DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
Administration on Children, Youth and Families
330 C Street, S.W.
Washington, D.C. 20201

MEMORANDUM

TO: Adoption Program Network Members

FROM: Ellen W. Carey, Children's Bureau
Karen Dorsey, Children's Bureau

SUBJECT: The National Adoption Strategic Plan

DATE: June 26, 1996

It gives us great pleasure to provide you, ***finally***, with a proposed working draft of the "National Adoption Strategic Plan" (the Plan*). As you may know, our efforts to proceed in disseminating and implementing the Plan have suffered several setbacks. We did manage to unveil the Plan to State adoption specialists at the Permanency Partnership Forum sponsored by the Children's Bureau in March. It was very well received.

We are happy to announce that we are back on course. In December we were all very excited about the Plan and improving adoption outcomes for America's waiting children. It is our hope to regain this excitement and move forward with dissemination and implementation of the Plan with your help.

In this memorandum we will: (1) review accomplishments and commitments discussed in December; (2) provide a status report on commitments; and (3) inform you of upcoming events.

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1. A Review of Accomplishments and Commitments

Accomplishments

In December 1995 the Adoption Program Network was formed to develop a rough draft of the Plan and to serve as the steering committee which would oversee the Plan's dissemination and implementation. The Plan has eight adoption goals and twenty performance measures. It is intended to be a living, changing document that agencies can use to improve the outcomes for waiting children.

The Network's goal is to have the Plan adopted by and operating in all 50 States and the District of Columbia; private, non-profit adoption agencies; and other organizations involved with the adoption of children with special needs in the next five years.

Commitments

I. Administration for Children and Families (ACF) staff (both in Washington, DC and the regions) committed to:

A. Making final technical edits and changes to the rough draft of the Plan (creating a proposed working draft of the Plan)
B. Sharing proposed working draft of the Plan with Network partners
C. Scheduling a conference call to "finalize" the working draft of the Plan

II. Once the working draft was "finalized" the Program Network members would:

A. Share the working draft of the Plan with other Adoption Network partners
B. Begin developing strategies for implementation (at State, local and national levels)
C. Form a performance measures workgroup

2. Status Report on Commitments

I-A & B. Making final technical edits and changes to the rough draft of the Plan and sharing with Network Program Partners

Attached please find the proposed working draft of the Plan (attachment No. 1). The majority of the edits and changes served to clarify and condense the original document. Please see enclosure No. 2, "Explanation of Edits," which details changes made.

Please read the Plan carefully. We are asking that you focus on the goals and performance measures. If there are any inconsistencies with what we discussed as a group, please contact us with these items before July 12th.

I-C. Scheduling conference call to reach consensus on goals and performance measures -- finalizing the working draft

We have scheduled the conference call for July 19th. Due to the number of Network members and geographical locations, we will have a morning and afternoon call. Please see the conference call schedule (attachment No. 3) for the time we would like for you to participate.

Children's Bureau staff will incorporate changes from the call and disseminate the "finalized" working draft.

II-A. Sharing the working draft of the Plan with other adoption partners

The intention was to have an orderly, sequential process of rolling out the Plan to the world. We were to begin with "finalizing" the Plan (reaching consensus on the goals and measures) and then sharing the Plan with others. However, the lengthy furlough, budget uncertainty, and various other responsibilities intervened. Concerned with losing the interest and curiosity ignited before, during, and after the December meeting, we took the opportunity of the Partnership Permanency Forum in March to share the Plan with the State adoption specialists. Given the interest of some States in the Plan, we urged our ACF regional office staff to begin partnering with those States immediately.

While there remains a tremendous amount of work that needs to occur before implementation, some Regions are moving successfully. For example, Veronica Melendez (ACF Region I - Boston) has already begun to discuss the Plan with States in her region and they are moving toward implementation.

Now we all can starting sharing and implementing the Plan. Please feel free to share this proposed working draft with your organization and other adoption network partners in newsletters, conferences, coalitions, etc. (inform Plan recipients that a finalized working draft is in process and will be shared at a later date).

II-B. Developing strategies for implementation (at State, local and national levels)

We will discuss strategies for implementation during the July conference call and at the ACF Partnerships for Results Forum (see section on "Upcoming Events" for more information about.)

II-C. Forming a performance measures workgroup

Not all of the Plan's goals have accompanying performance measures. We agreed in December not to delay the Plan for this reason. Instead we would form a workgroup to identify possible data sources and develop needed performance measures. We will continue this discussion during the July conference call.

3. Upcoming Events

Getting it Out!

To focus attention on the Plan:

- Ellen and other Network Program members will be discussing the Plan and State implementation in a workshop at NACAC in August and at the One Church, One Child conference in September.

- Liz Oppenheim will include an article on the Plan in her next newsletter to members of the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance.

- Planning for a dissemination and implementation campaign, which will include Network members and federal regional partners, will begin at the ACF Partnerships for Results Forum in Washington in July (see below for details).

Administration on Children and Families (ACF) Activity

In July ACF will be sponsoring a Partnerships for Results Forum. The purpose of the Forum is to provide ACF staff with a better understanding of strategic planning (GPRA), performance measures and performance partnerships.

The Children's Bureau will be adding a day and a half to this meeting to work with our regional staff on their role in implementing the Plan, i.e. developing partnership agreements with States and supporting State's efforts to actualize the Plan. We hope to include some other network members in this meeting. As always travel costs are a major barrier. If you will be in town during the meeting (July 17-18th) and can attend please let us know.

ATTACHMENTS

Adoption Program Network Partnership Conference Call.

Mark your calendar for July 19th. Please check the conference call schedule (attachment No. 3) for designated time of participation and phone number. If this is not the correct phone number for you please contact us. The conference call operator will begin calling participants 10-15 minutes prior to the scheduled start time.

We are also enclosing a draft agenda (attachment No. 4).

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If you have any questions about the information in this memorandum please contact us - Ellen W. Carey (202) 205-8652 or Karen Dorsey (202) 205-8419.

Attachments: 1 - National Adoption Strategic Plan -- a proposed working draft
2 - Explanation of Edits
3 - Conference Call Schedules
4 - Conference Call Agenda

*If you would like a copy of the Plan on disk please contact Charlotte Hicks of the Children's Bureau at 202-205-9814.

A National Adoption Strategic Plan

by

The Adoption Program Network

December 1995
DRAFT

NATIONAL ADOPTION STRATEGIC PLAN

PREAMBLE

This Adoption Strategic Plan highlights key results that successful programs must achieve to provide homes for the thousands of waiting children in the child welfare system. Many of the **waiting children*** have special needs. These children are older; children of color; physical, developmental or emotionally challenged, and/or mentally disabled; or belong to a sibling group. However, these results can only be accomplished within broader goals that address permanency for all **children**.

Adoption services are an integral part of the public child welfare system. Successful adoptions depend in part on effective service delivery from the time a child and family have initial contact with the system. For appropriate and timely targeting of adoptive placements, the system must provide:

- preventive and early intervention services to avoid placement;
- time limited, goal oriented, permanency focused services to resolve problems of families whose children are in placement;
- timely casework, judicial and administrative decisions to assure permanency;
- a range of permanency options including placement with relatives, adoption and guardianship;
- concurrent planning (reunification, placement with extended family, and adoption planning occurs at the same time); and
- prospective adoptive families who reflect the population of children served or have the capacity to parent a child of a different race/ethnicity.

In the absence of a well functioning child welfare system, children drift, opportunities for reunification with families are lost, and children are damaged in ways that make adoption difficult to achieve.

Although founded on the belief that every child has the right to a **permanent family**, nationally within the child welfare system adoption services fail to meet the needs of thousands of children who wait! This failure is characterized by: a lack of shared values regarding who is adoptable; a lack of early and appropriate identification, preparation, and assessment of children's needs; lengthy, cumbersome legal and clinical processes; inadequate public awareness and efforts to recruit, prepare, and retain families who reflect the ethnic and racial diversity of children in care or families who have the capacity to parent a child of a different race/ethnicity; jurisdictional barriers to placement and matching; limited ongoing supports, funding, and other resources; and inadequate staff training. As a result, efforts are not coordinated, effective, or sustained for many children. Adoption services must be improved to achieve better outcomes.

To accommodate both broad system goals for permanency and specific goals for adoption services, this Plan reflects a two tiered planning approach. First, broad goals are articulated that impact on children in need of permanent families. Second, adoption specific goals are articulate. For each adoption goal, indicators are presented that should be used to measure success. This those working throughout the child welfare system an opportunity to identify how they can help achieve our mission to assure permanent families for all children.

This is not a typical strategic plan. It addresses what the **Adoption Program Network** envision as fundamental achievements needed to accomplish permanency for children. We describe what should be accomplished, not how to do it. By concentrating on results, States and communities have a clear idea of the outcomes sought for children and maximum flexibility to choose the strategies best suited to them.

*Bold items defined in Appendix 1.

PROGRAM

This Strategic Plan is the result of a collaborative process and applies to the entire Adoption network partnership. This partnership includes anyone who contribute to identifying, assessing, and preparing children for adoption as well as finding and sustaining adoptive families. It includes State, federal, private and other community organizations. It recognizes that some children face special barriers to gaining adoptive families, especially those who are older, have physical, developmental or emotional challenges, and/or mental disabilities, children of color, and sibling groups. We will achieve the broad strategic goals in this Plan through the commitment and involvement of all network partners who formulated and committed themselves to this plan.

MISSION

The mission of the Adoption network partners is to secure an adoptive family for every child for whom **adoption is appropriate**. Children can be assured a permanent adoptive family through early identification, assessment and child preparation; aggressive recruitment and preparation of prospective adoptive parents; the elimination of legal and other barriers to adoption; and the adequate provision of supportive services.

VISION

No child will wait for a permanent family. Adoption of older children, children of color, physically, developmentally or emotionally challenged, and/or mentally disabled, and sibling groups will become one normative way of forming families. Through partnerships among communities, State, local and federal agencies, we will identify and support families willing to adopt these children. This Plan is founded on *"Basic Values"* (see Appendix 2) shared by the **Adoption Program Network** (see Appendix 3).

STRATEGIC GOALS

Our system goals describe the context in which adoption goals must be achieved. The adoption goals represent specific achievements the Adoption Program can contribute toward overall system reform over the next 5 years.

Each adoption goal is accompanied by measures of success. These measures focus on the outcomes that directly measure goal achievement or which will inevitably lead to successful accomplishment of goals. The Plan assumes the use of existing data systems such as the Adoption and Foster Care Analysis and Reporting System (AFCARS) and Statewide Automated Child Welfare Information Systems (SACWIS) to produce data for success measures. There are some performance measures for which no national data system exists or for which existing data does not accurately measure the goal. For these goals, State and localities will have to develop innovative measurements; use data sources/elements currently not required by AFCARS; or develop proxies for measures.

We include national strategies (see Appendix 4) for accomplishing adoption goals. These strategies represent our best thinking about how to achieve these goals. Many additional strategies will be required for the Program to be successful. They will require local, community-based efforts that will be formulated, adopted and executed at the local level.

GOAL I

System Goal: Reduce the number of all children needing permanency by finding permanent families and decreasing the number of children entering the child welfare system.

Adoption Goal: Increase the number of adoptions including children with physical, developmental, mental and emotional disabilities, children of color, sibling groups, older children, and other waiting populations (unique demographic characteristics of children that may vary geographically and over time -- e.g. HIV+ children, children exposed to drugs, children orphaned by AIDS).

Two out of three waiting chilren have special needs. It takes substantially longer to find homes for minority children. Older children and sibling groups, irrespective or race, also have longer waits.

Measures of Success:

1. Total number of adoptions and the total number of adoptions of children identified with special needs - Adoption Data Element (ADE)[1]

2. Number and percent of inter/intra State adoptions - ADE

3. Median time to achieve inter/intra State adoptions - ADE

4. Percent of children adopted per number of children waiting ADE and Foster Care Data Element (FCDE)

GOAL II

System Goal: Minimize loss by decreasing the number of moves prior to achieving permanency and maintaining the continuity of children's relationships with family, significant others, community and culture.

Adoption Goal: Minimize loss and maintain the continuity of children's relationships with family, significant others, community and culture, before and after adoption.

Children spend an average of 3.5 years waiting for adoption after termination of parental rights. There is a need to minimize trauma and improve healthy development through continued ties with their community, culture, extended family and other significant relationships.

Measure of Success

1. Frequency distribution of placement moves experienced by those children discharged from foster care due to adoption - FCDE

2. Frequency distribution of the length waiting children are in the system (not discharged from foster care) and frequency distribution by special population - FCDE[1]

3. Percent of total adoptions for placements with: stepparent, other relative (related by birth or marriage) or foster parent[2]

[1]AFCARS data is limited in capturing information on children with special needs.
[2]AFCARS only provides information on the relationship of adoptive parent to the child which can serve as a temporary proxy measure for continuity of family and significant relationships.

GOAL III

System Goal: Services to children and families are provided by culturally competent staff in community settings.

Adoption Goal: Decision-making in adoption includes regard for the child's background and need for cultural continuity.

Children have a right to maintain cultural, racial, and ethnic continuity. Agencies do not always have sufficient prospective adoptive families who reflect the ethnic and racial diversity of children in their community or have the capacity to parent a child of a different race/ethnicity. Agencies should reach out to find those adoptive families.

Measures of Success

1. Number and percent of adoptive families prepared by community-based adoption programs - No national data source available[3]

2. Number and percent of adoptive placements with families prepared by community based programs - No national data source available

GOAL IV

System Goal: Every child will be in a permanent family within one year of initial entry into out-of-home care.

Adoption Goal: When adoption is appropriate, a child will be placed in an adoptive family within one year of entry into out-of-home care.

Children are in care too long without the permanency of adoption. To accomplish this goal many systemic changes must be made in all systems that impact upon the child. Early permanency planning and timely decision-making by the judiciary would assist those children needing adoptive homes.

Measures of Success

1. Frequency distribution of the length of time children were in out-of-home care before adoption - FCDE

2. Frequency distribution of the length of time children (those not adopted) have been in out-of-home care without adoptive placement - FCDE

3. Total number of disruptions for the year compared to the total number of adoptive placements for the year - No national data source exists

[3]Area for Adoption Program Network workgroup to develop.

GOAL V

*System Goal: Increase the number and **accessibility** of approved families who reflect the diversity and meet the needs of waiting children.*

Adoption Goal: Increase the number and accessibility of approved families who reflect the diversity and meet the needs of waiting children.

An insufficient number of prospective adoptive families are recruited to meet the needs of waiting children. Often interested families who reflect their diversity and can meet their needs are denied access to or drop out of the system. The system has also been unable to connect many waiting children with approved families who can meet their needs.

Measures of Success

1. Percent of approved families compared to those approved families who reflect the ethnic and racial diversity and/or can meet the needs of waiting children - No national data elements exists

2. Median number of days in care for those children discharged due to adoption (both inter and intra state) - FCDE

3. Total number of potential adoptive families compared to potential adoptive parents who begin the adoption process and remain until adoptive placement occurs - No national data source available

GOAL VI

System Goal: Provide holistic, culturally, and linguistically relevant services and resources that will achieve and sustain permanency for all children.

Adoption Goal: Provide holistic, culturally, and linguistically relevant services and resources that will achieve and sustain adoptions

Achieving and sustaining adoptions for children is impacted by the accessibility and availability of appropriate **adoption sensitive services and resources** for all affected persons.

Measures of Success

1. Total number of services/resources that are accessible, appropriate, and culturally and linguistically responsive - No national data source available

2. Percentage of adoption disruption, dissolution, and displacement rates - No national data source available

3. Percent of children discharged not due to adoption -FCDE

GOAL VII

*System Goal: Children, families, and network partners have **access to all information pertinent** to meeting the needs of the child.*

Adoptive Goal: Children, families, and network partners have access to all information pertinent to meeting the needs of the adopted child.

Successful adoptions depend, in part, on effective service delivery beginning when the child and family have initial contact with the system. Effective service delivery is based on information. Children, families, substitute caretakers and service providers must have access to needed information (e.g., social, health, educational, etc.) throughout life.

Measure of Success

1. Perception of accessibility of information among partners, families, adult adoptees and waiting children - No national data source available

GOAL VIII

*System Goal: Increase the **public** awareness and **support** for the adoption of waiting children.*

Adoptive Goal: Increase the public awareness and support for the adoption of waiting children.

The American people must be **educated** to overcome the myths and inaccurate information about the adoption of waiting children. They must first know who the children are. Also, they must be encouraged to support and celebrate these adoptions.

Measure of Success

1. Level of public awareness and support of adoption of waiting children - No national data source available

APPENDIXES

APPENDIX 1 - GLOSSARY

access = all information on children is routinely provided to the adoptive families, records are open, information is integrated

Accessibility = removing jurisdictional/geographical barriers

[an] adoption is appropriate = birth parents are unwilling and/or unable to care for the child; an adoption by relatives, foster parents or other unrelated individuals will provide permanency

Adoption Network Partners = parties who contribute to identifying, assessing, and preparing children for adoption and who find and sustain adoptive families

Adoption Program Network = cross cutting group of those involved in adoption services and attended the Adoption Strategic Plan Meeting in Washington, DC in December 1995 (see Appendix 3 for list)

Adoption Sensitive Services/Resources = Respite, culture/identity support, medical subsidy, post adoptive fiscal/financial resources, empowerment, mental health, advocacy, information/anticipatory guidance, training, education, medical/treatment, case consultation, concrete services (e.g., ramps, room additions, beds, etc.), crisis intervention, transition to adulthood, case management, and all other necessary services to support adoptions.

All pertinent information = includes health, education, mental health, mental retardation, developmental disabilities, substance abuse, juvenile justice, social history, etc.

approved families= families who have completed home study and requirements (as defined by the jurisdiction)

child/children = 0 to 18 years old and in the child welfare system

continuity = maintaining connections for children to earlier life relationships and experiences (i.e. culture, ethnicity, etc.)

disruption = removal from the adoptive home prior to finalization of adoption.

Educating (and reeducating) - overcoming negative portrayals; describing the kinds of children in care; the number and location of those children; dispelling myths; explaining the scope of adoption and the process
Loss = deprivation which may affect self-esteem, development and the ability to form healthy relationships

Permanent family = parenting rights and responsibilities belong to the family and the family has made a life-time commitment to the child

Public = communities, public officials, policy makers, corporate sector and the media

Support = financial resources (dollars), advocating, encouraging, celebrating, affirming, normalizing, and providing emotional support

waiting children = those children who is consider legally free for adoption but has not yet been placed with a permanent adoptive family; includes older children, children of color, children with physical, developmental or emotionally challenges, and/or mentally disabled; and children belonging to a sibling group — also those unique demographic characteristics of children that may vary geographically and change over time (e.g., children with HIV, infants and young children exposed to drugs, children orphaned by AIDS)

APPENDIX 2 - BASIC VALUES

Basic values shared by the members of the network:

1. Every child has a right to a permanent family.

2. For most children, the family of choice is the birth family.

3. Risk to children is minimized when families have access to services, including adoption, which will help them resolve the problems they face.

4. Permanency planning for children is enhanced when birth families have rights to counseling and participation in the process is assured.

5. Planning for a child's permanence must begin when the child enters the system.

6. In an adoption program the child's needs are primary and the goal is to find an appropriate family for each waiting child.

7. Casework, legal and administrative decisions about children must be timely, reflecting a child's sense of time.

8. Decision making for children must be guided by the child's best interest and an understanding of his/her needs.

9. Adoptive parents have a right to full disclosure of information.

10. Children have a right to understand their status and to work through the losses inherent in the placement process.

11. Permanency efforts must include culturally competent adoption services.

12. Successful adoption outcomes require collaboration among child serving agencies and courts.

13. As adults, adoptees have the right to full disclosure of information about their lives.

14. Adoption is a lifelong and intergenerational process.

APPENDIX 3 - ADOPTION PROGRAM NETWORK

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APPENDIX 4: SUGGESTED* NATIONAL ADOPTION STRATEGIES

*These suggested national strategies were developed during brainstorming sessions as activities which could be conducted on a national level (they should not be interpreted as planned federal activity) to support the achievement of state and community adoption plan goals. While these are only suggestions, states and local communities are encouraged to adapt these strategies for their own use.

GOAL I: Increase the number of adoptions including children with physical, developmental, mental and emotional disabilities, children of color, sibling groups, older children, and other waiting populations.

- Tracking System
- Support implementation of AFCARS and SACWIS and expand to private agencies and tribes.
- Identify alternative, creative funding strategies that provide incentives to obtain permanent families for children (e.g., purchase of service, managed care models, outcome-based funding, IRS check-off).
- Remove jurisdictional barriers by linking national, regional and State exchanges so that all waiting children are visible and all families seeking to adopt are accessible.
- Support changes recommended by court improvement projects.
- Institutionalize collaboration between courts and public and private agencies.
- Support, encourage State membership in, and streamline the Interstate Compact on the Placement of Children and the Interstate Compact for Adoption and Medical Assistance.

Goal II: Minimize loss and maintain the continuity of children's relationships with family, significant others, community and culture, before and after adoption.

- Encourage openness in adoption (information, records and visits with past relationships).
- Encourage community ownership in what happens to children.
- Through community partnerships, develop agreements for and understanding of criteria for adoptive families.
- Expand the definition of family.

Goal III: Decision-making in adoption includes regard for the child's background and need for cultural continuity.

- Involve citizens in designing services for community-based adoption programs which assure that children's need for cultural continuity is met.

Goal IV: When adoption is appropriate, a child will be placed in an adoptive family within one year of entry into out-of-home care.

- For Concurrent Planning: Increase concurrent planning for children as they enter care (simultaneous consideration of reunification, placement with extended family and adoption) so permanent placement may be achieved within one year. Enhance this process and improve the quality of services for children through joint preparation and development of foster and adoptive parents.

- For the Courts: In many cases, children are without families because termination of parental rights (TPR) and adoption decisions are delayed or deferred by the courts.

- Within one year, courts must:
  - Determine whether child welfare agencies have made reasonable efforts to prevent placement of each foster child;
  - Determine whether agencies are making reasonable efforts to reunify the families of children in foster care;
  - Review case plans;
  - Docket and hear TPR and adoption actions when appropriate; and
  - Finalize TPR decisions that are appealed.

- Increase the training of judges, attorneys, and foster care review boards, CASAs and guardians ad litem to enhance their ability to make quality and timely decisions on permanent plans for children.

- Focused Technical Assistance to Policy Makers

- Establish or enhance technical assistance for state legislators, other state policy makers and advocates for adoption of special needs children on state legislation and policies that will achieve and sustain appropriate adoptions.

Goal V: Increase the number and accessibility of approved families who reflect the diversity and meet the needs of waiting children.

- Encourage national, state, local and private adoption service providers to examine systems and address barriers that impact recruitment, preparation and retention such as inflexible policies and practices, insufficient staff and other resources and agency values and biases.

- Develop models for effective response, preparation and retention of people interested in adopting waiting children.

- Enhance and expand the use of existing resources, e.g., adoption exchanges, clearinghouses and resource centers, community and religious organizations.

Goal V: **Increase the number and accessibility of approved families who reflect the diversity and meet the needs of waiting children - continued**

- Encourage members of the adoption community to expand the use of technological resources, e.g., internet, etc.
- Form public/private partnerships at State, local and national levels to support adoption (include businesses, community, government and private agencies, religious organizations etc.)

Goal VI: **Provide holistic, culturally, and linguistically relevant services and resources that will achieve and sustain adoptions**

- Standardized interstate/intrastate procedures and instruments
- Contractual adoption home studies
- National collection of foster care and adoption data
- National, local and regional matching processes for children and families
- Use of electronic communication to transfer information and expedite adoptive placement
- All children legally free for adoption be declared a family of one and therefore eligible for Title IV-E Adoption Assistance
- Maintain the portability of adoption, medical and nonrecurring cost assistance
- Screen adoptive families in, not out and provide support throughout the process
- Expedite judicial procedures related to adoption
- Include birth parents in the adoption planning process
- Provide birth parents with permanency options which can assist their efforts to make permanency decisions in their child's best interests
- Empower and prepare adoptive parents throughout the adoption process and involve them in advocating for services that sustain adoption
- Increase in the accessibility and appropriateness of services that are culturally and linguistically responsive (determined by conducting a survey).
- Provide training and technical assistance to all persons who impact adoption.
- Provide need based post legalization services

Goal VI: Provide holistic, culturally, and linguistically relevant services and resources that will achieve and sustain adoptions - continued

- Expand service delivery network
- Ensure availability of culturally and linguistically responsive staff and services
- Create a national standardized adoptive placement agreement
- Increase in data on adoption disruption, dissolution, and displacement rates
- Maintain AFCARS
- Require/maintain national reporting on disruption, dissolution, and displacement rates
- Ensure information is retained on State and national data bases
- Provide Family Preservation and Support services to adoptive families
- Decrease in the number of children/youths with appropriate plan for adoption who are discharged without being adopted
- National standard that no child is unadoptable
- Children are granted a participatory voice in the process
- All child caregivers work toward permanency for children
- Appropriate permanency assessments are conducted at the initial contact
- Agencies place children in appropriate settings the first time

Goal VII: Children, families, and network partners have access to all information pertinent to meeting the needs of the adopted child.

- Models for Information Flow - Create new models for increasing the information flow to families and service partners. Use demonstration projects to identify and remove barriers. Develop model legislation and regulations on gathering and providing full information.
- Disclosure - States will fully implement disclosure provisions of Federal law. Foster and adoptive families will receive complete information. States will implement "active - registry" systems to allow adult adoptees, birth parents and adoptive parents to easily exchange medical, social, educational, etc. histories.
- SACWIS Implementation - States will fully implement SACWIS to track the progress and development of all children who enter the child welfare system. Data from the system will be used to improve practice and formulate policy to enhance the quality of life of the children in care.

Goal VIII: Increase the public awareness and support for the adoption of waiting children.

- Partner with a national polling firm to design, conduct and analyze the level of and increase in the public's awareness and support of the adoption of waiting children.
- Invite governors to join the adoption community to promote and support the adoption of waiting children.
- Develop an ongoing national public awareness campaign with a common theme (multi-media, national spokespersons that mirror the waiting children, lead by governors at the State level and the President at the national level).
- Work with network partners and others yearly to celebrate national adoption month.

ATTACHMENT NO. 2

EXPLANATION OF EDITS

The majority of the edits and changes served to clarify and condense the original document. A few other changes were made for the following reasons:

* title page - we use "Adoption Program Network" to refer to meeting participants; "Adoption Network Partnership" to refer to all others involved in adoptions

* page 1, first paragraph - we added narrative on waiting children, we thought it was important to highlight that this plan was designed for waiting children at the beginning of the Plan

* page 1, left column of listed items, the last item - we included "or have the capacity to parent a child of a different race/ethnicity" to be consistent with MEPA (this language was added throughout the Plan whenever reference was made to families who reflect the population of children served)

* page 2, Vision section - we turned "Basic Values" into an appendix and moved it to the back of the Plan

* "GOALS" section - we changed a few success measures to reflect AFCARS data elements

* page 3, paragraph before the measure of success - we changed this to a "fact" statement explaining why the goal is necessary, this is consistent with the other statements that precede the measure of success

* "Appendix 1" - we added definitions for clarity

ATTACHMENT NO. 3

ADOPTION PROGRAM NETWORK
CONFERENCE CALL SCHEDULE
FOR
JULY 19, 1996 AT 10:00 AM
Conference I.D. - R58715*

Carolyn Baker - 212-264-3629

Bessie Barnett - 404-331-7066, ext. 289

Ann Burds - 304-558-9137

Denise E. Carver - 202-619-3376

Susan Davis - 412-244-3063

Diane Dodson - 301-593-7018

Brenda Gadson - 617-542-2366

Wilfred Hamm

Carolyn Johnson - 215-735-9988

Drenda Lakin - 810-443-7080

Forrest Lewis - 312-353-6503

Robert Lewis - 800-592-3678

Ernesto Loperena - 212-475-0222

Veronica Melendez - 617-565-0383

Toni Oliver - 404-907-0615

Laura Pleasants - 312-346-1516

Delores Smith - 215-596-0383

Carole Thompson

Carol Williams

Pat O'Neal Williams - 904-488-8251

*problems getting connected - call 700-288-2000 and give I.D. number

ATTACHMENT NO. 3

ADOPTION PROGRAM NETWORK PARTNER
CONFERENCE CALL SCHEDULE
FOR
JULY 19, 1996 AT 3:00 PM
Conference call I.D. - R05445*

Ellen W. Carey

Sydney Duncan - 313-869-2316

Gail Evans - 202-690-6590

Wilfred Hamm

Joe Kroll - 612-644-3036

Lillian B. Lansberry - 410-433-7551

Oneida Little - 303-844-3100, ext. 334

Robert Mead - 816-426-5211, ext. 195

O. Jane Morgan - 405-521-2475

Nancy Newman - 610-631-2829

Liz Oppenheim - 202-682-0100

Robert Praksti - 702-784-6012

Charlcie Parrish - 515-281-5358

Barbara Pearson - 206-292-0082

Bill Quinlan - 301-443-1333

Susan Sanders - 206-615-2558, ext. 3077

Linda Schell - 701-328-4805

Geneva Ware-Rice

Carol Williams

Carol Whitemountain - 503-222-4044

Charles Yates - 214-767-4958

*problems getting connected - call 700-288-2000 and give I.D. number

ATTACHMENT NO. 4

July 19, 1996
National Adoption Strategic Plan Meeting
AGENDA

I. Reaching Consensus on Goals and Performance Measures

II. Disseminating the Plan to other Adoption Action Network Partners

III. Framing Implementation Strategies

A. Outcomes from ACF July Partnerships for Results Forum
   1. Role of Children's Bureau
   2. Role of ACF Regional Staff
   3. Role of non-Federal Network members

B. Brainstorming

IV. Creating Performance Measures Workgroup

To: Carol Rasco cc: Elizabeth Drye
Jeremy Ben-Ami

From: Lyn Hogan

Date: July 5, 1996

Re: July 8 Child Welfare Meeting With HHS

Attached as promised is a copy of my initial memo on child welfare programs. I hope you find it helpful. Please let me know if it is too detailed, not detailed enough,and/or additional information you'd like included.

Also attached is brief summary of the pending child welfare waivers.

Memorandum

Federal Child Welfare Programs and Current Program Authorizations and Appropriations

To: Carol Rasco cc: Elizabeth Drye
Jeremy Ben-Ami

From: Lyn Hogan

Date: July 5, 1996

Summary

This memo includes background information on child welfare services, a breakdown of child welfare programs under the Social Security Act, a breakdown of non-Social Security child welfare programs, an update on pending legislation, and the legislative history of child welfare programs. This memo **does not** include child welfare programs run by agencies outside of HHS or DOJ, nor does it include a review of child welfare system problems, reforms, or recommendations. However, I will cover these issues in subsequent memos.

Background

Child welfare services focus on improving the conditions of children and their families and on improving or providing substitutes for functions the parents have difficulty performing. Many private, nonprofit and government entities work to provide a range of child welfare services to families and children in need. However, the primary government responsibility for child welfare services rests with the states. Each state has its own legal and administrative structures and programs, and there are many differences among the states.

The Federal government has also been involved in improving the welfare of children in areas of national concern since the 1900s. Numerous Federal programs provide support for child welfare services, the largest of which fall under titles IV-B and IV-E of the Social Security Act.

Title IV-B authorizes funds to states for a broad range of child welfare services, including family preservation and family support services. Title IV-E authorizes foster care, independent living, and adoption assistance programs. Titles IV-B and IV-E are intended to operate together to prevent the need for out-of-home placements, and, when that is not possible, to offer support services and permanent placements. Funds for these programs include both non-entitlement authorizations and authorized entitlements.

Additionally, funding is provided under foster care to assist states with the maintenance costs of AFDC children in foster care. Child welfare program funding is also available to states through the title XX social services block grant program, which allows states to provide services relating to child welfare at their discretion.

The federal government spends approximately $4 billion annually in FY 1995 to subsidize foster care, some adoptions, and, to a smaller extent, child protection programs. CBO breaks down FY 1995 spending to $3.28 billion for foster care and adoption assistance (state claims for IV-E Foster Care represent the bulk at around $2.9 billion while title IV-E Adoption Assistance state claims were only around $378 million); $295 billion for child welfare, and $150 billion for Family Preservation.

There are about half-a-million children in foster care on any given day. As of 1993, reports of possible child abuses had risen to almost 3 million a year, of which roughly 1 million abuse and neglect cases were confirmed. About 1,300 of those cases ended in a child's death. (National Committee to Prevent Child Abuse; HHS.) The number of reported cases of child abuse and neglect have more than quadrupled since 1976 (Ways and Means Greenbook, 1994).

Child welfare encompasses a variety of services including child protection, care of the homeless and neglected, child social and nutritional development, and children in out-of-home care. Services provided may be supportive, supplementary, or substitutive.

The current school of thought in the child welfare world says that it is in the best interests of children to live with their families. Most child welfare programs are designed around family preservation and family reunification. PL 96-272 requires that reasonable efforts be taken to prevent placement of a child in foster care, prevent the need for foster care, and make it possible for that child to eventually return home. Determining reasonable efforts is left up to the states and varies substantially from state to state. To receive title IV-E funding, a State plan must include these provisions.

Child Welfare Programs Under the Social Security Act

Child Welfare Services (Title IV-B, Subpart 1): Permanently authorizes grants to states for child welfare services. States have wide discretion in designing programs, but must provide certain protection for all foster children as a condition of funding. The federal matching rate is 75 percent and state allocations are based on per capita income and population age 21 and under. This program is not an entitlement, but is subject to the discretionary appropriations process. *FY 1996 funding: $277*

million. FY 1997 Administration request: $292 million.

Family Preservation and Family Support (Title IV-B, Subpart 2): Authorizes grants to states for family preservation and family support services through FY 1998. The program is a capped entitlement to states. The ceiling began at $60 million in FY 1994 and is scheduled to increase to $255 million in FY 1998. (Beginning in FY 1995, a certain percentage of funds are reserved for grants to state courts to assess and improve their child welfare proceedings.) The federal matching rate is 75 percent, and state allocations are based on the number of children receiving food stamps. *FY 1996 funding: $225 million. FY 1997 Administrative request: $240 million.*

Foster Care (Title IV-E): Federal matching funds are permanently authorized and provided to states on an open-ended entitlement basis for costs of maintaining children in foster care, whose biological families are eligible for AFDC, and for related administrative, child placement, and training costs. States are required to provide foster care maintenance payments to AFDC-eligible children removed from the home if a child received, or would have been eligible for AFDC prior to removal form the home. (Children in the foster care AFDC program are eligible for Medicaid.) The federal matching rate for title IV-E foster care is the state's Medicaid matching rate, which varies according to state per capita income. Foster care may be provided in homes or institutions and must meet certain requirements. Eligible administrative and child placement costs are matched at 50 percent, and the federal match rate for training is 75 percent. *FY 1996 funding: $3.7 billion; FY 1997 Administration request: $3.8 billion.*

Adoption Assistance (Title IV-E): Authorizes federal matching funds on a permanent basis to states to provide adoption assistance to parents who adopt children with special needs and are eligible for SSI or AFDC. Federal matching is available on an open-ended entitlement basis for adoption assistance and for related administrative, child placement, and training costs. Matching rates are the same as under foster care. *FY 1996 funding: $510 million; FY 1997 Administration request: $568 million.*

Independent Living (Title IV-E): Authorizes grants to states for services to older foster children to help them make the transition to life on their own. The program is permanently authorized as a capped entitlement to states. State allocations are based on each state's share of title IV-E foster children in FY 1994, and states must provide a 50 percent match for their share of the first $45 million in federal appropriations. *FY 1996 funding: $70 million; 1997 Administration request, $70 million.*

Title XX: This is an authorized entitlement of which 100 percent is federally funded, with a ceiling. At their discretion, States may provide services relating to child welfare using title XX funds. Detailed data on child welfare services spending by states is not available. Funds available to states from title XX may be used for services to families and children without regard to their eligibility for AFDC.

Non-Social Security Act Child Welfare Programs

Abandoned Infants Assistance Act: Authorizes discretionary grants to states for activities related to babies who have been abandoned by their biological families, particularly infants with AIDS. *FY 1996 funding: $12 million; FY 1997 Administration request: $14 million.*

Adoption Opportunities Act: Authorizes discretionary funding for a range of adoption activities facilitating the adoption of special needs children and providing post-legal adoption services. *FY 1996 funding $12 million; FY 1997 Administration request: to consolidate this program with child welfare research and training, and CAPTA discretionary activities to form a new Child Welfare Innovation Program to be funded at the programs' combined FY 1995 funding level: $39 million.*

Child Abuse Prevention and Treatment Act (CAPTA) state grants: Authorizes grants to help states improve their child protective service systems. As a condition of funding, requires states to establish mandatory child abuse and neglect reporting systems, *FY 1996 funding:$21 million; FY 1997 Administration request: $23 million*

Community-Based Family Resource Centers: Grants for community-based family resource centers are authorized under CAPTA. *FY 1996 funding: $23 million; FY 1997 Administration request: $50 million for consolidation of community-based family resource center grants, temporary child care and crisis nurseries, and family support centers authorized under the Stewart McKinney Homeless Assistance Act.*

Child Abuse Prevention and Treatment Act discretionary grants:

Authorizes research and demonstration activities. FY *1996 funding: $14 million; FY 1997 Administration request, that this program be consolidated with adoption opportunities and child welfare research and training to form a new Child Welfare Innovative Program to funded at the programs' combined funding levels in FY 1995 ($39 million).*

Temporary Child Care for Children with Disabilities and Crisis Nurseries Act: Authorizes state demonstration grants for temporary nonmedical child care for children with special needs to alleviate stress among children and their families; and crisis nurseries to provide short-term care for abused and neglected children or those at risk of abuse. *FY 1996 funding: $10 million; FY 1997 Administration request, included in funding requested for consolidation of community-based family resource center grants, temporary child care and crisis nurseries, and family support centers, discussed above.*

Title V of the Juvenile Justice Delinquency Prevention Act: Sends money to states, with few restrictions, for use in juvenile delinquency prevention. The money may be used for Family Preservation. The money is subgranted out at the local level. Most of the dollars are currently used for traditional prevention programs such as after school programs. *FY 1996 funding: $20 million, of which $19 million goes out to the states; FY 1997 Administration Request: $20 million.* DOJ Office of Juvenile Justice and Delinquency Prevention and the HHS Administration on Children, Youth and Families have been exploring ways to coordinate their own programs and help states and local communities build a continuum of services aimed at prevention and early intervention.

Non-Welfare Reform Pending Child Welfare Legislation, 104th Congress

H.R. 3286 (Molinari): The Adoption Promotion and Stability Act of 1996. Offers up to a $5,000 tax credit for adoption expenses incurred during the year that the adoption is formalized. Only families who make less than $75,000 annually are eligible for the full $5,000 tax credit. Also removes barriers to inter-ethnic adoption. The Administration issued a SAP on May 9, 1996 strongly supporting HR 3286, without the inclusion of Title III (Title III--would allow state courts to pre-empt tribal governments in decisions regarding the custody of Indian children.) Introduced May 1996, referred to Finance Committee.

H.R. 586 (Maloney): Omnibus Foster Care Improvement Act. Amends Title IV-E, introduced January 19, 1995, referred to Ways and Means.

H.R. 709 (Maloney): Standby Guardianship Act. Amends Title IV-E to allow chronically ill or dying parents to name a standby guardian for minor children without relinquishing parental rights. Introduced January 26, 1995, referred to Ways and Means.

H.R. 1044 (Fawell): At-Birth Abandoned Baby Act, amends title IV-E to prevent abandoned infants from experiencing prolonged foster care. Introduced February 24, 1995, referred to House Ways and Means.

H.R. 1263 (Payne): Abandoned and Medically Fragile Infants Assistance Act, introduced March 16, 1995, referred to House Economics and Educational Opportunities Committee.

S. 1201(Coats), similar bill introduced in House, H.R. 2387 (Wyden): Kinship Care Act of 1995. Amends Title IV-E to promote kinship care, and to authorize kinship care demonstrations. Introduced September 21, referred to House Ways and Means Committee.

S 919, (Coats): Child Abuse Prevention and Treatment Act Amendments (CAPTA): Reauthorizes CAPTA and related programs through FY 2000, included in HR 4 on August 11, 1995, passed Senate September 19, 1995, vetoed by President.

S. 637 (McCain): Adoption Anti-Discrimination Act, introduced march 28, 1995, referred to Senate Finance Committee.

Legislative History of Child Welfare Programs

Federal assistance for foster care first became available in 1961 under what was then called ADC (later renamed AFDC) under title IV-A of the Social Security Act.

The Adoption Assistance and Child Welfare Act of 1980 and Amendments to It (Public Law 96-272)

In 1980, title IV-A of the Social Security Act was amended by Public Law 96-272. This legislation continued foster care funding but transferred it to title IV-E. This law also changed child welfare services under IV-B by creating linkages between the two programs. AFDC foster care remained an entitlement, but funding was made contingent on title IV-B.

Also, under title IV-E, a new Federal matching grant program for payments to parents who adopt special needs children was established and *permanently* authorized. Funding for adoption assistance is on an open-ended entitlement basis.

Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1985, Amendments to Child Welfare Programs (PL 99-272)

In the 99th Congress, COBRA established a new entitlement program--the independent living program--under title IV-E to help states facilitate the transition of children age 16 and older from AFDC foster care to independent living.

PL 100-647, Extension of COBRA Changes

In the 100th Congress, legislation was enacted to expand the independent living program for children 16 and older who are in any foster care situation, and to provide services for such

children for six months after foster care or foster care payments end.

Tax Reform Act of 1986 (PL 99-514)

Also in the 99th Congress under the Tax Reform Act, the adoption assistance program under title IV-E was amended to provide Federal matching funds for the one-time adoption expenses of children with special needs, whether or not the children are eligible for AFDC or SSI.

Omnibus Reconciliation Act of 1989 (PL 101-239), 1990 (PL 101-508) and 1993 (PL 103-66)

During the first session of the 101st Congress authorization levels for title IV-B were increased from $266 million to $325 million; and extended the independent living program through 1992, increasing the entitlement ceiling from $45 to $50 million in FY 90 to $60 for FY '91 and $70 million for '92, and establish a state match beginning FY '91.

During the second session of the 101st Congress states were required to distinguish between administrative costs and child placement costs (which previously had been counted as administrative costs).

During the 103rd Congress new legislation created a capped entitlement under IV-B for a broad range of services to families (including foster, adoptive and extended families). Termed family preservation and family support services, the legislation was designed to buttress the goals of Federal child welfare programs of strengthening family life for children, and ensuring more children in the child welfare system have a stable, permanent home on a timely basis. The legislation also includes a set-aside for grants to State courts for assessments and improvements of judicial child welfare proceedings. This new law also authorized a three-year enhanced match to States for planning, designing, developing or installing child welfare data collection systems. The legislation permanently authorizes the independent living program and authorizes a 75 percent matching rate for certain State training expenses.

To: Carol Rasco cc: Elizabeth Drye
Jeremy Ben-Ami

From: Lyn Hogan

Date: July 5, 1996

Re: Brief Summary of Pending Child Welfare Waivers

Though we went over these in our earlier meeting, I thought it might be useful to review them once more before Monday's meeting.

The child welfare waivers were authorized by Congress at the end of 1994. Congress created a new special waiver authority (section 1130) for HHS to award up to 10 states to conduct cost-neutral demonstrations, with waivers of IV-B and IV-E allowed.

As you remember, after HHS issued state guidelines, 14 states applied. Minnesota since dropped out. States that have applied include: Oregon, Delaware, DC, North Carolina, Georgia, Ohio, New York, Indiana, Illinois, California, Michigan, West Virginia, and Maryland. Delaware has been approved. Two to four may be approved in the coming months. HHS does not have to give all ten waivers.

The most common suggestions propose shifting dollars from foster care to family preservation. Other interesting proposals are:

- Delaware proposed and received a waiver and Illinois proposed but has not yet received a waiver for "subsidized guardianship," a new status of guardianship where there is no hope of family unification and the foster parents want the relationship to be permanent, but don't want to adopt.

- New York and Ohio have proposed managed care with capitated payments for foster care rather than daily maintenance payments, to encourage agencies to move quickly to resolve the child's situation. Critics of this approach say this may rush agencies to push out children they might not have otherwise. New York proposes cutting payments at the same time, and HHS does not like that. However, HHS finds Ohio's proposal very promising.

- Michigan and California proposed block grants. California wants to sub-block down to the counties. HHS, as you know, is not crazy about block grants.

NEW FILE
Child welfare

BRIEFING BOOK MEMO

April 30, 1996
8:30 - 9:30 a.m.
Carol Rasco's office

FROM: Diana Fortuna

SUBJECT: HHS Child Welfare Waivers

PARTICIPANTS: HHS: Mary Jo Bane, Olivia Golden, Carol Williams, John Monahan; White House: Ken Apfel and Lester Cash, OMB; Lawton Jordan, Intergovernmental; also invited are Jen Klein and Bruce Reed

PURPOSE: To learn about HHS's review of 13 pending child welfare waivers and its process for awarding the statutory limit of 10 waivers. Attached are HHS's briefing materials.

AGENDA: HHS will walk us through what they have been doing, and we should raise any questions we may have.

BACKGROUND: In 1994, Congress created a new special waiver authority for HHS to allow up to 10 states to conduct cost-neutral demonstrations. After HHS issued guidance to states on this last year, 14 states sent in applications last fall. (Minnesota has since dropped out.) They are Oregon, Delaware, DC, North Carolina, Georgia, Ohio, New York, Indiana, Illinois, California, Michigan, West Virginia, and Maryland. Florida wants to apply even though the deadline has passed.

HHS expects to award Delaware the first waiver within the next few weeks; Illinois and Indiana are fairly far along. HHS is attempting to discourage West Virginia about its application.

The most common thing that states have proposed to do is shift dollars from foster care to family preservation, on the theory that the investment will pay off in terms of foster care dollars saved in the long run. Other ideas include "subsidized guardianship", a new status in between foster care and adoption; managed care (New York and Ohio); block grants (Michigan and California); and tying funding to outcomes (North Carolina).

ISSUES:

HHS is considering approving fewer than 10 of the 13 applications received, because they are not certain that 10 merit approval. The alternative they are considering is to accept 6–8 and then solicit proposals for a second round.

OMB may have a problem with several of the states, which did not propose to use random assignment for evaluation purposes.

QUESTIONS FOR CONSIDERATION:

What policies should HHS test? Are we taking full advantage of this opportunity?

How will HHS handle the requests for block grants?

What is an appropriate way to test managed care? (This has been controversial in New York, where the Mayor has been accused to using managed care to cut reimbursement. HHS appears interested in Ohio's application, however.)

DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
Office of the Assistant Secretary, Suite 600
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

April 29, 1996

TO: Carol H. Rasco
Assistant to the President
for Domestic Policy

FROM: Assistant Secretary
for Children and Families

SUBJECT: Child Welfare Waivers -- Briefing

BACKGROUND - CHILD WELFARE WAIVERS

On October 31, 1994, the President signed Public Law 103-432 which, among other things, authorized the Secretary of HHS to permit as many as ten States to conduct child welfare demonstration projects by making most provisions of Parts B and E of title IV of the Social Security Act subject to waiver. These are the sections of the Act which govern foster care, adoption assistance, independent living, child welfare services, and family preservation and support.

Child welfare waivers are required by statute to be cost neutral, to be consistent with the purposes of the basic child welfare legislation, and to have an independent evaluation. Certain protections for children in foster care and their families may not be waived, and eligibility for benefits may not be impaired. The waivers are limited to five years.

The purposes of the waivers include testing State-designed approaches to reforming child welfare services, encouraging innovation, and gaining experience with alternative methods of funding and administering child welfare services. The lessons of these demonstration projects are expected to be beneficial for other States, other social services programs, and national policymakers.

Fourteen States submitted waiver proposals in response to a formal Announcement which appeared in the Federal Register on June 15, 1995. One State has since withdrawn from consideration. The waiver proposals involve a number of themes, among them:

- using title IV-E funds for services and for prevention, rather than for out-of-home care;

- providing subsidies for guardianships for certain children now in long-term foster care;

- encouraging kinship placements;
- adapting managed care techniques to the provision of child welfare services;
- devolving child welfare responsibility and decision-making from the State to a county or local level; and
- developing more community-based services for children and families, and more family-like and community-based placement capacity for children.

The States under consideration are California, Delaware, the District of Columbia, Georgia, Illinois, Indiana, Maryland, Michigan, New York, North Carolina, Ohio, Oregon and West Virginia. One State, Minnesota, dropped out. Summaries of the fourteen proposals were published for public comment in the Federal Register of September 7, 1995.

We have received over 50 comments from the public in response to our publication in the Federal Register of summaries of the State proposals. Commentors included advocates, foster parents, and county officials. The Children's Bureau conducted a series of initial conference calls with all of the States, for a preliminary discussion of the proposals and to gather additional information. Following that, Issue Papers were developed for each State, which outline matters the Department wishes to discuss in more detail. States are invited to set their own timeframes for responding to the Issue Papers, and for scheduling follow-up discussions. The table at Tab A shows the status of Issue Papers and State responses.

It is not yet known whether ten of these thirteen pending proposals will be approved. Sixteen other States have indicated some degree of interest in a child welfare waiver demonstration project.

In California, the Los Angeles County Department of Children's Services has written to the White House expressing strong disagreement with the State's proposal to devolve child welfare responsibility (both programmatic and fiscal) to the counties. California is presently revising its proposal, partly in response to the Department's Issue Paper, which identified the local concerns.

Child welfare waivers will not involve the level of dollars that are involved in AFDC and Medicaid waivers, nor will they, in most cases, affect nearly as many children or families.

THE BROADER CHILD WELFARE REFORM CONTEXT

The child welfare system is experiencing considerable stress, and the need for change is broadly recognized. States need federal support in their efforts to reform the way in which services are designed and delivered. The Department's goal is to create a service delivery approach that is focused on safety, permanency and the well being of children; that is family focused and provides a continuum of services; and that is inclusive in the planning and delivery of services.

In addition to waivers, other key strategies in moving child welfare reform forward are:

- the development of an outcomes focus for child welfare systems;
- reactivating the joint planning process with States through implementation of Family Preservation and Support legislation;
- revising the Department's approach to monitoring, to stress outcomes, self-assessment, federal/State partnership and program improvement;
- development of an adoption strategic plan to increase the focus on permanency;
- working with courts to improve the timeliness and quality of decision making; and
- improving the collection and use of data through support of advanced technology.

DISCUSSION

These waivers provide the Department with the capacity to enter into active partnership with some States to implement and evaluate promising alternatives, and to test new approaches to child welfare practice and administration.

The child welfare waiver proposals raise a number of substantive issues, among them:

- How to assure protection of children and quality of services;
- How to guarantee that children and families are not deprived of services to which they are entitled;
- How to handle the waiver proposals where systems are especially fragile (DC) or challenged (NY);
- How to handle evaluations of statewide projects; and
- How to assure cost neutrality, especially if it is necessary to rely on projections of State entitlements.

The first child welfare waiver proposal which will be ready for approval is Delaware's. Draft Waiver Terms and Conditions are now being reviewed by Delaware officials. Delaware is proposing two separate child welfare demonstration projects: one statewide component to test the use of substance abuse counseling and treatment for parents as a means of reducing or removing the need to place children in foster care; and a limited component (up to 10 children) that would test assisted guardianship for certain children in foster care who cannot be placed for adoption.

Mary Jo Bane

Attachments:
Tab A - Statutory Authority
Tab B - Waiver Announcement - Federal Register, June 15, 1995
Tab C - Summary of Proposals Received - Federal Register, September 7, 1995
Tab D - Status of Child Welfare Waivers - Table

cc: Kevin Thurm

Tab A

HR5252, portion thereof...

SEC. 208. DEMONSTRATION PROJECTS.

Part A of title XI (42 U.S.C. 1301-1320b-13) is amended by inserting after section 1128B the following:

''demonstration projects

''Sec. 1129. (a) In General.--The Secretary may authorize not more than 10 States to conduct demonstration projects pursuant to this section which the Secretary finds are likely to promote the objectives of part B or E of title IV.

''(b) Waiver Authority.--The Secretary may waive compliance with any requirement of part B or E of title IV which (if applied) would prevent a State from carrying out a demonstration project under this section or prevent the State from effectively achieving the purpose of such a project, except that the Secretary may not waive--

''(1) any provision of section 427 (as in effect before April 1, 1996), section 422(b)(9) (as in effect after such date), or section 479; or

''(2) any provision of such part E, to the extent that the waiver would impair the entitlement of any qualified child or family to benefits under a State plan approved under such part E.

''(c) Treatment as Program Expenditures.--For purposes of parts B and E of title IV, the Secretary shall consider the expenditures of any State to conduct a demonstration project under this section to be expenditures under subpart 1 or 2 of such part B, or under such part E, as the State may elect.

''(d) Duration of Demonstration.--A demonstration project under this section may be conducted for not more than 5 years.

''(e) Application.--Any State seeking to conduct a demonstration project under this section shall submit to the Secretary an application, in such form as the Secretary may require, which includes--

''(1) a description of the proposed project, the geographic area in which the proposed project would be conducted, the children or families who would be served by the proposed project, and the services which would be provided by the proposed project (which shall provide, where appropriate, for random assignment of children and families to groups served under the project and to control groups);

''(2) a statement of the period during which the proposed project would be conducted;

''(3) a discussion of the benefits that are expected from the proposed project (compared to a continuation of activities under the approved plan or plans of the State);

''(4) an estimate of the costs or savings of the proposed project;

''(5) a statement of program requirements for which waivers would be needed to permit the proposed project to be conducted;

''(6) a description of the proposed evaluation design; and

''(7) such additional information as the Secretary may require.

''(f) Evaluations; Report.--Each State authorized to conduct a demonstration project under this section shall--

''(1) obtain an evaluation by an independent contractor of the effectiveness of the project, using an evaluation design approved by the Secretary which provides for--

''(A) comparison of methods of service delivery under the project, and such methods under a State plan

or plans, with respect to efficiency, economy, and any other appropriate measures of program management;

``(B) comparison of outcomes for children and families (and groups of children and families) under the project, and such outcomes under a State plan or plans, for purposes of assessing the effectiveness of the project in achieving program goals; and

``(C) any other information that the Secretary may require; and

``(2) provide interim and final evaluation reports to the Secretary, at such times and in such manner as the Secretary may require.

``(g) Cost Neutrality.--The Secretary may not authorize a State to conduct a demonstration project under this section unless the Secretary determines that the total amount of Federal funds that will be expended under (or by reason of) the project over its approved term (or such portion thereof or other period as the Secretary may find appropriate) will not exceed the amount of such funds that would be expended by the State under the State plans approved under parts B and E of title IV if the project were not conducted.''.

Child Welfare Waivers -- STATUS As of: Apr. 12, 1996

	ISSUE PAPERS		DECISION PROCESS			
State	In HHS/ OMB Rev.	Sent to State	State Response	Dis-cussion	Terms & Cond'ns	Approval Package
DE	X	X	in	held 2/28	in State review	being assembled
IL	X	X	in	held 4/12		
NY	X	X				
NC	X	X				
WV	X					
IN	X	X	in	held 3/20	in State review	
CA	X		will reply in Apr.			
OH	X	X	in	held 4/2	being drafted	
MI	X	X	in, in draft			
GA	X					
DC	X					
MD	X	X				
OR	X	X	in	held 3/18	partial draft in ACF review	

Appendix I

This is a list of program ideas that have been suggested by States or others in response to the Department's requests for suggestions. They are listed only as a means of outlining, for States interested in proposing a child welfare waiver demonstration project, the broad range of possible demonstrations that the Department would consider. Whether these sample ideas would be cost-neutral would depend, of course, on how a State proposes to implement them. Similarly, the method of implementation could affect whether a waiver demonstration project would meet the statutory requirement that it not "impair the entitlement of any qualified child or family to benefits under a State" title IV-E Plan.

This list should not be regarded as limiting a State in any way in conceiving demonstration ideas.

- To meet the need for specialized foster care, and to reduce the amount spent on institutional care, train AFDC recipients or other low income persons to be professional, paid foster parents for specialized foster home placements; ensure appropriate licensing and possibly provide housing subsidies or homeownership assistance to assure the stability of the specialized foster home as a long-term resource.
- Broaden the use of title IV-E to fund services for children, their parents, and foster families, and to fund preventive services for families at risk, with the expectation that total time in out-of-home care would be reduced, and in some cases foster placements could be avoided.
- Provide better services at lower cost by, where appropriate, returning children, especially adolescents, from out-of-State institutional placements. Such a demonstration might include both foster care youth and youth who are in the juvenile justice system. The expectation is that placing them in community-based specialized family foster homes, or community-based group homes, will reduce the total time in out-of-home care.
- Provide subsidized guardianship or other arrangements which would allow children to stay or be placed in a familial setting that is more cost-effective than continuing them in foster care.
- For older adolescents in independent living, allow title IV-E funds to be used for the cost of an apartment for a period of time before the youth leaves foster care, and a short period thereafter, to achieve more stable placements for youth.
- Expand the availability of in-home respite care for foster families, with the expectation that administrative costs, including the costs of recruiting foster families, will be controlled, and more stable placements will result in shortened stays in out-of-home care.
- Provide State-funded parental visitation for parents whose children are in institutional care, including the costs of telephone calls, transportation, and other expenses associated with maintaining or improving contact. The expectation is that more contact between parents/families and children in care can shorten stays in institutional placements.
- Enter into agreements with private providers to test a managed care concept, with clearly specified and measurable outcomes to be achieved for each family, at a fixed cost negotiated in advance, with the expectation that fiscal incentives would produce a better result with no increase in cost.
- Enter into agreements with Indian Tribes to permit full access to all aspects of title IV-E funding, with the expectation that services for tribal children and families will improve, while State costs of providing or managing those services will decline.
- Where court processes are unduly delaying adoptions, enter into agreements with courts to fund adoption-related work as if it were an administrative cost under title IV-E, with the expectation that the courts would then be able to speed adoptions, producing

permanency for children earlier, and reducing foster care and case management costs.

- Seek a waiver of some provision(s) of title IV-A (AFDC), possibly in combination with a title IV-E or IV-B waiver, which might help achieve child welfare objectives. For example, a waiver which allowed a State to continue AFDC payments (in whole or in part) for a period of time, for a family from which the children had been removed, but where reunification is the goal and the loss of AFDC benefits would likely result in homelessness, thus frustrating reunification efforts.

Tab D

Delaware Child Welfare Waiver Demonstration Project

The proposal has two essential components aimed at ensuring permanency for children. The first component employs a multi-disciplinary team composed of treatment social workers and substance abuse counselors. The second component will support children who are placed in supported guardianship is transferred in situations where adoption is not possible and an identified family has made a long-term commitment to the child.

The State has seen a rise in the number of children entering foster care over the last 3 years, due largely to parental substance abuse. Through the use of multi-disciplinary teams, treatment will be provided to families experiencing both substance abuse and child abuse and neglect, thus providing services to children who would otherwise be entering foster care. Title IV-E funds normally used for foster care will be directed to pay for the cost of treatment services.

The goal of the demonstration project is to prevent or delay entry of children into foster care or reduce the time in out-of-home care in 50% of the families receiving services under the project.

The State premise is that the multi-disciplinary treatment project would improve the quality of services provided to families receiving services and improve outcomes for children under its protection. It has been extremely difficult for the State to provide effective services to families with active addiction. Social workers spend a great deal of time trying to connect families with substance abuse agencies, only to have the treatment agency discharge clients because of lack of commitment to treatment. Substance abuse counselors would have the expertise to more accurately assess the seriousness of the problem, make referrals to the most appropriate service and agency, help the social worker confront the family's denial of the problem, assist the social worker in court intervention when necessary and where able, reduce the impact of parental addiction on children.

Under the supportive guardianship component, the State will utilize title IV-E funds to provide financial subsidies in support of children who are placed in guardianship in situations where adoption is not possible and an identified family has made a long-term commitment to the child. Adding guardianship to the permanency continuum which includes adoption and long-term foster care broadens the options available to children and families. Guardianship will enable the family to assume the parental role without ongoing agency oversight but the family will have the ability to return to the agency for services as needed. The

child's case will be removed from the foster care review system, saving time and money for the family, the agency, and the court system. The State contends this change will better serve the children and youth involved. Children and caretaking guardians will be freed of the burdensome State review system and the degree of intrusiveness currently existing. They will receive ongoing financial assistance and other services will be available as needed. Children who are older and/or positively connected to parents or kin will be able to maintain those birth ties. Guardianship will not replace adoption where it is appropriate. Long-term foster care placement with agreement will remain an option where guardianship is not possible.

TAB B

[SUMMARIES OF STATE CHILD WELFARE WAIVER PROPOSALS, AS PUBLISHED IN THE FEDERAL REGISTER FOR COMMENT 9-7-95]

STATE: CALIFORNIA
DESCRIPTION: California proposes to extend, and broaden to include the use of federal funds, a planned State Partnership Demonstration Project that will provide direct funding to counties for the implementation of child welfare services. Participating counties would receive from the State a single allocation of funds for family and children's services, rather than using categorical funding streams.

The project would enhance the counties' abilities: to meet families' needs more comprehensively; to increase the focus on outcomes; to provide additional in-home services which will result in less need for out of home care; and to contain costs.

The State anticipates that enhanced flexibility in the use of federal funds, reduced administrative requirements and a new "outcome-oriented oversight role" will improve outcomes for children and families, including more effective prevention services that will reduce the need for out of home care. The State is particularly interested in promoting a whole family foster care program and long term options for children in kinship care.

The State proposes, potentially, to waive a large number of statutory (and regulatory) provisions, which would be based on negotiations among federal, State and local child welfare services officials regarding specific local waiver proposals. For each of many statutory provisions, the state proposes conditionally to "request waiver of this section to the extent necessary to implement the proposed demonstration project." Statutory items include certain title IV-E State plan requirements, title IV-E income eligibility requirements, statutory definitions (including definitions of eligible facilities), requirements regarding adoption assistance payments, required statistical reports, and Independent Living Program eligibility requirements. Regulatory items proposed for waiver include limitation on the sources of state match, cost allocation plan requirements, general grant administration requirements, fiscal regulations, the State allotment determination formula, payment review and facility licensing standards, and regulations regarding the withholding of federal funds.
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STATE: DISTRICT OF COLUMBIA
DESCRIPTION: The District of Columbia proposes to develop a community-based therapeutic model of services to serve as an alternative to placing children in more restrictive institutional settings, as well as providing a transitional bridge for those children returning to the community upon discharge from institutional care.

The flexible use of title IV-E and IV-B funds would allow for the development and provision of a community-based model of therapeutic services to prevent foster home and institutional placement and would increase inter/intra agency and multi-system coordination of services.

The demonstration project would include the use of a "managed care" approach through the use of rate setting procedures to include articulated caps, and a system to provide comprehensive multi-system social and support services. The community-based therapeutic approach would include specialized emergency foster care homes; shared family care; in-home treatment; use of professional surrogate parents; and substance abuse treatment services.

The District of Columbia proposes title IV-E waivers to allow payment for services, and to permit the support of alternatives to foster home and institutional placement through use of a rate-setting process to be established under the demonstration project.

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STATE: GEORGIA
DESCRIPTION: Georgia proposes to use title IV-E funds to fund preventive and supportive services for children and families at risk, to eliminate the need for placement or reduce the time a child spends in out of home care. Additionally, Georgia seeks to place children in neighborhood settings; provide specialized living arrangements for adolescents, and obtain special adoption assistance to expedite the placement of children into adoptive homes.

The benefits for this demonstration project include removing systems barriers, decreasing or avoiding the amount of time a child spends in out of home care, providing more stable placements, expanding preventive and family support service systems and increasing adoptive placements by making resources available to adoptive families that otherwise would not qualify.

The services to be provided under the demonstration project include family support and prevention services, expansion of kinship care, and community placement services.

Georgia proposes to expand title IV-E coverage to include placement prevention and reunification services. The State also wishes to waive some provisions of title IV-E eligibility determination when a child comes into custody, provide a special waiver to provide adoption assistance to pay for the purchase of services to expedite adoptive placement, and provide funds for adoptive parents for one-time expenses related to the placement of a specific child in the home. Georgia also seeks a waiver to permit title IV-E funds to support a kinship care assistance subsidy, and a waiver of some provisions of title IV-A to allow families whose children are in foster care to continue receiving food stamps, when reunification is expected to occur within 180 days.
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STATE: ILLINOIS
DESCRIPTION: Illinois is proposing a subsidized private guardianship as a permanency planning option which would meet the needs of the long-term kinship care population, in order to reduce the number of children in long-term foster care and to reduce the number of disrupted placements.

Illinois seeks to improve permanency outcomes for children in healthy kinship care arrangements in cases where reunification and adoption are not possible. The demonstration project would reduce government intrusion in family life while creating support and clinical management systems which minimize risk through annual reviews of subsidized private guardianship and continuous promotion of adoption options.

Illinois would provide a subsidized private guardianship program (which parallels the adoption subsidy program) for a random group of eligible caregivers.

The State proposes a waiver of title IV-E to permit withholding subsidized guardianship from a randomly selected control group; a waiver of certain provisions of the Adoption Assistance Program to authorize subsidized guardianship for children who meet the eligibility requirements of Section 673 and additional requirements set by the State, in order to authorize payment of nonrecurring guardianship expenses, and for guardianship assistance payments for children; a waiver of eligibility requirements to limit assistance to special needs children; a waiver that would permit federal financial participation in amounts expended as guardianship support payments pursuant to guardianship assistance agreements; and a waiver to authorize federal financial participation in amounts expended on training and administration for the subsidized guardianship program and a waiver of the provision defining "adoption agreement" to allow that term to include "guardianship assistance agreement."

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STATE: INDIANA
DESCRIPTION: Indiana proposes to divert per diem funds from restrictive (primarily institutional) placements to more community-based services in order to create more home-based in-state placements for children, placements which would be more supportive of family unity.

The effort would result in fewer high cost, out of state child placements; fewer removals from home, and earlier reunification; improved family functioning; expeditious adoptions; timely transitions to independent living; and improved outcomes for children.

Indiana would modify existing interagency agreements between the Division of Family and Children Services and juvenile court judges to include community partners such as mental health, education and the Step Ahead Council. The local office of Family and Children Services, the county probation office, community mental health center or the school corporation seeking placement of a child would convene a meeting of partners to develop alternatives to restrictive placement.

Indiana proposes to waive title IV-E to permit payment of proposed services: even when a child has not been judicially removed from the home; in order to prevent the placement of a child in out of home care; and for the child in substitute care who is not categorically eligible for title IV-E foster care.
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STATE: MARYLAND
DESCRIPTION: Maryland proposes to add federal guardianship assistance as a permanency planning option which would more closely meet the needs of the kinship care population.

This effort would result in reduced average length of stay in out of home placement for children; increased stability for children, and empowerment/support for the caretaking family.

Under this demonstration project in order to be eligible a child would have to be committed to the local department of social services as a child in need of assistance and to have been in a successful out of home placement with the prospective guardian for a minimum of six months. Reunification and adoption would have to be appropriately ruled out as permanency planning options. Resources for the child (SSI, Social Security Survivor's Benefits, etc.) would be transferred to the guardian and deducted from the subsidy. Prospective guardians would be required to sign a guardianship agreement which would require annual renewal.

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STATE: MICHIGAN

DESCRIPTION: Michigan proposes to increase its emphasis on family preservation and family support services and decrease the need for and reliance on out of home care by using title IV-E funds to provide services.

The effort would result in controlled growth of title IV-E maintenance expenditures; greater collaboration among federally-funded programs; increased ability to provide services for families; and decreased reliance on out of home care.

Michigan is proposing to treat title IV-E maintenance payments (other than those for adoption subsidy) as a capped entitlement. The State is proposing to use the funds for service provision, in some cases augmenting funds now being expended under title IV-B Subpart 1 (Child Welfare Services) and Subpart 2 (Family Preservation and Support). The funds would be used to expand grants to local communities and to implement family preservation and support services more quickly.

Michigan is proposing to waive those provisions of title IV-E which restrict States from expending these funds for the provision of services. Michigan excludes title IV-E adoption assistance from its waiver proposal.

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STATE: NEW YORK
DESCRIPTION: New York proposes to use a managed care approach to child welfare services to recapture revenue for reinvestment in preventive and aftercare services in local communities.

The benefits of this effort would be an accelerated decline in the foster care population; an increase in the level of services; and a reduction in the length of stay in foster care.

New York proposes to apply the principles of managed care to its foster care and adoption assistance programs by identifying preset payments for a range of services for a specified population over a predetermined period of time (capitated payments) and adjusting treatment regimens in light of outcomes so that the client receives the necessary services to continue to make progress toward the stated goals of intervention (care management). The State also proposes to increase the availability of child welfare services so that pre-placement preventive and aftercare services can be intensified.

New York proposes to waive: title IV-E requirements regarding the eligibility of children and of foster care facilities; the definition of "special needs" for which title IV-E funds may be used; the circumstances under which these funds may be claimed; and certain requirements concerning title IV-E administration and training.

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STATE: NORTH CAROLINA
DESCRIPTION: North Carolina proposes outcome-based management of foster care, in which foster care funding is tied to specific outcomes related to diverting children from foster care whenever possible and moving quickly to achieve permanence for children.

The benefits from this demonstration effort would: link funding and outcomes and measure the effect on service delivery system performance; demonstrate and evaluate the effectiveness of a comprehensive outcome-based approach; decrease the amount of time children spend in foster care, reduce the number of new entries into foster care, and promote collaborative planning and coordination of services with several other initiatives currently underway in the State.

The proposed demonstration effort has two parts. Part I is designed to encourage the development of effective community-based reunification, adoption and aftercare services. Part II is designed to achieve a paradigm shift that allows local programs to move resources from treatment to prevention.

The waiver requests the use of title IV-E foster care funds on behalf of children not presently eligible: to allow local social service agencies to use a capitated rate structure with incentives for achieving specified outcomes; to allow local social service agencies to contract with public, private non-profit and private for profit entities as needed to develop an effective community network of services; and to allow participating agencies to reinvest savings realized from performance excellence in child welfare services.
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STATE: OHIO
DESCRIPTION: Ohio proposes to reduce child removals and/or time of children in placement and associated costs through the use of managed care technology to provide a broader array of services to children and their families.

The benefits of this effort would include decreasing placement costs, increasing the level and quality of services; strengthening local partnerships; and expediting the permanency planning process.

The proposed demonstration effort represents a partnership between public children's service agencies (PCSAs), the Ohio Department of Human Services (ODHS), and managed care entities (MCE). Decision making and risk will be shared among the PCSAs, ODHS and the MCE. ODHS's role is that of coordinator, facilitator and provider of training and technical assistance. The PCSAs' role is primarily as purchasers of services, and they may or may not provide all the direct service functions themselves. The MCE will be responsible for administrative and management functions, medical/clinical reviews, utilization management and service authorization, developing and operating a management information system, developing contracts with providers and payers, and consumer satisfaction-related duties.

The current system of services will continue but with managed care options being considered at decision making points. A policy consortium will be created to develop and implement policy and practices that support permanency planning and provide guidance to the local PCSAs. The terms and conditions developed by the Consortium will bind the provider agencies to uniformly implement the agreed upon practice criteria and to ensure consistency for evaluation purposes across the waiver sites.

Ohio proposes to waive a number of title IV-E provisions that relate to restrictions on child eligibility, and prohibitions on the use of title IV-E funds for the provision of services.

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STATE: OREGON
DESCRIPTION: Oregon proposes to use title IV-E funds for services including but not limited to prevention and support services, protective services, crisis intervention and reunification services. The State also proposes to develop a kinship foster care rate that would be individually determined based on the needs of the child.

The demonstration project would provide flexible funding for abused and neglected children and their families and/or caregivers to receive individual services, regardless of where the chid is placed. Specific outcomes expected would include decreasing the length of foster care placement, increasing the number of children remaining safely in their homes, increasing the use of relative caretakers for children who must be placed out of the home, having more appropriate foster care resources and better utilization of community resources.

The proposed demonstration project would provide support to biological, foster and kinship caretakers through a myriad of services. The State proposes to shift toward a statewide system of in-home care services delivery, insure a match between the child's needs and the skill of the caretakers, establish mechanisms that will refocus the out of home care systems and move closer to implementation of a "first placement/only placement" objective for children who are unable to remain with their parent(s).

Oregon proposes to waive those provisions of title IV-E: that require a State to make foster care maintenance payments; that require that foster care maintenance payments be made only on behalf of a child who resides in a foster family home or a child care institution; and that concern the conditions for federal reimbursement for voluntary placements.

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STATE: WEST VIRGINIA
DESCRIPTION: West Virginia will create a comprehensive, decentralized, specialized system to determine a child's potential eligibility for all funding resources for child welfare programs.

The proposed system would maximize the State's child welfare funds by identifying and accessing additional financial resources available to children in care. The new system would emphasize parental obligation and encourage parental participation.

A resource development unit will be created to identify, pursue and produce accurate claims for all sources of funds to which a child in care may be entitled, e.g., child support, SSI, Black Lung, Railroad Retirement, third party medical, SSA, Veterans's Benefits and titles IV-A, IV-B and IV-E.

West Virginia is requesting a waiver of the title IV-E limit of fifty percent for Federal Financial Participation in a State's administrative costs.

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