

Informational Paper 52

**Child Welfare Services
in Wisconsin**

Wisconsin Legislative Fiscal Bureau

January, 2009

Child Welfare Services in Wisconsin

Prepared by

Kim Swissdorf

Wisconsin Legislative Fiscal Bureau
One East Main, Suite 301
Madison, WI 53703

TABLE OF CONTENTS

| | |
|---|----|
| Introduction..... | 1 |
| Child Abuse and Neglect..... | 2 |
| State Definition of Child Abuse and Neglect..... | 2 |
| Mandatory Reporters..... | 3 |
| Incidence of Child Abuse and Neglect in Wisconsin..... | 3 |
| Out-of-Home Care..... | 4 |
| Entry into Out-of-Home Care..... | 5 |
| Types of Out-of-Home Placements..... | 7 |
| Out-of-Home Care Caseloads..... | 10 |
| Licensing..... | 10 |
| Exiting Out-of-Home Care..... | 11 |
| Reunification..... | 11 |
| Guardianship..... | 11 |
| Adoption..... | 11 |
| Youth Aging Out of Out-of-Home Care..... | 15 |
| Funding to Support Costs of Providing Child Welfare Services..... | 18 |
| Bureau of Milwaukee Child Welfare..... | 23 |
| eWISACWIS..... | 33 |
| Federal Reviews..... | 35 |
| Child Abuse and Neglect Prevention Programs..... | 37 |
| Child Abuse and Neglect Prevention Board..... | 37 |
| Family Foundations..... | 42 |
| Prevention Services in Milwaukee County..... | 43 |
| Summary..... | 44 |

ATTACHMENTS

| | | |
|--------------|---|----|
| Attachment 1 | Overview of the Child Welfare System in Wisconsin..... | 45 |
| Attachment 2 | Independent Living and Education and Training Vouchers County and Tribal Allocations, 2008 and 2009..... | 46 |
| Attachment 3 | 2007 Independent Living Annual Report Summary | 48 |
| Attachment 4 | Title IV-E Incentive County Allocations Calendar Year 2009..... | 50 |
| Attachment 5 | Title IV-B, Part II County Allocations (Promoting Safe and Stable Families) Calendar Year 2009 | 51 |
| Attachment 6 | Bureau of Milwaukee Child Welfare -- Performance Regarding Permanence, Safety, and Well-Being Standards..... | 52 |
| Attachment 7 | Bureau of Milwaukee Child Welfare -- Case Decision-Making Process..... | 53 |
| Attachment 8 | Summary of Outcome Measures, Systemic Factors, and Results under the Child and Family Services Review | 54 |
| Attachment 9 | State Performance on Child and Family Services Review Outcome Items..... | 56 |

APPENDICES

| | | |
|------------|--|----|
| Appendix A | Federal Child Welfare Law | 57 |
| Appendix B | Description of Outcome Measures, System Factors, and Findings under the Child and Family Services Review..... | 63 |
| Appendix C | Summary of Wisconsin's Child and Family Services Review Program Enhancement Plan | 68 |

Child Welfare Services in Wisconsin

Introduction

Children and family services encompass a broad range of services and activities that assist in assuring the health, safety, and well-being of children and their families. These include prevention services provided to families during times of crisis, services to children or juveniles in need of protection and services, other child and family support services, and child protective services.

Child welfare services refer to services that are intended to keep children safe when their families are unable to protect them from harm. These services include: (a) coordinating the development and provision of services to abused and neglected children, to families in which child abuse or neglect has occurred, and to children and families when circumstances justify a belief that abuse or neglect will occur; (b) providing access, investigation, and assessment services to determine if a child is in need of protection or services, which may include a decision that the child has been abused or neglected; (c) dispositional services to the juvenile court in each county, including case management services to children placed in out-of-home care to ensure that permanency plans are carried out; and (d) services provided to children whose parents have had their parental rights terminated and who have been placed for adoption.

Child welfare services do not include economic welfare or support services, such as services provided under Wisconsin Works (W-2), although many families receive both child welfare services and economic support services.

In Wisconsin, the child welfare system is county operated and state supervised. Responsibility for children in the child welfare system is shared

between the juvenile court and the county department of human services or social services, or in Milwaukee County, with the Department of Children and Families (DCF). At the local level, the unit in the county department that is responsible for providing services to abused and neglected children is often referred to as child protective services (CPS). In addition to DCF and counties, child welfare services are also provided to Native American children by tribal social services departments.

Prior to July 1, 2008, the Department of Health and Family Services (DHFS), now known as the Department of Health Services (DHS), was responsible for oversight of the child welfare system. The child welfare program was transferred to DCF under provisions of 2007 Wisconsin Act 20 (the 2007-09 biennial budget bill), which created this new department.

DCF is responsible for providing statewide leadership and supervision of child welfare standards and practices, administering state and federal funds for child welfare services, and assuring compliance with state and federal law and regulations. In addition, the Bureau of Permanence and Out-of-Home Care in the DCF Division of Safety and Permanence provides adoption services for children with special needs from counties other than Milwaukee.

Title IV-E and Title IV-B of the federal Social Security Act provide much of the federal funding and federal law regarding child welfare. Eligibility for Title IV-E funding depends on certain financial criteria (eligibility criteria that were in effect in July of 1996 under the former aid to dependent children [AFDC] program) and out-of-home care placement criteria. Funding for child welfare services, including Title IV-E and Title IV-B funding, is

discussed in further detail below. Appendix A provides the history of federal law regarding child welfare.

In addition to federal law and funding, this paper describes the child welfare system in Wisconsin. Attachment 1 provides an overview of the child welfare system statewide, with a flowchart that illustrates the different paths a CPS case may take, beginning with an allegation of child abuse or neglect, to the closure of the case. The details of the steps are described throughout this paper.

Each county has established its own child welfare system that includes the county department of human or social services or, in Milwaukee County, DCF's Bureau of Milwaukee Child Welfare (BMCW), the courts, and other resources within the community. While all county and state child welfare systems operate under the same federal and state laws, regulations, standards, and policies, the organization, funding, and size of the systems differ.

Child Abuse and Neglect

A child and family usually enter the child welfare system through a report of child abuse or neglect. County caseworkers and, in Milwaukee County, state caseworkers conduct an assessment to determine if a child is in need of protection or services. The requirements of the assessment vary, depending on whether the alleged maltreatment or threat of harm to the child is by a household member, a person exercising temporary control or care over a child, or a person with no caregiver responsibilities. DCF standards and policies establish parameters for determining whether or not to substantiate that abuse or neglect occurred, but the determination or substantiation of a case can vary from county to county within those parameters.

This section defines child abuse and neglect, discusses mandatory reporters of abuse or neglect,

and presents data on child abuse and neglect in Wisconsin.

State Definition of Child Abuse and Neglect.

Under s. 48.02 of the statutes, child abuse means any of the following:

- Physical injury inflicted on a child by other than accidental means;
- Serious physical harm inflicted on an unborn child, and the risk of serious physical harm to the child when born, caused by the habitual lack of self-control of the expectant mother in the use of alcohol beverages, controlled substances, or controlled substance analogs, exhibited to a severe degree;
- Sexual intercourse or sexual contact as prohibited under the crimes of sexual assault, sexual assault of a child, repeated acts of sexual assault against the same child, or sexual assault of a child placed in substitute care;
- Sexual exploitation of a child;
- Permitting, allowing, or encouraging a child to engage in prostitution;
- Forcing a child to view or listen to sexual activity;
- For purposes of sexual arousal or gratification, either causing a child to expose genitals or pubic area or exposing genitals or pubic area to a child;
- Manufacturing methamphetamine under specific circumstances that put a child at risk; and
- Emotional damage, for which the child's parent, guardian, or legal custodian has neglected, refused, or been unable for reasons other than poverty to obtain the necessary treatment or to take steps to ameliorate the symptoms.

Neglect is defined under s. 48.981 of the statutes

as failure, refusal, or inability on the part of a parent, guardian, legal custodian, or other person exercising temporary control over a child, for reasons other than poverty, to provide necessary care, food, clothing, medical or dental care, or shelter so as to seriously endanger the physical health of the child.

Mandatory Reporters. State law requires some professionals to report if they have reasonable cause to suspect that a child seen in the course of their professional duties has been abused or neglected or if they have reason to believe that a child seen in the course of their professional duties has been threatened with abuse or neglect and that abuse or neglect of the child will occur. These mandatory reporters include:

- A physician, coroner, medical examiner, nurse, dentist, chiropractor, optometrist, acupuncturist, or other medical or mental health professional;
- A social worker, marriage and family therapist, or professional counselor;
- A public assistance worker, including a W-2 financial and employment planner;
- A school teacher, administrator, or counselor;
- A family court mediator;
- A child care worker in a day care center, group home, or residential care center, or a day care provider;
- An alcohol or other drug abuse counselor;
- A substance abuse counselor working under contract with a county department;
- A physical therapist or physical therapist assistant, occupational therapist, dietician, speech-language pathologist, or audiologist;

- An emergency medical technician, first responder, or police or law enforcement officer;
- A court-appointed special advocate (CASA); and
- In cases of suspected sexual abuse, clergy members.

In addition to mandatory reporters, any other person may make a report of suspected abuse or neglect of a child or an unborn child. No one may be fired for reporting abuse or neglect.

Incidence of Child Abuse and Neglect in Wisconsin. In 2007, there were 40,600 reports of child maltreatment in Wisconsin involving 49,000 specific allegations of maltreatment affecting 33,900 children. Approximately 51% of these reports were allegations of neglect, 26% of physical abuse, 14% of sexual abuse, 1% of emotional abuse, and 8% were allegations that abuse was likely to occur. Table 1 shows the number of reports of child maltreatment from 1995 through 2007.

Table 1: Number of Reports of Child Maltreatment, 1995-2007

| | |
|------|--------|
| 1995 | 44,700 |
| 1996 | 46,300 |
| 1997 | 45,800 |
| 1998 | 42,500 |
| 1999 | 40,200 |
| 2000 | 38,000 |
| 2001 | 40,200 |
| 2002 | 42,700 |
| 2003 | 40,500 |
| 2004 | 42,400 |
| 2005 | 40,900 |
| 2006 | 41,300 |
| 2007 | 40,600 |

Not all reports of abuse or neglect are substantiated. Overall, 16% of the reports in 2007 were substantiated and 3% found that abuse or neglect was likely to occur. Substantiated cases refer to cases where child welfare staff has determined that, based upon a preponderance of the evidence,

abuse or neglect occurred. A preponderance of evidence is a lower standard of evidence than that needed for proof in juvenile court (clear and convincing evidence) or criminal court (evidence beyond a reasonable doubt) procedures. Therefore, while there may be sufficient information to substantiate an alleged child abuse or neglect case, there may not be sufficient evidence to obtain a child in need of protection or services (CHIPS) court order proceeding or to support criminal court prosecution. (CHIPS is discussed more fully in the next section of the paper.)

The child welfare agency may determine that maltreatment has occurred or is likely to occur to the child without identifying a particular person as the actual or likely maltreater. In these situations, the agency may make a substantiated or likely to occur finding without naming the maltreater.

It should be noted that at the beginning of calendar year 2007, BMCW discontinued the use of the "abuse likely to occur" allegation type. In September, 2007, this allegation type was removed statewide because it lacked a definition that would allow consistent application and make it clearly distinguishable from other allegation types. These allegation types are now categorized under one of the other maltreatment types, typically neglect.

Unsubstantiated cases may involve situations where the parents are having difficulty caring for their child, but abuse or neglect has not yet occurred. Cases may also be unsubstantiated because the child welfare caseworker may not be able to gather the information needed to make a full determination, because the subjects of the report cannot be found, or the incident may not have happened.

A case does not need to be substantiated to obtain a CHIPS petition and/or require the child welfare agency to provide services to the child and family, but substantiating a case has legal ramifications for the alleged maltreater that do not occur when a case is unsubstantiated. Substantiated maltreaters have the right to appeal the finding. Re-

gardless of whether the allegation is substantiated, the CPS unit may open a case if it is determined during the investigation that the children are not safe in the home.

Statewide substantiation rates have fallen since 1996, when approximately 38% of cases were substantiated. DCF indicates that this decrease may be due to several factors, including state and federal requirements associated with appeal rights for substantiated maltreaters, which results in a more rigorous application of substantiation decision-making, and the state caregiver background law, which prohibits a person substantiated of child abuse or neglect from certain types of employment, including working in child care centers and nursing homes. In addition, 2005 Wisconsin Act 232 eliminated the requirement that CPS agencies complete an initial assessment in situations where the alleged maltreater is not a caregiver for the child (these cases are referred to law enforcement). Finally, a clarification in policy related to mutual sexual contact between teenage peers made these allegations a request for services, rather than a CPS report.

Out-Of-Home Care

If, after investigating an allegation of abuse or neglect, child welfare staff determines that a child is safe, the case is closed. However, if a child is not safe and/or at risk of further abuse and neglect, a child protective services case is opened and staff determines whether the child can remain at home if the family receives appropriate services, or if the child needs to be removed and placed in out-of-home care. If staff determines that a child can remain safely at home, the child and family may receive in-home services to address the safety needs of the family and child. If staff determines that a child cannot remain safely at home, the child is removed from the home and placed in out-of-home care. This section of the paper discusses out-of-home care.

Entry into Out-of-Home Care. Children may be placed in out-of-home care as a result of one of four types of actions: (a) a CHIPS court order, generally when the removal of a child from his or her home and placement into out-of-home care is necessary to assure the child's safety; (b) a juvenile in need of protection or services (JIPS) court order, as a result of certain behaviors, including being uncontrollable, running away, or truancy; (c) a delinquency court order, as a result of a criminal act; or (d) a voluntary placement agreement (VPA) between a parent and a caregiver and involving the child welfare agency. Under state law, VPAs are limited to 180 days. VPAs require placement in a licensed foster home, treatment foster home, or group home.

The Children's Code (Chapter 48 of the statutes) governs the CHIPS process and the Juvenile Justice Code (Chapter 938 of the statutes) governs the JIPS and juvenile delinquency processes. In addition, tribal courts place children in out-of-home care pursuant to the procedures included in each tribe's children's code. Information on programs available for juveniles that are adjudicated delinquent because they were found to have committed a criminal offense can be found in the Legislative Fiscal Bureau's information paper entitled "Juvenile Justice and Youth Aids Program."

Except under a VPA, a child is placed in out-of-home care under a court order. Before that order is made, however, a number of steps occur. This paper details the steps in the CHIPS process, but the JIPS process is similar.

Removal from Home. A child can be removed from his or her home under s. 48.19 of the statutes for a variety of reasons, including the child's safety. Under s. 48.205 of the statutes, a child can be held in custody as a result of a finding of probable cause of the following: (a) if the child is not held, he or she will cause injury to himself or herself or be subject to injury by others; (b) if the child is not held, he or she will be subject to injury by others, based on a determination under (a) or, if the judge is determining whether to continue custody, a finding

that if another child in the home is not held, that child will be subject to injury by others; (c) the parent, guardian, or legal custodian of the child or other responsible adult is neglecting, refusing, unable, or unavailable to provide adequate supervision and care and that services to ensure the child's safety and well-being are not available or would be inadequate or, if the judge is determining whether to continue custody, that another child in the home meets these criteria; (d) that the child will run away or be taken away so as to be unavailable for proceedings of the court; or (e) that if an expectant mother is not held, there is a substantial risk that the physical health of the unborn child, and of the child when born, will be seriously affected or endangered by the expectant mother's habitual lack of self-control in the use of alcohol beverages or controlled substances, and that she is refusing or has refused to accept any substance abuse treatment services offered to her or is not making or has not made a good faith effort to participate in any of these services offered to her. Tribal courts also place children, but under the provision of each tribe's children's code.

Court Process. A court must hold a hearing within 48 hours of a child's removal from his or her home to determine if the child should remain in the custody of the county or state, based on a finding of probable cause of any of the criteria identified above. At this hearing, the county or state will file a CHIPS petition. If a court does not hold a hearing within 48 hours or a CHIPS petition is not filed at the hearing, the court may order that the child be held for up to an additional 72 hours if certain conditions exist.

A CHIPS petition must state that the court has exclusive original jurisdiction over a child alleged to be in need of protection or services that can be ordered by the court, and that any of the following apply:

- The child has no parent or guardian;
- The child has been abandoned;

- The child's parents have relinquished custody of the child under s. 48.195 of the statutes;

- The child has been the victim of abuse, including injury that is self-inflicted or inflicted by another;

- The child is at substantial risk of becoming the victim of abuse, including injury that is self-inflicted or inflicted by another, based on reliable and credible information that another child in the home has been the victim of such abuse;

- The child's parent or guardian signs the petition requesting the court's jurisdiction and is unable or needs assistance to care for or provide necessary special treatment or care for the child;

- The child's guardian is unwilling or unable to sign the petition requesting the court's jurisdiction and is unable or needs assistance to care for or provide necessary special treatment or care for the child;

- The child has been placed for care or adoption in violation of law;

- The child is receiving inadequate care while a parent is missing, incarcerated, hospitalized, or institutionalized;

- The child is at least age 12, signs the petition requesting the court's jurisdiction, and is in need of special treatment or care which the parent, guardian, or legal custodian is unwilling, neglecting, unable, or needs assistance to provide;

- The child's parent, guardian, or legal custodian neglects, refuses, or is unable for reasons other than poverty to provide necessary care, food, clothing, medical or dental care, or shelter, or is at substantial risk of doing these things, so as to seriously endanger the physical health of the child; or based on reliable and credible information that this has occurred to another child in the home;

- The child is suffering emotional damage

for which the parent, guardian, or legal custodian has neglected, refused, or been unable, and is neglecting, refusing, or unable, for reasons other than poverty, to obtain necessary treatment or to take necessary steps to ameliorate the symptoms;

- The child is suffering from an alcohol or other drug abuse impairment, exhibited to a severe degree, for which the parent, guardian, or legal custodian is neglecting, refusing, or unable to provide treatment; or

- The child has not been immunized and has not been exempted from such immunizations.

Within 30 days after filing the CHIPS petition, the court conducts a plea hearing to determine whether any party wishes to contest the allegations made in the petition. If no one wishes to contest the CHIPS petition, the court sets a date for a dispositional hearing within 30 days, or immediately goes forward with that hearing if all parties consent. If any party wishes to contest the CHIPS petition, a date is set for a fact-finding hearing within 30 days, where the court will determine if the allegations in the CHIPS petition are proved by clear and convincing evidence. If the court finds that the allegations are not proved, the case is dismissed and the child returns home. If the court finds that there is clear and convincing evidence, the court will hold a dispositional hearing within 30 days or immediately if all parties consent.

Once the court adjudicates the CHIPS case, the court orders a disposition of the case, which outlines the needs of the child and a plan for ensuring appropriate services for the child. The dispositional process includes, among other options, determining whether legal custody of the child should be transferred to the county, or in Milwaukee County, DCF, and whether the child should be placed in out-of-home care. If the child is removed from his or her home, the dispositional order placing a child in out-of-home care must include a finding that: (a) continued placement of the child in his or her home would be contrary to the welfare of the child; and (b) the child welfare agency has made reason-

able, or, in the case of an Indian child, active efforts, to prevent the removal of the child from the home, while assuring that the child's health and safety are the paramount concerns, and to make it possible for the child to return safely home.

The finding that reasonable efforts have not been made is not required if one of the exceptions is met. These exceptions, which do not apply in the case of a Native American child, include: (a) the parent has subjected the child to aggravated circumstances (such as abandonment, chronic abuse, torture, or sexual abuse); (b) the parent has committed one of several serious criminal offenses; (c) the parental rights of the parent to another child have been involuntarily terminated; and (d) the parent has been found to have relinquished custody of the child when the child was 72 hours old or younger (that is, infant relinquishment under s. 48.195 of the statutes).

A dispositional order, and any extension or revision to a dispositional order, made before the child reaches 18 years of age that places, or continues the placement of, a child in his or her home terminates at the end of one year after the order is entered, unless the judge specifies a shorter period of time or terminates the order sooner. If the order places or continues placement of the child in an out-of-home placement, the order terminates when the child reaches 18 years of age, at the end of one year after entry of the order, or, if the child is a full-time student at a secondary school or its vocational or technical equivalent and is reasonably expected to complete the program before reaching age 19, when the child reaches age 19, whichever is later, unless the judge specifies a shorter period of time or terminates the order sooner.

Permanency Plans. When the court dispositional order includes out-of-home placements, the child welfare or juvenile justice agency is responsible for developing a permanency plan based on the court's disposition and the strengths and needs of the child and his or her family. This permanency plan must be approved and filed with the court ordering the placement within 60 days after the date of

the child's removal from his or her home. The permanency plan identifies the goal for a permanent placement for the child and the services to be provided to the child, his or her family, and the foster parent or other caregiver in order to achieve the permanence goal. The permanence goal can include: (a) reunification with the child's family; (b) placement with a fit and willing relative; (c) placement of the child for adoption; (d) placement of the child with a guardian; or (e) another alternate permanent placement, including long-term foster care or independent living. Permanency plans are also required for children placed in the home of a relative under a court order.

Permanency plans must be reviewed no later than six months after the date on which the child was first removed from his or her home and every six months after a previous review for as long as the child is placed outside of the home. The court is required to hold a permanency plan hearing within 12 months after the child's removal from the home and at least every 12 months after the previous hearing. This hearing may be held either in place of, or in addition to, a review.

Types of Out-of-Home Care Placements. Out-of-home care includes children in foster homes, treatment foster homes, group homes, residential care centers, children living with a relative under a court order (court-ordered kinship care), and other placements, such as short-term placements in secure detention facilities or hospitals.

A child placed in out-of-home care can be placed with a relative, who may or may not be a licensed foster parent, or, if a relative is not available or a viable option, in foster care, treatment foster care, group homes, or residential care centers. These types of placements can range from a home setting to a more restrictive, institutional setting.

Kinship Care. If a placement is with a relative, other than a parent, and the relative is not a licensed foster parent, then the relative may qualify for the kinship care program. The kinship care program is designed to help support a child who

resides outside of the home with a relative, rather than placing the child in foster care or other out-of-home placement. However, this program is not designed to be used when another placement is in the child's best interests.

Kinship care relatives who provide care and maintenance for one or more children may receive a kinship care payment of \$215 per month for each child if:

- The county, tribe, or DCF determines that there is a need for the child to be placed with the kinship care relative and that the placement with the relative is in the best interests of the child;
- The county, tribe, or DCF determines that the child meets, or would be at risk of meeting, one or more of the CHIPS or JIPS criteria;
- The county, tribe, or DCF conducts a background investigation of the kinship care relative, any employee and prospective employee of the kinship care relative who has or would have regular contact with the child for whom kinship care payments would be made, and any other adult resident in the kinship care relative's home to determine if the kinship care relative, employee, prospective employee, or adult resident has any arrests or convictions that could adversely affect the child or the kinship care relative's ability to care for the child;
- The kinship care relative states that he or she, any employee, prospective employee, or other adult in the residence who would have regular contact with the child has no arrests or convictions that could adversely affect the child or the ability to care for the child;
- The kinship care relative cooperates with the county, tribe, or DCF in the application process, including applying for other forms of assistance for which the child may be eligible;
- The kinship care relative is not receiving any other kinship care payment with respect to the same child; and

- The child for whom the kinship care relative is providing care and maintenance is not receiving supplemental security income (SSI) benefits.

Under the program, a "child" is defined as either any person under the age of 18 or a person who has attained the age of 18 but who is not yet 19 who is a full-time student in good academic standing at a secondary school or its vocational or technical equivalent and who is reasonably expected to complete his or her program of study and be granted a high school or high school equivalency diploma.

At least every 12 months, the county, tribe, or DCF reviews the case of a relative receiving kinship care to determine if the conditions under which the case was initially determined eligible still exist. If those conditions no longer exist, the county, tribe, or DCF discontinues making the kinship care payments.

A relative does not categorically assume guardianship of the child under kinship care. Kinship care is a living arrangement for the child in the relative's household. The state recognizes this relationship as being in the best interests of the child by funding kinship care payments.

Foster Care and Treatment Foster Care. The least restrictive, non-relative, placement is foster care. Under foster care, a family provides care and maintenance for four or fewer children or, if necessary to enable a sibling group to remain together, six or fewer children in the family's home.

In treatment foster care, a family or, if DCF grants an exception, private agency staff for shift-staffed homes provides care, maintenance, and structured, professional treatment for four or fewer children. Treatment foster parents or staff receive additional training to care for the higher needs of the children placed in treatment foster homes. These needs may be medical, physical, developmental, or emotional. In addition to DCF, counties, tribes, and child welfare agencies are authorized to

license both foster homes and treatment foster homes.

As of July of 2008, most children (62%) in out-of-home care statewide were in foster homes or treatment foster homes.

Foster care basic maintenance payments, which vary depending on the child's age, are designed to reimburse a foster parent for the cost of a foster child's food, clothing, housing, basic transportation, and personal items. This payment structure is applicable for children in foster homes and treatment foster homes. The payments are made by counties and tribes for children in out-of-home care or by DCF for children in Milwaukee County or in the state special needs adoption program's foster care program.

All foster care payments include the basic maintenance rate, which is established by statute. The current basic payment rates are shown in Table 2. Counties, tribes, and DCF also consider the needs of the child and may provide a supplemental payment or an exceptional payment, in addition to the basic payment. A supplemental payment may be made, in an amount determined by a child welfare agency, for a foster child who requires more than the usual amount of care and supervision for the child's age because of special emotional, behavioral, or physical needs. These special needs are further defined in administrative rule (DCF 56). An exceptional payment may be provided to: (a) enable the child to be placed in a foster home or treatment foster home instead of a more restrictive setting; or (b) replace a child's basic wardrobe that has been lost or destroyed through other than normal wear. The maximum monthly foster care payment for a child is \$2,000. About two-thirds of children in foster homes and treatment foster homes have supplemental rates and about one-half have exception rates.

In addition to the monthly foster care payments, the county or DCF may provide a clothing allowance when the child is initially placed in out-of-home care. The maximum clothing

allowance amounts are shown in Table 2. Counties may reimburse a foster parent one time for the actual costs of the clothing purchases up to the maximum allowance.

Table 2: Basic Maintenance Payments and Clothing Allowance -- Calendar Year 2009

| Age | Monthly Amount | Maximum Clothing Allowance |
|---------------|----------------|----------------------------|
| Under 5 | \$349 | \$150 |
| 5 through 11 | 381 | 175 |
| 12 through 14 | 433 | 200 |
| 15 and over | 452 | 200 |

Group Homes and Residential Care Centers. Two other types of placements are group homes and residential care centers (RCCs) for children and youth. Group homes may be: (a) family-operated group homes, where the licensee is one or more individuals who operate only one group home; (b) agency-operated group homes, where the licensee is a public agency other than DCF; or (c) corporation-operated group homes, where the licensee is a non-profit or proprietary corporation that operates one or more group homes. RCCs are typically licensed to private child welfare agencies.

As of July of 2008, 6% of the children in out-of-home care statewide were in group homes, and 6% were in RCCs. Both of these placements are more restrictive than foster homes or treatment foster homes. Group homes provide care and maintenance for five to eight children, not including children of minors. RCCs provide treatment and custodial services for nine or more children, youth, and young adults up to 21 years of age. Placement into an RCC must be made before the child reaches age 18, and the child generally must have some type of disability such that they are not capable of caring for themselves to remain in an RCC after age 18.

Each group home and RCC establishes its payment rate and is required to charge every user the same rate, unless a particular county uses 75% of

the beds in the facility. Such counties may negotiate a rate with the group home or RCC provider. The rates are published by DCF annually to ensure that each county and tribe is aware of the agencies' rates and that each county and tribe is charged the same rate. In 2008, the average incorporated group home daily rate was \$188.02, ranging from \$106.73 per day to \$335.01 per day. The average RCC daily rate in 2008 was \$312.54, ranging from \$195.00 per day to \$855.36 per day.

Out-of-Home Care Caseloads. Table 3 shows the out-of-home care caseloads from 2004 through 2007 for each type of placement (court-ordered kinship care, foster homes, treatment foster homes, group homes, RCCs, and other placements). The overall number of children in out-of-home care has ranged from approximately 7,300 to 7,700. There has been a shift, however, from children placed in foster homes to children placed in treatment foster homes, which require higher foster care payments. This is due, in part, to the decrease in available foster homes. Treatment foster homes are the next least restrictive, non-relative placements.

As of December 31, 2007, there were 7,419 children in out-of-home care in Wisconsin: 2,774 in Milwaukee County and 4,645 in the rest of the state. About 37% of the state's children in out-of-

home care are in Milwaukee County. Not included in these numbers are Native American children placed in out-of-home care by a tribal court and whose payments are being paid for by the tribe.

Licensing. Counties, tribes, DCF, and child welfare agencies license foster homes and treatment foster homes. DCF licenses child placing agencies (child welfare agencies that place children in foster homes and group homes), group homes, and RCCs. The requirements for licensure and the procedures and policies are specified in state administrative code and include who may apply for a license, how to apply, the required qualifications of the licensee, the requirements for the physical environment of the licensed home or agency, safety requirements, principles for the care of children, payment levels, and training for care providers. For group homes and RCCs, the administrative rules also specify requirements relating to staff and the maintenance of child records. Each license includes the number of children that a home or agency may receive, the age of the children, and the gender of children that may be placed there. A foster home or treatment foster home license may be issued for up to two years. A group home or RCC license is reviewed every two years but does not expire unless it is revoked or suspended.

Table 3: Out-of-Home Care Caseloads on December 31, 2004, through 2007

| <u>Year</u> | | Court-Ordered | | Treatment | Group | Residential | Other | <u>Total</u> |
|-------------|--------------------|-------------------------------|-------------------------------|-------------------------------|-------|-------------------------------|-------|--------------|
| | | <u>Kinship</u> <u>Care</u> | <u>Foster</u> <u>Homes</u> | <u>Foster</u> <u>Homes</u> | | <u>Care</u> <u>Centers</u> | | |
| 2004 | Milwaukee County | 763 | 1,915 | 260 | 109 | 72 | 77 | 3,196 |
| | All Other Counties | 627 | 2,521 | 521 | 301 | 355 | 212 | 4,537 |
| | Wisconsin Total | 1,390 | 4,436 | 781 | 410 | 427 | 289 | 7,733 |
| 2005 | Milwaukee County | 784 | 1,477 | 278 | 132 | 70 | 116 | 2,857 |
| | All Other Counties | 710 | 2,478 | 631 | 331 | 372 | 277 | 4,799 |
| | Wisconsin Total | 1,494 | 3,955 | 909 | 463 | 442 | 393 | 7,656 |
| 2006 | Milwaukee County | 771 | 1,252 | 331 | 110 | 57 | 143 | 2,664 |
| | All Other Counties | 708 | 2,390 | 621 | 272 | 383 | 287 | 4,661 |
| | Wisconsin Total | 1,479 | 3,642 | 952 | 382 | 440 | 430 | 7,325 |
| 2007 | Milwaukee County | 841 | 1,125 | 449 | 142 | 77 | 140 | 2,774 |
| | All Other Counties | 776 | 2,360 | 615 | 258 | 359 | 277 | 4,645 |
| | Wisconsin Total | 1,617 | 3,485 | 1,064 | 400 | 436 | 417 | 7,419 |

Exiting Out-Of-Home Care

Each CHIPS, JIPS, and delinquency dispositional order and permanency plan identifies the permanence goal for a child in out-of-home care. Permanency plan goals can include: (a) reunification with the birth family; (b) transfer of legal guardianship to a relative; (c) adoption; (d) long-term foster care for children for whom adoption is not an option; or (e) independent living.

Reunification. Family reunification was first emphasized in the federal Adoption Assistance and Child Welfare Act of 1980. In 1997, the federal Adoption and Safe Families Act changed the emphasis in federal child welfare legislation from reunification towards permanence for children in a timely manner with the concept of concurrent planning: considering two potential permanence goals simultaneously for a child.

In calendar year 2007, approximately 65% of the children statewide who were discharged from out-of-home care, or 5,776 children, were reunified with their parent or parents. Family reunification occurs when the child returns to his or her home from out-of-home care, although the court order may continue and services may be continued in the home. This takes place when the court finds that the goals of the permanency plan were achieved, that the safety and well-being of the child can be met in the care of the parent, and that the reasons for the removal of the child from the home and the CHIPS, JIPS, or delinquency order are no longer valid.

Guardianship. Under s. 48.023 of the statutes, a guardian is defined as a person appointed by the court who has the authority to make important decisions in matters having a permanent effect on the life and development of the child and the duty to be concerned about the child's general welfare, including but not limited to: (a) the authority to consent to marriage, enlistment in the U.S. armed forces, major medical, psychiatric, and surgical

treatments, and obtaining a driver's license; (b) the authority to represent the child in legal actions and make other decisions of substantial legal significance concerning the child but not the authority to deny the child the assistance of counsel as required under the Children's Code; (c) the right and duty of reasonable visitation of the child; and (d) the rights and responsibilities of legal custody, except under certain situations when legal custody has been vested in another person or when the child is jailed or incarcerated.

An adult can be granted guardianship of a child without the termination of the child's parents' rights. Without the termination of parental rights (TPR), the child is still legally the child of his or her parents, but the guardian, in general, is responsible for the care and well-being of that child.

When the court appoints a guardian under s. 48.977 of the statutes, the court closes the CHIPS case. If the guardian is a relative and not a foster parent, the relative remains eligible for a monthly kinship care payment. If the guardian is not a relative, the guardian, under current law, is not eligible for a monthly support payment for the care of the child. The only exception is the subsidized guardianship waiver program, which operates in Milwaukee County.

In 2007, approximately 360 children were discharged to guardianships. In addition, approximately 200 children were discharged from care to relatives. These numbers include re-entry and exit rates so one child could have been discharged more than once during the year.

Adoption. When a child is removed from his or her home and enters the child welfare system, the child is in the physical custody of the county or tribe. If the court terminates a child's parents' rights, the child is legally available for adoption, and the state assumes legal custody of that child and provides adoption services through the special needs adoption program. In 2007, approximately 700 children discharged from out-of-home care were adopted.

Special Needs Adoption Program. DCF administers the special needs adoption program, under which state and contracted staff provide case management and adoptive placement for children with special needs who are available for adoption. DCF is authorized 16.5 FTE positions in the Division of Safety and Permanence and 4.0 quality assurance staff in the Office of Performance and Quality Assurance for the program. DCF also contracts with private vendors in three regions and Milwaukee for approximately 39 caseworkers. The amount budgeted for the contracts in 2008-09 totals \$2,423,400 (\$1,064,900 GPR and \$1,358,500 FED).

The special needs adoption program provides adoptive services for children with special needs from counties, other than Milwaukee County, and tribes. BMCW contracts with Children's Service Society of Wisconsin to provide similar services for children with special needs from Milwaukee County.

The special needs adoption program is organized by regions throughout the state. Table 4 shows the region, the location of the regional offices, and the contracted agency assigned to each region. Each contracted agency may subcontract with other agencies and all of the lead agencies subcontract with at least one other vendor to handle some of the workload.

Table 4: Special Needs Adoption Program

| Region | Regional Office Location | Lead Contracted Agency |
|-----------|--------------------------|--|
| Eastern | Green Bay | Lutheran Social Services of Appleton |
| Southern | Madison | Children's Services Society of Wisconsin |
| Western | Eau Claire | Lutheran Social Services of Eau Claire |
| Milwaukee | West Allis | Children's Services Society of Wisconsin |

The state staff includes 3.0 FTE regional supervisors and 13.5 FTE social worker positions. State staff consults with counties to identify children for whom adoption is an appropriate permanency option, to assist in the permanency planning for each child before TPR, and to search for adoptive fami-

lies for these children. The contracted staff provide case management services for children who are in the state's custody, provide services to the court, identify potential adoptive parents, and conduct home studies of these parents.

Federal and state laws emphasize providing permanence for children under specified timelines. Concurrent planning supports this goal by allowing caseworkers to plan and prepare for permanence through, for example, reunification with the birth parents and adoption simultaneously. State adoption caseworkers develop and maintain supportive and informative working relationships with local and tribal child welfare agency staff, court representatives, service providers, and families so that they can identify children who may be in need of an adoptive placement and potential resources to address this need. These consultation activities are intended to decrease the time between the TPR and the finalized adoption. Currently, the average time between the TPR and the finalized adoption in the special needs adoption program is 7.4 months statewide (including Milwaukee County). The current federal child and family services review performance measures (discussed in further detail below) require each state to demonstrate that 33% of children in out-of-home care are adopted within 24 months after they are removed from their homes.

In addition to the caseworker and supervisor positions, there are 4.0 FTE quality assurance positions that review adoption program outcomes and vendor performance. Adoption vendors ensure that appropriate services are provided to cases while adoptions are being finalized.

Table 5 shows the number of special needs adoptions finalized over the period from 1998 to 2007. The table shows that 724 adoptions were finalized in 2007, including 248 in Milwaukee and 476 in other counties.

DCF indicates that in Milwaukee County, finalized adoptions typically total approximately 250

Table 5: Number of Finalized Adoptions Statewide 1998-2007

| Year | Non-Milwaukee Counties | Milwaukee County | Statewide Number | % Change |
|------|------------------------|------------------|------------------|----------|
| 1998 | 415 | 307 | 722 | --- |
| 1999 | 350 | 304 | 654 | -9.4% |
| 2000 | 421 | 288 | 709 | 8.4 |
| 2001 | 464 | 263 | 727 | 2.5 |
| 2002 | 544 | 500 | 1,044 | 43.6 |
| 2003 | 562 | 591 | 1,153 | 10.4 |
| 2004 | 563 | 461 | 1,024 | -11.2 |
| 2005 | 480 | 422 | 902 | -11.9 |
| 2006 | 455 | 271 | 726 | -19.5 |
| 2007 | 476 | 248 | 724 | -0.3 |

per year, and, in all other counties, finalized adoptions total approximately 500 per year. However, this number increased from 2002 through 2005 after the adoption contract in Milwaukee County switched from the Milwaukee County Department of Health and Human Services to Children's Service Society of Wisconsin. A backlog of children awaiting adoptions under the former contract, along with additional funds for the Milwaukee County District Attorney's Office to prosecute TPR cases, increased the number of adoptions for several years until the backlog worked through the child welfare system. In 2007, the number of finalized adoptions is similar to what is considered typical for the state.

If, after being in the state's custody for two years in the special needs adoption program, a child has not been adopted, custody of the child is transferred back to the county. The state maintains guardianship, and adoption caseworkers continue to search for an adoptive placement for the child, but the county administers the daily case management and has financial responsibility for the case.

State Foster Care Payments. When the state gains legal custody of a child and the child is in an out-of-home care placement, the state assumes responsibility for the monthly payments to the out-of-home care provider. In 2008-09, \$4,652,200 (\$3,312,900 GPR and \$1,339,300 FED) is budgeted for DCF to make these payments. In September, 2008, DCF made payments on behalf of 400

children in the state foster care program.

Adoption Assistance Payments. DCF makes monthly adoption assistance maintenance payments to the adoptive or proposed adoptive parents of a child after an adoption agreement has been signed and the child is placed in the home of the adoptive or proposed adoptive parents. These payments are intended to assist in the cost of care for that child. Adoption assistance can only be provided for a child with special needs and when DCF has determined that such assistance is necessary to assure the child's adoption.

In 2008-09, \$92,228,300 (\$46,868,900 GPR and \$45,359,400 FED) is budgeted for adoption assistance payments. The federal funding is available under Title IV-E as reimbursement for a portion of the costs of the payments. This partial reimbursement is available for payments made on behalf of children that meet certain eligibility criteria, including financial eligibility criteria based on the former AFDC program, as determined by DCF.

To be eligible for adoption assistance, a child must have at least one of the following special needs at the time of the adoption: (a) the child is 10 years of age or older, if age is the only factor in determining eligibility; (b) the child is a member of a sibling group of three or more children that must be placed together; (c) the child exhibits, or is at high risk of developing, moderate or intensive physical, emotional, and behavioral needs; or (d) the child belongs to a minority race in which children of that race cannot be readily placed due to lack of appropriate placements. Most children available for adoption through the state adoption system meet one or more of these criteria.

In September, 2008, DCF made adoption assistance payments on behalf of 8,446 children in Wisconsin. The circumstances of the adoptive parents and the needs of the child are considered together in determining the level of adoption assistance a family receives. The amount of the maintenance payment is based on the applicable uniform foster care rate in effect at the time the adoption agree-

ment was made and on the care needs of the child. Monthly adoption assistance payments range from \$0 to \$2,000. Currently, adoption assistance may be continued after the child reaches 18 years of age if the child is a full-time high school student.

Under federal law, states cannot use a means test to determine adoptive parents' eligibility for the adoption assistance program, but may consider the adoptive parents' circumstances in determining the amount of the adoption assistance payment. In addition, states cannot reduce the adoption assistance payment because of a change in the adoptive parents' income without the adoptive parents' agreement. Under administrative rule [DCF 50.05(4)], DCF must consider family circumstances, such as the following, in determining the amount of the monthly adoption assistance payment: (a) the burden on the family's financial resources is significant because of a need to provide for the adoptee; (b) although the family's financial resources are substantial, unusual circumstances have placed demands on the family income to the extent that providing for an adoptee would result in a significant financial burden; (c) the family lacks health insurance or sufficient insurance to cover the expected medical needs of the adoptee; and (d) resources needed by the adoptee are not available in the family's community and the expense of gaining access to the necessary resources would place a significant financial burden on the family.

In addition to monthly adoption assistance payments, families may be eligible for reimbursement for one-time adoption expenses, such as legal or agency fees, up to \$2,000 per child. Also, most children for whom DCF makes adoption assistance payments remain eligible for medical assistance (MA), which pays for eligible medical expenses not covered by the family's health insurance.

Other Adoption Resources. DCF contracts with Adoption Resources of Wisconsin (ARW) to administer the state adoption information center and adoption exchange center. These centers provide information to prospective adoptive families on all

types of adoption, to birth parents on the adoption process, to adoptive families after adoption, and to professionals and the general public through printed materials, phone calls, and two websites. ARW publishes *Adopt!*, a quarterly publication that showcases children available for adoption in Wisconsin, and promotes the adoption of children through newspaper columns, television feature stories, and posters. The adoption resources website provides child-specific information on children available for adoption, information on the special needs adoption process, and information on post-adoptive services, and identifies available resources on adoption that can be loaned out. In 2008-09, DCF allocated \$346,500 to ARW to provide these services.

Post-Adoption Resource Centers. The post-adoption resource centers (PARCs) are agencies that: (a) provide education, support activities, and services to adoptive families; (b) improve community awareness of and promote a positive image of adoption; (c) create a better understanding of unique issues facing adoptive families among public and private human service providers, schools, and medical care providers; (d) increase availability of services for adoptive families; and (e) establish collaborative efforts among public and private organizations to address the needs of adoptive families. DCF allocates a \$70,000 annual federal grant to each center. The federal funding is available under Title IV-B, Part II. The six Wisconsin regions served by each administering agency are shown in Table 6. The Southeastern region includes Milwaukee County.

Table 6: PARC Regions and Administering Agencies

| Region | Agency |
|--------------|--|
| Southeastern | Adoption Resources of Wisconsin |
| Southern | Catholic Charities, Diocese of Madison |
| Southwestern | Catholic Charities, Diocese of Madison |
| Northwestern | Catholic Charities, Diocese of La Crosse |
| Northern | Catholic Charities, Diocese of La Crosse |
| Northeastern | Family Services of Green Bay |

Each PARC has a toll-free telephone number available 24 hours a day, seven days a week, to respond to questions or concerns from families who have adopted, including special needs adoption, international adoption, and private adoption. The PARCs provide services in their region, but each service is available to families statewide. PARCs provide: (a) training on a variety of issues that affect families with adopted children; (b) access to community resources; (c) referrals to adoption-related support groups, recreational and educational opportunities, and resources; and (d) opportunities to meet with other adoptive families.

Adoption Record Search Program. The adoption record search program is established under ss. 48.432 and 48.433 of the statutes. It became effective in May of 1982 and was revised in 1984, 1989, and 1995. The primary purpose of the program is to assist persons who have been adopted or whose birth parents have terminated their parental rights in obtaining information about themselves and their birth relatives. This information includes:

- Nonidentifying social history information (age of birth parents, nationality, race, education, general physical appearance, talents, hobbies, special interests, reason for the adoption or termination of parental rights, religion, family history, and personality traits).
- Medical and genetic information about birth parents and other family members, including routine health information and any known hereditary or degenerative disease.
- Most recent names and addresses of birth parents on file when the birth parents have filed affidavits allowing the release of that information.
- A copy of the impounded birth certificate.

When a licensed physician has determined that the life or health of an adopted person or their offspring is in imminent danger, DCF will attempt to obtain needed pertinent medical and genetic information from the birth parents. If a birth parent

or an offspring of the birth parent has a medical emergency, updated medical information for diagnosis and treatment will be obtained from the adopted person. A physician's letter documenting the need for updated information must accompany such a request.

Youth Aging Out of Out-Of-Home Care.

Under state law, a child can remain in an out-of-home care placement until he or she is 18 years of age, or, if the youth is expected to graduate from high school, 19 years of age. After this time, the youth "ages out" of out-of-home care and is expected to begin to live independently and, unless the youth pursues higher education, to enter the job force. Over 350 youth "age out" of out-of-home care each year in Wisconsin.

Chafee Foster Care Independence Program. Prior to 2001, states could participate in the Title IV-E independent living program, under which the state could provide independent living services to all youth in out-of-home care between the ages of 16 and 18 and could provide follow-up services to youth until they reached 21 years of age. Funding was allocated to states according to each state's share of Title IV-E eligible children in 1984.

The Foster Care Independence Act of 1999 replaced the Title IV-E independent living program with the Chafee foster care independence program. Under this program, states are required to provide independent living services to youth aging out of out-of-home care, as well as youths between the ages of 18 and 21 who were formerly in out-of-home care.

Funding for the program was first allocated to states in 2001. States can use the federal funds in any way that allows them to achieve the general purpose of the program, which is to help eligible children make the transition to self-sufficiency through services such as assistance in obtaining a high school diploma, career exploration, vocational training, job placement and retention, training in daily living skills, training in budgeting and financial management skills, substance abuse preven-

tion, and preventive health activities.

DCF allocates federal Chafee foster care independence funds to counties and several tribes on an annual basis. The 2008 and 2009 allocations are shown in Attachment 2. Counties and tribes that would be serving fewer than 15 eligible children under the age of 18 may enter into consortia with surrounding counties to ensure that a comprehensive program is available to all eligible and participating youth. Counties and tribes are required to provide a 20% match, either in cash or in-kind services, for the federal funds. The cash match may include funding from community aids, children and family aids, local tax levy, Title IV-E incentive funds, or other local or state funds that are not used as match for other federal dollars.

Counties and tribes must use these funds for independent living services for youths in out-of-home care who are 15 years of age or older and for youths up to 21 years old who were in out-of-home care for at least six months and left care after the age of 17.

Beginning January 1, 2009, a youth will be eligible for independent living services if he or she: (a) is currently in an out-of-home care placement; (b) is currently in subsidized guardianship or long-term kinship care if the youth had been in out-of-home care for at least six months after age 15; (c) was adopted after age 16 from an out-of-home care placement, subsidized guardianship, or long-term kinship care; or (d) left an out-of-home care placement, subsidized guardianship, or long-term kinship care at age 18.

Youths do not need to be Title IV-E eligible to receive services. Their participation in the program is voluntary.

If a youth has been in out-of-home care for at least six months after the age of 15, he or she is referred to the independent living program. Each county or tribe's program is organized differently. Counties and tribes can assign ongoing caseworkers, independent living coordinators, or outside

agencies to administer the program to eligible youths. Each youth referred to the program receives an assessment of his or her independent living skills. Using the results of the assessment, the independent living caseworker, with the youth's input, develops the independent living transition plan (ILTP). The ILTP identifies the skills that the youth should improve, services the youth should receive to develop these skills, and how the youth will access those services. ILTPs become part of the permanency plan and are reviewed at minimum every six months.

Independent living is required to be part of a youth's permanency plan, but the ILTP provides greater detail than the information courts require. The ILTP can be updated at any time. A youth may leave care even if the goals of the plan are not fully met. However, before a youth ages out of care, the youth should have a plan to move into the community and to become self-sufficient. After the youth ages out of care and until their 21st birthday, the youth may continue to receive services through the county independent living program. The level of service is determined by the needs of the youth.

Counties and tribes may use independent living funds for a wide range of services to assist youth in becoming self-sufficient. DCF has identified skill areas that must be addressed through these services. Counties and tribes use most of the funds to support independent living coordinators and direct services to youth. The funds may also be used for room and board expenses for youth between 18 and 21 years old who were in out-of-home care until their 18th birthday, although no more than 25% of the total allocation may be used for this purpose. Attachment 3 provides information on the independent living program for 2007, including the number of eligible youths, the number of youths receiving services, and the amount of funding counties and tribes used for room and board expenses.

Education and Training Vouchers Program. The federal education and training voucher (ETV) program helps youths transition to self-sufficiency and

receive the education, training, and services necessary to obtain employment. ETV is federally funded under the Chafee Foster Care Independence Act and the funding is used to support vouchers for post-secondary education and training available to youths who have aged out of out-of-home care. The funds were first available in federal fiscal year (FFY) 2003-04. Wisconsin received \$668,100 FED in FFY 2007-08 in ETV funds for distribution to counties, tribes, and BMCW. Each grant recipient is required to provide matching funds equal to 20% of their annual allocation. ETV allocations to counties, tribes, and BMCW and the match requirements are shown in Attachment 2. The remaining funds from the ETV federal award support the DCF scholarship program (described below) and state administrative costs (\$14,500 FED).

Youths may receive services funded under ETV if they have been in out-of-home care for at least six months after the age of 15 or if they were adopted after the age of 15 and are eligible for independent living services. If a youth is participating in the ETV program on his or her 21st birthday, is enrolled in a post-secondary education or training program, and is making satisfactory progress toward completion of that program, he or she can remain eligible for ETV-funded services until he or she reaches the age of 23.

Beginning January 1, 2009, a youth will be eligible for the ETV program if he or she: (a) is currently in an out-of-home care placement; (b) is currently in subsidized guardianship or long-term kinship care if the youth had been in out-of-home care for at least six months after age 15; (c) was adopted after age 16 from an out-of-home care placement, subsidized guardianship, or long-term kinship care; or (d) left an out-of-home care placement, subsidized guardianship, or long-term kinship care at age 18.

The ETV funds must be used to help establish, expand, or strengthen post-secondary educational assistance for youths eligible for independent living services. An ILTP is developed for each youth

in the program, which includes: a plan for successful completion of secondary education; communication with secondary education counselors, officials, and support personnel; a plan for completion of required applications, tests, and financial aid forms; and a plan for providing support during post-secondary educational or training attendance. Youth participation is required in designing their program activities. In addition, certain requirements can be placed on the youths to remain in the program. These requirements, such as a minimum grade point average, are established by each program.

Each youth is eligible to receive an annual voucher equal to the lesser of \$5,000 or the total cost of attendance at an institution of higher education. Expenditures for "cost of attendance" may include, but are not limited to: (a) tuition, fees, and books; (b) room and board; (c) rental or purchase of required equipment, materials, or supplies; (d) allowance for books, supplies, and transportation; (e) required residential training; (f) special study projects; (g) tutors; (h) child care; and (i) testing required for entry to the program. A higher education institution is defined as one that: (a) admits as regular students only persons with a high school diploma or equivalent or admits as regular students persons who are beyond the age of compulsory school attendance; (b) awards a bachelor's degree or not less than a two-year program that provides credit towards a degree; (c) is a public or nonprofit institution; (d) is an accredited or pre-accredited program; and (e) provides at least one year of training towards gainful employment or is a vocational program that provides training for gainful employment and has been in existence for at least two years.

DCF Scholarship Program. The Department of Children and Families awards scholarships of up to \$5,000 for youth who have been in out-of-home care and are entering a degree, license, or certificate program. The scholarship awards may be used for tuition, fees, and books for youth that have been approved to attend an accredited post-secondary education or training institution. A youth is eligible

if he or she: (a) has been in out-of-home care in Wisconsin (includes foster home, treatment foster home, group home, RCC, or court-ordered kinship care) for at least six months after the age of 15; (b) has been in out-of-home care in Wisconsin for at least six months and adopted after the age of 15; or (c) has been in an out-of-home care placement in another state but becomes a Wisconsin resident before attending a Wisconsin post-secondary institution. In addition, the individual must be accepted into an institution of higher education at the time the application is submitted and be no more than 20 years of age, unless he or she is enrolled in a post-secondary program on his or her 21st birthday, in which case the individual remains eligible until he or she is 23 years old. Youths may apply and receive funding more than one time over the course of their education or training.

Beginning January 1, 2009, a youth will be eligible for the DCF scholarship program if he or she: (a) is currently in an out-of-home care placement; (b) is currently in subsidized guardianship or long-term kinship care if the youth had been in out-of-home care for at least six months after age 15; (c) was adopted after age 16 from an out-of-home care placement, subsidized guardianship, or long-term kinship care; or (d) left an out-of-home care placement, subsidized guardianship, or long-term kinship care at age 18. Any youth who had become eligible for the DCF scholarship program under the old eligibility requirements prior to January 1, 2009, will continue to be eligible for services until age 21.

In 2008, DCF awarded \$799,700 FED in scholarships to 192 youths. The federal funds are available under the ETV federal grant award. The DCF scholarship program received a total of 262 scholarship applications, of which 224 were approved, 20 were denied, and 18 were incomplete and not yet resubmitted when the scholarships were awarded. It should be noted that some youths sent in separate applications for each semester and some youths were awarded a scholarship but either did not go to college or the college did not send an invoice for payment. As a result, the number of scholarships provided and those approved

differ.

Funding to Support Costs of Providing Child Welfare Services

With the exception of the costs of providing child welfare services in Milwaukee County and serving children in state foster care, counties support the costs of providing child welfare and child protective services with a combination of state, federal, and local funding. In 2007, counties and the Bureau of Milwaukee Child Welfare reported spending \$257.7 million for services for children and families. This figure includes local, state, and federal funding.

Children and family aids, formerly part of community aids, is the primary source of state and federal funding to counties for child welfare services, other than services provided in Milwaukee County. DCF also allocates funding to counties and tribes under the kinship care program for children placed in the care of a relative and for whom no foster care payment is made. In addition, other federal funds support families and support youth as they age out of the out-of-home care system. These funding sources are described in further detail below. Funding for child welfare services (not including juvenile justice) in Milwaukee County is discussed in the BMCW section of this paper.

Children and Family Aids. The children and family aids program is comprised of state and federal funds that are distributed by DCF to counties for the provision of human services related to child abuse and neglect and to unborn child abuse, including prevention, investigation, and treatment services. In 2008-09, the total amount of funding budgeted for children and family aids is approximately \$67.9 million.

Counties provide funding to match a portion of the children and family aids allocation, as required under state law. However, most counties provide funding above the match requirement. Counties

reported spending \$432.6 million in county tax levy for human services in calendar year 2007. Of this amount, \$81.9 million was reported for abused and neglected children and for children and families.

Children and family aids includes a basic allocation, referred to as the children and families allocation (CFA), and one categorical allocation. The CFA includes general purpose revenues (GPR) and federal funding available under Titles IV-E and IV-B (Part I) of the Social Security Act, the social services block grant (SSBG), and the temporary assistance for needy family (TANF) block grant. These federal funding sources are described below. In calendar year 2009, the CFA is budgeted \$67.6 million (all funds), or approximately 99.1% of the total children and family aids funding.

Children and family aids was formerly part the community aids program, which provided federal and state funds that were distributed by DHFS to counties for the provision of human services in two broad, statutorily defined functional areas: (1) social services for low-income persons and CHIPS cases; and (2) services for persons with needs relating to mental illness, substance abuse, or developmental disabilities. When the child welfare program was transferred from DHFS to DCF on July 1, 2008, the former community aids funding was divided into two parts: (a) funding distributed to counties by DHS, also known as community aids; and (b) funding distributed to counties by DCF, now known as children and family aids.

Title IV-E. Title IV-E of the federal Social Security Act provides entitlement matching funds to states for a portion of the cost of services for Title IV-E eligible children who are placed in out-of-home care and the associated administrative, child placement, and training costs. In FFY 2008, Wisconsin received \$90.6 million FED in Title IV-E funding.

Title IV-E funds are distributed to counties through the children and family aids CFA. In 2008-09, \$28.8 million in federal Title IV-E funds are budgeted in the children and family aids CFA. This

amount is determined through the state budget process based on the total funding need for community aids and children and family aids and is not allocated to each county based on the number of children in out-of-home care in that county.

Until calendar year 2010, counties, excluding Milwaukee County, may receive additional Title IV-E funds if the state collects more Title IV-E funds than the amounts budgeted for children and family aids and other budgeted commitments. Of these excess funds, 50% are distributed to counties as incentive funds. The remaining 50% is retained by the state as income augmentation funds and is distributed according to the process specified under s. 48.567 of the statutes. Beginning with calendar year 2010, the state does not anticipate receiving any excess Title IV-E funds.

Of the excess Title IV-E funds distributed to counties, at least 50% must be used to provide prevention services for children who are at risk of abuse or neglect. Counties cannot use these funds to supplant any other funds expended by the county for services and projects to assist children and families.

In calendar year 2008, DHFS distributed \$9.8 million in Title IV-E incentive funds to counties, the same amount as distributed in calendar years 2006 and 2007. However, in calendar year 2009, DCF will distribute \$7.1 million in Title IV-E incentive funds to counties, a reduction of 28%. The allocations to counties for calendar year 2009 are shown in Attachment 4. DCF indicates that the amount of Title IV-E matching funds earned by the state has decreased due to: (a) federal policy changes under the federal Deficit Reduction Act (DRA) of 2005; (b) audit practices implemented through the IV-E eligibility review process; and (c) ongoing federal review of state IV-E claiming practices. Therefore, no additional incentive funds will be distributed to counties after calendar year 2009.

For costs incurred on behalf of children in Milwaukee County, Title IV-E funds are budgeted directly in the DCF appropriation for the Bureau of

Milwaukee Child Welfare. This amount is based on the Bureau's IV-E eligible activities, including administrative costs and maintenance costs based on the number of children in out-of-home care. The state also receives Title IV-E funds on behalf of children with special needs awaiting adoption or who have been adopted. These Title IV-E funds are budgeted directly for the state foster care and adoption assistance program and the federal amount for both of these programs is based on projected caseloads. In addition, some Title IV-E revenue is distributed to counties through the youth aids program allocation from the Department of Corrections on behalf of children in the juvenile justice system; to the University of Wisconsin through the training partnerships program; and to counties for local operational costs related to the electronic Wisconsin statewide automated child welfare information system (eWISACWIS), foster parent training, and legal services including support for 7.5 child welfare state-employed assistant district attorneys located throughout the state.

The level of federal funding that DCF can claim is based on a number of factors, including the number of IV-E eligible children and the level of reimbursement.

IV-E Eligibility. Title IV-E eligibility is determined when the child leaves the home of his or her parents or caretaker. The state eligibility unit (SEU) and the Milwaukee eligibility unit (MEU), which are operated by MAXIMUS, Inc., under contracts with DCF, recommend each child's eligibility under Title IV-E, based on information available from counties and tribes and in court documents, which is then reviewed and approved by DCF staff. Once a child is determined initially eligible, Title IV-E eligibility must be redetermined annually for the child over the duration of the out-of-home care episode from removal to discharge from out-of-home care. If a child is determined not eligible, then the child is not IV-E eligible for the duration of the out-of-home care episode. A new IV-E eligibility determination must be conducted if the child reenters out-of-home care after being discharged from another out-of-home care placement.

Except for special needs adoptions, Title IV-E eligibility requirements include meeting certain financial eligibility criteria that were in effect in July of 1996 under the former AFDC program. The federal Fostering Connections to Success and Increasing Adoptions Act of 2008 eliminates the AFDC requirement for special needs adoptions over a nine-year period, beginning October 1, 2010, with older children and those who have spent at least 60 consecutive months in care, and their siblings, being eligible first. Once fully phased in, IV-E eligibility for adoption assistance will be based solely on children meeting special needs criteria and having the required court findings made.

Other eligibility requirements include: (a) the removal and foster care placement be based on a voluntary placement agreement signed by the child's parents or legal guardians and the child welfare agency or on a judicial determination that remaining in the home would be contrary to the child's welfare, within certain time frames as specified under federal law; (b) reasonable or active efforts were made to prevent the removal of the child from the home or to return the child to his or her home; and (c) the care and placement of the child are the responsibility of specified public agencies.

The IV-E eligibility rate is the number of IV-E eligible children in Wisconsin as a percent of the total number of children in out-of-home care or adoptive placements statewide. Federal regulations define who is included in each of these categories. As of September of 2008, approximately 36% of children in out-of-home care in Milwaukee County and 22% of children statewide were IV-E eligible.

IV-E Reimbursability. Title IV-E reimbursement is provided to fund 50% of the costs of administration and placement services and up to 75% of certain training costs. Maintenance payments intended to cover the costs of food, shelter, clothing, daily supervision, child care, school supplies, general incidentals, liability insurance for the child, and reasonable travel to the child's home for visits are reimbursed at the same rate as most services provided under the state's MA program, which is

currently approximately 59%.

States receive reimbursement for children who are IV-E eligible and reimbursable. Reimbursability is determined monthly and is contingent upon the state agency maintaining responsibility for placement and care, complying with IV-E case requirements, and the placement being in a licensed foster home, treatment foster home, group home, or RCC.

The claim for reimbursement under Title IV-E is based on information reported by counties, tribes, and BMCW. Placement costs are reported through eWISACWIS and administrative activities are determined through a random moment time study. The random moment time study involves DCF or a contracted staff worker calling county child welfare caseworkers to determine if the caseworker's current activity is eligible for reimbursement under Title IV-E. From this quarterly time study, DCF can determine the percentage of time caseworkers spend on IV-E eligible activities, which is the basis for the state's claim for federal reimbursement of administrative costs.

Title IV-B, Part I. Federal funding available under Title IV-B, Part I of the Social Security Act is allocated to states as a sum-certain allocation to fund services that protect and promote the welfare and safety of children, including services that: (a) address problems that may result in neglect, abuse, exploitation, or delinquency of children; (b) prevent the unnecessary separation of children from their families and restore children to their families, when possible; (c) place children in adoptive families when appropriate; and (d) assure adequate out-of-home care resources when children cannot return home or be placed for adoption. States are required to provide a 25% funding match to the federal grant. Federal law limits the amount of the grant and matching funds that can be used for foster care maintenance payments and adoption assistance payments. The June, 2008, state plan notes that Wisconsin does not use Title IV-B, Part I for foster care maintenance payments.

In FFY 2007-08, Wisconsin received approxi-

mately \$4.9 million FED under Title IV-B, Part I. Of this amount, DHFS distributed approximately \$3.2 million to counties as part of the community aids basic county allocation in calendar year 2008, the Department of Corrections distributed approximately \$940,800 to counties under the youth aids program, and DHFS/DCF retained approximately \$797,700 to support other child welfare programs and state administrative costs.

TANF. Counties, other than Milwaukee County, and most tribes are reimbursed for the costs of kinship care payments separately from children and family aids. In Milwaukee County, DCF makes kinship care payments to eligible relatives. Kinship care payments are funded with federal temporary assistance for needy families block grant funds.

To the extent TANF funds are not sufficient to fund kinship care costs, counties and tribes can either support these costs from other state aids, local property tax, or other funds or place cases on waiting lists. However, it is DCF policy that cases in any county or tribe under a court order for placement with a relative cannot be placed on waiting lists. Therefore, counties and tribes may only place cases without a court order for placement with the relative on waiting lists.

The kinship care program was created under provisions of 1995 Wisconsin Act 289, which created the Wisconsin Works program to replace the former AFDC program. Under AFDC, non-legally responsible relatives who provided care for children were eligible for an AFDC payment based on the income of the child.

Title IV-B, Part II - Promoting Safe and Stable Families. Funding available under Title IV-B, Part II is intended to promote safe and stable families through family preservation, family support services, family reunification, and adoption promotion and support services. The federal Department of Health and Human Services (DHHS) allocates funding to states based on each state's relative share of children whose families receive food

stamps (FoodShare in Wisconsin). Each state must meet a 25% match requirement.

In FFY 2007-08, Wisconsin received \$4,851,400 in Title IV-B, Part II funding. States are required to allocate at least 20% of their Title IV-B, Part II funding to each of the four categories of activities: family preservation, family support, family reunification, and adoption promotion and support. These categories are defined in Appendix A under the "Family Preservation and Support Services Program."

DCF allocates Title IV-B, Part II funds to counties for family preservation, family support, and family reunification activities. Attachment 5 to this paper identifies the Title IV-B, Part II allocations to counties in 2009. In addition, a portion of the federal allocation is budgeted for the state special needs adoption program, state administrative costs, BMCW network services, and distribution to tribes.

Chafee Foster Care Independence Funds. Federal funding is also provided to states to prepare youth to live independently after leaving out-of-home care and to provide transitional services to youth aging out of out-of-home care. The independent living program is described above.

The federal funding is a capped entitlement. Each state receives funding based on its share of the nation's out-of-home care population, as reported in the most recent year for which information is available. Each state is required to provide matching funds equal to 20% of the federal allocation. In FFY 2007-08, Wisconsin received \$1,983,400 in independent living funds. The state's foster care caseload declined from 2000 to 2006, which has reduced the Chafee allocations in Wisconsin.

In addition to Independent Living funds, federal funding is also provided to help youths transition to self-sufficiency through the education and training voucher program. Wisconsin received \$668,100 FED in 2007-08 in ETV funds for

distribution to counties, tribes, and BMCW.

Adoption Incentive Funds. States may receive adoption incentive payments if the number of children adopted from the child welfare system increases from FFY 2006-07. For each additional adoption, the state receives a payment of \$4,000. If the child meets the criteria for special needs, the state receives an additional \$4,000 payment; if the child is over nine years old, the state receives an additional \$8,000 payment. In addition, if a state has its highest ever foster child adoption rate, the state receives \$1,000 for each child above the number of children calculated using the former highest child adoption rate.

Wisconsin has not earned any adoption incentive payments since FFY 2003-04 because the number of adoptions has not exceeded the number of adoptions in 2002 (the former baseline established to earn the incentive payments). As noted above, the new baseline to calculate future adoption incentive payments will now be FFY 2006-07.

Social Services Block Grant. The federal social services block grant is distributed to states on the basis of population to provide services directed toward at least one of five goals: (a) to prevent, reduce, or eliminate economic dependency; (b) to achieve or maintain self-sufficiency; (c) to prevent neglect, abuse, or exploitation of children and adults; (d) to prevent or reduce inappropriate institutional care; and (e) to secure admission or referral for institutional care when other forms of care are not appropriate. States may transfer up to 10% of their allotment for any fiscal year to preventive health and health services, alcohol and drug abuse services, mental health services, maternal and child health services, and low-income home energy assistance block grants. States can also use funds for staff training, administration, planning, implementing, or administering the state's social service plan.

States may not use SSBG funds for: (a) medical care except family planning, rehabilitation, and certain detoxification services; (b) land purchases,

construction, or major capital improvement; (c) most room and board expenses, except emergency short-term services; (d) educational services generally provided by public schools; (e) most social services provided in and by employees of hospitals, nursing homes, and prisons; (f) cash payments for subsistence; (g) child day care services that do not meet state and local standards; and (h) wages to individuals as a social service, except wages of welfare recipients employed in child day care.

In 2007-08, \$31,374,100 in federal SSBG funds are budgeted in DHS, of which \$4,394,100 is transferred to DCF to support the children and family aids CFA and \$2,010,900 is budgeted for state operations in DCF.

Other Funding Sources. In addition to the funding sources already identified in this section, children in the child welfare system may receive services funded through other programs or sources. For example, children in out-of-home care are eligible for medical assistance, which pays for the child's health services. In addition, some case management activities conducted by child welfare caseworkers are not eligible for reimbursement under Title IV-E, but are eligible under MA. Medical assistance payments for these services are referred to as "targeted case management" (TCM) funds. In 2008-09, \$3,944,500 is budgeted in DCF from this source. Under the federal Deficit Reduction Act of 2005, TCM funds are no longer available for child welfare activities, beginning in 2009. However, Congress imposed a moratorium on implementation of this regulation regarding TCM funds until April, 2009. DHFS had stopped claiming TCM funds in March, 2008, but DHS will now resume claiming TCM funds until March, 2009.

Many children in the child welfare system have developmental, physical, emotional, or mental disabilities. Some of the costs of care for these children are supported by programs that serve people with these disabilities, including the community integration program and SSI. Additional information on these programs can be found in two other information papers prepared by the Legislative Fiscal Bu-

reau -- "Medical Assistance, BadgerCare Plus, SeniorCare, and Related Programs," and "Supplemental Security Income Program."

Bureau of Milwaukee Child Welfare

Beginning January 1, 1998, DHFS became responsible for administering child welfare services in Milwaukee County. Previously, the Milwaukee County Human Services Department (MCHSD) had this responsibility. DHFS took over this role as required by legislation enacted in the 1995 and 1997 legislative sessions in response to a lawsuit filed against the state and Milwaukee County. The suit alleged that the state and the county were in violation of federal law and that the administration of child welfare services in Milwaukee County failed to keep children safe.

As noted above, beginning on July 1, 2008, the child welfare program, including BMCW, was transferred to DCF from DHFS pursuant to provisions in 2007 Wisconsin Act 20. DCF is now responsible for administering child welfare services in Milwaukee County.

This section of the paper provides information on the lawsuit and subsequent settlement, a description of the child welfare system in Milwaukee County as administered by DCF, and how these services are funded.

ACLU Lawsuit. On June 1, 1993, the American Civil Liberties Union (ACLU) and Children's Rights Project (now Children's Rights, Inc.) filed an action in Federal District Court for the Eastern District of Wisconsin on behalf of approximately 5,000 children who were receiving, or should have been receiving, child welfare services in Milwaukee County. The Milwaukee County Executive, the Director of MCHSD, the Governor, and the Secretary of the former Department of Health and Social Services were named as defendants.

The complaint was a broad-based challenge to the administration of the Milwaukee County child welfare system, alleging that the county, among other things, failed to investigate complaints of abuse and neglect, failed to provide services to avoid unnecessary out-of-home placements, failed to provide appropriate out-of-home placements, and failed to terminate parental rights and secure permanent placements for children who could not be returned to their birth families. The complaint alleged that the state failed to adequately supervise and fund the Milwaukee County system.

In response to the lawsuit, during the 1995 legislative session, Wisconsin Acts 27 and 303 initiated the state's assumption of responsibility for providing child welfare services in Milwaukee County. 1995 Wisconsin Act 27 directed DHFS (as the Department of Health and Social Services was renamed the Department of Health and Family Services) to submit a proposal to the Legislature by April 1, 1996, that would outline a plan for the Department to assume responsibility for operation of the Milwaukee County child welfare system. Subsequently, 1995 Wisconsin Act 303 provided initial funding, positions, and statutory authority for DHFS to plan for providing child welfare services in five sites in Milwaukee County, beginning January 1, 1998. These sites were combined to three regions in 2006.

After the enactment of 1995 Wisconsin Act 27, the parties to the lawsuit entered into settlement negotiations based on the possibility that the state would be assuming responsibility for child welfare services in Milwaukee County. Negotiations broke down in February, 1996, and the parties were prepared to go to trial.

However, the Court dismissed much of the lawsuit in January of 1998. This dismissal was partially based on grounds that the state's assumption of child welfare services in Milwaukee County made much of the case moot and also that, for many of the plaintiffs' allegations, the federal law under which the lawsuit was filed does not create privately enforceable rights. Privately enforceable

rights are rights that give an individual the right to sue in order to have the government comply with provisions in law. Therefore, the Court found that the plaintiffs had no standing.

The portion of the case that remained outstanding related to alleged violations of the federal Adoption Assistance and Child Welfare Act, (AACWA), which requires states to provide a written permanency plan for every child in out-of-home care and for a periodic review of those permanency plans. The Court found that this federal requirement does create a privately enforceable right for the creation and periodic review of a permanency plan, but not for actual implementation of the plan. The Court said that on this basis, the plaintiffs were entitled to further hearings and a possible trial to enforce this right.

Settlement Agreement. The federal court approved a three-year settlement agreement in December of 2002, effectively closing the case, although the state is subject to arbitration or court intervention if non-compliance issues arise. The settlement required DHFS to attain specified outcomes on or before January 1, 2006, for permanence, safety, and child well-being for children in out-of-home care in Milwaukee County. These areas are described in more detail below:

Permanence. The settlement required BMCW to negotiate in good faith as soon as practicable with the Milwaukee County District Attorney to ensure adequate legal representation for the prosecution of TPR petitions, consistent with federal Adoption and Safe Families Act (ASFA) requirements. By January 1, 2004, 65% of children in out-of-home care in Milwaukee County who had been in care for 15 of the last 22 months must have had a TPR petition filed on their behalf, or an exception documented in their case, by the end of the 15th month in care. The percentages increased to 75% by January 1, 2005, and to 90% by January 1, 2006.

For children who have been in out-of-home care for more than 15 of the last 22 months, and for whom a TPR petition has not been filed or an

exception has not been documented in their case, a TPR petition must have been filed on their behalf or an exception documented in their case according to the following percentages: (a) 75% by January 1, 2004; (b) 85% by January 1, 2005; and (c) 90% by January 1, 2006.

Under the settlement agreement, if the state obtained a federal Title IV-E waiver allowing subsidized guardianship before January 1, 2003, no more than the following percentages of children in BMCW out-of-home care were allowed to be in care for more than 24 months: (a) 40% by January 1, 2004; (b) 30% by January 1, 2005; and (c) 20% by January 1, 2006. Since the state obtained a Title IV-E waiver after January 1, 2003, the percentages were 40%, 35%, and 25% respectively.

The settlement agreement also required that, in 2004, 65% of children who were reunified with their parents be reunified within 12 months of entering out-of-home care. This percentage increased to 71% in 2005.

In addition, the settlement agreement required that by January 1, 2004, at least 20% of children for whom an adoption is finalized must have exited BMCW out-of-home care within 24 months after their removal from their homes. This percentage increased to 25% by January 1, 2005, and 30% by January 1, 2006.

Safety. The settlement agreement required that by January 1, 2004, no more than 0.70% of children in out-of-home care would be victims of substantiated abuse or neglect allegations by a foster parent or staff of a licensed facility. The percentages fell to 0.65% by January 1, 2005, and 0.60% by January 1, 2006.

Independent Investigations. By January 1, 2004, at least 80% of the allegations of abuse or neglect by foster parents or staff of a licensed facility must have been: (a) referred for an independent investigation within three business days; and (b) assigned to an independent investigator within three business days of the receipt of the referral. In addition,

a substantiation determination had to have been made within 60 days of the receipt of the referral to the independent investigation agency for 80% of these cases. The percentages increased to 85% by January 1, 2005, and 90% by January 1, 2006

Child Well-Being. The settlement also placed requirements on the contract provisions, caseworker-to-case ratios, and the use of shelters as placements.

Under the settlement, the caseloads of ongoing caseworkers may not exceed an average of 11 family cases per case-carrying caseworker per site. This was phased in incrementally and became fully effective on January 1, 2004, and enforceable on April 1, 2004. BMCW is required to include a holdback provision in the caseworker contracts if the caseworkers do not meet 90% compliance with monthly face-to-face visits with the children in BMCW's custody.

Under the settlement, no children may be placed in a shelter care facility after December 31, 2003. By December 31, 2003, the settlement required BMCW to develop diagnostic/assessment centers for children over 12 years of age who need additional assessment to determine the appropriate placement. A placement in these centers may not exceed 30 days, but may be extended for another 30 days as long as the total duration of the placement does not exceed 60 days. BMCW reports that shelter care placements were not used after December 31, 2003, and diagnostic/assessment centers were implemented.

By January 1, 2004, at least 80% of children were required to have three or fewer placements after January 1, 1999, during their current episode in BMCW custody. By January 1, 2005, the required percentage increased to 82% and by January 1, 2006, 90%.

Reports. The settlement requires BMCW to provide a number of reports on the items mentioned previously and a variety of additional statistics, as well as a comprehensive case review at least once annually.

Performance of BMCW. Attachment 6 provides a complete overview of the performance of BMCW on each of the settlement agreement factors during each of the three one-year periods.

Areas Not in Compliance. In Period 1 (2003), BMCW met all of the requirements of the settlement agreement except: (a) the settlement required that no more than 40% of children be in out-of-home care for more than 24 months, and 44.2% of children were; (b) the settlement required that at least 20% of children who had adoptions finalized be adopted within 24 months, and 14.2% were, and (c) the settlement required that at least 80% of children in OHC have three or fewer placements, and 75.9% did.

In Period 2 (2004), BMCW did not meet the following requirements of the settlement agreement: (a) the settlement required that at least 65% of children who enter into out-of-home care be reunified with their families within 12 months, and 63% were; (b) the settlement required that at least 25% of children who had adoptions finalized be adopted within 24 months, and 15.5% were; (c) the settlement required that no more than 0.65% of children were to have substantiated abuse or neglect allegations by a foster parent or staff member in a facility requiring licensing, and 0.85% did; and, finally, (d) the settlement required that at least 82% of children in out-of-home care have three or fewer placements, and 72.1% did.

In Period 3 (2005), BMCW did not meet the following requirements of the settlement agreement: (a) the settlement agreement required that at least 90% of children who were in out-of-home care for 15 of the past 22 months have a termination of parental rights petition filed on their behalf, and 29.0% did; (b) the settlement required that at least 30% of children who had adoptions finalized be adopted within 24 months, and 21.7% were; (c) the settlement required that no more than 0.60% of children were to have substantiated abuse or neglect allegations by a foster parent or staff member in a facility requiring licensing, and 0.81% did; and (d) the settlement required that at least 90% of

children in out-of-home care have three or fewer placements, and 72.0% did.

The measurement methodology for the first permanency standard (that children in out-of-home care for 15 of the past 22 months have a termination of parental rights filed on their behalf) was changed in 2005 in response to a report by the Legislative Audit Bureau. Although it appears as though the BMCW performed dramatically worse on this measure in comparing Period 3 to Period 2 (29% of children in Period 3 versus 88.2% of children in Period 2), the way in which this performance standard was measured changed, thus explaining the difference. Although the reports document that BMCW was in compliance with this standard through Period 2, under the new methodology, it is likely that BMCW would not have been in compliance during any of the periods.

Based on the settlement agreement, BMCW was no longer subject to enforcement for the standards that were met at the end of the three-year period and were in compliance for the most recent two consecutive six-month intervals. BMCW continues to report on the progress of the standards that have not yet been met for two consecutive six-month intervals. These standards include all of the four standards that were not met in 2005 plus the requirement of reunification with the family within 12 months.

In 2006, BMCW did not meet the following standards: (a) the settlement agreement required that at least 90% of children who were in out-of-home care for 15 of the past 22 months have a termination of parental rights petition filed on their behalf, and 79% did; and (b) the settlement required that at least 90% of children in out-of-home care have three or fewer placements, and 73% did.

BMCW did not meet the following standards in 2007: (a) the settlement agreement required that at least 90% of children who were in out-of-home care for 15 of the past 22 months have a termination of parental rights petition filed on their behalf, and 85% did; (b) the settlement required that at least

71% of children who enter into out-of-home care be reunified with their families within 12 months, and 69% were; (c) the settlement required that no more than 0.60% of children were to have substantiated abuse or neglect allegations by a foster parent or staff member in a facility requiring licensing, and 0.93% did; and (d) the settlement required that at least 90% of children in out-of-home care have three or fewer placements, and 75% did.

A progress report for the first six months of 2008 shows improvement. BMCW did not meet the following standards in the first six months of 2008: (a) the settlement required that at least 71% of children who enter into out-of-home care be reunified with their families within 12 months, and 66% were; and (b) the settlement required that at least 90% of children in out-of-home care have three or fewer placements, and 76% did. These standards will continue to be monitored.

Oversight and Administration of BMCW. Child welfare services are provided by BMCW in the DCF Division of Safety and Permanence. Services are provided from a central administrative site located in the City of Milwaukee and from three service-delivery areas located throughout the county: region 1 covers the northeastern part of the county; region 2 covers the northwestern part of the county; and region 3 covers the southern part of the county.

Management and Administration. BMCW is authorized 175 positions to administer child welfare services in Milwaukee County. DCF also contracts with private vendors for over 325 staff who provide services to families in the child welfare system.

Management staff in BMCW consists of a director, a deputy director, three section chiefs (administrative services section chief, policy development and quality improvement section chief, and access and initial assessment section chief), and a manager at each of the three neighborhood service delivery sites. The Bureau Director is responsible for developing, implementing, and overseeing major

child welfare reform activities in Milwaukee County and building community support for the system, as well as developing and maintaining strong working relationships with the juvenile court, health, corrections, juvenile justice, and school systems, private providers, and community organizations. This position has overall responsibility for the Bureau and serves as the primary contact for contract negotiations with vendors.

Milwaukee Child Welfare Partnership Council. 1995 Wisconsin Act 303 established the Milwaukee Child Welfare Partnership Council as a body to formulate suggestions and make recommendations to DHFS (now DCF) and the Legislature regarding child welfare services in Milwaukee County. The Council consists of: (a) three members of the Milwaukee County Board nominated by the Milwaukee County Executive; (b) two state representatives, one appointed by the Speaker of the Assembly and one appointed by the Assembly Minority Leader; (c) two state senators, one appointed by the Senate President and one appointed by the Senate Minority Leader; (d) 10 state residents, no fewer than six of whom are residents of Milwaukee County; and (e) two members nominated by a children's services network established in Milwaukee County as required under the W-2 program. The Governor appoints the chairperson of the Council from the 10 public members. Members from the Milwaukee County Board, public members, and members appointed by the W-2 children's services network are appointed for three-year terms.

With regard to child welfare services in Milwaukee County, the Council is required to formulate suggestions and make recommendations on the following:

- Policies and plans for the improvement of the child welfare system;
- Measures for evaluating the effectiveness of the child welfare system, including outcomes measures;

- Funding priorities for the child welfare system; and

- Innovative public and private funding opportunities for the child welfare system.

The Council must also advise DCF in planning, and providing technical assistance and capacity-building to support a neighborhood-based system for the delivery of child welfare services in Milwaukee County.

In addition to the executive committee, the Council has the following five subcommittees: (a) intake, initial assessment, and safety services; (b) adoption and foster care; (c) cross-systems; (d) health care; and (e) public policy. These subcommittees meet monthly to discuss systemic issues in their areas in a community forum. The full Council meets quarterly.

Organization of Child Welfare Services in Milwaukee County. The child welfare system in Milwaukee County runs parallel with the systems in the other counties in the state. Table 7 compares the two systems.

Attachment 7 to this paper illustrates the decision-making process for child welfare cases in Milwaukee County. The system and processes in BMCW are described in the next sections of this paper.

Access Unit. The access unit receives all incom-

ing reports of possible child abuse or neglect. The unit of nine state-employed social workers and two state-employed supervisors, located at the central administrative site, receives intake referrals and gathers information from the referral source to determine the urgency of the referral. Referrals screened into the system by the access unit are either referred to the initial assessment unit for further investigation, or are referred to Community Impact Programs, the agency that performs independent investigations under contract with the state. Independent investigations are conducted if there is a possibility of a conflict of interest in cases where BMCW conducts the assessment. For example, a report alleging abuse or neglect in a foster home would be referred for independent investigation.

Between January and June of 2008, the intake unit received an average of 2,913 calls per month. Of these referrals, on average, the intake unit screened 818 into the system for further investigation. The remaining referrals were screened out for various reasons, such as the referral was not an appropriate referral or the referral was for a family or child for which a referral had already been received.

Staff is available from 8:00 am until 12:30 am, with the first shift available from 8:00 am until 4:30 pm and the crisis response team available from 4:30 pm until 1:00 am. If all of the intake lines are in use during these times, the calls are forwarded to an outside vendor (All City Communications) that,

Table 7: Comparison of the Child Welfare System in Wisconsin Between Milwaukee County and Non-Milwaukee Counties

| | Counties other than Milwaukee County | Milwaukee County |
|-----------------|--|---|
| Child Welfare | County Human or Social Services Department | DCF, Bureau of Milwaukee Child Welfare |
| Funding Sources | Community Aids, Title IV-E incentive funds, Independent Living funds, Title IV-B (2) funds, county funds | GPR and federal funds (including Independent Living, Title IV-B (2) funds), Milwaukee County's contribution, TANF, targeted case management funds |
| Adoption Unit | Special Needs Adoption Program (state) | Adoption unit in BMCW |

after taking down basic information, sends the information to the intake office. The intake supervisor then assigns the call to an intake worker who returns the call and collects the information.

Between 12:30 am and 8:00 am Monday through Friday and on Saturday, Sunday, and holidays, BMCW contracts with All City Communications to receive calls. The vendor shares the information gathered from the referral source with an on-call state-employed social worker, who then determines whether the referral is an emergency and requires an immediate response or can be addressed the following business day. During Monday through Thursday, there is one supervisor and two access/initial assessment social workers, to respond to urgent calls. On the weekends and holidays a rotation is used so that one supervisor and four access/initial assessment social workers are on-call for each weekend/holiday shift. Shifts run in a 12-hour block. The supervisors and intake/initial assessment social workers are on call on a rotating basis.

Family Intervention Support and Services (FISS). BMCW provides services when a parent, rather than the state or county, seeks a petition for the court to assume authority for an adolescent under CHIPS criteria. These are referred to as *pro se* petitions. These situations involve adolescents who are considered uncontrollable by their parents, including adolescents who are habitual truants, are habitual runaways, or engage in similar noncompliant behavior. The legislation enacting the transfer of child welfare services to DHFS did not specify that BMCW would provide intake services for these cases. However, the Milwaukee County Children's Court found the statutory language unclear regarding responsibility for these adolescents and ordered BMCW to provide intake services.

BMCW contracts with Perez Pena, Ltd. to administer the FISS program intake division, which conducts the assessments of *pro se* cases. The FISS program is intended to strengthen the parents' ability to carry out their responsibilities to care for, supervise, and support their children at home,

school, and in the community. Before a *pro se* case goes to court, the FISS unit must assess a family's functioning and the adolescent's school attendance and participation, mental health, alcohol and drug concerns, and social relationships and activities. The FISS program intake division provides a brief assessment and does not provide a direct service.

Based on the assessment, and the family's identified level of need, the family and adolescent may: (a) receive services from general community resources; (b) return to Milwaukee County Children's Court for additional pre-CHIPS or pre-delinquent services; (c) be referred to BMCW for additional services; or (d) be referred to the ongoing FISS services unit administered by the Milwaukee County Behavioral Health Division. Between January and July of 2008, the FISS unit, on average, received 24 referrals per month, had 21 families complete services each month, and had 55 cases open at the end of each month.

Initial Assessment Unit. Each of the three service-delivery regions has a unit of state-employed staff who conduct initial assessments on families that are the subject of a child abuse or neglect referral. Each region has 24 to 28 state-employed social workers and six state-employed supervisors to make these determinations. Three support staff provide clerical support to each region.

These units, which receive referrals from the access unit, are responsible for determining: (a) if child abuse or neglect has already occurred, who did it, and the extent and the severity of the abuse or neglect if it has occurred; (b) the level of impending danger to a child in the family of future abuse or neglect; and (c) the types of services to be included in a safety plan for a child in order to prevent abuse or neglect from occurring in the future. These determinations are based on interviews with family members, home visits, and other contacts in order to determine the level and nature of child, caregiver, and family functioning, and identification of any factors within the family that place a child at risk.

If staff determines that a child is not safe and is at risk of further abuse or neglect, the case is opened and staff determines whether the child can remain at home if the family receives safety services, or if the child needs to be removed and placed in out-of-home care. Otherwise, if staff determines the child is safe, the case is closed. If staff determines that a child can remain safely at home, they refer the family case for safety services. Cases with children removed and placed in out-of-home care are referred to the lead agency for ongoing case management. Between January and June of 2008, the initial assessment unit closed 2,974 cases and referred 285 cases for ongoing services.

Safety Services. Safety services are available to families where threats to child safety have been identified, but the assessment unit has determined that the child can remain at home safely if appropriate services are provided to the family. Families receive safety services until they are deemed safe.

DCF contracts for safety services coordinators at each of the three service-delivery sites. These vendors are responsible for developing a network of providers that provide the services identified in each family's safety plan. The vendor assigns each referral from the assessment unit to a safety service manager, who is then responsible for coordinating the provision of services among the vendor's network of providers, according to the family's safety plan. The safety services manager is also responsible for conducting weekly safety assessments and reassessments of threats to child safety of the families using a specific safety evaluation tool. As of January 1, 2009, the two safety services vendors are: (a) Children's Family and Community Partnership for regions 1 and 2; and (b) La Causa for region 3. La Causa has given its 120-day notice to terminate the contract. As a result, the La Causa contract will end in April, 2009. No vendor has yet been selected to replace La Causa.

Safety services can include: (a) supervision, observation, basic parenting assistance, social and emotional support, and basic home management;

(b) child care; (c) routine and emergency drug and alcohol services and screening; (d) family crisis counseling; (e) routine and emergency mental health services; (f) respite care; (g) housing assistance; and (h) transportation. Families receive services that are appropriate to their specific situations based on the safety plan.

Between January and June of 2008, the three safety services units received 372 referrals from the initial assessment unit, and, on average, 62 new cases were opened each month. In 2007, 1,255 families received safety services. In 2007, the average cost for safety services purchased by a vendor was \$831 per family, not including any services billed to MA. The average period during which the family received safety services in 2007 was 4.2 months. From January through June of 2008, 752 families received safety services.

Out-of-Home Care. DCF has contracted with vendors to serve as lead agencies in each of three regions to provide services to ongoing cases in out-of-home care. The contract includes funds for case management, ongoing services, and administration. The ongoing case management vendors, as of January 1, 2009, are Children's Family and Community Partnerships for regions 1 and 2, and La Causa for region 3. La Causa's contract will end in April of 2009. No new vendor has yet been selected to replace La Causa.

The lead agency is responsible for these ongoing cases until the case is closed. A case closes when the child is successfully reunified with the family, a termination of parental rights and subsequent adoption occurs, or a transfer of guardianship is made and the CHIPS case is dismissed by the court. Lead agencies are responsible for providing case management services and the provision of ongoing services necessary to achieve the objectives of the permanency plan. In addition, lead agencies are responsible for ensuring a child's safety while in out-of-home care.

Case Management Services. Case management services are provided for ongoing cases of children

in out-of-home care and their families. The lead agency is required to provide enough case managers such that there is one staff member for every 11 family cases. In addition, the lead agency must ensure that there is one supervisor for every six staff members. Ongoing case management services include the following:

- Continually re-assessing threats to child safety;
- Conducting a family assessment and developing a case plan to assemble services necessary to ameliorate any results of abuse or neglect;
- Assisting the family in changing core conditions that create safety and risk concerns with the family;
- Developing and implementing a plan to work toward reunification with the family or placement in another permanent home environment; and
- Preparing all necessary documentation for permanency plan reviews, extensions of out-of-home placement, court orders, and prosecution of termination of parental rights cases.

Ongoing Services. Ongoing services are provided to children and their families as required by the permanency plan developed for children in out-of-home care. These services are intended to assist the child and the family to achieve the goals identified in the permanency plan. Continuing services include: (a) parenting education, non-professional support and counseling, basic home management, and life skills education; (b) mental health, substance abuse, family, individual, group, and marital counseling; (c) substance abuse treatment; (d) child care; (e) respite care; and (f) transportation.

Between January and June of 2008, an average of 1,880 families received ongoing services each month. In 2007, 2,324 families received ongoing services and, for the period beginning January 1

through June 30, 2008, 2,148 families had received these services.

Contract Provisions. The lead agency contracts contain performance requirements, including specific performance targets, that may change from year to year. Under the terms of the 2008 contract, DCF reimburses the lead agencies for 100% of their expenses on a per case rate.

Out-of-Home Care Placement Costs. Between January and June of 2008, an average of 2,776 children were in out-of-home care each month. Children removed from their homes can be placed in foster homes, treatment foster homes, group homes, RCCs, or with relatives. The out-of-home care budget for 2008-09 is approximately \$40.8 million for the wraparound program (Wraparound Milwaukee, which provides services for families and children with serious mental health needs), temporary care, foster care, treatment foster care, group homes, RCCs, and subsidized guardianships. In 2008-09, kinship care benefits in Milwaukee County are budgeted at approximately \$11.9 million. Some of this funding, however, will fund payments for children who are eligible for kinship care but are not placed with the relative under a court-order (referred to as non-court-ordered kinship care).

Out-of-Home Care Placement Unit. BMCW contracts with Children's Service Society of Wisconsin to provide foster care and adoption licensing, placement, and support services. Staff includes two managers, 13 supervisors, 78 specialists, and three mentors to provide the licensing, placement, and support services. These services include the recruitment and licensing of foster families, identification, selection, and authorization of appropriate foster homes, treatment foster care homes, group homes, and RCCs for children, and ongoing educational services and support to foster families. Four specialists and one supervisor are dedicated solely to the recruitment of foster families.

Between January and June of 2008, there were an average of 663 active foster homes in Milwaukee

County. During the same period, 106 homes were newly licensed and 82 foster homes were closed.

Adoption Placement Unit. BMCW contracts with Children's Service Society to provide adoption placement services. Adoption placement services include concurrent planning with caseworkers, recruitment of potential adoptive families, home study assessments of potential adoptive families, case management services for children available for adoption, identification and selection of appropriate adoptive homes for children waiting for adoption, and supervision and support to an adoptive family during the adoption finalization period. In addition, this unit arranges for the payment of adoption assistance for eligible children. This contract is combined with the contract under the out-of-home care placement unit described above, and the employees for adoption placement are included in the totals above.

From January through June of 2008, there were 176 finalized TPR petitions and 138 finalized adoptions in Milwaukee County. In 2007, there were 226 finalized TPR petitions and 291 finalized adoptions.

Contract Monitoring and Performance Measurement. Quality assurance is provided by 10 program evaluation managers (PEMs) and two fiscal PEMs who report to their section chiefs, who, in turn, report to the Director of BMCW.

The PEMs are responsible for: (a) monitoring the implementation of management policies; (b) reviewing work of child welfare staff; (c) evaluating staff performance and recommending corrective action when required; (d) monitoring child welfare services with local agencies and courts; (e) monitoring compliance with state and federal laws, administrative rules, and policies; (f) evaluating program effectiveness; (g) recommending improvements, as necessary; (h) planning and monitoring consultation services; (i) maintaining and reporting program data; and (j) contract development and monitoring. The PEMs are located at the central administrative site. One program and one

fiscal PEM are assigned to each contract and program area. PEMs work as a team with BMCW management to address issues and develop work products.

Funding for BMCW. Table 8 identifies funding budgeted in 2007 Wisconsin Act 20 to DHFS (in 2007-08) and DCF (in 2008-09) to administer child welfare services in Milwaukee County in the 2007-09 biennium. It also includes additional funding provided in June, 2008, under section 13.10 of the statutes. State revenues, federal revenues (FED), and TANF are identified in the table. State revenues consist of GPR, MA targeted case management revenues, and estimates of the amount of third-party revenue received for children in out-of-home care. Federal revenues reflect funding received under Title IV-E. In 2008-09, DCF is allocated approximately \$2.6 million PR from third-party collections. Third-party collections represent revenue received for the support of children in out-of-home care, such as child support and SSI payments.

Operations funding supports the costs of state staff, BMCW's portion of eWISACWIS, rent, training, supplies and services, and other expenditures. Aids funding supports placement costs and vendor contracts for case management and ongoing services, safety services, adoption and out-of-home care placement services, independent investigations, safety evaluations, and prevention services.

County Contribution. Milwaukee County's annual contribution equals the amount of funding budgeted by the county in 1995 for child welfare services (\$69.3 million) less any revenues no longer available to Milwaukee County, such as funding provided under programs that have since been repealed (approximately \$10.4 million).

Milwaukee County is required to provide \$58,893,500 annually to DCF for the costs of providing child welfare services in Milwaukee County. Before 2001-02, the county could decide how it would provide these funds through a variety of state aid payments, including shared reve-

Table 8: Milwaukee Child Welfare Funding Summary, 2007-09 Biennium

| | 2007-08 | | | | 2008-09 | | | |
|---|---------------------|---------------------|--------------------|----------------------|---------------------|---------------------|--------------------|----------------------|
| | State Revenue* | FED | TANF | Total | State Revenue* | FED | TANF | Total |
| Placement Costs | | | | | | | | |
| Foster Care | \$6,439,700 | \$2,218,500 | \$0 | \$8,658,200 | \$6,421,200 | \$2,237,000 | \$0 | \$8,658,200 |
| Treatment Foster Care | 6,913,700 | 2,381,800 | 0 | 9,295,500 | 6,893,900 | 2,401,600 | 0 | 9,295,500 |
| RCCs | 2,597,100 | 402,500 | 0 | 2,999,600 | 2,593,800 | 405,800 | 0 | 2,999,600 |
| Group Homes | 4,081,500 | 632,600 | 0 | 4,714,100 | 4,076,200 | 637,900 | 0 | 4,714,100 |
| Subsidized Guardianship | 642,000 | 221,200 | 0 | 863,200 | 640,100 | 223,100 | 0 | 863,200 |
| Receiving and Assessment Homes | <u>3,284,600</u> | <u>0</u> | <u>0</u> | <u>3,284,600</u> | <u>3,284,600</u> | <u>0</u> | <u>0</u> | <u>3,284,600</u> |
| Subtotal | \$23,958,600 | \$5,856,600 | \$0 | \$29,815,200 | \$23,909,800 | \$5,905,400 | \$0 | \$29,815,200 |
| Service Costs | | | | | | | | |
| Wraparound Services | 9,407,100 | 937,500 | 0 | 10,344,600 | 9,399,300 | 945,300 | 0 | 10,344,600 |
| Safety Services | 0 | 0 | 5,205,000 | 5,205,000 | 0 | 0 | 5,205,000 | 5,205,000 |
| Ongoing Services | <u>8,368,700</u> | <u>0</u> | <u>426,300</u> | <u>8,795,000</u> | <u>8,368,700</u> | <u>0</u> | <u>426,300</u> | <u>8,795,000</u> |
| Subtotal | \$17,775,800 | \$937,500 | \$5,631,300 | \$24,344,600 | \$17,768,000 | \$945,300 | \$5,631,300 | \$24,344,600 |
| Vendor Costs | | | | | | | | |
| Case Management Contract | \$14,509,400 | \$3,687,800 | \$0 | \$18,197,200 | \$14,509,400 | \$3,687,800 | \$0 | \$18,197,200 |
| Out-of-Home Placement Unit | 4,195,600 | 1,104,400 | 0 | 5,300,000 | 4,195,600 | 1,104,400 | 0 | 5,300,000 |
| Foster Care Training and Recruitment | 635,700 | 167,300 | 0 | 803,000 | 635,700 | 167,300 | 0 | 803,000 |
| Adoption Contracts | 1,895,000 | 1,459,000 | 0 | 3,354,000 | 1,895,000 | 1,459,000 | 0 | 3,354,000 |
| Court Contracts | 965,100 | 167,100 | 0 | 1,132,200 | 965,100 | 167,100 | 0 | 1,132,200 |
| UW-Milwaukee Social Work | 222,400 | 0 | 0 | 222,400 | 222,400 | 0 | 0 | 222,400 |
| Milwaukee DA Supplement | 233,600 | 0 | 0 | 233,600 | 233,600 | 0 | 0 | 233,600 |
| Training Partnership Supplement | 369,200 | 0 | 0 | 369,200 | 369,200 | 0 | 0 | 369,200 |
| FISS Unit | 220,400 | 0 | 0 | 220,400 | 220,400 | 0 | 0 | 220,400 |
| Independent Investigations | 280,000 | 0 | 0 | 280,000 | 280,000 | 0 | 0 | 280,000 |
| Prevention Services Contract | 0 | 0 | 1,489,600 | 1,489,600 | 0 | 0 | 1,489,600 | 1,489,600 |
| Domestic Violence Education | 365,000 | 0 | 0 | 365,000 | 365,000 | 0 | 0 | 365,000 |
| Mentors | 296,900 | 78,100 | 0 | 375,000 | 296,900 | 78,100 | 0 | 375,000 |
| Kinship Care Payment Unit | 315,400 | 0 | 0 | 315,400 | 315,400 | 0 | 0 | 315,400 |
| Trust Fund Accounting Unit | 100,100 | 26,400 | 0 | 126,500 | 100,100 | 26,400 | 0 | 126,500 |
| EDS Child Hospital | 30,000 | 0 | 0 | 30,000 | 30,000 | 0 | 0 | 30,000 |
| Adoption Search | <u>50,000</u> | <u>0</u> | <u>0</u> | <u>50,000</u> | <u>50,000</u> | <u>0</u> | <u>0</u> | <u>50,000</u> |
| Subtotal | \$24,683,800 | \$6,690,100 | \$1,489,600 | \$32,863,500 | \$24,683,800 | \$6,690,100 | \$1,489,600 | \$32,863,500 |
| Additional Placement Costs (provided in June, 2008) | \$2,138,000 | \$0 | \$0 | \$2,138,000 | \$0 | \$0 | \$0 | \$0 |
| Total Aids Funding | \$68,556,200 | \$13,484,200 | \$7,120,900 | \$89,161,300 | \$66,361,600 | \$13,540,800 | \$7,120,900 | \$87,023,300 |
| Total Operations Funding | \$11,446,600 | \$5,069,500 | \$2,270,500 | \$18,786,600 | \$11,446,600 | \$5,069,500 | \$2,270,500 | \$18,786,600 |
| Grand Total | \$80,002,800 | \$18,553,700 | \$9,391,400 | \$107,947,900 | \$77,808,200 | \$18,610,300 | \$9,391,400 | \$105,809,900 |

*Includes GPR funding, third-party collections, MA targeted case management revenues, and Milwaukee County's contribution.

neue and community aids. 2001 Wisconsin Act 16 required Milwaukee County to make its \$58,893,500 annual contribution as follows: (a) through a reduction of \$37,209,200 from the amount DHFS distributed as the BCA under community aids (now distributed by both DCF and DHS as the CFA for children and family aids and the BCA for community aids); (b) through a reduction of \$1,583,000 from the substance abuse prevention and treatment block grant that DHFS (now DHS) distributes as a categorical allocation under community aids; and (c) through a deduction of \$20,101,300 from shared revenue payments. As a

result of this change, the funding that was budgeted in community aids and then transferred to BMCW is now directly budgeted in BMCW and not in community aids or children and family aids.

eWISACWIS

The electronic Wisconsin Statewide Automated Child Welfare Information System (eWISACWIS) is the state automated child welfare system that as-

sists case workers and administrators in managing child welfare services. The system maintains information on intake, assessment, eligibility determination, case management, court processing, financial reporting, and administration.

States are required to collect reliable and consistent information on children served by child welfare systems. Using enhanced federal matching funds available from DHHS, eWISACWIS was designed and developed initially to manage services in Milwaukee County. As a condition of receiving federal matching funds, states must ensure that their systems: (a) comply with DHHS regulations; (b) interface with state child abuse and neglect data collection systems and child support data collection systems, to the extent practicable; and (c) provide efficient, economical, and effective administration of state child welfare programs, as determined by DHHS. In addition, the system must be a statewide system. The eWISACWIS system was fully implemented statewide in July, 2004.

Federal regulations require states that receive enhanced federal funds to develop a comprehensive child welfare data collection system that includes information on child welfare services, out-of-home care and adoption assistance, promoting safe and stable families services, and independent living. In addition, state systems must:

- Meet data collection and reporting requirements of the adoption and foster care analysis and reporting system (AFCARS);
- Provide for intrastate electronic data exchange with data collection systems operated under MA, child support enforcement, and the national child abuse and neglect data system (NCANDS);
- Provide for automated data collection on all children in out-of-home care under the responsibility of the state or funded by the state (or counties);
- Collect and manage information necessary

to facilitate delivery of child welfare services, family preservation and family support services, family reunification services, and permanent placement;

- Collect and manage information necessary to determine eligibility for the out-of-home care, adoption assistance, and independent living programs and to meet case management requirements for these programs; and
- Ensure confidentiality and security of information.

In addition to the enhanced federal funds provided for development of the system, DHHS reimburses states for the ongoing data collection activities, regardless of whether the systems are used for children in out-of-home care and adopted children who are not eligible for Title IV-E. The reimbursement for ongoing operating costs is determined based on cost allocation procedures. In 2008-09, the net Title IV-E share of eWISACWIS operating costs amounted to 28%.

DCF contracted with American Management System in February of 1999 to design eWISACWIS and implement it first in Milwaukee County and later statewide. eWISACWIS was completely implemented in Milwaukee County by January of 2001, and in all other counties by July, of 2004.

The ongoing operations costs are supported with federal, state, and county funds. By statute, counties are charged for one-third of the non-federal share of ongoing operations costs. The remaining two-thirds of the non-federal share of these costs are supported with state funds. The county share of the master lease costs from initial implementation has been paid with MA targeted case management funds.

In 2008-09, \$3.6 million was budgeted for ongoing eWISACWIS costs. Of this total funding, 17.5% is supported with federal TANF funds, 28.7% is from federal Title IV-E funds, 13.3% is supported with payments from counties, and the

remaining funding (40.5%) is state funds.

Federal Reviews

DHHS has reviewed each state's Title IV-E claiming practices and child welfare system. States are required to pass both reviews, and there are financial penalties if a state does not pass a review. The first round of both reviews has occurred in Wisconsin.

Title IV-E Review. In March of 2002, DHHS conducted a state Title IV-E program review in Wisconsin to determine if the state was properly claiming federal funding under Title IV-E. The review examined the accuracy of IV-E eligibility and reimbursement for children in out-of-home care statewide, and included a review of the initial IV-E eligibility determination for children, the reimbursability of those children for specific periods of out-of-home care, and the eligibility of care providers for IV-E reimbursement.

Of the 80 cases reviewed, DHHS determined that 23 cases had a total of 29 errors relating to Title IV-E eligibility and reimbursability requirements. Since the error rate exceeded the maximum allowable rate of 10%, or eight cases, the state was required to implement a program improvement plan to correct the problems identified in the review. The plan included: (a) statutory changes, enacted in 2001 Wisconsin Act 109, that incorporate federal requirements into state law; (b) expanding the state eligibility unit (SEU) to include all counties (except Milwaukee County); (c) improving Wisconsin's handbook on Title IV-E eligibility and reimbursability requirements and emphasizing the format and timing of events that are required under state and federal laws; and (d) upgrading eWISACWIS to more easily identify requirements and deadlines for Title IV-E eligibility and reimbursement.

DHHS performed a second review in May,

2005. After reviewing 150 cases, DHHS found one case to be in error for part of the review period, resulting in a case error rate of 0.67%. Wisconsin was found to be in substantial compliance with Title IV-E, as neither the case error rate nor the dollar error rate exceeded 10%.

DHHS performed a third review in August, 2008. After reviewing 80 cases, DHHS found no error cases. Wisconsin was found to be in substantial compliance with Title IV-E.

Child and Family Services Review. In August of 2003, DHHS conducted a comprehensive review of Wisconsin's child welfare program. This federal child and family services review (CFSR) was conducted in all 50 states over a three-year period. All 50 states were found to be in nonconformance with some portion of the review.

The CFSR examines each state's conformance with federal requirements under Titles IV-B and IV-E of the federal Social Security Act. The review examined 14 aspects of the state program, including seven outcome measures relating to safety, permanency, and well-being, and seven systemic factors relating to the overall capacity of the state program to serve children and families. These areas are shown in Table 9.

The CFSR consisted of: (a) an on-site review of 50 cases in three counties, which were intended to represent performance across the state; (b) focus groups with key stakeholders; (c) analysis of program outcome data; and (d) a state self-assessment.

The on-site portion of the review occurred in August, 2003, and included an examination of individual cases and discussions with stakeholders in Milwaukee, Kenosha, and Outagamie Counties. This on-site review was conducted by a team of federal and state reviewers at each of the three locations. The federal members of the review team included federal staff and peer reviewers from other states. A random sample of 50 cases was chosen among the three counties, including both in-home services and out-of-home care placement

Table 9: CFSR Measures and Factors

| | |
|--|---|
| Outcome Measures: | |
| Safety Outcome 1 | Protecting children from abuse and neglect |
| Safety Outcome 2 | Maintaining children safely in their homes whenever appropriate |
| Permanency Outcome 1 | Providing permanency and stability of living situations |
| Permanency Outcome 2 | Preserving continuity of family relationships |
| Well-Being Outcome 1 | Enhancing capacity of families to provide for children |
| Well-Being Outcome 2 | Supporting educational services for children |
| Well-Being Outcome 3 | Supporting physical and mental health services |
| Systemic Factors: | |
| Information System Capacity | Ability to meet federal reporting requirements and use of data |
| Case Review System | Written case plans and regular permanency reviews, notification, and hearings |
| Quality Assurance | State program standards and quality assurance activities |
| Staff and Provider Training | Training for county agency staff and foster parents |
| Service Array | Needs assessment and services for children and families statewide |
| Responsiveness to Community | Sharing information and involving stakeholders |
| Foster and Adoptive Parent Licensing, Recruitment, and Retention | Standards for licensing (including criminal background checks) and recruitment and retention activities |

cases. The individual case reviews involved analyzing case files and interviewing family, social workers and caseworkers, service providers, out-of-home care providers, and legal advocates.

Overall, DHHS determined that Wisconsin was not in substantial conformance with six of the seven outcome factors and with four of the seven

systemic factors. The results of the review are described in more detail in Attachment 8, as well as Appendix B, to this paper. The state received its CFSR findings from DHHS in January of 2004, and was given 90 days to produce a statewide program enhancement plan (PEP) in response.

The PEP established measurable goals for improving child welfare program outcomes and systemic aspects of program capacity to deliver services statewide. The state was required to implement the action steps in the PEP over a two-year period and show progress toward meeting the improvement goals during the period.

Wisconsin's PEP was submitted to DHHS on April 14, 2004. After some modifications, DHHS approved Wisconsin's PEP on November 1, 2004. The summary of Wisconsin's PEP is shown in Appendix C. The federal government's approval of Wisconsin's PEP began the two-year time frame in which the changes identified in the PEP must occur. DHHS will conduct another CFSR in April, 2010, to assess the extent of the system improvements, as agreed upon in the PEP. If, during that CFSR, a state is found to be in nonconformance, DHHS can assess financial penalties against the funds received by the state under Titles IV-B and IV-E. Under the CFSR process, penalties are withheld pending successful completion of the PEP including achievement of federally-approved performance improvement targets. Following the end of the PEP period, DCF will then go through a close-out process with DHHS at which time it will be determined if DCF has met its obligations. The closeout period can take up to one year after the PEP period.

Penalties would be assessed against a pool of federal funds that includes a state's Title IV-B award and 10% of a state's Title IV-E claims for administrative costs in the years subject to penalties. For each item for which a state is found to be in noncompliance, a 1% penalty, or approximately \$130,000, could be assessed against the pool of federal funds and continue until the state comes into conformance. The penalty increases to 2% and then

3% per item if nonconformance continues following subsequent federal reviews.

CFSR Updates. The second CFSR will begin at the state level in fall of 2009. The next federal review will occur in April, 2010.

The 2006 data show that significant improvements have been made since the initial CFSR. Wisconsin has met all of the improvement targets set out in the PEP during at least one quarter of the PEP, except for two permanency items: the establishment of a permanency goal for the child and coordinating other planned living arrangements. The PEP set 66% as the improvement target for having permanency goals for children, and thus far Wisconsin has achieved only 43%. Similarly, the PEP set 72% as the improvement target for having other planned living arrangements set up for children and Wisconsin has achieved only 44%.

DCF is currently monitoring one of their well-being items which was in compliance for at least one of the quarters, but recently has been decreasing, which is the frequency of worker visits with parents. The improvement target for this item was 74%, and performance has recently dropped to approximately 71%.

DCF is also working on improving its ability to capture performance on two measures from the CFSR, which are preserving family connections and placement proximity for children in out-of-home care. These factors are reviewed as part of the quality service reviews conducted by DCF of county child welfare agencies. The county review information is then used to evaluate performance on the federal CFSR measures.

Attachment 9 summarizes the final findings (quarters five through eight) for state performance on CFSR outcome items.

Child Abuse and Neglect Prevention Programs

Most state-funded activities to prevent child abuse and neglect in Wisconsin are administered through the Child Abuse and Neglect Prevention (CANP) Board. In addition, DCF administers two child abuse and neglect prevention programs -- a statewide grant program and a program that provides services to families in Milwaukee County. This section describes these programs.

Child Abuse and Neglect Prevention Board. The mission of the CANP Board is to advocate, support, and sustain a statewide culture that encourages family and community life in which children will develop and flourish in a safe environment, free from all forms of abuse and neglect.

The Board consists of 20 members, including 10 members from state government (the Governor, the Attorney General, the DHS Secretary, the State Superintendent of Public Instruction, the Department of Corrections Secretary, the DCF Secretary, and one member of the majority and minority party from each house of the Legislature, or their designees) and 10 public members, who are appointed on the basis of expertise, experience, leadership, or advocacy in the prevention of child abuse and neglect. The Governor appoints the 10 public members for staggered, three-year terms.

The Board meets every other month and is required biennially to develop a plan for awarding grants to and providing technical assistance to organizations for child abuse and neglect prevention programs and to submit this plan to the Governor and both houses of the Legislature. These programs must be distributed throughout all geographic areas of the state and in both urban and rural communities. In addition, the Board, in collaboration with DCF and the Department of Public

Instruction, must: (a) recommend to the Governor, the Legislature, and the state agencies changes needed in state programs, statutes, policies, budgets, and rules to reduce the problems of child abuse and neglect, improve coordination among state agencies that provide prevention services, promote individual, family, and community strengths, build parenting skills, and provide community support for children and families; (b) promote statewide educational and public awareness campaigns and materials for the purpose of developing public awareness of the problems of child abuse and neglect; (c) encourage professionals to recognize and deal with problems of child abuse and neglect; (d) disseminate information about the problems of and methods of preventing child abuse and neglect to the public and to organizations concerned with those problems; and (e) encourage the development of community child abuse and neglect prevention programs.

The Board also administers the Children's Trust Fund and the Celebrate Children Foundation. The Board is required to solicit and accept contributions, grants, gifts, and bequests for the Children's Trust Fund. These funds are available for expenditure by the Board.

State Call to Action Campaign. In October of 2003, members of the Board formed a private-public partnership with the Child Abuse Prevention Fund of Children's Hospital and Health System and Prevent Child Abuse Wisconsin to coordinate the Governor's Summit and begin the State Call to Action. On April 29 and 30, 2004, family advocates gathered at the Governor's Summit in Madison. Participants laid the foundation for the state plan. The Governor's Summit was videotaped for an archived web cast that took the Call to Action statewide. From October of 2004 to March of 2005, non-partisan work groups formulated recommendations for Wisconsin's state plan to prevent maltreatment.

In response to the State Call to Action, the Board shifted its priorities and published *Wisconsin's State Plan to Prevent Child Maltreatment* in 2006.

New efforts address not only risk factors at the child or family level, but also the norms, beliefs, and social and economic systems that create the conditions for child maltreatment to occur. As a result, new grant programs were developed and existing grantees focused more of their work on reaching families experiencing increased risk of child maltreatment. Grantees are encouraged to make evidence-informed improvements to their programs and to implement evidence-based programs when appropriate.

Funding for CANP Board. The Board is budgeted \$3,794,600 (\$1,129,700 GPR, \$617,400 FED, \$2,024,400 PR, and \$23,100 SEG from the children's trust fund) in 2008-09 to support three grant programs and the Board's operations costs. The federal funding is available under Title II of the Child Abuse Prevention and Treatment Act (CAPTA), which supports networks of community-based, prevention-focused family resource and support programs. The program revenue funding is available from the sale of duplicate birth certificates (under state law, the Board receives \$7 of the \$20 fee for a duplicate birth certificate).

In 2008-09, \$711,800 (\$544,400 PR, and \$167,400 FED) is budgeted to support the Board's operations costs. This includes providing technical assistance to programs throughout the state, increasing public awareness on child abuse and neglect prevention, and supporting seven full-time staff. Staff includes an executive director, an associate director, two programs directors, a professional development director, a financial specialist, and an office manager. The Board contracts for additional services as needed.

Public Education and Awareness. The Board's public education and awareness activities include: (a) promoting implementation of the recommendations from the State Call to Action with state, local, public, and private partners across systems; (b) participating in the statewide Blue Ribbon Campaign against child maltreatment; (c) providing materials and training to hospitals, child care providers, and schools on shaken baby syndrome pre-

vention; (d) providing technical assistance and training for family support workers; (e) disseminating professional development portfolios that allow family support professionals to keep track of their training and continuing education to achieve "core competencies" in the field of family support; (f) offering materials that provide positive tips for parents on a variety of subjects such as discipline and prevention of sexual abuse; and (g) maintaining the Children's Trust Fund and Celebrate Children Foundation web sites.

Grant Programs. The Board's three grant programs are: (a) family resource center grants; (b) community-based family resource and support program grants; and (c) statewide projects. Each of these grant programs is described in greater detail below.

Family Resource Centers. Family resource centers focus on enhancing parent-child interaction, reducing family stress, improving family functioning, and providing community support in order to prevent child abuse and neglect. Family resource centers provide comprehensive services to families, including education and support. The centers primarily provide services for parents with children through age three and offer opportunities for parents and caregivers to learn new skills, interact with other parents, and learn to access community resources. Although each center provides different programs and activities, each is charged with being responsive to the needs of the community and universally accessible by all in the community. The centers provide an array of programming from the following four service areas: (a) outreach and family visiting services; (b) group-based parent education and support services; (c) individual center-based parent education and support services; and (d) community resource referral and follow-up services. Currently, there are approximately 60 family resource centers in Wisconsin, of which 20 are supported by the CANP Board.

In 2008-09, the Board is budgeted \$1,740,000 (\$765,000 GPR, \$85,000 FED, and \$890,000 PR) to support grants to family resource centers. In 2008-

Table 10: Family Resource Centers

| Agency | Location |
|---|-----------------------|
| ABC Healthy Families, Inc. | Ashland/Bayfield |
| Family Support Center | Chippewa Falls |
| Florence County Public Health Department | Florence |
| Family and Childcare Resources of NEW | Green Bay |
| Northwest Connection Family Resources | Hayward |
| Children's Service Society of Wisconsin | Janesville |
| Family Resources Inc. | La Crosse |
| Family Connections of Southwest Wisconsin | Lancaster/Platteville |
| Children's Service Society of Wisconsin | Madison |
| Lakeshore Community Action Program | Manitowoc |
| Child Care Resource & Referral, Inc. | Menasha |
| Children's Service Society of Wisconsin | Milwaukee |
| La Causa, Inc. | Milwaukee |
| St. Vincent de Paul Society | Milwaukee |
| Renewal Unlimited | Portage |
| Prairie du Chien Memorial Hospital | Prairie du Chien |
| Superior School District | Superior |
| Family Resources, Inc. | Tomah |
| Children's Service Society of Wisconsin | Wausau |
| Family Center of Washington County | West Bend |

09, the Board allocated funds to 20 family resource centers, which are listed in Table 10.

Each family resource center receives a grant of \$85,000 on a state fiscal year basis. The initial grants were awarded under a competitive request for proposals (RFP) process. The Board intends for the grants to be a continual source of base funding for the centers. However, to continue to receive funding, the grantees must reapply every year and meet certain requirements, including collecting data and reporting to the Board quarterly, participating in required activities (such as peer reviews and director meetings), demonstrating past performance and compliance with program requirements (as specified in the grant contract), and demonstrating growth over time and integration into the community. New grants are awarded only when a grant to a current recipient is discontinued or new funds become available. Grantees are required to provide a 20% match to their grant, which may be in cash, in-kind services, or both. If a program has received funding from the Board for three or more years, the program must have at least a 5% match in cash.

In 2006-07, the 19 family resource centers that received grants served 8,539 adults and 14,088

children, including 5,324 children who were younger than four years old. In 2007-08, 21 resource centers served 8,545 adults and 12,908 children, including 5,806 children who were younger than four years old.

In 2007-08, the 21 family resource centers were awarded \$1,785,000 from state grants and provided \$1,819,509 in local match, for a total budget of \$3,604,509. Based on the total number of adults these centers served (8,545), the average expenditure was \$422 per adult.

Family resource centers submit quarterly and annual reports to the Board summarizing services provided, participant demographics, and participant outcome evaluation data. Families are asked to provide demographic information when they first contact the family resource center and again each state fiscal year that they continue to participate. Families are also asked to complete a survey about changes in their parenting knowledge, skills, and attitudes after they have participated in a parenting course or playgroup.

Table 11 shows the number of hours of service provided by family resource centers in 2006-07 and 2007-08.

Table 11: Number of Hours of Service Provided by Family Resource Centers in 2006-07 and 2007-08

| | 2006-07 (hours) | 2007-08 (hours) |
|--|--------------------|--------------------|
| Parent education courses | 12,485 | 16,485 |
| Family education workshops | 20,486 | 21,271 |
| Support groups | 6,678 | 5,735 |
| Family visits or home visits | 9,976 | 17,230 |
| Special events | 28,456 | 35,456 |
| Parent/child activities (such as playgroups) | 23,969 | 32,336 |

Community-Based Family Resource and Support Program Grants. The Board distributes grants to support community-based family resource and support programs aimed at preventing child abuse and neglect, namely community response programs and access and visitation programs.

In 2008-09, the Board awarded grants of \$70,000 to community response programs in 10 counties. These programs provide voluntary services to families who are either screened out of child protective services at intake or have their cases closed after the initial assessment. Community response programs work with families to identify the services they need and address the issues that brought them into contact with child protective services.

Another \$25,000 grant is awarded to the School of Social Work at the University of Wisconsin-Madison to evaluate this approach to reaching families at risk of maltreatment.

In addition, Milwaukee County has been awarded a \$50,000 community response grant in the second half of 2008-09 for an alternative response to reports of child abuse and neglect. Alternative response provides community-initiated support and services to families at low or moderate risk of abuse or neglect in lieu of a full CPS investigative response. This project is implemented in collaboration with DCF.

In calendar year 2007, the first year of these programs, six community response programs provided services to 187 families. The average cost of providing these services was \$1,604 per family.

In 2008-09, the Board is budgeted \$775,000 (\$200,000 FED and \$575,000 PR) for these grants. The grants are awarded on a state fiscal year basis. The current grantees for community response programs are shown in Table 12.

Typically, the Board awards grants for a three-year period, with annual renewals, contingent upon satisfactory performance. The grant funds cannot be used to supplant existing funds and grantees are typically required to provide a 25% match annually during the first year of the grant and 50% during the second and subsequent grant years (if applicable). The match can be made through cash, in-kind services, or both, and must be used only to enhance the services provided with the grant from the Board.

Table 12: Community-Based Family Resource and Support Program Community Response Grantees (2008-09)

| Program | Location |
|---|------------|
| ABC Healthy Families Inc. | Bayfield |
| Pierce County Department of Health Services | Ellsworth |
| Green Lake County Department of Health and Human Services | Green Lake |
| Children's Service Society of Wisconsin | Janesville |
| Family Resources, Inc. | La Crosse |
| Children's Service Society of Wisconsin | Madison |
| Lakeshore Community Action Program | Manitowoc |
| Milwaukee--to be determined | Milwaukee |
| Renewal Unlimited, Inc. | Portage |
| Lakeland Family Resource Center | Spooner |
| Children's Service Society of Wisconsin | Wausau |

The Board allocates \$125,000 annually, on a state fiscal year basis, in federal access and visitation grant funds to four safe exchange programs throughout the state. The grants support programs that establish, expand, or enhance support of and facilitate non-custodial parents' access to and visitation with their children. The program goals are to: (a) improve access of non-custodial parents to their children; (b) encourage non-custodial parents to take advantage of opportunities to spend time with their children, and connect them to such opportunities; (c) provide safe, non-threatening sites for access and visitation when necessary; and (d) enhance the ability of the non-custodial and custodial parents to co-parent, and to provide a supportive, non-confrontational environment for their children.

The Board awards these grants under a statewide, competitive process. The grantees must demonstrate collaboration and connection with other community agencies and either be an existing access and visitation program or receive another grant from the Board. Grantees are required to provide a 10% match of cash, in-kind services, or both.

Grantees may use these funds to support voluntary and mandatory mediation, counseling, education, the development of parenting plans, and visitation enforcement, including monitoring, supervision, and neutral drop-off and pickup. The 2008-09 access and visitation grantees are listed in Table 13.

Table 13: 2008-09 Access and Visitation Grantees

| Agency | Location |
|---|----------------|
| Family Support Center | Chippewa Falls |
| Family Resources | La Crosse |
| Lakeshore Family Resources | Manitowoc |
| Children's Service Society of Wisconsin | Wausau |

Statewide Projects. The Board awarded promising practice grants totaling \$350,000 in 2008-09 to six statewide organizations to implement recommendations from the state plan. These grants target identified triggers of child abuse and neglect and attempt to improve programs across the state through capacity-building efforts, professional development opportunities, and direct service provision.

These grants are designed to: (a) prevent child sexual abuse; (b) improve outreach and effectiveness of services to parents with mental health and substance abuse issues; (c) increase availability and consistency of respite care for families with children with mental health or behavioral issues; (d) promote greater collaboration and coordination between the fields of family support and early care and education; and (e) improve understanding among early childhood and family support professionals of children's social and emotional development. Table 14 lists the statewide promising practice grantees for 2008-09.

Table 14: 2008-09 Statewide Promising Practices Grantees

| Agency | Location |
|---|-----------|
| Family Ties | Madison |
| Respite Care Association | Madison |
| Supporting Families Together Association | Madison |
| Wisconsin Alliance for Infant Mental Health | Madison |
| Children's Hospital and Health System | Milwaukee |
| Mental Health America | Milwaukee |

"Celebrate Children" License Plates. Provisions in 1997 Wisconsin Act 27 created a special license plate to provide a new revenue source for the Board's programs. On January 1, 1999, the Depart-

ment of Transportation (DOT) began issuing a special license plate with the words "Celebrate Children" on it, which could be purchased by individuals who wished to support the Board's child abuse and neglect prevention programs. Of the total cost of each license plate, \$20 was deposited into the Children's Trust Fund.

2005 Wisconsin Act 319 created a non-profit corporation, the Celebrate Children Foundation, to increase fundraising efforts for child abuse and neglect prevention. Act 319 also deposited the revenue raised from the "Celebrate Children" license plate to the Celebrate Children Foundation, rather than the Children's Trust Fund. The revenue stream from the "Celebrate Children" license plate forms the basis of the foundation's endowment fund.

Currently, a "Celebrate Children" license plate costs the buyer \$110 in the first year and \$95 each year thereafter (\$20 more than a standard license plate), of which \$90 in the first year and \$75 in each year following is retained by DOT and the balance (\$20) is deposited in the Celebrate Children Foundation endowment fund.

The foundation cannot spend the revenue from the sale of these license plates that is deposited into its endowment fund. The foundation may only expend the interest that accrues to the endowment fund. In 2007, \$109,000 was deposited into the endowment fund from issuing "Celebrate Children" license plates.

Family Foundations. DCF is budgeted \$995,700 GPR in 2008-09 to distribute as grants for the prevention of child abuse and neglect, under s. 48.983 of the statutes, which was formerly known as POCAN (prevention of child abuse and neglect) and now called Family Foundations. DCF is required by statute to distribute this funding to a maximum of six rural counties, three urban counties, and two tribes for specified child abuse

Table 15: Family Foundations Grant Recipients

| | CY 2008 Funding |
|---|--------------------|
| Brown County Human Services Department | \$265,100 |
| Marathon County Health Department | 157,900 |
| Waukesha County Department of Health and Human Services | 140,000 |
| Door County Department of Social Services | 35,700 |
| Fond du Lac County Department of Social Services | 112,000 |
| Manitowoc County Health Department | 81,400 |
| Portage County Department of Health and Human Services | 78,200 |
| Vernon County Health Department | 37,200 |
| Waupaca County Department of Health and Human Services | 62,600 |
| LacCourte Oreilles Tribal Government | <u>25,600</u> |
| Total | \$995,700 |

and neglect prevention activities. DCF awarded the initial grants on a competitive basis.

There are currently six rural counties, three urban counties, and one tribe participating in the program. Table 15 lists current grant recipients and the grant amounts they are budgeted to receive in calendar year 2008. Seven of the 10 recipients have integrated the grant funding into existing programs operating in those counties. The other three created new programs with the grant funding. A number of programs have used the state grant funding to secure additional local and private funding to expand the level of service provided and the number of families served.

The amount of funding that each county (other than Milwaukee County) or tribe receives from DCF is based on the number of births funded by MA in that county or tribe in proportion to the number of MA-funded births in all of the participating counties and tribal lands. If Milwaukee County were selected to participate, its grant award would be based on 60% of the MA-funded births in that county in proportion to the number of MA-funded births in the other counties and tribes selected to participate.

Program Components. There are two distinct components to the program: (a) home visitation; and (b) intervention for families determined to be at risk of child abuse and neglect. These components are designed to serve potentially different populations, as indicated below.

Home Visitation. This component is a primary intervention, home visitation program for first-time parents who are eligible for MA. A family may receive services under the program until a child is three years of age. If risk factors for abuse or neglect continue to be present when the child reaches three years of age, the family may continue to receive services until the child reaches five years of age. Participation in the program is voluntary.

Grant funding can be used to support the cost of case management services and flexible funds provided to participating families. Flexible funds are payments totaling no more than \$1,000 per family per year for appropriate expenses for participating families. Of the amount paid on behalf of a family, 50% may be paid from the state grant; the grant recipients must pay the remaining 50%. Flexible funds may be used for home visiting participants on two occasions. Because state law does not define the allowable uses of these flexible funds, the granting agency determines the appropriate uses of these funds. For example, grantees have used these funds to purchase equipment and supplies for infants, such as cribs, car seats, and diapers.

To be eligible for a grant, applicants, except Milwaukee County, must indicate in their application that they will claim reimbursement under MA for case management services provided to program participants.

In Milwaukee County, some MA recipients are already eligible for case management services under the MA prenatal care coordination benefit. This benefit is not available in counties other than Milwaukee County.

Intervention. This program component serves families with children who are at risk of abuse or neglect. Services may begin with a request by a family member or a filed child abuse or neglect report, either of which indicates a substantial risk of future abuse or neglect of a child in the family if assistance is not provided, and a determination

that no petition will be filed. This component is a secondary intervention program and participation is voluntary and is not restricted to MA-eligible families. Under the program, grant recipients may use the grant funding as flexible funds, which are intended to be used to pay appropriate expenses, as determined by the agency, for the families in the program to reduce the risk of child abuse or neglect. However, the total payment to a family may not exceed \$500 per year, and the program must encourage the participant to contribute towards the cost of the service funded. Examples of flexible fund expenditures for this program include car repairs, security deposits, and one-month rental payments. Additionally, the grant recipient must indicate that it is willing to fund case management services to MA-eligible families participating in the intervention program. The county may use a portion of its Title IV-E incentive funds that it receives from the state to support the case management costs for the participants in the intervention service component of the program.

Technical Assistance. DCF budgets \$160,000 FED (Title IV-B, Part II) in 2008-09 to fund technical assistance and training to counties and tribes that are selected to participate in the Family Foundations program. DCF has contracted with the University of Wisconsin-Extension to provide these services.

Prevention Services in Milwaukee County. DCF provides funding to reduce the incidence of child abuse and neglect in Milwaukee County for two different services: (a) home visiting for parents in Milwaukee County; and (b) community-based grants for prevention services. Both of these initiatives are supported with a \$1,489,600 TANF grant which DCF awards to programs for the provision of these services.

Home Visitation Services. DCF awards a total of \$912,100 of the TANF grant for home visitation services. In FY 2008-09, DCF provided \$812,100 to the Milwaukee County Health Department to provide home visitation services in Milwaukee County, and \$100,000 to UW-Extension to train

individuals who provide such services. In addition, DHS provided UW-Extension with \$40,000 from tobacco settlement funds and \$40,000 in MA matching funds.

Prevention Services. In FY 2008-09 DCF provided \$577,500 of the TANF grant to the Milwaukee Brighter Futures program as a prevention component. The Brighter Futures program seeks to: (a) prevent and reduce the incidence of youth violence and other delinquent behavior; (b) prevent and reduce the incidence of youth alcohol and other drug use and abuse; (c) prevent and reduce the incidence of child abuse and neglect; (d) prevent and reduce the incidence of non-marital pregnancy and increase the use of abstinence to prevent non-marital pregnancy; and (e) increase adolescent self-sufficiency by encouraging high school graduation, vocational preparedness, improved social and other interpersonal skills, and responsible decision-making.

Summary

In Wisconsin, counties, tribes, and the state administer a wide range of programs that are intended to keep children safe, prevent child abuse and neglect, support families, and serve children who are in need of protection and services. Child welfare services are provided by state, local, tribal, or contracted employees. Federal law, state law, and the courts all have a significant impact on the child welfare system.

Funding for child welfare services is provided

from a combination of state, federal, tribal, and local funds through numerous state and federal programs, many of which are targeted to provide specific services to targeted populations. This funding mix reflects the shared responsibility of federal, state, tribal, and local governments to keep children safe and protect them from harm.

Attachment 1 to this paper presents an overview of the child welfare system in Wisconsin. Attachment 2 lists 2008 and 2009 allocation amounts to counties and tribes under the independent living program, and Attachment 3 shows the number of individuals receiving independent living services by counties and tribes in 2007. Attachment 4 lists the county Title IV-E incentive payments for calendar year 2009, and Attachment 5 lists the 2009 county allocations of Title IV-B, Part II funding.

Attachments 6 and 7 provide information on the Bureau of Milwaukee Child Welfare, including the Bureau's performance on permanence, safety, and well-being measures and the case decision making process in the Bureau.

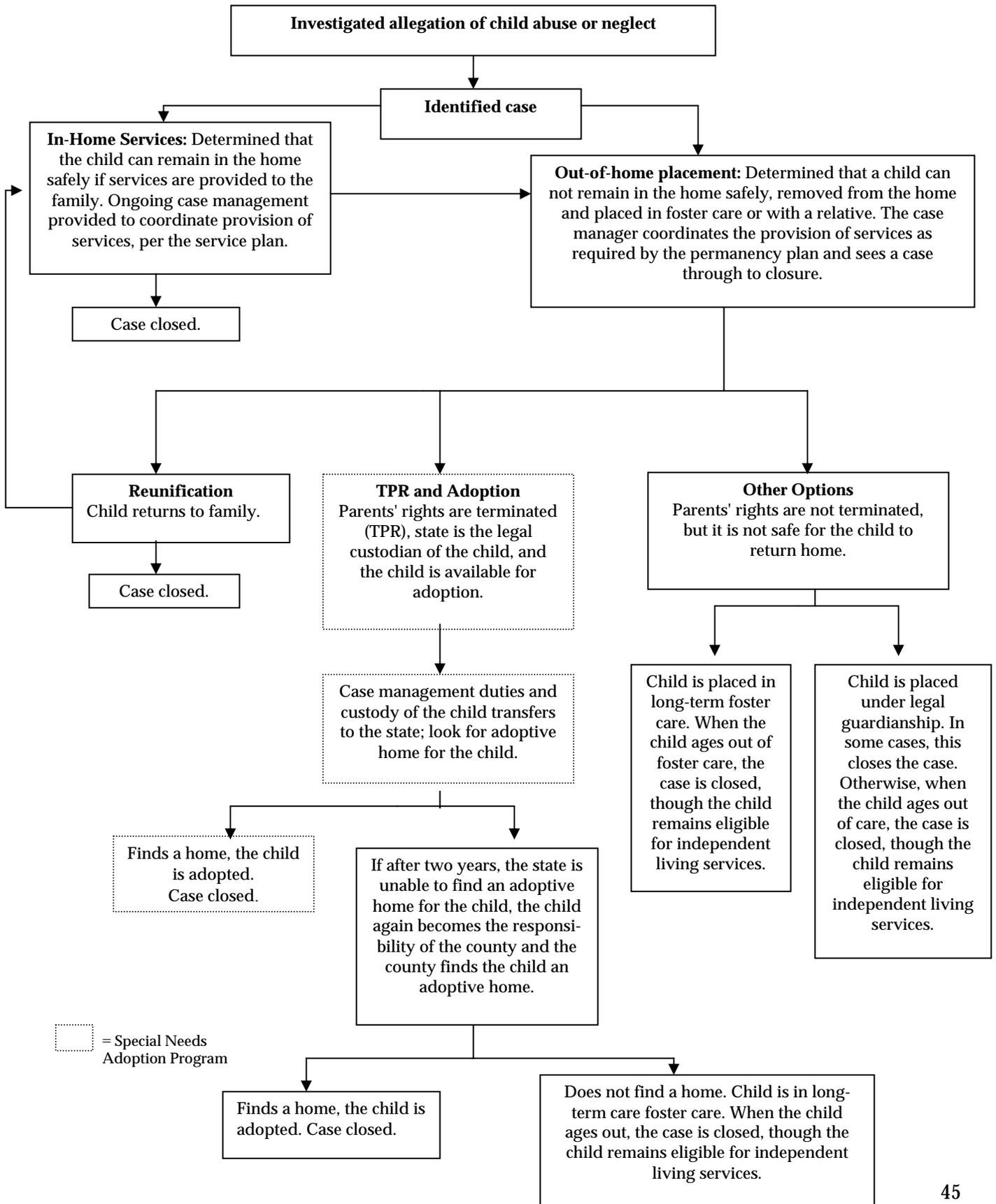
Attachments 8 and 9 summarize the outcome measures and results under the children and family services review and the state's performance on CFSR outcome items.

Appendix A describes the history of federal child welfare law.

Finally, Appendices B and C describe CSFR outcome measures and findings and summarize the state's Program Enhancement Plan for the CFSR.

ATTACHMENT 1

Overview of the Child Welfare System in Wisconsin



ATTACHMENT 2

**Independent Living and Education and Training Vouchers County and Tribal Allocations
2008 and 2009**

| | 2008 | | | | 2009 | | | |
|-------------|---|--------------|---|--------------|---|--------------|---|--------------|
| | <u>Independent Living</u> Allocation | <u>Match</u> | <u>Ed/Training Vouchers</u> Allocation | <u>Match</u> | <u>Independent Living</u> Allocation | <u>Match</u> | <u>Ed/Training Vouchers</u> Allocation | <u>Match</u> |
| Adams | \$ 14,701 | \$3,675 | \$1,009 | \$252 | \$15,447 | \$3,862 | \$1,059 | \$265 |
| Ashland | 14,122 | 3,531 | 793 | 198 | 13,970 | 3,493 | 605 | 151 |
| Barron | 24,156 | 6,039 | 4,542 | 1,136 | 18,893 | 4,723 | 2,118 | 530 |
| Bayfield | 12,000 | 3,000 | 360 | 90 | 12,000 | 3,000 | 363 | 91 |
| Brown | 38,434 | 9,609 | 9,877 | 2,469 | 35,240 | 8,810 | 7,142 | 1,786 |
| Buffalo | 12,000 | 3,000 | 649 | 162 | 14,068 | 3,517 | 636 | 159 |
| Burnett | 17,210 | 4,303 | 1,947 | 487 | 18,401 | 4,600 | 1,967 | 492 |
| Calumet | 14,894 | 3,724 | 1,081 | 270 | 14,166 | 3,542 | 666 | 167 |
| Chippewa | 18,271 | 4,568 | 2,343 | 586 | 19,484 | 4,871 | 2,300 | 575 |
| Clark | 15,377 | 3,844 | 1,262 | 316 | 14,856 | 3,714 | 878 | 220 |
| Columbia | 17,981 | 4,495 | 2,235 | 559 | 18,105 | 4,526 | 1,876 | 469 |
| Crawford | 12,000 | 3,000 | 541 | 135 | 12,000 | 3,000 | 545 | 136 |
| Dane | 61,299 | 15,325 | 18,420 | 4,605 | 57,692 | 14,423 | 14,042 | 3,511 |
| Dodge | 23,577 | 5,894 | 4,326 | 1,082 | 22,537 | 5,634 | 3,238 | 810 |
| Door | 15,666 | 3,917 | 1,370 | 343 | 15,348 | 3,837 | 1,029 | 257 |
| Douglas | 13,930 | 3,483 | 721 | 180 | 12,000 | 3,000 | 303 | 76 |
| Dunn | 12,000 | 3,000 | 649 | 162 | 12,000 | 3,000 | 545 | 136 |
| Eau Claire | 16,245 | 4,061 | 1,586 | 397 | 21,946 | 5,487 | 3,057 | 764 |
| Florence | 12,000 | 3,000 | 360 | 90 | 12,000 | 3,000 | 303 | 76 |
| Fond du Lac | 32,067 | 8,017 | 7,498 | 1,875 | 29,824 | 7,456 | 5,478 | 1,370 |
| Forest | 12,000 | 3,000 | 469 | 117 | 12,000 | 3,000 | 121 | 30 |
| Grant | 12,000 | 3,000 | 505 | 126 | 12,000 | 3,000 | 303 | 76 |
| Green | 16,245 | 4,061 | 1,586 | 397 | 17,121 | 4,280 | 1,574 | 394 |
| Green Lake | 12,000 | 3,000 | 649 | 162 | 12,000 | 3,000 | 968 | 242 |
| Iowa | 15,377 | 3,844 | 1,262 | 316 | 14,363 | 3,591 | 726 | 182 |
| Iron | 12,000 | 3,000 | 72 | 18 | 12,000 | 3,000 | 121 | 30 |
| Jackson | 14,894 | 3,724 | 1,081 | 270 | 13,970 | 3,493 | 605 | 151 |
| Jefferson | 17,596 | 4,399 | 2,091 | 523 | 17,712 | 4,428 | 1,755 | 439 |
| Juneau | 12,000 | 3,000 | 324 | 81 | 12,000 | 3,000 | 424 | 106 |
| Kenosha | 75,095 | 18,774 | 23,575 | 5,894 | 62,124 | 15,531 | 15,404 | 3,851 |
| Kewaunee | 14,701 | 3,675 | 1,009 | 252 | 13,970 | 3,493 | 605 | 151 |
| La Crosse | 23,095 | 5,774 | 4,145 | 1,036 | 22,537 | 5,634 | 3,238 | 810 |
| LaFayette | 14,508 | 3,627 | 937 | 234 | 17,022 | 4,256 | 1,543 | 386 |
| Langlade | 13,930 | 3,483 | 721 | 180 | 13,871 | 3,468 | 575 | 144 |
| Lincoln | 12,000 | 3,000 | 216 | 54 | 12,000 | 3,000 | 242 | 61 |
| Manitowoc | 27,629 | 6,907 | 5,840 | 1,460 | 24,014 | 6,004 | 3,692 | 923 |
| Marathon | 38,434 | 9,609 | 9,877 | 2,469 | 34,551 | 8,638 | 6,930 | 1,733 |
| Marinette | 17,403 | 4,351 | 2,019 | 505 | 16,136 | 4,034 | 1,271 | 318 |
| Marquette | 12,000 | 3,000 | 433 | 108 | 12,000 | 3,000 | 242 | 61 |
| Menominee | 12,000 | 3,000 | 649 | 162 | 12,000 | 3,000 | 666 | 167 |

ATTACHMENT 2 (continued)

**Independent Living and Education and Training Vouchers County and Tribal Allocations
2008 and 2009**

| | 2008 | | | | 2009 | | | |
|-------------------------------------|---|------------------|---|-----------------|---|------------------|---|-----------------|
| | <u>Independent Living</u> Allocation | <u>Match</u> | <u>Ed/Training Vouchers</u> Allocation | <u>Match</u> | <u>Independent Living</u> Allocation | <u>Match</u> | <u>Ed/Training Vouchers</u> Allocation | <u>Match</u> |
| Monroe | \$16,148 | \$4,037 | \$1,550 | \$388 | \$17,121 | \$4,280 | \$1,574 | \$394 |
| Oconto | 15,570 | 3,893 | 1,334 | 334 | 16,530 | 4,133 | 1,392 | 348 |
| Oneida | 14,412 | 3,603 | 901 | 225 | 14,166 | 3,542 | 666 | 167 |
| Outagamie | 28,787 | 7,197 | 6,272 | 1,568 | 27,362 | 6,841 | 4,721 | 1,180 |
| Ozaukee | 12,000 | 3,000 | 577 | 144 | 12,000 | 3,000 | 303 | 76 |
| Pepin | 24,000 | 3,000 | 144 | 36 | 12,000 | 3,000 | 333 | 83 |
| Pierce | 15,570 | 3,893 | 1,334 | 334 | 15,939 | 3,985 | 1,211 | 303 |
| Polk | 12,000 | 3,000 | 360 | 90 | 12,000 | 3,000 | 393 | 98 |
| Portage | 18,946 | 4,737 | 2,595 | 649 | 17,318 | 4,330 | 1,634 | 409 |
| Price | 16,148 | 4,037 | 1,550 | 388 | 13,773 | 3,443 | 545 | 136 |
| Racine | 35,347 | 8,837 | 8,723 | 2,181 | 37,800 | 9,450 | 7,929 | 1,982 |
| Richland | 14,605 | 3,651 | 973 | 243 | 12,000 | 3,000 | 484 | 121 |
| Rock | 19,043 | 4,761 | 2,631 | 658 | 22,438 | 5,610 | 3,208 | 802 |
| Rusk | 12,000 | 3,000 | 144 | 36 | 12,000 | 3,000 | 303 | 76 |
| St Croix | 17,403 | 4,351 | 2,019 | 505 | 17,121 | 4,280 | 1,574 | 394 |
| Sauk | 17,692 | 4,423 | 2,127 | 532 | 18,992 | 4,748 | 2,149 | 537 |
| Sawyer | 16,438 | 4,110 | 1,658 | 415 | 15,151 | 3,788 | 968 | 242 |
| Shawano | 12,000 | 3,000 | 252 | 63 | 12,000 | 3,000 | 121 | 30 |
| Sheboygan | 28,111 | 7,028 | 6,020 | 1,505 | 29,824 | 7,456 | 5,478 | 1,370 |
| Taylor | 12,000 | 3,000 | 577 | 144 | 12,000 | 3,000 | 303 | 76 |
| Trempealeau | 12,000 | 3,000 | 505 | 126 | 12,000 | 3,000 | 212 | 53 |
| Vernon | 12,000 | 3,000 | 505 | 126 | 12,000 | 3,000 | 484 | 121 |
| Vilas | 13,833 | 3,458 | 793 | 198 | 15,053 | 3,763 | 938 | 235 |
| Walworth | 20,779 | 5,195 | 3,280 | 820 | 21,257 | 5,314 | 2,845 | 711 |
| Washburn | 15,666 | 3,917 | 1,370 | 343 | 15,348 | 3,837 | 1,029 | 257 |
| Washington | 17,981 | 4,495 | 2,235 | 559 | 19,386 | 4,847 | 2,270 | 568 |
| Waukesha | 38,434 | 9,609 | 9,877 | 2,469 | 41,247 | 10,312 | 8,988 | 2,247 |
| Waupaca | 17,306 | 4,327 | 1,983 | 496 | 17,318 | 4,330 | 1,634 | 409 |
| Waushara | 12,000 | 3,000 | 216 | 54 | 12,000 | 3,000 | 454 | 114 |
| Winnebago | 31,488 | 7,872 | 7,281 | 1,820 | 31,695 | 7,924 | 6,053 | 1,513 |
| Wood | 18,753 | 4,688 | 2,523 | 631 | 16,727 | 4,182 | 1,453 | 363 |
| BMCW | <u>271,325</u> | <u>67,831</u> | <u>96,894</u> | <u>24,224</u> | <u>322,886</u> | <u>80,722</u> | <u>95,542</u> | <u>23,886</u> |
| Subtotal | \$1,610,622 | \$402,656 | \$288,232 | \$72,058 | \$1,637,820 | \$409,455 | \$246,346 | \$61,587 |
| Ho Chunk | \$19,332 | \$4,833 | \$2,740 | \$685 | \$20,272 | \$5,068 | \$2,542 | \$636 |
| Lac Courte Oreilles | 12,000 | 3,000 | 577 | 144 | 12,000 | 3,000 | 545 | 136 |
| Lac du Flambeau | 16,824 | 4,206 | 1,802 | 451 | 12,000 | 3,000 | 545 | 136 |
| Division of Juvenile Corrections | \$38,531 | \$9,633 | \$9,913 | \$2,478 | \$23,817 | \$5,954 | \$3,632 | \$908 |
| Total | \$1,697,309 | \$424,327 | \$303,264 | \$75,816 | \$1,705,909 | \$426,477 | \$253,610 | \$63,403 |

ATTACHMENT 3

2007 Independent Living Annual Report Summary

| <u>County/ Tribe</u> | <u>Number of Youth Eligible in 2007</u> | <u>Youth Ages 15-19 in OHC Receiving Services</u> | <u>Number of Youth Discharged 15-17 Years</u> | <u>Discharged 18-21 Receiving Services</u> | <u>Total Number of Youth Receiving Services</u> | <u>Tribal Youth Eligible</u> | <u>Number of Tribal Youths Receiving Services</u> | <u>2007 Room & Board Funds Expended</u> |
|--------------------------|---|---|---|--|---|--------------------------------------|---|---|
| Adams | 21 | 5 | 2 | 7 | 14 | 0 | 0 | \$1,625 |
| Ashland | 10 | 6 | 0 | 4 | 10 | 4 | 4 | 0 |
| Barron | 35 | 5 | 8 | 22 | 35 | 1 | 0 | 1,725 |
| Bayfield | 7 | 2 | 1 | 2 | 5 | 5 | 5 | 3,000 |
| Brown | 132 | 86 | 6 | 12 | 104 | 14 | 12 | 1,000 |
| Buffalo | 11 | 5 | 1 | 4 | 10 | 0 | 0 | 0 |
| Burnett | 34 | 11 | 3 | 17 | 31 | 7 | 7 | 2,646 |
| Calumet | 14 | 3 | 2 | 3 | 8 | 0 | 0 | 0 |
| Chippewa | 38 | 16 | 5 | 17 | 38 | 0 | 0 | 0 |
| Clark | 16 | 5 | 3 | 5 | 13 | 0 | 0 | 3,892 |
| Columbia | 35 | 5 | 8 | 14 | 27 | 1 | 1 | 1,050 |
| Crawford | 9 | 6 | 1 | 2 | 9 | 0 | 0 | 0 |
| Dane | 269 | 74 | 103 | 18 | 195 | 0 | 0 | 2,000 |
| Dodge | 59 | 17 | 10 | 21 | 48 | 1 | 1 | 2,858 |
| Door | 17 | 7 | 1 | 9 | 17 | 1 | 1 | 454 |
| Douglas | 5 | 2 | 0 | 3 | 5 | 0 | 0 | 2,811 |
| Dunn | 12 | 3 | 0 | 3 | 6 | 0 | 0 | 0 |
| Eau Claire | 79 | 20 | 1 | 1 | 22 | 0 | 0 | 1,250 |
| Florence | 5 | 4 | 0 | 1 | 5 | 0 | 0 | 0 |
| Fond du Lac | 101 | 42 | 10 | 28 | 80 | 2 | 2 | 0 |
| Forest | 2 | 1 | 1 | 0 | 2 | 2 | 2 | 0 |
| Grant | 5 | 3 | 0 | 2 | 5 | 0 | 0 | 0 |
| Green | 26 | 10 | 11 | 5 | 26 | 1 | 1 | 4,020 |
| Green Lake | 16 | 8 | 0 | 8 | 16 | 0 | 0 | 0 |
| Iowa | 15 | 4 | 1 | 4 | 9 | 0 | 0 | 1,000 |
| Iron | 2 | 2 | 0 | 0 | 2 | 0 | 0 | 0 |
| Jackson | 15 | 1 | 0 | 4 | 5 | 4 | 0 | 400 |
| Jefferson | 29 | 18 | 7 | 4 | 29 | 0 | 0 | 0 |
| Juneau | 7 | 6 | 0 | 1 | 7 | 0 | 0 | 3,000 |
| Kenosha | 375 | 103 | 0 | 31 | 134 | 0 | 0 | 15,750 |
| Kewaunee | 11 | 3 | 0 | 6 | 9 | 4 | 0 | 0 |
| La Crosse | 70 | 26 | 3 | 8 | 37 | 3 | 3 | 0 |
| LaFayette | 29 | 3 | 6 | 13 | 22 | 0 | 0 | 0 |
| Langlade | 11 | 4 | 3 | 1 | 8 | 0 | 0 | 682 |
| Lincoln | 4 | 2 | 2 | 0 | 4 | 0 | 0 | 0 |
| Manitowoc | 67 | 35 | 1 | 19 | 55 | 2 | 2 | 350 |
| Marathon | 122 | 42 | 50 | 15 | 107 | 0 | 0 | 0 |
| Marinette | 23 | 11 | 6 | 2 | 19 | 0 | 0 | 500 |
| Marquette | 4 | 1 | 1 | 2 | 4 | 0 | 0 | 0 |
| Menominee | 11 | 9 | 1 | 1 | 11 | 11 | 11 | 0 |

ATTACHMENT 3 (continued)

2007 Independent Living Annual Report Summary

| <u>County/ Tribe</u> | <u>Number of Youth Eligible in 2007</u> | <u>Youth Ages 15-19 in OHC Receiving Services</u> | <u>Number of Youth Discharged 15-17 Years</u> | <u>Discharged 18-21 Receiving Services</u> | <u>Total Number of Youth Receiving Services</u> | <u>Tribal Youth Eligible</u> | <u>Number of Tribal Youths Receiving Services</u> | <u>2007 Room & Board Funds Expended</u> |
|--------------------------|---|---|---|--|---|--------------------------------------|---|---|
| Monroe | 26 | 15 | 2 | 9 | 26 | 0 | 0 | \$0 |
| Oconto | 23 | 15 | 0 | 8 | 23 | 0 | 0 | 0 |
| Oneida | 12 | 5 | 4 | 1 | 10 | 1 | 1 | 0 |
| Outagamie | 78 | 18 | 6 | 54 | 78 | 12 | 12 | 1,954 |
| Ozaukee | 5 | 3 | 0 | 2 | 5 | 0 | 0 | 0 |
| Pepin | 6 | 2 | 0 | 3 | 5 | 0 | 0 | 0 |
| Pierce | 23 | 6 | 8 | 3 | 17 | 0 | 0 | 0 |
| Polk | 9 | 3 | 0 | 1 | 4 | 0 | 0 | 0 |
| Portage | 40 | 10 | 3 | 1 | 14 | 0 | 0 | 0 |
| Price | 9 | 7 | 1 | 1 | 9 | 0 | 0 | 0 |
| Racine | 131 | 33 | 5 | 93 | 131 | 0 | 0 | 0 |
| Richland | 9 | 7 | 0 | 0 | 7 | 0 | 0 | 0 |
| Rock | 53 | 40 | 2 | 11 | 53 | 0 | 0 | 0 |
| Rusk | 5 | 4 | 1 | 0 | 5 | 0 | 0 | 0 |
| St. Croix | 26 | 12 | 12 | 2 | 26 | 0 | 0 | 0 |
| Sauk | 39 | 14 | 5 | 13 | 32 | 1 | 0 | 2,160 |
| Sawyer | 16 | 3 | 7 | 6 | 16 | 2 | 2 | 0 |
| Shawano | 3 | 0 | 0 | 1 | 1 | 1 | 1 | 3,615 |
| Sheboygan | 102 | 27 | 8 | 44 | 79 | 0 | 0 | 845 |
| Taylor | 5 | 1 | 1 | 3 | 5 | 0 | 0 | 0 |
| Trempealeau | 5 | 1 | 1 | 0 | 2 | 0 | 0 | 0 |
| Vernon | 8 | 4 | 1 | 3 | 8 | 0 | 0 | 450 |
| Vilas | 26 | 0 | 4 | 1 | 5 | 0 | 0 | 0 |
| Walworth | 63 | 12 | 7 | 12 | 31 | 0 | 0 | 1,985 |
| Washburn | 17 | 4 | 2 | 11 | 17 | 1 | 1 | 0 |
| Washington | 46 | 16 | 4 | 9 | 29 | 1 | 1 | 900 |
| Waukesha | 154 | 47 | 7 | 89 | 143 | 1 | 1 | 4,150 |
| Waupaca | 31 | 21 | 0 | 2 | 23 | 0 | 0 | 2,075 |
| Waushara | 10 | 4 | 1 | 0 | 5 | 0 | 0 | 0 |
| Winnebago | 110 | 42 | 15 | 33 | 90 | 2 | 2 | 368 |
| Wood | <u>26</u> | <u>20</u> | <u>1</u> | <u>1</u> | <u>22</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| Subtotal | 2,869 | 1,012 | 366 | 736 | 2,114 | 85 | 73 | \$68,515 |
| Milwaukee | 1,579 | 672 | 1 | 906 | 1,579 | 11 | 11 | \$61,940 |
| DOC | 60 | 35 | 0 | 25 | 60 | 1 | 1 | 6,252 |
| Ho Chunk | 62 | 13 | 3 | 6 | 22 | 62 | 30 | 0 |
| La du Flambeau | 17 | 0 | 0 | 1 | 1 | 17 | 1 | 495 |
| Lac Courte Oreilles | <u>14</u> | <u>2</u> | <u>0</u> | <u>2</u> | <u>4</u> | <u>14</u> | <u>4</u> | <u>0</u> |
| Total | 4,601 | 1,734 | 370 | 1,676 | 3,780 | 190 | 120 | \$137,202 |

ATTACHMENT 4

**Title IV-E Incentive County Allocations
Calendar Year 2009**

| County | Amount | County | Amount |
|-------------|----------|--------------|--------------------|
| Adams | \$67,026 | Manitowoc | \$113,537 |
| Ashland | 67,609 | Marathon | 157,852 |
| Barron | 90,773 | Marinette | 85,802 |
| Bayfield | 67,641 | Marquette | 60,804 |
| Brown | 232,827 | Menominee | 66,024 |
| Buffalo | 60,915 | Milwaukee | 0 |
| Burnett | 63,371 | Monroe | 105,124 |
| Calumet | 78,901 | Oconto | 79,977 |
| Chippewa | 103,606 | Oneida | 76,039 |
| Clark | 100,323 | Outagamie | 167,780 |
| Columbia | 86,091 | Ozaukee | 96,019 |
| Crawford | 67,892 | Pepin | 58,168 |
| Dane | 334,733 | Pierce | 73,733 |
| Dodge | 109,643 | Polk | 84,069 |
| Door | 70,849 | Portage | 101,219 |
| Douglas | 91,655 | Price | 64,694 |
| Dunn | 85,662 | Racine | 240,317 |
| Eau Claire | 122,866 | Richland | 68,746 |
| Florence | 54,814 | Rock | 183,026 |
| Fond du Lac | 118,364 | Rusk | 66,920 |
| Forest | 62,961 | St. Croix | 93,347 |
| Grant | 96,388 | Sauk | 97,131 |
| Green | 72,717 | Sawyer | 68,446 |
| Green Lake | 65,263 | Shawano | 86,741 |
| Iowa | 69,114 | Sheboygan | 132,759 |
| Iron | 56,161 | Taylor | 70,986 |
| Jackson | 66,434 | Trempealeau | 73,166 |
| Jefferson | 104,059 | Vernon | 95,046 |
| Juneau | 74,954 | Vilas | 66,614 |
| Kenosha | 187,224 | Walworth | 121,828 |
| Kewaunee | 64,135 | Washburn | 64,879 |
| La Crosse | 134,533 | Washington | 125,605 |
| Lafayette | 67,257 | Waukesha | 252,880 |
| Langlade | 70,403 | Waupaca | 90,578 |
| Lincoln | 72,776 | Waushara | 70,100 |
| | | Winnebago | 156,794 |
| | | Wood | <u>108,120</u> |
| | | Total | \$7,064,810 |

Note: Milwaukee County is not eligible to receive additional federal foster care funds since DCF is responsible for providing child welfare services in Milwaukee County.

ATTACHMENT 5

**Title IV-B, Part II County Allocations (Promoting Safe and Stable Families)
Calendar Year 2009**

| County | Amount | County | Amount |
|-------------|----------|--------------|--------------------|
| Adams | \$36,050 | Manitowoc | \$56,650 |
| Ashland | 36,050 | Marathon | 91,800 |
| Barron | 46,350 | Marinette | 46,350 |
| Bayfield | 36,050 | Marquette | 36,050 |
| Brown | 72,100 | Menominee | 0 |
| Buffalo | 36,050 | Milwaukee | 0 |
| Burnett | 36,050 | Monroe | 46,350 |
| Calumet | 43,350 | Oconto | 46,350 |
| Chippewa | 46,350 | Oneida | 46,350 |
| Clark | 46,350 | Outagamie | 72,100 |
| Columbia | 46,350 | Ozaukee | 56,650 |
| Crawford | 36,050 | Pepin | 36,050 |
| Dane | 103,000 | Pierce | 46,350 |
| Dodge | 56,650 | Polk | 46,350 |
| Door | 41,200 | Portage | 56,650 |
| Douglas | 46,350 | Price | 36,050 |
| Dunn | 46,350 | Racine | 72,100 |
| Eau Claire | 56,650 | Richland | 36,050 |
| Florence | 36,050 | Rock | 61,800 |
| Fond du Lac | 56,650 | Rusk | 36,050 |
| Forest | 36,050 | St. Croix | 51,500 |
| Grant | 46,350 | Sauk | 46,350 |
| Green | 46,350 | Sawyer | 36,050 |
| Green Lake | 36,050 | Shawano | 46,350 |
| Iowa | 41,200 | Sheboygan | 101,300 |
| Iron | 36,050 | Taylor | 41,200 |
| Jackson | 36,050 | Trempealeau | 41,200 |
| Jefferson | 51,500 | Vernon | 46,350 |
| Juneau | 41,200 | Vilas | 36,050 |
| Kenosha | 61,800 | Walworth | 56,650 |
| Kewaunee | 41,200 | Washburn | 36,050 |
| La Crosse | 61,800 | Washington | 61,800 |
| Lafayette | 36,050 | Waukesha | 103,000 |
| Langlade | 41,200 | Waupaca | 46,350 |
| Lincoln | 46,350 | Waushara | 41,200 |
| | | Winnebago | 61,800 |
| | | Wood | <u>51,500</u> |
| | | Total | \$3,453,050 |

ATTACHMENT 6

BMCW Performance Regarding Permanence, Safety, and Well-Being Standards

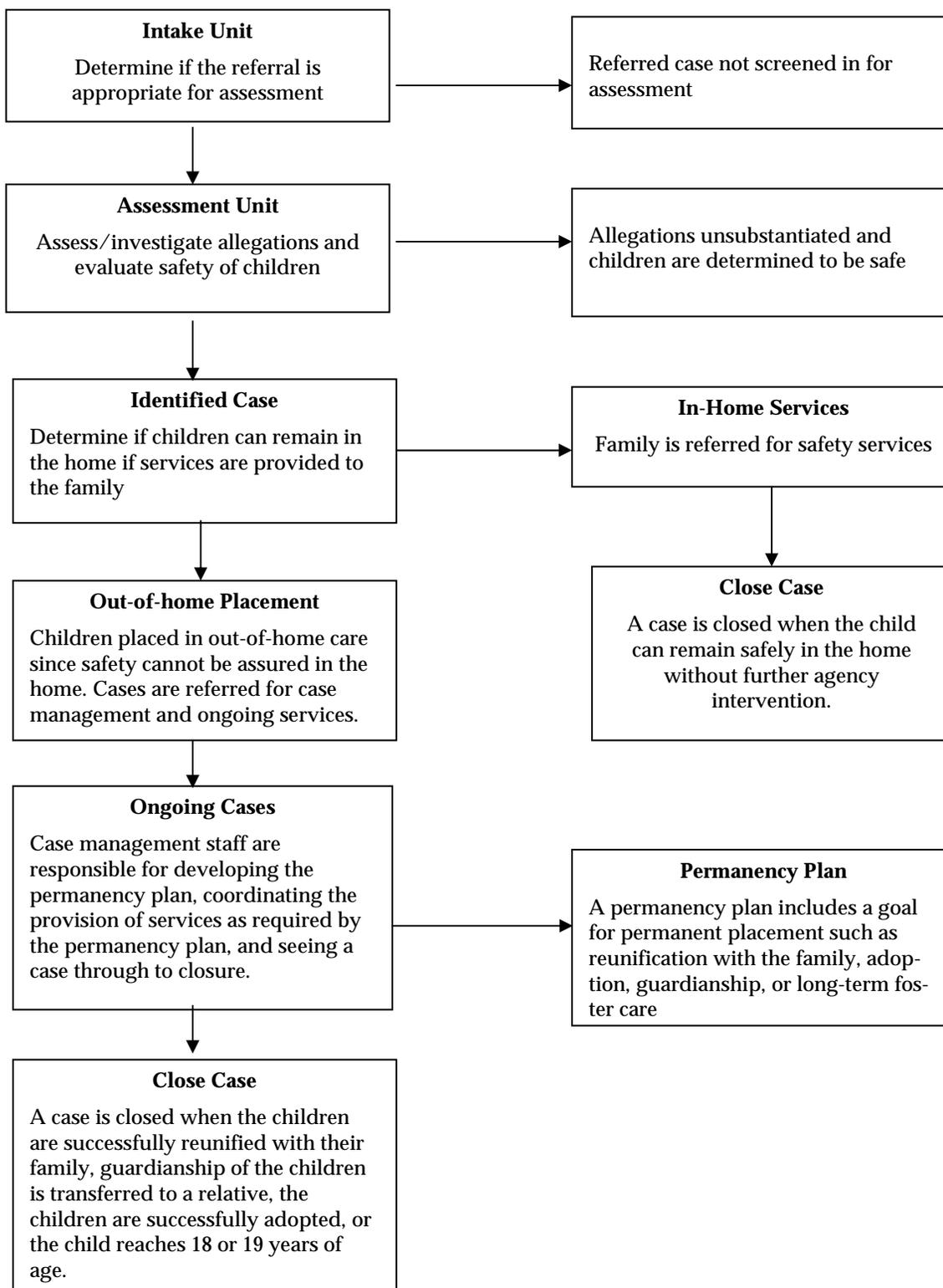
| | Period 1 (2003) | | Period 2 (2004) | | Period 3 (2005) | |
|--|-----------------|--------|-----------------|--------|-----------------|--------|
| | Standard | Actual | Standard | Actual | Standard | Actual |
| Permanence | | | | | | |
| TPR by 15th month for children in out-of-home care for 15 of last 22 months | ≥ 65.0% | 76.8% | ≥ 75.0% | 88.2% | ≥ 90.0% | 29.0%* |
| TPR by end of period, for children in out-of-home care 15 of last 22 months and didn't get TPR by 15th month | ≥ 75.0% | 88.5% | ≥ 85.0% | 92.9% | ≥ 90.0% | 92.0% |
| Children in out-of-home care for more than 24 months | ≤ 40.0% | 44.2%* | ≤ 35.0% | 30.2% | ≤ 25.0% | 23.0% |
| Reunification within 12 months of entry into out-of-home care | monitor | 45.0% | ≥ 65.0% | 63.0%* | ≥ 71.0% | 72.0% |
| Exit out-of-home care within 24 months for children with finalized adoptions | ≥ 20.0% | 14.2%* | ≥ 25.0% | 15.5%* | ≥ 30.0% | 21.7%* |
| Safety | | | | | | |
| % of children with substantiated abuse or neglect allegations by a foster parent or staff member | ≤ 0.70% | 0.57% | ≤ 0.65% | 0.85%* | ≤ 0.60% | 0.81%* |
| Alleged abuse and neglect reports referred to independent investigation agency within three days | ≥ 80.0% | 99.8% | ≥ 85.0% | 99.4% | ≥ 90.0% | 99.0% |
| Permanence | | | | | | |
| Assign a staff person within three days of investigation agency's receipt of referral | ≥ 80.0% | 99.6% | ≥ 85.0% | 99.8% | ≥ 90.0% | 99.0% |
| Make determination within 60 days of investigation agency's receipt of referral | ≥ 80.0% | 97.6% | ≥ 85.0% | 98.1% | ≥ 90.0% | 99.0% |
| Well-Being | | | | | | |
| Number of families per caseworker | ≤ 13.0 | 9.8 | ≤ 11.0 | 10 | ≤ 11.0 | 10 |
| Children in out-of-home care who have monthly face-to-face contact with their case manager | ≥ 90.0% | 90.0% | ≥ 90.0% | 97.0% | ≥ 90.0% | 97.0% |
| Children in out-of-home care shall have three or fewer placements | ≥ 80.0% | 75.9%* | ≥ 82.0% | 72.1%* | ≥ 90.0% | 72.0%* |

*Indicates area in which BMCW did not meet the standard.

ATTACHMENT 7

Department of Children and Families

Bureau of Milwaukee Child Welfare Case Decision-Making Process



ATTACHMENT 8

Summary of Outcome Measures, Systemic Factors, and Results Under the Child and Family Services Review (2003)

Outcome Measures:

| Strength | Needs Improvement | | Percent Achieved | Substantial Conformance |
|----------|-------------------|---|------------------|-------------------------|
| | | Safety Outcome 1 | | |
| | | <i>Children are first and foremost protected from abuse and neglect</i> | 79.1% | No |
| | X | Timeliness of CPS investigations | | |
| | X | Repeat maltreatment | | |
| | | Safety Outcome 2 | | |
| | | <i>Children are safely maintained in their homes when possible</i> | 83.3 | No |
| X | X | Services to prevent removal | | |
| | | Risk of harm | | |
| | | Permanency Outcome 1 | | |
| | | <i>Children have permanency and stability in their living situations</i> | 48.0 | No |
| | X | Out-of-home care re-entry | | |
| | X | Stability of out-of-home care placements | | |
| | X | Permanency goal for child | | |
| | X | Reunification, guardianship, and placement with relatives | | |
| | X | Adoption | | |
| | X | Other planned living arrangement | | |
| | | Permanency Outcome 2 | | |
| | | <i>The continuity of family relationships and connections is preserved</i> | 44.0 | No |
| X | | Proximity of placement | | |
| | X | Placement with siblings | | |
| | X | Visiting with parents and siblings in out-of-home care | | |
| | X | Preserving connections | | |
| | X | Relative placement | | |
| | X | Relationship of child in care with parents | | |
| | | Well-Being Outcome 1 | | |
| | | <i>Families have enhanced capacity to provide for children's needs</i> | 54.0 | No |
| | X | Needs/services of child, parents, and foster parents | | |
| X | X | Child/family involvement in case planning | | |
| | X | Worker visits with child | | |
| | X | Worker visits with parents | | |
| | | Well-Being Outcome 2 | | |
| | | <i>Children receive services to meet their educational needs</i> | 90.9 | Yes |
| X | | Educational needs of child | | |
| | | Well-Being Outcome 3 | | |
| | | <i>Children receive services to meet their physical and mental health needs</i> | 68.8 | No |
| | X | Physical health of child | | |
| | X | Mental health of child | | |

ATTACHMENT 8 (continued)

Systemic Factors:

| Strength | Needs Improvement | | Rating* | Substantial Conformance |
|----------|-------------------|---|---------|-------------------------|
| | | Statewide Information System | | |
| | | <i>Ability to collect data</i> | 3 | Yes |
| X | | System can identify the status, demographic characteristics, location, and goals of children in out-of-home care | | |
| | | Case Review System | | |
| | | <i>Court processes</i> | 2 | No |
| | X | Process for developing a case plan and for joint case planning with parents | | |
| X | | Process for 6-month case reviews | | |
| X | | Process for 12-month permanency hearings | | |
| | X | Process for seeking TPR in accordance with ASFA | | |
| | X | Process for notifying caregivers of reviews and hearings and for opportunity for them to be heard | | |
| | | Quality Assurance System | | |
| | | <i>Quality Assurance Program in DCFS for Counties; PEM in BMCW</i> | 2 | No |
| X | | Standards to ensure quality services and ensure children safety and health | | |
| | X | Identifiable quality assurance system that evaluates the quality of services and improvements | | |
| | | Staff and Provider Training | | |
| | | <i>Child Welfare staff and foster and adoptive parents</i> | 2 | No |
| | X | Provision of initial staff training | | |
| | X | Provision of ongoing staff training that addresses the necessary skills and knowledge | | |
| | X | Provision of training for caregivers and adoptive parents that addresses the necessary skills and knowledge | | |
| | | Service Array | | |
| | | <i>Services available to serve families</i> | 2 | No |
| | X | Availability of array of critical services | | |
| | X | Accessibility of services across all jurisdictions | | |
| X | | Ability to individualize services to meet unique needs | | |
| | | Agency Responsiveness to Community | | |
| | | <i>Community investment in state plans</i> | 3 | Yes |
| | X | Engages in ongoing consultation with critical stakeholders in developing the Child and Family Services State Plan | | |
| X | | Develops annual progress reports in consultation with stakeholders | | |
| X | | Coordinates services with other federal programs | | |
| | | Foster and Adoptive Parent Licensing, Recruitment, and Retention | | |
| | | <i>Standards and efforts to recruit foster and adoptive parents</i> | 3 | Yes |
| X | | Standards for foster family and child care institutions | | |
| X | | Standards are applied equally to all foster family and child care institutions | | |
| X | | Conducts necessary criminal background checks | | |
| X | | Diligent recruitment of foster and adoptive families that reflect children's racial and ethnic diversity | | |
| | X | Uses cross-jurisdictional resources to find placements | | |

*On a scale of 1 to 4, with 4 being the highest rating. A rating of 1 or 2 means the factor is not in conformance; a rating of 3 or 4 means the factor is in conformance.

ATTACHMENT 9

State Performance on CFSR Outcome Items

| Item | Description | Baseline | Quarters 5-8 Performance | Improvement Target |
|--|---|--------------|--------------------------|--------------------|
| Safety Outcome 1 and 2 Performance Items | | | | |
| 1* | Timeliness of CPS investigations | 44.8% | 46.8% | 46.8% |
| 2* | Recurrence of maltreatment | 7.1% | National Standard | 6.2% |
| 3* | Services to prevent removal | 79.0% | 86.5% | 81.0% |
| 4 | Risk of harm to child | 86.0% | 99.5% | No change needed |
| Permanency Outcome 1 Performance Items | | | | |
| 5* | Re-entry to out-of-home care | 21.5% | National Standard | 20.2% |
| 6* | Stability of out-of-home care placements | 86.7% | National Standard | No change needed |
| 7** | Permanency goal for child | 64.0% | 42.6% | 66.0% |
| 8* | Reunification, guardianship, and placement with relatives | 65.2% | National Standard | 67.6% |
| 9* | Adoption | 17.8% | National Standard | 20.7% |
| 10** | Other planned living arrangement | 70.0% | 43.5% | 72.0% |
| Permanency Outcome 2 Performance Items | | | | |
| 11 | Placement proximity | 100.0% | Not available | No change needed |
| 12 | Placement with siblings | 59.0% | 82.4% | 61.0% |
| 13 | Visiting with parents and siblings in out-of-home care | 61.0% | 64.4% | 63.0% |
| 14** | Preserving connections | 68.0% | Not available | 70.0% |
| 15 | Relative placement | 53.0% | 71.7% | 55.0% |
| 16 | Relationship of child in care with parents | 67.0% | 67.7% | 69.0% |
| Well-Being Outcome 1 Performance Items | | | | |
| 17* | Needs/services of child, parents, and foster parents | 56.0% | 82.2% | 58.0% |
| 18* | Child/family involvement in case planning | 56.0% | 66.9% | 58.0% |
| 19 | Worker visits with child | 88.0% | 83.6% | No change needed |
| 20* | Worker visits with parents | 72.0% | 70.7% | 74.0% |
| Well-Being Outcomes 2 and 3 Performance Items | | | | |
| 21 | Educational needs of child | 91.0% | 81.6% | No change needed |
| 22 | Physical health of child | 87.0% | 99.5% | 89.0% |
| 23 | Mental health of child | 71.0% | 91.4% | 73.0% |

*Item subject to federal penalties if fail to meet performance target

**Item did not meet performance target during any of the eight quarters. (None of these items are subject to federal penalties.)

Note: DCF is working on improving measurement on items for which performance is not available.

APPENDIX A

History of Federal Child Welfare Law

Introduction

The first documented case of child abuse in the United States occurred in 1874. The American Society for the Prevention of Cruelty to Animals (ASPCA) had been notified that a girl named Mary Ellen had been regularly bound and beaten by her stepmother and brought the case to court to remove the child from her home and to prosecute her stepmother. Following ASPCA's successful conclusion of the case, the first child protection society, the New York Society for the Prevention of Cruelty to Children, was formed and protective societies were established throughout the United States. Some of these societies emphasized "child rescue" and placed children in orphanages. Others emphasized family rehabilitation, which focused on keeping children in homes and reunifying families. When children were removed from their homes, they were placed in foster homes.

The family rehabilitation view gained more prominence and influenced state legislation and policy. State child welfare systems were established, but did not receive significant public interest. This changed with the 1962 publication of "The Battered-Child Syndrome," a research article by Dr. C. Henry Kempe and his colleagues, which examined the causes of, and the appropriate responses to, the physical abuse of children. The article indicated that little was known about the prevalence of child abuse in the United States. In response to Dr. Kempe's article, and the subsequent increase in the public's interest, the first federal legislation on child abuse was passed in 1974 -- the Child Abuse and Neglect Prevention Act (CAPTA), 100 years after Mary Ellen's court case.

Federal legislation has been enacted subsequently that builds upon CAPTA and reflects not only changes in the knowledge of child development, but also philosophical changes in the field of

child welfare. The most significant federal child welfare legislation is described below.

It should be noted that a significant portion of federal law regarding child welfare is found under Title IV-E and Title IV-B of the federal Social Security Act. As a result, much of the following legislation either created or modified federal law under Title IV-E or Title IV-B.

Child Abuse Prevention and Treatment Act of 1974

CAPTA (P.L. 93-247) provided funding to states to: (a) develop child abuse and neglect identification and prevention programs; (b) support innovative programs aimed at preventing and treating child maltreatment; and (c) authorize limited research into child abuse prevention and treatment.

CAPTA has been reauthorized six times since 1974. Each reauthorization added to, or changed, some aspect of the original legislation. Some of these changes include: (a) facilitating the placement of children with special needs in permanent adoptive homes; (b) creating a national adoption information exchange system; (c) promoting quality standards for adoptive placements and the rights of adopted children; (d) expanding the scope of child abuse to include neglect, specifically medical neglect, and requiring states to facilitate adoption opportunities for disabled infants with life-threatening conditions; (e) providing money to states for community-based child abuse and neglect prevention grants; and (f) requiring states to institute an expedited termination of parental rights (TPR) process for abandoned infants or children whose parents are responsible for the death or serious bodily injury of a child.

In addition, CAPTA established a national data collection system that requires states to report

standardized data, including: (a) the number of reported cases; (b) the number of cases substantiated, unsubstantiated, or determined to be false; (c) the number of children who received services; (d) the number of children removed from their homes; (e) agency response time to reports and to provide services; and (f) the number of children reunited with their families. CAPTA also changed the expectations, roles, and responsibilities of CPS staff, and the requirements of the CPS program, including requiring an assessment of the family's risk of abuse, neglect, and safety.

In the 1996 re-authorization of CAPTA, a base national definition of child abuse was established to include death, serious physical or emotional injury, sexual abuse, or imminent risk of harm.

The Keeping Children and Families Safe Act of 2003 (P.L. 108-36) reauthorized CAPTA through 2008, but it also made significant changes to CAPTA. The Act has four primary provisions that affect child protective services, including: (a) requiring states to develop a plan of safe care for the infants affected by illegal substance abuse or withdrawal symptoms; (b) requiring CPS caseworkers to advise the alleged maltreater of the allegations against him or her at the first contact that the CPS caseworker has with the alleged maltreater; (c) establishing procedures for referral of a child under three years of age who has been substantiated as abused or neglected to the Birth-to-3 program; and (d) establishing triage procedures for the appropriate referral of a child not at risk of imminent harm from abuse or neglect to community organizations or a voluntary preventive service. In addition, the Act implements programs to increase the number of older foster children placed in adoptive families, including a grant program to eliminate barriers to placing children for adoption across jurisdictional boundaries.

CAPTA has not yet been reauthorized beyond 2008. However, funding under CAPTA has continued. It is believed that reauthorization of the program will occur in Spring of 2009.

Indian Child Welfare Act of 1978

The Indian Child Welfare Act of 1978 (P.L. 95-608) was enacted to protect the interests of Native American children and promote stability and security of Indian tribes and families. Under the Act, tribes have jurisdiction in child welfare services custody proceedings involving Native American children who reside on reservations (this does not include the authority to conduct child protective services investigations or initial assessments) and have a right to intervene in certain custody matters involving a Native American child. In addition, the Act establishes minimum federal standards for the removal of Native American children from their families, requires Native American children to be placed in foster or adoptive homes that reflect Native American culture, grants preference to Native American family environments in adoptive or foster care placement, requires child welfare agencies to provide "active efforts" to prevent the breakup of Native American families and prevent termination of parental rights (rather than "reasonable efforts" required for non-Native American children), provides assistance to tribes in the operation of child and family service programs, and sets a "beyond a reasonable doubt" standard of proof for terminating Native American parents' parental rights.

Adoption Assistance and Child Welfare Act of 1980

The Adoption Assistance and Child Welfare Act (AACWA) of 1980 (P.L. 96-272) increased the involvement of the court in child welfare cases to counteract the authority of the child welfare system, with the intent to hold the child welfare system accountable and to reduce the number of children removed from their homes, the amount of time children spend in out-of-home care, and the number of placements experienced by children. AACWA established adoption assistance payments, which are made to parents who adopt a child with special needs.

AACWA also established the practice of developing and implementing permanency plans, with

an emphasis on reuniting children with their families. In addition, the AACWA introduced the concepts of "best interests of the child" and "reasonable efforts," which are examined when trying to determine if a child should be removed from his or her home, when to reunify a child with the family, and to achieve the goals of the permanency plan. States are required to place each child in the least restrictive setting, consistent with the needs of the child.

Family Preservation and Support Services Program

Passed as part of the Omnibus Budget Reconciliation Act of 1993 (P.L. 103-66), the Family Preservation and Support Services Program provides funding to states to create a continuum of family-focused services for "at-risk" children and families and encourages states to use the funds to integrate preventive services into a treatment-oriented child welfare system, to improve service coordination within and across state agencies, and to engage broad segments of the community in program planning at state and local levels. It also defined the services states must provide to include: (a) preservation, which are activities designed to assist families in crisis (including extended and adoptive families), often when the child is at risk of being placed in out-of-home care because of abuse or neglect; and (b) support, which are preventive activities, typically provided by community-based organizations, to improve nurturing of children and strengthen and enhance the stability of families.

This program is incorporated under Title IV-B of the Social Security Act. In 1997, the program was renamed Promoting Safe and Stable Families and included two additional services: (a) time-limited reunification services to facilitate the safe and appropriate reunification of children in out-of-home care with their families; and (b) adoption promotion and support services to encourage more adoptions of children from the out-of-home care system, including pre- and post-adoption services designed

to expedite adoptions and support families.

In 2002, additional activities were permitted under this program, including: (a) infant safe haven programs; (b) mentoring children of incarcerated parents; (c) strengthening parental relationships; and (d) promoting healthy marriages.

In 2006, this program changed from a permanent authorization to a five-year authorization through 2011 and required minimum standards for caseworker visits.

Multi-Ethnic Placement Act of 1994

The Multi-Ethnic Placement Act of 1994 (P.L. 103-382) was enacted to reduce the length of time that children wait to be adopted, facilitate the recruitment and retention of foster and adoptive parents who can meet the needs of children waiting for placement, and eliminate discrimination on the basis of the race, color, or national origin of the child or the prospective foster or adoptive parent. The only categorical exception to this requirement is Native American children, who are covered under the Indian Child Welfare Act, which supersedes the Multi-Ethnic Placement Act.

The Act prohibits states and other entities that are involved in foster care or adoption placements, and that receive any federal funding, from delaying or denying the placement of a child solely on the basis of race, color, or national origin of the adoptive or foster parent, or the child, involved.

The Act also prohibits states and other entities from denying any individual the opportunity to become a foster or adoptive parent on the basis of the prospective parent's or the child's race, color, or national origin. Finally, the Act requires child welfare services systems to diligently recruit a pool of potential foster and adoptive families that reflects the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed.

Adoption and Safe Families Act of 1997

The Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89) established a variety of new standards for children and juveniles placed in, or at risk of being placed in, out-of-home care. ASFA is focused on the safety, permanence, and well-being of children who are removed from their homes, with safety being the primary consideration. The final federal rules became effective in March of 2000, and the federal requirements and regulations are incorporated into state statute.

ASFA establishes requirements for states to pursue the TPR and adoption of children who have been in out-of-home care for 15 of the last 22 months. In addition, ASFA specifies that a TPR petition must be filed if a court has determined that: (a) a child was abandoned when he or she was under one year of age; (b) a parent has committed, has aided or abetted the commission of, or has solicited, conspired, or attempted to commit first- or second-degree intentional homicide, first-degree reckless homicide, or felony murder and that the victim of the homicide is a child of the parent; or (c) the parent has committed substantial battery, first- or second-degree sexual assault, first- or second-degree sexual assault of a child, repeated acts of sexual assault of the same child, or intentionally or recklessly caused great bodily harm to a child if the violation resulted in great or substantial bodily harm to the child or another child of the parent.

Exceptions to the TPR requirements are provided in cases where: (a) a child is being cared for by a fit and willing relative; (b) a child's permanency plan indicates and provides documentation that TPR is not in the best interests of the child; (c) the agency primarily responsible for providing services to a child and family under a court order has not, if so required, provided the family of the child, consistent with the time period in the permanency plan, the services necessary for the safe return of the child to his or her home; or (d) grounds for involuntary TPR do not exist. Once an exception is made, there is no defined time at which TPR must be considered again; however, the

TPR decision or exception must be made each time a child has been in out-of-home care for 15 of the last 22 months. This applies primarily when a child entered and exited out-of-home care on multiple occasions. The Indian Child Welfare Act supersedes the Adoption and Safe Families Act.

ASFA introduced the concept of concurrent planning, which permits states to make reasonable or active efforts to place a child for adoption or with a legal guardian while, at the same time, states make reasonable or active efforts to reunify the child and family. This change supports the goal of permanency for children, based on the belief that out-of-home care is a temporary setting and not a place for children to grow up. ASFA also requires that a permanency plan hearing be held every 12 months, instead of every 18 months as was previously required, and that permanency planning begin immediately after the child is removed from the home. In addition, the permanency plan incorporates the idea that permanence can be expedited through the provision of services to families.

Finally, ASFA authorizes the Secretary of the federal Department of Health and Human Services (DHHS) to make incentive payments to states to increase the number of adoptions of children in foster care as compared to the greatest number of adoptions in any fiscal year, from 1997 through the current year.

Formerly, a state received \$4,000 per adoption plus \$2,000 for each special needs adoption and, since 2003, an additional \$4,000 for each adoption of a child nine years of age or older, with a maximum incentive payment per adoption of \$8,000. Under the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351), the incentive amount for special needs adoptions is \$4,000, and for older child adoptions is \$8,000. Additional incentive payments are permitted if states exceed their highest recorded adoption rate since 2002.

States are required to reinvest these incentive funds into child welfare programs. This provision

supports one of ASFA's ideals of results and accountability of the child welfare and juvenile justice systems.

The Foster Care Independence Act of 1999

The Foster Care Independence Act of 1999 (P.L. 106-169) established the John H. Chafee Independence Program, which revised the funding mechanism to states for independent living programs. The Act also expanded opportunities for independent living programs providing education, training, and employment services, and financial support for foster youth to prepare for living on their own. The Act allows states to provide medical assistance (MA) coverage to individuals between the ages of 18 and 21 who were in out-of-home care on their 18th birthday, requires states to ensure that foster parents are adequately prepared, both initially and on a continuing basis, to care for the children placed with them, and authorizes additional funding for adoption incentive payments to states to assist in finding permanent homes for children in out-of-home care.

In 2002, an educational voucher program was added to provide for education and training, including postsecondary training and education, to youth who have aged out of foster care.

The Fostering Connections to Success and Increasing Adoptions Act of 2008.

The Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351) focuses on: (a) ensuring permanent placements with relatives; (b) increasing adoptive families for children; (c) maintaining sibling ties and other family connections; (d) improving outcomes for older youth in foster care; (e) improving the quality of staff working with children in the child welfare system; (f) increasing access by tribes to federal funding to promote better outcomes for Indian children; and (g) addressing children's health and education needs.

States now have the option to use Title IV-E

funds for kinship guardianship payments for children raised by relative caregivers who care for them in foster care and are committed to caring for them permanently when they leave foster care. State agencies must exercise due diligence to identify and provide notice to all adult grandparents and other adult relatives of a child within 30 days after the child is removed from his or her home. States may waive non-safety licensing standards on a case-by-case basis in order to eliminate barriers to placing children safely with relatives in licensed homes. Reasonable efforts must also be made to place siblings together or, if not placed together, to establish frequent visitation among siblings.

Federal foster care maintenance payments have been extended to youth up to the age of 21 and include supervised independent living settings as a Title IV-E reimbursable child caring facility. Youth must be involved in productive activity such as education, training, or work, or incapable of doing these activities due to a medical condition. A personalized transition plan is required within 90 days from the anticipated date of discharge from out-of-home care. Adoption assistance and guardianship payments have also been extended up to age 21 for children adopted or entering guardianship after age 16. In addition, all independent living services and education and training voucher benefits have been extended to children 16 and older who have been adopted or entered a guardianship program from foster care.

The requirement that the home a child was removed from must meet the income eligibility requirements under the former aid to families with dependent children (AFDC) program has been eliminated for Title IV-E adoption assistance. In addition, children who are eligible for supplemental security income (SSI), based solely on the medical and disability requirements, are automatically considered children with special needs and eligible for adoption assistance without regard to the SSI income requirements. Title IV-E reimbursements to states based on these new Title IV-E eligibility rules must be invested in child welfare services, including post-adoption services. The expansion of spe-

cial needs adoption assistance payments will be phased in over nine years, with older children and those who have spent at least 60 consecutive months in care, and their siblings, being eligible first.

Other provisions: (a) allow Title IV-E reimbursement at an enhanced training rate for training costs associated with staff of private child welfare agencies, court-related staff such as judges and attorneys, and non-reimbursable placement providers such as court-ordered kinship care providers;

(b) require state child welfare agencies to coordinate with local school districts to ensure educational stability of children in out-of home care related to school enrollment, school transition, and record sharing; (c) allow school-related transportation costs to be included in Title IV-E maintenance claims for out-of home care payments; and (d) require states to develop, in collaboration with the state Medicaid agency and other health professionals, a plan regarding the ongoing coordination and oversight of health services for children in out-of-home care.

APPENDIX B

Description of Outcome Measures, System Factors, and Findings Under the Child and Family Services Review

Outcome Measures

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

This outcome incorporated two indicators: (a) the timeliness of initiating a response to a child maltreatment report; and (b) the recurrence of substantiated or indicated maltreatment for the same children, either in the family or in foster care. The state's rate of occurrence had to meet or be less than the national standard. Table A shows Wisconsin's results for the second indicator.

CFSR Findings. The state was not in substantial compliance with this outcome measure. A key finding of the CFSR case reviews was that local child welfare agencies were not consistent in responding to maltreatment reports and establishing face-to-face contact in accordance with the required timeframes established by agency policy. It was found that there were delays in responding to all maltreatment reports, regardless of classification (that is, urgent or moderate to low risk).

Also, stakeholders and case reviewers reported that maltreatment allegations received on open

cases were not routinely reported for a formal investigation. Consequently, the actual rate of maltreatment recurrence within six months could have been higher than the rate reported in the state data.

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

This outcome incorporated two indicators: (a) child welfare agency's efforts to prevent children's removal from their homes by providing services to the families that ensure children's safety while they remain in their homes; and (b) child welfare agency's efforts to reduce risk of harm to child to children.

CFSR Findings. The state was not in substantial compliance with this outcome measure. The CFSR found that local agencies were not consistently effective in their efforts to maintain children safely in their homes. Of primary concern was that the services offered were not sufficient to ensure children's safety while they remained in the home, and, in some cases, children were not being removed when risk of harm was present. However, agencies were more effective in addressing risk of harm issues by removing children and placing them in out-of-home care.

Table A: State Conformity to National Standards -- Safety Outcome 1

| Standard | National Standard (Percentage) | Wisconsin's Percentage | Meets Standard |
|---|--------------------------------|------------------------|----------------|
| Repeat maltreatment | 6.1 or less | 6.9 | No |
| Maltreatment of children in foster care | 0.57 or less | 0.61 | No |

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

Compliance with this outcome was determined using six indicators: (a) preventing foster care re-entries; (b) ensuring stability of foster care placement; (c) establishing appropriate permanency goals for children in foster care in a timely manner; (d) reunification, guardianship, or permanent placement with relatives; (e) adoption; and (f) permanency goal of other planned permanent living arrangement.

Four of these indicators compared Wisconsin's data to the national standards. Re-entry into care was defined as the percentage of children who were re-entering out-of-home care within 12 months of a prior out-of-home care episode. Timely reunification was the percentage of all children who were reunified with their families from out-of-home care within 12 months of entry into out-of-home care. The timely adoption standard was the percentage of children that were adopted within 24 months of their entry into out-of-home care. Finally, placement stability was defined as those children who were in out-of-home care for less than 12 months and experienced no more than two placement settings.

CFSR Findings. The state did not meet substantial conformance with this measure. Table B shows Wisconsin's results. The review found that Wisconsin was not consistently effective with regard to: (a) establishing appropriate permanency goals in a timely manner; (b) reunifying children in a timely manner; and (c) achieving finalized adoptions in a

timely manner. In addition, the review identified barriers to achieving timely permanency, including a child welfare agency and court practice of maintaining the goal of reunification when the prognosis of achieving that goal was poor, a reluctance on the part of local agencies to seek TPR until an adoptive resource was found for the child, and delays in the TPR process due to parents' requests for a jury trial and other factors.

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

This outcome incorporated six indicators to assess the child welfare agency's performance with regard to: (a) placing children in out-of-home care in close proximity to their parents and close relatives; (b) placing siblings together; (c) ensuring frequent visitation between children and their parents and siblings in out-of-home care; (d) preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools; (e) seeking relatives as potential placement resources; and (f) promoting the relationship between children and their parents while the children are in out-of-home care.

CFSR Findings. The state did not meet substantial conformance with this measure. The review found that while local agencies made concerted efforts to place children in close proximity to their parents or close relatives, the agencies were less consistent in their efforts to place siblings together, ensure frequent visitation between children, parents, and siblings in foster care, maintain children's

Table B: State Conformity to National Standards -- Permanency Outcome 1

| Standard | National Standard (Percentage) | Wisconsin's Percentage | Meets Standard |
|----------------------|--------------------------------|------------------------|----------------|
| Re-entry into care | 8.6 or less | 25.5 | No |
| Timely reunification | 76.2 or more | 71.0 | No |
| Timely adoption | 32.0 or more | 21.2 | No |
| Placement stability | 86.7 or more | 93.8 | Yes |

connections, seek relatives as placement resources, and promote the bond between parents and children while the children were in foster care.

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

This outcome measure was evaluated by looking at four areas: (a) the child welfare agency's efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet the identified needs; (b) the active involvement of family and children in the case planning process; (c) the frequency of a caseworker's contact with the children in their caseloads and with the children's parents; and (d) the quality of a caseworker's contact with the children in their caseloads and with the children's parents.

CFSR Findings. The state did not meet substantial conformance with this outcome measure. The review found that local agencies were not consistent with regard to their efforts to: (a) assess needs and provide services to children, parents, and foster parents, (b) involve children and parents in case planning; or (c) establish face-to-face contact with parents that was of sufficient frequency and quality to ensure children's safety and/or promote attainment of case goals. However, the review did find that the frequency and quality of caseworker contacts with children was sufficient to monitor their safety and promote their well being.

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

Under this outcome, child welfare agencies' efforts to assess and provide services that meet the educational needs of children in both out-of-home care and in-home services were examined.

CFSR Findings. Wisconsin was found to be in substantial conformity with this outcome measure. However, the review did indicate some concern with the number of school changes experienced by

children in out-of-home care.

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

The review looked at the child welfare agency's efforts to meet children's physical health and mental health needs to measure the state's performance for the outcome measure.

CFSR Findings. The state did not meet substantial conformance with this outcome measure. The review found that agencies were not consistent in addressing these needs of children, specifically that children were not receiving mental health assessments even when the nature of the maltreatment, the dynamics of the family, and the family's and child's history indicate that a mental health assessment was warranted.

Systemic Factors

Systemic Factor 1: Statewide Information System

Under this factor, the review looked at whether the state was operating a statewide information system that can identify the status, demographic characteristics, location, and goals for children in foster care.

CFSR Findings. Wisconsin was found to be in substantial conformance with this factor through eWISACWIS and the human services reporting system (HSRS).

Systemic Factor 2: Case Review System

Five areas were examined as part of this factor: (a) the development of case plans and parent involvement in the case review process; (b) the consistency and timeliness of six-month case reviews; (c) the consistency and timeliness of twelve-month permanency hearings; (d) the

implementation of procedures to seek TPR in accordance with the time frames established in ASFA; and (e) the notification and inclusion of foster and pre-adoptive parents, relative caregivers, and other physical custodians in the case reviews and hearings.

CFSR Findings. The state did not meet substantial conformance for this factor. The review found that local agencies did not routinely involve both parents in the case planning process and the development of the case plan -- mothers were almost always involved but fathers were almost always excluded even when their whereabouts were known. The review also found that the TPR process was not being consistently implemented in accordance with ASFA and that there were court and agency related delays with regard to both filing for TPR and attaining TPR. Finally, the review found that the process for notifying foster parents, pre-adoptive parents, relative caregivers, and other physical custodians about reviews and hearings was not being implemented in a consistent manner throughout the state. However, the review found that the six-month case reviews and the 12-month permanency hearings were being held in a timely manner.

Systemic Factor 3: Quality Assurance System

Conformance with this standard was determined by whether or not the state had developed standards to ensure the safety and health of children in out-of-home care and whether the state was operating a statewide quality assurance system that evaluated the quality and effectiveness of services and measured program strengths and areas needing improvement.

CFSR Findings. The state did not meet substantial conformance for this factor, primarily because there was not a statewide quality assurance program. The review did conclude, however, that the state had developed and implemented both initial assessment/investigative standards and on-going guidelines to ensure the safety of children in out-of-home care.

Systemic Factor 4: Training

This factor incorporated an assessment of the state's new caseworker training program, ongoing training for child welfare agency staff, and training for foster and adoptive parents.

CFSR Findings. The review found that the state was not in compliance with this standard. In Wisconsin, training was provided by the state, counties, training partnerships, tribes, and universities. The review found that this network did not ensure that newly hired caseworkers in all child welfare agencies received the initial training necessary to provide services to support state program goals and federal policy requirements. In addition, the review found that many newly hired caseworkers were assigned caseloads before completing a training program, and that there were not statewide requirements for staff to participate in ongoing training. Finally, there was no state mandated training for foster parents, either before placement or ongoing. The review found that, as a result, there were some counties in which foster parents receive minimal training prior to having children placed in their homes.

Systemic Factor 5: Service Array

This factor looked at whether the state had in place an array of services to meet the needs of children and families served by the child welfare agency, whether these services were accessible to families and children throughout the state, and whether the services could be individualized to meet the unique needs of the children and family served by the agency.

CFSR Findings. The review found that the state was not in conformance with this standard, on all three points. Specifically, the review indicated that the state did not provide the counties with the level of funds necessary to provide an adequate array of child welfare services. The counties that did provide a broader array of services had access to local funds. The review did indicate that there was a network of service providers in the state who

work with the child welfare agencies to individualize service to meet unique needs of the children and families.

Systemic Factor 6: Agency Responsiveness to the Community

This factor looked at the extent to which the community was involved in developing state child and family program goals and the coordination of child welfare services with other services or benefits serving the same population.

CFSR Findings. Wisconsin was found to be in substantial conformity with this factor. However, the review did indicate a need for a clearly delineated and structured consultation process that allowed for tribes and other stakeholders to provide input into the child and family program goals and objectives.

Systemic Factor 7: Foster and Adoptive Parent Licensing, Recruitment, and Retention

This factor focused on the state's standards for foster homes and RCCs, compliance with federal requirements for criminal background checks for foster and adoptive parents, efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children, and activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children.

CFSR Findings. Wisconsin was found to be in substantial conformance with this factor. However, the review did indicate that further efforts were needed to develop a process for the effective use of cross-jurisdictional resources to facilitate timely adoptions and permanent placements for waiting children.

APPENDIX C

Summary of Wisconsin's Child and Family Services Review Program Enhancement Plan

As stated in the summary of Wisconsin's program enhancement plan (PEP), DHFS expected, by implementing the PEP, to accomplish the following:

- Increase its ability to help children remain safely at home by updating policy and training and increasing technical assistance for child welfare caseworkers on safety assessment and safety planning.
- Ensure that the impact of underlying issues (such as domestic violence and/or mental health and substance abuse problems of parents) on child safety is elevated in the initial or family assessment process and related staff training.
- Ensure that CPS Ongoing Services Standards and Practice Guidelines effectively and appropriately guide case workers in assessing and responding to the needs of children, their parents, and foster parents.
- Improve the safety of children and the efficiency of and consistency among child welfare programs systemwide by more clearly defining the scope of CPS cases and the intake and assessment standards that guide caseworkers.
- Place greater emphasis on involving families in their own case planning, on the identification and safe involvement of non-custodial parents and their relatives, and on ensuring siblings placed in out-of-home care are placed together.
- Work with children's mental health experts and county and tribal child welfare agencies to develop a statewide policy on the screening and assessment of the mental health

needs of children who have been abused or neglected. Provide support to caseworkers through training and technical assistance to identify mental health issues of children and parents and address them in the ongoing services case plan.

- Through policy revision, staff training, and elimination of redundant or unnecessarily bureaucratic practices, reduce the time for and increase the efficiency of placing children in adoptive or otherwise permanent homes when they can no longer live safely with their parents.
- Stabilize placements of children in out-of-home care and reduce the actual and statistical re-entry of children in the out-of-home care system by: (a) analyzing and addressing the causes of placement instability; (b) requiring an emergency response plan for children entering out-of-home care; and (c) defining trial home visits.
- Improve the process for determining when TPR is appropriate and expediting the TPR process when it is pursued.
- Increase the effectiveness of support services for foster and adoptive parents by improving the visibility of and access to information, training, and resources. Establish a foster and adoptive parent resource center that can provide access to basic information and referral to agencies and services.
- Create a model foster parent handbook and require all licensing agencies to adapt it to reflect local agency practice and procedures.
- Implement statewide, pre-service training and ongoing training for foster and adoptive parents.

- Implement an ongoing, statewide media campaign to encourage the recruitment and retention of quality foster families for children.

- Maintain and support family connections for children in out-of-home care by re-examining and clarifying policies on family participation in case planning, visitation, establishing paternity, and relative searches for possible child placements.

- Assure that all agencies involved in the child welfare service system are aware of and comply with the requirements of the Indian Child Welfare Act.

- Clarify the authority, responsibility, and role of foster parents and other physical custodians in participating in reviews and court hearings.

- Design and implement a comprehensive, statewide quality assurance system that focuses on

quality improvement and building on strengths. Support the efforts of local child welfare agencies to maintain an environment that encourages learning and program improvement.

- Support the efforts of local and tribal child welfare agencies to maintain an environment that encourages learning and program improvement.

- Expand training for child welfare staff by establishing initial and ongoing training requirements and make training more accessible to local agencies and more applicable to working with families.

- Survey and document the workload requirements and corresponding staffing needs of local child welfare agencies, and evaluate the availability and accessibility of services for families that support child protection and well-being.