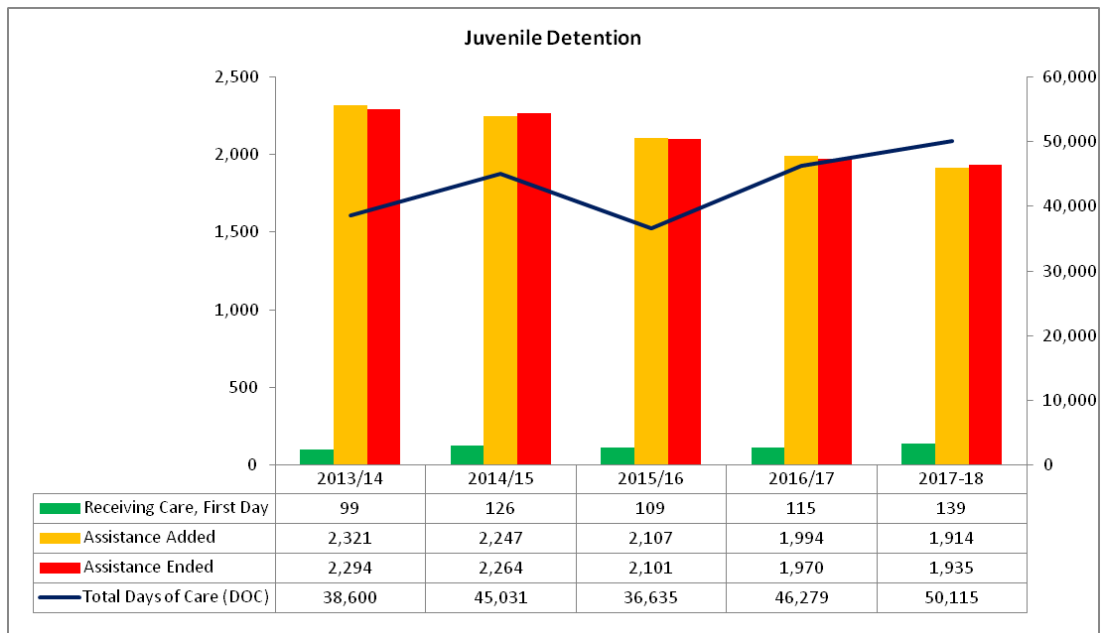
Insert charts related to out-of-home placements where trends are highlighted (Charts 18-19).



Philadelphia

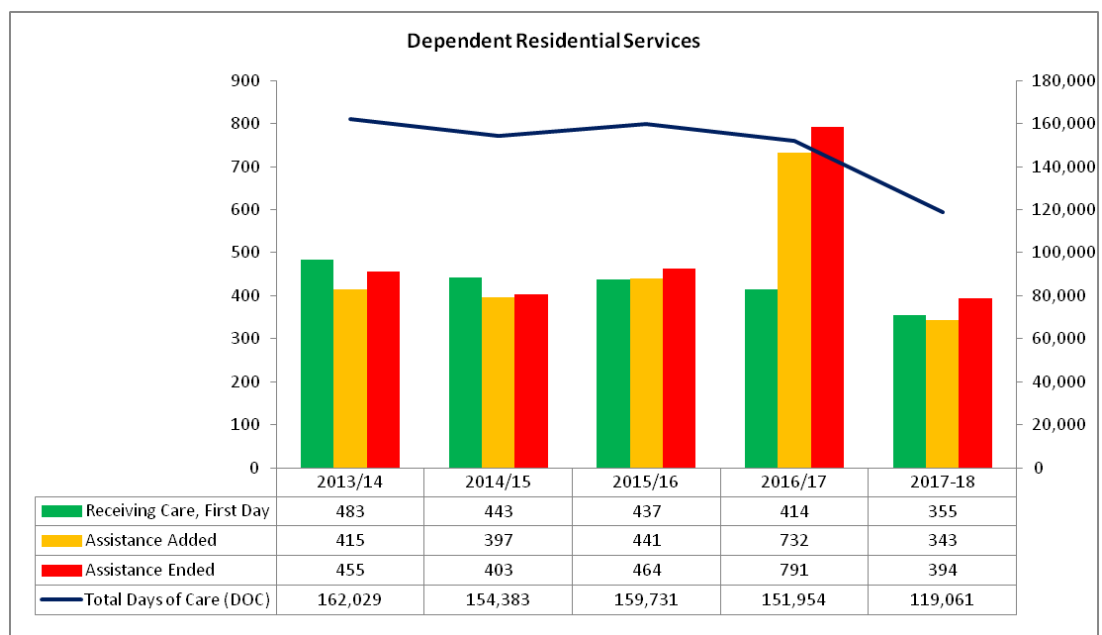
3-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Chart 20).

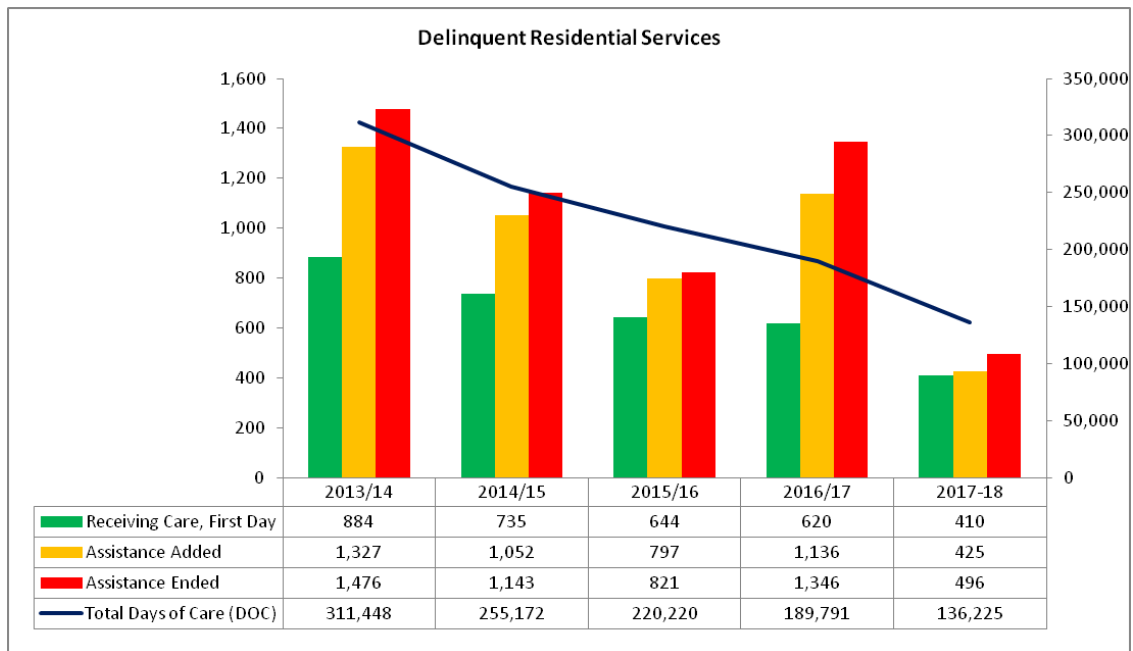


3-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Charts 21-22).

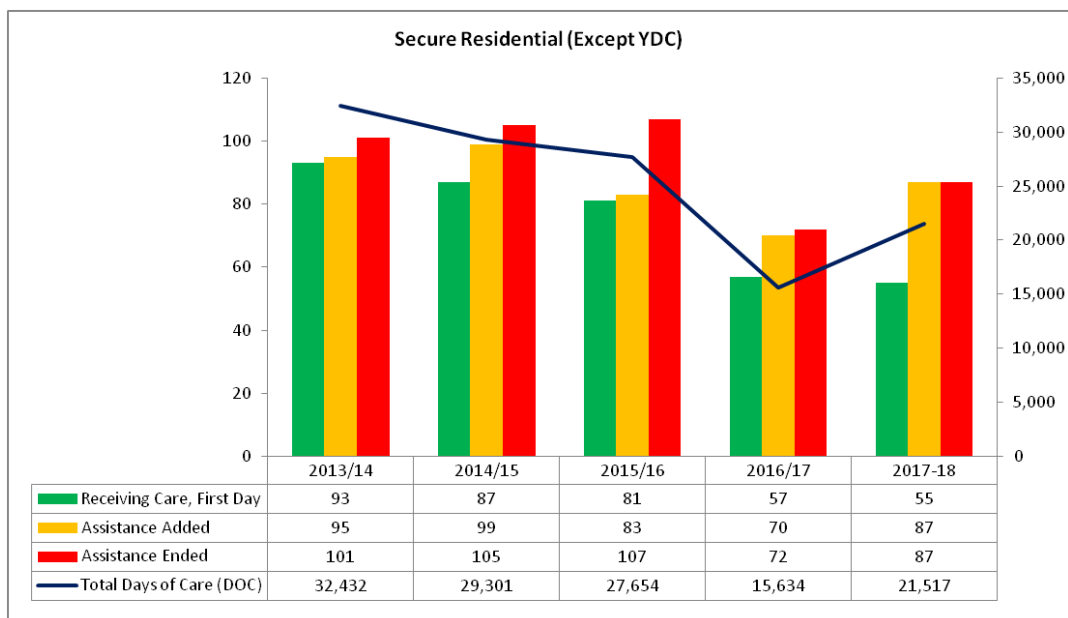


Philadelphia



3-2d. Out-of-Home Placements: County Selected Indicator

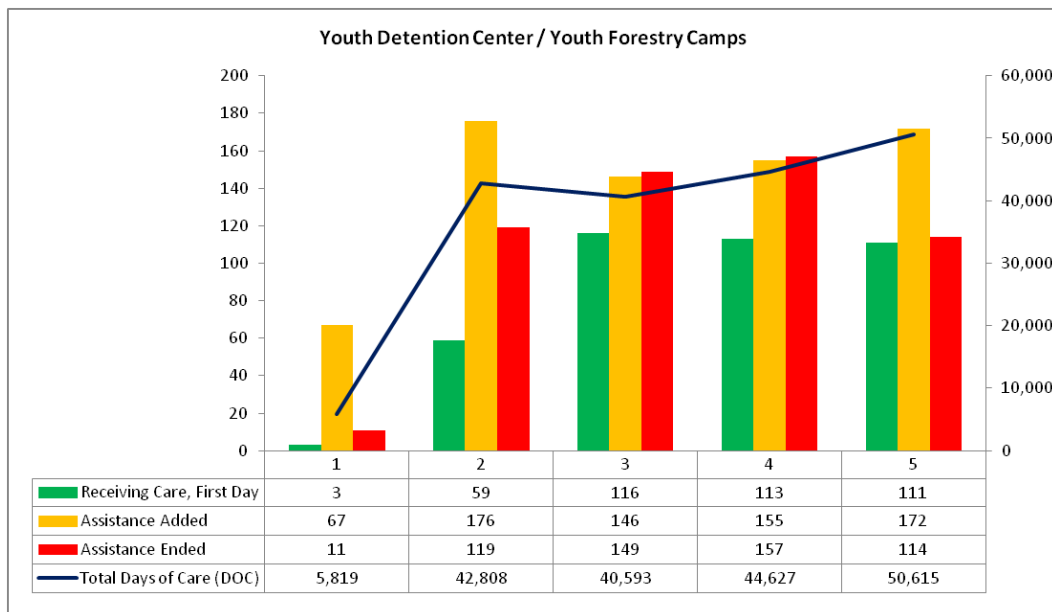
Insert charts related to out-of-home placements where trends are highlighted (Chart 23).



Philadelphia

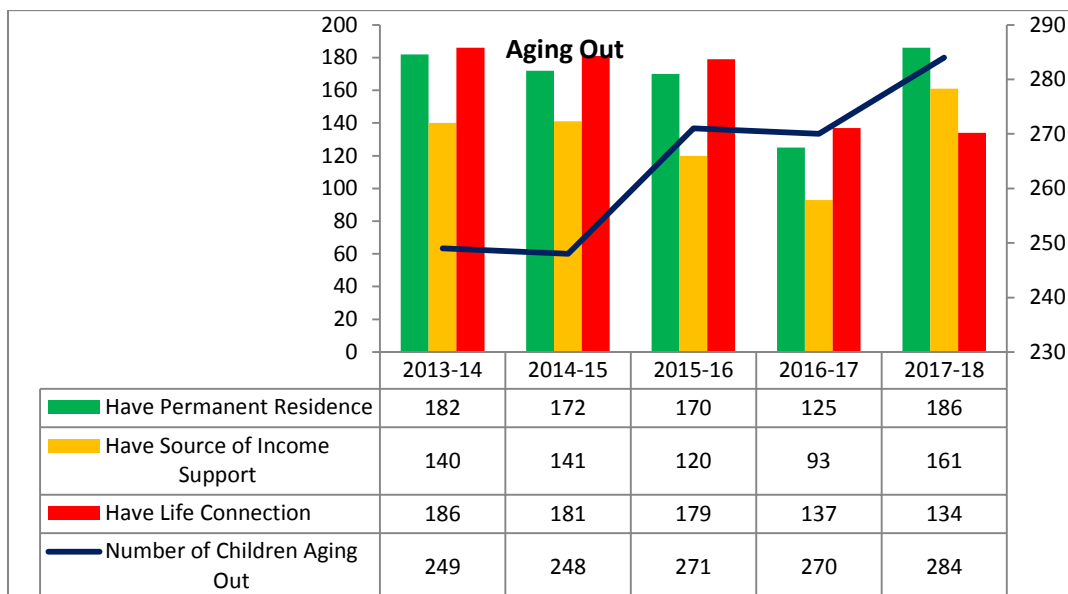
3-2d. Out-of-Home Placements: County Selected Indicator

Insert charts related to out-of-home placements where trends are highlighted (Chart 24).



3-2e. Aging Out

Insert the Aging Out Chart (Chart 25).



Philadelphia

3-2f. General Indicators

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

3-2: General Indicators

"Type in BLUE boxes only"

County Number: **51**

Class: **1**

Philadelphia County

**Copy Part 1 for
Narrative insertion**

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Narrative insertion**

3-2a. Service Trends

Indicator	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	2013-18 % Change	2013-18 CAGR
Intake Investigations							
Children	19,528	20,229	25,977	27,499	22,990	17.7%	4.2%
Family	14,922	18,028	19,597	20,613	17,741	18.9%	4.4%
Ongoing Services							
Children	12,784	15,630	17,641	16,819	19,487	52.4%	11.1%
Family	6,547	7,594	8,334	8,025	10,401	58.9%	12.3%
Children Placed	6,445	7,396	8,345	8,650	8,775	36.2%	8.0%
JPO Services							
Total Children	5,018	4,442	3,994	3,637	3,478	-30.7%	-8.8%
Community Based Placement	372	348	294	257	168	-54.8%	-18.0%
Institutional Placements	2,661	3,035	2,800	2,568	2,488	-6.5%	-1.7%

3-2b. Adoption Assistance

Indicator	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	2013-18 % Change	2013-18 CAGR
Adoption Assistance							
Receiving Care, First Day	5,114	5,049	5,239	5,166	5,366	4.9%	1.2%
Assistance Added	474	428	471	559	717	51.3%	10.9%
Assistance Ended	539	238	544	359	378	-29.9%	-8.5%
Total Days of Care (DOC)	1,849,128	1,869,482	1,949,824	1,914,709	2,007,855	8.6%	2.1%

3-2c. SPLC

Indicator	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	2013-18 % Change	2013-18 CAGR
Subsidized Permanent Legal Custodianship							
Receiving Care, First Day	1,661	1,571	1,429	1,200	1,080	-35.0%	-10.2%
Assistance Added	172	106	155	159	143	-16.9%	-4.5%
Assistance Ended	262	248	384	279	244	-6.9%	-1.8%
Total Days of Care (DOC)	595,557	539,445	493,035	414,599	374,021	-37.2%	-11.0%

Philadelphia

3-2d. Placement Data							
Indicator	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	FY 2017-18	2013-18 %Change	2013-18 CAGR
Traditional Foster Care (non-kinship) - Dependent							
Receiving Care, First Day	1,858	2,072	2,287	2,308	2,269	22.1%	5.1%
Assistance Added	1,439	1,692	1,471	2,238	1,515	5.3%	1.3%
Assistance Ended	1,225	1,477	1,450	2,277	1,477	20.6%	4.8%
Total DOC	712,309	819,523	855,363	859,328	834,029	17.1%	4.0%
Traditional Foster Care (non-kinship) - Delinquent							
Receiving Care, First Day	8	6	5	3	4	-50.0%	-15.9%
Assistance Added	4	9	7	18	6	50.0%	10.7%
Assistance Ended	6	10	9	17	8	33.3%	7.5%
Total DOC	2,003	1,554	931	2,435	1,017	-49.2%	-15.6%
Reimbursed Kinship Care - Dependent							
Receiving Care, First Day	1,381	1,716	2,339	2,865	2,942	113.0%	20.8%
Assistance Added	1,124	1,456	1,658	1,979	1,380	22.8%	5.3%
Assistance Ended	789	833	1,132	1,902	1,493	89.2%	17.3%
Total Days of Care (DOC)	559,933	622,714	875,381	1,038,153	1,073,700	91.8%	17.7%
Reimbursed Kinship Care - Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%
Foster Family Care - Dependent (Total of 2 above)							
Receiving Care, First Day	3,239	3,788	4,626	5,173	5,211	60.9%	12.6%
Assistance Added	2,563	3,148	3,129	4,217	2,895	13.0%	3.1%
Assistance Ended	2,014	2,310	2,582	4,179	2,970	47.5%	10.2%
Total Days of Care (DOC)	1,272,242	1,442,237	1,730,744	1,897,481	1,907,729	50.0%	10.7%
Foster Family Care - Delinquent (Total of 2 above)							
Receiving Care, First Day	8	6	5	3	4	-50.0%	-15.9%
Assistance Added	4	9	7	18	6	50.0%	10.7%
Assistance Ended	6	10	9	17	8	33.3%	7.5%
Total Days of Care (DOC)	2,003	1,554	931	2,435	1,017	-49.2%	-15.6%
Non-reimbursed Kinship Care - Dependent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%
Non-reimbursed Kinship Care - Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%
Alternative Treatment Dependent							
Receiving Care, First Day	30	30	37	33	28	-6.7%	-1.7%
Assistance Added	21	36	30	48	63	200.0%	31.6%
Assistance Ended	21	29	34	53	56	166.7%	27.8%
Total Days of Care (DOC)	13,365	10,565	10,346	9,343	13,072	-2.2%	-0.6%
Alternative Treatment Delinquent							
Receiving Care, First Day	0	0	0	0	0	0.0%	0.0%
Assistance Added	0	0	0	0	0	0.0%	0.0%
Assistance Ended	0	0	0	0	0	0.0%	0.0%
Total Days of Care (DOC)	0	0	0	0	0	0.0%	0.0%

Philadelphia

Dependent Community Residential							
Receiving Care, First Day	411	360	392	395	400	-2.7%	-0.7%
Assistance Added	532	461	487	685	565	6.2%	1.5%
Assistance Ended	583	429	484	680	579	-0.7%	-0.2%
Total Days of Care (DOC)	144,948	137,545	146,872	142,538	139,283	-3.9%	-1.0%
Delinquent Community Residential							
Receiving Care, First Day	127	117	102	90	61	-52.0%	-16.8%
Assistance Added	202	187	136	136	80	-60.4%	-20.7%
Assistance Ended	212	202	148	165	97	-54.2%	-17.8%
Total Days of Care (DOC)	46,250	43,158	32,208	28,270	16,850	-63.6%	-22.3%
Supervised Independent Living Dependent							
Receiving Care, First Day	221	161	86	136	162	-26.7%	-7.5%
Assistance Added	92	62	86	105	100	8.7%	2.1%
Assistance Ended	152	137	36	79	83	-45.4%	-14.0%
Total Days of Care (DOC)	80,837	52,383	32,165	54,797	61,757	-23.6%	-6.5%
Supervised Independent Living Delinquent							
Receiving Care, First Day	35	40	32	29	13	-62.9%	-21.9%
Assistance Added	63	46	46	29	12	-81.0%	-33.9%
Assistance Ended	58	54	49	45	19	-67.2%	-24.3%
Total Days of Care (DOC)	14,155	13,566	12,272	7,932	3,228	-77.2%	-30.9%
Juvenile Detention							
Receiving Care, First Day	99	126	109	115	139	40.4%	8.9%
Assistance Added	2,321	2,247	2,107	1,994	1,914	-17.5%	-4.7%
Assistance Ended	2,294	2,264	2,101	1,970	1,935	-15.6%	-4.2%
Total Days of Care (DOC)	38,600	45,031	36,635	46,279	50,115	29.8%	6.7%
Dependent Residential Services							
Receiving Care, First Day	483	443	437	414	355	-26.5%	-7.4%
Assistance Added	415	397	441	732	343	-17.3%	-4.7%
Assistance Ended	455	403	464	791	394	-13.4%	-3.5%
Total Days of Care (DOC)	162,029	154,383	159,731	151,954	119,061	-26.5%	-7.4%
Delinquent Residential Services							
Receiving Care, First Day	884	735	644	620	410	-53.6%	-17.5%
Assistance Added	1,327	1,052	797	1,136	425	-68.0%	-24.8%
Assistance Ended	1,476	1,143	821	1,346	496	-66.4%	-23.9%
Total Days of Care (DOC)	311,448	255,172	220,220	189,791	136,225	-56.3%	-18.7%
Secure Residential (Except YDC)							
Receiving Care, First Day	93	87	81	57	55	-40.9%	-12.3%
Assistance Added	95	99	83	70	87	-8.4%	-2.2%
Assistance Ended	101	105	107	72	87	-13.9%	-3.7%
Total Days of Care (DOC)	32,432	29,301	27,654	15,634	21,517	-33.7%	-9.7%
Youth Detention Center / Youth Forestry Camps							
Receiving Care, First Day	3	59	116	113	111	3600.0%	146.6%
Assistance Added	67	176	146	155	172	156.7%	26.6%
Assistance Ended	11	119	149	157	114	936.4%	79.4%
Total Days of Care (DOC)	5,819	42,808	40,593	44,627	50,615	769.8%	71.7%
3-2e. Aging Out Data							
Indicator	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17	FY 2017-18	2013-18 %Change	2013-18 CAGR
Aging Out							
Number of Children Aging Out	249	248	271	270	284	14.1%	3.3%
Have Permanent Residence	182	172	170	125	186	2.2%	0.5%
Have Source of Income Support	140	141	120	93	161	15.0%	3.6%
Have Life Connection	186	181	179	137	134	-28.0%	-7.9%

Philadelphia

3-2g. through 3-2i. Charts

- NOTE: The section is optional and applies to CCYAs and/or JPOs.
- NOTE: If inserting charts, identify the data source and parameters and include only one chart per page.
- ❑ Insert up to three additional charts that capture the drivers of county services and supports the county's resource request. For example, these charts may be related to prevention or diversion activities or may be specific to areas or demographics that are driving influences on county resources and practices.
- ❑ Counties may use data charts as provided by HZA or any other county data available. County specific charts outside of HZA data charts must clearly identify the source of the data.

The biggest drivers of services and resource requests are the need to safely rightsize the system, improve length of time to permanency (both reunification and adoption) and reduce the number of youth who age out without permanency. Please see charts and data in section 3-4 Program Improvement Strategies for additional information.

Chart Analysis for 3-2a. through 3-2i.

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

The strategies implemented to focus on accept for service decisions and increasing permanency to rightsize our system are producing positive results. It is anticipated that continuation of targeted strategies and other initiatives (e.g., Rapid Permanency Reviews and Prevention Realignment) should help further reduce the growth in the number of children, youth, and families receiving services.

Service Trends:

Despite continued growth in referrals, and numbers of children and families served by CWO, numbers of investigations, trends in ongoing services, cases accepted for service, CWO children served, CWO families served, and dependent foster care placements have stabilized in the last fiscal year. Numbers are projected to remain consistent in the next two fiscal years.

In the analysis that follows, DHS indicates when using the compound annual growth rate (CAGR) rather than rate of change in presenting results. CAGR is the mean annual growth rate over a period of years and shows the average of year-to-year change over the period of years. If the CAGR gets smaller, it means growth is slowing or decreasing.

While the number of children and youth who are the subjects of investigations and assessments had been increasing, with a 51% increase between FY 2012-13 and FY2016-17, there was a decrease of approximately 16% between FY 2016-17 and FY 2017-18, reducing the CAGR from approximately 11% in last year's submission to 4.2% in this year's submission. This is occurring despite a continued increase in the number

Philadelphia

of reports made to the DHS Hotline. DHS believes it is showing the positive impact of the new Field Screen Units, implemented in August 2017, and an increased array of Prevention Services. See Program Improvement Strategy section for additional information about the Field Screen Units and Prevention Service portfolio.

Another positive trend is that the Department has slowed the growth in the number of children placed over the past four-year time periods. The average year-to-year increase (CAGR) in last year's submission was 9.1%; this year the CAGR increase had slowed to 8%. While the placement population increased by 36.2% between FY 2013-14 to FY 2017-18, between FY 2016-17 and FY 2017-18, the increase was only 1.4%.

Comparing data from this year's submission with last year's indicates that the system is still growing. Between FY 2012-13 and FY 2016-17, the CAGR growth rate was 10%. However, from FY 2013-14 to FY 2017-18, the CAGR growth rate is 11%.

Findings from DHS's monitoring of permanency rates for FY 2016-17 show that 2,024 children and youth left placement for a permanent home, an increase of 9.2% from FY 2015-16. FY2017-18 is on track to achieve similarly high levels of permanency—there were nearly 1,500 permanencies in Q1-Q3. However, timeliness to permanency is an area of growth for DHS, particularly in Adoptions and Permanent Legal Custodianship (PLC). While rates of reunification within one year have increased by six percentage points over the last five fiscal years, two-year adoption rates have declined by 24 percentage points and two-year PLC rates have declined by 35 percentage points during the same timeframe. To highlight this issue, fewer than one in ten youth who were adopted during the first three quarters of FY2017-18 were adopted within two years. Given our success in helping more youth achieve permanency in the last five years, we are now well-positioned to improve permanency timeliness. Below, we outline our current and future strategies to achieve this goal.

As of August 1, 2018, our rapid permanency review population (children who have been in placement for more than two years, had a stable placement setting of six months or more and had a permanency goal of Permanent Legal Custodian (PLC), Adoption or Reunification) was 1,721 youth. Of that number, 1,272 (73.9%) had a goal of adoption and 207 (12.0%) had a goal of PLC. Despite our increases in obtaining subsidies, those 1,272 adoption children are still potentially waiting for finalization. Note: this is currently the best measure of children waiting for adoption and PLC subsidy that is available.

Dependent Placement Trends:

Although investigations and the use of foster family care as a placement setting have increased, most ongoing placement services have either decreased or stabilized because of systemic changes implemented by DHS. Additionally, the number of days in care has increased, but is projected to stabilize in the next two fiscal years due to ongoing implementation of targeted permanency strategies and front-end initiatives designed to reduce entries in placement.

Despite the increase in the number of children in placement, DHS has been successful in its use of the least restrictive placement settings by placing more children in family-like settings. Over the four-year reporting period, there was an annual CAGR of 12.6% for dependent children in a foster family setting on the first day of the fiscal year. Of the

Philadelphia

children and youth placed in foster family care, placement in kinship care increased substantially more than in non-kinship foster family care. Reimbursed kinship care has seen a CAGR of 20.8% from FY 2013-14 to FY 2017-18, while non-kinship traditional foster family care has only seen a CAGR of 5.1%. Traditional foster care showed a rate of change of -1.7% between FY 2016-17 and 2017-18. The population is expected to remain consistent for the next two fiscal years.

In addition, there was a 2.7% decrease in the use of Dependent Community Residential placement (group home placements) and a 28% decrease in the use of Dependent Residential Services (institutional placements).

Juvenile Delinquent Trends:

See response to JJS services beginning on pages 36 and 41 below.

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

Child Welfare Operations:

- Field Screening Units:
These units perform secondary screenings to divert families, where safely possible, from formal protective service assessment to Community Based Prevention Services or community non-DHS services. See Program Improvement Strategy section for additional details on the use of Field Screening Units to divert families from Investigation.
- Administrative review and approval for placement:
Since April 2017, Philadelphia DHS has had a policy and process in place requiring conference with and approval by an Administrator or above prior to seeking orders removing children or youth from their home. The consultation must include a discussion regarding the dependency issues, exploration of less restrictive resources, and identification of kin that will ensure safety prior to removing children and youth. CWO staff are encouraged to familiarize themselves with available resources and alternatives to removal, such as emergency family shelters when family conditions are due to environmental factors and there are no other dependency issues.
- Child Welfare Demonstration Project (CWDP):
Core components of CWDP are also core components of the IOC System Transformation model – actively engaging families in the planning and decision-making process through Family Team Conferences, and informing the process through the use of assessments. As shown in the IOC System Transformation evaluation (see Executive Summary), this model is already having a positive impact on families. See Program Improvement Strategy section for additional details about Philadelphia DHS' participation in the CWDP.
- Rapid Permanency Review process:
See Program Improvement Strategy section for details on the progress of implementation of Rapid Permanency Reviews across the CWO system.

Philadelphia

- Time Limited Family Reunification (TLFR):
Time Limited Family Reunification is a special grant-funded service that is an intensive 6-month maximum family-centered intervention designed to promote timely reunification for Philadelphia DHS-involved youth aged 12-17 experiencing a first-time placement at Philadelphia's Youth Emergency Services (YES) shelter. The primary purpose of the TLFR service is to quickly identify and mitigate the issues identified as necessitating out-of-home placement so that youth may be safely reunified with their families in a timely way. Such issues may include parent-youth conflict, substance use, mental illness, school related problems, medical illness, domestic violence, housing, sexual identity, and poor housing conditions. The TLFR Service Coordinators are distinct from the county-assigned case managers, who retain and perform all of their present responsibilities. The TLFR Service Coordinators function as additional core supports to the youth and their reunification resource(s), but they do not duplicate or replace the county-assigned case managers.

TLFR was implemented during the second quarter of FY 2017-18, and since its implementation, 32 youth have received TLFR. Of the 32 youth who have received TLFR, 11 youth have been reunified, representing roughly one-thirds of the youth in the program. One-quarter of the youth received Functional Family Therapy (FFT), an EBP designed to strengthen family relationships among older youth experiencing challenges related to school and behavior. Additional successful service connections among youth receiving TLFR include individual/family therapy, transportation services, school support, and participation in teaming conferences

- Rightsizing Congregate care
See response to the question below regarding the county's use of congregate care.
- Efforts to increase Use of Kinship Care:
DHS has been incredibly successful with identifying kin for placement when out-of-home care is needed. Over half of the children and youth in foster care are placed with kin. Permanency for children and youth, after reunification is ruled out, can often be found with kin. See Program Improvement Strategy section for additional details about Philadelphia DHS' efforts to increase use of kinship care as a placement resource.
- Use of SWAN services:
SWAN services support the movement toward permanency, finalization of permanency, and stability of permanencies that have been achieved, thereby helping children and youth leave the system to permanent homes and prevent re-entry. See Program Improvement Strategy section for additional details regarding the use of SWAN services.
- CUA Scorecard – Closing the Loop meetings
The CUA Scorecard is designed to track the quality of services that lead to best outcomes for children and youth, recognize areas in which CUAs are doing well, and identify where they need additional support. The Closing the Loop meetings are an opportunity for technical practice assistance, and for each CUA to share positive practices that they may have developed to improve outcomes for children, youth, and

Philadelphia

families. See Program Improvement Strategy section for additional details regarding the CUA Scorecard and Closing the Loop meetings.

Juvenile Justice Services:

The Juvenile Justice System Enhancement Strategy (JJSES), the Juvenile Detention Alternatives Initiative (JDAI), and other strategies have had an impact on risk, responsivity, and overall recidivism. The Philadelphia Juvenile Justice System is committed to address criminogenic factors through diversionary programs at the front end, adequate reintegration on the back end, the use of assessments at critical junctures, and developing a graduated approach as part of Stage 3 of the JJSES model. The use of Graduated Response has contributed to fewer youth being placed and more being referred to community-based programming. See Program Improvement Strategies for more detail regarding Graduated Response.

- Census at the Philadelphia Juvenile Justice Services Center: There was a noted spike in the census at PJJSC during FY 2016-17. Though our average census in July was 131.06 and we ended in June with an average of just 122.13, there were considerable spikes in between (notably in October, when we were at 146.26, in December, at 156.37, and again in January when our census averaged 165.32), which resulted in our average daily census for the fiscal year of 136.56.

In comparing the 2017 calendar year to the previous year, the following changes are noted: 15.76 % increase in total arrests, 4.12 % increase in Juvenile Petitions Filed, and a 17.98% increase in lengths of stay for youth at the PJJSC. This average amounts to 19.2 days. However, with an increased capacity of Community-Based Shelter beds, we have seen the percentage of youth held out of a detention hearing decrease from 62% in the first quarter of 2017 to 36% in the first quarter of 2018.

It is important to note that during this past fiscal year, the City closed a delinquent placement and a local community-based detention center. These closures had impact on the census at the PJJSC.

- Community-Based Probation: Community-Based Probation is the first intervention for juveniles who have been arrested and deemed ineligible for diversion and preventative services. Despite, a 4% increase of in the number of petitions filed from calendar year 2016 (2,158) to 2017 (2,247), community-based supervision caseloads continued to decrease based on numerous factors such as diversionary efforts, enhanced supervision utilizing promising practices and evidence based solutions, and more accountability placed on service agencies that provide supports and care for our youth.
- Youth Level of Service - In July 2014, Philadelphia's Youth Level of Service (YLS) policy was restructured in line with recommendations of the Juvenile Court Judges Commission such that the initial YLS assessment is conducted prior to adjudicatory hearings. Identifying the risk and needs of youth in the early stages has allowed for structured decision making at critical junctures in the Juvenile Justice System. In the 2017 calendar year, 41% of the juvenile population was found to be at a low level of risk to reoffend, 48 % at a moderate risk to reoffend, 10% at a high risk to reoffend and 1% were at a very high risk to reoffend.

Philadelphia

- Pennsylvania Detention Risk Assessment Instrument (PaDRAI) - Philadelphia, as one of the State's pilot sites for the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative (JDAI), has been using the PaDRAI since August 2013 to implement the JDAI core strategy of objective decision-making processes. The design and implementation of the PaDRAI provides an objective admissions tool, has resulted in a more fair and consistent admissions policy, and is aligned with the Balanced and Restorative Justice principles as well as the JJSES for Pennsylvania.

The PaDRAI is conducted at the time of arrest on all new arrests in Philadelphia, and has been built into the Juvenile Case Management System (JCMS), so that it is used consistently. Results from local data analysis support the utilization of the PaDRAI; the low discretionary override rate is consistent with both the findings of the Validation Study and JDAI literature regarding adherence to indicated decisions and buy-in by intake interviewers.

- Global Position System (GPS) Monitoring - The GPS program serves as an alternative to secure detention, and allows youth opportunities to remain safely in their communities while under strict monitoring conditions. Through a specialized unit, youth are monitored pending outcomes of their scheduled hearings. Specialized Supervision is also provided to Juvenile Treatment Court participants, YVRP high risk youth offenders, the Juvenile Enforcement Team Unit, Philadelphia Youth Advocacy Partners' Pre-Evening Reporting Center (ERC), and the Northeast Treatment Center's Post-Evening Reporting Center.

A total of 1,500 youth were monitored by the GPS Unit in 2017: 815 were monitored as alternative to detention, 529 were supervised as alternative to placement, and 156 were monitored for varying reasons. GPS is both a less restrictive and less expensive alternative to placement.

- Post-Adjudicatory Evening Reporting Center (ERC) - The ERC is directly aligned with Balanced and Restorative Justice Principles of community safety through GPS monitoring and prevention of re-arrest, accountability through required attendance, and competency development through extensive programming. The Evening Reporting Centers have been a great success for juvenile justice services in Philadelphia. The success of the pre-adjudicatory Evening Reporting Center (Pre-ERC) led to delinquency judges specifically requesting an Evening Reporting Center for adjudicated youth (Post-ERC). The Post-ERC is a community-based supervision program for adjudicated male youth on probation struggling to comply with probation rules who need a highly structured "last chance" intervention before placement. In addition to addressing BARJ principles, the Post-ERC aligns with the Probation Department's current reform initiatives. These initiatives include the philosophy of Graduated Response, which utilizes incentives (both tangible and non-tangible) to increase compliance with court-ordered conditions and implements sanctions for non-compliance.

The Post-Adjudicatory Evening Reporting Center has had success similar to that of the Pre-ERC; in 2017, 49 males participated in the program. Of all youth who had the opportunity to complete the full six-month program, 89% had their Restitution and Court Fees paid in full and 95% were linked to an ongoing program or community-based resource. Only 1.3% of youth served at this site were re-arrested. The

Philadelphia

success of the program was recognized by nomination for the 2018 JCJC Awards Program Community-Based Program of the Year.

- Data-informed decisions - A very important priority for the Juvenile Justice System, as stated in the Executive Summary, is to have quality data, information sharing, and appropriate statistical analysis for all stakeholders across the system because data-informed decisions are a core component of JDAL. This work will continue to drive our decision-making and help target intervention for youth.
- Describe the county's use of congregate care – provide an overview description of children/youth placed in congregate care settings and describe the county's process related to placement decisions.

As of June 30, 2018, 11% of Philadelphia children and youth in out-of-home placement (689 children and youth) were living in congregate care settings, down from 23% in June 30, 2012. Congregate Care is defined as any placement that includes CBH Funded RTF, Emergency Shelter, Group Homes, and Institutions.

- 80% (n=549) were African American, 17% (n=119) white and 3% (n=21) were other.
- 47% (n=324) were female and 53% (n=365) were male.
- 89% (n=616) of those in congregate care were 13 to 21 years of age; 72% (n=498) were 13-17 years of age.
- Almost half of the children and youth in congregate care, 48% (n=331), were placed in a group home; 30% (n=205) were placed in an institution; 15% were placed in an RTF.
- As of June 30, 2018, the length of stay for 40% (n=279) of those in congregate care was six months or less; 31% (n=215) were in care longer than 13 months.

Two processes in place continue to be successful in reducing the use of congregate care settings and improving outcomes for youth: the Commissioner's Approval Process and clear guidelines and expectations for the use of this level of care. These guidelines include regular reviews between CUA leadership and providers regarding discharge planning and step down possibilities. It continues to be a Philadelphia DHS priority to increase the use of resource home care, particularly kinship care, for children and youth needing care. DHS will continue to complete diligent searches to locate kin using Accurant and Family Finding. In addition, the Department embarked on a citywide Resource Parent Recruitment effort in February 2018, which culminated in a phone bank on March 1, 2018 with NBC10. The goal of the recruitment effort, among others, was to increase the capacity of resource parents interested in fostering older youth, who make up the largest proportion of children and youth in congregate care, and LGBTQ youth.

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

Child Welfare Operations

- Resource Parent Recruitment Strategy
With a major ongoing citywide recruitment campaign, robust follow-up of prospective resource parents, and oversight of provider agency recruitment and certification practices, Philadelphia DHS has made progress in FY 2017-18 in its efforts to

Philadelphia

expand the pool of resource families and ensure that quality homes are available for every child in care. DHS marketing strategy includes radio, digital, and print advertisements and a social media campaign. The digital strategy includes behavioral marketing that utilizes user data including search terms, browsing history, and device location to allow DHS to target advertising dollars to individuals most likely to be interested in fostering.

DHS engaged in a citywide marketing campaign to recruit more resource families to provide foster care, beginning with advertising in December 2017 and formally launching with a press conference on February 26, 2018. DHS partnered with local stations NBC10/Telemundo62. The stations aired the stories of 13 Philadelphia resource families building up to a Phone Bank event on March 1, 2018. Resource families were selected to highlight children with medical needs, older youth, LGBTQ youth, siblings, and the resource parent role in reunification. Two hundred seventy-seven individuals called in to the Phone Bank, which was staffed by recruiters at contracted agencies, and DHS contacted every prospective resource parent to ensure provider agency follow-up.

DHS also partnered with Philly Family Pride (a local LGBTQ parents' organization), the Mayor's Office of LGBT Affairs, and several provider agencies to hold recruitment events at local LGBTQ community centers. Event panelists included LGBTQ resource parents as well as LGBTQ foster youth.

The DHS Resource Development Administrator has been working with foster care agencies to ensure that once a prospective resource family is identified, each agency adheres to best practices including top-notch customer service to retain families during the certification process.

The recruitment effort has been a huge success. The number of local families that call DHS for information about fostering has risen dramatically, along with visits to the DHS "Fostering Philly" web page that lists contact information for foster care agencies. Providers have reported a substantial increase in prospective resource parents. Some providers have increased the frequency of pre-service trainings and hired additional staff to manage the increase in volume. DHS has seen the number of new resource homes rise significantly – 294 non-kin resource homes were opened in the first 6 months of 2018, versus 213 in the first 6 months of 2017. This is a 38% increase in new homes. DHS expects the rise in new homes to accelerate as the recruitment campaign continues.

However, in order to sustain and increase this ambitious recruitment strategy and to increase the pool of resource parents available, we need to expand our efforts to reach individuals who will consider fostering youth with specialized behavioral health issues, youth with disabilities, and older youth. A key priority area for DHS is to continue reducing the number of youth in congregate care and provide services to youth through family foster care. To do this, we propose engaging with a branding and marketing company who can provide expertise in messaging and creative development to help provide market research, creative development, and strategy around advertising buys. This will help DHS to expand its marketing message as well as to increase and diversify advertising efforts and to ensure we effectively reach our target audience and increase the number of foster homes available for

Philadelphia

some of the most hard to place children and youth. **Philadelphia DHS respectfully requests funding to support these resource parent recruitment efforts.**

○ Placement Strategies

The Department continues to work diligently to rightsize the number of children coming into placement and ensuring that children are not spending the night in the child care room. In order to do so, the Department looked at the following three areas:

- Infrastructure.
- Accountability.
- Resource Development.

Infrastructure: In April 2018, the Department created a new position, Afterhours Administrator in the Central Referral Unit (CRU). The CRU Afterhours Administrator works from 4pm to 12am Monday through Friday and her responsibility is to ensure that prior to the end of her shift, no child stays overnight in the Child Care Room. Prior to the creation of this position, the Afterhours Hotline Administrator was responsible for the oversight of the Child Care Room; however, this task proved to be overwhelming given the Hotline's primary responsibility of being a call center for reports of abuse and neglect and dispatching staff to initiate investigations.

Accountability: In May 2018, to minimize placement disruptions and ensure that use of the Child Care Room was the last resort, Philadelphia DHS issued a memorandum to the CUA Executive Leadership requiring their approval prior to any child from their CUA being brought to the Child Care Room. The purpose of this was to ensure that efforts were made to stabilize the youth's current placement, fully explore kinship care, and utilize the Placement Stability Conferences, prior to a placement disruption.

Resource Development: In January 2018, Philadelphia DHS awarded Emergency Shelter Contracts to two providers, Forget Me Knot and Valley Youth House, which added 25 shelter beds. These temporary shelter placements can be utilized for up to 30 days allowing for the search for kinship care resource or another longer term placement. It is important to note that as the new shelter beds were added, we also closed a shelter for safety reasons, which brought the net gain of beds to approximately six to eight.

In March 2018, Philadelphia DHS launched a Foster Parent Recruitment Strategy to increase the number of resource parents. To date, foster care provider agencies have worked to certify foster homes. Philadelphia DHS also awarded two group home providers: A Collective Chambers Foundation and Women of Excellence group home contracts for youth who are appropriate for group home placements.

Finally, in order to increase the number of Specialized Behavioral Health providers, the Department issued an RFP and is in the process of awarding contracts to three foster care agencies to provide this level of service. The awarding of these contracts will add additional capacity for children and youth with behavioral health needs.

Philadelphia

- Administrative review for placement:
See response to the question regarding what changes in agency priorities or programs, if any, have contributed to changes in the number of children and youth served or in care and/or the rate at which children are discharged from care.
- Efforts to increase use of Kinship Care:
See response to the question regarding what changes in agency priorities or programs, if any, have contributed to changes in the number of children and youth served or in care and/or the rate at which children are discharged from care.
- Reduce CUA CM caseloads.
Philadelphia DHS has been intentional in our efforts to reduce CUA CM caseloads by implementing multi-disciplinary reviews of cases that have been opened for service for six months or more as well as reviewing cases when they initially are accepted for service to determine if the case can be targeted for safe case closure within 90 days. The Family Team Conference serves as a checkpoint to determine if the case is on track or if additional interventions are needed to move towards safe case closure. During the next fiscal year, CUAs will continue to be intentional regarding reviews of cases that have been opened for an extended period of time. Family Team Conferencing will continue to be the process that reviews the Single Case Plans in order to ensure permanency and safe case closure. Additionally, both DHS and CUA leadership will continue to monitor non-safety, non-court involved cases for potential safe case closure.
- Reduce Solicitor caseloads
Ten new Solicitors were hired as a result of State approval and funding. To support the new Solicitors in their work, Philadelphia DHS is requesting funding for five new Legal Assistants. See Program Improvement Strategy section for details.
- Rapid Permanency Reviews.
See Program Improvement Strategy section for details.
- Increase and stabilize resource capacity by increasing rates for resource families and providers who work with children and youth with special needs.
- Increase use of Permanency supportive services – SWAN.
See Program Improvement Strategy section for details.
- Use prevention to stabilize and support permanency and to reduce re-entry.
See Program Improvement Strategy section for details.
- Implemented revised FSP and CPP to include Concurrent Planning.
- Implemented annual youth credit checks.

Juvenile Justice Services:

- Juvenile Probation Crossover Unit: At the end of calendar year 2017, a unit, called the “Crossover Unit,” was created to specifically supervise juveniles involved in the child welfare system and the juvenile justice system. The unit was created with the thought that having a core group of Probation Officers, Social Workers, and CUA

Philadelphia

Case Managers allows the stakeholders to have an intimate knowledge of cases, to build relationships, and to increase communication and collaboration amongst all parties. Ten Juvenile Probation Officers, currently supervise 153 juveniles. During 2017, 345 Joint Assessment Meetings (JAM) were conducted that enabled all parties to participate in planning for the needs of the youth and their families with multiple system involvement. In addition to JAM, monthly stakeholder meetings are held to discuss the broad challenges facing the crossover youth population and how juvenile needs-based supports available to all crossover youth may be improved.

- Juvenile Probation Youth Level of Service (YLS) Unit: Philadelphia Juvenile Probation created a probation district specifically focused on completing the initial YLS risk assessments. The YLS unit consists of six Probation Officers that will complete the initial YLS social summary and risk assessment prior to a youth appearing in Court for a pre-trial hearing. At the time of disposition, the Court will have access to the tool and the youth's criminogenic needs, which will further assist in determining appropriate services. In calendar 2017, 2,652 YLS assessments were conducted, 1,399 of the assessments being initials, which was an increase from 1,296 initial assessments completed in 2016.
- Respite Placement: The Court identified a need for a short-term placement for juveniles who are on active general probation or in Juvenile Treatment Court for technical violations of probation or other discretionary reasons. An RFP is being developed to be issued to serve these youth. Such placements could be for a weekend, a week or two, and up to 30 days. The current practice is to order these youth to short-term placements at either the PJJSC or a community-based detention shelter. A respite program aligns with the goal of safely diverting juveniles from more intensive levels of intervention and the Department anticipates cost savings with a respite program with a reasonably set per diem, as this will be less than the cost of detention. **Philadelphia is respectfully requesting funding to support respite programs.**
- Services for Direct File Juveniles: Youth who are certified as direct file juveniles (age 15 or older and who were arrested for committing a crime with a deadly weapon and initially prosecuted in the adult justice system) are sometimes determined by the Court to be better served by the Juvenile Justice system. Often these youth are decertified and committed to a juvenile justice residential program. Sometimes these commitments go beyond the ordinary length of the program, and sometimes the length of time of the process prior to decertification leads to the youth being age 18 or older when committed. The Philadelphia Juvenile Justice system is exploring development of programs and services to meet the need of these youth. This will begin with work to identify the needs of this population.
- The HUB – Philadelphia was one of 35 cities selected by Bloomberg Philanthropies to address a major system reform issue for the City. The City of Philadelphia submitted to the 2017 Bloomberg Mayors Challenge a proposal for “The Hub for Juvenile Justice Services,” to create a new national model for how children are treated at point of entry to the justice system. Philadelphia was awarded a planning grant to address the needs of youth who are arrested and processed by the Philadelphia Police Department. As a result of the planning process, the City of Philadelphia is submitting a full proposal to plan and implement a comprehensive

Philadelphia

youth assessment and processing center. The HUB is a multi-system collaborative with the intent to reduce detention and increase a youth's access to supportive services, including educational opportunities, medical treatment, counseling, mentoring, and workforce development, all in a trauma informed environment. It is anticipated to serve approximately 2,000 youth per year.

Given the comprehensiveness of the model and the volume of youth anticipated, funding will be needed to support contracting with a private provider to staff service provision at the HUB, as well as expansion of diversion programs for use by the Courts. The HUB will also require additional JJS community-based staff with the addition of funding for contracted services. **Philadelphia DHS respectfully requests funding to support implementation of the HUB.**

3-4 Program Improvement Strategies

- **NOTE:** Counties may opt out of completing all or parts of this section if the information in captured in a:
- CQI or QSR CCYAs County Improvement Plan (CIP) and the plan is submitted as an attachment; or
 - County's formalized strategic plan (child welfare and/or juvenile justice) and the plan is submitted as an attachment.

Counties must identify the areas for improvement that are the focus of CIPs or other strategic plans, including those in response to the CFSR findings that are in planning stages or under implementation in FY 2018-19 and FY 2019-20 that address both child welfare and juvenile justice populations.

Counties whose re-entry data exceeds the national standard and counties who have children under age 16 with a permanency goal of APPLA must identify program improvement strategies to address these populations by answering targeted questions within this section.

Counties must select a minimum of three Outcome Indicator charts (from Charts 3-3a through 3-3i) that are relevant to their identified Program Improvement Strategies. County JPOs should also include charts relevant to their program improvement strategies. Counties participating in the federal CFSR case reviews may elect to substitute federal safety, permanency, and well-being outcomes evaluated during the review as their identified areas of improvement and reference data available in the reports provided through the CFSR Online Monitoring System (OMS).

- CWDP counties must select Outcome Indicators (from Charts 3-3a through 3-3h) that are reflective of targeted outcomes of their Demonstration Project design.

Philadelphia

Population Flow Data:

	Sep 30 2013	Mar 31 2014	Sep 30 2014	Mar 31 2015	Sep 30 2015	Mar 31 2016	Sep 30 2016	Mar 31 2017	Sep 30 2017	Mar 31 2018
<i>Philadelphia County</i>										
Admit During Period	1,962	2,018	2,449	2,269	2,321	2,008	1,715	1,630	1,683	1,320
Discharges During Period	1,742	1,730	2,365	1,536	1,847	2,516	1,692	1,631	1,802	1,376
In Care Last Day	4,737	4,979	5,143	5,809	6,275	5,831	5,946	5,958	5,898	5,842
Total Served	6,104	6,304	6,736	6,976	7,693	7,918	7,298	7,305	7,420	7,095
Total Child Population	393,874	392,704	392,704	392,618	392,618	392,618	392,618	392,618	392,618	392,618
Admissions per 1,000 Population	4.981	5.139	6.236	5.779	5.912	5.114	4.368	4.152	4.287	3.362
Discharges per 1,000 Population	4.423	4.405	6.022	3.912	4.704	6.408	4.310	4.154	4.590	3.505
In Care per 1,000 Population	12.027	12.679	13.096	14.796	15.982	14.852	15.144	15.175	15.022	14.880
Served per 1,000 Population	15.497	16.053	17.153	17.768	19.594	20.167	18.588	18.606	18.899	18.071

Population Flow Graph:

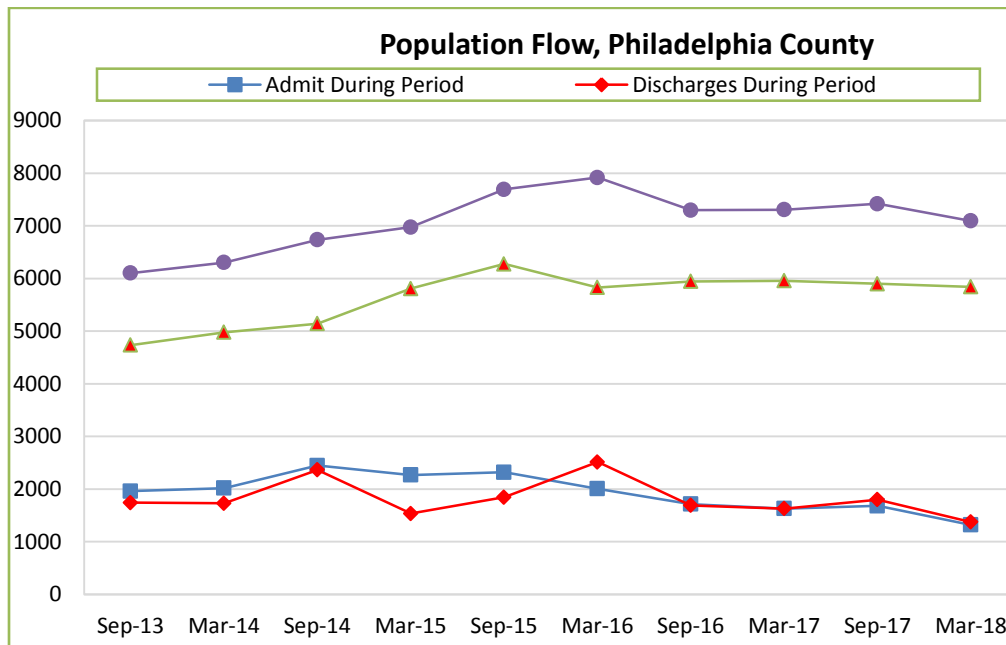


Figure 1a: Population Flow, Philadelphia County

Philadelphia

Reunification Graph:

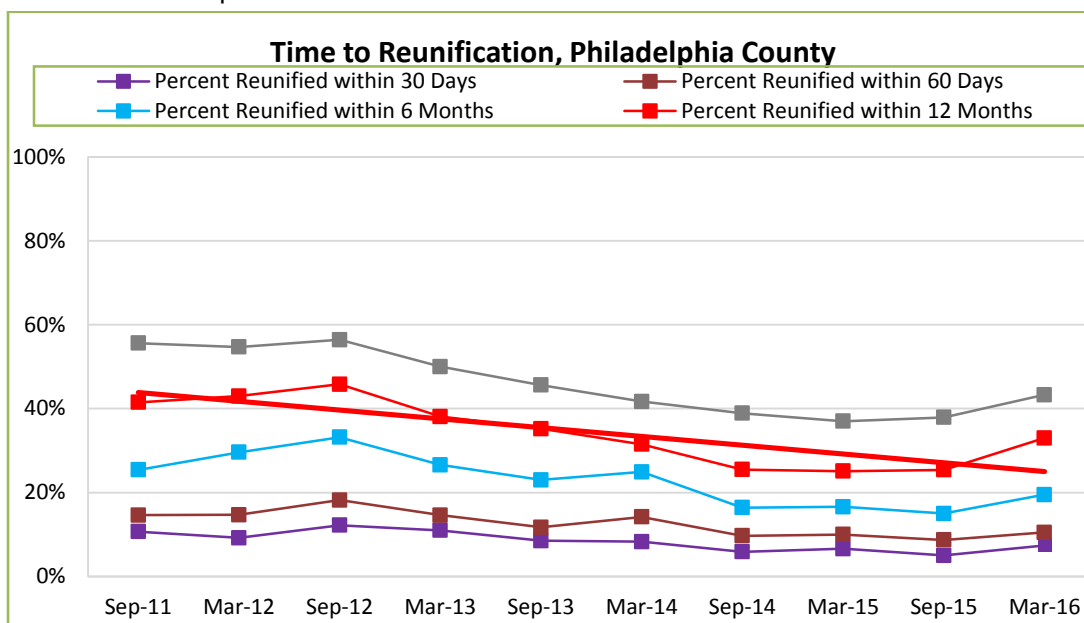


Figure 2: Time to Reunification

CFSR Measure 1.4

Of all children reunified during the previous year, what percent re-entered care within 12 months of the discharge to reunification?

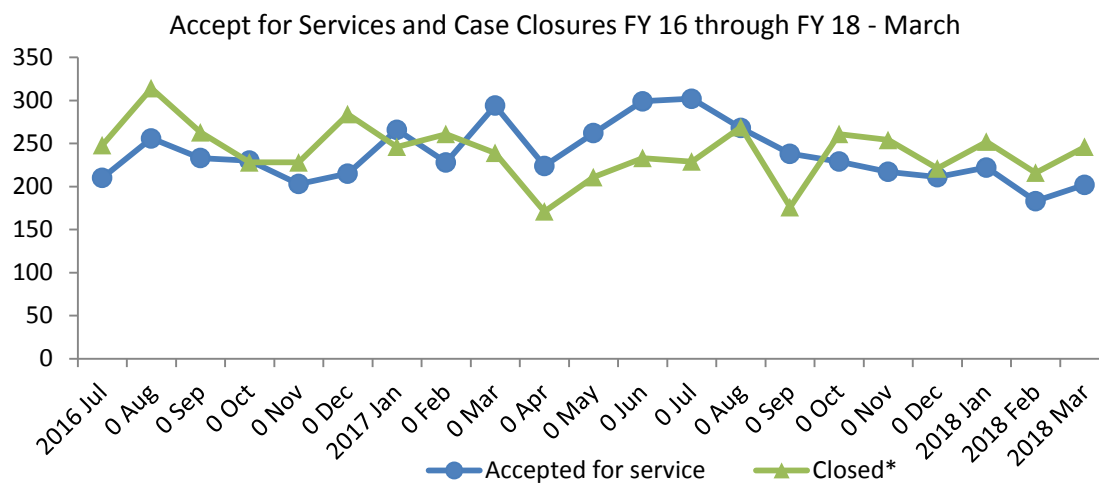
Philadelphia County											
Class 1											
Southeast		2013	2014	2014	2015	2015	2016	2016	2017	2017	2018
		30-Sep	31-Mar	30-Sep	31-Mar	30-Sep	31-Mar	30-Sep	31-Mar	30-Sep	31-Mar
County:	Total Reunifications	1,628	1,604	1,577	1,652	1,627	1,395	1,361	1,320	1,281	1,455
	Re-Entries within 12 months	758	756	744	749	601	716	708	602	504	534
	Percent	46.56%	47.13%	47.18%	45.34%	36.94%	51.33%	52.02%	45.61%	39.34%	36.70%
Region:	Total Reunifications	2,256	2,240	2,212	2,266	2,224	2,009	2,025	1,914	1,806	2,046
	Re-Entries within 12 months	900	900	885	896	735	844	831	721	626	644
	Percent	39.89%	40.18%	40.01%	39.54%	33.05%	42.01%	41.04%	37.67%	34.66%	31.48%
Statewide:	Total Reunifications	6,106	5,880	5,702	5,903	6,152	5,855	5,871	5,816	5,777	5,899
	Re-Entries within 12 months	1,705	1,647	1,606	1,623	1,531	1,602	1,591	1,474	1,342	1,316
	Percent	27.92%	28.01%	28.17%	27.49%	24.89%	27.36%	27.10%	25.34%	23.23%	22.31%
National 75 th Percentile		9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%

Philadelphia

Case Activity FY (Q1-Q3)			Point in Time Case Activity
Report Period	Total cases accepted for service	Total case closures	Total open cases on 3/31
FY 16 Q1-Q3	2,207	2,367	5,603
FY 17 Q1-Q3	2,123	2,306	5,417
FY 18 Q1-Q3	2,070	2,125	5,491

* July 1 to March 31st.

Accept for Service and Case Closures FY16 through FY18(Q3)

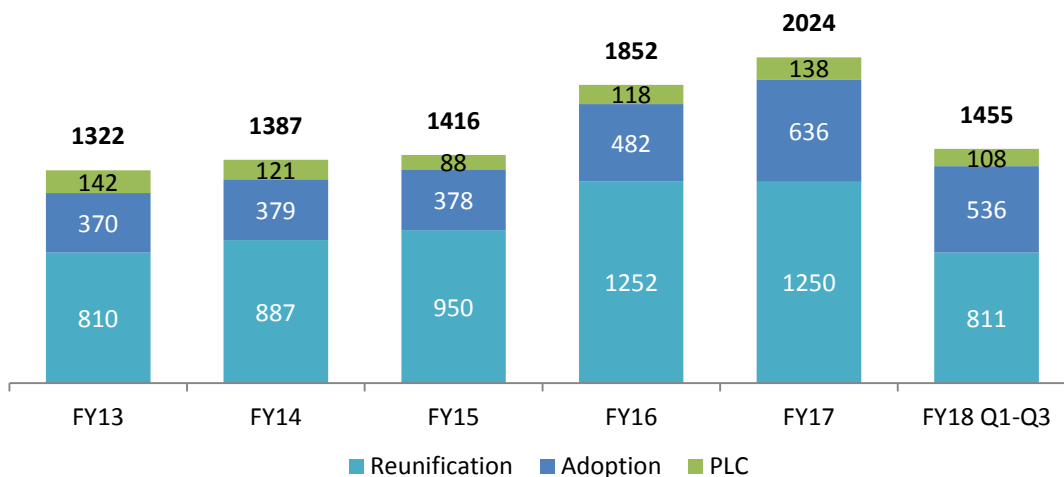


Children receiving In-Home Services			
Children	DHS	CUA	Total
Mar. 31, 2017	64	3,761	3,825
Mar. 31, 2018	65	4,191	4,256
% change	1.6%	11.4%	11.3%

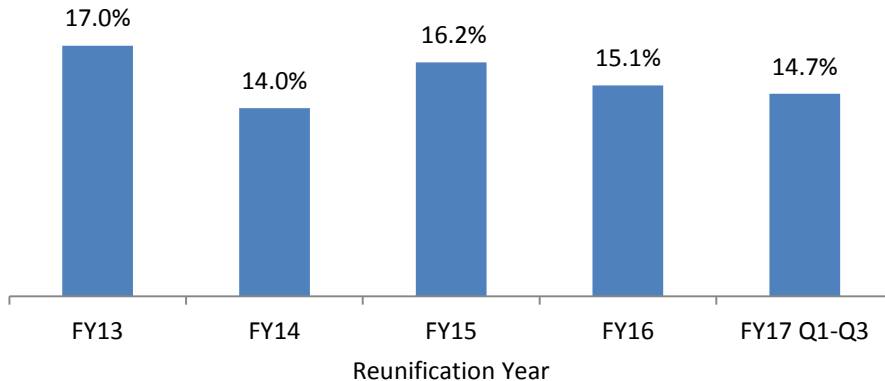
Children Receiving Placement Services			
Children	DHS	CUA	Total
Mar. 31, 2017	576	5,594	6,170
Mar. 31, 2018	448	5,704	6,152
% change	-22.2%	2.0%	-0.3%

Philadelphia

Children Discharged to Permanency FY13-FY18 through March 31st of each year



Percentage of Children that reentered placement within one year of Reunification



Counties do NOT need to provide a separate response for each area of Program Improvement Strategy but rather discuss the county's identification, planning, and implementation efforts.

- ☐ Identify the Program Improvement Areas of focus for your county for FYs 2018-19 and 2019-20.

The top priority for Philadelphia DHS is to rightsize the child welfare system. This includes appropriately and safely diverting families from the child welfare system, reducing the number of youth in out-of-home care, decreasing the use of congregate care, increasing the number of kin, and moving children and youth to timely reunification and other permanency. Philadelphia DHS is also working both internally and

Philadelphia

collaboratively with system partners to improve transitions to independence and outcomes for older youth.

Child Welfare Operations:

Our broad priority areas of improvement continue to be:

- Safely diverting children, youth, and families from formal child welfare services.
- Supporting safe, timely permanency through:
 - Safely diverting children and youth from out-of-home placement.
 - Addressing/reducing barriers to permanency on both case and systemic levels.
 - Supporting and stabilizing permanencies that have been achieved through aftercare and permanency supportive services.
- Improving Practice and Monitoring capabilities – developing and supporting best practice, and holding ourselves, CUA partners, and providers accountable.

Juvenile Justice Services:

Continue to implement components of JJSES to:

- Safely reduce the number of youth removed from their communities; safely reduce the number of youth being placed; ensure that youth engaged in the juvenile justice system are in the least restrictive settings to support their needs.
- Increase the use of community-based solutions.
- Reduce the length of stay for those youth who are placed.
- Reduce reliance on institutional placement for youth who require placement.
- Reduce recidivism through strong post-discharge services and improved youth competencies and family functioning.

- ☐ Briefly describe the strategies being planned and/or implemented to address the improvement areas and timeframes of implementation.

Child Welfare Operations:

- Child Welfare Demonstration Project (CWDP)
Philadelphia's Child Welfare Demonstration Project (CWDP) ended June 30, 2018. As Philadelphia exits the CWDP, it is well prepared to continue implementing the Demonstration Project activities related to family engagement (i.e., Family Team Conferences), assessment (i.e., FAST/CANS), and service connection (i.e., EBPs). The regular use of Family Team Conferences, FAST/CANS/ASQ assessments, and referrals to evidence-based practices (EBPs) has been systematized as part of expected child welfare practice at the CUAs. Additionally, DHS has engaged in activities to increase monitoring and quality improvement for these practice areas.

DHS and the CUAs continue to engage families and stakeholders in Family Team Conferences (FTC) to support the four goals of IOC and provide the structure for family voice at integral points of the life of a case. FTCs have become standardized practice, and DHS continues to move forward with refining and improving teaming practice in Philadelphia. Although the full implementation of the assessment component of the CWDP (e.g., CANS, FAST, and ASQs) has been challenging for Philadelphia county, there has been significant improvement in the use of these assessments over the past year. For example, the compliance rate of the initial FAST assessments has doubled over the past year. DHS partnered with Chapin Hall, the developer of the FAST/CANS assessment tools, to provide training to a group of CUA staff serving as Champions to promote the quality completion of

Philadelphia

assessments that inform the Single Case Plan. Philadelphia continues to take steps toward increasing the use of EBPs, including those identified by the CWDP (i.e., FFT and PCIT). In order to promote access and connection to the CWDP-identified EBPs, DHS awarded contracts to both the PCIT and FFT providers in Philadelphia to fund non-Medicaid reimbursable collateral activities that promote service engagement and reduce barriers to service connection. These grants are funded through the Special Grants Initiative.

- Safely diverting children, youth, and families from formal child welfare services.
 - Establish Field Screening Units to conduct secondary screening with the goal of diverting families from the system.

Recent revisions to Pennsylvania's Child Protective Services Law have led to increases in the number of referrals coming into the Philadelphia DHS Hotline, the number of reports accepted for investigation, and the number of investigations that have been accepted for services. In August 2017, DHS established Field Screening Units within the Hotline to conduct secondary screenings with the goal of safely diverting families from entering the formal system. In doing so, we targeted General Protective Services (GPS) reports with three or seven day response priority times because they typically involve a service assessment or provision of non-protective services. Front-End Operations developed a secondary screen-out section within the Hotline to safely divert referrals to community based alternatives and DHS prevention services, instead of automatically accepting for investigation.

- Referral to Community Based Prevention Services During Active Investigation.

The Department also established a process within the Investigation divisions of referring reports that have preliminarily been assessed as *Safe with a Plan* to Prevention Services during the active investigation with the goal of mitigating identified Safety Threats before the close of the investigative process so that families can be safely diverted from the formal system.

- Support Team for Education Partnership (STEP) Program.

DHS is continuing to enhance its partnership with the School District of Philadelphia (SDP) by supporting a program that provides intervention and support to at-risk children, youth, and their families when their behaviors may indicate a need for social work or behavioral health services. This program addresses issues for children, youth, and their families that may lead to truancy, removal from school, or increased risk for other dependency issues or delinquency involvement.

Beginning in 2018, the SDP partnered with the City of Philadelphia and the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) to implement the Support Team for Education Partnership (STEP) Program in 22 SDP schools and one Philadelphia charter school where high behavioral health needs have been identified.

Philadelphia

The STEP Program fits into the school district's intervention structure, is school-based, and targets at-risk children and youth. It allows for an early intervention strategy that directly diverts children and youth to needed social work services to maintain youth in school, support their basic needs, and remove family barriers. The program offers increased, onsite access to short-term social and emotional support, coaching and support for school staff, and access to behavioral health evaluations and treatment services.

The team is led by a licensed Social Worker and includes a School Behavioral Consultant, a Case Manager, and a Family Peer Specialist. Children and youth who present concerning behaviors, such as being disruptive in class, may be referred by teachers, principals, etc. to the STEP team for further assessment, case management, and service linkage. School Behavioral Consultants will create plans for both the child or youth in the classroom and classroom personnel to assist the child or youth. The Case Manager assists with service linkages, and the Family Peer Specialist can mentor and support the family from the perspective of someone who has been through the process. As of this submission, the SDP has completed hiring of the licensed Social Workers and is beginning the hiring process for the School Behavioral Consultants.

Program metrics include evaluating impact on attendance, disciplinary referrals, truancy, grade promotion, and the need for acute behavioral health crisis management.

Medically necessary clinical services will be funded through Medicaid billing. However many of the services needed by children, youth, and families to keep children and youth in school are not clinical. **DHS, in support of our SDP and DBHIDS partners and the children, youth and families they serve, respectfully requests funding to support the non-medically necessary costs of the Support Team for Education Partnership.**

- Ensure a sufficient array of Prevention services that are directly focused on maintaining children and youth in their own homes and communities and supporting families so that children and youth do not re-enter care.
 - Prevention Services Portfolio: In FY 2017-18, DHS completed an in-depth review of the prevention service portfolio to ensure that services were aligned with IOC goals. The review resulted in the revision of standards and scopes related to case management and counseling services, particularly programming around Family Empowerment, Truancy, CAPTA, Rapid Service Response, and Domestic Violence. The updates reflect an expectation of service provision to high-risk populations, specifically ensuring that services shift from a focus on primary prevention to a secondary or tertiary prevention focus. DHS also added more direct language, expecting providers to engage referred families and to ensure intensive focus on diversion from placement.

During the next 12-24 months, DHS will continue to review the prevention portfolio to ensure that all services continue to be aligned with IOC goals and, through evaluation, that the services are able to directly divert children, youth, and families from formal child welfare services. We will also begin to align

Philadelphia

some of our prevention services to be more consistent with the goals of the Family First Prevention Services Act (FFPSA). Specifically, we will begin to assess the feasibility of implementing evidence-based practices/curricula into existing programming including but not now limited to Family Empowerment, Truancy, CAPTA, Rapid Service Response and Domestic Violence.

To that end, resources needed toward implementation and sustainability of the exploration and implementation of evidence-based practices into the programming mentioned above will require funding for staff hired to review and evaluate the current programming as well as to research alternative evaluation practices to support the FFPSA requirements.

- Expansion of Anchor Programs: In FY 2017-18, we began the expansion of Family Empowerment Services, Truancy Intervention and Prevention Services, CAPTA, Rapid Service Response, Housing, Domestic Violence and Older Youth Services through the Achieving Independence Center. The goal continues to be to safely divert children, youth, and families from the formal child welfare system and to meet the particular needs of the communities and populations served. The first phase of these expansions involved updating standards and scopes for these services to ensure clear expectations for providers. The next phase included analyzing the need for the services and adjusting resources to meet the need. To date, both of these processes have been completed. In FY 2018-19 we will begin to implement the following:
 - Family Empowerment Services (FES) – Family Empowerment Services (FES) has served as a primary diversionary intervention that stabilizes referred families and serves to keep them outside of formal child welfare services. In the first three quarters of FY 2017-18, there were a total of 3,615 FES referrals: 81% came from the DHS Hotline, Investigations, and CUAs. A recent analysis of 1,946 families who received FES services in FY2016-17 showed that 91% (N=1,760) of families were not subsequently accepted for a CWO service in FY 2016-17 or FY 2017-18. The analysis was completed by matching a list of the 1,946 families who received FES services in FY 2016-17 with a list of all families opened for a CWO service in FY 2016-17 and FY 2017-18. The analysis shows the significant impact that this service has in diverting families from formal Child Welfare Services.

To further enhance FES effectiveness, in January 2019, DHS will begin a shift of the FES service delivery model to include an integrated “Family Support Center.” The shift will begin with two pilot Centers that will replicate a model that Allegheny County is currently successfully using to reduce the number of families accepted for formal child welfare services. The proposed enhancement will serve as a “one-stop shop” community prevention home for families that are receiving Prevention case management. The two pilot Centers will allow DHS to determine how to most effectively implement the shift.

During the first three months of FY 2018-19, DHS will determine the location of the new centers and issue a Request For Proposals, and by

Philadelphia

January 2019, the first two pilot centers will begin to operate. For FY 2019-20, DHS will shift completely to the Family Service Center model, which will also include a prescribed evidence-based curricula to be implemented as part of the model's case management services, and will issue an RFP to identify eight providers who will implement the model in different areas of the city. Family Service Centers will be located close to existing Community Umbrella Agencies (CUAs) and expected to collaborate closely with the CUAs in serving families in their assigned communities that are at high risk of entering into formal child welfare services. **Philadelphia DHS respectfully requests funding to support the shift in the Family Empowerment Services program to the Family Support Center model.**

- Truancy Case Management Services – In last year's submission, Philadelphia DHS identified a need to hire ten additional Truancy Services Case Managers to support an estimated 2,100 new referrals that would be generated as a result of the new law, Act 138 of 2016. This legislation, which took effect in September 2017, expanded the definition of truant children and youth, and included an expectation of closer monitoring and follow-up of attendance. DHS received funding to hire five Case Managers in FY 2018-19.

In FY 2018-19, as part of a pilot in partnership with the School District of Philadelphia (SDP), the five new Truancy Case Managers will join family conferences held by the SDP to address truancy issues. The goal of this early engagement is for the Truancy Case Managers to be able to offer case management services to families when they may be more open to accepting services. The Truancy Case Managers will engage the families right away and ensure that truancy issues are resolved to avoid children and youth being referred to Regional Truancy Court, the first entry point into possible formal child welfare services. Expected increases in referrals had been delayed because the SDP had to train responsible staff at all of its schools regarding the requirements of Act 138 of 2016, and develop processes to implement the requirements. Now that SDP staff have been trained, DHS anticipates an increase of approximately 1,000 referrals. **For FY 2019-20, DHS respectfully requests funding to expand the capacity to engage families early in the process by hiring five additional Case Managers, as by then, the partnership will be fully functional and there will be a need for staff to manage increased referrals.**

- Substance Exposed Infants and their Families_- The Family Case Coordination Program (CAPTA services) was created to deliver intensive case management services to families with infants that are reported to DHS as affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or a fetal alcohol spectrum disorder at the time of the baby's birth, in accordance with the federal mandate. The program's services also target other children residing in the home.

Philadelphia

The program has shown itself to be effective in safely diverting families from formal child welfare services. DHS's Performance Management and Technology Division completed an analysis of the program by matching a list of the 231 families who received CAPTA services in FY 2016-17 with a list of all families opened for a CWO service in FY 2016-17 and FY 2017-18. If a family stopped receiving CAPTA services at any point in FY 2016-17 and were opened with CWO during FY 2016-17 or FY 2017-18, they were included in the analysis. The analysis showed that 89% (N=205) of the 231 families who received CAPTA services during the time period had no subsequent history of being accepted for a CWO service during FY 2016-17 or FY 2017-18. It is anticipated that the program will produce similar results with increased utilization.

In FY 2017-18, this program funding was expanded to support the hiring of two additional Case Managers to manage the influx of referrals. For the first three quarters of FY 2017-18, there were a total of 522 referrals as compared to 544 for the entire year of FY 2016-17. DHS expects a total of 696 referrals by the end of FY 2017-18, a 27% increase over the prior fiscal year.

With the recent spike in drug use, specifically opioids in Philadelphia, we expect that the numbers of referrals will continue to increase, therefore **DHS respectfully requests funding to further expand the program by adding an additional unit consisting of five staff and one supervisor FY 2019-20.**

- Rapid Service Response - The intent of this service is to safely prevent the need for out-of-home placement by improving parental capacities and mitigating safety threats so that parents or caregivers can provide a safe, nurturing environment for children and youth. This program provides intensive, in-home services to families with a variety of presenting problems including but not limited to: parent-child conflict, substance abuse, mental illness, school-related problems, medical illness, domestic violence, poor housekeeping, etc. Families referred for Rapid Service Response are those reported to the Department for child abuse or neglect, the initial risk to the child is deemed moderate to high, and services are needed to assure that families can effectively utilize their own strengths and community resources to maintain the safety of their children without longer-term intervention by DHS.

This service has proven to be essential in diverting cases from formal entry into our formal child welfare system. A recent data analysis showed that 72% of the families served in this program had no subsequent history of being accepted for service during FY 2016-17 or FY 2017-18. To complete this analysis, DHS's Division of Performance Management and Technology compared the 892 families who were referred to RSRI in FY 2016-17 against a list of all families opened for a CWO service in FY 2016-17 and FY 2017-18.

Philadelphia

A need for funding to support additional staff to manage increased referrals from Investigations was identified in FY 2017-18. In FY 2017-18, Q1-Q3, there were a total 795 referrals; 688 of the families referred accepted the service (87%). As DHS continues the work through the field screen units who are charged with performing secondary screenings to divert families where safely possible, we expect that the referrals will increase. In FY 2018-19, DHS expects to make 1,000 additional referrals to the RSRI program. **DHS respectfully requests funding to support expanded utilization of this program.**

- Housing - New housing initiatives – DHS is planning to implement the following in FY 2018-19:

Emergency housing (hotel rooms) for victims of Domestic Violence (DV): The target population will be DV victims whose children are at risk of placement during screening, investigation or assessment, or are receiving in-home services because of lack of safe housing. The purpose will be to provide immediate short-term housing when DV shelters are full and children are at risk of placement due to DV. Families receive this service for an average of seven nights per family; a large family may need three rooms.

Short term rental assistance to prevent placement/shallow rental assistance: The target population is families with children at risk of placement during screening, investigation, or assessment due to housing issues. This program will provide shorter term Rapid Rehousing (three months of rental assistance) for 10 – 15 families. See below under “Addressing/reducing barriers to permanency on both case and systemic levels” for a detailed description of Rapid Rehousing.

Housing for Youth: The target population for this initiative is youth/young adults aged 21 years who are aging out of Supervised Independent Living. This program would provide housing opportunities, including rental support and services, to 12-15 Non-HUD eligible youth.

DHS expects to continue these programs in FY 2019-20 and respectfully requests funding to support these programs that serve to prevent further penetration into the system.

- Domestic Violence (DV) – Through requests from CWO staff as well as findings from the ongoing DHS-DV Collaborative, DHS identified the need to provide DV-informed recommendations, trainings, and consultations to CWO staff. As part of a city-wide effort to ensure that city provided services are DV-informed, the city’s Director of Domestic Violence Strategies has been providing consultations, and participating in DHS Investigations’ and standing CUA weekly teamings. DHS recently hired a Director of DV Interventions to fill this role. At these teamings, the DV consultant often identified DV concerns and indicators in cases that had no reported history of DV. We have been able to help Case Managers and Supervisors identify safety concerns and make appropriate

Philadelphia

recommendations for safety planning and referrals in cases that have reported or previously unidentified DV.

Currently, DHS has only one staff person to provide individual consultations and to participate in DHS investigations and standing CUA weekly teamings. Due to limited capacity, the Department has not been able to meet the full need for individual case consultations or provide outreach for staff and leadership at CUAs where they may be unaware of the value of individual case consultations.

DHS has also identified the need for more targeted training in specific areas needed to assist DHS and CUA staff for screening, investigating and responding to DV. Such areas include intersection of DV with mental health and substance abuse, safety planning, strategies for engaging the alleged abusive partner, strategies for engaging the survivor, and the impact of DV across developmental stages for children.

DHS currently works collaboratively with DV agencies by contracting with them to provide direct services including crisis intervention and shelter, legal services, and counseling and case management to survivors and their children as well as a program to promote offender accountability. To enhance this coordinated response in the community, proper screening, intervention, and referral by DHS and CUA staff is necessary.

In order to meet these needs and ensure that investigations and case practice are DV-informed, more capacity is needed to cover all the DHS units and CUAs. **DHS is requesting five additional full-time staff members to support the newly hired DHS Director of DV Interventions.** These five staff members will be able to provide coverage to all of the CUAs and support the Director in meeting the needs of the DHS Investigations units. Each new staff member will be assigned two CUAs for trainings and individual and team case consultations. They will spend two days per week at each CUA and one day per week at DHS for administrative and supervision tasks.

- Older Youth - Achieving Independence Center - In FY 2017-18, DHS identified the need to further strengthen service delivery to older youth, to work to improve their outcomes as they transition to adulthood, as well as make available additional emergency housing assistance for youth and young adults who inquire about resumption of jurisdiction.

The Mentoring Program will help young people between the ages of 14 and 21 achieve self-sufficiency through mentoring relationships with caring adults. Funding for this program was granted and the mentoring component will be implemented in FY 2018-19. The program model will employ a diverse group of young adults to act as advocates and mentors for youth who are involved with one or more of the child-serving systems. Volunteer and natural mentors will be recruited and matched according to the youths' needs and characteristics. A match may be made between one adult and one young adult or one adult and two young adults

Philadelphia

depending on the number of program participants. All matches will be supported through formal and informal trainings, meetings, and activities for mentors and mentees. Through the mentoring program, young adults will have an opportunity to build self-esteem, develop a relationship with an adult, establish networks, and be supported in their social development.

The emergency housing assistance initiative will also be implemented in FY 2018-19. DHS has increased funding to offset the housing needs of young adults who inquire about resumption of jurisdiction and have housing as a main need. DHS expects to serve an estimated 20 youth with the additional funding.

- Older Youth - YVLifeSet - Approximately 23,000 young adults in the U.S. age out of the foster care system every year. One in four experience homelessness, half end up unemployed, and close to 70% have been involved in the criminal justice system. The YVLifeSet program is an evidence-informed program that has been designed to provide transition services to young adults, ages 17-22, leaving the foster care, juvenile justice, and mental health systems, or who would otherwise find themselves without the necessary skills and resources to live successfully at this critical junction in their young lives. At the age of 21, young adults are discharged from care, and if they need assistance, they have to find their way through the adult system. Because the YVLifeSet Program model serves young adults to the age of 22, in effect, they are receiving aftercare services to help stabilize their transition to adulthood and promote positive outcomes.

The program model provides a proven level of intensity; the YVLifeSet specialists are available to the young adults 24 hours a day, seven days a week. They make a minimum of one face-to-face contact per week with the young adult at the young adult's home, job, or wherever is most convenient. The number of sessions is increased as needed to match the individual needs of each young adult. The national program model averages eight to ten months, with a majority of the participants obtaining success within nine months. The YVLifeSet program integrates both clinical and case management components to help ensure young people are engaged in the program and establish permanency, education, employment, housing, and basic independent living skills.

This program was launched in Philadelphia as a pilot in September 2017 and to date has served 50 young adults ages 17-22 who have left or will be leaving the custody of DHS and have found themselves without the necessary skills and resources to live successfully on their own.

Implementation was successful. Below are some of the results from this pilot:

Housing (54% increase) -Of the 50 participants served in the pilot, 54% of the young adults who were homeless (street living, couch-

Philadelphia

surfing, no identified place to stay) at enrollment, have now gained suitable and stable housing.

Education (42% increase) - Of the 50 participants served in the pilot, 42% of the young adults either graduated high school or entered in a post-secondary educational plan.

Employment (70% increase) - Of the 50 participants served in the pilot, 70% of the young adults who were unemployed at enrollment have obtained and maintain employment while in the program.

Life Skills (90% increase) - Of the 50 participants served in the pilot, 90% of the young adults have been assessed in treatment planning and have shown improved skills.

Mental Health (34% increase) – Of the 50 participants served in the pilot, 34% of the young adults who displayed mental health challenges at enrollment or while being served have engaged in mental health treatment.

Permanency (68% increase) – Of the 50 participants served in the pilot, 68% of the young adults who did not have a permanent connection or support gained a permanent connection or support as evident in completion of the YVLS permanency pacts prior to discharge.

DHS is seeking to expand this program to serve an additional 100 youth.
DHS respectfully requests funding to expand this much needed, successful program.

- Working with and supporting Philadelphia Family Court in its decision-making regarding the safety of children and youth involved in custody matters, and not currently accepted for service.

As part of the continuing collaboration between DHS and Family Court to protect children and youth and to preserve families, DHS is working with the Court to ensure that the Court has adequate resources to inform its safety decision regarding children and youth involved in custody matters.

State law requires criminal history certifications in custody matters for all parties and their household members. If a party or household member has been convicted of or has pled guilty to one of the enumerated crimes, the Court, or a designee, is required to conduct an initial parenting capacity evaluation as to whether the person poses a threat of harm to the child or youth whose custody is being considered.

Supporting the Court in obtaining evaluations for custody proceedings is consistent with both PADHS's core goal to increase children and youth's safety and safety of the community and Philadelphia DHS's core IOC goals of more

Philadelphia

children and youth maintained safely in their own homes and communities and improved child, youth, and family functioning. These evaluations in custody matters can serve as a primary prevention measure by assessing the strengths, weaknesses, and general capacity of parents to meet their child or youth's basic needs, and identifying the need for counseling and impediments to permanency. It may also identify any other individuals who should be evaluated before awarding custody of a child or youth because they may pose risk of harm. Further, it will support children and youth maintaining contact with both parents when there is no risk in doing so.

Parenting capacity evaluations are not covered by health insurance and, because they are completed by a third party, the fee cannot be waived for indigent parties as it is with custody filings or mental health evaluations by Court psychologists.

The Philadelphia Department of Human Services, in support and on behalf of the Philadelphia Family Court, is requesting continued funding for legally mandated parenting capacity evaluations when parties to a custody matter, or their household members, are found to have a record of one of the enumerated offenses and the Court deems it necessary to assess whether a risk of harm to the child or youth may exist if access to the child or youth is granted.

- Safely diverting children and youth from out-of-home placement.
 - Administrative approval for placement.
In April 2017, the Department issued a policy that required administrative approval from senior leadership at the CUA or DHS, prior to recommending placement or seeking an order of Protective Custody. The purpose of the higher level of approvals is to ensure that Child Welfare Operations staff are making reasonable efforts to prevent placement.
 - OHS collaboration for emergency family housing to prevent placement of children and youth in homeless families.
Philadelphia DHS, in partnership with a Stoneleigh Foundation Fellow, collaborated with the Philadelphia Office of Homeless Services (OHS) to develop an emergency housing referral process for families. The referral process was implemented in January 2018. This resource is available to keep children and youth together with their families when the only safety threats are related to unsafe housing conditions or homelessness, and no alternative housing is available. This collaboration complements efforts made by DHS to prevent unnecessary placement of children and youth such as the Department's Administrative Approval Process for Placements. Most importantly, it aims to ensure that placement of children and youth only occur for reasons involving immediate safety, after less restrictive measures have been tried and have failed.
- Addressing/reducing barriers to permanency on both case and systemic levels.
 - Efforts to Increase the Use of Kinship Care.
Philadelphia DHS firmly believes that children and youth thrive when they can be maintained in their known circle of connections. For children and youth who

Philadelphia

cannot be reunified with their parents or caregivers, kin are most likely to be a permanency resource. Understanding that the “circle” does not necessarily mean a biological connection, efforts to identify, screen and approve “kin” as alternate caregivers was very intentional during the recent fiscal year and will continue. Inquiries are made to identify kin during the Family Team Conferences, as well as any time a child or youth was transitioned to the Child Care Room. During Family Team Conferences, the facilitators inquire about any resources that may be involved with the family and included contact information in the Conference Summary. CUA Case Managers supported these efforts by engaging the biological parents as well as older youth in discussions regarding possible resources.

Additionally, the Department believes that it can increase the use of kinship by completing Accurant Searches and/or Family Finding Searches for children and youth who are in non-kin placements. **However, in order to handle this capacity, the Department is requesting additional licenses to be able to perform Accurant searches.**

As of December 2017, 46.9% of our total placement population was with kin. However, when you look at children and youth who are placed in a family setting, 55% percent are placed with kin.

Also, as mentioned previously we are expanding our resource parent pool by increased publicity and marketing.

- **Rapid Rehousing.**
An area of improvement identified in FY 2017-18 was the need for funding to support the creation of a pilot project providing rental assistance and social service support to quickly rehouse and stabilize families in the community. The goal is to reduce the length of time children remain in out-of-home placement due to housing issues by providing families with a year of rental and social service assistance that allows them to successfully reunite with their children and assume rent payments independently and maintain housing with their children once the subsidy ends. A funding increase of \$1,150,000 was granted to support this pilot as well as start additional projects in FY 2018-19. The pilot has begun and to date a total of ten families are part of the Rapid Rehousing Initiative. **DHS would like to expand the capacity of this program to serve additional families.**
- **Universal Accurant and Family finding referral for all children not placed with kin.**
Finding family members who are willing to act as resources:
 - Helps stabilize families so they do not have to be accepted for formal protective services.
 - Potentially provides supports for Safety Plans so children and youth can remain safely at home.
 - Identifies kin who can act as placement or permanency resources.
 - Provides support for safe case closure, and for older youth transitions to adulthood.
 - Helps to reduce the use of congregate care settings.

Philadelphia

The Department's Family Finding program receives referrals from all ten CUAs and DHS. The current Provider averages about 40-50 children on their waiting list for Family Finding at any given time. They have managed to serve more cases this fiscal year than last year; however, there still tends to be a waiting list. The Provider prioritizes the service based on cases that are court ordered, have an emergency placement need, etc. **DHS respectfully requests funding to further expand Family Finding capacity.**

Please see response regarding use of congregate care in the Chart Analysis section, efforts to increase the use of kinship care in this section, and 4-3 Accurint for additional information on the use of Accurint and Family Finding.

- Increase Use of SWAN services.
During the past fiscal year, Philadelphia County has made concerted efforts to increase the utilization of SWAN services and will continue these strategies during the upcoming fiscal years. In order to increase the knowledge of SWAN services at the Community Umbrella Agencies (CUAs), each CUA has identified staff that was trained on all of the SWAN services and the correlation of the SWAN service to permanency outcomes. Philadelphia DHS and Diakon facilitated these trainings and information sessions. Additionally, DHS hosted quarterly meetings with the SWAN affiliates to discuss the quality of service, and to develop solutions to ensure the timely completion of SWAN services and to remove any barrier that would delay permanency. New efforts were implemented to identify the older youth population who were in congregate care or who re-entered placement and refer them to SWAN services. As a result, Philadelphia DHS partnered with the Achieving Independence Center to identify older youth who could be referred for Child Specific Recruitment, Child Preparation services, and Child Profiles. Philadelphia DHS also approved a special pilot program through Delta Community Services that focused on identifying and referring youth in their re-entry program for SWAN services as well. These SWAN services will allow these youth to be referred for Child Profiles, Child Preparation, Child Specific Recruitment Services, and to the SWAN Older Child Matching Initiative (OCMI) with the goal of identifying permanency resources for the youth. Our efforts have resulted in a 63% increase in Child Specific Recruitment referrals.
- Rapid permanency reviews.
During the summer of 2016, Philadelphia DHS, in partnership with Casey Family Programs, embarked on a process called "Rapid Permanency Reviews" (RPRs) to rightsize the City's Child Welfare System. Rapid Permanency Reviews (RPRs) shine a light on Philadelphia's foster care youth who are close to permanency yet linger in the system for years. RPR is a deliberate process to identify where children and youth experience delays in permanency and to break down any obstacles that keep them from a safe and loving family. The result is a smoother, quicker path to a safe and permanent home for all of Philadelphia's children and youth.

During RPRs, the review teams partner with case management teams to identify barriers to permanency through a brief, targeted review of the case file. Action steps are agreed on and supported by an intentional, structured follow-up

Philadelphia

process. The process involves stakeholders at the case, executive, and system levels to ensure that barriers to permanency are overcome and children find the safe and loving home they deserve.

In 2017, 250 cases were reviewed during three pilots. Out of those 250 cases, 43% achieved permanency. During reviews, participants identified action steps that must be completed to reach permanency. In all organizations (Pilot CUAs and DHS), over 80% of those action steps were completed six months after their review.

Taking in the lessons we learned during the pilots, Philadelphia DHS and CUAs, with technical assistance from Casey Family Programs, are currently implementing a full system RPR roll-out plan in a phased approach. All ten CUAs and DHS were divided into three cohorts—the first cohort kicked-off a full-day of RPR Training at DHSU in January 2018, and began reviewing cases in February, the second and third cohorts followed accordingly.

All agencies have six months in total to complete their RPRs, and they will send progress reports to DHS Performance Management and Technology (PMT) Department on a monthly basis, who will aggregate the data and provide system-wide reports on barriers, bottlenecks, bright-spots and progress toward permanency. Processes have been identified to address identified barriers with Executive Leadership and System partners when issues cannot be resolved at the case management level.

- **Analysis of Adoptions Processes.**
Casey Family Programs is supporting DHS with technical assistance by engaging Public Financial Management (PFM) to conduct an in-depth analysis of the adoption process. The goal of this analysis is to identify the components of the process in which DHS can improve practice and shorten the time to finalized adoption.
- **Supporting the work of the Solicitors in guiding cases through the court process toward permanency.**
With the addition of the new attorneys, and most importantly the full implementation of IOC, the Philadelphia Law Department Child Welfare Unit (CWU) has identified a need for additional Legal Assistants to support the work of the new attorneys hired as part of Philadelphia's focused permanency efforts. CWU legal assistants do work that would otherwise have to be completed by attorneys, such as: drafting and filing the petitions that initiate a case in Court, preparing the Goal Change/Termination petitions that allow children and youth to be freed for adoption, and preparing the Permanent Legal Custodianship petitions that allow children and youth to achieve permanency through PLC.

Even with the ten additional attorneys, Solicitor caseloads are above those recommended by the ABA. Hiring Legal Assistants allows more efficient and cost effective use of attorney time as Legal Assistant salaries are approximately half that of attorney salaries. They keep the work moving forward, allow the attorneys to concentrate on aspects of the work that only attorneys can do, such as preparing witnesses and trial strategy, formulating questions for direct and

Philadelphia

cross-examination, and litigating the case, and allow the attorneys to prepare themselves and their cases for court, which helps to reduce continuances.

The Law Department currently assigns one Legal Assistant to support two attorneys. To support the additional ten attorneys, **Philadelphia respectfully requests funding to hire five additional CWU Legal Assistants.**

- Supporting and stabilizing permanencies that have been achieved through aftercare.
 - Increase the use of post-permanency supportive services, such as SWAN. See “Increase Use of SWAN Services, above.
 - Use of prevention services to stabilize and support permanency to reduce re-entry. See Prevention Realignment write-up above for more detail as to use of prevention services to stabilize and support permanency.
- Improve Practice and Monitoring capabilities.
 - The Division of Performance Management & Technology (PMT) Program Improvement Strategies.
Philadelphia DHS’ PMT brings together core infrastructure functions of the department: Monitoring and Evaluation of Community Umbrella Agencies (CUAs), service providers (child welfare, juvenile justice, and prevention) and DHS child welfare practice; Data Warehouse & Analytics; Performance and Quality Management, and Information Systems. Starting in October 2016, the new PMT division launched several key initiatives to improve and modernize how DHS collects and analyzes data, evaluates providers, and utilizes modern technology to facilitate quality child welfare practice. These initiatives will continue to be implemented and enhanced in FY 2018-19 and FY 2019-20. See PMT Program Improvement Strategies attachment for more information regarding progress and plans.
 - Creation and initial implementation of CUA Scorecard.
The Baseline CUA Scorecard was published in October of 2017. The nine domains of the CUA Scorecard are: Permanency, Safety Assessment and Plan, Visitation, Case Planning, Court, Supervision, Assessments & Health and Education Information, Finance, and Workforce. Philadelphia DHS PMT issued quarterly CUA Scorecards and convened CUAs individually in the winter of 2017 and spring of 2018 for “Closing the Loop” sessions to review performance and discuss improvement strategies and practices leading to improved performance. In addition to these sessions, the Commissioner convened six-month progress sessions with CUA leadership to review progress from the Baseline at the six-month mark. Finally DHS University worked closely with the CUAs throughout the year to develop and implement technical assistance strategies aligned with key areas for improvement in the CUA Scorecard. The first annual CUA Scorecard will be published in October of 2018 and with an analysis of progress from the Baseline. DHS will continue to issue annual CUA Scorecards beyond FY 2018-19.

Philadelphia DHS also partners with CUAs to share best practices with others. Simultaneously, we created a contingency plan, which includes a Request for

Philadelphia

Proposal process, should we need to replace any CUA. Finally, our work with the CUA Scorecard will serve as a foundation towards moving to a performance-based contracting system. In FY2018-19, DHS incorporated the “PBC Tracking Pilot” into CUA Contracts. As part of this initial tracking year, DHS and CUAs will begin tracking the eligible population of youth and their permanency benchmarks, which are aligned with federal measures of permanency. Also, in FY 2018-19, DHS will explore how to utilize CUA scorecard performance to inform decisions on CUA contracts. These permanency measures, focused on timeliness and stability of permanency, will be incorporated into the CUA Scorecard in FY2019-20.

- **Quality Visitation and Family Engagement.**
In FY 2018-19, DHS will test and track the Quality Visitation Review (QVR) tool and process with biological families with children in placement. These reviews will be reported out to CUAs, will be discussed at regular CUA-DHS meetings, and will be incorporated into the CUA Scorecard as part of the Engagement Domain. Also in FY 2018-19, DHS will explore contracting with a qualified vendor to conduct a third party Visitation Audit. This Audit will enable DHS to validate internal Quality Visitation processes and identify additional practice areas for quality assurance.

In FY 2019-20, DHS will explore conducting surveys and focus groups of caregivers – in addition to the QVR - to complement family engagement measures.

- **Prevention Data collection and Quality Assurance processes.**
Philadelphia DHS has recognized the need for data collection and quality assurance processes for all prevention services. In FY 2017-18, the Department began to collect data on a consistent basis from Prevention case management and counseling providers. Data collection allows for systematic monitoring of provider service delivery and has made possible development of quality assurance processes that will support program adjustments and enhancements. In April 2018, Philadelphia DHS launched an updated Prevention Referral System and a unit to manage referrals. This system now enables all prevention services to be tracked. It provides insight on the number of referrals to different services, the time it takes to assign referrals, and progress towards servicing the family. The system has processed 3,097 referrals between April 1, 2018, when it was launched, and June 30, 2018.

In FY 2018-19, Philadelphia DHS will continue to monitor this system to ensure smooth operations. We will also begin phase one of the integration of Prevention into the ICMS system in November-December 2018. This will enable DHS to monitor:

- The outcomes of children, youth, and families who were subjects of abuse and neglect reports and referred to a Prevention service instead of being accepted for child protective services.
- The impact of Prevention services for families at risk for child welfare involvement who were successfully diverted through a Prevention program.

Philadelphia

- Supervising for Excellence training for CWO Supervisors.
Implemented by Child Welfare Operations and DHS University, designed to strengthen practice in critical areas such as safety assessment, case planning and permanency practice, this joint training addresses issues raised in our previous state inspections. Topics are driven by the annual State licensing evaluation Plan of Correction, results from the CUA Scorecard and Closing the Loop meetings, and observation of practice needs by CWO leadership. An example of such topics is training in Court presentation skills. The training is evolving to topics that encourage Supervisors to take ownership of their role in the practice – supporting direct staff and the casework process over the life of the case. DHS University is moving in the direction to develop the ability to measure the impact of training. See the Collaborative Efforts section for recent and planned topics.
- Prevention Provider Training.
The need for Prevention providers to be trained on engaging high risk families to safely divert them from formal child welfare services was identified as an area needing improvement. During FY 2017-18, all Prevention case management and counseling contracted providers were trained in a new Charting the Course Training series developed specifically for Prevention providers. To date, over 200 provider staff have gone through the series.
 - In FY 2018-19, the training series will continue and we expect to revisit its contents and evaluate in FY 2019-20. Staffing will be needed to sustain this practice improvement and continue the provision of these trainings.
- Court Simulation Training.
DHS leadership identified a need to improve staff skills in preparation for, and presentation and testimony in, Court based on data from PMT around staff lack of knowledge about cases and failing to follow court orders. Expanding on current Court training in OJT, DHSU, in partnership with the City's Law Department, developed workshops on the laws, Court jargon, and Court processes, culminating in a mock hearing where staff are given real time feedback on the development of their skills. Court simulation training started with new hires and is evolving to include all CWO case management staff. This work is recommended by the IOC evaluation.
- Specialized training for DHSU and to support CWO staff and Provider in improved child welfare practice.
In last year's Needs Based Plan and Budget narrative submission, Philadelphia DHS requested and was approved for a training budget to assist with DHS' efforts to enhance professional development of child welfare staff in Philadelphia. The resources are being used to build additional expertise capacity which will deepen the knowledge base within DHSU and achieve greater success in improving outcomes for children. The funding is used exclusively for DHSU staff in five main areas:
 - Specialized training – DHSU staff has participated in training on organizational development, instructional design, emotional intelligence, and consultation skills. This increased capacity has assisted DHSU staff in being able to develop trainings for Prevention provider staff and in taking the lead

Philadelphia

on major cross-collaborative projects such as the work with the Philly Homes for Youth Coalition transition planning for older youth.

- Cross-jurisdictional learning and peer-to-peer consultation.
 - Professional memberships and professional conferences to remain current with best approaches to staff and organizational development and learning.
 - External expertise.
- Training interventions to support implementation of the Family First Prevention Services Act (FFPSA).
Philadelphia DHS leadership is assessing the potential impact and identifying strategies to effectively serve populations that are the focus of FFPSA and to comply with the new legislation. To this end, DHSU has included training interventions, within its three year strategic plan, specific to reducing congregate care, reducing placement disruptions and establishing and evaluating evidence-based programming (see DHSU Strategic Plan Goals, attached).
 - Forensic evaluations.
Philadelphia DHS contracts with psychologists to conduct forensic evaluations to ensure the safety, permanency and well-being of children under its care. The evaluation allows for CWO Staff and the Court to make informed decisions regarding the services needed for a child, parent, caregiver, or family.

Forensic evaluations are specialty evaluations and may include any of the following: parental capacity evaluations, bonding evaluations, family assessment evaluations, psycho-sexual evaluations, and cognitive assessments (adult or child). The evaluations conclude with recommendations that may impact the child's safety, permanency, and well-being if not implemented. Forensic evaluations are not reimbursable through Community Behavioral Health as they are not considered to meet the medical necessity standard.

Currently, the Department has only one reliable provider for forensic evaluations and two providers for psycho-educational evaluations. This significantly impacts the timeliness of the report and delays permanency for the child or youth. The Department of Human Services has initiated numerous efforts to secure qualified psychologists/providers to conduct the forensic evaluations, including in 2018. In FY2018-19, the Department significantly increased the rate paid to its existing forensic evaluations provider in order to increase their capacity (they were booked through October as of July 1) as a short-term solution. The Department also plans to issue another RFP, advertising higher rates this fiscal year to bring additional providers online. **DHS respectfully requests additional funding to support a reimbursement rate that is equitable to that of Community Behavioral Health.**

Philadelphia

Juvenile Justice Services:

Many reforms in Restorative Juvenile Justice are directly geared towards making data-driven decisions, employing evidence-based practices, and focusing on the development of youth competencies.

- Assessments and data-driven decisions
 - The HUB.
See response to question regarding how the county has adjusted staff ratios and/or resource allocations in response to a change in the population of children and youth needing out-of-home care.
 - Use of the Youth Level of Service assessment.
See response to question regarding changes in agency priorities or programs that affect numbers of children and youth receiving services, in care, or the rate of discharge from care.

Additionally, the YLS tool also informs the JPO's determination of the amount of supervision dosage and duration that a juvenile requires depending on the juvenile's level of risk. This prevents JPOs from overwhelming juveniles with too many services and supervision, as research has shown that providing too many services to a youth can be detrimental to their progression on supervision. Moving forward, the Philadelphia JPO and JJS would like to see the YLS assessment used, not only to inform program recommendations, but to drive provider's goals for youth in their programs, so that goals and services are based on the three individual criminogenic needs as determined by the YLS. Consistent with this, provider reports to the JPO would note progress on these specific goals, and recommendations for length of stay in a program would also be specifically related to progress on YLS-determined goals. The YLS assessment should also be used at discharge of a youth so that post-discharge services can be geared toward preventing recidivism and enhancing youth competencies. Finally, use of YLS to drive provider goals will enable Philadelphia to better monitor provider programs to ensure their quality.

- Use of the Pennsylvania Detention Risk Assessment Instrument.
See response to question regarding changes in agency priorities or programs that affect numbers of children and youth receiving services, in care, or the rate of discharge from care.
- Placement and Detention Alternatives
 - Graduated Response.
Aligned with reducing the utilization of secure detention and reducing the population in residential placements, Graduated Response is one of the components associated with the third stage of JJSES.

Phase one of the Graduated Response pilot rolled out April 2017. Eleven (11) JPOs participated in the pilot. Twenty-six (26) youth received 259 incentives, ranging from verbal praise, reduction in court-ordered conditions, and SEPTA tokens, in comparison to 32 interventions received. Families and youth responded positively when incentives were earned and they were given recognition when complying with court-ordered conditions. Phase two of the pilot

Philadelphia

will include training for District Attorneys and Juvenile Probation Officers to promote a shift in thinking about the necessity of more intensive interventions when assessment of risk supports a lower level of intervention.

Last year, Philadelphia DHS requested and received funding to expand the types of incentives offered in order to make additional use of this effective program. The first full year of implementation will be FY 2018-19, and Philadelphia DHS will expand the program in FY 2019-20 based on the expectation that use of incentives will continue to grow with continued shift to levels of intervention that are consistent with assessed risk. **It is expected that Philadelphia DHS will need to purchase tablets for Case Managers to track the use of the incentives and respectfully requests funding to do so.**

- Global Position System Monitoring.
See response to question regarding changes in agency priorities or programs that affect numbers of children and youth receiving services, in care, or the rate of discharge from care. **Philadelphia respectfully requests funding for additional GPS units to support alternatives to detention and placement.**
- Post-adjudication Evening Reporting Center.
See response to question regarding changes in agency priorities or programs that affect numbers of children and youth receiving services, in care, or the rate of discharge from care. The ERCs also support youth competency development.
- Short-term Respite Placement.
See responses in the chart analysis section for additional details.
- Day Center for Girls involved in the Juvenile Justice system.
In proposed partnership with the School District of Philadelphia (SDP) and Community Behavioral Health (CBH), DHS is seeking to develop a community-based program to serve as an alternative to detention and placement for girls involved in the Juvenile Justice system who are non-compliant with certain probation conditions. Aligned with continued implementation of Graduated Response, this program would give the Court a substitute for the current practice of detention and subsequent replacement of such youth, a costly and ineffective approach as girls often present with high needs but low risks for re-offending or threats to public safety. By means of blended funding with the SDP and CBH, we hope to offer a gender-responsive, community-based day program that will serve to accomplish similar treatment goals as those offered within residential programs, with the added advantage of strengthening critical family relationships that are often difficult to affect when these youth are in remote placements. The Day Center would include strong, credit-bearing educational components and solid behavioral health offerings for youth.

Several years ago, via one of our contracted vendors, Philadelphia successfully delivered a gender-responsive day program for delinquent, dependent, and truant adolescent girls. Given the deep partnerships we now have since forged with both the School District and CBH, coupled with the momentum underway in Philadelphia around reform work that results in youth being served closer to home, this seems an opportune time to pursue such a venture. **Philadelphia**

Philadelphia

respectfully requests funding to support the development and implementation of the Day Center for girls. The program is anticipated to serve 25 girls at a time with a program length of three months per girl. DHS anticipates drafting a Request For Proposals by December 2018, with a start-up around April or May 2019.

- Post-discharge support and recidivism reduction
 - Restitution Fund.
In Philadelphia, due to high poverty rates, there are significant numbers of youth who remain active on probation primarily because of unresolved restitution. DHS seeks to facilitate timely, practical resolution. **DHS respectfully requests funding for a dedicated restitution fund which would afford youth opportunities to resolve the outstanding restitution obligations which serve as a barrier to closing their probation cases.** These funds would allow youth to perform meaningful community service projects that translate to dollar amounts that come directly from the restitution fund to Court to resolve their debt.

Rather than seek out a vendor, existing DHS social work staff will be responsible for matching youth to appropriate and meaningful projects. We believe this practice would have the effect of strengthening our ties to community-based resources and perhaps even result in the ultimate formal hire by these agencies of youth who are referred.

- Post-Discharge Reporting Center.
To support high risk youth returning to the community from residential placements, Philadelphia JJS and JPO, with input from Family Court, intends to develop a Post-Discharge Reporting Center. While the recidivism data for this cohort is still being collected and analyzed, we hope that by developing such a Center we can strengthen the reintegration process for these youth, intervening early and with substantive linkages. This, we believe, will enhance their timely connection to programs and resources that support their remaining crime-free, reducing then the likelihood of cycling to detention and placement. The Center will be similar to the Evening Reporting Center in that it will be structured, there will be a GPS monitoring component, youth will be required to attend after school, and there will be an opportunity for youth to develop competencies. **Philadelphia DHS respectfully requests funding to support development and implementation of a Post-Discharge Reporting Center.**
- Youth Competencies
 - Student Transitional Center.
The Juvenile Probation School District Probation Liaison (SDLP) partners with the School District of Philadelphia (SDP) to assess a youth's educational needs and ensure that youth discharged from state and residential facilities successfully transition to community or alternative school settings. The Student Transitional Center (STC), at the SDP, is the link between residential placement and youth returning to their neighborhood school. The SDLP and STC staff work collaboratively to evaluate school transcripts, academic credits, and Individual Educational Plans, so youth are assigned to the most appropriate academic setting in their community.

Philadelphia

- Sports for Juvenile Justice (SJJ).
Court-involved youth are introduced to non-traditional sports as a way to foster social skills, team work, self-esteem, and discipline. The initiative is supported by the Philadelphia Family Court, Philadelphia Department of Human Services (DHS), and Northeast Treatment Centers (NET) who collaborated with six subcontracted sports providers. SJJ received media attention in 2017.

- ☐ Briefly describe identified resources needed toward implementation and sustainability.

Please see response above to the question requesting a description of the priority areas of improvement that are underway within the county, the Executive Summary, and responses to General Indicators Chart Analysis questions.

Counties whose re-entry outcomes fall above the national standard of 9.9% must respond to the following questions:

- ☐ Identify the characteristics of the children and youth re-entering the child welfare placement system.

The information presented is based on defining re-entry as those children and youth under 18 years of age who were reunified in the fiscal year and entered care within 12 months after reunification. In addition to children and youth who are discharged to reunification, the data include as reunifications children and youth who are discharged for another reason, such as runaway, and an in-home service begins within 30 days of discharge. Data also include children and youth who are placed from finalized adoptive homes and are discharged back to their adoptive homes.

Because this data element is prospective, the last full year of data is for children and youth who were discharged to reunification in FY 2015-16.

- Of all the children and youth reunified in FY 2015-16, 16% re-entered placement within one year of reunification. Data for re-entries for children who were reunified in the first three quarters of FY2016-17 indicate a slightly lower re-entry rate of 11.7%. Re-entries have trended downward from a 21% re-entry rate in FY 2012-13. There were 1,222 children and youth who were reunified with parents or caregivers in FY 2015-16 and 195 of these children and youth re-entered care within 12 months or less.
- Of those 195 children and youth, 94 were female and 100 were male, one was not identified; 53% (n=104) were 13 to 17 year olds. The second highest re-entry age category was zero to four year olds. This age group made up 21.5% (n=42) of the 195 re-entries.
- Of the 195 re-entries from reunification, for 59% of the children and youth, their last placement setting prior to reunification was kinship care (26%) and non-kin foster care (33%).
- Of the 195 re-entries, 71.7% (n=140) spent zero to 12 months in care prior to reunification.

Philadelphia

- ☐ What aftercare services and/or placement prevention services are currently available and utilized?

For cases that are managed by CUAs, an aftercare plan must be created prior to discharge and case closure. An aftercare plan may include any of the services previously mentioned under the Program Improvement Strategies that divert families from the formal system or from placement such as community-based prevention case management services and support permanency such as SWAN services.

- ☐ What strategies are being planned and/or being implemented to address the re-entry to children and youth in to care?

Strategies mentioned as Program Improvement Strategies that divert families from the formal system, keep children and youth in their communities, and support and stabilize permanency also address re-entry.

- ☐ What resources are needed to support the identified practice and service level needs?

See Program Improvement Strategies for resources needed to support these strategies.

Counties whose September 30, 2017 AFCARS report identified children under the age of 16 in care with a goal of Long-Term Foster Care (APPLA) must respond to the following questions:

- ☐ Identify the characteristics of the children and youth in the county for whom APPLA remains a permanency goal.

Philadelphia County identified no children under the age of 16 in care with a goal of APPLA in the September 30, 2017 AFCARS report.

- ☐ What is the rationale used to establish or maintain the goal of APPLA for these children? Provide specific action steps toward establishment of an appropriate permanency goal for each child to be established at the next permanency hearing.

Philadelphia County identified no children under the age of 16 in care with a goal of APPLA in the September 30, 2017 AFCARS report.

- ☐ Identify resources needed to achieve permanency for these children and youth.

Philadelphia County identified no children under the age of 16 in care with a goal of APPLA in the September 30, 2017 AFCARS report.

- ☐ Describe what practice changes the agency has planned and/or implemented towards eliminating the use of APPLA as a goal for children and youth under the age of 16.

Philadelphia County identified no children under the age of 16 in care with a goal of APPLA in the September 30, 2017 AFCARS report.

Philadelphia

- ☐ What resources are needed to support the identified practice and service level needs?

Philadelphia County identified no children under the age of 16 in care with a goal of APPLA in the September 30, 2017 AFCARS report.

Section 4: Administration

4-1a. Employee Benefit Detail

- ☐ Submit a detailed description of the county's employee benefit package for FY 2017-18. Include a description of each benefit included in the package and the methodology for calculating benefit costs.

The Employee Benefit Detail begins on the next page.

Philadelphia

OFFICE OF THE DIRECTOR OF FINANCE - ACCOUNTING BUREAU

Fringe Benefits Memo - FY 2018

To: All Departments, Boards, Agencies and Commissions
From: Josefine Arevalo, Director of Accounting {signed}
Subject: Fringe Benefit Costs - Fiscal Year Ending June 30, 2018
Date: March 2, 2018

Non-Uniformed Employees

The following fringe benefit costs for non-uniformed employees are effective as of July 1, 2017, and should be added to all Fiscal Year 2018 costs which are chargeable to other city agencies, other governmental agencies and outside organizations:

Municipal Pensions (Percentage of Employee's Pension Wages)				
<u>Plan</u>	<u>Employee Classification</u>	<u>Normal Cost</u>	<u>Unfunded Liability</u>	<u>Total</u>
L	Elected Officials elected on or after 1/8/1987	4.485%	59.636%	64.121%
M	Exempt & Non-Rep employees and D.C. 47 Local 2186 members hired on or after 1/8/1987 and before 10/2/1992	4.060%	7.979%	12.039%
Y	D.C. 47 Local 810 members hired on or after 1/8/1987; and all non-uniformed employees after 10/1/1992	4.060%	7.979%	12.039%
J	All D.C. 33 members & D.C. 47 Local 2187 members hired before 10/2/1992; and all other non-uniformed employees hired, or before 1/8/1987	8.036%	489.534%	497.570%
10	Sheriff's Office or Register of Wills* Employee hired After 1/1/2012; D.C. 47 members Hired after 3/5/2014; Civil service non-rep employees Hired after 5/14/2014; DC 33 members other than guards hired after 9/2014; Exempt, Elected Officials and DC 33 Guards* hired after 11/11/2014	1.434%	0.047%	1.481%

*Plan is optional for all employees except Register of Wills and DC 33 Guards.

Employee Disability

	<u>Cost Per Employee Per Month</u>
Worker's Compensation	\$ 125.28
Regulation 32 Disability	\$ 4.73

For more information or copies of this memo, please contact Girgis Shehata 686-6196

Philadelphia

OFFICE OF THE DIRECTOR OF FINANCE - ACCOUNTING BUREAU

Fringe Benefits Memo - FY 2018

Social Security / Medicare

	<u>Calendar Year Earnings Covered</u>	<u>Effective Period</u>	<u>Percentage</u>
Social Security	Gross Earnings not to exceed \$127,200	07/01/17 - 12/31/17	6.20%
	Gross Earnings not to exceed \$128,400	01/01/18 - 06/30/18	6.20%
Medicare	Unlimited Gross Earnings	07/01/17 - 12/31/17	1.45%
	Gross Earnings (< \$200,000 annually)	01/01/18 - 06/30/18	1.45%

Group Life Insurance

All full time employees except those hired as emergency, seasonal or temporary help.

<u>Employee Classification</u>	<u>Coverage</u>	<u>Cost per Employee Per Month</u>
D.C. 33 (except Local 159 B)	\$25,000	\$ 3.92
D.C. 33 Correctional Officer Classes of Local 159B	25,000	3.92
D.C. 47 (including Local 810 - Courts)	20,000	3.13
<u>Exempt & Non-Rep employees & Common Pleas Court -</u>		
Municipal (excluding Local 810, see above)	20,000	3.13
School Crossing Guards	15,000	2.35

Employee Health Plans

These plans are available to all non-uniformed employees except emergency, seasonal, temporary and part time employees.

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>		
D.C. 33 (except Crossing Guards)			\$ 1,194.00
D.C. 33 School Crossing Guards ¹			
Head of Household			\$ 1,194.00
Single			\$ 597.00
D.C. 47(except Crossing Guards) New line vender 46			\$ 1,100.00
Exempt & Non-Rep Personnel in City Administered Plans:	<u>Single</u>	<u>Single + one</u>	<u>Family</u>
Keystone HMO ²	\$ 520.08	\$ 964.77	\$1,514.05
Personal Choice PPO ²	484.08	898.34	1,409.60
Dental PPO ³	30.86	57.09	89.49
Dental HMO ³	18.06	35.67	64.86
Optical ³	2.77	5.01	7.07
Prescription Plan ³	184.15	340.69	534.05

¹ Health coverage is not provided for School Crossing Guards eligible for any other health plan from any employer.

² Based on self-insured conventional rates for calendar year 2018

³ Based on fully insured premium rates for calendar year 2018

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Philadelphia

OFFICE OF THE DIRECTOR OF FINANCE - ACCOUNTING BUREAU

Fringe Benefits Memo - FY 2018

Unemployment Compensation

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>
All non-uniformed employees	\$8.38

Group Legal Services

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>
D.C. 33 (except Crossing Guards & Local 1971) & D.C. 47	\$ 15.00
D.C. 33 Local 1971	15.00
School Crossing Guards	3.50

Uniformed Employees

The following fringe benefit costs for all uniformed employees are effective as of July 1, 2017 and should be added to all Fiscal Year 2018 costs, which are chargeable to other city agencies, other governmental agencies and outside organizations:

**Municipal Pensions
(Percentage of Employee's Pension Wages)**

<u>Plan</u>	<u>Employee Classification</u>	<u>Normal Cost</u>	<u>Unfunded Liability</u>	<u>Total</u>
<u>Police Plans:</u>				
D	Police hired before 7/1/1988	16.155%	973.391%	989.546%
B	Police hired on or after 7/1/1988	7.807%	8.960%	16.767%
<u>Fire Plans:</u>				
X	Firefighters hired before 7/1/1988	16.185%	1,344.514%	
			1,360.699%	
A	Firefighters hired after 7/1/1988	8.194%	6.913%	
			15.107%	

Employee Disability

	<u>Cost Per Employee Per Month</u>
Worker's Compensation	\$ 325.12
Regulation 32 Disability	\$ 12.28

Social Security / Medicare

Uniformed employees do not contribute to the Social Security program. However, those uniformed employees hired after April 1, 1986 must pay the Medicare portion of the Social Security Tax at the following rate.

<u>Calendar Year Earnings Covered</u>	<u>Percentage</u>
Unlimited Gross Earnings	07/01/17 - 12/31/17 1.45%
Gross Earnings (less than \$200,000 annually)	01/01/18 - 06/30/18 1.45%

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Philadelphia

OFFICE OF THE DIRECTOR OF FINANCE - ACCOUNTING BUREAU
Fringe Benefits Memo - FY 2018

Group Life Insurance

All full time employees except those hired as emergency, seasonal or temporary help.

<u>Employee Classification</u>	<u>Coverage</u>	<u>Cost per Employee Per Month</u>
Police Uniformed Employees	\$35,000	\$ 9.21
Fire Uniformed Employees ²	25,000	18.25
Deputy Sheriffs	25,000	2.57

² Includes a fee of \$5 per employee per month for administration of the Firefighters' Trust Fund.

Employee Health Plans

Uniformed personnel of the Police Department, Fire Department, Office of the District Attorney Investigatory Employees, and Regulation 32 (formerly Uniformed) Employees and Uniformed Deputy Sheriff classes are eligible for coverage in the uniformed health plans.

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>
Uniformed Police Personnel, Office of the District Attorney Investigatory Employees & Regulation 32 (formerly uniformed) Employees	\$ 1,290.00
Uniformed Fire Personnel	1,619.64
Uniformed Deputy Sheriffs (Including D.O.P)	1,290.00

Unemployment Compensation

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>
All uniformed employees	\$ 8.38

Group Legal Services

<u>Employee Classification</u>	<u>Cost Per Employee Per Month</u>
Police Uniformed Employees	\$31.00
Fire Uniformed Employees	26.00
Deputy Sheriffs	16.00

For more information or copies of this memo, please contact Girgis Shehata 686-6196

4-1b. Organizational Changes

- ☐ Note any changes to the county's organizational chart.

Field Screening Units

In August 2017, DHS established Field Screening Units within the Hotline to conduct secondary screenings of three- and seven- day response General Protective Services reports with the goal of safely diverting families from entering the formal system.

Central Referral Unit Additional Shift

Some of our internal strategies to augment the reduction of children staying in the Child Care reception area include the following: adding a full time Central Referral Unit Administrator, Supervisor, six Social Work Services Managers (SWSMs), and clerical staff for the 4PM- 12 AM shift daily, Monday-Fridays. To increase placement efforts during the daytime shift and minimizing transitioning emergencies remaining overnight, an additional unit was transferred from Ongoing Service Region to CRU including a Supervisor and five SWSMs. The Essential Personnel policy has also been added to the responsibility of the Central Referral Unit across day and evening shifts to assist during inclement weather and/or city emergency closure days. During these periods, a staff of at least one Social Work Supervisor and three staff must be present Monday through Friday during first and second shift.

Director of Domestic Violence Interventions

DHS recently hired a Director of Domestic Violence (DV) Interventions to provide individual consultations and to participate in DHS investigations and standing CUA weekly teamings as the City of Philadelphia Director of Domestic Violence Strategies re-focuses on the role of ensuring that city provided services, citywide, are DV-informed.

Prevention Referral Unit

The Prevention Referral Unit (PRU) was newly created to oversee the review, acceptance, and assignment of incoming prevention service referrals to the appropriate service and agency. Led by a team of six including one Supervisor and five SWSMs, with extensive referral and linkage experience, this unit ensures that referrals are processed quickly and accurately, and problem solves to ensure that there are no lags in service connection or delivery.

Another major component of this team will be data tracking of all referrals received, provider capacity, and utilization. The PRU will maintain weekly provider capacity reports, admission/discharge categories and length of services.

Truancy Unit Changes – Child Welfare Operations and Community Based Prevention Services

There is no longer a Truancy specific section in CWO. Our Multi-Disciplinary Team (MDT) section now handles Truancy investigations. We moved one Human Services Program Administrator, five Social Work Supervisors, and 25 SWSMs from the Truancy Section to MDT so that truancy investigations could be spread across a larger body of staff.

CBPS' Education Support Center now has one unit (Truancy Intervention & Prevention-TIPS) consisting of one Social Work Supervisor and eight Truancy Education Liaisons

Philadelphia

dedicated to providing practice technical support, managing Regional Truancy Court orders, filing truancy dependent petitions, and general oversight of nine subcontracted Truancy Case Management Providers.

4-1c. Complement

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

The DHS Human Resources (HR) Office meets monthly with each DHS Division to discuss and provide updates on all staffing matters including promotions and filling vacancies. Additionally, the HR Office meets with each Division to determine classification and hiring needs for each half of the fiscal year and works with the City of Philadelphia's Office of Human Resources to ensure that eligible lists with sufficient candidates are available.

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

In FY 2017-18, DHS' overall turnover rate remained at 8%, which is the same as with the prior year. For the Social Work Services Manager, we saw a 9.2% turnover rate. To prevent this number from climbing, DHS is implementing several initiatives.

Child Welfare Operations (CWO)

DHSU and CWO are implementing a peer to peer mentoring program for new hires (social work staff). We are using the EEP graduates (existing employees who have earned their Master's degree) to serve as mentors for OJT new hires. There is a scheduled orientation/training to occur in July and the mentor and mentee will be matched in August. We are starting with the most recent OJT cohort that was assigned to investigations.

Additionally, we are currently doing a data analysis to determine which Supervisors may benefit from training and technical assistance in helping them supervise new hires. We are currently looking for trends among Supervisors that will demonstrate retention in individual units. This will help target our resources appropriately.

Finally, we are collaborating with the Department of Behavioral Health (DBH) in our efforts to expand the Philadelphia CWO Leadership Academy (sponsored by DHSU) to include all levels of staff. Currently we target middle management, DHS Human Services Program Administrators and CUA Case Manager Directors. We will also add a staff mentoring program under the academy that will focus on existing staff.

Juvenile Justice Services (JJS)

JJS has a similar practice of matching our Youth Detention Counselors (YDC) trainees with a YDCII for them to shadow during the OJT process. We also have supervisors give all OJT staff a daily evaluation (used to coach, mentor, support, allow them to ask questions, etc.) and they meet with the managers on a bi-weekly basis as an OJT group to check on their adjustment and progress.

4-1d. Audit Compliance

- ☐ Describe any changes in county practice regarding contract monitoring over the last two years. For example, identify any changes in identification of sub-recipients,

Philadelphia

implementation of risk-assessments, identification of the sub-award to sub-recipients; development of internal controls, implementation/increased level of review activities, documentation of activities, use of corrective action plans, etc.

Philadelphia DHS employs a number of contract monitoring procedures, depending on the type, size, and risk profile of private service providers.

Over the past two years, Philadelphia has fully implemented its Fiscal Monitoring Unit, which conducts full cost audits of the County's contracted case management providers. These audits ensure that all federal, state, and local funds provided to these agencies are used in accordance with relevant laws and regulations.

In addition, Philadelphia has employed a risk assessment model to identify higher-risk contractors' invoices for closer monitoring. If selected, contractors are required to produce supporting documentation for an invoice, including the general ledger, receipts, invoices, payroll registry, and other related documents. In the event that significant deficiencies are surfaced through this process, Philadelphia can prescribe remedies as described in the General Provisions of the County's contract with that provider. This initiative adds an additional element of during-the-award monitoring to complement existing pre- and post-monitoring procedures.

- ☐ Describe the monitoring activity performed (including who completes it, how often, sample size, etc.) to assure that private service providers delivering prevention, reunification and after-care services under contract with the agency adhere to the Child Protective Services Law requirements regarding certifications.

Philadelphia DHS includes provisions in its executed contracts with providers regarding compliance with the CPSL background check requirements, but engages in a vigorous monitoring of CPSL adherence of all of its contracted providers, including its in-home, preventive, reunification, and after-care services providers.

Philadelphia DHS monitors its private service providers in accordance with the City of Philadelphia Department of Human Services Streamlined Service Standards dated July 1, 2012, Administrative Requirements, Article IV, Section 4.1 (a)-(j), and the City of Philadelphia Department of Human Services Provider Relations and Evaluation of Programs Evaluation Process. Philadelphia DHS follows the evaluation process, applying the Service Standards and an Internal Tool which tracks the standards. Any missing certifications are noted in a written report that outlines all deficiencies, and a corrective action plan is then developed with regard to them after an exit interview.

- ☐ Highlight any overlapping findings/adjustments that exist in the most recent single audit report and Auditor General (AG) report.

Philadelphia's most recent AG report covered Fiscal Years 2010-11 through 2013-14, while the most recent single audit covered Fiscal Year 2015-16. The years they covered do not overlap, and due to the amount of time elapsed since those review periods, the findings contained in both have since been addressed.

Overlap between the two reports concerned subrecipient monitoring. Both audits surfaced issues with notification and monitoring of subrecipients.

Philadelphia

Both audits also identified questioned costs on the county's Act 148 invoices across the five non-continuous fiscal years covered by the audits. The average questioned amount was less than 1% of the total expenditures in each of those years. Since the AG report was finalized, Philadelphia DHS has corrected its Act 148 invoices for the years in question.

- ☐ Provide a corrective action plan to address findings in the most recent single audit report, including what levels and types of controls will be strengthened, and/or implemented to prevent repeat adjustments and findings in the current year.

Since the periods under review, Philadelphia DHS now informs subrecipients of relevant Catalog of Federal Domestic Assistance (CFDA) numbers and names, and has further expanded its risk assessment procedures as described above.

- ☐ Provide a corrective action plan to address findings in the most recent AG report, including what levels and types of controls will be strengthened, and/or implemented to prevent repeat adjustments and findings in the current year.

The most recent AG report contained three findings (two less than in the previous report), all of which have been addressed. The corrective action taken by Philadelphia is summarized below.

In FY 2015-16, Philadelphia DHS discontinued the practice of including encumbrances and estimates in its CY-370 Expenditure Report. A formal written policy formalizing this practice has been instituted.

To address the lack of some financial documentation needed to substantiate invoiced costs, Philadelphia DHS corrected a system flaw in its case management system in December 2014 that was creating inaccuracies in the County's Fee-for-Service Schedule. The system was corrected to reflect purchased service transactions based upon service date instead of transaction date.

Corrective action related to the finding regarding subrecipient monitoring is addressed above.

4-3. Accurint

- ☐ Please identify the name and email addresses of the Accurint Administrator in your county and each Accurint User.

First Name	Last Name	Email address
William	Gordon	William.J.Gordon@phila.gov

Current Accurint Users

Shahodah	Bohannon	Shahodah.T.Bohannon@phila.gov	Intake
Stephanie	Davis	Stephanie.A.Davis@phila.gov	Intake
Juanita	Dennis	Juanita.Dennis@phila.gov	Hotline
Zachary	Harris	Zachary.Harris@phila.gov	Hotline
Alice	Herbert	Alice.Herbert@phila.gov	Hotline

Philadelphia

Lelia	Johnson	Lelia.Johnson@phila.gov	Hotline
Cara	Mallon	Cara.A.Mallon@phila.gov	MDT
Renee	Morgan	Renee.G.Morgan@phila.gov	Adoption
Ja'Net	Roberson	JaNet.Roberson@phila.gov	MDT
Marlo	Thomas	Marlo.T.Thomas@phila.gov	Hotline
Annie	Thomason	Annie.P.Thomason@phila.gov	Intake
Paula	Ward	Paula.M.Ward@phila.gov	Intake
Colleen	Mellon-Hartman	Collen.Mellon@phila.gov	Hotline
Christian	Ohaegbulam	Christian.C.Ohaegbulam@phila.gov	Prevention

Users to Be Removed

Zachary	Harris	Zachary.Harris@phila.gov	Hotline
Alice	Herbert	Alice.Herbert@phila.gov	Hotline
Cara	Mallon	Cara.A.Mallon@phila.gov	MDT
Juanita	Dennis	Juanita.Dennis@phila.gov	Hotline
Marlo	Thomas	Marlo.T.Thomas@phila.gov	Hotline
Annie	Thomason	Annie.P.Thomason@phila.gov	Intake
Christian	Ohaegbulam	Christian.C.Ohaegbulam@phila.gov	Prevention

Users to Be Added

Amina	Thompson-Wright	Amina.thompson-wright@phila.gov	Hotline
Pearl	Knox	Pearl.B.Knox@phila.gov	Intake
Angela	Simes	Angela.M.Simes@phila.gov	Intake
Terez	Hunter	Terez.Hunter@phila.gov	Intake
Tamara	Washington-Askew	Tamara.L.Washington-Askew@phila.gov	MDT
Vicente	Duvivier	Vicente.Duvivier@phila.gov	OSR
Walter	Lucidi	Walter.lucidi@phila.gov	DHS-U
Elaine	Tennesen	Elaine.M.Tennesen@phila.gov	DHS-U
Yolanda	Shepherd	Yolanda.Shepherd@phila.gov	DHS-U
Marisol	Bartlett	Marisol.Bartlett@phila.gov	DHS-U
Terri	McCargo	Terri.Moore@phila.gov	Prevention
Francia	Layne	Francia.O.Layne@phila.gov	CWO

- ☐ Please explain any underutilization of Accurant services in the prior year, i.e. explain why it was not used in locating kin, tracking NYTD youth, or other search efforts.

In June 2018, we analyzed the number of searches that were completed by the Accurant users and removed any user who did not have any activity or who was completing a limited number of searches. The Department strategically assigned new users in an attempt to take full advantage of the search engine. The users of Accurant will be receiving training by the end of July 2018. Please see charts above.

Philadelphia

- ☐ Will Accurint be used in any program improvement strategies during this fiscal year? If yes, explain how.

Philadelphia DHS is requesting to expand its number of Accurint licenses by 10 users to bring our total to 30 users in order to support the need to locate kin as placement, permanency, and visitation resources, as well as support practice improvement and the needs of older youth.

Child Welfare Operations (CWO) includes approximately 1,370 DHS and CUA staff who are responsible for investigating reports of abuse and neglect and providing case management services for children and youth who are in need of child protective services. As of June 30, 2018, approximately 47.1% of our placement population is with kin; however, the Department's goal is to continue to increase our utilization of kin. This number of licenses is not sufficient to respond to the request for searches for the over 1,370 CWO staff. At this time, we have at least one user on each floor who is responsible for doing searches requested by any staff on those floors. This limits the extent of the searches that are completed given that these Supervisors and Social Worker Services Managers must also handle investigations assigned to their units.

Philadelphia DHS expects these requests to increase as CWO intends to issue a policy requiring the use of Accurint for all youth in congregate care for which there isn't a visiting or permanency resource and for children and youth in foster care placements for which kin has not be identified.

Additionally, an increased number of user licenses will also afford us the opportunity to provide licenses to DHS University Staff who provide technical assistance to the CUAs, and to our Prevention Division who are responsible for our youth at the Achieving Independence Center (AIC) and youth who have been identified as part as NYTD (National Youth in Transition Database).

Philadelphia

ATTACHMENT A

EVALUATION OF THE IMPROVING OUTCOMES for CHILDREN TRANSFORMATION



Philadelphia's child welfare system is poised to provide more accessible family-centered services under Improving Outcomes for Children (IOC), according to a new evaluation that describes the program as a critical cultural shift for the City's Department of Human Services (DHS). Evaluators indicated the City and its partners must continue to build on current momentum to recruit, develop, and retain quality staff and ensure families are safe and thriving.

IOC BACKGROUND

IOC started its change of Philadelphia's child welfare system four years ago. The approach is community-based, with more clearly defined roles for DHS oversight and for agencies working directly with children and families. The goal is to keep more children and youth safe in their own homes and communities; reunite more children with their families or if needed, find permanent homes for them elsewhere; reduce the use of group homes; and help families work better together.

IOC changed how cases are managed, from a dual system involving DHS and contractors where it was often unclear as to who was responsible for what actions to a single-case approach using neighborhood-based Community Umbrella Agencies (CUAs) that became the primary contact for families in the system. This allowed DHS to concentrate on critical functions including intake and investigation, support for the CUAs, data and performance management, and prevention services.

IOC EVALUATION

At the start of his administration, Mayor Kenney asked the Office of the Deputy Managing Director for Health & Human Services to look at how IOC was doing. The Child Welfare Policy and Practice Group, a nonprofit technical assistance organization with over 30 years of experience in child welfare, led the evaluation beginning in September 2016.

The evaluators interviewed more than 200 people and spent a day in each CUA and one DHS intake unit to observe daily work experiences. They reviewed data, policies, case documents, and external reports. They shared a draft report and received feedback from over 250 individuals.

The IOC evaluation identified both strengths and challenges in the current system. Among the strengths were a high rate of placing children with kin (46% here compared to 30% nationally), caseload reduction, and improving performance measurement and management. Challenges included a high rate of children in out-of-home care (16.4 children per 1,000 in Philadelphia; 5.5 per 1,000 nationally) and the lack of an integrated data system.

PRE-IOC

Multiple case managers;
multiple plans

Center City
location



POST-IOC

Staff support
the case
manager

One case
manager;
one plan

Community-based



The evaluation made recommendations in three categories:
Immediate Practice, Intermediate, and Ongoing System strategies.

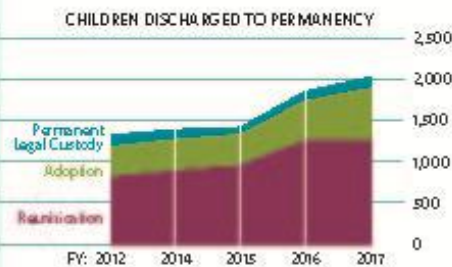
IMMEDIATE PRACTICE STRATEGIES

- 1 **Strengthening the Practice Model**
There should be a single, consistent resource throughout IOC that defines practice, principles and outcomes. This should guide decision-making, service delivery, and staff development at all levels.
- 2 **Strengthening the Family Team Conferencing Process**
Meetings should be scheduled so that case managers, service providers and others can work with families to craft the best plan for their children. The family team meeting process needs more youth and family participation. Families need better preparation for the process and assistance during the session. CUAs, instead of DHS, should schedule and coordinate meetings.
- 3 **Strengthening the Role of Parents**
IOC practice should put greater emphasis on engaging and supporting parents and caregivers, who may have endured trauma, struggle with social and environmental challenges, or had experiences creating distrust of social service organizations.
- 4 **Reducing Rate of Children in Out-of-Home Care**
Among large U.S. urban areas, Philadelphia has the highest rate of such placements. A change in early assessment and planning approaches might result in more children staying safely at home. The evaluation supports new DHS policy requiring management-level authorization for removal. The system also needs: timely team decision-making; better training and guidance on working with families; efficient sharing of case information; strengthened connections to behavioral health; and more staff coaching from experienced practitioners.

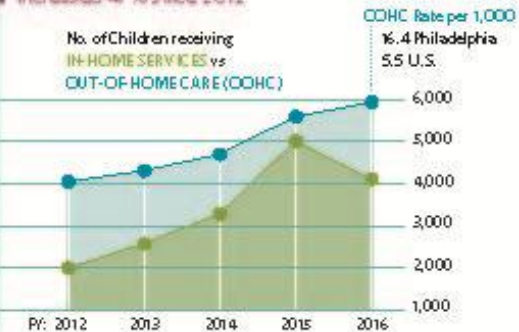
5 Decreasing the Number of Youth Who Age Out of Foster Care Without Permanent Families

When a child has been placed in out-of-home care, the goal is first to return the child to their family of origin, or when needed, to find a relative, adult or family to make a lifelong commitment to the child. This is a challenge everywhere, including locally, particularly for adolescents placed in care. More aggressive efforts are required to understand the youth's needs, how to meet those needs and connect them to family. Rapid Permanency Reviews, now in pilot in Philadelphia, should be expanded as should other strategies such as intensive efforts to find extended family and kin, support for youth behavioral health to reduce barriers to permanency, and greater advocacy for adoption or guardianship.

Youth finding permanent families increased 53% since 2013, going from 81% to 84% of total exits from care.



Out of Home Care rates increased 47% since 2012





ONGOING SYSTEM RECOMMENDATIONS

10 **Interfacing with the Courts and Legal System**

There is a high level of court involvement in Philadelphia child welfare practice, but families and caseworkers often lack information they need to navigate the legal system. CUA personnel need better preparation, parents should be better informed, parent representation should be held more accountable, and there should be timely sharing of information across all parties to support the judicial decision-making process.

11 **Child Welfare Data System**

Child welfare systems cannot operate effectively if they cannot readily access and analyze case data. DHS needs continued financial resources and information technology support to develop and maintain an integrated case management system; a data center that responds to all users' needs; a new data warehouse; and new internal and external DHS websites. The lack of such a system is a critical handicap to DHS's ongoing system improvement efforts.

12 **More Effective Approaches for Families with "Non-Safety" Needs**

IOC serves many families with no identified child safety needs. Those families might benefit from less stigmatizing and intrusive approaches. This would also reduce the workload and allow staff to focus more on child maltreatment. DHS should consider funding services more tailored to non-safety needs that can be made available to families outside of the formal child welfare system.

Among the families with "non-safety" needs, truancy is often an issue. State law makes DHS largely responsible for truancy. The Philadelphia community should undertake serious study of the systemic contributors to truancy. The school system, the court, behavioral health, DHS and state elected officials all share responsibility for addressing chronic truancy and behavioral issues.

13 **Ensuring a Reasonable Workload for the Case Managing Workforce**

Caseloads across the CUAs have been dropping, but DHS must watch carefully to ensure that the new standard of 10 families per case manager is manageable. DHS and the CUAs have formed a work group to look at how to reduce case managers' duties. DHS, the State and CUA leaders should re-examine current policy, look at other urban systems, and conduct a small study of court-related time and out of county travel time for case managers to reduce time spent away from directly working with families.

CONCLUSION

As with any large-scale transformation, Improving Outcomes for Children's massive reorganization of the child welfare system in Philadelphia resulted in unanticipated consequences that have required ongoing review and revision. DHS, in partnership with the CUAs, has made considerable progress, however. There is widespread endorsement of IOC's principles of community-based services, and work continues to realize IOC's goal of providing more accessible, family-centered services. There are many strengths in IOC, along with some notable challenges. Addressing these challenges will require systemwide support and meaningful oversight. Adopting the recommendations should strengthen the system and improve outcomes for children and families in Philadelphia.

Juvenile Probation Services Grant JJSES Implementation Plan FY 2018-2019

Motivational Interviewing:

Activity: Implement Motivational Interviewing in the YLS unit

Objectives: To enhance quality of information collected during the YLS interview

Action Plan:

- Schedule MI training for YLS unit supervisor and JPOs.
- Identify MI coach
- Develop MI practices for the YLS unit

Target Date: January 2019

PaDRAI

Activity 1: Develop PaDRAI policy

Objectives: To create a PaDRAI policy with clearly defined criteria for detention

Action Plan:

- PaDRAI coordinator in conjunction with JJSC director, assistant supervisor will create policy utilizing recommended best practices.
- Chief and Deputy Chief to review and approve policy
- Review policy with stakeholders
- Implement policy

Target Date: December 2018

Activity 2: Quality Assurance for PaDRAI

Objectives: To monitor demographics and overrides of detention risk assessment

Action Plan:

- JDAI coordinator will review PaDRAI override approval report
- JDAI coordinator will review report quarterly to analyze data

Target Date: Report to be analyzed July 2018, October 2018, January 2019, and April 2019

Youth Level of Service

Activity: To develop booster training that focuses on inter-rater reliability

Objective: To gauge staff's strengths and area of need with YLS assessments

Action Plan:

- Biannual booster cases sent to the supervisory staff and JPOs
- YLS master trainers score boosters
- Create excel sheet with staff results
- Use results to train on areas of need

Target Date: June 30, 2019: Boosters: October 2018 and April 2019

Case Planning

Activity 1: Analyze data from Case Plan Pilot

Objective: To use information from the case plan pilot to make informed decisions on next steps

Action Steps:

- Review data from case plan pilot
- Meet with JPOs in the pilot to obtain feedback
- Use information to make informed decisions on expanding usage of case plan

Target Date: September 2018

Activity 2: Expand usage of Case Plan

Objective: To move toward a department wide case plan

Action Steps:

- Identify additional staff members to utilize case plan
- Provide adolescent development training and case plan training to identified staff
- Monitor JPOs use of the case plan and smart goal

Target Date: June 2019

Stage III: Behavioral Change

Skill Building and Tools

Activity 1: EBP briefcases

Objective: To conduct EBP brief case modules with line staff

Action Plan:

- Deputy Directors to identify an EBP briefcase module and complete with supervisors.
- Supervisors to complete some module with their line staff
- Deputy Directors to observe EPB briefcases conducted by supervisors.
- Complete 4 modules during FY 18-19

Target Date: Modules to be completed: September 2018, December 2018, March 2019, and June 2019

Activity 2: BITs Training

Objective: To incorporate BITS with juveniles on supervision as an intervention

Action Plan:

- BITs trainers to identify number of supervisors and staff that require training
- Conduct training for supervisors on use of BITs
- Schedule and conduct small group trainings on the use of BITs

Target Date: April 2019

Graduated Response

Activity 1: Analyze data from Graduated Response Phase II pilot

Objective: To determine practices that were successful and identify any areas of need

Action Plan:

- Graduated Response workgroup to conduct focus group with JPOs that participated in Phase II pilot
- GR workgroup to review cost of monetary incentives that were utilized in Phase II
- GR workgroup to review status of 100 cases selected for Phase II

Target Date: September 2018

Activity 2: Prepare Probation Department for Graduated Response System

Objective: To develop a solid foundation for a graduated response system

Action Steps:

- Using data from graduated response pilot, GR workgroup to develop forms and policies for a GR system.
- GR workgroup to identify and schedule trainings for staff
- GR workgroup to meet with Judges and stakeholders to obtain buy in for a GR response system

Target Date: March 2019

Stage IV: Refinement

Policy Alignment

Activity: To review and update Probation Policy and Procedures

Objectives: To ensure all policies reflect the evidenced based practices

Action Plan:

- Deputy Directors to review at least 4 policies
- Provide recommendations to Chief and Deputy Chief on updates to policies
- Conduct information sessions with supervisors and line staff to review changes
- Upload all updated policies in the online Juvenile Probation Operations Manual

Target Date: April 2019

Building Blocks

Family Involvement

Activity: Family Engagement in case reviews

Objective: To obtain feedback from youth and families on services provided by Juvenile Probation Department

Action Plan:

- Supervisors will contact 3 parents from each JPOs caseload each month
- Using Family Engagement Form, supervisors will obtain feedback from parents/guardians regarding probation supervision and service providers.
- Supervisors to provide Deputy Directors with completed Family Engagement Forms on the 15th of each month.

Target Date: July 2018

Quality Improvement

Activity: New Case Review Policy

Objective: To improve quality of case management and ensure EBP are in place

Action Plan:

- Assistant supervisors will complete 3 cases reviews on each JPO per month utilizing the case review form.
- Assistant supervisors will meet with JPO each month to review strengths and areas of need
- Provide outcome of case review to Deputy Directors by the 15th of each month

Target Date: July 2018

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Community-Based Prevention Programs – 2018/19

Our Community-Based Prevention programs support children, youth, and families who may be at risk of abuse, neglect or delinquency.

We also provide additional supports to families transitioning out of DHS placement or protective services.

Prevention services can be accessed by calling the Information Referral and Support Services (IRSS) staff at (215) 683-4000

Anchor Programs:

- **Family Empowerment Services (FES)-The Family Empowerment Services (FES) program** is designed to divert at-risk families from the formal child welfare and juvenile justice systems. By enhancing caregivers' protective capacities and improving a family's ability to provide for their child's safety and well-being in a minimally intrusive, time-limited manner, FES seeks to eliminate or minimize a family's unnecessary and inappropriate involvement in the more intensive, state-regulated systems.
- **CAPTA- Case Management for Pregnant Women with Substance Abuse –** Intensive case management services to families affected by substance use disorders, in accordance with the federal mandate, CAPTA (Child Abuse Prevention and Treatment Act). The program targets families and their infants that have been reported to DHS as having been affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure or fetal alcohol spectrum disorder at the time of the baby's birth
- **Truancy Prevention & Intervention –** Intensive Case Management for families to support their children/youth in improving school attendance and avoiding delinquent charges and consequently involvement in more intensive, state regulated systems.
- **Rapid Service Response:** This service is designed to offer services to families reported to the Department for child abuse or neglect where the initial risk to the child is deemed moderate to high but where some services are needed to assure that families can effectively utilize their own strengths and community resources to maintain the safety of their children without longer term intervention by DHS. The Program is designed to prevent the need for out of home placement of children by increasing parents and caregivers' ability to provide safe, nurturing home environments that stimulates the child's growth and development

City of Philadelphia DHS

One Parkway Building
1515 Arch Street
Philadelphia, PA 19102

General Information

215.683.4DHS
(4347)

The Child Abuse Hotline

215.683.6100

Commissioner's Action Response Office (C.A.R.O.)

215.683.6000

- **Housing Services** – Housing support and counseling to families who are at an imminent risk of placement due to lack of adequate housing, in the process of reunifying or youth aging out of care.
- **Domestic Violence & Sexual Assault Services** - Services to families and youth who have been involved in or exposed to domestic violence and are involved with DHS or at risk of DHS involvement.
- **Achieving Independence Center (AIC)** – Independent living services to older youth preparing to transition from foster care to self-sufficiency.

Other Support Programs:

- **Community & Family Support Services** –Targeted services including counseling interventions, crisis nurseries, cribs, and programs to meet concrete needs to strengthen the family unit.
- **Parenting Education** – Support and education groups for parents and caregivers.
- **Positive Youth Development (PYD)** – Cultural, athletic, life skills, community services, and other socialization and recreational programs for children and youth.
- **Support Community Outreach Programs (SCOP)** –Educational, cultural and athletic services for youth provided by grass roots community organizations.
- **Achieving Reunification Center (ARC)** – Housing, employment, parenting, and mental health support to caregivers who have children in placement and are working towards reunification.
- **Education Support Center (ESC)** – Services to improve and maintain the educational stability of children in DHS care.
- **Child Care Eligibility Unit** –For help securing high quality childcare services and Pre-K programs for DHS-involved families.
- **Out-of-School Time (OST)** – After-school and summer activities for youth ages 5-21.

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NEEDS BASED BUDGET FY19-20
Division of Performance Management & Technology

PMT Program Improvement Strategies:

The Division of Performance Management & Technology (PMT) brings together core infrastructure functions of the department: Monitoring and Evaluation of Community Umbrella Agencies (CUAs), service providers (child welfare, juvenile justice, and prevention) and DHS child welfare practice; Data Warehouse & Analytics; Performance and Quality Management, and Information Systems. Starting in October 2016, the new PMT division launched several key initiatives to improve and modernize how DHS collects and analyzes data, evaluates providers, and utilizes modern technology to facilitate quality child welfare practice. These initiatives will continue to be implemented and enhanced in FY19 and FY20. The following sections summarize the status of new and continuing initiatives.

A. Monitoring & Evaluation

1. **CONTINUING:** Expand the Quality Visitation Review process by conducting reviews of biological families with children in placement. These visits are critical to reunification efforts. Community Umbrella Agencies continue to face challenges in conducting these visits on a regular basis. The expanded QVR will incorporate an additional layer of measurement and accountability to ensure consistent engagement of biological families with children in placement.
 - In FY19, DHS will test and track the QVR tool and process with biological families with children in placement. These reviews will be reported out to CUAs, will be discussed at regular CUA-DHS meetings, and will be incorporated into the CUA Scorecard as part of the Engagement Domain.
 - Also in FY19, DHS will explore contracting with a qualified vendor to conduct a third-party Visitation Audit. This Audit will enable DHS to validate internal Quality Visitation processes and identify additional practice areas for quality assurance.
 - In FY 20, DHS will explore conducting surveys and focus groups of caregivers – in addition to the QVR - to complement family engagement measures.
2. **NEW:** Review and revamp provider evaluation tools and processes to include measures of service and program quality and youth and family outcomes.
 - In FY18, PMT began monitoring and evaluating all contracted providers, after a few years of CUA's being responsible for monitoring their contracted providers. All provider contracting and monitoring and evaluation was re-centralized at DHS.
 - Also in FY18, DHS engaged a third- party expert, supported by Casey Family Programs, to review and re-design provider evaluation tools and processes. Given the Family First legislation and DHS' goal to continue reducing the population of children in congregate care, the consultant began working on the revision of the congregate care evaluation tools and processes.
 - In FY19, PMT will implement the new evaluation tool and process for congregate care. A Congregate Care Scorecard will be issued at the end of FY19. Throughout FY19, Casey Family Programs will support DHS-PMT in reviewing and re-designing the foster care evaluation tools and processes.
 - In FY20, PMT will implement the new foster care evaluation tool and process. A Foster Care Scorecard will be issued at the end of FY20.
3. **CONTINUING:** Utilize Comprehensive Case File Review Tool to capture quality practice indicators as well as compliance.
 - In FY 18, PMT increased the number of case file reviews per CUA to 15% of each CUA's case census. This allowed for a larger and more equitable case sample of CUAs.

- In FY19, PMT will continue to utilize the Comprehensive Case File Review to review 15% of each CUA's case census each quarter. Also in FY19, PMT will design a study to analyze the alignment of Comprehensive Case File review indicators with children outcomes to validate and continue to refine the tool.

B. Performance Management

1. **CONTINUING:** After publishing the Baseline CUA Scorecard in October of 2017, PMT will continue to produce an annual CUA Scorecard. The CUA Scorecard includes 9 domains of performance and sub-indicators for completion, quality, and timeliness in most of the domains. Most of the indicators are drawn from the Comprehensive Case File Review tool. The domains are: Case Planning, Safety Assessments, Visitation, Court Practice, Supervision, Children and Family Assessments, Permanency, Finance, and Leadership.
 - In FY18, PMT launched the CUA Scorecard, starting with a CUA Scorecard Baseline Report (based on FY17 performance), continuing with quarterly Scorecards and bi-annual performance review (Closing the Loop) meetings with the CUAs to identify strategies for improvement and share practices that are leading to performance improvements.
 - In FY19, DHS will publish the Year 1 CUA Scorecard with an analysis of progress from the Baseline.
 - In FY19, PMT will continue to enhance the CUA Scorecard by integrating additional domains, such as Family Engagement. DHS will also explore how to utilize CUA Scorecard performance to inform decisions on CUA contracts. Also, in FY19, DHS will begin tracking additional permanency indicators – aligned with federal measures – to then incorporate these indicators into the FY20 CUA Scorecard.
 - In FY20, DHS will incorporate the federal indicators for permanency into the Permanency Domain of the CUA Scorecard.
2. **NEW:** PMT will conduct research, develop a plan, and implement Performance-Based Contracting (PBC).
 - In FY 17, PMT conducted research on performance based contracting practices in other jurisdictions, identified models that could be adapted to Philadelphia, and convened a multi-stakeholder planning group to inform the development of a new PBC model for Philadelphia DHS that considers the CUA structure.
 - In FY18, DHS continued with the PBC model development process, including aligning the model with federal permanency measures. DHS also hired a senior level staff person – a PBC Project Manager – to lead the effort in FY19 and beyond.
 - For FY19 contracts, DHS incorporated a PBC Tracking Pilot to begin tracking the cohort of children eligible for the PBC program.
 - In FY20, DHS will fully implement the PBC program – which aligns incentives to specific performance and permanency benchmarks.

C. Research and Data Analytics Modernization

3. **NEW:** PMT will expand the work of the Data Analytics team to include research functions that will enable DHS to generate evidence of programs that exemplify quality service and lead to improved outcomes for Philadelphia's children. This research function will be implemented through both in-house talent and in partnership with external research organizations.
 - As part of this expansion, PMT will develop an RFP for a research partner to evaluate prevention and child welfare programs that currently exemplify promising practices to certify them as Evidence Based Programs that meet the criteria of the FFPSA.

4. **NEW:** PMT will expand data collection to surveys, interviews, and focus groups of critical stakeholders in the child welfare system: caregivers (biological and resource parents, older youth, and case managers). These qualitative data collection tools and processes will enable DHS to produce rigorous and rich analyses of the experience of families and case workers in the child welfare system. These analyses will inform continuous practice improvement efforts and will intentionally integrate the voices of children, families, and front-line workers into DHS reporting functions.
 - In FY19, DHS will launch youth surveys to examine and understand the experience of older youth in the child welfare system. Also in FY19, DHS will begin designing additional qualitative data collection tools – such as surveys and focus group protocols – to incorporate these data collection strategies in FY20.
 - In FY20, DHS will integrate caregiver, case worker, and youth surveys into key reporting products, such as the annual CUA Scorecard and Quarterly Indicators Report.
5. **CONTINUING:** PMT will continue to modernize the availability, speed, and visual display of child welfare and juvenile justice data needed by practitioners.
 - In FY18, and as part of the Data Analytics modernization strategy, PMT finalized automating key management reports for CUA and DHS practitioners. These management reports include Case Censuses with key elements, such as Safety Assessment and Visitation due dates. These management reports are designed to provide CUAs with easy-to-access case-level, child-level, and aggregate information and enable them to better monitor their performance and outcomes. Also in FY18, as part of the PMT Data & Technology improvement strategies, PMT launched the new Data Warehouse, which, for example, facilitated the production of an improved AFCARS data file.
 - In FY19, PMT will begin planning for a new Data Fellows/Stewards program modeled after Allegheny County's program, which integrates research and data-informed work in the day to day practice of child welfare workers.
 - In FY19, PMT will design a study to inform a first "Early Warning System" for cases at-risk of a near fatality or fatality utilizing longitudinal analyses of DHS and public data sets.
 - In FY20, PMT will launch an initial series of data dashboards and data visualization tools for practitioners.

D. Information Systems

Over the past year, Philadelphia County DHS has made important progress in its ambitious and multi-year project to integrate its data collection, storage, case management and reporting processes.

The Integrated Case Management System is, fundamentally, a comprehensive overhaul and modernization of the DHS data infrastructure. We have accomplished key project milestones in FY18 which have prepared the ground for additional and critical upgrades in FY19. The overhaul of the DHS case management system is supported by PA DHS through its IT grant.

1. MAJOR ACCOMPLISHMENTS

In FY 2017-2018, we completed, or are scheduled to complete by June 30th, the following priority initiatives:

a) Installation of Data Center

- Environmental control requirements - air conditioning and humidity control system;
- Installation of servers, racks and switches;
- Successfully energizing the data center;

- Optimization of cable management;
 - Installation of web access points throughout the building.
- b) Functionality and Operations of New Data Warehouse**
- Production of federal AFCARS reports
 - Modernization of data platform
 - Implementation of data extraction, ETL, and data cleansing
 - Data quality assurance for internal and external reports
- c) Initial Phase of Integrated Case Management System Overhaul: Alignment with State and Federal requirements; Local business requirements, and Improved User Interface and Functionality**
- Enhanced alignment with CWIS (state child welfare information system) and AFCARS (federal foster care and adoptions data system) through six releases (internally developed packages) of system upgrades
 - Review of other PA county case management systems: Montgomery, Bucks, and Allegheny Counties.
 - Completion of comprehensive inventory of DHS systems and subsequent identification and prioritization of sub-systems to be developed
 - Upgrade of Central Referral Unit module (to be released next FY)
 - Business requirements for migration off Legacy Mainframe; including contracts, services, placements, and provider modules as well as enhancing invoicing and billing capability;
 - Reassessment of data model
 - Preparation for data conversion
 - Browser Neutrality
 - Responsive design for desktop, laptop, tablet and mobile device
 - Enhanced user interface
- d) Current System Improvements and Maintenance**
- New hardware that will allow staff to effectively utilize the integrated case management system
 - Asset Management Policy, Process and Procedures
 - IT Help Desk transition from OIT to DHS, creating a more efficient and seamless user experience by eliminating double-ticketing system and processes
 - Assessment and analysis of software usage and needs;
 - Upgrade of XP computers to Win10
- 2. PLANNED WORK FOR FY19:** Most of this work will continue through FY20.
- a) Full Operations of Data Center**
- Upgrading all floor network rooms
 - Planning and implementation of integration of DHS co-locations into DHS network
 - Implementing Wireless Internet (pending city plans)
 - Continuing deployment and testing of development, test and production environments on physical servers and virtual machines
 - Finalizing of decommission and disposal of old equipment
- b) Full Operations of New Data Warehouse**
- Enhancing data warehouse for integrated case management system releases
 - Migrating existing and new data warehouse to new data center
 - Modernizing data analytics software and reporting (COGNOS) environment
 - Implementing Business Intelligence/reporting layer
 - Migrating Existing Data Warehouse Reports to New Data Warehouse

- Decommissioning existing Data Warehouse.
- c) **Second, critical phase of Integrated Case Management System: Migration off Legacy/Mainframe system and Alignment with new State requirements**
- Revamping contract, services; providers and placement modules
 - Enhancing invoicing and billing capability
 - Addressing Title IV and CY61 concerns
 - Upgrading natural GUI apps
 - Enhancing data feed processes to other internal and external databases
 - Enhancing alignment with CWIS and AFCARS regulations and data exchange needs
 - Configurable dashboards
 - Enhance alerts and notification capability
 - Visual relationships
 - Transition to child-centric system
 - Integration of all ECMS forms into the system
 - Integrating intuitive and user-tested navigation
- d) **NEW: Integrated Case Management System - Technical Assistance Team**
- Similar to the KIDS Specialist team in Allegheny County, Philadelphia DHS will recruit, train, and hire an ICMS TA team that can help bridge knowledge of and full utilization of case management applications, data entry quality and integrity, and act as the CWIS and AFCARS champions team by working with practitioners and users on a Continuous Quality Improvement process for CWIS and AFCARS data requirements.

Strategic Plan Goals for DHS University (DHSU)

The Family First Prevention Services Act has the potential to have exhaustive budgetary and practice implications within Philadelphia child welfare and across the state. Philadelphia DHS leadership is assessing the potential impact and identifying strategies to effectively serve targeted populations and comply with this new legislation. To this end, DHSU has included training interventions, within its 3 year strategic plan, specific to reducing congregate care, reducing placement disruptions and establishing and evaluating evidence base programming.

Create learning opportunities for child welfare stakeholders that are aligned with the IOC outcomes and right sizing the system.

- Expand DHSU Mental Health First aid community Hub training offerings for biological parents, resources parents and older youth; this includes offering monthly trainings to target populations.
 - Emphasis on reduction of placement disruptions.
- DHSU to provide consultation to congregate care facilities to support rightsizing the system.
 - Reducing length of stay through qualitative assessments and family engagement.
 - Consultation specific to revising standards and developing RFPs for evidence based programming.
- DHSU to provide consultation to non CUA foster care agencies to support right sizing the system.
 - Identifying and advising on relevant evidence based programming consistent with IOC.
- DHSU to provide consultation on innovative strategies to recruit resource homes for older youth.

Increase and evaluate performance based professional development opportunities to all levels of staff throughout the Philadelphia DHS system.

- Increase instructor led curricula offerings by 10%.
 - Expand Rapid Permanency Review training.
 - Engaging fathers and extended family.
 - Behavioral and Mental health assessment and service linkages.
 - Increasing parent awareness of DHS's obligation to youth for permanency.
- Standardized "Brown Bag" Workshops for CUA's by developing solidified curricula.
- Incorporate and advance cultural diverse sensitivity training, inclusive of LGBTQ youth community, within regular training calendars.
 - Emphasis on older youth stabilization and creating support networks.

- Incorporate training evaluation strategies for core training curricula i.e. court simulation and Module Four in Charting The Course.
 - Emphasis on moving children to stabilization and permanency.
- Expose staff to professional development conferences that highlight evidence based and innovative practices.
- Promote professional licensure and certification credentialing.
 - This includes expanding DHSU's Collaborative partnership with local Universities.
- Expand DHSU and Department of Behavioral Health cross system training initiative to include new training content for staff annually.
 - Emphasis on engaging parents dually diagnosed.
- Update and advance training opportunities on Older Youth Transitioning for staff to promote higher rates of permanency and Independent living skills for older youth. The major content areas are:
 - Older youth Transition Plans.
 - Board Extensions.
 - Resumption of Jurisdiction.

To this end, DHSU is actively engaged in collaborative work and partnership with the "Philly Homes 4 Youth Coalition" which is comprised of 30 plus child welfare agencies charged with reducing homelessness for older youth in the city of Philadelphia.

- Expand the Philadelphia Child Welfare Operations (CWO) Leadership Academy to offer opportunities to all level of staff.
 - DHSU will expand its Leadership Academy, originally designed for managers, to include all levels of staff. The mission of the Academy is to promote succession planning and increase staff's capacity to perform duties and lead others in the context of Philadelphia DHS Child Welfare System.

102

