

D.S. IMPLEMENTATION PLAN



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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EXECUTIVE SUMMARY

The D.S. Lawsuit & Settlement Agreement

The Department of Children, Youth, and Families (DCYF) was sued by Disability Rights Washington (DRW) and a Class of children and youth under the age of 18 who have been removed from their parents or caregivers. The [Settlement Agreement](#), negotiated under the lawsuit, is known as the D.S. Settlement. Under the Settlement Agreement, DCYF has committed to eight System Improvements related to the Class, guided by seven overarching goals to transform child safety and well-being practices. Goals and related System Improvements are described below.

The D.S. Class

- 1) Class Members include Individuals who are or in the future will:
 - i. Be under the age of 18; AND
 - ii. Be in DCYF's placement during a dependency proceeding under Wash. Rev. Code § 13.34 until the proceeding is dismissed; AND
 - iii. ONE OR MORE OF THE FOLLOWING:
 - a. Have experienced five (5) or more placements, excluding trial return home, in-home dependencies, and temporary placements. Temporary placements mean any of the following: overnight stay with a parent, hospital, respite care, youth camps, on runaway status, or detention. Temporary placements do not include a hotel stay, an office stay, or a night-to-night foster care placement. But an individual shall not be counted to have five (5) or more placements under this section if they have been in the same placement for the last twelve (12) or more months, except if that placement was in a Qualified Residential Treatment Program (QRTP); OR
 - b. Have been referred for or are in out-of-state group care placement, OR
 - c. Have experienced a hotel or office stay in the past six (6) months; OR
 - d. Are awaiting a Children's Long-Term Inpatient Program (CLIP) bed.

The D.S. Settlement Goals:

The Settlement Agreement aspires to transform child safety and well-being practices to do the following:

- Respect and promote the dignity and integrity of each family, while supporting the potential for every family to experience healing and recovery;
- Develop and foster interdependence among extended family members and between families in their broader community to provide for children's stability, lasting and loving relationships, and connections to their own extended families, communities, and cultures;
- Provide for necessary supports and services for children to thrive in the least restrictive and most integrated settings, with a focus on strengthening families and communities to

accommodate the individual needs of children with disabilities, without relying on settings that deny children opportunities to form connections and friendships with their peers;

- Provide children with supports to recover from trauma they have experienced, and protect them from further trauma;
- Recognize that children’s own perspectives of their needs, strengths, potential, and experiences are valid, elicit and amplify those perspectives, and respond with individualized safety and well-being strategies centered on each child’s unique experiences and goals;
- Combat the institutional and systemic racism and ableism that result in disproportionate separation of families of color and families with disabilities, and meaningfully recognize and respond to the intersecting risks and harms associated with factors including disability, race, poverty, and gender identity; and
- Continuously improve through ensuring the collaboration, inclusion, and leadership of those most affected – the children, young people, and families whose perspectives are informed by their own lived experiences.

System Improvements:

To achieve the goals outlined above, DCYF will implement eight System Improvements. The System Improvements represent focused program development and improvements to address specific areas of practice and support. They are summarized below and described in more detail in subsequent sections of this plan.

- **4.6 Emerging Adulthood Housing Program**

Develop and implement an array of supported statewide housing for young people ages 16– 20 years who prefer to live independently.

- **4.7 Professional Therapeutic Foster Care**

Develop and implement a contract and licensing category for therapeutic foster parent professionals to support children with developmental disabilities or behavioral health needs and their families.

- **4.8 Statewide Hub Home Model Program**

Develop and implement a statewide Hub Home Model Program focused on caring for youth with current, or a history of, behavioral health needs.

- **4.9 Revising Licensing Standards**

Amend contracts and policies and engage in negotiated rulemaking to amend requirements for foster care placements to be more developmentally appropriate and flexible to meet the needs of individual youth.

- **4.10 Kinship Engagement Unit**

Establish a statewide unit that identifies and engages Class Members’ extended family members and friends and supports families in safely reunifying or staying together. A

contracted stakeholder process is assisting with the development, implementation, and evaluation of this System Improvement.

- **4.11 Family Group Planning**

Review the Shared Planning Meeting policies and practices for improvements and revise those policies and practices in response to stakeholder input. A contracted stakeholder process is assisting with the development, implementation, and evaluation of this System Improvement.

- **4.12 Referrals and Transitions**

Develop and implement referral and transition protocols in response to feedback from lived experience experts and other stakeholders. A contracted stakeholder process is assisting with the development, implementation, and evaluation of this System Improvement.

- **4.13 Qualified Residential Treatment Programs (QRTP)**

Increase the frequency of, and improve the process for, assessments of youth to determine if placement in a Qualified Residential Treatment Program (QRTP) is, or continues to be, the best treatment option for youth who are referred.

D.S. Monitoring and Addendum

A Settlement Agreement Addendum will be developed on or before February 2, 2024. This Addendum will include: (1) final exit criteria for each System Improvement, (2) quality assurance benchmarks for each System Improvement, (3) a way of tracking whether Class Members are being served in the least restrictive and most integrated setting, (4) the methodology for measuring and tracking Defendants' progress toward achieving each System Improvement and any intermediary steps, (5) the methodology for measuring and tracking progress toward achieving each of the exit criteria set forth in paragraphs 37-45, and (6) the approach for determining capacity needs for each System Improvement. There will be an opportunity for public feedback before the Data Addendum is finalized. Information about the public feedback process, as well as the final Data Addendum, will be posted on the DCYF Settlement website.

Once finalized, the addendum will be added to the final version of the Implementation Plan and posted on Defendants' website.

Based on best judgment, this plan identifies core strategies and activities for each System Improvement that may be revised based on new information.

Contracted Stakeholder Engagement

Three of the System Improvements, 4.10 Kinship Engagement Unit, 4.11 Family Group Planning, and 4.12 Referrals and Transitions required stakeholder engagement by a contracted stakeholder facilitator. Public Consulting Group (PCG) was contracted to solicit, collect, synthesize, communicate, and develop recommendations from the stakeholders. PCG engaged

families, lived experience experts, Tribes and other stakeholders in this process and established a subcontract with Think of Us (TOU) to obtain input from youth with lived experience. The findings and recommendations from this work are compiled in the [Stakeholder Facilitation for Systemic Improvements report](#). Recommendation matrices have been developed for the [PCG](#) and [Think of Us](#) recommendations. They specify where in the Implementation Plan specific recommendations have been incorporated and actions taken, or if the recommendation is out-of-scope. Specific recommendations are also referenced in the individual System Improvements. If recommendations or feedback are out-of-scope for the Implementation Plan, we are sharing them with the DCYF staff responsible for the related program area for their consideration and follow-up.

A second round of stakeholder engagement will be conducted following the issuance of the Court Monitor's initial report in 2025. The second round will gather and report input from youth, families, and their advocates on their experience with the Kinship Engagement Unit, Family Group Planning, and Referrals and Transitions.

System Integration

Each System Improvement addresses a unique area of need. System Leads are working together in the areas where the work overlaps to support a coordinated system of care. They will also identify where their work can integrate with other System Improvements and program development that is occurring within DCYF to further support alignment and development of a service continuum for children and youth. It is the sum of the separate Systems and an integrated approach that will contribute to the transformative goals of the Settlement Agreement.

Strategies for meeting Class Member needs in the least restrictive and most integrated settings appropriate while Defendants are implementing the System Improvements

- **4.6 Emerging Adulthood Housing Program**

Both Region 4 and 6 contracted providers have completed basic trauma-informed training for current staff. DCYF headquarters will update and align the training in Regions 4 and 6 with future training or support. Each day in ATLP harm-reduction is an ongoing effort in actions, support, documentation, choices, and as future sites are being developed.

In addition, DCYF is working, with authorization and funding from the Legislature, and in partnership with Public Housing Authorities, tribal governments, and other partners, to create a housing and homelessness continuum of care with high and low intensity interventions, including vouchers and housing support services, to address specifically the housing needs of young people affected by Child Welfare and Juvenile Rehabilitation (JR).

Under the federal Family Unification Program (FUP) and Foster Youth to Independence (FYI) voucher programs for youth exiting foster care, and under a separate state-funded proviso for youth exiting JR, DCYF is currently able (through contracts and MOUs in local communities) to

support vouchers for young people in Public Housing Authority jurisdictions in each of DCYF's six regions, with more communities coming on-line in the future.

- **4.7 Professional Therapeutic Foster Care**

The centralized team is reviewing current Therapeutic Foster Care (TFC) practice to assess how it aligns with the developing Professional Therapeutic Foster Care program, including training requirements. DCYF is streamlining TFC practice and supports across the state to ensure youth and families are receiving culturally responsive, LGBTIA+ affirming, and trauma informed care.

- **4.8 Hub Homes**

Youth currently have access to Hub homes; however current Hub homes do not have the experience required under the D.S. Settlement and therefore do not tend to accept placement of young people in the Settlement Class. Through the course of preparing for implementation, we have learned that a few of existing Hub homes are interested in upskilling in order to accept placement of young people in the Settlement Class and we are exploring these opportunities.

- **4.9 Revising Licensing**

On June 18, 2022, the first set of updated rules went into effect, and on October 1, 2022, the second set of rules went into effect. DCYF added language in Child Placing Agency (CPA) and foster family WAC to include the following requirements:

- Staff, interns, and volunteers must support and engage children with dignity and respect regardless of their actual or perceived race, ethnicity, religion, culture, or sexual orientation, gender identity, and gender expression (SOGIE).
- Agencies must connect a child with resources that support and affirm a child's race, ethnicity, religion, culture, and SOGIE.
- Group care staff, interns, and volunteers must furnish children with a nurturing, respectful, and supportive environment regardless of a child's actual or perceived race, ethnicity, religion, or SOGIE.
- Foster parent(s) must consider what bedroom placement is in the best interest of a foster child in consultation with the child's DCYF caseworker and all other children in the household.
- The department has been given authority to modify, deny, suspend, or revoke a license if a caregiver cannot or will not support a child's cultural needs.

The following activities are also underway:

- We established an early implementation work group designed to identify practice change recommendations that can be implemented within current rule language.
- A training development work group is focusing on building group care specific training to support trauma-informed, culturally responsive, and LGBTQIA+ affirming care.
- Contracts and policies are being reviewed and revised to incorporate changes that can be made under existing rules.

- **4.10 Kinship Engagement Unit**

Existing, expanded, and developing services and supports are currently underway and included within the implementation plan under [Existing, Expanded, and Developing Services and Supports](#).

- **4.12 Referrals and Transitions**

Hospital MOUs: DCYF is working with hospitals as they identify interest in establishing an MOU. Currently we are working with Spokane Hospitals to fine tune some of the language in the template MOU and a meeting is scheduled to start negotiations.

- **4.13 Qualified Residential Treatment Programs (QRTP)**

The centralized intensive resources team actively focuses on implementation of services to support youth in in-home placements and achieve least-restrictive levels of care. The current assessment process is well-established and will be able to be adapted to incorporate the increased frequency and addition of in-person contact required under the settlement. DCYF is in the process of hiring the staff to meet the QRTP requirements under the settlement agreement and as soon as teams are hired, the in-person meetings will begin.

Constraints

DCYF is in the planning phase for the implementation of the federally required Comprehensive Child Welfare Information System (CCWIS). The limitations of the current FamLink system will impact processes for the collection of data for D.S. reporting. This will require some data to be collected using other systems, including hand counts.

Additionally, many System Improvements involve onboarding new DCYF staff and working with contracted providers and caregivers. Hiring staff and recruitment of Child Placing Agencies (CPA), foster families, and group care providers is dependent on the pool of candidates and interested providers.

Budget

Budget requests for the System Improvements were included in the [D.S. Compliance 2023-2025 Regular Budget Session Policy Level](#) Decision Package. The requests for funding for D.S. implementation were fully funded except for funding identified in System Improvement 4.11, Family Group Planning, which was removed pending completion of the stakeholder engagement process. A revised decision package request to support 4.11 Family Group Planning and administrative supports will be submitted for consideration in the 2024 legislative session.

Methodology

Each System Improvement will report on progress and status using data from infoFamLink and other sources. Data will be collected in various forms: administrative data, qualitative reviews, observations, surveys, along with formal stakeholder feedback as outlined in the Settlement Agreement and within each System Improvement plan. This data will support quality assurance and implementation activities.

Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

Exit Criteria

DCYF must demonstrate substantial compliance with the terms of the Settlement Agreement for the agency's obligations to terminate. See the [Exit Procedure](#) at the end of this document.

DCYF expects to achieve substantial compliance with the Settlement Agreement at the end of the twelfth (12th) month following full implementation of the System Improvements. This is currently anticipated to be July 31, 2027.

System Improvement 4.6 Emerging Adulthood Housing Program

System Improvement Lead: Youth and Young Adults Housing Continuum Program Manager

Overview

The D.S. Settlement Agreement requires DCYF to continue developing and implementing an array of supported housing programs for youth and young adults from ages 16 through 20 years with living unit configurations tailored to the needs of youth, including; 24/7 staffing who provide culturally responsive, LGBTQIA+ affirming, and trauma-informed support and training in independent living skills, transportation for participants to stay connected to their friends and families, and crisis response that includes intensive case management.

In response to the issue of placement stability, but prior to the Settlement Agreement, DCYF was working to pilot a new placement resource, the Adolescent Transitional Living Program (ATLP). ATLP is a supported housing program for 16 through 20-year-olds in foster care or extended foster care, who would prefer to live independently rather than in a family setting, as described in the Settlement Agreement. Potentially eligible youth and young adults include members of the D.S. Settlement Class, as well as any youth and young adults in foster care who might be at-risk of homelessness, and any who would prefer to live more independently.

DCYF is focusing on initial statewide implementation of ATLP to address this System Improvement. Because ATLP will initially serve only 33 young people statewide, DCYF will assess the need for ATLP expansion and/or other housing services that will be necessary to provide a more complete range of services and programs to make up DCYF's service array for emerging adults as imagined in the Settlement Agreement. If the initial ATLP requires eligible youth to wait longer than 60 days to be served in any region, DCYF will work to expand this program in those regions.

Current Context: EAHP Development as Part of a Larger Goal

According to the [2023 RDA report on 2020 data](#), 23 percent of youth and young adults were homeless within 12 months of exiting care. The work to explore and develop an EAHP range of programs is part of the overarching work DCYF is doing to address the housing support needs of young people in foster care throughout the state who may be at risk of homelessness, and any who would prefer to live more independently, rather than in a family setting, as they exit care and transition into adulthood.

As DCYF creates or modifies programs for young people ages 16 through 20, it will use an approach that addresses what each young person needs developmentally and desires to be successfully housed and stable. These approaches will be geographically available, culturally responsive, LGBTQIA+ affirming, trauma-informed, and prevention and crisis response-oriented, and will emphasize the ability for participants to remain connected to friends and family (including transportation).

The ATLP is structured to provide individualized services and support for maintaining connections to family and friends, and to be responsive to youth's independent living skills needs. It is designed to build on the youth's strengths, abilities, and skills that foster and promote resilience as they transition into adulthood. The program relies on young people exercising a significant amount of autonomy, following house rules for the safety and welfare of all participants. Young people will have opportunities to help create and modify the house rules through collaboration with program staff.

System Integration

This System Improvement aligns with System Improvements 4.7 Professional Therapeutic Foster Care and 4.8 Hub Home Program as new placement and support options available to youth. This System Improvement will also connect with System Improvement 4.9 Revising Licensing Standards if it is determined a new licensing category is needed. System Improvements 4.10 Kinship Engagement, 4.11 Family Group Planning, and 4.13 QRTP will have education about the EAHP placement options integrated into their processes.

Access and Eligibility Protocols

The Youth and Young Adults (YYA) Housing Continuum Program Manager will review data and reporting protocols related to access and eligibility for alignment with the requirements of the Settlement Agreement and revise or update them as needed. Program staff will provide information about the ATLP to DCYF caseworkers, contractors, and partners statewide to ensure staff understand and know how to access the program.

Eligibility criteria in the Settlement Agreement include:

- Referral and access procedures that do not exclude youth solely based on their permanency plan, criminal history, or history of behavioral health challenges.
- At a minimum, DCYF will allow all interested youth to participate in this program if the youth meets the following conditions:
 - The youth prefers to live more independently;
 - The youth is discharging or being released from an institutional or congregate care setting, has been in placement exceptions or night-to-night foster care placement for five days or more, and/or has a history of disrupting from other group or family placements; and
 - DCYF cannot demonstrate that with program supports, the youth currently pose a risk of serious harm to self or others in the program.

DCYF will make good faith efforts to expand the EAHP in DCYF Regions where eligible youth must wait longer than 60 days to begin participation.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#)

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. Exit Criteria 37(1) Maintain adequate resources to oversee and sustain contracting/recruitment, training, and provider quality.
2. Exit Criteria 37(2) Consistent with the Implementation Plan, sites, contracts, licensing, policies, and additional program staff training in therapeutic, culturally responsive, LGBTQIA+ affirming and trauma-informed care are established statewide.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change. DCYF will use a variety of strategies to continue developing and implementing the EAHP including ATLP. These include:

Staffing

DCYF will hire and maintain staff required to establish and develop the program.

Training

The YYA Housing Continuum Program Manager will assess the initial and ongoing training courses and curricula offerings of the ATLP contractors and the Alliance for Professional Development, Training, and Caregiver Excellence (Alliance). The DCYF Trauma-Informed Care (TIC) Work Group, the DCYF Racial Equity and Social Justice (RESJ) Team, and other resources are identifying training gaps that might affect young people in ATLP. Current ATLP providers offer training on how to sustain culturally responsive, LGBTQIA+ affirming, and trauma-informed support and train independent living skills in a developmentally appropriate way. The YYA Housing Continuum Program Manager and other DCYF staff will learn from the current pilot to expand the ATLP statewide and evaluate training needs based on that analysis.

Contractors are required to provide a minimum of 24 hours/year of training for staff on topics that include: adolescent development; positive youth development; supporting youth in developing independent living skills; trauma-informed care; CSEC prevention/intervention; harm reduction; housing first approaches; cultural responsiveness; LGBTQIA+ affirming support; crisis intervention and de-escalation; conflict resolution; security awareness; privacy and HIPAA

regulations; mandated reporting; grief and loss response; fire safety/emergency planning; and case management and supervision of youth.

As DCYF examines training needs, the agency will address training for both the ATLP, and any additional training needs related to the EAHP range of programs.

Policy

The YYA Housing Continuum Program Manager will meet quarterly with the sites to review their program policies and procedures to inform needed revisions. As programs are developed, we will review DCYF policies and procedures for any needed revisions.

Contracts

DCYF has approved the contract for ATLP for the first two sites and is reviewing the contract for any changes necessary as the program expands statewide. The contract requires that staff are available 24/7, services are affirming and culturally responsive, informed by the cultural experiences, beliefs, and values of each youth, are linguistically accessible, and provide opportunities for maintaining cultural, social, and spiritual connections.

The ATLP contract includes requirements for discharge planning. These include making appropriate referrals to housing and other resources and developing a written transition plan to help the youth in their transition from foster care. The transition plan addresses the domains of career and education, housing, financial stability, health, wellbeing, and sharing contact information in order to reach the youth once they leave foster care.

Engagement

DCYF will work with the clients of the ATLP, the ATLP provider staff, and others, as the program develops. DCYF will reach out to agency regional staff and leadership in the first two regions served by ATLP and in other regions statewide. DCYF will engage groups currently in its informal advisory structure, including groups representing young people with lived experience, parents, guardians, families, non-profit providers, tribes, and others. DCYF will identify additional engagement strategies needed to inform the development of programs under the EAHP range of services.

YMCA program staff participated in an initial training session to provide information to their staff and to seek feedback about program design and to create a set of operational values to share with young people entering the program. This and other program materials will be open to participant feedback and potential modification. Review of orientation materials with participants is ongoing until full census is reached.

Communications

DCYF program staff will work with DCYF communications staff to develop and release program information related to ATLP, message alignment with the other strategic initiatives under the D.S. Settlement Agreement, and program development and expansion needs.

Landscape Analysis and exploration of the proposed EAHP range of programs

Landscape analysis of the proposed EAHP range of programs will address the requirements listed above for any new programs that DCYF explores or proposes to fill service gaps for members of the class that are not addressed by the program or scope of ATLP.

Quality Assurance

The ATLP contract requires that services provided by the ATLP contractor result in the following outcomes:

- a. Seventy-five percent (75%) of youth shall successfully complete the program demonstrated by:
 - i. No disruptions in placement prior to a planned exit or transition from the program;
 - ii. A planned exit prior to age eighteen as part of the youth's permanency plan; and
 - iii. A planned transition into adulthood as demonstrated by:
 - Completion of K-12 education (i.e., diploma or GED) and/or plans for post-secondary education;
 - Has enough income (through employment or benefits) to address basic needs;
 - Has a plan for safe and stable housing;
 - Has made connections with adult mentor(s); and
 - Has demonstrated skills and ability for independent living (IL) and/or plans to engage in IL services or similar program.

DCYF will develop and include formal mechanisms to ensure the quality of the deliverables in the contract including:

- a. Provider meetings between the DCYF YYA Housing Continuum Program Manager and the contracted ATLP provider staff to gather program feedback;
- b. Reports from the ATLP provider to the DCYF assigned caseworker that include intake, assessment, and service planning reports;
- c. Census reports from the ATLP providers which will inform measurement of interim program progress toward the overall ATLP outcome measures;
- d. Child and Family Team (CFT) meetings that will gather and document youth feedback on the program.

Data will also be available through the annual report submitted by the ATLP contractors, describing qualitative information and data at the program level, including:

- a. Youth progress developing independent living skills;
- b. Youth involvement in program planning, program implementation, and evaluation;

- c. Opportunities provided to youth to maintain connections to their cultural and/or tribal communities;
- d. Youth opportunities to maintain and develop connections with adult mentors;
- e. Training and professional development provided for staff;
- f. The year-end census report (which is a roll-up of the monthly data);
- g. Effectiveness of service delivery, program challenges and/or barriers, youth satisfaction with services, summary of collaborative community relationships.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Training Program Launch	Region 4, YMCA King County, 5 youth capacity Initial Staff training The YMCA ATLP at McGrath House launched	11/2022 01/26/23	Complete Complete
Training Program Launch	Region 6, A+K Ingenuity/AKI Clark County, 8 youth capacity AKI staff initial training The AKI ATLP tri-plex launched	02/2023 03/2023	Complete Complete
Program	Develop a preliminary set of program goals and guidelines, the obligation of providers and staff, and the expectations and opportunities available to young people.	03/2023	Complete
Program Planning	Plan for statewide expansion to regions 1, 2, 3 and 5. Providers to be determined, 20 youth capacity over 4 programs.	04/2023	10/2023
Contracts	Contract recruitment for providers in regions 1, 2, 3 and 5	10/2023	02/2024
Licensing	Coordinate with the Licensing Division (LD) to assess the need for a new emerging adulthood licensing category.	10/2024	completed
Statute Review	Review and evaluate statutes and licensing rules from WA and other states to identify potential statutory changes for ATLP and develop recommendations for the 25-27 biennium.	01/01/24	12/31/24
Training	Assess program delivery and statewide training needs. Establish the process and resources for	06/01/23	06/01/24

	initial and ongoing training for caseworkers, contractors, and partners statewide.		
Contracts	Establish and revise common ATLP Program Standards. Review contracts for revisions or updates to the statement of work.	03/2023	Ongoing
Program CQI processes	Establish referral and acceptance processes to include timeliness, documentation, and CQI.	06/01/23	06/01/24
Program Materials	Partner with contracted providers to review, revise, and create and implement program materials.	Initial materials created	Ongoing
Budget	Assess for a Decision Package for expansion to meet ATLP capacity needs for the 25-27 biennium.	01/01/24	09/01/24
QA	The YYA Housing Program Manager will review data and reporting protocols related to access and eligibility. They will review eligibility, referral, and placement protocols with subject matter experts (SMEs).	01/2024	Ongoing, bi-annually

System Improvement 4.7 Professional Therapeutic Foster Care

System Improvement Lead: Professional Therapeutic Foster Care Program Manager

Overview

The D.S. Settlement requires DCYF to develop and implement a contract and licensing category for Professional Therapeutic Foster Care (PTFC). This licensing category is intended to support children and their immediate families when reunification or placement with extended or chosen family is not possible due to the child's developmental disabilities or behavioral needs. Children and youth with significant behavioral health needs and developmental disabilities have experienced high levels of placement instability, more restrictive placements, and longer lengths of stay in group care because the current Behavior Rehabilitation Services (BRS) therapeutic homes are not able to meet their needs. PTFC can provide youth stability, offer immediate family members and kinship caregivers support, and encourage connection to help safely reunify families.

Implementing a PTFC model will provide a less restrictive placement option for youth who may otherwise enter or remain in group care placement.

System Integration

This System Improvement aligns with System Improvements 4.6 Emerging Adulthood Housing and 4.8 Hub Home Program as new placement and support options available to children and youth. This System Improvement will work with 4.9 Revising Licensing Standards to update WAC and create a new category for Professional Therapeutic Foster Parents. System Improvements 4.10 Kinship Engagement, 4.11 Family Group Planning, and 4.13 QRTP will have education about PTFC built into their processes for youth and families.

Access and Eligibility Protocols

Access to PTFC will be managed by a dedicated Program Manager, the intensive resources program consultants and their supervisor. Staff, supervisors, and managers at all levels will receive training and support to ensure implementation of the program. This will ensure that the services outlined in the contract are being provided, quality standards are met and that access to this resource is appropriate and timely. Information about the PTFC will be provided to DCYF caseworkers, contractors, and partners statewide to ensure staff understand and know how to access the program.

Professional therapeutic foster homes will serve children and youth who are not able to be served in other home settings, are at risk of entering a QRTP placement, or who are ready to step down from a QRTP placement but still require a higher level of care. For youth who are placed out-of-state in facility-based care and are ready to step down to a lower level of care, a professional therapeutic foster home may be an option. The youth will receive a high level of

care in a PTFC home, and providers will work towards reunification with family if appropriate and safe to do so.

Eligibility criteria in the Settlement Agreement include:

- Referral and access procedures do not exclude youth solely based on their permanency plan, criminal history, or history of behavioral health challenges.
- At minimum, DCYF will allow all interested youth to participate in this program if the youth meet the following conditions:
 - The youth is over the age of thirteen and desires therapeutic supports.
 - Immediate family of youth under the age of thirteen desires therapeutic supports.
 - The youth is discharging or being released from an institutional or congregate care setting, has been in placement exceptions or night-to-night foster care placement for five days or more, and/or has a history of disrupting from other group or family placements.
 - DCYF cannot demonstrate that with program supports the youth currently poses a risk of serious harm to self or others in the program.

DCYF will make good faith efforts to expand the PTFC program in DCYF Regions where eligible youth must wait longer than 60 days to begin participation.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

3. Exit Criteria 38(1) Maintain adequate resources to oversee and sustain contracting/recruitment, training, and provider quality.
4. Exit Criteria 38(2) Consistent with the Implementation Plan, establish sites, contracts, licensing, policies, and additional program staff training in therapeutic, culturally responsive, LGBTQIA+ affirming and trauma-informed care statewide.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change. DCYF will use a

variety of strategies to continue developing and implementing the Professional Therapeutic Foster Care program. These include:

Staffing

PTFC will have a dedicated Program Manager to develop and oversee the contract and program. This will include procuring contractors and monitoring contractor compliance to ensure a high quality of service is provided to children, youth, and families. This position will be responsible for monitoring the need for this resource and will work to secure additional funding if necessary. The Program Manager will be responsible for developing and monitoring a statewide effort to timely and systematically identify youth who require PTFC.

Training

Training for Professional Therapeutic Foster Parents will include LGBTQIA+ affirming, trauma informed and culturally relevant practices. An examination of other similar programs domestically and internationally, and input from stakeholders, will inform the necessary experience and training requirements needed for professional therapeutic foster parents and Child Placing Agency (CPA) staff.

Data has consistently shown that BIPOC youth and LGBTQIA+ youth are over-represented among youth receiving the highest levels of service and experiencing placement exceptions and instability. Training and support in these areas will be a required part of this program.

We will use information from a review of DCYF contracted trainings, Alliance trainings, and other PTFC models and programs already serving youth with intensive resources to develop a list of competencies and trainings for this program.

DCYF will engage with individuals with lived experience and stakeholders in the development and sustainability of a program that is trauma-informed, culturally responsive, and focuses on sexual orientation, gender identity, and expression (SOGIE).

Policy

Currently foster parents must have their own income outside of the stipend they receive for caring for foster youth. WAC 110-148-1365 section 2(b) states the caregiver must have “sufficient regular income to maintain your own family, without the foster care reimbursement made for the children in your care.” This WAC will need to be revised to allow for a professional class of foster parents whose sole income, for at least one identified “professional foster parent” residing in the home, will be their foster care payments.

DCYFs Licensing Division (LD) and Rules and Policies Unit (RPU) will collaborate to review and revise current RCW, WAC and policy as needed to establish a new licensing rule and for the professional foster care category. WAC revisions to establish the program within projected timelines will need to be done outside of the Negotiated Rule Making (NRM) process identified in System Improvement 4.9. Once this is complete, DCYF will finalize CPA contracts.

Examination of Models

DCYF is examining other professional foster parent programs in the nation and around the world. We will share best Practice Models that we would like to replicate with stakeholders, tribal partners, and lived experience experts. In consultation with stakeholders, tribal partners, and lived experience experts, we will develop, model, and produce a statement of work for a PTFC model.

Responsibilities for Professional Therapeutic Foster Parents

The Professional Therapeutic Foster Parent (PTFP) will be a member of the youth's team and a valued partner in decision making and care for the youth. The PTFP will facilitate family time visitation and participate in the youth's educational, extracurricular, medical, mental health, religious, cultural, and social activities. This will require the PTFP to actively engage in Shared Planning Meetings and youth case planning.

The PTFP will provide mentorship and coaching for family members of the youth, supporting the youth connection to family, both biological and chosen. The PTFP will provide opportunities for independent living skills and training in a natural, home setting. As youth transition to another living environment, the PTFP will provide after-care supports as needed.

Cultural Considerations

Tribal partners from around the state and the DCYF Office of Racial Equity and Social Justice (RESJ) will be invited to provide input and feedback regarding PTFC.

The PTFC Program Manager will engage DCYF staff about existing youth and family voice data and information, and will seek input from youth in placement exceptions, night-to-night placements, or who are refusing placement.

Contracts

This program requires a single contract that can be issued to multiple providers across the state. The contract will include the recruitment of professional therapeutic foster parents and supportive services for the foster parents.

Under the new contract, CPAs will recruit and provide support to professional therapeutic foster parents to include specialized training, weekly support meetings, 24-hour crisis support, and flexible respite time. Foster parents and CPA staff will be required to have specialized training in providing trauma-informed, culturally responsive and LGBTQIA+ affirming care and support. Program support will also include providing mentorship, coaching for immediate families, independent living skills training for youth, and aftercare supports as needed. This contract will require a high acceptance rate and a very low unplanned discharge rate. This will support reunification or transitions to other permanent homes or independence. The PTFC Program Manager will provide centralized oversight and support. DCYF desires CPA representation from all six regions to meet the need and demand for PTFC, but the contractual obligations will be consistent throughout the State.

Engagement

The PTFC Program Manager will meet with current and prospective intensive resources providers individually or in groups to get input on a professional therapeutic foster parent model, program, and contracting details. The PTFC Program Manager will schedule and facilitate ongoing discussions, which will include youth and parent lived experience experts, until the model is fully implemented.

Quality Assurance

Two strategies will be used to monitor the programs and implementation: gathering and review of data and compliance reviews. The Program Manager will develop and maintain information related to program utilization, length of stay, and the children and youth being served by the program. The youth information will include, but will not be limited to, demographics, presenting support needs, placement prior to entry, and placement at exit.

The data gathered will be partially informed by examination of other programs and the feedback from providers. The Program Manager will conduct program compliance reviews to ensure the compliance with the statement of work in the contract. These will be done twice a year for the first contract year and annually each subsequent year. Intensive resources consultants will attend Child and Family Team (CFT) Meetings at least quarterly where youth's progress, education, treatment planning and transition planning will be discussed.

QA processes and reporting to support development and implementation of PTFC will include data and information collected from several sources including:

- a. Data collection during the referral process, including eligible youth, youth served, and youth declined;
- b. Monthly provider meetings (CPAs, Professional Therapeutic Foster Parents, PTFC Program Manager, Intensive Resources Program Consultants) to gather program feedback;
- c. Semi-annual compliance reviews in the first contract year and annually thereafter, producing compliance data identified in the contract;
- d. Health and Safety Monitoring visits conducted by the Licensing Division (LD);
- e. Monthly Child and Family Team (CFT) meetings run and facilitated by CPAs.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Exploration	Examine Professional Foster Parent models in other states and countries: <ul style="list-style-type: none"> ○ Read and review available research articles, data, and subject material ○ Meet with agencies providing Professional Foster Parenting services ○ Connect with child welfare professionals in states where Professional Fostering exists ○ Compile information 	12/01/22	8/31/23
Tribal Engagement	Hold a workgroup with WA State tribes: <ul style="list-style-type: none"> ○ Share program information ○ Hold a listening session with participants ○ Follow-up regarding interest in future meetings and program development 	04/01/23	10/31/23
Lived Experience Expert Engagement	Consult with Adolescent Co-Design Program Manager <ul style="list-style-type: none"> ○ Request previous DCYF generated reports where youth were asked similar questions about their time in care ○ Request materials related to co-design ○ Maintain connection and new materials/toolkits as they become available 	02/01/23	Complete
Integration	Coordinate with other System Improvement Leads/Teams for program integration	02/01/23	Ongoing
Engagement	Develop strategy for engagement of youth with principles of co-design: <ul style="list-style-type: none"> ○ Review night-to-night and placement exception data by region ○ Utilize existing reports 	02/01/23	Complete
Engagement	Hold a workgroup with youth currently in DCYF care: <ul style="list-style-type: none"> ○ Share program information ○ Share information from interviews with current youth ○ Hold a listening session with participants ○ Follow-up with participants regarding interest in future meetings and program development 	05/01/23	10/31/23
Engagement	Hold a workgroup with lived experience parents: <ul style="list-style-type: none"> ○ Share program information 	05/01/23	10/31/23

	<ul style="list-style-type: none"> ○ Hold a listening session with participants ○ Follow-up with participants regarding interest in future meetings and program development 		
Recruitment	Reach out to CPAs – inquire about recruitment processes and estimated length of time from contract, training, accepting first placement.	04/01/23	Complete
Integration (training)	Collaborate with the Hub Home Implementation Lead/Team, and the Alliance to identify areas of alignment and determine if existing trainings are sufficient or new trainings will be needed.	02/01/23	Ongoing
Training	Develop caregiver training recommendations based on collaborations with the Alliance, Hub Home Lead/Team, and information received through the stakeholder engagement process.	07/01/23	Ongoing
Policy	Review DCYF Child Welfare program policies in consultation with the Intensive Resources Program Manager to identify impacts to current policy and determine if revisions are needed.	02/01/23	Ongoing
Program	Program Development Outline drafted and shared	07/01/23	12/31/23
Communication	Communication to DCYF staff about upcoming changes and method for staff to provide feedback and ask questions created.	07/01/23	Into next FY
Engagement	Establish ongoing PTFC implementation meetings/workgroups including individuals with lived experience, providers, foster parents, and other stakeholders and using principles of co-design.	09/01/23	Ongoing until fully implemented
Training	Collaborate with other implementation teams to create a consistent training agenda across Implementation Plans.	07/01/23	12/31/23
Training	Establish training plan	12/31/23	03/31/24
Licensing	Write and finalize new licensing rules for the professional foster care category.	07/01/23	03/31/24
Communication	Communication to DCYF staff	01/01/24	Ongoing
Training	Training on policy and WAC changes for DCYF staff	01/01/24	03/31/24
Contracts	Contract drafted – Statement of Work	09/01/23	03/01/24
Contracts	Request for Application (RFA) process started pending finalization of licensing rules.	04/01/24	08/01/24
Recruitment/Support	Once CPAs become contracted, establish monthly Professional Therapeutic Foster Care Provider Meetings occur and include: <ul style="list-style-type: none"> ○ Program Manager 	08/01/24	Ongoing

	<ul style="list-style-type: none"> ○ CPA Providers ○ Professional Foster Parents ○ Program Support staff 		
Recruitment	<p>Establish targeted recruitment goals with individual CPAs as contracts are established:</p> <ul style="list-style-type: none"> ○ Number and location of homes ○ House composition ○ Training plan and timeframes ○ Technical assistance and support 	08/01/24	11/30/24
Recruitment	<p>Once CPA contract in place, assess progress at 30, 60 and 90 days:</p> <ul style="list-style-type: none"> ○ Develop and report recruitment strategies ○ Trainings complete ○ Check in with individual providers/provide technical support 	09/01/24	02/28/25
Support/Fidelity	<p>PTFC Program Manager conducts program compliance reviews with each contracted provider:</p> <ul style="list-style-type: none"> ○ Twice in the first year ○ Yearly subsequent years 	Once contract is in place	Once contract is in place
Support/ Fidelity	Intensive Resources Program Consultants attend Child Family Team Meetings for each child in a PTFC home quarterly.	Upon placement	Ongoing

System Improvement 4.8 Hub Home Model Program

System Improvement Lead: Mockingbird Family Program Manager

Overview

In response to the D.S. Settlement, DCYF will expand implementation of the Mockingbird Family (MBF) Hub-Home Model (HHM) statewide and establish at least one Hub per region whose Hub Home parents have experience caring for young people who currently or previously qualified for intensive resources and support such as Wraparound with Intensive Services (WiSe) or Behavior Rehabilitation Services (BRS). Expansion includes creating agency infrastructure to sustain the System Improvement and engage in continuous quality improvement. DCYF will make HHM placements available to young people in the Settlement Class that provide normalizing experiences, adequate supports and services promoting permanency, including reunification, visitation, stabilization, independent living skills training, employment, and therapy or counseling.

System Integration

This System Improvement aligns with System Improvements 4.6 Emerging Adulthood Housing and 4.7 Professional Therapeutic Foster Care as new placement and support options available to children and youth. DCYF is strategizing on how to include Professional Therapeutic Foster Parents and kin caregivers into this model. System Improvements 4.10 Kinship Engagement, 4.11 Family Group Planning, and 4.13 QRTP will have education of the HHM built into their processes for children, youth, and families.

Access and Eligibility Protocols

In Washington State, caregivers have the right to accept or decline any placement unless the reason for their decision involves a protected group of individuals (see WAC 110-148-1395). DCYF cannot require the caregivers in the HHG to accept placement of a child or youth and will continue to work with providers to prioritize placing young people who meet the eligibility criteria established in the Settlement Agreement.

DCYF will increase access to the HHG for eligible youth by including a requirement in the Child Placing Agency (CPA) Hub contract that at least 40% of the young people in each HHG meet the criteria specified in the Settlement Agreement. This requirement will be a new expectation for the contractor and has not been included in previous contracts. Additionally, there will be reporting requirements to capture this information from the contractor(s) to evaluate progress. DCYF will include in the MBF statewide protocols that DCYF and the Hub Homes will prioritize youth meeting the criteria specified in the Settlement Agreement when making placement in the program. Information about Hub Homes will be provided to DCYF caseworkers, contractors, and partners statewide to ensure staff understand and know how to access the program.

Eligibility criteria in the Settlement Agreement include:

- Referral and access procedures do not exclude youth solely based on their permanency plan, criminal history, or history of behavioral health challenges.
- At minimum, DCYF will allow all interested youth to participate in this program if the youth meet the following conditions:
 - The youth is over the age of thirteen or immediate family of youth under the age of thirteen, desire to participate in a Hub Home Group (HHG).
 - The youth is discharging or being released from an institutional or congregate care setting, has been in placement exceptions or night-to-night foster care placement for five days or more, and/or has a history of disrupting from other group or family placements; and
 - DCYF cannot demonstrate that with program supports the youth currently poses a risk of serious harm to self or others in the program.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. Exit Criteria 39(1) Maintain adequate resources to oversee and sustain contracting/recruitment, training, and provider quality.
2. Exit Criteria 39(2) Consistent with the Implementation Plan, sites, contracts, licensing, policies, and additional DCYF and program staff training in therapeutic, culturally responsive, LGBTQIA+ affirming and trauma-informed care are established statewide.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change. DCYF will use a variety of strategies to continue developing and implementing the Hub Home Program. These include:

Staffing

To support implementation of the expanded Hub Home Model, DCYF will hire a dedicated Program Manager and program staff. DCYF's Mockingbird Liaisons will be assigned to cover a specific geographical area and are required positions by Mockingbird to implement the model and identified fidelity makers. These positions will develop and implement the

contracts, support recruitment necessary to implement the program, support implementation of DCYF protocols, team with CPAs, support caseworker-HHG communication, coordinate with external organizations and develop community-based resources and relationships.

Training

DCYF's Mockingbird Program Manager and Mockingbird Workgroup will partner to develop expectations and curriculum for the Mockingbird Family training to meet Exit Criteria 39(2) a. Once established, this will be completed by all Mockingbird staff and contracted providers prior to program implementation and expected annually thereafter.

DCYF will include tracking of training requirements in the new contract to include how HHGs are successfully providing culturally responsive, LGBTQIA+ affirming, and trauma-informed care. CPA implementation partners will be required to assess and monitor for foster family capacity to provide LGBTQIA+ affirming and trauma-informed care. A combination of perspectives (caregiver and youth self-reports as well as agency assessments) will provide a more holistic perspective on whether LGBTQIA+ affirmed and trauma-informed approaches, are being provided.

Policy

Currently, procedures for placing young people into a HHG are structured by policy and HHG protocols. To align with the Settlement requirements, we will review and revise DCYF policy as required.

Program

DCYF will convene a workgroup of DCYF staff, CPA representatives, Hub Home representatives, foster parents who care for youth receiving BRS services, current youth and/or alumni of care, kinship caregiver representatives, community partners, and Mockingbird Society staff to develop the HHM program's framework. This workgroup will be responsible for embedding the foundational requirements into the HHM protocols. A key task of the workgroup will be to review existing training and determine the trainings that will be required of Hub and Satellite homes to support the well-being and overall development of young people placed in the HHG.

Contracts

Currently, DCYF contracts with the Mockingbird Society for technical assistance, consultation, and support for offices that have or are implementing the Mockingbird Society's HHM. DCYF currently has 11 HHG's, and the current Hub Homes serve younger children who have intensive resource needs. DCYF will include the existing 11 HHG's in reporting and data analysis but will differentiate between HHG's serving young people who meet the criteria specified in the Settlement Agreement. DCYF will procure contracts with up to three CPAs to oversee and sustain the HHG for the youth described in the Settlement Agreement. The contracts will be standardized to ensure consistency.

DCYF will contract with the Mockingbird Society to achieve this System Improvement. We currently have a contract with Mockingbird, but the new contract will differ from other Mockingbird Family (MBF) contracts. The current contract only allows for a specific number of HHGs and does not give DCYF access to MBF materials and training. DCYF will partner with MBF to ensure the new contract includes access to materials and training needed to implement the model.

DCYF will work with the Mockingbird Society to develop and implement a new contract that includes licensing provisions for up to three CPAs.

Engagement

The Mockingbird Society reports that caregivers, alumni of foster care, and youth who were experiencing foster care participated in the design of Mockingbird Family. More information about youth and caregiver involvement in the model has been requested from the Mockingbird Society. DCYF has procured a contractor who is completing one-on-one or group interviews with DCYF staff, Mockingbird Society, Hub Home participants, alumni of care, and community stakeholders. The insights and observations offered during these interviews will be available to workgroup participants in the contractor's final report. DCYF's Mockingbird Program Manager, CPA Contracted Providers, and Mockingbird Family staff will work collaboratively to create an informational flyer provided to youth and their families to learn more about the HUB model and its benefits.

After program implementation, DCYF's Mockingbird Program Manager will arrange opportunities to assess the model and obtain feedback. This will be done through various ways to include reconvening the Mockingbird workgroup (as described previously), partnering with DCYF's Retention and Support Program Manager to conduct community-based listening sessions, and surveying participants (caregivers and youth) of the program.

Quality Assurance

Quality Assurance benchmarks will be developed by the Mockingbird workgroup and will include Mockingbird Family fidelity requirements as well as other elements not required by MBS such as a brief youth questionnaire to collect feedback. DCYF will embed data collection in CPA contracts.

Reporting

DCYF currently receives and reviews monthly reports from the Mockingbird Society about each HHG including but not limited to:

- a. First and last names of caregivers
- b. Count of youth in each satellite home who are not experiencing foster care
- c. Youth placed in the home who are experiencing foster care
- d. Hours of service to satellite homes reported by the Hub
- e. Planned respite hours

- f. Crisis respite hours
- g. Number of crisis supports
- h. Number of transports
- i. Transport hours
- j. Other Hub support services
 - i. Social activities (number of activities, count of families that attended, count of community members that attended, number of activities attended by Host agency)
 - ii. Caregiver check-ins, coaching and mentoring
 - iii. Hub management hours

Quarterly reports containing:

- a. Two feedback loops with youth and caregivers—trends, challenges, and staff are successfully providing culturally responsive, LGBTQIA+ affirming, and trauma-informed care.
- b. Trends impacting HHGs and proposed solutions
- c. Summary of support activities provided to HHGs by the CPA
- d. Review, synthesis, and reflections on each HHG’s data
- e. A list of activities planned for the next quarter
- f. HHG recruitment activities planned for the next quarter

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Engagement	Camber Collective completes assessment and recommendations for the expansion of Mockingbird Family (MBF) (report released June 30).	02/03/23	Complete
Contracts	Complete required MBF pre-contracting activities	07/01/23	01/31/24
Program & Training	Convene a workgroup to develop the program’s framework (task will be aligned with MBF Immersion Training).	12/01/23	01/31/24
QA	Establish quality assurance benchmarks that account for MBF fidelity markers and data.	12/01/23	01/31/24

Program	Determine Hub and Satellite Home selection criteria	12/01/23	01/31/24
Training	Develop the training framework for HHG participants	12/01/23	01/31/24
Program	Statewide protocols: DCYF and the Hub Home to develop or identify partnerships with existing community organizations that provide support and services vital to the ongoing well-being and safety of young people placed in the HHGs and bolster their placement stability. Examples include CSEC, SUD, mental health, and organizations that serve young people with complex medical or developmental needs.	12/01/23	01/31/24
Contracts	Partner with Mockingbird Family to develop and execute an updated contract with provisions for three CPAs.	02/01/24	02/28/24
Contracts	Develop and execute CPA Contracts	03/01/24	06/01/24
Implementation	CPAs recruit, identify, and train Hub Homes	06/01/24	12/31/24
Implementation	Launch Hub Homes: Regional launch dates will vary depending on contracted provider's ability to recruit, identify, and train HUB providers. All regions will be available to launch Constellations once contract is in place and HUB providers are identified. DCYF Regional Mockingbird Liaisons will be responsible for HUB's launching and identifying a timeline.	06/01/24	12/31/24

System Improvement 4.9 Revising Licensing Standards

System Improvement Co-Leads: Licensing Division Administrator & Professional Therapeutic Foster Care Program Manager

Overview

In response to the D.S. Settlement, DCYF has agreed to amend contracts and policies, as well as to engage in negotiated rulemaking (NRM) to amend licensing requirements for foster care placements, to be more developmentally appropriate and/or flexible to meet individual youth's needs. The NRM is a process by which representatives of an agency along with stakeholder groups impacted by the agency rule seek to reach consensus on the terms of a proposed rule (Washington Administrative Code (WAC) for DCYF consideration.

DCYF currently has systems in place for monitoring compliance to contract and WAC requirements. Licensing Division (LD) is responsible, per policy, to complete health and safety monitoring reviews on 10% of state licensed foster homes each year and one health and safety monitoring visit annually on all licensed group care facilities with an additional second monitoring visit annually on each BRS contracted and medically fragile licensed group care facility. Once new licensing regulations go into effect, these requirements will be reviewed and updated.

Seven specific areas will be addressed at a minimum:

1. Developmentally appropriate autonomy and privacy, including but not limited to developmentally typical access to mobile phones and support or resources necessary to engage in normal social activities with peers;
2. An obligation to facilitate connections to immediate, extended, and chosen family members in accordance with the youth's case plan;
3. A responsibility to support youth to remain in their school of origin in accordance with the youth's case plan;
4. Expectations to provide education, training, and coaching to families of origin and other potential long-term or permanent placements about how to best support the child;
5. Expectations to engage in service or discharge planning;
6. Standards for providing sufficient nutrition and satisfaction of dietary needs; and
7. Training requirements and expectations for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.

System Integration

This System Improvement offers integration opportunities with several other System Improvements. The following systems will need updates to either licensing, policy, contracts, or procedures: 4.6 Emerging Adulthood Housing, 4.7 Professional Therapeutic Foster Care, 4.8 Hub Home Model Program, 4.11 Family Group Planning and 4.13 Qualified Residential Treatment Program. System Improvement 4.6 Emerging Adulthood Housing, and 4.7 Professional Therapeutic Foster Care, will require new licensing categories.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. Exit Criteria 40(1) New developmentally appropriate rules have been adopted for foster care placements in compliance with Chapter 34 Revised Code of Washington (RCW).

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYF's best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

Recognizing the need for culturally responsive LD practices and procedures, DCYF began updating WAC chapters 110-145 (Group Care), 110-147 (Child Placing Agency), and 110-148 (Foster Family Homes) in spring, 2021. This included LGBTQIA+ definitions as well as rules requiring culturally responsive care. During this time, a second process began to update the group care staff qualifications WACs (110-145) using the NRM framework.

Staffing

DCYF has identified an LD Administrator to direct both the group care and foster care NRM projects. This position is tasked with managing the pre-NRM work and launching the NRM development work. The agency will add a second full-time staff to the group care NRM team during the development and hybrid negotiation phase to act as the project manager for the life of the project. DCYF will also hire a third full-time staff during this phase covering both the group care and foster care NRM projects as the policy manager. Additionally, DCYF will contract with a neutral third-party facilitator during this initial phase to undertake group care negotiation facilitation, national research literature review, project management during the negotiation period, public comment analysis, and reporting tasks during the rulemaking process.

During the group care in-person negotiation phase a fourth full-time staff will be hired to assist in the NRM process to, design and implement a training plan based on negotiation discussions. An additional staff covering both the group care and foster care NRM projects will be hired during this phase to act as the research and analysis manager.

A full-time staff will join the foster care NRM team prior to the preparation phase to act as the project manager for the life of the project. DCYF will also contract with a neutral third-party facilitator to undertake foster care negotiation facilitation, national research literature review, project management during the negotiation period, public comment analysis, and reporting tasks during the rulemaking process. Additionally, during the foster care in-person negotiation phase DCYF will hire another staff to design and implement a training plan based on negotiation discussions.

Training

Collaboration is current and ongoing with the Alliance for Professional Development, Training and Caregiver Excellence (Alliance) to develop trauma-informed, culturally responsive, and LGBTQIA+ care trainings for foster family homes and LD staff.

Through the NRM process, WAC will be updated to address the areas outlined in section 4.9 of the Settlement Agreement. Once rules have been updated, an internal workgroup with members from Partnership, Prevention & Services, Contracts, and LD will be established to identify the competencies needed to meet contract and WAC requirements. After competencies have been established, LD will partner with the Alliance to identify current trainings available that address these competencies and identify areas for new training development. Additionally, LD will ensure identified competencies are adequately covered in staff preservice trainings.

Policy and Contracts

Building upon existing work structures, this System Improvement will work collaboratively to address the seven specific areas identified in the Settlement Agreement. LD staff will facilitate a workgroup with the goal of expanding understanding of Prudent Parenting in the context of the requirements of the Settlement Agreement. The workgroup will establish developmentally appropriate guidelines for group care, foster care, and relative/kin care, and devise a plan for technology use, contract language, and make recommendations for caregiver and staff training.

To revise policy and contracts, an internal workgroup will be established to identify all the polices associated with section 4.9 of the Settlement Agreement. Once all current policies have been identified, the workgroup will update and align policy language and identify required practice changes.

After policy has been updated, Change Management and Workforce Development teams will join the workgroup to develop staff trainings to successfully transition to the updated policy requirements. Additionally, communication teams will be brought into the workgroup to ensure

licensed providers are notified timely of the internal practice and contract changes impacting them.

Engagement

Stakeholder groups are represented in the NRM process, and participants represent the stakeholder group interests, not their own. Included in the state agency and provider stakeholder groupings will be a tribal partner grouping, lived experience youth grouping, and lived experience parent grouping. In addition to the NRM process itself, proposed rules will be made available for public comment period in which all members of the public have an opportunity to provide feedback prior to the proposed rule going into effect.

Communications

DCYF will use a multi-format approach to communicating NRM information to stakeholder and tribal partner groupings. Communication formats will include the following:

- Separate dedicated group care and foster care NRM page on the DCYF website
- Separate dedicated group care and foster care group email for Q&A
- Monthly stakeholder and tribal partner grouping virtual meetings
- In-person listening and learning sessions with stakeholder and tribal partner groupings
- Gov delivery email updates
- Licensor email updates
- Social media updates

Quality Assurance

During the in-person negotiation phases of both the group care and foster care NRM projects, the data and research analyst will lead a workgroup to begin identifying data points that can be used to measure compliance with updated rules, to include the seven specific areas outlined in this System Improvement and develop a methodology for how to collect the data utilizing current practices and implementing new practices. Once amended rules have been finalized, recommendations will be made and presented to NRM participation groups for feedback. Once feedback is received, the workgroup will finalize the data points and collection methodology. During the rule implementation phases of both the group care and foster care NRM projects, the monitoring visit policies and H&S policies will be amended, and resources will be updated and created to implement the data collection and reporting methodology. Process maps will then be created, along with training, to ensure the new procedures meet intended outcomes.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Group Care NRM Preparation			
Communication	Develop communication plan	06/01/23	Complete
NRM	Identify key roles for NRM process	06/01/23	08/31/23
NRM	Procure facilitator	06/01/23	08/31/23
Engagement	Establish NRM participant groupings to include state agencies, providers, tribal partners, lived experience youth, and lived experience parents.	06/01/23	08/31/23
Licensing & Contracts	Begin collaboration process with representation from LD, Contracts, and Partnership, Prevention & Services to determine the strategy for aligning WAC/contract/policy language.	06/01/23	Complete
Engagement	Develop and send participant survey for data collection	07/01/23	08/31/23
Early Rule Implementation			
Integration & Engagement	Establish DCYF workgroup to review Prudent Parenting guidelines, current caregiver practices, and current WAC language that supports youth in the seven specific areas outlined in this System Improvement.	05/01/23	Complete
Integration & Engagement	Develop strategies for implementing updated practices, prior to NRM based on workgroup recommendations. The strategies will include communication with foster parents, staff, supervisors, and managers.	06/01/23	08/31/23
Integration & Engagement	Present implementation strategies to participant groupings for feedback and collaboration to develop updated practice recommendations.	09/01/23	12/31/23
Communication & Engagement	Send participant communication, and present in a meeting, notification of practice change recommendations based on collaboration efforts.	09/01/23	12/31/23
Engagement & Integration	Facilities, in collaboration with regional licensing, amend facility/agency procedures and implement new practices.	10/01/23	Ongoing
Group Care NRM Development & Hybrid Negotiation			
Engagement	Begin routine participant communication	07/01/23	Ongoing
NRM	Establish NRM Steering committee	06/01/23	Complete
Research	Research and analyze federal and state laws informing rule requirements as well as best practice guidelines for group care standards of care.	07/01/23	12/31/23

Collaboration	Write updated language for WAC that will not be subject for wholesale change during the NRM process.	07/01/23	12/31/23
NRM	Collaborate with participant groupings and facilitator group to design NRM process.	07/01/23	09/30/23
Collaboration	Establish workgroup to write proposed rules for a new licensing category to accommodate the adolescent transitional living program (ATLP).	07/01/23	12/31/23
Engagement	Establish NRM participant group meetings to: <ul style="list-style-type: none"> ○ Provide education on the NRM process ○ Identify specific WAC to target during in-person NRM process ○ Discuss key DS terms/concepts ○ Select NRM participants ○ Discuss proposed substitute WAC language 	08/01/23	10/31/23
Training	Collaborate with the Alliance and other System Improvement Leads/Teams to update/develop facility/agency/foster parent training for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.	06/01/23	12/31/23
Group Care NRM In-Person Negotiation			
NRM	Negotiate rule requirements and language with representation from the following participant groupings at a minimum: <ul style="list-style-type: none"> ○ Tribal partners ○ Youth with lived experience ○ Parents/guardians with lived experience ○ Court/Advocacy groups ○ DDA staff ○ Commerce staff ○ Child Welfare staff ○ Licensing staff ○ DDA providers ○ BRS providers ○ EPS providers ○ OYS/Commerce providers ○ CRC providers ○ ORR providers ○ Medically Fragile providers ○ RAC/Maternity providers ○ Private Group Care providers 	01/01/24	06/30/24
NRM	Routinely document and report NRM progress	01/01/24	09/30/24
NRM	Write updated rule language	01/01/24	09/30/24
Training	Launch updated facility staff e-learning and foster parent CCT training for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.	01/01/24	ongoing

Training	Develop LD and facility staff training for the interpretation and implementation of amended WAC rules.	01/01/24	09/30/24
Integration	Amend DCYF service contracts and policy while collaborating with impacted departments to ensure alignment of rules and practice.	07/01/24	09/30/24
NRM	Finalize amendments to WAC rules	07/01/24	09/30/24
Group Care NRM Rule Implementation			
Communication	Communicate final amended WAC, policy, and contract rules to impacted parties	10/01/24	10/31/24
Communication & Engagement	Establish monthly zoom provider meetings to discuss implementation strategies, provide change management and technical assistance, process questions/concerns, and provide notification/explanation of DCYF WAC/Contract/practice changes.	10/01/24	06/30/25
Training	Finalize LD and facility WAC trainings	10/01/24	12/31/24
Training	Launch LD and facility WAC trainings	01/01/25	09/30/25
Engagement	Collaboration between regional licensing and group care facilities to identify necessary facility policy and procedural amendments based on updated WAC, contracts and DCYF policy rules/language.	11/01/24	02/28/25
Integration	Facilities, in collaboration with regional licensing, amend necessary facility policy and procedure to fully align with updated WAC and contract requirements.	03/01/25	09/30/25
Policy	Update LD policy and procedure and develop process maps to align with new practices associated with amended WAC rules and monitoring needs.	10/01/24	12/31/24
Training	Develop LD staff training to new policy and practice requirements	01/01/25	06/30/25
Communication	Notify LD staff of, and train to, DCYF practice changes	07/01/25	09/30/25
Integration	Full WAC compliance and monitoring	10/01/25	Ongoing
Foster Care NRM Preparation			
NRM	Procure facilitator	10/01/23	12/31/23
Communication	Develop communication plan	01/01/24	02/28/24
NRM	Identify key roles for NRM process	01/01/24	02/28/24
Engagement	Establish NRM participant groupings	01/01/24	02/28/24
Engagement	Send foster parent and CPA survey for data collection	01/01/24	02/28/24
Foster Care NRM Development & Hybrid Negotiation			

Engagement	Begin routine participant communication	03/01/24	06/30/26
Research	Research and analyze federal and state laws informing rule requirements as well as best practice guidelines for foster care standards of care.	03/01/24	09/30/24
Collaboration	Write updated language for WAC that will not be subject for wholesale change during the NRM process.	03/01/24	09/30/24
NRM	Collaborate with participant groupings and facilitator group to design NRM process.	03/01/24	09/30/24
Collaboration	Establish workgroup to write proposed rules for a new licensing category to accommodate Professional Therapeutic Foster Care (PTFC).	03/01/24	09/30/24
Engagement	Establish NRM participant group meetings to: <ul style="list-style-type: none"> ○ Provide education on the NRM process ○ Identify specific WAC to target during in-person NRM process ○ Select NRM participants ○ Discuss proposed substitute WAC language 	04/01/24	09/30/24
Foster Care NRM In-Person Negotiation			
NRM	Negotiate rule requirements and language with representation from the following groupings at a minimum: <ul style="list-style-type: none"> ○ Tribes ○ Youth with lived experience ○ Parents/guardians with lived experience ○ DDA staff ○ BRS staff ○ Regional Licensing staff ○ CPA staff ○ Kinship homes ○ DDA foster homes ○ BRS foster homes ○ General foster homes ○ Medically Fragile foster homes 	10/01/24	03/31/25
NRM	Routinely document and report NRM progress	10/01/24	06/30/25
NRM	Write updated rule language	10/01/24	06/30/25
Training	Develop LD and facility staff training for the interpretation and implementation of amended WAC rules.	10/01/24	06/30/25
NRM	Finalize and publish WAC rules	04/01/25	06/30/25
Foster Care NRM Rule Implementation			
Communication	Communicate final amended WAC rules to impacted parties	07/01/25	07/31/25
Training	Establish communication, engagement, and change management strategies to provide foster parents, LD staff and CPA staff with supports needed to process	07/01/25	06/30/26

	the content and practice change associated with amended WAC rules.		
Training	Finalize LD and CPA WAC trainings	07/01/25	09/30/25
Training	Launch LD and CPA WAC trainings	10/01/25	06/30/26
Engagement	Collaboration between regional licensing and CPAs to identify necessary CPA policy and procedural amendments based on updated WAC, contracts and DCYF policy rules/language.	08/01/25	11/30/25
Integration	CPA's, in collaboration with regional licensing, amend necessary agency policy and procedure to fully align with updated WAC and contract requirements.	12/01/25	03/30/26
Training	In collaboration with the Alliance, update CCT pre-service training to align with amended WAC rules and updated practice.	10/01/25	06/30/26
Policy	Update LD policy and procedure and develop process maps to align with new practices associated with amended WAC rules and monitoring needs.	07/01/25	09/30/25
Training	Develop LD staff training to new policy and practice requirements	10/01/25	03/31/26
Training	Launch foster parent e-learning in-service training for the interpretation and implementation of amended WAC rules.	01/01/26	03/30/26
Communication	Notify LD staff of, and train to, DCYF practice changes	04/01/26	06/30/26
Training	Launch updated CCT pre-service training	07/01/26	Ongoing
Integration	Full WAC compliance and monitoring	07/01/26	Ongoing

System Improvement 4.10 Kinship Engagement Unit

System Improvement Leads: Foster Care and Kinship Licensing Initiatives Manager & Kinship and Guardianship Program Manager

Overview

In response to the DS Settlement Agreement, DCYF will create a Kinship Engagement Unit (KEU). The purpose of the KEU is to implement a family finding model to identify and engage Class Members' extended family members and friends to support families to safely reunify or stay together. The KEU will be responsible for performing or coordinating 5 main functions. Some of the activities under these functions are currently integrated into other existing or developing services within DCYF. The functions are referenced by number throughout this System Improvement Implementation Plan:

1. Conducting initial and on-going family engagement methods that utilize individualized communication methods to enlist support of extended family members and family friends that the child and/or family have identified as trusted and familiar individuals;
2. Providing information about available supports and resources for immediate and extended families, including family reconciliation services, evidence-based practices, and the Emerging Adult Housing Program, Hub homes, and Professional Therapeutic Foster Parent options;
3. Offering peer support and system navigation support to address barriers to engagement and assist in accessing resources and supports that extended and immediate families need;
4. Guiding extended and chosen family placements through the licensure process as requested; and
5. Assisting extended and chosen family placements with the requirements of RCW 13.34.065 or 13.34.130 as requested.

Framework

DCYF will establish pilot Kinship Engagement Units (KEU) in two regions, assess the pilot, modify the plan if needed, request funds for statewide implementation, and implement statewide in 2025. Administrative data coupled with regional capacity to implement a pilot will be used to determine the location of the initial pilots.

Each KEU will be staffed with Kinship Search and Engagement Coordinators who will identify and engage Class Members' extended family members and friends. The KEU will provide

information about available supports and resources to kin and refer kinship caregivers to the already existing/developing services. (TOU recommendation 2.1.5)

The Kinship Search and Engagement Coordinator Duties will include but not be limited to:

- Engaging with assigned Class Members and their extended family members and friends and improving communication frequency and quality. (PCG recommendation 8)
- Contacting Class Members to gather input and share information regarding the kinship engagement process. (PCG recommendation 3, 7.1/TOU recommendation 2.1, 2.1.1, 3.2, 3.2.1)
- Reviewing case notes, relative search information documented in FamLink, FTDM/shared planning notes, and case history for information about Class Member's needs and mention of extended family members and friends. The Kinship Search and Engagement Coordinators will access available databases for relative search and contact parents, relatives/fictive kin, schools, and childcare programs to help identify additional supports. (PCG recommendation 1, 7)
- Contacting Class Member's identified extended family members and friends (including new family placements; existing family placements that may have faced barriers to licensure that could be remedied with these new supports; and previously failed family placements and potential family placements that may have faced barriers to placement and licensure that could be remedied with these new supports) to maintain cultural connections for the Class Member, providing information about available supports and resources and educating them about expectations should they become a placement resource. The Kinship Search and Engagement Coordinators will initiate calls for required initial background checks and refer potential or existing kinship caregivers to available resources. (PCG recommendation 2, 10/TOU recommendation 2.2, 2.4.1, 3.1, 3.1.2, 3.1.3, 5.2, 5.2.1, 5.2.2, 5.2.4, 5.2.5, 5.3)
- In coordination with the caseworker, setting up and conducting a safety walk through of the relative/fictive kin home prior to placement, assessing the home for safety, and submitting referrals for concrete goods needed to secure placement with the relative/fictive kin. The Kinship Search and Engagement Coordinators will provide support after placement to include contacting the relative/fictive kin within 24 hours of placement to discuss needs, referring for critical resources to maintain placement (cash/food grant from CSO or initial license), introducing the licensing process, and other next steps. They will assist with supportive services such as consultation, problem resolution and crisis counseling for relative/fictive kin placement. The Kinship Search and Engagement Coordinator will also assist the assigned caseworker with the development of necessary resources and maintain strong communication about any issues in the home. (PCG recommendation 6/TOU recommendation 3.2.4, 2.3.2)

- Maintaining strong communication with relatives/fictive kin, caseworkers, supervisors, placement coordinators and the licensing division (via telephone, email, in-person, social media). (PCG recommendation 8)
- Participating in onboarding and ongoing staff training. (PCG recommendation 5, 9/TOU recommendation 4.2, 5.3)
- Tracking timeliness and delivery of kinship engagement services. (PCG recommendation 1)
- Engaging with Tribes and emphasizing cultural connections for children who are members of Tribes. (TOU recommendation 5.2.3)
- Emphasizing placing siblings together whenever possible. (TOU recommendation 3.1)

The KEU will document the connections identified and explored and the outcomes.

Existing, Expanded, and Developing Services and Supports

Some of the required activities and functions under DS are integrated into other existing or developing services. These are outlined below.

- **Caseworkers (Functions 1,2,4, & 5)** Caseworkers will provide initial and ongoing engagement, sharing information about supports, guidance through the licensing process, and assisting with requirements of RCW.

This existed before the D.S. Settlement, however, there has been an emphasis placed on a kin-first culture creating opportunities to re-train staff with a priority and urgency on placement with kin. [Policy 4527](#) Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Persons is under review and will be updated to better guide caseworkers in supporting kin. Caseworkers have new training available to them as of July 2023, Prioritizing Kinship Care: Working Towards Positive Placements. This course will help staff carrying kinship care cases understand how to support providers through the life of a case while practicing trauma-informed and inclusive engagement skills. (PCG recommendation 1, 5, 10/TOU recommendation 2.1)

- **FTDM/Shared Planning Meetings (SPM) (Functions 1, 2, 4, & 5)** These planning meetings bring together parents, children, youth, caregivers, and other identified supports to effectively plan for child and youth safety, permanency, and well-being. In response to the DS Settlement, DCYF is revising current FTDM and SPM policy, communicating policy and procedures changes, engaging with stakeholders, providing trauma-informed, culturally responsive, LBGQTQIA+ training, developing consistent meeting agendas, and creating practice profiles through the Child Welfare Practice Model to support the skill development and expectations required by policy.

The following practices existed before the D.S. Settlement; however, they are undergoing

improvement in response to D.S.

- Including parents, children and youth, caregivers, and relevant multi-disciplinary team members in the Shared Planning Meetings and consider family and young people's cultural needs (PCG recommendation 18, 20)
 - Demonstrating family-centered, trauma-informed facilitation (PCG recommendation 21)
 - Asking young people regularly about where they want to live and engaging them in placement decisions (TOU recommendation 2.1.1, 2.1.2, 2.1.3)
- **Relative Search Unit (RSU) (Functions 1 & 2)** The statewide RSU is tasked with identifying potential relative support for all children and youth for whom DCYF has legal custody. The RSU sends letters to notify all adult relatives within 30 days of a child or youth entering state care. The RSU documents responses to the search in FamLink.

The RSU existed before the D.S. Settlement, however, it is undergoing system improvements in response to D.S. The RSU updated the letter to include the [Kinship Caregivers webpage](#), ensuring the information about available supports is available to relatives of Class Members. An easily identifiable icon was added to FamLink allowing caseworkers direct access and review of search findings by the RSU. The KEU will begin utilizing the results of the work completed by the RSU in response to D.S. (PCG recommendation 1)

- **CHET Screeners (Function 2)** The Child Health and Education Tracking (CHET) program identifies each child's long-term needs at initial out-of-home placement by evaluating their well-being. Evaluation results are utilized to develop an appropriate case plan and assist in placement decisions.

The newly formed KEU will utilize the CHET screen and other available information and tools in response to D.S. to support placement with kin and placement stability. (PCG recommendation 7/ TOU recommendation 2.2)

- **Information about available supports and resources for immediate and extended families (Function 2)**
DCYF has established resources to support communication with kin that have undergone improvements and will continue to be revised as needed in line with D.S. requirements to make sure information about available supports is available to kin of Class Members. (PCG recommendation 25) This includes:
 - [Kinship Caregivers webpage](#) - DCYF updated the webpage in early 2023 to improve the landing page making it easier for relatives and suitable others to locate information, resources, and services. DCYF will continue to update the page to keep it relevant about available supports and resources.

- DCYF is updating and expanding publications with information about available supports and resources to be provided at time of placement to kinship caregivers. Publications will be available electronically and in print form. Publications will be translated into multiple languages as needed.
- **Caregiver Supports Project (Function 2 & 5)** The Caregiver Supports Project is a new initiative at DCYF supported by extensive stakeholder work and research. Implementation will begin in early 2024 with full statewide implementation by 2026. A root cause of placement instability in foster care is inadequate support services, especially for kinship caregivers. The Caregiver Supports Project was initiated in part to address caregiver resource inequity. This disproportionately impacts BIPOC families. Some goals of the project are resource parity for all caregivers, aligning resources to the needs of children and youth, and addressing racial bias in the current system. New level payments for licensed caregivers will be rolled out in January 2024. Support Services available to all caregivers, licensed and unlicensed, will begin to roll out in phases starting in 2024. (PCG recommendation 25, 26, 27)

The Caregiver Supports Project will:

- Provide a caregiver support system that offers support services to both relative and non-relative caregivers, based on the needs of children and youth
 - Replace the current 4 level payment model for licensed caregivers with an expanded service, 7 level model that better accounts for the varying needs of children and youth
 - Develop a standard and objective resource level determination process that considers information collected from multiple sources (including the youth, parents, previous caregivers, and other important people in the youth's life) as well as health history data available from the Health Care Authority (HCA)
 - Establish a contract for research, data analysis, and program monitoring with DSHS/RDA
 - Fund supports for licensed and unlicensed caregivers to include assistance with resource coordination and case aide hours for caregivers providing care for youth assessed at levels 3-7, which could assist in caring for and meeting any special needs of the child
- **CaRES Program (Function 2, 3, & 5)** The Alliance and DCYF launched the CaRES program in March 2021. DCYF contracts with CaRES to provide peer support, system navigation, and information about available support and community-based resources to all licensed and unlicensed caregivers. CaRES contacts:
 - All kinship caregivers with a new placement within seven business days
 - All licensed kinship and foster caregivers when they are initially licensed and again 6 (six) months post-licensure

- All licensed kinship and foster caregivers when they receive their first placement
- All caregivers who inquire or are referred within five business days

Automatic referrals of kinship caregivers to CaRES have helped to improve timeliness and delivery of kinship engagement services since March 2021. Caseworkers and Licensing Division workers can refer caregivers to CaRES throughout the life of a case. The KEU will inform Class Members' kinship caregivers about CaRES. They will provide referrals as needed to ensure peer support, system navigation, and information about available supports and community-based services and resources are available to the kin of Class Members. (PCG recommendation 25, 26, 27)

- **Kinship Notification Unit (KNU) (Function 4 & 5)** Statewide implementation of the KNU occurred December 1, 2022, to address the extensive lag time between the placement of a child in a kinship home and referral of that kin to the Licensing Division for support through the home study/licensing process. The KNU receives an automatic notification of placement in an unlicensed kinship home and engages the kinship caregiver in the home study/licensing process. Additionally, KNU works with kinship families seeking placement of children not yet in their care.

The KNU is a new system improvement enacted since the D.S. Settlement. It has shown improvement in the timeliness and delivery of kinship engagement services and availability of system navigation and licensure assistance. The KEU will refer potential kin placements to the KNU to complete the home study/licensing process. The KNU services align with stakeholder Feedback that kin and fictive kin are communicated with empathy and support and engaged when decisions (in this case placement with kin/fictive kin) are made. (PCG recommendation 1, 9)

- **Licensing Division (LD) (Function 4 & 5)** The LD successfully piloted a Kinship Caregiver Engagement Unit (KCEU) to guide extended and chosen family placements through the licensure process from October 1, 2020 - June 30, 2021, which improved home study timelines by an average of 20.45 percent within the first nine months. LD is taking the lessons learned from the success of the KCEU's engagement with kinship caregivers and stakeholder feedback recommendations about reducing the number of handoffs for kinship caregivers and is changing practice to have all LD staff incorporate the KCEU best practices into all work when engaging with kinship caregivers.

This is a new system improvement enacted since the D.S. Settlement demonstrating improvement in the timeliness and delivery of kinship engagement services and availability of system navigation and licensure assistance. (PCG recommendation 9, 25)

- **Washington Caregiver Application Portal (WA CAP) (Function 4)** The LD rolled out an electronic application portal in January 2023, to streamline the application process and reduce the timeline to approval. The application process, which was lengthy, confusing, and redundant in the past, is now vastly improved due to this system. WA CAP has a Kinship License track which guides applicants through the licensing process. It clearly states the requirements, how to meet the requirements, and provides links to information about resources for caregivers. Many applicants complete the required paperwork in just a few days.

This is a new system improvement enacted since the D.S. Settlement demonstrating improvement in the timeliness and delivery of kinship engagement services and availability of system navigation and licensure assistance. (PCG recommendation 25)

- **Wendy’s Wonderful Kids (WWK) (Function 1)** WWK is a statewide, evidence based, child focused recruitment model to finding permanent homes for children awaiting adoption in foster care by utilizing an extensive family and record search which includes communication with the youth and all who have been involved with the family. This model emphasizes building connections for the child outside of placement. For more information click [here](#).
- **Community based kinship support groups (Function 3)** Community based kinship support groups can be found in every region, online, or a mixture of the two to support kinship caregivers raising children. Many support groups are led by current or former kinship caregivers. Support groups connect kin with resources and other kinship caregivers to build meaningful connections and relationships to support each other.

System Integration

The KEU will improve cross-division efforts to engage and support Class Members and their kin. This System Improvement aligns with System Improvements 4.11 Family Group Planning and 4.13 Qualified Residential Treatment Program (QRTP). The KEU will educate relatives and kin about support services and placement options 4.6 Emerging Adulthood Housing, 4.7 Professional Therapeutic Foster Care, and 4.8 Hub Homes.

KEU will coordinate, utilize, and refer to existing resources at DCYF for family engagement and kinship support as detailed above in the [Existing, Expanded, and Developing Services and Supports](#) section. The Kinship and Guardianship Program Manager or their designee is responsible for overseeing these various initiatives to ensure the work is coordinated, staff are supported, and that kinship support is presented to families in a streamlined way.

Access and Eligibility Protocols

Access Protocols

The KEU will work directly with the families of eligible class members. Class members will be identified using administrative data. The KEU will monitor the exceptional placements report and any other applicable reports as they become available to identify new Class Members for initial family engagement methods at the time of identification.

Eligibility Protocols

The KEU staff will work directly with the Class Members and their extended family and family friends that the child and family have identified as trusted individuals.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. 41(1) Kinship Engagement Unit with family finding model, including providing individualized communication methods about available community-based services and resources, is established statewide.
2. 41(2) Kinship supports, including peer support, system navigation, licensure assistance, and information about available supports, are available to kin of Class Members.
3. 41(3) Defendants have received and considered stakeholder feedback as described in Attachment A regarding any additional kinship supports.
4. 41(4) Data is collected and demonstrates improvements in timeliness and delivery of kinship engagement services.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

Staffing

During the pilot, this System Improvement will be supported by the DCYF headquarters Kinship and Guardianship Program Manager, supervisors within the pilot regions, and Kinship Search and Engagement Coordinators. Future staffing needs will be identified following the assessment of the pilot program.

Training

DCYF will develop and implement a training plan for KEU Staff. At a minimum KEU staff will train on how to find and engage with family (children, youth, immediate family) to gather information and reach out to elicit support, as well as the best methods to support kin caregivers.

- KEU staff will be required to take the Identify, Locate, Inform, and Evaluate Kinship Caregivers training or an equivalent.
- KEU staff will be required to take the Prioritizing Kinship Care: Working Towards Positive Placements training or an equivalent. This course teaches how to support providers through the life of a case while practicing trauma-informed and inclusive engagement skills.
- KEU Staff will train on community resources to stay current.

Policy

Several DCYF policies and procedures will need to be reviewed, updated, and created to support the work of the KEU, including:

[4527. Kinship Care: Searching for, Placing with, and Supporting Relatives and Suitable Other Persons](#)

[4250. Placement Out-of-Home and Conditions for Return Home](#)

Create policy regarding Relative Search

Engagement

Stakeholder feedback from PCG and TOU, which informed this System Improvement, is intentionally incorporated into the KEU model and in the implementation of [Existing, Expanded, and Developing Services and Supports](#).

The Program Manager will review the stage 2 stakeholder feedback to incorporate in the KEU practice profile. The practice profile will support the skill development and expectations required by policy related to family engagement as part of the continuous quality improvement strategies:

- Second round of stakeholder engagement for this Settlement in 2025
- [Washington State DCYF Kin-first Culture Research and Recommendations](#)
- [DCYF Caregiver Survey Report](#)
- [The Kinship Caregiver Oversight Committee \(KCOC\)](#)

Communication

A communication plan will include communicating system changes and the roles and responsibilities of the KEU with children and youth, parents, kin, DCYF staff, Tribes, and stakeholders, including the Washington State Kinship Caregiver Oversight Committee. The plan will include communication methods and frequency of updates.

Quality Assurance

We will track benchmarks by establishing a baseline through available data in FamLink. This data alongside stakeholder feedback, will assist in modifying the plan as needed. The Program Manager will review input from existing sources to gather feedback as part of the continuous quality improvement strategy. The second round of stakeholder engagement required under the Settlement Agreement will offer additional guidance to improve this System Improvement in 2025.

Budget

Based on the success of the pilots DCYF will submit a Decision Package that requests funding to implement expanding KEU statewide in 2025 and to update and develop publications and resources for distribution to relatives and kin. DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Develop	Develop the Kinship Engagement Unit (KEU) pilot based on System Improvement 4.10 engagement/input section to include the PCG/TOU feedback	06/01/23	10/31/23
Communication	Develop and finalize communication plan	05/30/23	09/01/23
Implementation	Implementation of KEU Pilot in 2 Regions	11/01/23	Ongoing
Communication	Printing and dissemination of publications	11/01/23	Ongoing
Program QA	Assess pilot	12/01/23	05/01/24
Funding	Submit Decision Package as needed	04/01/24	08/01/24
Statewide Implementation	Develop the family practice profile as described in the engagement strategy section to include the PCG/TOU feedback. Practice profile to include feedback from data gathered during KEU Pilot.	07/01/24	08/01/25
Statewide Implementation	Expand KEU to all regions; timing dependent on success of the pilots and legislative funding	07/01/25	Ongoing
Program QA	Assess KEU	09/2025	01/2026
Program QA	Assess KEU using data for pre and post placement, pilot data, statewide data, and from existing methods of stakeholder feedback, modify plan if needed	01/2026	Ongoing

System Improvement 4.11 Family Group Planning

System Improvement Lead: Engagement Program Manager

Overview

The D.S. Settlement requires DCYF to review Shared Planning Meeting (SPM) and Family Team Decision Meeting (FTDM) policies and practices. The goal is to identify areas for improvement and revise in response to input from individuals with lived experience and other stakeholder feedback as outlined in Attachment A.

Family Group Planning encompasses Family Team Decision Making Meetings (FTDM) and Shared Planning Meetings (SPM). In 2006, DCYF rolled out the Team Decision Making model based off of the Family-to-Family program through the [Annie E. Casey Foundation](#). Since the statewide rollout, the model has been sustained with outdated curricula that's been updated by multiple program consultants. While the FTDM model relies on family engagement for decision-making, the current model has limitations due to varied facilitator roles and supervision structure throughout the state. This has led to inconsistency in practice and structure of the meetings, as well as lack of early family engagement to identify kin and resource supports.

Shared planning meetings bring together parents, children, youth, caregivers, and other identified supports to plan effectively for child and youth safety, permanency, and well-being. Under the Settlement Agreement, DCYF is required to establish a quality assurance process for SPM and FTDM practices and ensure these practices are trauma-informed, culturally responsive, and LGBTQIA+ affirming. In addition, the SPM/FTDM process will fulfill the following five functions of the Settlement Agreement:

1. Support and encourage active participation of children and youth, their immediate and extended family members, and other individuals who have trusting relationships with the child and family (collectively the "Family Team") in the SPM/FTDM process, including offering meetings in times and places that are accessible for all members of the Family Team;
2. Educate the Family Team about available services and placement options, including family reconciliation services, evidence-based practices, and System Improvements 4.6 Emerging Adult Housing Program, 4.7 Professional Therapeutic Foster Care and 4.8 Hub Homes;
3. Elicit and value the child or youth's preferences including, but not limited to, where to live, where to go to school, what treatment or services to receive, what supports are needed for safety, and who is involved in their lives;
4. Empower and authorize Family Teams to make and revisit decisions about how and where to best support the child or youth's health, safety, stability, cultural socialization, and relationships with family;

5. Provide necessary supports and resources, including those identified in the SPM/FTDMs policies and procedures.

System Integration

This System Improvement aligns with System Improvements 4.10 Kinship Engagement, 4.12 Referrals and Transitions and 4.13 QRTP. Education on support services and placement options from System Improvements 4.6 Emerging Adulthood Housing, 4.7 Professional Therapeutic Foster Care, 4.8 Hub Homes will be built into the Family Group Meeting processes.

Access and Eligibility Protocols

Current access and eligibility protocols are as follows: SPMs are conducted at certain points in time of a case, as outlined in the [Guide to Shared Planning Meetings](#). The family is referred by and invited to a meeting by caseworkers. Caseworkers and facilitators attempt to accommodate the family's schedule as best as circumstances allow and with as much advanced notice as possible. The SPM and FTDM forms are completed during the meeting and returned to the caseworker after the meeting. The caseworker disseminates meeting notes to the family/other persons responsible for tasks and follows up on action items identified during the meeting, including, referrals for services and family time. (PCG recommendation 12/TOU recommendation 4.3)

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. 42(1) Defendants have received and considered stakeholder feedback as described in Attachment A regarding the maintenance or revision of its SPM and FTDM policies.
2. 42(2) DCYF staff have received training and ongoing coaching in SPM and FTDM policies and protocols, as identified in the Implementation Plan.
3. 42(3) Defendants have implemented quality assurance as outlined in the Implementation Plan.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

Policy and Procedures for SPM and FTDMs

Policies include:

[1710 Shared Planning Meetings](#)

[1720 Family Team Decision Making Meetings](#)

Current Shared Planning Meeting structure can be found in [Guide to Shared Planning Meetings](#). (PCG recommendations 12, 13, 16, 18, 20/TOU recommendations 4.1, 4.3.4, 6.6, 6.7.5;)

The most recent updates to SPM and FTDM policy and procedure were in process prior to receiving the stakeholder feedback and recommendations required by the Settlement Agreement. The following TOU recommendations are addressed in those updates: invite youth and supports to meeting, soliciting youth preferences and voice, to accommodate family schedules and ensure times that work for the family, respect youth's choice whether to participate or speak in the meeting, ask youth what they need and want and honor their preferences as much as possible. (TOU recommendations 4.3, 4.3.1, 4.3.3, 4.3.4, 6.1, 6.2.1)

Revisions to policy 1710 and 1720 are awaiting review and will incorporate the five Settlement functions as described above.

Additional revisions to policy will include the following: solicitation and follow up of family voice, youth choice about how and when they want to participate, provision of consistent agendas for all SPMs/FTDMs, and transparent documentation. (PCG recommendation 14.1, 17; TOU recommendation 2.2.2)

After further exploration and review of national changes related to family engagement and meetings, updating the current Family Team Decision Making (FTDM) model provides the best option. We have the opportunity to update the FTDM model to include safety focused meetings (early engagement), placement decisions, and permanency. Further, the updated model includes already developed FTDM facilitator training and supplemental training focused on youth engagement and domestic violence which will help meet the exit criteria of the D.S. Settlement. With the expanded FTDM model, youth, parents, and caregivers will be able to have an orientation to meetings and the agency with a trained facilitator. An agenda will be developed prior to the meeting and the family will be able to identify additional topics or areas they would like to explore during their meeting which may include time without the agency to discuss key elements before the plan is agreed on. (PCG Recommendation 17/TOU recommendations 4.3, 4.3.1, 4.3.2, 4.3.4)

While this plan will impact most families served by DCYF, training and support will include key components to ensure traditions and customs are discussed prior to the meeting with meeting preparation. Preferred names and pronouns will be incorporated into these pre-meetings and respected in meetings (PCG Recommendation 20/TOU recommendations 4.3, 4.3.1, 4.3.2, 4.3.24). The feedback from external stakeholders regarding family engagement and youth voice during meetings will be included and reviewed during the program review, implementation and sustainability planning along with program reports (PCG Recommendation 14.1/TOU recommendations 4.3.3, 4.3.4;). Additionally, feedback from internal stakeholders around training, consistent facilitation strategies and support will also support the ability to adapt the meeting to the family needs and situation.

This [TDM](#) model will include the delivery of updated curriculum, program materials, coaching model and QA/CQI tailored tools along with tools and resources to support sustainability of the family group meeting model. At the facilitator level, high quality curriculum will provide consistent training including specific training for youth engagement, domestic violence, and documenting meeting notes consistently (PCG recommendation 18). Program support will mentor and support key positions dedicated to coaching and implementing the updated model and assist in facilitator skill and practice development. Consistent meeting facilitation and structure will enhance shared planning meetings and provide family and youth centered meeting reducing out-of-home placement and improving outcomes for youth and families (PCG Recommendation 18).

A national scan was conducted along with the review of other models. Previous attempts to develop and update training materials are not addressing youth engagement and providing guidance and direction to meeting facilitation and documentation. The current [TDM](#) model provides the opportunity to update the program and will require a minimum of program positions for implementation and sustainability allowing for collection of data to determine future program decisions.

Staffing

Funding is being requested in this year's Supplemental Decision Package to revise and update staff trainings, ensure consistent practice in meeting facilitation and continuous quality improvement, as well as program roll-out and oversight.

Training

DCYF will review the current training curriculum for facilitators and utilize existing resources to develop a training plan. Facilitators will complete trainings that are trauma-informed, culturally responsive, LGBTQIA+ affirming. (PCG recommendations 19, 21)

Understanding the impact of trauma, as well as identifying cultural bias, is critical to being a neutral facilitator and to instilling confidence in said neutrality. Facilitators need to understand and value the agency lens as well as consider and affirm the values of key participants, including

youth, parents, Tribal partners, and court partners. Training will be determined by best practice, continuous quality improvement processes, and supervision.

Training to Social Service Specialists and Supervisors who support the Family Team Meetings will be reviewed, revised, or developed to include; communication about purpose of meeting and supports who can be invited, timely notification of the meeting, along with collaboration with the family to determine date and time of the meetings. Training will be offered through Foundations of Practice drop-in sessions, coaching and training support from contracted providers, and through the quality assurance process for practice changes and additions to policy. Staff will also have support from the Racial Equity and Social Justice Unit to assist in practice change. (TOU 4.3.1, 4.3.2, 4.3.4)

Engagement

Stakeholder feedback obtained by PCG and TOU for stage 1 has informed the development of this System Improvement. The Program Manager will review stage 2 stakeholder feedback to incorporate into the practice profile. The practice profile will support the skill development and expectations required by policy as part of the continuous quality improvement strategies.

Communication

Updates to policy, practice, and training will be communicated to caseworkers, supervisors, and those impacted through relevant communication channels including but not limited to Facilitator Community of Practice, FTDM/SPM Leads meetings, Community of Practice, field operation memos, and external channels of communication.

Quality Assurance

Robust data collection and monitoring processes for shared planning meetings for all children and youth will be developed for long term program development, monitoring, and sustainability.

Implementation of the System Improvement includes the tracking of facilitator training. Post training and facilitator development model reviews will be conducted via documentation and through observation by statewide coaching and support staff. Coaching and mentoring will be tracked by statewide coaching and support staff and reported in the implementation and sustainability reports at minimum annually.

Guidance for documentation will be developed along with practice profiles to ensure agency staff operationalize key practice areas involved in facilitating and participating in all meetings. These new policies and practice profiles will be trained to appropriate staff and implemented with a consistent structure for review and feedback for facilitators.

In addition to monthly practice reviews with FTDM leads, statewide quality reviews of the FTDM and SPM program will be completed twice a year. Statewide reviews will be led by the

Statewide CQI/QA Manager and include a collaborative process with regional staff and program managers along with the feedback loop through leadership. These reviews will look for key elements of practice, including documented youth attendance and engagement and identification of action steps for practice improvement, with ongoing review of follow through on past action steps. Reviews will be shared with facilitators and themes will be discussed with regional leads. Outcomes of the review process will assist in determining targeted training and support for facilitators. Program reviews will be reported in the semi-annual implementation and sustainability report for leadership questions and answers and regional discussions.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Program	Monthly FTDM/SPM Leads meeting to support practice changes and identify barriers, quarterly Facilitator Community of Practice, Foundations of Practice.	04/01/23	Ongoing
Policy	Update and revise SPM and FTDM policies to include individuals with lived experience and stakeholder input. Process and procedure of placement education and referrals are established for 4.6, 4.7, 4.8.	09/01/23	12/01/23
Communication	Communicate updated policy, procedures, and trainings to Child Welfare field staff through Community of Practice, Foundation of Practice, and field operations memos.	12/01/23	Ongoing and reviewed annually
Training	Review training for facilitators and utilize existing resources. Facilitators will complete training to support meetings that are trauma-informed, culturally responsive, LGBTQIA+ affirming.	07/01/23	07/01/24
Budget	Submit Decision Package request for Supplemental Session	04/01/2023	08/31/23
QA, Training	Utilize Foundations of Practice drop-in sessions, training resources, and current quality assurance process for caseworkers and supervisors. Develop practice profile to support skill development for facilitators and caseworkers.	12/01/23	Ongoing and reviewed annually
Engagement	Stakeholder engagement stage 2	2025	2025

System Improvement 4.12 Referrals and Transitions

System Improvement Leads:

- Memoranda of Understanding with Interested Local Hospitals - Integrated Health Services Administrator
- Memoranda of Understanding with County Juvenile Courts - Systems of Care Program Administrator
- Youth Narratives, Supports, and Pre-Placement Contact - Placement Stability Program Manager

Overview

Memoranda of Understanding (MOU) with Interested Local Hospitals

DCYF is working to develop a consistent communication and collaboration protocol for children and youth discharging from hospitals when their parents/guardians are unwilling or unable to take them home. In collaboration with partners from interested hospitals DCYF will develop a template Memorandum of Understanding (MOU) that establishes a communication and collaboration protocol to prevent the need for out of home placement through timely referrals for reconciliation services. Further, the availability of entering into an MOU will be communicated to the Washington State Hospital Association with regional contact names listed on the DCYF website.

During the 2023 legislative session, HB 1580 was passed and signed into law. HB 1580 provides a care coordinator housed at the Governor's Office, who, in coordination with DCYF, DSHS, HCA and the Office of Financial Management (OFM), will develop and implement a rapid care team to support children and youth in crisis and assist in identifying appropriate services and living arrangements. The details of the rapid care team and how it will interface with the various child and youth serving systems is still under development. As such, it is difficult to say with certainty how the processes outlined in the MOUs will interact with the rapid care team. Further, a Multi-Systems Rounds process is already in existence, which may serve as an interim step to service and living arrangement resolution prior to involvement of the rapid care team, but, again, it is difficult to say with certainty how the various processes will interact without current guidance from the Governor's Office about the care coordinator and the rapid care team.

Memoranda of Understanding (MOU) with Interested County Juvenile Courts

Similarly, DCYF is working to develop a consistent communication and collaboration protocol for youth releasing from juvenile detention when their parents/guardians refuse to pick them up. The MOU has been in development since July 2022. The MOU has been drafted and reviewed by DCYF Regional Administrators. The team drafting the MOU has sought feedback from the juvenile court team that includes juvenile court judges, presiding judge of the Superior Court Judges Association, juvenile court Administrators, a juvenile court Detention Manager, and the President of the Washington Association for Juvenile Court Administrators. DCYF

Regional Administrators have already designated the staff in their regions who will serve as Regional Cross-Systems Liaisons for all the juvenile courts in the region and are in the process of updating position descriptions.

Youth Narratives, Supports, & Pre-Placement Contact

DCYF will create a formalized process for children and youth to review information that goes out to potential placements, create a narrative about themselves to share with potential placements, and have pre-placement contacts with potential caregivers and that will assist to preserve relationships where possible or to address grief and loss post transition. These processes will be developed with the input we have received from stakeholders and individuals with lived experience. Recommendations include engaging youth in developing their own narratives to center their voice and honor their requests as much as safely possible, sharing their placement preferences, and giving them the opportunity to speak, meet, or visit prospective placements prior to transfer. (PCG recommendations 22, 23/TOU recommendations 2.1, 2.2, 2.2.4, 2.3, 4.1, 5.2.4, 5.4, 5.4.2)

System Integration

The leads for these System Improvements are exploring how these new processes interact with System Improvement 4.11 Shared Planning Meetings and the [Caregiver Supports project](#), that will provide placement supports to licensed and unlicensed placements, including kinship caregivers. Shared Planning Meetings can be pivotal to supporting transitions, timely referrals for services, maintaining connections, and obligations to facilitate kin connections.

Access and Eligibility Protocols

MOU with Interested Local Hospitals

Children and youth who are not picked up by their parents or legal guardians from hospitals are eligible for this System Improvement. Access will be determined by the Regional Hospital Liaisons.

MOU with Interested County Juvenile Courts

Children and youth who are not picked up by their parents or legal guardians from detention will be eligible for this System Improvement. Access will be determined by the Regional Juvenile Cross-Systems Liaisons.

Youth Narratives, Supports, & Pre-Placement Contact

Children and youth identified as Class Members are eligible for this System Improvement. Class members will be identified using administrative data. The placement exceptions report and any other applicable reports as they become available will be used to identify new Class Members.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in a Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to: [Strategies to Achieve the System Improvement](#)

[Activities/Timeline MOU with Interested Local Hospitals](#)

[Activities/Timeline MOU with Interested County Juvenile Courts](#)

[Youth Narratives, Supports, & Pre-Placement Contact](#)

Exit Criteria

1. 43(1) MOUs are in place between DCYF and hospitals and juvenile courts as identified in the Implementation Plan.
2. 43(2) Class Members are given an opportunity to develop and verify their own case histories and information.
3. 43(3) Defendants have developed and implemented a protocol for pre-placement contacts between Class Members and potential placement resources.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

MOU with Interested Local Hospitals

Staffing

Child Welfare Field Operations has identified Regional Hospital Liaisons. The DCYF headquarters Mental Health Program Manager and the Administrator of Integrated Health Services will provide statewide leadership and coordination.

Training

Regional Hospital Liaisons will be trained regarding the MOU development process. Training will also include what to do once contacted by a hospital to enter into an MOU and the role of the Developmental Disabilities and Mental Health Liaisons in coordinating responses in collaboration with the hospital liaisons.

Understanding the impact of trauma, as well as identifying cultural bias, is critical to understand and value the agency lens and affirm the values of youth, parents, Tribal partners, and system partners. Training will also be LGBTQIA+ affirming. Continued education will be required as determined by best practice, continuous quality improvement processes and supervision.

Engagement

Hospital and Child Welfare Field Operations partners will be included throughout the MOU design process.

Communication

The Mental Health Program Manager will develop a page on the DCYF Internet site dedicated to hospital MOUs and it will list the names of the Regional Hospital Liaisons along with a description of the availability and purpose of the hospital MOUs. Contact information for each of the Regional Hospital Liaisons, in addition to the Mental Health Program Manager will be provided on the webpage. The Mental Health Program Manager will develop communication memorandums, in coordination with the Office of Public Affairs, to be sent to the Washington State Hospital Association for distribution to member hospitals and for Regional Hospital Liaisons to send to hospitals in their areas.

Discussions regarding the MOU have taken place with some of the larger hospitals in the state, including Seattle Children’s Hospital and Mary Bridge Children’s Hospital. Additional outreach is planned with Sacred Heart Medical Center in Spokane. As interested hospitals are identified by the Regional Hospital Liaison or as hospitals reach out to the liaison indicating a desire to enter into an MOU with DCYF, the Regional Hospital Liaison will connect with the Mental Health Program Manager to receive technical assistance and support in negotiating the hospital’s roles and responsibilities. The Contracts and Procurement Office will also be included in reviewing, approving language, and finalizing the MOU.

The Mental Health Program Manager will develop a communication plan to inform Child Welfare Field Operations and intake of the existence of any finalized MOUs and the roles of the Regional Hospital Liaisons and Developmental Disabilities and Mental Health Liaisons in coordinating responses.

Quality Assurance

The Mental Health Program Manager will collect data to complete a data analysis to track the number of established MOUs, identify trends and work with system partners for service delivery and placement support.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline MOU with Interested Local Hospitals

Strategy	Activities	Target Start Date	Target Completion Date
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Point of Contact	Regional Hospital Liaisons identified	12/15/22	Complete
Training	Train Regional Hospital Liaisons	03/28/23	Complete
Communications	Communicate availability of MOUs through hospital association	07/01/23	Ongoing
Negotiation	Regional Hospital Liaisons and HQ Mental Health Program Manager will work together with local hospitals interested in an MOU to outline roles and responsibilities.	08/01/23	Ongoing
Communications	Implement Communication Plan	09/01/23	Ongoing
Finalization & Implementation (Contracts)	Partner with DCYF Contracts for signature of approved MOU	09/01/23	Ongoing
Quality Assurance	Track the number of hospital MOUs and data from the monthly reports provided by the Development Disabilities and Mental Health Liaison. Analyze data to identify trends. Work with system partners for service delivery and placement support.	09/01/23	Ongoing

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

MOU with Interested County Juvenile Courts

Staffing

Child Welfare Field Operations has identified Regional Juvenile Cross-System Liaisons. The DCYF headquarters Systems of Care Administrator will provide statewide leadership and coordination.

Training

Regional Juvenile Cross-Systems Liaisons will be trained regarding the MOU development process. Training will also include what to do once contacted by a juvenile court to enter an MOU.

Understanding the impact of trauma, as well as identifying cultural bias, is critical to not only understand and value the agency lens but also consider and affirm the values of youth, parents, Tribal partners, and court partners. Training will also be LGBTQIA+ affirming. Continued

education will be required as determined by best practice, continuous quality improvement processes and supervision.

Engagement

Juvenile Court and Child Welfare Field Operation partners were included through the MOU design process.

Communication

Strategies to achieve the System Improvement include effective communication throughout the regions, so that field staff and the intake unit are aware of the MOU, understand that each region has a designated Regional Juvenile Cross-System Liaison, know who their liaison is, and their role. DCYF communications will be coordinated and shared with Juvenile Court designees. Detailed information and a copy of the MOU will be provided to staff, and if necessary, forums will be held for staff to ask questions and get clarity. Regional Cross System Juvenile Liaisons will have the opportunity to review, and coordinate with the Juvenile Court staff for implementation.

Quality Assurance

Juvenile Cross-System Liaisons will track the number of incidents in which they partner with local juvenile courts who have entered into an MOU. Data will be collected in an Excel spreadsheet and sent to the Systems of Care Administrator who will complete a data analysis to identify trends and work with system partners for service delivery and placement support.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline MOU with Interested County Juvenile Courts

Strategy	Activities	Target Start Date	Target Completion Date
Communications	Review draft MOU with Child Welfare Leadership Team Develop Communication Plan	12/2022	Complete
Negotiation	Stakeholder Review Meeting with Juvenile Court Partners	04/26/23	Complete
	Meeting with 6 Regional Cross Systems Liaisons	04/26/23	Complete
Communication	Implement Communication Plan	09/01/23	Ongoing

Finalize and Implement (Contracts)	Partner with DCYF Contracts for signature of approved MOU <i>(36 sets of signatures – WA has 36 independent juvenile courts)</i>	09/01/23	Ongoing
Quality Assurance	Track of the number of MOUs with juvenile courts and monitor monthly reports. Analyze data to identify trends and work with system partners for service delivery and placement support.	09/01/23	Ongoing

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

Youth Narratives, Supports, & Pre-Placement Contact

Staffing

Identified staff will develop, implement, and assess practices and protocols related to supporting youth in reviewing their histories and developing a personal narrative to support placement and establishing processes to support placement transitions.

Training

Collaboration is current and ongoing with the Alliance for Professional Development, Training and Caregiver Excellence (Alliance) to develop trauma-informed, culturally responsive, and LGBTQIA+ affirming trainings for workforce development. This also includes updating the child and youth referral training. (PCG recommendation 24/TOU recommendation 5.2.1)

Policy

Practice and procedure will be revised that seek to increase placement stability by engaging youth in the Class to develop their own narratives, center their voice, honor their requests as much as safely possible, and share their placement preferences by giving them the opportunity to speak with, meet, or visit prospective placements prior to transfer. (PCG recommendation 22/TOU recommendations 2.2, 2.2.4, 4.1)

Contracts

Placement contracts will be assessed for potential changes to support youth.

Engagement

Stakeholder feedback with PCG and Think of Us has informed the policy and procedure strategy for this System Improvement. There will be a second round of contracted stakeholder feedback that will begin in 2025. DCYF will add a process to collect feedback as part of a continuous quality improvement strategy from youth and partners.

Communications

DCYF will engage key stakeholders, including individuals with lived experience, tribes, caregivers, contracted providers, CPAs, and Child Welfare Field Operations staff, in the development and implementation of practice, protocol and policy. Communication will be developed and implemented for Child Welfare Field Operations, Child Placing Agencies (CPA), contracted placement providers and caregivers on the new processes and the youth-centered approach to care.

Quality Assurance

DCYF will use FamLink or an alternate system to track the benchmarks ensuring youth in the Class are offered the opportunities to engage with these processes. DCYF will explore practice profile recommendations as part of the Family Practice Model to support the staff skill development needed to sustain a youth-centric approach.

Quarterly QA will begin three months after implementation by tracking administrative data and qualitative data to identify preservation of relationships and if grief and loss post transition are occurring. Data elements will include:

- a. if the opportunity to write a personal narrative was offered and completed,
- b. if the opportunity to review and verify referral information and documents was offered,
- c. if the opportunity to write a personal narrative was offered, the youth was interested, but it did not occur, and why it did not occur, and
- d. if the opportunity to write a personal narrative was offered and the youth declined.
- e. if pre-placement contact was offered and completed,
- f. if pre-placement contact was offered, the youth was interested, but it did not occur, and why it did not occur, and
- g. if pre-placement contact was offered and the youth declined.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline Youth Narratives, Supports, & Pre-Placement Contact

Strategy	Activities	Target Start Date	Target Completion Date
Engagement	External stakeholder feedback from youth with lived experience	02/2023	Complete

Program	Develop protocol (policy & procedure) for children and youth so that they have the ability to review and or create narratives about themselves and be offered pre-placement contact with potential caregivers.	10/01/23	12/2023
Policy			
Training	Training for staff implementing the System Improvement	10/01/23	Ongoing
Policy	Develop policy and procedure language. <ul style="list-style-type: none"> Work with placement desk supervisors/Area Administrators placement desk workers, FTDM supervisors, Engagement PM at HQ and others identified by Child Welfare Field Operations Leadership to develop new or revise existing policies and procedures. Work with the policy unit and the CWFS program manager to make changes as needed. 	10/01/23	3/2024
Policy	Policy identification for process <ul style="list-style-type: none"> Policy #4260- Placement Moves has been identified and place holders have been inserted. Policy revision as needed 	10/2022 7/2023	Complete 03/2024
Practice	In collaboration with DCYF Fiscal and Contracts sections, identify and develop processes and procedures necessary to support payments for pre-placement visits.	10/2023	12/2023
Communications	Develop and implement communication about payment processes to staff and impacted individuals.	12/2023	03/2024
Communication	Messaging policy changes and protocols	12/2023	03/2024
Training	Training all parties policy changes and protocols. <ul style="list-style-type: none"> Determine the types of training and communication necessary for caregivers, youth, families, and DCYF staff. Develop and implement training and resources 	08/2023	03/2024
Program	Program launch	04/2024	04/2024
QA	DCYF will develop and implement a quality assurance process that will assess the impact of this process for youth and caregivers. The process will include feedback from youth and caregivers.	7/2024	Ongoing
Engagement	Second round of external partner feedback from youth with lived experience.	2025	2025

System Improvement 4.13 Qualified Residential Treatment Program

System Improvement Lead: Placement Continuum Administrator

Overview

Under the D.S. Settlement Agreement, effective January 1, 2024, DCYF will ensure that all children will have a Qualified Residential Treatment Program (QRTP) assessment prior to placement in a QRTP and every 90 days for the duration of placement in the QRTP. QRTP assessments are currently done by neutral and objective qualified individuals, intensive resources SHPC that sit within the centralized headquarters Placement Continuum unit, as defined by DCYF's federally approved plan, at time of request for entry into a QRTP and then every six months thereafter. DCYF will ensure that all children and youth who require a QRTP assessment will have one that has input from children, youth, families, and other supports, preferably completed in-person, prior to placement in a QRTP setting and every 90 days thereafter for the duration of the QRTP placement. In addition to interviews, assessments will include review of records, determination of strengths and needs of the child, identify child-specific short and long-term mental and behavioral health goals, a finding that family-based alternative or transitional living option, have been considered and deemed insufficient to meet the child's needs, and the discharge criteria and progress toward meeting discharge criteria.

System Integration

This System Improvement as well as 4.10 Kinship Engagement and 4.11 Family Group Planning are responsible to provide education on support services and placement options 4.6 Emerging Adulthood Housing, 4.7 Professional Therapeutic Foster Care, and 4.8 Hub Home Housing.

Access and Eligibility Protocols

This System Improvement applies to all youth in DCYF's placement and care authority (PCA) who are considered for a QRTP placement or who are already placed in a QRTP placement.

Methodology and Exit Criteria

The Exit Criteria for this System Improvement details key benchmarks that will be monitored. Methodology and metrics will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

For additional information or data points that help to achieve the benchmarks, please refer to the [Strategies to Achieve the System Improvement](#) and [Activities/Timeline](#).

Exit Criteria

Exit criteria established in the Settlement Agreement are:

1. Exit Criteria 44(1) Ninety percent of youth in a QRTP or other congregate care setting have been determined to need QRTP placement pursuant to preplacement and subsequent 90-day evaluations by a neutral and objective qualified evaluator.

Strategies to Achieve the System Improvement

Based on best judgement, the following strategies and activities are DCYFs best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

In July and August of 2022, management and administration of intensive resources centralized to a statewide team to ensure consistency and oversight of intensive resources. This team ensures that youth qualify for intensive services and advocates for home-based supports like in-home BRS and therapeutic foster care. Discharge planning is developed at time of entry into Qualified Residential Treatment Programs (QRTP) with input from children, youth, and families to ensure timely transitions and step-down to a less intensive level of care.

This team will conduct QRTP assessments to determine eligibility for placement in a QRTP and to identify strengths and needs of the child as well as child-specific short and long term mental and behavioral health goals, and criteria for youth to be reunified w family or placed in care of extended family, suitable other or foster home. This includes reviewing original source documentation, gathering information by meeting with children and youth and their families and supports, attending meetings and completing the CFARs scoring tool.

Staffing

DCYF will hire staff to complete the expanded QRTP assessment requirements. These FTEs will ensure that QRTP assessments are completed prior to placement and every 90 days, preferably in-person, while the youth remain in a QRTP placement.

Training

Qualified individuals will be trained on interviewing children and youth, with a specific focus on capturing youth and family voice. The qualified individuals doing the assessments will have training on culturally responsive, LGBTIA+ affirming, and trauma informed care.

Communication and Engagement

The Intensive Resources Program Supervisors will develop an information sheet and consistent communication strategy for parents and youth about QRTP placements and their role and desired engagement. They will also develop a communication strategy and resources for QRTP providers and DCYF staff, so they understand the changes in QRTP assessments.

Quality Assurance

Qualitative and quantitative information will be gathered and utilized to aid in ensuring that QRTP assessments are correctly and consistently completed. The processes will be formal and informal and will involve qualified individuals providing QA within their teams, data collection to aid in interrater reliability, supervisor reviews of assessments, and feedback from children, youth, and families. The QRTP assessment tool is still in development.

Budget

DCYF will review budget and policy authority annually and submit Decision Packages when necessary.

Activities/Timeline

Strategy	Activities	Target Start Date	Target Completion Date
Policy	Identify and implement policy revisions required for <u>Behavior Rehabilitation Services Policy 4533</u> to include revised QRTP timelines, requirements to review primary source documents and interviews, preferably in-person, with children, youth, families, and other supports.	03/01/23	1/1/24
Training	Identify trainings to grow child and family interviewing and engagement skills for qualified individuals completing QRTP assessments. Establish written training plan for qualified individuals. Training Focus: <ul style="list-style-type: none"> ○ Engaging youth, families and supports in a way that allows them to authentically and safely share their voice ○ Trauma-informed ○ LGBTQIA+ affirming ○ Culturally competent and responsive 	02/01/23	09/01/23
QA	Continue work with the Partnership, Prevention and Services Quality Assurance/Quality Improvement team to create a process to review QRTP assessments and assessors.	In-process	12/31/23
QA	Develop a process for qualified individuals doing QRTP assessments to have an	04/01/23	Complete

	<p>opportunity to QA each other's assessments to aid in consistency and interrater reliability.</p> <p>Qualified Individuals and their supervisors will meet every other week and review a case file and complete a CFARs. They will share their scores and review the CFARs manual when there is a discrepancy.</p>		
QA	Develop a tracking tool and reporting system for Intensive Resources Program Consultants that includes the following information: CFARs scores, list of records reviewed, list of interviews with youth, families and important individuals and method of interview (in-person, virtual), strengths and needs of the child, child-specific short and long-term mental and behavioral health goals, discharge criteria for the youth to be transitioned to a nonresidential or transitional living program and progress towards meeting the discharge criteria.	04/15/23	09/01/23
QA	Develop a method for collecting feedback from QRTP assessment participants that allows for them to give input on the process. Intensive Resources Supervisors will develop a process for reviewing feedback and using it to inform training needs and process improvements.	06/01/23	09/01/23
Training	Ensure that current qualified individuals completing QRTP assessments have training in gathering youth and family voice.	07/01/23	10/01/23
Training	Newly hired qualified individuals completing QRTP assessments have training in gathering youth and family voice.	08/01/23	Ongoing as new staff are hired
QA	Quantitative – Collect and compare data on how each qualified individual scores Children's Functional Assessment Rating scores (CFARS).	In-process	Ongoing
QA	<p>Qualitative – Monthly supervisory level review of 1 QRTP assessment narrative, from each qualified individual to ensure that it demonstrates an assessment of:</p> <ul style="list-style-type: none"> ○ Child, youth and family strengths and needs. ○ The ability or inability to serve the child or youth in a less restrictive setting with supports and services. 	08/01/23	11/01/23

	<p>And that the assessments:</p> <ul style="list-style-type: none"> ○ Engage youth, families and support in a way that allows them to share their voice and desires authentically and safely. ○ Are trauma-informed and culturally competent and responsive. ○ Include an assessment of the youth and families view of the programming and the program’s level and type of engagement with them. 		
QA	Implement strategy for qualified individuals doing CFARS assessments to compare their scoring and logic to that of other qualified individuals.	08/01/23	12/01/23
QA	Implement new section within the monthly report with QRTP assessment information and recommendations.	10/01/23	12/01/23
QA	Implement identified method for collecting feedback from QRTP assessment participants that allows for them to give input on the process.	10/01/23	01/01/24

Exit Procedure

In making a determination of substantial compliance, the Settlement Agreement specifies that the Court should consider the State’s good faith efforts to implement the goals of the Agreement and four additional criteria.

45 (1)

Whether 90 % of eligible youth and children referred to or requesting services from System Improvements 4.6 Emerging Adult Housing Program, 4.7 Professional Therapeutic Foster Care and 4.8 HHM program statewide (in accordance with the access and eligibility protocols set forth in the Implementation Plan) are served within 60 days of request or referral.

Methodology and metrics for this criteria, including interim benchmarks, will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.

45(2)

Whether DCYF has eliminated the use of night-to-night foster care placements and placement exceptions.

Overview

This exit criteria requires DCYF to eliminate the use of night-to-night foster care placements and placement exceptions other than in the event the youth returns to or enters DCYF custody between the hours of 10 pm to 6 am and DCYF must use a placement exception for the remainder of the night.

DCYF will eliminate the use of night-to-night foster care placements and placement exceptions by December 31, 2024.

Strategies for eliminating night-to-night and placement exceptions

In addition to the System Improvements negotiated under the Settlement Agreement, DCYF is employing specific strategies to eliminate the use of night-to-night foster care placements and placement exceptions.

Based on best judgement, the following strategies and activities are DCYF’s best and most current plans to meet the exit criteria for the Settlement Agreement. While the exit criteria are fixed by the Settlement Agreement, these strategies and activities may change.

Strategies to eliminate the use of night-to-night foster care and placement exceptions are intended to develop resources and programs, strengthen practice, and establish consistent QA and oversight. These include:

- Reviewing and refining the procedure for staffing youth with complex needs that includes internal and external stakeholders with the capacity to escalate to a multi-

system staffing with staff from other state agencies and partners including the Health Care Authority, Developmental Disabilities Administration, and the managed care provider for children in out of home care, Coordinated Care. The procedure was initially implemented in 2021 and continues to be utilized to support resolving cases at the lowest possible level and to engage key system partners to obtain needed services and resources for youth. The procedure will be reviewed to determine if we need to make updates or revisions.

- Establishing regional disability/mental health lead positions that are managed through Headquarters. These program staff will assist caseworkers in navigating the mental health and developmental disabilities systems related to children and youth in, or at risk of entering, out-of-home care. These positions are in the process of being filled. These leads will assist with consultation, system navigation and problem solving to improve access for children, youth, and their families to needed services and supports.
- Developing additional programs and resources to meet intensive resource needs. DCYF completed an initial assessment of the intensive resources placement continuum. Development will be further informed by our work with an external consultant. Emphasis is on developing programs to meet unmet needs, including establishing programs in underserved areas of the state so children and youth can remain closer to home, and identifying areas where additional funding may be needed.
- Establishing two positions to focus on recruitment, development, and support of intensive resource providers with a priority on developing programs and resources in areas that do not have programs available. These positions have been filled and are refining their strategies and approaches. The staff work with new providers and existing providers to develop and onboard group care programs for youth with complex needs.
- Working with the Center for States and receiving technical assistance to develop targeted foster home recruitment strategies with an emphasis on adolescents and children and youth with behavioral health needs.
- Contracting with an external entity to complete a landscape analysis and develop recommendations for the intensive resource placement continuum.
- Establishing consistent criteria and oversight for child welfare to apply when considering placement of youth in a night-to-night foster care placement or placement exception.

Activities/Timeline

Strategy	Status	Next Steps	Target Completion Date
Implement additional SPM/FTDMs for children/youth in night-to-	Current and ongoing for youth in night-to-night or exceptions to placement. Child Welfare has	Continue staffing processes.	Current and ongoing

night foster care and exceptions to placement	hired dedicated staff to complete these staffings.		
Implement Case Staffing Procedures that include internal and external stakeholders and has an escalation pathway	Implemented and ongoing	Review for revisions and update communications.	10/31/23
Establish cross-system liaisons to support caseworkers in accessing and navigating the developmental disability and mental health systems.	The hiring process was delayed. Anticipate positions will be filled by September 2023.	Complete hiring process. Develop and implement a communication plan for Child Welfare regarding roles, responsibilities, and available supports.	09/30/23
Develop additional resources to meet intensive resource needs	DCYF completed an initial analysis of the placement continuum to identify areas of program development.	Continue working with existing providers to revise/expand service provision to meet the specific needs of children/youth. Implement recruitment plan developed below. Pursue funding as needed.	Current/ongoing 10/31/23 Current and ongoing
Provider Recruitment Positions	Provider recruitment and support positions have been established	Develop strategies for recruiting new providers and supporting existing providers to expand their service continuum. Develop consistent processes for engaging, onboarding, and	10/31/23 09/30/23

		supporting providers.	
Targeted Recruitment Strategy	Targeted recruitment specialists have been established in each region and a plan is being developed with support from the Center for States.	Establish specific recruitment strategies and outcomes for adolescents and youth with high levels of need.	10/31/23
Establish a contract with an external entity to complete a landscape analysis and develop recommendations for the intensive resource's placement continuum	We have identified a prospective contractor and developed a draft statement of work	Finalize the contract and begin work	09/01/23
Establish statewide child welfare criteria and oversight process for night-to-night foster care placements and placement exceptions	Current processes focus on staffing and review once a child/youth has been placed. Approaches to review and decision making vary across the regions.	Child Welfare Regional Leadership, Child Welfare Headquarters and Partnership, Prevention and Services Representatives will establish consistent criteria and clear oversight processes. Establish documentation and reporting processes.	09/30/23

Methodology

DCYF monitors use of night-to-night foster care placements and placement exceptions using administrative data from the DCYF Administrative Incident Reporting System (AIRS). Youth are documented individually for each night. The data from AIRS is connected to our FamLink data and populates a report in infoFamLink. DCYF will establish a consistent process to document decision-making and approval for use of night-to-night foster care and exceptions to placement.

DCYF has established interim benchmarks for eliminating the use of night-to-night foster care and exceptions to placement at the regional level. We have used the number of children and youth 0 – 17 years who were in DCYF placement and care authority under a dependency action and placed in night-to-night foster care or in a placement exception in June 2023 as a baseline. In June, there were 58 children and youth who met these criteria.

Statewide distribution these placements was:

Region	# of Children
Region 1	2
Region 3	2
Region 4	16
Region 5	3
Region 6	35
Grand Total	58

Interim Benchmarks

By implementing the strategies described above DCYF expects to reduce number of children and youth who experienced a night-to-night foster care or placement exception to the interim target provided below. Target reductions are broken down by region.

Night-to-Night and Placement Exception Elimination Benchmarks							
Month	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Total
June 2023	2	0	2	16	3	35	58
September 2023	2	0	2	15	3	32	54
December 2023	1	0	1	12	2	28	44
March 2024	0	0	0	8	1	21	30
June 2024	0	0	0	5	0	12	17
September 2024	0	0	0	3	0	6	9
December 2024	0	0	0	0	0	0	0

Quality Assurance

Each region has identified a regional lead who oversees the use of night-to-night and placement exceptions. The lead tracks utilization, required documentation, and completion of required staffing's.

Monthly QA meetings with the regional leads began in July 2023. During these meetings general and case specific questions will be discussed, data and trends will be reviewed and discussed to identify needed resources and areas for practice focus.

A report by region regarding statewide utilization of night-to-night and placement exceptions for the prior week will be shared with regional leadership weekly.

Semi-annual qualitative case reviews will be conducted for a sample of youth who were placed in night-to-night foster care placements or placement exceptions to identify resource needs and areas for practice improvement.

Reporting

DCYF will report summary counts of youth and number of nights by region and type of placement (night-to-night, hotel) to the monitor and plaintiffs monthly. Data will be available the 15th of the month for the prior month.

Quarterly, DCYF will report monthly summary counts with additional detail to include LGBTQIA+, grouping of placements by number of nights, education status and type/reason for placement declines.

The semi-annual report will include a roll-up of the quarterly data for the prior two quarters, updates on strategy implementation and the results of the semi-annual qualitative review:

Data Timeframe	Report
December 31, 2023 or next business day	February 2024 Semi-annual report
June 30, 2024 or next business day	August 2024 Semi-annual report
December 31, 2024 or next business day	February 2025 Semi-annual report

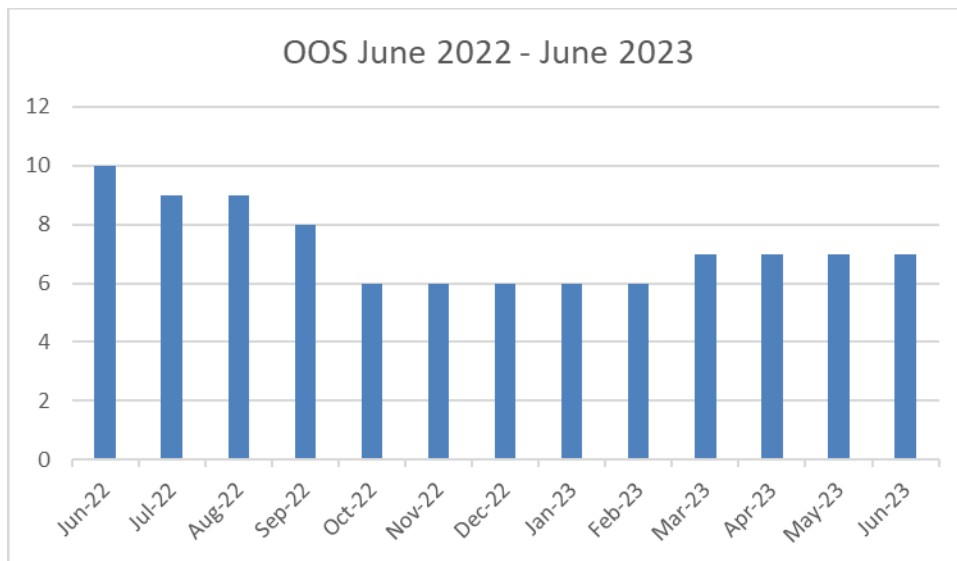
45(3)

Whether the number of placements in out-of-state facilities is kept to 10 or fewer, excluding placements in facilities contiguous to Washington State communities, placements in facilities that the dependency court agrees support the individualized treatment needs of the child, and placements in facilities located in close proximity to an identified potential permanent home and there is consent by the child, if over the age of thirteen.

Overview

This exit criteria requires DCYF to keep the number of out of state placements at 10 or fewer with some exclusions. DCYF has actively worked to reduce out-of-state facility placements and has made significant reductions since a peak of approximately 78 youth placed in out-of-state facilities in the fall of 2018. DCYF has met and sustained performance related to this exit criteria. Since June 2022 when the Settlement Agreement was established, there have been 10

or fewer youth placed out of state each month. As of June 30, 2023, there were 7 youth placed out of state.



Strategies and Quality Assurance

In the summer of 2022, the management, oversight, and coordination of intensive resources placements, including out-of-state facility-based placements, was centralized at DCYF headquarters. This allows us to support statewide consistency of practice in decision-making regarding the intensive resources placement best able to meet a youth’s unique needs. Prior to a youth being referred to an out-of-state placement, it must be determined that they qualify for care in a residential setting and all in-state resources must be explored and exhausted. In partnership with the child, family, their supports and the Child Welfare field office, the intensive resources program consultant holds a staffing to discuss the option of out-of-state placement and why it is being explored. Once these steps have been completed and a court has approved the placement, the director of field operations reviews the information to ensure that the out-of-state placement is necessary and appropriate.

Monitoring

The DCYF headquarters Placement Continuum Unit maintains a centralized process for tracking youth placed in out-of-state facilities. When youth are placed out-of-state, DCYF staff conduct monthly in-person visits to see them and the facility. This is in addition to health and safety visits that are conducted by a provider in that state.

Methodology and Reporting

The number of youth placed in out-of-state facilities will be pulled the last day of each month. Data will be reported to the court monitor and plaintiffs on a monthly basis and included in the semi-annual report.

45(4)

Whether DCYF as reduced the number of children under the age of eighteen who satisfy Class Member criteria by the target percentage established in the Implementation Plan.

Methodology and metrics for this criteria, including interim benchmarks, will be developed with the assistance of the Court Monitor and will be included in the Data Addendum to be issued no later than February 2, 2024.