

**Period 29**  
**Monitoring Report**

of  
The Accountability Agent and Monitoring and Technical Assistance Team

In the Case of

***Kenny A. v. Kemp***

*State of Georgia*

January 11, 2021

**ACCOUNTABILITY AGENT AND  
MONITORING AND TECHNICAL ASSISTANCE TEAM**

Accountability Agent  
Karen Baynes-Dunning  
Attorney, Baynes-Dunning Consulting, LLC  
Greenville, South Carolina

Steve Baynes  
Baynes Consulting, LLC  
Washington, DC

Elizabeth Black  
Director for Child Welfare Practice  
SLI Government Solutions  
Center for the Support of Families (CSF) Division  
Silver Spring, Maryland

The following persons were significant contributors to this report.

Eliza Byrne  
SLI Government Solutions  
Center for the Support of Families (CSF) Division  
Silver Spring, Maryland

Bonnie Hommrich  
SLI Government Solutions  
Center for the Support of Families (CSF) Division  
Silver Spring, Maryland

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## I. INTRODUCTION

This Period 29 report is the sixth monitoring report in which the Accountability Agent and the Monitoring and Technical Assistance Team (MTAT) report on the new outcomes delineated in the Modified Consent Decree and Exit Plan (Modified Exit Plan) that was filed in Federal District Court in December 2016.<sup>1</sup> In addition to this monitoring report, MTAT issued its Third Brief on the Infrastructure Standards in October 2020<sup>2</sup> and will issue its Fourth Brief on the Infrastructure Standards in the Spring of 2021, in accordance with the Stipulated Order Amending the Modified Consent Decree and Exit Plan (Stipulated Order) filed with the Federal District Court in December 2017.

In this report, the MTAT's obligation is to report specifically on the measurable requirements articulated in Sections IV, V, and VI of the Modified Exit Plan that relate to activity in Metropolitan Atlanta from January 1 through June 30, 2020. In addition to discussing the Ongoing and Attained Outcomes Measures, MTAT also continues reviewing the use of congregate care, monitoring the use of hotels and other temporary placements for children in foster care, and reporting caseloads for case managers and supervisors. The next two sections of this report provide that information.

The MTAT approach to monitoring serves not only as an accountability mechanism for the Court, the Plaintiffs, and the public, but also as an opportunity to assist DFCS to establish a culture of data-driven decision-making and continuous quality improvement (CQI). The goal is to establish a strong CQI process that will remain in place after the state satisfies the terms of the Modified Exit Plan and is no longer under federal court oversight.

The MTAT consistently reports on the same Modified Exit Plan standards and outcome measures approximately every six months using a combination of qualitative and quantitative data.<sup>3</sup> In addition to this basic and consistent set of metrics to track progress over time as agreed upon in the Modified Exit Plan, the MTAT conducts a deep, quality-focused analysis on a handful of Infrastructure Standards at regular intervals. Data gathering for these can include interviews with stakeholders, focus groups, surveys, observations of processes, targeted case reviews, and reviews of Child and Family Service Reviews (CFSRs) findings.

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<sup>1</sup> Modified Consent Decree and Exit Plan, *Kenny A. v. Nathan Deal*, Civil Action NO. 1:02-CV-1686-TWT. Go to: <https://www.childrensrights.org/wp-content/uploads/2014/08/2016.11.09-745-Exhibit-A-Modified-Consent-Decree-and-Exit-Plan.pdf>

<sup>2</sup> Third Brief on the Infrastructure Standards. Go to: [File-Stamped-Third-Infrastructure-Brief.pdf \(childrensrights.org\)](#)

<sup>3</sup> Pursuant to the Modified Consent Decree, both the Ongoing Outcome Measures and Attained Outcome Measures have undergone substantial revision to reflect, when possible, the principles of best practices in measurement. Best practices principles include: 1) a clear statement of the analytic question with particular attention to identifying the risk population or the denominator associated with a particular inquiry; 2) use of entry cohorts and prospective measures to characterize systems dynamics and change in outcomes; 3) attention to the sources of variation in system outcomes (e.g. variation over time, among children, or in places); 4) understanding variation to track change accurately; 5) assessing expected change in the appropriate period of performance or window of time; 6) matching the analytic question to the appropriate source data; and 7) using well-understood and organized data resources that are designed to support asking and answering analytic questions.

The intention is to enable Parties to better understand several key factors associated with each of the Infrastructure Standards: 1) the expectations for practice and the extent to which these processes are occurring; 2) the capacity within the system to meet these expectations; and 3) the extent to which these processes are occurring with sufficient consistency and quality. Moreover, this enables the MTAT to focus on emerging issues to mitigate a reactive approach to monitoring. Here is summary of each brief.

The first brief on the Infrastructure Standards was focused on the comprehensive practice model (Section I), investigations of possible maltreatment in care (Section II), and the case planning process (Section III). This brief was finalized in March 2019.

The second brief on the Infrastructure Standards was focused on the comprehensive practice model (Section I), robust workforce development (Section VIII), quality placement and caregiving (Section IV), and health and education (Section V). This brief was finalized in February 2020.

The third brief on the Infrastructure Standards was focused on the comprehensive practice model (Section I), federal funding (Section IX), the child welfare information and quality assurance systems (Section VI), and supervision of contract agencies (Section VII). This brief was finalized in October 2020.

The fourth brief on the Infrastructure Standards will provide an update on the recommendations made in the first infrastructure brief, and an analysis of the Department's progress toward improving its practice.

It is important to note that the practices and daily activities of the Department were altered greatly during Period 29 due to the worldwide Coronavirus (COVID-19) pandemic. In March 2020, in the state of Georgia, government agencies, the court system, school systems, nonprofits, corporations and many service providers closed their offices and moved to teleworking and virtual environments. Following the guidelines of public health officials, many of the practices required under the Consent Decree were not able to be performed in same manner. Thus, the monitoring reports for Period 29, Period 30, and most likely Period 31 will be markedly different from past monitoring reports. Each report will provide a summary of the new directives, altered practices, and the efforts that DFCS has undergone to ensure the safety and well-being of children, youth, and families.

### ***COVID-19 Changes and Efforts in Region 14***

During Period 29 the world began navigating an historic and devastating public health crisis. As COVID-19 spread across the United States, the Center for Disease Control and other national and state public health officials issued recommendations to mitigate continued spread, such as working from home if possible; closing schools and businesses that required groups of people to be in close proximity to one another indoors; wearing masks; socially distancing; and washing hands on a regular basis.

The State of Georgia closed its agencies in March 2020 except for essential workers. Likewise, the Supreme Court of Georgia issued a state of emergency, shutting down courthouses, conducting some hearings via video conferencing, and requesting courts to review the cases of

persons incarcerated awaiting trial to reconsider reducing bond or allowing release via self-recognizance. Hospitals cancelled elective surgeries to deal with the need for intensive care bed space to treat COVID-19 patients. Doctors, dentists, and other treatment and service providers closed their offices and began conducting virtual appointments where and when possible. The federal government passed the CARES Act to provide additional resources to individuals and businesses and stayed foreclosures and evictions.

The closure of businesses and offices resulted in many people losing jobs and income. More families applied for unemployment, food stamps, and other services. The increasingly long lines for free food revealed America's ongoing challenges with food deserts and food insecurity. The impact of the virus disproportionately infected and affected communities of color and communities already experiencing poverty and its adverse effects. This includes many of the families involved with Georgia DFCS.

DFCS put in place an emergency plan and issued a series of directives and policy changes to staff and caregiver network providers (for a sample, see Appendix C).

During Period 29, several new patterns and practices emerged within DFCS across the state, and specifically in Region 14. Fewer children and youth entered care. Initial theories include the closure of schools, medical offices, and other places in which mandated reporters engage with children, youth, and families. The decline of intakes that began in March 2020 mirrored the typical annual decline in June, when schools close for the summer. When the juvenile courts began operating under a reduced in-person schedule, it impacted DCFS' ability to meet the Consent Decree requirements for specific timely hearings. Each court decided which hearings it would conduct virtually and the transition time to a virtual platform also differed between the two counties. The amount of PPE distributed to case managers was initially limited, because child welfare case managers were not defined as level 1 emergency responders. This made it harder for caseworkers to conduct in-person visits. Nationally, the Administration for Children, Youth and Families issued guidance and adjusted its requirements concerning in-person visitation issuing the following statement:

*"The current public health challenges and guidelines require a reconsideration of [the monthly face-to-face visitation] policy. While it is imperative that caseworkers continue to ensure the well-being of children in care, that imperative must be balanced against the health of caseworkers, children in care, and all of the people with whom they come into contact. The monthly caseworker visit requirement remains in place, but we are modifying our policy to permit such visits to be conducted by videoconferencing in these current extraordinary circumstances."*

The state Division of DFCS issued many COVID-19 directives and new policies. The Supreme Court of Georgia, as well as the Superior and Juvenile Courts of DeKalb and Fulton Counties also issued several emergency orders that impacted the operations of the dependency cases. A sampling of these documents can be found in Appendix C.

In DeKalb County, the judges of the Juvenile Court entered standing orders "modifying all orders regarding visitation in dependency cases in [their respective] Court[s] where a child has

been placed in the custody of the Division of Family and Children Services (DFCS). They also noted that “In lieu of “face-to-face” personal visitation, DFCS may utilize Skype, FaceTime, Zoom or similar applications to facilitate virtual “face-to-face” visitation as previously ordered. DFCS shall work with parents and foster placements to facilitate regular contact by virtual visitation when possible.” The juvenile courts of both Fulton and DeKalb counties established modified court schedules, prioritizing preliminary protective hearings and all other hearings that affect liberty or safety interests. Fulton County Juvenile Court established that all hearings would be conducted virtually unless specially set for an in-person hearing. During the early stages of the pandemic, all statutory guidelines were stayed by Emergency Order of the Supreme Court of Georgia. The Courts, DFCS, service providers, foster parents, children, youth, and their families were all “building the new plane, while it was flying.”

Amid this chaos, the counties continued innovating and creating new opportunities for families. For example, DeKalb County DFCS in partnership with the DeKalb County Juvenile Court, obtained a grant to implement a new Family Treatment Court called INSPIRE.

*INSPIRE Family Treatment Court is a 18-24-month comprehensive program that will create and utilize a team approach to working with adults with children in DeKalb Family and Children Services (DFACS) custody and struggling with drug addiction. Participants will engage in intensive long-term treatment such as Moral Reconation Therapy, Treatment Recovery and Empowerment Model, and Cognitive Behavioral Interventions for Substance Abuse in conjunction with individual and group therapy, accountability through frequent court appearances, observed random drug screenings, and community-based support in order to ensure that their children will achieve timely permanency.*

The Region is to be commended for its valiant efforts in the face of uncertainty, increasing numbers of COVID-19 related deaths, and balancing the upheaval taking place within the families engaged with DFCS as well as the upheaval occurring simultaneously within the families of the workforce itself. As of December 2020, 16 youth in care in Region 14 tested positive for the virus. All of them have recovered and are doing well. The countless hours devoted to ensuring the safety of children and the safety of the workforce cannot be overstated.

### ***Changes in Entries, Exits, and Caseloads***

The following chart depicts the changing patterns in each county by comparing Period 28 (pre-pandemic) to Period 29.

**Table 1. Changing Count Patterns: Period 28 (Pre-Pandemic) vs. Period 29**

| Number of Children in Care* | DeKalb | Fulton | Region |
|-----------------------------|--------|--------|--------|
| P28                         | 1,032  | 779    | 1,811  |
| P29                         | 936    | 647    | 1,583  |
| Difference                  | -96    | -132   | -228   |
| Percentage Decrease         | -9%    | -17%   | -13%   |



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| Entries into Care* | DeKalb | Fulton | Region |
|--------------------|--------|--------|--------|
| P28                | 265    | 204    | 469    |
| P29                | 154    | 73     | 227    |
| Exits from Care*   | DeKalb | Fulton | Region |
| P28                | 222    | 201    | 423    |
| P29                | 167    | 155    | 322    |

\* Measure is composed of all unduplicated children in care at some time during P29.

At the beginning of P29, there were 1,361 children in care, compared to 1,260 children at the end of the period (7% decrease). Therefore, recent trends in reducing the number of children in custody have continued during the period.

This decline in children in care would ordinarily have a direct impact on case manager caseloads. However, the pandemic affected case managers and their families and the families that they serve, adding pandemic-related complications to their workload. Many case managers had to work from home, while their own children were also home participating in virtual school. Others were balancing work while caring for elderly parents and loved ones. Finally, some staff had to change their work responsibilities due to underlying health issues and susceptibility to fatal consequences of contracting the virus. Thus, the caseload decline did not have a directly proportionate increase in the number of cases managers meeting the Consent Decree caseload requirements. This is discussed in Section II of this report.

Despite the fluid and uncertain work environment, Region 14 developed innovative practices to ensure that children were safe at home and/or in their placements. The agency partnered closely with the school systems in the region to ensure that all children in the custody of the agency had laptops and Wi-Fi to increase participation in virtual school. More flexibility was provided to approve daycare for parents and caregivers who were also essential workers.

Regional DFCS leadership provided the following description of efforts undertaken to ensure Region 14 children are appropriately seen and assessed for safety during the pandemic:

- ◆ *Region 14 not only strives to ensure visits are made frequently, but we also take measures to ensure they are of good quality. We track the quality by utilizing an internal QA team to review records of all children in care in the region. If the foster care visit is not of quality, the specialist will send the documentation back to the case manager and supervisor with recommendations and an explanation as to why their visit did not meet the criteria. Spot checks are done to offer “lessons learned” for visits that did not meet the criteria. The region anticipates incorporating these methods for CPS cases as well (this will be initiated once the onboarding of new staff is complete to support this lift). In addition to the internal QA team, other regional and state office teams assist with quality checks for targeted areas of focus (i.e. re-entry, timely adoption). A regional Kenny A. team checks for quality practices such as implementing services timely, making appropriate/timely transitional visits, and doing timely diligent searches.*
- ◆ *During the pandemic, Region 14 wanted to ensure children remained safe at the same time keeping frontline staff safe from catching COVID or passing it along to children, parents,*

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*and or foster parents. Although there was an approval to see children virtually, we felt as if we should boost our virtual visits to support our children in foster care as well as support the foster parents by making extra virtual visits. Below is a chart that shows the DeKalb and Fulton visitation numbers for March through June. We could not reliably determine the virtual vs face-to-face breakdown for March and April visits, but we can show that nearly twice the number of visits were made those months than were required by the state plan. The same is true for May and June, and for those months we do have the type of visit breakdown.*

**Table 2. DeKalb and Fulton County Visitation, March through June**

|                    | Required | Virtual Visits | Face to Face Visits | Total |
|--------------------|----------|----------------|---------------------|-------|
| DeKalb March Child | 769      |                |                     | 1489  |
| DeKalb April Child | 768      |                |                     | 1495  |
| DeKalb May Child   | 767      | 1305           | 107                 | 1412  |
| DeKalb June Child  | 763      | 1359           | 122                 | 1481  |
|                    |          |                |                     |       |
|                    | Required | Virtual Visits | Face to Face Visits | Total |
| Fulton March Child | 536      |                |                     | 1056  |
| Fulton April Child | 529      |                |                     | 1005  |
| Fulton May Child   | 518      | 766            | 195                 | 961   |
| Fulton June Child  | 503      | 781            | 239                 | 1020  |

- ◆ *During the pandemic, we also felt the need to pay well needed attention to our LGBTQ+ children and youth in care. We set up town halls to discuss what does appropriate case management look like to them. We were able to gain feedback from youth on what questions to ask, correct terminology, as well as what was their ideal placement. Next steps will be to continue the discussion on a more individualized platform. Once conversations for the purpose of data gathering is complete, with the help of internal and external partners the Regional Director will form a training for all Region 14 staff, Foster Parents, and Providers.*

### ***Leadership Changes***

Since the last monitoring report, Fulton County hired a Deputy Director, Mr. William Thomas, who previously served as the Director of Newton County DFCS.

### ***Regional Priorities***

Despite having to alter its practices to adhere to public health guidelines, Region 14 continues to focus on its priorities and implement and test its theory of change. The description is restated below.

The regional leadership team has developed a theory of change to address identified problems in the areas of permanency and re-entry. The pathway to change identified is to “increase the number of children and families experiencing a more consistent and improved case planning process, so that families are involved and able to engage in the discussion and are aware of available options for support, so that appropriate decisions are made to keep children safely with their families, so that services are made available, so that children are able to remain with or return to their own families.”

Several strategies have been developed to try and address the root causes, including a lack of clear and consistent expectations, loss of focus on the concerns that led children to enter foster care, and a lack of data available to understand if practice expectations are occurring. These strategies, where Region 14 will focus its efforts, include:

1. Continuing to strengthen the workforce through strong hiring, training, coaching, and retention practices and strategies. The region is exploring new ways to ensure that new case managers understand the key elements of the job and that they are fully supported as they continue developing as strong social workers. Continuing to nurture and develop the skills of supervisors is just as important if not more, because supervisors have substantial impact on the experience of frontline case managers.
2. Improving the permanency rate for children who enter care. Although fewer children are entering care, fewer are also exiting care. A core belief is that foster care should be temporary. The counties are continuing to support placements with relatives and are developing more behaviorally specific case plans that delineate which goals are necessary to eliminate safety risk and allow children to return home. In addition, the region has been in discussion with the court system regarding effective use of protective orders. This process would allow children to return home, while maintaining a period of court and agency oversight to ensure that services are in place and effective.
3. Decreasing the rate in which children re-enter foster care. The re-entry rates in the region have steadily remained high for the past several years. This further exacerbates the number of children in care, the high caseloads, and the retention rate of case managers. Most importantly, re-entering foster care re-traumatizes the child and his/her family. The region is exploring strategies to improve the quality and frequency of discharge staffings, ensure that service providers continue caring for children and their families, and utilizing protective orders and trial visitations more often when safety is not a risk. To further support this effort to decrease the rate of re-entry, the regional leadership developed a Re-entry Strategy guide

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to articulate the process by which they plan to improve the re-entry rate through five key strategies:

- ◆ Pre-removal staffing,
- ◆ Case Transfer staffing,
- ◆ Conditions for return,
- ◆ Discharge planning/relapse planning, and
- ◆ Discharge Family Team Meeting (FTM).

In coordination with these three areas of focus, the region is working with the state data unit to develop a set of strategies that it will implement, track and test over time. Using sound implementation science the theory of change is seeking to improve performance across the following eleven Consent Decree outcomes: 1) commencement of CPS investigations; 2) search for relatives; 3) visitation (worker/child private); 4) visitation (parent/child); 5) visitation (between siblings); 6) placements not in full approval status; 7) meeting identified health needs; 8) meeting identified educational needs; 9) meeting identified dental needs; 10) meeting identified mental health needs; and 11) ensuring that valid court orders are entered into each case file. While many of these “outcome measures” reflect practice expectations and not true outcomes for children and families, the theory of change and the negotiations of these practice points by the parties presupposes that quality implementation of these practices will lead to better outcomes.

## II. CASELOAD STANDARDS

To better understand the factors that most impact DFCS' ability to meet caseload expectations and ensure a stable and capable workforce to address the needs of children and families, the MTAT conducted a deeper analysis on the workforce for the Second Brief on the Infrastructure Standards. The Infrastructure Standards, negotiated and submitted to the court in December 2017, include commitments related to the hiring and onboarding process for new employees, improved coordination with the Department of Human Services' Office of Human Resources (OHR), case manager and supervisory training and support, as well as better management of caseloads for case managers and supervisors.

For the purpose of this report, this section is focused solely on the caseload standards and supervisory ratios included in the Modified Consent Decree and Exit Plan Section V.<sup>4</sup>

- ◆ No CPS case manager shall have more than 12 cases.
- ◆ No ongoing case manager shall have more than 17 cases.
- ◆ No placement case manager shall have more than 15 cases.
- ◆ No adoption case manager shall have more than 16 cases.
- ◆ No specialized case manager shall have more than 12 cases.
- ◆ No supervisor shall supervise more than five case managers at any one time in Fulton or DeKalb Counties.

The mass hiring that took place during Period 27, followed by the onboarding of staff during Period 28 and the decrease in children in care during Period 29 resulted in an overall increase in case managers and supervisors on board and meeting caseload requirements. The staff increased from 182 in December 2019 to 204 in June 2020. Although DeKalb County has more children in care, Fulton County has more staff (Fulton – 106 staff vs. DeKalb – 98 staff). DeKalb has assigned more staff on the front end of its system (CPS), while Fulton has assigned more staff to the back end of the system (Permanency and Specialized).

After the pandemic shutdown in March 2020, the school systems in Fulton and DeKalb counties remained closed for in person instruction. This led to a reduction in referrals and intakes, accelerating the expected summer reduction in caseloads. Thus, while Region 14 has numerous vacant positions, these vacancies have not increased the workload of the current staff. Moreover, while the Department was facing severe budget cuts and potential furloughs due to the projected downturn in the state's economy, the state did not realize the expected budget reduction. Even while the school systems continue to operate virtually, the Department should have a strategy to begin filling its program administrator and supervisory positions so that they are not understaffed once a vaccine is available to the general public and reports from school systems and other mandated reporters begin to increase.

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<sup>4</sup> Modified Consent Decree and Exit Plan Section V: Caseloads states that these "caseloads will exist in Fulton DFCS and DeKalb DFCS and will apply to all case managers, including deployed case managers, who carry caseloads that include any class member children. In the event that a case manager has a mixed caseload, the caseload shall be weighted to reflect the standards in this section."

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Of the 204 CPS, family preservation, permanency, and specialized case managers who were active on June 30, 2020 in Region 14, 161 (79%) of them were meeting caseload expectations.

As of June 30, 2020, out of 54 supervisors overseeing CPS investigations, family preservation and permanency for children in foster care in Region 14, 50 (93%) were assigned five or fewer case managers. During the period, the Region added one CPS supervisor and operated with three fewer Permanency/Specialized supervisors. This correlates with an increase to 100 percent of CPS supervisors meeting caseload requirements and a decrease to 87 percent of Permanency/Specialized supervisors meeting caseload requirements compared to 97 percent during Period 28.

### ***CPS Case Managers***

For CPS case managers, 88 percent (50 of 457) were assigned 12 or fewer families to respond to or investigate reports of maltreatment as of June 30, 2020. An additional 10 cases were assigned to case managers on leave and/or supervisors, awaiting assignment, compared to 14 cases during Period 28.

### ***Family Preservation Case Managers***

Family preservation case managers have generally been assigned 17 or fewer families to be able to provide services and help ensure child safety. The same was true on June 30, 2020. All 15 of these case managers met the standard. An additional five cases were assigned to case managers on leave and/or supervisors, awaiting assignment. This is significantly less than the 12 cases reflected in the Period 28 report.

### ***Permanency Case Managers***

For many years, permanency case managers were consistently meeting or exceeding a caseload expectation of 15 or fewer. However, this began to shift in 2015.<sup>5</sup> On June 30, 2020, 72 percent (49 of 68) of permanency case managers were meeting caseload expectations. This is an improvement from the 64 percent who met caseload expectations during Period 28 and 50 percent during Period 27.

### ***Case Managers with Children Assigned to Them Who Have Been in Foster Care for 18 Months or Longer***

Previously known as specialized case managers, case managers who are assigned to children who have been in foster care for 18 months or longer are to be assigned no more than 12 children at any given time. Many of these children require extra support to achieve permanency. Percentages of case managers meeting this expectation have been dropping in recent years. However, during Period 29, 73 percent (47 of 64) of these case managers were meeting caseload expectations on June 30, 2020. This is an increase from 62 percent who met these caseload expectations during Period 28 and 38 percent during Period 27.

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<sup>5</sup> See *Period 24 Final Data Report Kenny A. v. Deal*.

***Supervisors***

On June 30, 2020, 100 percent (23 of 23) of Child Protective Services supervisors in Metropolitan Atlanta were assigned five or fewer case managers. Of the 31 permanency supervisors, 87 percent (27 of 31) were meeting expectations.

***DeKalb County on June 30, 2020***

Caseloads for 35 percent of the case managers in DeKalb County on June 30, 2020 were too high. This is an improvement from Period 28 in which 56 percent had caseloads exceeding the requirements and the 47 percent during Period 27. It should be noted that all CPS and Family Preservation case managers were assigned caseloads that met agreed upon standards. See Appendix A, *Table A-3 and Table A-4* for more information.

***Fulton County on June 30, 2020***

On this same date, only eight percent of Fulton County case managers were exceeding caseload expectations, an improvement from December 31, 2019 on which 18 percent exceeded the caseload requirement. It should also be noted that all Family Preservation and Permanency case managers met the case load requirements during Period 29. See Appendix A, *Table A-5 and Table A-6* for more information.

The Region continues to develop and implement strategies to recruit, strengthen, educate, and retain its workforce, with the complication of virtual working conditions and increasing numbers of persons infected with the virus. MTAT recommends that once strategies are determined, the Region should allow for full implementation with fidelity and measure the effectiveness of each strategy before moving on to new or additional strategies.

As researchers develop a vaccine for COVID-19, more service providers and school systems will reopen for in-person appointments and education. Data trends over many years indicate that the number of calls to intake and the number of children who enter care increase when these systems of mandated reporters are fully operational. This is evinced by the decrease when children are out of school for the summer and the increase when they return in the fall. The Region should develop a staffing plan to ensure that the counties are able to operate with optimal effectiveness, which is the intent of the caseload requirements.



### III. PLACEMENT STANDARDS

The quality placement and caregiving standards include specific DFCS commitments to ensure that every child in foster care will have a stable, nurturing placement in accordance with the principles outlined in the Modified Consent Decree and Exit Plan § III. These standards address the specific tasks that will be done so that family ties are maintained and nurtured; children are able to remain with parents and relatives as often as possible; and the screening, training, approval, and support process for all caregivers are operating well. The Second Brief on the Infrastructure Standards included an analysis of these standards.

This section of the report provides an update on agreed upon placement standards in the Modified Consent Decree and Exit Plan § IV.

#### *Discriminatory Placement Practices*

Section IV.B.3 of the Modified Consent Decree and Exit Plan prohibits discriminatory placement practices.<sup>6</sup> MTAT took a closer look at placement practices with contract agencies in the upcoming Fourth Brief of the Infrastructure Standards.

#### *Reimbursement Rates*

For basic foster care services, the Exit Plan requires uniform reimbursement rates for DFCS and private provider foster homes. When the Exit Plan was approved, the following basic foster care maintenance payments were in effect: for each child age zero to five, \$15.27 per diem; for each child age six to 12, \$17.26 per diem; and for each child age 13 and older, \$19.65 per diem for DFCS foster homes. In July 2018, the foster care per diems for DFCS foster homes and private provider foster homes were equalized at \$25.27, \$27.26, and \$29.65, respectively. These rates remained in the FY21 approved state budget. The budget did include a .58 percent reduction in rates to all Child Caring Institutions (CCI). The Room Board and Watchful Oversight (RBWO) rate structure is provided in the chart below.

**Table 3. Room Board and Watchful Oversight (RBWO) Rate Structure**

| RBWO - Child Place Agency (CPA) |                         |                               |                                |                              | RBWO - Child Caring Institutions (CCI) |                         |
|---------------------------------|-------------------------|-------------------------------|--------------------------------|------------------------------|--|-------------------------|
| Program Type                    | Fixed Payment to Agency | Foster Parent for 0 - 5 years | Foster Parent for 6 - 12 years | Foster Parent for 13 + years | Program Type                           | Applicable Program Rate |
| Traditional                     | \$22.97                 | \$25.27                       | \$27.26                        | \$29.65                      | Base                                   | \$108.47                |
| Base WO                         | \$31.10                 | \$25.27                       | \$27.26                        | \$29.65                      | AWO                                    | \$137.41                |

<sup>6</sup> Specifically, this section states: "Race and/or ethnicity and/or religion shall not be the basis for a delay or denial in the placement of a child, either with regard to matching the child with a foster or adoptive family or with regard to placing a child in a group facility. DHS shall not contract with any program or private agency that gives preference in its placement practices by race, ethnicity, or religion..." Moreover, the Principles outlined in the Exit Plan include: "All children in need of child welfare services should receive; full and equal access to the best available services, regardless of race, religion, ethnicity, disabilities, sexual orientation, or gender identity."



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| RBWO - Child Place Agency (CPA) |                         |                               |                                |                              |  | RBWO - Child Caring Institutions (CCI) |                         |
|---------------------------------|-------------------------|-------------------------------|--------------------------------|------------------------------|--|--|-------------------------|
| Program Type                    | Fixed Payment to Agency | Foster Parent for 0 - 5 years | Foster Parent for 6 - 12 years | Foster Parent for 13 + years |  | Program Type                           | Applicable Program Rate |
| Max WO                          | \$42.94                 | \$25.27                       | \$27.26                        | \$29.65                      |  | MWO                                    | \$193.73                |
| SBWO                            | \$48.23                 | \$25.27                       | \$27.26                        | \$29.65                      |  | 2nd Chance                             | \$173.56                |
| SMWO                            | \$73.94                 | \$25.27                       | \$27.26                        | \$29.65                      |  | ILP                                    | \$115.29                |
| SMFWO                           | \$86.80                 | \$25.27                       | \$27.26                        | \$29.65                      |  | Maternity                              | \$108.47                |

MTAT will be taking a closer look at the rates for higher levels of care for children and youth in foster care as part of the upcoming brief on the Infrastructure Standards, which will include the supervision of contract agencies and maximization of federal funding.<sup>7</sup>

The major findings regarding the placement standards during Period 28 are presented below.

### ***Major Findings – Placement Standards***

**1. The region has been very successful in not placing children in hotels, motels, or similar non-child welfare overnight commercial enterprises as temporary placements and continues its efforts to limit the amount of time youth spend in a DFCS office, especially during overnight hours.**

During Period 29, there was one youth in Fulton County placed in a hotel due to the child contracting COVID and the need to quarantine for 14 days. The foster parent was not willing to have the child remain in her house due to the presence of other children. During the pandemic, many universities also utilized hotels to quarantine students who tested positive or were exposed to someone else who tested positive.

The Modified Consent Decree also states, “no child shall spend more than 23 hours in a county DFCS office. Any child who spends time in a county DFCS office between the hours of 8:00 p.m. and 8:00 a.m. shall be reported to the MTAT. The intent of this provision is to prevent the use of DFCS offices as an overnight placement for children, as children with urgent placement needs require a safe bed in a home-like environment.”

During Period 29, there were no youth who had office stays of more than 23 hours in any of the DeKalb or Fulton County DFCS offices. Overall, there were 37 separate instances of office stays

<sup>7</sup> Modified Consent Decree and Exit Plan Section IV.A.2: DFCS shall ensure that all approved foster parents (regardless of whether they are supervised directly by DFCS or by private providers) receive the same reimbursement rate for a given level of service.

Modified Consent Decree and Exit Plan Section IV.A.3: DFCS directly supervises any approved foster homes that provide therapeutic services or operates any specialized group facilities, those approved foster parents or group facilities shall be paid at the same rate. All specialized group facilities shall be paid at the same rate for the same level of service.

in the Region<sup>8</sup>, which is about half of the instances in Period 28 (70). Of the 37 instances, 13 involved children experiencing their first removal, 18 were disrupted placements and six involved children who re-entered care. Hours spent in the offices ranged from 1 hours to 20 hours. Youth at the top end of that range had various diagnosed mental health issues and exhibited disruptive behaviors that made it harder to place the youth. As in previous reports, the lack of behavioral aides was also a contributing factor in extended stays with some of the cases.

## **2. The state continues to ensure young children are not placed in congregate care placements unless necessary for the child's welfare.**

The Consent Decree has several restrictions related to the use of group care, including limiting the use of congregate care for young children. The reported information is for all children under the age of 12 in care between January 1 and June 30, 2020.

According to verified state reports, no children under the age of 12 entering foster care or already in care during the period were placed in group homes or child caring institutions except as allowed under the Modified Exit Plan. During Period 29, of youth in care or who entered foster care in the period, who were under the age of 12, 22 children and youth were placed in hospitals to meet their physical health needs and 14 children were hospitalized for mental health issues. These numbers are a decrease from Period 28 where the numbers were 34 and 20, respectively. One infant in DeKalb was in a home with her teen mom. All documentation and waivers were reviewed by the MTAT.

## **3. The overwhelming number of children are not remaining in temporary facilities longer than 30 days and the region continues to place fewer children in more than one temporary facility while in foster care.**

The Modified Consent Decree states:

- a. No child shall be placed in a temporary facility or any other foster home or group facility beds used on any temporary basis, for more than 30 days; and
- b. Children shall not be placed in more than one temporary facility within one episode of foster care (meaning the period of time that a child is in foster care from the date of removal from the home until the child is discharged from DFCS custody, except that a runaway does not trigger a new episode of foster care).

During Period 29, out of the 1,616 children who were in foster care at the beginning of the period or entered during the period, there were two children placed in a temporary facility or any other foster home or group facility beds used on a temporary basis for more than 30 days (54 and 35 days).

In addition, the state continues to strive to reduce the number of children experiencing two or more temporary placements. During Period 29, 12 of 228 (5%) of children were placed in two or more temporary facilities within one episode of foster care.

<sup>8</sup> There were 42 instances between July 1 and December 31, 2019 in DeKalb County. There were 28 instances in Fulton County between July 1 and December 31, 2019.

## **IV. OUTCOME MEASURES**

This section provides a listing of the performance for each county and the region on the outcomes required under the Modified Exit Plan, and major findings regarding these measures. It includes a status update on the measures, specifically whether the measure has been attained (or not) or is at risk of being re-designated as an ongoing outcome measure.

As stated in Modified Consent Decree and Exit Plan Section IX.E.1.b., “an ongoing outcome measure can be automatically re-designated as an attained outcome measure in the next reporting period if in the previous three consecutive reporting periods (totaling 18 months)...State Defendant’s improved performance in the first period (as compared to performance in the previous period) and then met or exceeded the measure for the next two reporting periods. An attained outcome measure will be re-designated as an ongoing outcome measure only if both of the following conditions occur: (1) the Accountability Agent finds that the decline in performance is notable, meaning that it was caused by a deterioration in State Defendants’ practice and process that is expected to impact the safety, permanency, or well-being of class members in subsequent periods, and (2) State Defendants do not meet the required threshold for that outcome measure in the next reporting period.”

As discussed in the introductory section, Period 29 was the beginning of atypical external factors brought on by the COVID-19 public health pandemic that greatly impacted the practices and performance of DFCS. These factors have continued through Period 30 and will most likely continue into Period 31. Thus, it is difficult to ascertain whether the resulting outcomes are indicative of well-developed strategy and theory of change vs. circumstances that will no longer exist once the pandemic is controlled through effective vaccinations. Examples of external circumstances include the closure of school systems that comprise a significant proportion of referrals and intakes; the inability to conduct all of the in-person visits as defined by the Consent Decree; juvenile courts adhering to the Supreme Court of Georgia’s emergency order and deciding which hearings to conduct, setting new dates for hearings, or continuing them; and foster homes and service providers who were not prepared or able to provide care for children who have been exposed to or infected by the virus. The result of any of these factors as well as others may artificially accelerate or decelerate the outcomes required under the Consent Decree. Throughout this section, when possible, MTAT offers an analysis as to whether the state should receive credit toward moving outcomes from the category ongoing to attained or whether a decline in performance should be considered in moving outcomes from the category attained to ongoing. In some instances, if outcomes were already under consideration for movement from one category to the other, MTAT may also recommend that the period of observation be extended.

There are several outcome measures that are analyzed annually. Period 29 marks the six-month observation point. The mid-year observation of re-entry rates indicates potential improvement. (This is most likely due to the overall decline in referrals, especially by mandated reporters and intakes). The three annual permanency outcome measures (OM 6, OM 7, and OM 23) are observed to be on track with no early indication of negative impact by pandemic-related changes.

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*Tables 4 and 5* below list each ongoing and attained outcome measure for Period 29, along with the most current observed performance. While the mid-year observation is provided for several annual measures, DFCS has an additional six months to improve its outcomes for children, youth, and families.

Finally, this report contains three appendices. In Appendix A, there is a Measures Grid that identifies each measurable outcome, practice standard, or performance measure required under the Modified Consent Decree and Exit Plan, and then describes the method for producing that metric. Then there is a technical document, Detailed Outcome Measures for Period 29, that provides the numerator and denominator for each metric displayed in *Tables 4 and 5* below and includes additional explanation and/or data that support interpretation of the outcome metric under the Modified Consent Decree and Exit Plan.

Appendix B contains a glossary of common terms that are relevant to Georgia.

Appendix C, new to the monitoring report, includes a sample of COVID-19 related policies, directives and guidance from the state office of DFCS, the Governor's Office, and the Supreme Court of Georgia.

**Kenny A. v. Kemp****Table 4. Period 29 Ongoing Outcome Measures**

| Ongoing Outcome Measures   | Period 28<br>Performance<br>Region 14 | Period 29<br>Performance<br>DeKalb | Period 29<br>Performance<br>Fulton | Period 29<br>Performance<br>Region 14 |
|--|---------------------------------------|------------------------------------|------------------------------------|---------------------------------------|
| <b>Outcome 3:</b> Re-entry into Care: Of all children who enter foster care in a 12-month period who were discharged within 12 months from foster care to reunification (including aftercare), living with a relative, or guardianship no more than <b>8.3%</b> shall have re-entered care within 12 months from the date of discharge. Children who were in foster care for less than eight days are not counted in this measure.   | <b>19.8%</b>                          | 10.2%                              | 17.9%                              | <b>13.5%<sup>9</sup></b>              |
| <b>Outcome 6:</b> At least <b>43.6%</b> of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) between 12 and 23 months shall be discharged from foster care to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child's parents or primary caregiver, living with a relative, guardianship, or adoption.                             | <b>35.5%</b>                          | 18%                                | 17.5%                              | <b>17.8%<sup>10</sup></b>             |
| <b>Outcome 7:</b> At least <b>30.3%</b> of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) for 24 months or more shall be discharged to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child's parents or primary caregiver, living with a relative, guardianship, or adoption.   | <b>38.6%</b>                          | 17.6%                              | 15%                                | <b>16.6%<sup>11</sup></b>             |
| <b>Outcome 12:</b> Caseworker Continuity: At least <b>90%</b> of all children in custody at a point in time during the reporting period shall have had two or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption case manager; case managers who have died, been terminated, promoted, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave | <b>87%</b>                            | 91%                                | 89%                                | <b>90%</b>                            |
| <b>Outcome 14:</b> Visitation (Parent-Child): At least <b>85%</b> of the children with a goal of reunification   | <b>90%</b>                            | 94.3%                              | 96.1%                              | <b>95%</b>                            |

<sup>9</sup> This is a sixth month observation for an annual measure. The sixth month observation in Period 27 was 19.8 percent.<sup>10</sup> This is a sixth month observation for an annual measure. The sixth month observation in Period 27 was 22.8 percent.<sup>11</sup> This is a sixth month observation for an annual measure. The sixth month observation in Period 27 was 30.8 percent.

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| Ongoing Outcome Measures  | Period 28<br>Performance<br>Region 14 | Period 29<br>Performance<br>DeKalb | Period 29<br>Performance<br>Fulton | Period 29<br>Performance<br>Region 14 |
|---|---------------------------------------|------------------------------------|------------------------------------|---------------------------------------|
| shall have had appropriate visitation with their parents to progress toward reunification.  |                                       |                                    |                                    |                                       |
| <b>Outcome 16:</b> Visitation (Between Siblings): Children who have one or more siblings in custody with whom they are not placed shall be provided a visit with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placements is more than 50 miles and the child is placed with a relative. At least <b>90%</b> of the total minimum number of required monthly sibling group visits shall have taken place during the reporting period. Visits among siblings in excess of the required one visit per month shall be excluded when calculating this percentage. | <b>91%</b>                            | 95.7%                              | 98.6%                              | <b>97.1%</b>                          |
| <b>Outcome 17:</b> Education: At least <b>56%</b> of children discharged from foster care at age 18 or older shall have graduated from high school or earned a GED.   | <b>52%</b>                            | N/A                                | N/A                                | <b>N/A</b>                            |
| <b>Outcome 21:</b> Health and Educational Needs: Of children in care at a point in time at the end of the reporting period, according to the service needs documented in the child's most recent case plan:   |                                       |                                    |                                    |                                       |
| <b>Outcome 21b:</b> At least <b>92%</b> shall not have any unaddressed dental needs   | <b>91%</b>                            | 50%                                | 100%                               | <b>60%</b>                            |
| <b>Outcome 21c:</b> At least <b>92%</b> shall not have any unaddressed mental health needs  | <b>94%</b>                            | 67%                                | 100%                               | <b>80%</b>                            |
| <b>Outcome 26:</b> Visitation (Worker-Child): At least <b>96.25%</b> of the total minimum number of monthly <i>private</i> , in-placement visits between case managers and children during the reporting period shall have taken place. Visits in excess of the required one private visit per month shall be excluded when calculating this percentage.  | <b>96.51%</b>                         | 98.58%                             | 99.45%                             | <b>98.94%</b>                         |

**Kenny A. v. Kemp****Table 5. Period 29 Attained Outcome Measures**

| <b>Attained Outcome Measures</b>  | <b>Period 28<br/>Performance<br/>Region 14</b> | <b>Period 29<br/>Performance<br/>DeKalb</b> | <b>Period 29<br/>Performance<br/>Fulton</b> | <b>Period 29<br/>Performance<br/>Region 14</b> |
|---|--|---|---|--|
| <b>Outcome 1:</b> Commencement of CPS Investigations Concerning Foster Children:<br>At least <b>95%</b> of all investigations of reports of abuse or neglect of foster children shall be commenced, including timely face-to-face private contact with the alleged victim, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of the report. | <b>92%</b> <sup>12</sup>                       | 92.1%                                       | 65.2%                                       | <b>77%</b> <sup>13</sup>                       |
| <b>Outcome 2:</b> Completion of CPS Investigations Concerning Foster Children: At least <b>95%</b> of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of the report.  | <b>98%</b>                                     | 100%  | 100%  | <b>100%</b>                                    |
| <b>Outcome 4:</b> Maltreatment in Care: Of all children in foster care during the reporting period, the rate of victimization shall be no more than <b>8.50</b> victims per 100,000 days.   | <b>7.28</b>                                    | 3.49  | 11.24 <sup>14</sup>                         | <b>6.64</b>                                    |
| <b>Outcome 5:</b> Search for Relatives: At least <b>95%</b> of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.   | <b>95%</b>                                     | 95%   | 96%   | <b>95%</b>                                     |
| <b>Outcome 8:</b> Adoption/Guardianship Finalization: For all children whose parental rights are terminated or released during the reporting period (and any appeals completed), at least <b>80%</b> will have their adoptions or guardianships finalized within 12 months of final termination or release of parental rights.  | <b>81%</b>                                     | 85%   | 89%   | <b>87%</b>                                     |
| <b>Outcome 9:</b> Permanency Efforts (15/22): At least <b>95%</b> of all foster children who  | <b>96%</b>                                     | 96%   | 99%   | <b>97%</b>                                     |

<sup>12</sup> Five victim children were involved in one incident in which the daycare bus driver dropped them off at the placement prior to the foster parent returning home. During this period, the state discontinued its State Investigative Unit (SIU) and the lowest percentage of timely commencing investigations was among the perimeter counties.

<sup>13</sup> This overall performance includes investigations conducted by perimeter counties. One investigation was not included in the numerator and denominator for OM 1 and 2 as it was determined to be a 'Do Not Review' case in consultation with the case review team and MTAT. In this instance, the case was initiated in one perimeter county with the response time met. It was subsequently determined that the child's placement was not in that county but another perimeter county, so the investigation was transferred and closed in the original county with the determination 'opened in error'. No complete investigation appeared to have been done and the child is no longer in custody.

<sup>14</sup> Like Period 28, Fulton County experienced a case with a large sibling group of 4 children in the same home that propelled them beyond the threshold.



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| <b>Attained Outcome Measures</b>   | <b>Period 28<br/>Performance<br/>Region 14</b> | <b>Period 29<br/>Performance<br/>DeKalb</b> | <b>Period 29<br/>Performance<br/>Fulton</b> | <b>Period 29<br/>Performance<br/>Region 14</b> |
|--|--|---|---|--|
| reached the point of being in custody for 15 of the prior 22 months shall have had either (a) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable, or (b) documented compelling reasons in the child's case record why termination of parental rights should not be filed.  |  |   |   |  |
| <b>Outcome 10:</b> Sibling Placement: At least <b>80%</b> of all children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings, subject to the following exceptions:<br>(a) doing so is harmful to one or more of the siblings, (b) one or more of the siblings has exceptional needs that can only be met in a specialized program or facility, (c) the size of the sibling group makes such placement impractical notwithstanding diligent efforts to place the group together; or (d) the siblings are placed with relatives. | <b>99%</b>                                     | 100%  | 100%  | <b>100%</b>                                    |
| <b>Outcome 11:</b> Multiple Placement Moves: The rate of placement moves in foster care shall be no more than <b>3.67</b> moves per 1,000 days in foster care.   | <b>3.18</b>                                    | 3.31  | 3.51  | <b>3.39</b>                                    |
| <b>Outcome 13:</b> Visitation (Worker-Child): At least <b>96.25%</b> of the total minimum number of one in-placement visit per month and one additional private visit per month between case managers and children during the reporting period shall have taken place. Visits in excess of this required minimum of one in-placement and one private visit per month shall be excluded when calculating this percentage.   | <b>97.61%</b>                                  | 98.7%                                       | 99.53%                                      | <b>99.1%</b>                                   |
| <b>Outcome 15:</b> Visitation (Worker-Caregiver): DFCS placement case managers shall visit each child's foster parent, group care setting, or other caregiver setting at least one time each month. At least <b>95%</b> of the total minimum number of required monthly visits by placement case managers to caregivers during the reporting period shall have taken place. Visits to any caregiver with respect to the same child in excess of the  | <b>96%</b>                                     | 98.1%                                       | 98.8%                                       | <b>98.4%</b>                                   |



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| <b>Attained Outcome Measures</b>  | <b>Period 28<br/>Performance<br/>Region 14</b> | <b>Period 29<br/>Performance<br/>DeKalb</b> | <b>Period 29<br/>Performance<br/>Fulton</b> | <b>Period 29<br/>Performance<br/>Region 14</b> |
|---|--|---|---|--|
| required one visit per month shall be excluded when calculating this percentage   |  |   |   |  |
| <b>Outcome 18:</b> Placements Not in Full Approval Status: At least <b>98%</b> of all foster placements serving class member children shall be in full approval and/or licensure status. In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.   | <b>92%</b> <sup>15</sup>                       |   |   | <b>92%</b>                                     |
| <b>Outcome 19:</b> Six-Month Case Plan Review: At least <b>95%</b> of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.   | <b>99%</b>                                     | 89%   | 97%   | <b>92%</b>                                     |
| <b>Outcome 20:</b> Permanency Hearing: At least <b>95%</b> of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing. | <b>98%</b>                                     | 100%  | 96%   | <b>98%</b>                                     |
| <b>Outcome 21a:</b> At least <b>92%</b> shall not have any unaddressed medical needs  | <b>94%</b>                                     | 71%   | 60%   | <b>67%</b>                                     |
| <b>Outcome 21d:</b> At least <b>92%</b> shall not have any unaddressed education/development needs.   | <b>94%</b>                                     | 63%   | 100%  | <b>73%</b>                                     |
| <b>Outcome 22:</b> Corporal Punishment: At least <b>98%</b> of all foster homes will not have an incident of corporal punishment (any physical punishment of a child that inflicts pain) within the previous 12 months.   | <b>100%</b>                                    |   |   | <b>99%</b>                                     |

<sup>15</sup> The highest number of placements are with private providers. These placements had the lowest percentage of approvals.

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| <b>Attained Outcome Measures</b>  | <b>Period 28<br/>Performance<br/>Region 14</b> | <b>Period 29<br/>Performance<br/>DeKalb</b> | <b>Period 29<br/>Performance<br/>Fulton</b> | <b>Period 29<br/>Performance<br/>Region 14</b> |
|---|--|---|---|--|
| <b>Outcome 23:</b> Timely Discharge to Permanency: Of all children who enter foster care in a 12-month period, at least <b>40.5%</b> shall be discharged to permanency within 12 months of entering foster care. Permanency, for the purposes of this measure, includes reunification with the child's parents or primary caregivers, living with a relative, guardianship, or adoption.  | <b>41.0%</b>                                   | 31.1%                                       | 44.1%                                       | <b>37%<sup>16</sup></b>                        |
| <b>Outcome 24:</b> Adoption Disruptions: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.  | <b>0%</b>                                      | 0%  | 0%  | <b>0%</b>                                      |
| <b>Outcome 25:</b> Placement Within County: At least <b>90%</b> of all children at a point in time during the reporting period shall be placed in the county from which they were removed or within a 50-mile radius of the home from which they were removed. This measure is subject to the following exceptions: a) the child's needs are so exceptional that they cannot be met by a family or facility meeting these geographical restrictions, b) the child is placed through the ICPC consistent with its terms, c) the child is appropriately placed with relatives, or d) the child is in an adoptive placement with a prospective adoptive family pursuant to an appropriate placement agreement, but before the entry of the adoption decree by the court. | <b>94%</b>                                     |   |   | <b>96%</b>                                     |
| <b>Outcome 27:</b> Court Orders: At least <b>95%</b> of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.   | <b>93%</b>                                     | 89%   | 88%   | <b>88%<sup>17</sup></b>                        |
| <b>Outcome 28:</b> Capacity Limits: No more than <b>10%</b> of all foster home placements serving class member children at any time during the reporting period shall exceed the following capacity limits: a) no placement shall result in more than three   | <b>0%</b>                                      |   |   | <b>0%</b>                                      |

<sup>16</sup> This is a sixth month observation for an annual measure. The sixth month observation in Period 27 was 40.9 percent.

<sup>17</sup> After the case file review, the state searched for and uploaded missing court orders. Once uploaded, the percentage increased to 98 percent.

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| <b>Attained Outcome Measures</b>   | <b>Period 28<br/>Performance<br/>Region 14</b> | <b>Period 29<br/>Performance<br/>DeKalb</b> | <b>Period 29<br/>Performance<br/>Fulton</b> | <b>Period 29<br/>Performance<br/>Region 14</b> |
|--|--|---|---|--|
| foster children in a foster home, or a total of six children in the home, including the foster family's biological and/or adopted children, without the written approval of the County Director, and b) no placement will result in more than three children under the age of three in a foster home. The only exception to these capacity limits shall be the placement of a sibling group in a foster home with no other children in the home. |  |   |   |  |
| <b>Other Consent Decree Requirements</b>   |  |   |   |  |
| 4x4 Visitation.  | <b>45%</b>                                     | 23%   | 62%   | <b>43%</b>                                     |
| (VI.G.1) Recurrence of Maltreatment.   | <b>2.53%</b>                                   | 3.97  | 3.24  | <b>3.63<sup>18</sup></b>                       |
| (VI.G.2) Number of children who were victims of a second substantiated investigation within 12 months of FSS case.   | <b>2.2%</b>                                    | 2.3%  | 2.1%  | <b>2.13%<sup>19</sup></b>                      |

<sup>18</sup> Data incomplete. Recurrence may occur until the end of 2020.

<sup>19</sup> Data incomplete. Recurrence may occur until the end of 2020.

## ***Major Findings and Changes in Performance – Outcome Measures***

### **1. The Region met the required threshold for the continuity of case managers assigned to children in foster care.**

For all children in custody at a point in time during Period 29, 90 percent had two or fewer DFCS placement case managers during the prior 12 months in custody. This measure is a key factor for achieving timely permanency. The Region was doing well on this measure during Period 24-25, and then began to face challenges, falling just shy of the requirements in Period 26 and 27. Several external factors may have positively impacted this outcome in Period 29, including: fewer children in foster care; virtual approaches to visitation and court hearings, lessening and freeing up “waiting” time for other tasks; and fewer case managers resigning from their jobs due to a downturn in the economy during a health pandemic. However, these factors should not mitigate the Region’s efforts toward strong case management, staff development and support, and maintaining morale during a public health crisis.

The current level of staffing seems adequate to enable the Region to meet its overall requirements. Fulton County has staffing needs on the front end of the system in CPS. If not addressed, this may result in more children entering care. DeKalb County has staffing needs on the back end of the system in Permanency. If not addressed, this may result in fewer children exiting care. The overall impact would be more children in foster care and higher caseloads for case managers, which will reverse the current trends observed during Period 29. Moreover, MTAT continues to express concern regarding the need for a strategic hiring and onboarding plan that will precede children returning to in-person educational and other settings that will increase the number of referrals and intakes into foster care.

### **2. The Region improved its performance across all visitation outcome measures.**

The Region increased the number of visits between case managers and children (OM 13) and between case managers and caregivers (OM 15). These two measures were already in the attained category and the Region should be commended for its continuing improvement.

The Region also increased the number of visits in the remaining three visitation outcomes; visits between case managers and children in placements; visits for siblings placed in separate care settings; and visits between children and their parents. During Period 29, the state issued guidance for conducting virtual visits due to the health pandemic. (The policy can be reviewed in Appendix C). This guidance was based on the guidance from the Administration on Children Youth and Families that approved virtual visits in the place of in-person visits. The counties continued in-person visits for cases that required special attention, trouble-shooting or other factors. The staff was provided limited personal protective equipment (PPE) and instructed to conduct visits from outside the house when possible.

While the acceptance of virtual visits made meeting the demand of multiple visits per month more doable, it should be noted that the Region has been on an upward trend in meeting each of these measures since Period 26. In fact, each of these measures improved from Period 26 to 27 and met the requirements in Periods 28 and now Period 29. Thus, they are eligible to move from the ongoing to the attained category of outcome measures.

The impact of the health pandemic will most likely continue through Periods 30 and 31. When the parties renegotiated its Exit Plan and Consent Decree, they agreed to correlate the analysis of outcomes to federal measures when possible. Since the federal government is accepting virtual visits in lieu of in-person visits, MTAT is recommending that OM 14, OM 16, and OM 26 be moved to the attained category. During Periods 30 and 31, new targeted case file reviews will be implemented to analyze the quality of virtual visits.

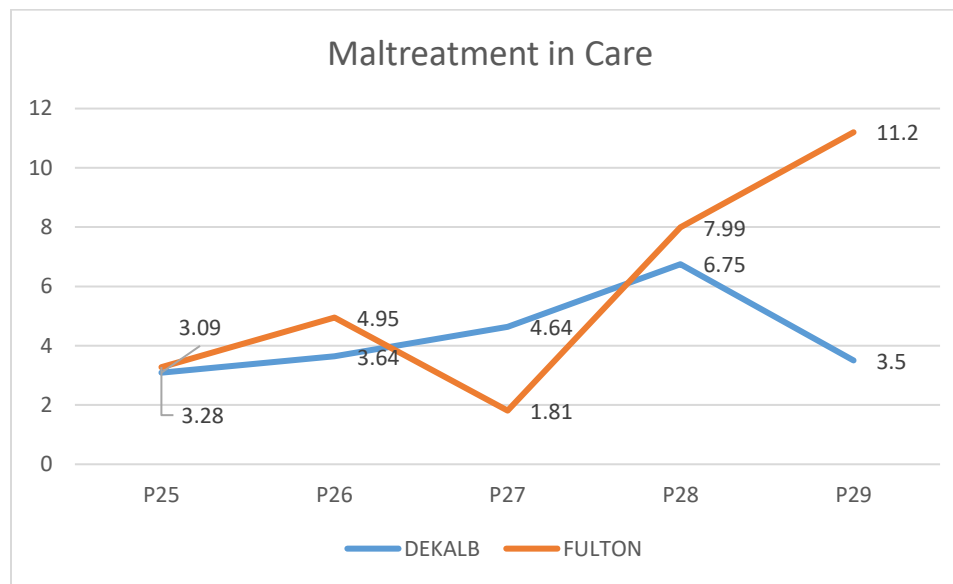
**3. Court related outcome measures were impacted by the closure of Juvenile Courts during the health pandemic; however, the percentage of cases that held permanency hearings and finalized adoptions remained high.**

Prior to the pandemic, the Region was consistently achieving the six-month reviews and permanency hearings required under the Consent Decree. When the court system shut down in March 2020, the ability to hold six-month review hearing became a challenge. The court systems prioritized severe abuse cases, adjudication, and permanency hearings as they began sparsely scheduling in-person hearings and implementing a virtual hearing platform. Thus, MTAT is not recommending that OM 19 be examined for potential movement back to the on-going category.

While OM 27, requiring valid court orders with required findings, was also likely impacted by the pandemic and closure of the court systems, this outcome has been a challenge for the region and the state. During Period 29, the percentage of court orders meeting the requirements fell from 93 percent to 88 percent, further away from the 95 percent threshold. This is the second reporting period in which the Region has not met the requirement of this attained outcome. MTAT is recommending one more monitoring period, before recommending that this measure be returned to the ongoing category of outcomes. This may allow the analysis to consider the potential impact of the court system's transitions due to the pandemic during Period 29.

**4. While the three outcome measures relating to maltreatment in care are in the attained category, some observations on this most recent period warrant close monitoring of practice moving forward.**

The region has done a great job at continuing to meet the requirement for completing maltreatment in care investigations within 45 days (Outcome Measure 2). In fact, 63 of the 68 (92.6%) investigations conducted in Period 29 were completed within 30 days. The region has also continued to meet the threshold for substantiated maltreatment in care investigations (Outcome Measure 4), though when looking at the breakdown of those in DeKalb versus Fulton, differences emerge.

**Figure 1: Maltreatment in Care**

The substantiation rate in Fulton County has increased since Period 27 and actually rose above the 8.5 threshold in Period 29. This trend should continue to be monitored in upcoming periods. COVID-19 does not appear to have had made a significant impact on the region's ability to meet the response time for maltreatment in care investigations, which experienced a significant decrease in Period 29. Five of the 19 children who did not meet the 24-hour response time had dates of referrals after the pandemic impacted normal operations in March of 2020. Some differences emerge when looking at the investigating counties. Two of the 19 children not meeting the standard were investigated by DeKalb County compared to seven of the 19 children investigated by Fulton County, though it should be pointed out that five of these children were a sibling group, and the response was within 26 hours as opposed to 24. The remaining 11 children not meeting the response time were investigated in perimeter counties. However, DFCS identified that not meeting response times was not a fault of the investigating counties, and more of an issue of foster care not making the CPS report timely, causing delays in being able to meet the response time within 24 hours of the referral to the Hotline.

##### **5. Meeting the identified medical, dental educational and mental health needs of children in care greatly impacted by the pandemic related closures of offices.**

The ability of doctors, dentists, and other providers to operate at normal capacity was greatly diminished during the public health pandemic. Thus, while the performance declined across all four of the Outcome 21 components (health, dental, educational, and mental health), MTAT is recommending that Period 29 be considered an anomaly and not counted against the department. During Period 30, more of these providers began resuming regular hours of operation. By Period 31, the ability to analyze the Department's efforts should be more accurate. MTAT will closely monitor this progression.

## **APPENDIX A – METRICS UNDER THE MODIFIED EXIT PLAN**

This Appendix contains two tables summarizing the metrics under the Modified Exit Plan, and the methods for generating each of them.

*Table A-1* is a Measures Grid that identifies each measurable outcome, practice standard, or performance measure required under the Modified Exit Plan, and then describes the method for producing that metric.

*Table A-2* is a technical document, Detailed Outcome Measures Period 29, that provides the numerator and denominator for each metric displayed in *Tables 4 and 5* above and includes additional explanation and/or data that support interpretation of the outcome metric under the Modified Consent Decree and Exit Plan. It also contains additional technical explanations, and/or historical data that provides context for reviewing and interpreting Period 28 performance data.

*Tables A-3 through A-8* provide caseload data as reported from the state.

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome  | Notes  | Measurement Method   | Data Produced by...                               |
|----------------|---|--|--|---|
| <b>IV.B.1a</b> | No child shall be placed in a temporary facility or any other foster home or group facility bed used on any temporary basis, for more than 30 days.                           | Jails, runaways, hospitals, PRTFs, respite care will not be considered temporary. Placement type "other resource" and placement category of hotels, receiving homes, office stays. | Number of in care at the start of the period and number of children deprived during the period: How many were placed in a temporary facility for more than 30 days during the period.              | State Data Unit & Kenny A. Team                   |
| <b>IV.B.1b</b> | Children shall not be placed in more than one temporary facility within one episode of foster care.   | Jails, runaways, hospitals, PRTFs, respite care will not be considered temporary. Placement type "other resource" and placement category of hotels, receiving homes, office stays. | By calendar year cohorts (year of entry), how many enterers had more than one temporary placement episode EXCLUDING any temporary placement following a runaway episode. Follow cohorts over time. | State Data Unit & Kenny A. Team                   |
| <b>IV.B.1c</b> | No child shall spend more than 23 consecutive hours in county DFCS office. Any child who spends time in county DFCS office between 8 pm- 8 am shall be reported to the MTAT.  |  | Weekly documentation by county; reported to the MTAT   | Kenny A teams                                     |
| <b>IV.B.1d</b> | Hotel use for class members to end by June 30, 2017.  | Number of distinct children;<br>Number of distinct episodes;<br>Number of nights.  | Region 14 tracks and reports weekly to the MTAT.<br>All data originates from SHINES.   | Kenny A Team with verification by State Data Unit |
| <b>IV.B.2b</b> | No child under six shall be placed in group care setting.   | No changes.  | Tracked with Congregate Care Report  | State Data Unit                                   |
| <b>IV.B.2c</b> | No child between ages of 6-12 shall be placed in group care setting.  | No changes.  | Tracked with Congregate Care Report<br>State Data Unit   | State Data Unit                                   |
| <b>IV.B.3</b>  | Race/Ethnicity /religion shall not be basis for delay or denial of placement. DFCS shall not contract with private provider that gives preference based on race/eth/religion. |  |  |   |
| <b>IV.B.4</b>  | DFCS to ensure basic physical needs of food, clothing, and shelter are met. Clothing to be reviewed with every placement / placement change.                                  |  |  | Kenny A. Case Review Team                         |



**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec                  | Standard/Outcome   | Notes   | Measurement Method   | Data Produced by...   |
|----------------------|--|---|--|---|
| IV.B.5               | In placement visitation: four in four for new placements; monthly thereafter. There should be at least one in-placement visit and one private, face-to-face.   | Drop children in care for only one week.<br>-measure one in placement visit for all in first week<br>-measure four for all the placement for four weeks.                    | Number of new placements with one visit in one week; four in four weeks.   | State Data Unit supplies list; Kenny A Team reviews performance |
| V.A                  | CPS caseloads – no more than 12 cases.   | No change.  | Generated weekly as part of CAP reports after getting data from each county  | State Data Unit & Kenny A. Team                                 |
| V.B                  | Family Preservation and Family Support caseloads– no more than 17.   | No change.<br>Weights are applied to produce equivalence for caseworkers with mixed caseloads.  | Counts of Caseworkers, by program at end of period   |   |
| V.C                  | Placement caseloads – no more than 15.   |   | Counts of cases assigned to verified case managers   |   |
| V.D                  | Adoption caseloads – no more than 16.  |   |  |   |
| V.E                  | Specialized caseloads - no more than 12.   |   |  |   |
| V.F                  | Supervisor – no more than five CM.   |   |  |   |
| VI.A.1 <sup>20</sup> | At least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, including timely face-to-face private contact with the alleged victim, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of the report. | NOTE: There is a change here b/c old OM one and three have been combined. Those two outcomes used two different denominators (child/inv). New metric is at the child level. | Denominator: Children in foster care who are alleged victims of maltreatment<br>Numerator: Number of child- investigations that started within 24 hours of referral<br>Numerator: Number of children w/ face to face w/in 24 hours | Kenny A Case Review Team  |
| VI.A.2               | At least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of the report.   | No change.<br>Effective 7/1/2017 – the standard became 45 days  | Denominator: Number of MIC investigations referred in the PUR<br>Numerator: Number of MIC investigations completed within 30 (45) days of receipt  | Kenny A Case Review Team  |

<sup>20</sup> The current VI.A measures are the ongoing measures.

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec           | Standard/Outcome  | Notes   | Measurement Method   | Data Produced by...  |
|---------------|---|---|--|--|
| <b>VI.A.3</b> | Re-entry Into Care: Of all children who enter foster care in a 12-month period who were discharged within 12 months from foster care to reunification (including aftercare), living with a relative, or guardianship no more than 8.3% shall have re-entered care within 12 months from the date of discharge.  | CFSR 3 measure.<br>Children in care for less than eight days are dropped from outcome measure.<br>SDU will report CY 2014-2016.<br><br>Reporting for period 23 will start with first half of year, and then be completed for Period 24. | Denominator: CY entries, duration greater than eight days that exited to permanency within one year of entry.<br>Numerator: Those who reentered w/in year of exit date.              | State Data Unit  |
| <b>VI.A.4</b> | Maltreatment in care: Of all children in foster care during the reporting period, the rate of victimization shall be no more than 8.50 victims per 100,000 days.  | CFSR 3 measure.<br>All substantiated of maltreatment in care regardless of perpetrator, are included.<br><br>Report at six and 12 months.   | Denominator: all days for every child in care for a least one day in the period.<br>Numerator: every substantiated maltreatment episode in period.                                   | State Data Unit<br>generates list for<br>Kenny A case<br>reviewers to review |
| <b>VI.A.5</b> | Search for Relatives: At least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.  | No change.  | Denominator: children in placement sample who are in first 60 days of placement.<br>Numerator: number of children in denominator whose files show clear evidence of diligent search. | Kenny A Case<br>Review Team  |
| <b>VI.A.6</b> | At least 43.6% of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) between 12 and 23 months shall be discharged from foster care to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child's parents or primary caregiver, living with a relative, guardianship, or adoption. | CFSR 3 measure.<br>Report at six and 12 months<br>SDU will report CY 2014-2016.   | Denominator: All children in care on first day of CY who had been in care for 12-23 months.<br>Numerator: # who achieved permanency w/in calendar year.                              | State Data Unit  |
| <b>VI.A.7</b> | At least 30.3% of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) for 24 months or  | CFSR 3 measure<br>Report at six and 12 months   | Denominator: All children in care on first day of CY who had been in care for 24+ months.  | State Data Unit  |

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome  | Notes  | Measurement Method  | Data Produced by... |
|----------------|---|--|---|---------------------|
|                | more shall be discharged to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child's parents or primary caregiver, living with a relative, guardianship, or adoption.  | SDU will report CY 2014-2016.  | Numerator: # who achieved permanency w/in calendar year.  |                     |
| <b>VI.A.8</b>  | Adoption/Guardianship Finalization: For all children whose parental rights are terminated or released during the reporting period (and any appeals completed), at least 80% will have their adoptions or guardianships finalized within 12 months of final termination or release of parental rights.   | No change.   | Denominator: Children TPR'd during the most recent six-month period for whom 12 months can be observed.<br>Numerator: Those in the denominator who were adopted/reached guardianship during the period. | Kenny A Team        |
| <b>VI.A.9</b>  | Permanency Efforts (15/22): At least 95% of all foster children who reached the point of being in custody for 15 of the prior 22 months shall have had either (a) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable, or (b) documented compelling reasons in the child's case record why termination of parental rights should not be filed.   | No change.   | Denominator: Eligible children who have been in care 15-22 months in the period.<br>Numerator: Those who have had TPR filed OR a documented compelling reason not to.                                   | Kenny A Team        |
| <b>VI.A.10</b> | Sibling placement: At least 80% of all children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings, subject to the following exceptions:<br>(a) doing so is harmful to one or more of the siblings, (b) one or more of the siblings has exceptional needs that can only be met in a specialized program or facility, (c) the size of the sibling group makes such placement impractical notwithstanding diligent efforts to place the group | No change to method, add large sibling groups of four or more to exclusions. | Denominator: children with siblings who were in care or who had exited by end of period.<br>Numerator: placed together on last day of period OR if they discharged, were together at discharge.         | Kenny A Team        |

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome   | Notes  | Measurement Method   | Data Produced by...  |
|----------------|--|--|--|--|
|                | together; or (d) the siblings are placed with relative.  |  |  |  |
| <b>VI.A.11</b> | Multiple Placement Moves: The rate of placement moves in foster care shall be no more than 3.67 moves per 1,000 days in foster care.   | CFSR 3 measure<br>Adjusted standard to reflect history of in care and admits SDU will report CY 2014-2016.<br>Children in care less than eight days are dropped. | Denominator: All days by children who were served during the period.<br>Numerator: All moves, excluding DJJ, respite, jail, AWOL, hospitals. | State Data Unit  |
| <b>VI.A.12</b> | Caseworker Continuity: At least 90% of all children in custody at a point in time during the reporting period shall have had two or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption case manager; case managers who have died, been terminated, promoted, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave | No change to method, Promoted caseworkers are now excepted.  | Denominator: All children in care at end of the period.<br>Numerator: number of those with LE 2 case managers.                               | Kenny A Team   |
| <b>VI.A.13</b> | Visitation (Worker-Child): At least 96.25% of the total minimum number of one in-placement visit per month and one additional private visit per month between case managers and children during the reporting period shall have taken place. Visits in excess of this required minimum of one in-placement and one private visit per month shall be excluded when calculating this percentage.   | No change  | Denominator: All visits required for children in care during the period<br>Numerator: All of the visits that occurred during period.         | State Data Unit<br>supplies list; Kenny A Team reviews performance |
| <b>VI.A.14</b> | Visitation (Parent-Child): At least 85% of the children with a goal of reunification shall have had appropriate visitation with their parents to progress toward reunification   | No change  | Denominator: All visits required for children in care during the period.<br>Numerator: All of the visits that occurred during period.        | State Data Unit<br>supplies list; Kenny A Team reviews performance |
| <b>VI.A.15</b> | Visitation (Worker-Caregiver): DFCS placement case managers shall visit each child's foster  | No change  | Denominator: All visits required for children in care during the period.   | State Data Unit<br>supplies list; Kenny A                          |

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome  | Notes   | Measurement Method  | Data Produced by...   |
|----------------|---|---|---|---|
|                | parent, group care setting, or other caregiver setting at least one time each month. At least 95% of the total minimum number of required monthly visits by placement case managers to caregivers during the reporting period shall have taken place. Visits to any caregiver with respect to the same child in excess of the required one visit per month shall be excluded when calculating this percentage   |   | Numerator: All of the visits that occurred during period.   | Team reviews performance  |
| <b>Vi.A.16</b> | Visitation (Between Siblings): Children who have one or more siblings in custody with whom they are not placed shall be provided a visit with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placements is more than 50 miles and the child is placed with a relative. At least 90% of the total minimum number of required monthly sibling group visits shall have taken place during the reporting period. Visits among siblings in excess of the required one visit per month shall be excluded when calculating this percentage. | No change   | Denominator: All visits required for children in care during the period.<br>Numerator: All of the visits that occurred during period. | State Data Unit supplies list; Kenny A Team reviews performance |
| <b>VI.A.17</b> | Education: At least 56% of children discharged from foster care at age 18 or older shall have graduated from high school or earned a GED.   | No change in method. Include in the numerator qualifying youth who have an IEP or 504 plan who achieved a special ed diploma prior to exit. | Denominator: youth 18+ who were discharged during the year.<br>Numerator: number who have graduated or who have GED.                  | Kenny A Team  |

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome  | Notes  | Measurement Method   | Data Produced by...  |
|----------------|---|--|--|--|
| <b>VI.A.18</b> | Placements Not in Full Approval Status: At least 98% of all foster placements serving class member children shall be in full approval and/or licensure status. In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.   | No change in method<br>Only include children who have been in unapproved home for 30 days.<br>Break out by relative, public, and private foster homes. | Denominator: placements with child at end of period.<br>Numerator: number of placements fully approved.  | State Data Unit provides list, Kenny A Team reviews and develops measure |
| <b>VI.A.19</b> | Six-Month Case Plan Review: At least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review  | No Change  | Denominator:<br>Numerator:   | Kenny A Team, including case review team                                 |
| <b>VI.A.20</b> | Permanency Hearing: At least 95% of foster children in custody for twelve or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing. | No Change  | Denominator:<br>Numerator:   | Kenny A Team, including case review team                                 |
| <b>VI.A.21</b> | Health/Educational Needs. Of children in care at a point in time at end of reporting period, 92 percent shall have met each need documented in most recent plan: Medical, Dental, Mental Health, Educational.   | No change in method<br>Standard changed.   | Denominator: For each area, number of children from placement case review with identified need.<br>Numerator: Number of children in each denominator for whom there is evidence that need was addressed. | Kenny A case review team   |

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec                         | Standard/Outcome  | Notes   | Measurement Method   | Data Produced by...  |
|-----------------------------|---|---|--|--|
| <b>VI.B.<sup>21</sup>22</b> | Corporal Punishment: At least 98% of all foster homes will not have an incident of corporal punishment (any physical punishment of a child that inflicts pain) within the previous 12 months.   | No Change   | Denominator: All foster homes in the sample.<br>Numerator: instances of Corporal Punishment.   | Kenny A case review team   |
| <b>VI.B.23</b>              | Timely Discharge to Permanency: Of all children who enter foster care in a 12-month period, at least 40.5% shall be discharged to permanency within 12 months of entering foster care. Permanency, for the purposes of this measure, includes reunification with the child's parents or primary caregivers, living with a relative, guardianship, or adoption.  | CFSR measure;<br>SDU will report CY 2014-2016.<br><br>Reporting for period 23 will start with first half of year, and then be completed for Period 24.<br><br>Note: numerator is denominator for the reentry measure. | Denominator: All children under 18 entering Region 14 during the CY period.<br>Numerator: Number of children in the denominator who exited to permanency w/in 12 months of entry.                    | State Data Unit  |
| <b>VI.B.24</b>              | Adoption Disruptions: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.   | Dissolution means that a child: 1) been adopted; 2) returned to foster care; and 3) has had a subsequent TPR or surrender from his or her adoptive parents within one year of the adoption finalization.              | Denominator: Adoptions completed during the most recent six-month period for whom 12 months can be observed.<br>Numerator: Dissolutions w/in one year.   | State Data Unit generates list for Kenny A Team to review                |
| <b>VI.B.25</b>              | Placement Within County: At least 90% of all children at a point in time during the reporting period shall be placed in the county from which they were removed or within a 50-mile radius of the home from which they were removed. This measure is subject to the following exceptions: (a) the child's needs are so exceptional that they cannot be met by a family or facility meeting these geographical restrictions, (b) the child is placed through the ICPC consistent with its terms, (c) the | Changed to rely on SHINES data and to cover full class.   | Denominator: All children in placement on the last day of the period.<br>Numerator: Children in the denominator who were either placed in home court, or who were placed within 50 miles of removal. | State Data Unit provides list, Kenny A Team reviews and develops measure |

<sup>21</sup> VI.B metrics are currently Attained Outcomes.

**Kenny A. v. Kemp****Table A-1: Measures Grid**

| Sec            | Standard/Outcome  | Notes  | Measurement Method  | Data Produced by...  |
|----------------|---|--|---|--|
|                | child is appropriately placed with relatives, or (d) the child is in an adoptive placement with a prospective adoptive family pursuant to an appropriate placement agreement, but before the entry of the adoption decree by the court.   |  |   |  |
| <b>VI.B.26</b> | Visitation (Worker-Child): At least 96.25% of the total minimum number of monthly private, in-placement visits between case managers and children during the reporting period shall have taken place. Visits in excess of the required one private visit per month shall be excluded when calculating this percentage.  | No change  | Denominator: All visits required for children in care during the period.<br>Numerator: All of the visits that occurred during period.                                 | State Data Unit supplies list; Kenny A Team reviews performance          |
| <b>VI.B.27</b> | Court Orders: At least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.   | No change  | Denominator: Case review sample.<br>Numerator: All children in denominator who have document court order language.  | Case review  |
| <b>VI.B.28</b> | Capacity Limits: No more than 10% of all foster home placements serving class member children at any time during the reporting period shall exceed the following capacity limits: a) no placement shall result in more than three foster children in a foster home, or a total of six children in the home, including the foster family's biological and/or adopted children, without the written approval of the County Director, and b) no placement will result in more than three children under the age of three in a foster home. The only exception to these capacity limits shall be the placement of a sibling group in a foster home. | No change<br><br>This only includes approved foster homes. | Denominator: Foster homes with one or more children in their home on the last day of the period.<br>Numerator: Number of foster homes that exceed the capacity limit. | State Data Unit provides list, Kenny A Team reviews and develops measure |



**Kenny A. v. Kemp****Table A-1: Measures Grid**

| <b>Sec</b>     | <b>Standard/Outcome</b>   | <b>Notes</b>   | <b>Measurement Method</b>   | <b>Data Produced by...</b> |
|----------------|---|--|---|----------------------------|
| <b>VII.G.1</b> | Of children in each county during prior two reporting periods who experienced substantiated maltreatment, the number who were victims of a second substantiated maltreatment report during the following 12 months. | Use earliest report and first subsequent report following.     | Denominator: Number of children who had substantiated report during the prior year.<br>Numerator: Number of children in the denominator who were subjects of a substantiated report within 12 months of the first report. | State Data Unit            |
| <b>VII.G.2</b> | Of cases that were referred to FSS, the number and percent for which there was a subsequent substantiated referral w/in 11-365 days of the FSS referral.  | FSS can mean any alternative to opening a CPS case or removal. | Denominator: Number of children referred to FSS in a prior 12-month period.<br>Numerator: Number of those who had substantiated report w/in 11-365 days of the referral.  | State Data Unit            |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|        | Outcome  | Numerator  | Denominator  | Metric   |  |        |         |
|--------|--|--|--|--|--|--------|---------|
| VI.A.1 | At least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, including timely face-to-face private contact with the alleged victim, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of the report.   | DeKalb: 15<br>Fulton: 15<br>Perimeter: 35<br>Total: 65 | DeKalb: 16<br>Fulton: 22<br>Perimeter: 46<br>Total: 84 | DeKalb: 93.8%<br>Fulton: 68.2%<br>Perimeter: 76.1%<br>Total: 77.4% |  |        |         |
|        | *One investigation was not included in the numerator and denominator for OM 1 and 2 as it was determined to be a 'Do Not Review' case in consultation with the case review team and MTAT. In this instance, the case was initiated in one perimeter county with the response time met. It was subsequently determined that the child's placement was not in that county but another perimeter county, so the investigation was transferred and closed in the original county with the determination 'opened in error'. No complete investigation appeared to have been done and the child is no longer in custody.   |  |  |  |  |        |         |
| VI.A.2 | At least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 45 days of receipt of the report.   | DeKalb: 13<br>Fulton: 17<br>Perimeter: 38<br>Total: 68 | DeKalb: 13<br>Fulton: 17<br>Perimeter: 38<br>Total: 68 | DeKalb: 100%<br>Fulton: 100%<br>Perimeter: 100%<br>Total: 100%     |  |        |         |
|        | *One investigation was not included in the numerator and denominator for OM 1 and 2 as it was determined to be a 'Do Not Review' case in consultation with the case review team and MTAT. In this instance, the case was initiated in one perimeter county with the response time met. It was subsequently determined that the child's placement was not in that county but another perimeter county, so the investigation was transferred and closed in the original county with the determination 'opened in error'. No complete investigation appeared to have been done and the child is no longer in custody.   |  |  |  |  |        |         |
| VI.A.3 | Re-entry Into Care: Of all children who enter foster care in a 12-month period who were discharged within 12 months from foster care to reunification (including aftercare), living with a relative, or guardianship no more than 8.3% shall have re-entered care within 12 months from the date of discharge.   |  | DeKalb: 18<br>Fulton: 24<br>Total: 42                  | DeKalb: 177<br>Fulton: 134<br>Total: 311                           | DeKalb: 10.2%<br>Fulton: 17.9%<br>Total: 13.5% |        |         |
|        | This is new measure which relies on the CFSR 3 Reentry methodology. Because that method requires observing children enter, stay at least eight days, exit to permanency within one year, and then reenter from that exit within one year – it is necessary to refer to prior entry cohorts in order to generate the metric. The figures above represent entries to Region 14 from CY 2017. Of them 338 exited to permanency within one year of entry (by 12/2018) and of them, 67 reentered care within one year of exit so far. This could increase because one full year since exit has not yet been observed. The State Unit Generated historical versions of this metric, as well as what is currently observable for the more recent entry cohorts. That performance is provided below – shaded cells contain incomplete data – not enough time has elapsed to fully observe the performance. |  |  |  |  |        |         |
|        | These data were generated by the State Data Unit Oct 2018. For this reason, the 2015 data are the most recent  | Entry Year   | Perm Exit w/in 1 Year                                  | Reentry w/in 6 Mos.  | Reentry win 1 Year                             | 6 Mos. | 12 Mos. |
|        |  | 2014   | 627  | 76   | 109  | 12%    | 17%     |
|        |  | 2015   | 562  | 68   | 95   | 12%    | 17%     |
| 2016   |  | 384  | 47   | 67   | 12%  | 17%    |         |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|        | Outcome   |      |     | Numerator                             |    | Denominator   | Metric                                       |
|--------|---|------|-----|---------------------------------------|----|---|--|
|        | complete cohort and are used for this measure.  | 2017 | 335 | 44                                    | 65 | 13%   | 19%  |
|        |   | 2018 | 228 | 19                                    | 25 | 8%  | 11%  |
| VI.A.4 | Maltreatment in care: Of all children in foster care during the reporting period, the rate of victimization shall be no more than 8.50 victims per 100,000 days.  |      |     | DeKalb: 5<br>Fulton: 11<br>Total: 16  |    | DeKalb: 143,095<br>Fulton: 97,906<br>Total: 241,001 | DeKalb: 3.49<br>Fulton: 11.24<br>Total: 6.64 |
|        | This a new measure which relies on the CFSR 3 methodology. That methodology controls for “exposure time” for the risk of maltreatment by calculating the total number of days that children with a least one day of care in the period experienced. It also counts any substantiated investigation associated with a child in care, regardless of who was the perpetrator of the maltreatment.  |      |     |                                       |    |   |  |
| VI.A.5 | Search for Relatives: At least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.  |      |     | DeKalb: 35<br>Fulton: 22<br>Total: 57 |    | DeKalb: 37<br>Fulton: 23<br>Total: 60               | DeKalb: 95%<br>Fulton: 96%<br>Total: 95%     |
|        | 60 cases were reviewed (32 from DeKalb and 28 from Fulton). Of the 60, 18 were given credit because language was in the court order, and 31 were placed with relatives, 10 had evidence of diligent search in the file.   |      |     |                                       |    |   |  |
| VI.A.6 | Permanency: At least 43.6% of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) between 12 and 23 months shall be discharged from foster care to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child’s parents or primary caregiver, living with a relative, guardianship, or adoption. |      |     | DeKalb: 29<br>Fulton: 24<br>Total: 53 |    | DeKalb: 161<br>Fulton: 137<br>Total: 298            | DeKalb: 18%<br>Fulton: 17.5%<br>Total: 17.8% |
| VI.A.7 | Permanency: At least 30.3% of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) for 24 months or more shall be discharged to permanency within 12 months of the first day of the period. Permanency, for the purposes of this measure includes discharges from foster care to reunification with the child’s parents or primary caregiver, living with a relative, guardianship, or adoption.                     |      |     | DeKalb: 57<br>Fulton: 31<br>Total: 88 |    | DeKalb: 323<br>Fulton: 206<br>Total: 529            | DeKalb: 17.6%<br>Fulton: 15%<br>Total: 16.6% |
| VI.A.8 | Adoption/Guardianship Finalization: For all children whose parental rights are terminated or released during the reporting period (and any appeals completed), at least 80% will have their adoptions or guardianships finalized within 12 months of final termination or release of parental rights.   |      |     | DeKalb: 41<br>Fulton: 24<br>Total: 65 |    | DeKalb: 48<br>Fulton: 27<br>Total: 75               | DeKalb: 85%<br>Fulton: 89%<br>Total: 87%     |
|        | Any exclusions to be noted here.  |      |     |                                       |    |   |  |
| VI.A.9 | Permanency Efforts (15/22): At least 95% of all foster children who reached the point of being in custody for 15 of the prior 22 months shall have had either (a) a petition for the termination of parental rights filed as to both parents or   |      |     | DeKalb: 380<br>Fulton: 313            |    | DeKalb: 397<br>Fulton: 317                          | DeKalb: 96%<br>Fulton: 99%                   |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|                | <b>Outcome</b>  | <b>Numerator</b>                                | <b>Denominator</b>                                  | <b>Metric</b>                                   |
|----------------|---|---|---|---|
|                | legal caregivers as applicable, or (b) documented compelling reasons in the child's case record why termination of parental rights should not be filed.   | Total: 693                                      | Total: 714  | Total: 97%                                      |
| <b>VI.A.10</b> | Sibling placement: At least 80% of all children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings, subject to the following exceptions:<br>(a) doing so is harmful to one or more of the siblings, (b) one or more of the siblings has exceptional needs that can only be met in a specialized program or facility, (c) the size of the sibling group makes such placement impractical notwithstanding diligent efforts to place the group together; or (d) the siblings are placed with relative. | DeKalb: 72<br>Fulton: 19<br>Total: 91           | DeKalb: 72<br>Fulton: 19<br>Total: 91               | DeKalb: 100%<br>Fulton: 100%<br>Total: 100%     |
| <b>VI.A.11</b> | Multiple Placement Moves: The rate of placement moves in foster care shall be no more than 3.67 moves per 1,000 days in foster care.  | DeKalb: 469<br>Fulton: 339<br>Total: 808        | DeKalb: 141,538<br>Fulton: 96,704<br>Total: 238,242 | DeKalb: 3.31<br>Fulton: 3.51<br>Total: 3.39     |
| <b>VI.A.12</b> | Caseworker Continuity: At least 90% of all children in custody at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption case manager; case managers who have died, been terminated, promoted, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave.   | DeKalb: 698<br>Fulton: 438<br>Total: 1,136      | DeKalb: 770<br>Fulton: 490<br>Total: 1,260          | DeKalb: 91%<br>Fulton: 89%<br>Total: 90%        |
| <b>VI.A.13</b> | Visitation (Worker-Child): At least 96.25% of the total minimum number of one in-placement visit per month and one additional private visit per month between case managers and children during the reporting period shall have taken place. Visits in excess of this required minimum of one in-placement and one private visit per month shall be excluded when calculating this percentage.  | DeKalb: 7,518<br>Fulton: 5,254<br>Total: 12,772 | DeKalb: 7,602<br>Fulton: 5,277<br>Total: 12,879     | DeKalb: 98.7%<br>Fulton: 99.53%<br>Total: 99.1% |
| <b>VI.A.14</b> | Visitation (Parent-Child): At least 85% of the children with a goal of reunification shall have had appropriate visitation with their parents to progress toward reunification.   | DeKalb: 1,932<br>Fulton: 1,237<br>Total: 3,169  | DeKalb: 2,035<br>Fulton: 1,287<br>Total: 3,322      | DeKalb: 94.3%<br>Fulton: 96.1%<br>Total: 95%    |
| <b>VI.A.15</b> | Visitation (Worker-Caregiver): DFCS placement case managers shall visit each child's foster parent, group care setting, or other caregiver setting at least one time each month. At least 95% of the total minimum number of required monthly visits by placement case managers to caregivers during the reporting period shall have taken place. Visits to any caregiver with respect to the same  | DeKalb: 4,535<br>Fulton: 3,131<br>Total: 7,666  | DeKalb: 4,607<br>Fulton: 3,164<br>Total: 7,771      | DeKalb: 98.1%<br>Fulton: 98.8%<br>Total: 98.4%  |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|                | Outcome   | Numerator                                  | Denominator                                | Metric   |
|----------------|---|--|--|--|
|                | child in excess of the required one visit per month shall be excluded when calculating this percentage.   |  |  |  |
| <b>VI.A.16</b> | Visitation (Between Siblings): Children who have one or more siblings in custody with whom they are not placed shall be provided a visit with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placements is more than 50 miles and the child is placed with a relative. At least 90% of the total minimum number of required monthly sibling group visits shall have taken place during the reporting period. Visits among siblings in excess of the required one visit per month shall be excluded when calculating this percentage. | DeKalb: 542<br>Fulton: 500<br>Total: 1,042 | DeKalb: 560<br>Fulton: 515<br>Total: 1,075 | DeKalb: 95.7%<br>Fulton: 98.6%<br>Total: 97.1% |
| <b>VI.A.17</b> | Education: At least 56% of children discharged from foster care at age 18 or older shall have graduated from high school or earned a GED.   | N/A  | N/A  | N/A  |
|                | This metric is generated annually in the report covering the period that ends December 31 of each year.   |  |  |  |
| <b>VI.A.18</b> | Placements Not in Full Approval Status: At least 98% of all foster placements serving class member children shall be in full approval and/or licensure status. In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.   | Total: 2,818                               | Total: 3,059                               | Total: 92%                                     |
| <b>VI.A.19</b> | Six-Month Case Plan Review: At least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.   | DeKalb: 39<br>Fulton: 30<br>Total: 69      | DeKalb: 44<br>Fulton: 31<br>Total: 75      | DeKalb: 89%<br>Fulton: 97%<br>Total: 92%       |
| <b>VI.A.20</b> | Permanency Hearing: At least 95% of foster children in custody for twelve or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.   | DeKalb: 32<br>Fulton: 22<br>Total: 54      | DeKalb: 32<br>Fulton: 23<br>Total: 55      | DeKalb: 100%<br>Fulton: 96%<br>Total: 98%      |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|                             | Outcome  | Numerator                                | Denominator                              | Metric                                       |
|-----------------------------|--|--|--|--|
| <b>VI.A.21</b>              | Health/Educational Needs. Of children in care at a point in time at end of reporting period, 92% shall have met each need documented in most recent plan: Medical, Dental, Mental Health, Educational.   | See Below                                |  |  |
|                             | Medical Needs  | DeKalb: 5<br>Fulton: 3<br>Total: 8       | DeKalb: 7<br>Fulton: 5<br>Total: 12      | DeKalb: 71%<br>Fulton: 60%<br>Total: 67%     |
|                             | Dental Needs   | DeKalb: 2<br>Fulton: 1<br>Total: 3       | DeKalb: 4<br>Fulton: 1<br>Total: 5       | DeKalb: 50%<br>Fulton: 100%<br>Total: 60%    |
|                             | Mental Health Needs  | DeKalb: 6<br>Fulton: 6<br>Total: 12      | DeKalb: 9<br>Fulton: 6<br>Total: 15      | DeKalb: 67%<br>Fulton: 100%<br>Total: 80%    |
|                             | Education/Developmental Needs  | DeKalb: 5<br>Fulton: 3<br>Total: 8       | DeKalb: 8<br>Fulton: 3<br>Total: 11      | DeKalb: 63%<br>Fulton: 100%<br>Total: 73%    |
| <b>VI.B.22<sup>22</sup></b> | Corporal Punishment: At least 98% of all foster homes will not have an incident of corporal punishment (any physical punishment of a child that inflicts pain) within the previous 12 months.  | Total: 81%                               | Total: 82%                               | Total: 99%                                   |
| <b>VI.B.23</b>              | Timely Discharge to Permanency: Of all children who enter foster care in a 12-month period, at least 40.5% shall be discharged to permanency within 12 months of entering foster care. Permanency, for the purposes of this measure, includes reunification with the child's parents or primary caregivers, living with a relative, guardianship, or adoption. | DeKalb: 130<br>Fulton: 154<br>Total: 284 | DeKalb: 418<br>Fulton: 349<br>Total: 767 | DeKalb: 31.1%<br>Fulton: 44.1%<br>Total: 37% |
| <b>VI.B.24</b>              | Adoption Disruptions: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.  | DeKalb: 0<br>Fulton: 0<br>Total: 0       | DeKalb: 97<br>Fulton: 50<br>Total: 147   | DeKalb: 0%<br>Fulton: 0%<br>Total: 0%        |
| <b>VI.B.25</b>              | Placement Within County: At least 90% of all children at a point in time during the reporting period shall be placed in the county from which they were removed or within a 50-mile radius of the home from which they were removed. This measure is subject to the following exceptions: (a) the child's  |  |  |  |

<sup>22</sup> VI.B metrics are currently Attained Outcomes.

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|         | Outcome   | Numerator                                      |                   | Denominator                                    | Metric  |
|---------|---|--|-------------------|--|---|
|         | needs are so exceptional that they cannot be met by a family or facility meeting these geographical restrictions, (b) the child is placed through the ICPC consistent with its terms, (c) the child is appropriately placed with relatives, or (d) the child is in an adoptive placement with a prospective adoptive family pursuant to an appropriate placement agreement, but before the entry of the adoption decree by the court.   | Total: 1141                                    |                   | Total: 1194                                    | Total: 96%  |
|         | As noted above, the methodology for this metric changed. Rather than being evaluated through case review, the Data Unit generated a metric using the entire class of children in placement on the last day of the period. To generate the final metric – they considered who in placement on 6/30/2018 was placed in the w/in 50 miles of their removal address, was placed within the same county as their removal county, or qualified for an exception as stipulated in the agreement. The numerator was adjusted upward to reflected both those that met the standard AND those who were exceptions. The reciprocal of the numerator is the measure. See below for the adjustments. |  |                   |  |   |
|         |   | Placed   | Denominator       | Numerator                                      | %   |
|         | Total in Placement on 12/31/2019  | 1,194  | 1,194             | 1,141  | 96%   |
|         |   |  | % of those placed |  |   |
|         | Placed in Same County   | 403  | 34%               | 403  |   |
|         | Placed in Different County  | 791  | 66%               |  |   |
|         | Different county & exception placement  | 163  | 17%               | 163  |   |
|         | Different county  | 722  | 60%               | 722  |   |
|         | Diff county & placed w/in 50 miles  | 575  | 48%               | 575  |   |
|         | Diff county & place greater than 50 miles   | 53   | 4%                | 87   |   |
|         | Diff county, > than 50 miles & exempt   | 13   | 1%                | 13   |   |
|         | Diff county, > than 50 miles & NOT exempt   | 40   | 3%                | 40   |   |
| VI.B.26 | Visitation (Worker-Child): At least 96.25% of the total minimum number of monthly private, in-placement visits between case managers and children during the reporting period shall have taken place. Visits in excess of the required one private visit per month shall be excluded when calculating this percentage.  | DeKalb: 4,577<br>Fulton: 3,172<br>Total: 7,749 |                   | DeKalb: 4,627<br>Fulton: 3,187<br>Total: 7,814 | DeKalb: 98.58%<br>Fulton: 99.45%<br>Total: 98.94% |

**Kenny A. v. Kemp****Table A-2: Detailed Outcome Measures for Period 29**

|                | <b>Outcome</b>   | <b>Numerator</b>                       | <b>Denominator</b>                             | <b>Metric</b>                               |
|----------------|--|--|--|---|
| <b>VI.B.27</b> | Court Orders: At least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.  | DeKalb: 48<br>Fulton: 29<br>Total: 77  | DeKalb: 54<br>Fulton: 33<br>Total: 87          | DeKalb: 89%<br>Fulton: 88%<br>Total: 88%    |
| <b>VI.B.28</b> | Capacity Limits: No more than 10% of all foster home placements serving class member children at any time during the reporting period shall exceed the following capacity limits: a) no placement shall result in more than three foster children in a foster home, or a total of 6 children in the home, including the foster family's biological and/or adopted children, without the written approval of the County Director, and b) no placement will result in more than three children under the age of three in a foster home. The only exception to these capacity limits shall be the placement of a sibling group in a foster. | Total: 0                               | Total: 465                                     | Total: 0%                                   |
| <b>VII.G.1</b> | Recurrence of substantiated investigations: Of children in each county during prior two reporting periods who experienced substantiated maltreatment, the number who were victims of a second substantiated maltreatment report during the following 12 months.  | DeKalb: 20<br>Fulton: 14<br>Total: 34  | DeKalb: 504<br>Fulton: 432<br>Total: 936       | DeKalb: 4.0%<br>Fulton: 3.2%<br>Total: 3.6% |
| <b>VII.G.2</b> | Substantiated investigation following FSS case. Of cases that were referred to FSS, the number and percent for which there was a subsequent substantiated referral w/in 11-365 days of the FSS referral. For Period 25 – partial data are provided.  | DeKalb: 40<br>Fulton: 77<br>Total: 117 | DeKalb: 1,746<br>Fulton: 3,749<br>Total: 5,495 | DeKalb: 2.3%<br>Fulton: 2.1%<br>Total: 2.1% |



**Kenny A. v. Kemp****Table A-3: Case Managers Meeting Caseload Standards in DeKalb County on June 30, 2020**

| Case Manager Function               | Caseload Cap:<br>Number of Cases (Families and Children) |                                   |   | Actual Performance                |      |                                      |      |                                     |
|-------------------------------------|--|-----------------------------------|---|-----------------------------------|------|--------------------------------------|------|-------------------------------------|
|                                     |  | Number of Active Staff on 6/30/20 | Number of Active, On-leave Staff on 6/30/20 | Meeting Caps on Assigned Caseload |      | Not Meeting Cap on Assigned Caseload |      | Cases to be Assigned by Supervisors |
|                                     |  |                                   |   | Number                            | %    | Number                               | %    | Number                              |
| CPS Investigations                  | 12 families  | 32                                |   | 32                                | 100% | 0                                    | 100% | 5                                   |
| Family Preservation                 | 17 families  | 8                                 |   | 8                                 | 100% | 0                                    | 0%   | 3                                   |
| Permanency Case Manager             | 15 children  | 30                                |   | 11                                | 37%  | 19                                   | 63%  | 0                                   |
| Specialized Case Manager            | 12 children  | 28                                |   | 13                                | 46%  | 15                                   | 54%  | 0                                   |
| Adoption Case Manager <sup>23</sup> | 16 children  | NA                                |   |                                   |      |                                      |      |                                     |
| Total                               |  | 98                                |   | 64                                | 65%  | 34                                   | 35%  | 8                                   |

**Table A-4: DeKalb County Supervisory Ratios on June 30, 2020**

| Program/Service Area  | Number of Units | Meeting 1 to 5 Ratio |         | Not Meeting 1 to 5 Ratio |         |
|---|-----------------|----------------------|---------|--------------------------|---------|
|   | Total           | Number               | Percent | Number                   | Percent |
| Child Protective Services (Investigations and Family Preservation)      | 10              | 10                   | 100%    | 0                        | 0%      |
| Permanency Case Managers (Regular and Specialized) (includes Adoptions) | 15              | 15                   | 100%    | 0                        | 0%      |

<sup>23</sup> All adoptions caseloads are included in the specialized and permanency totals. There were 12 adoptions case managers in DeKalb on this date.

**Kenny A. v. Kemp****Table A-5: Case Managers Meeting Caseload Standards in Fulton County on June 30, 2020**

| Case Manager Function               | Caseload Cap: Number of Cases (Families and Children) |                                   |   | Actual Performance                |      |                                      |     |                                     |
|-------------------------------------|---|-----------------------------------|---|-----------------------------------|------|--------------------------------------|-----|-------------------------------------|
|                                     |   | Number of Active Staff on 6/30/20 | Number of Active, On-leave Staff on 6/30/20 | Meeting Caps on Assigned Caseload |      | Not Meeting Cap on Assigned Caseload |     | Cases to be Assigned by Supervisors |
|                                     |   |                                   |   | Number                            | %    | Number                               | %   | Number                              |
| CPS Investigations                  | 12 families   | 25                                | 0   | 18                                | 72%  | 7                                    | 28% | 5                                   |
| Family Preservation                 | 17 families   | 7                                 | 0   | 7                                 | 100% | 0                                    | 0%  | 2                                   |
| Permanency Case Manager             | 15 children   | 38                                | 0   | 38                                | 100% | 0                                    | 0%  | 1                                   |
| Specialized Case Manager            | 12 children   | 36                                | 0   | 34                                | 94%  | 2                                    | 6%  | 1                                   |
| Adoption Case Manager <sup>24</sup> | 16 children   | N/A                               | 0   |                                   |      |                                      |     |                                     |
| Total                               |   | 106                               |   | 97                                | 92%  | 9                                    | 8%  | 9                                   |

**Table A-6: Fulton County Supervisory Ratios on June 30, 2020**

| Program/Service Area  | Number of Units | Meeting 1 to 5 Ratio |         | Not Meeting 1 to 5 Ratio |         |
|---|-----------------|----------------------|---------|--------------------------|---------|
|   | Total           | Number               | Percent | Number                   | Percent |
| Child Protective Services (Investigations and Family Preservation)      | 13              | 13                   | 100%    | 0                        | 0%      |
| Permanency Case Managers (Regular and Specialized) (includes Adoptions) | 16              | 12                   | 75%     | 4                        | 25%     |

<sup>24</sup> All adoptions caseloads are included in the specialized and permanency totals. There were five adoptions case managers in Fulton on this date.

**Kenny A. v. Kemp****Table A-7: Region 14 Caseload Managers Meeting Caseload Standards on June 30, 2020**

| Case Manager Function               | Caseload Cap: Number of Cases (Families and Children) |                                   |   | Actual Performance                |      |                                      |     |                                     |
|-------------------------------------|---|-----------------------------------|---|-----------------------------------|------|--------------------------------------|-----|-------------------------------------|
|                                     |   | Number of Active Staff on 6/30/20 | Number of Active, On-leave Staff on 6/30/20 | Meeting Caps on Assigned Caseload |      | Not Meeting Cap on Assigned Caseload |     | Cases to be Assigned by Supervisors |
|                                     |   |                                   |   | Number                            | %    | Number                               | %   | Number                              |
| CPS Investigations                  | 12 families   | 57                                |   | 50                                | 88%  | 7                                    | 12% | 10                                  |
| Family Preservation                 | 17 families   | 15                                |   | 15                                | 100% | 0                                    | 0%  | 5                                   |
| Permanency Case Manager             | 15 children   | 68                                |   | 49                                | 72%  | 19                                   | 28% | 1                                   |
| Specialized Case Manager            | 12 children   | 64                                |   | 47                                | 73%  | 17                                   | 27% | 1                                   |
| Adoption Case Manager <sup>25</sup> | 16 children   | N/A                               |   |                                   |      |                                      |     |                                     |
| Total                               | 12 children   | 204                               |   | 161                               | 79%  | 43                                   | 21% | 17                                  |

**Table A-8: Region 14 Supervisory Ratios on June 30, 2020**

| Program/Service Area  | Number of Units | Meeting 1 to 5 Ratio |         | Not Meeting 1 to 5 Ratio |         |
|---|-----------------|----------------------|---------|--------------------------|---------|
|   | Total           | Number               | Percent | Number                   | Percent |
| Child Protective Services (Investigations and Family Preservation)      | 23              | 23                   | 100%    | 0                        | 0%      |
| Permanency Case Managers (Regular and Specialized) (includes Adoptions) | 31              | 27                   | 87%     | 4                        | 13%     |

<sup>25</sup> All adoptions caseloads are included in the specialized and permanency totals. There were 15 adoption case managers in the Region on this date.

## **APPENDIX B – GLOSSARY**

**Adoptive Placement** means the interval during which a child is placed with a prospective adoptive family following the signing of the appropriate adoptive placement agreement form, but before the entry of the adoption decree by the court.

**Child or Children or Class Member Children or Class Members** mean a child or children who have been, are or will be alleged or adjudicated deprived who 1) are or will be in the custody of the State Defendants; and 2) have or will have an open case in Fulton County DFCS or DeKalb County DFCS.

**Child Caring Institution (CCI)** is any child-welfare facility which provides full-time room, board, and watchful oversight (RBWO) to six or more children up to 18 years of age. Some CCIs are approved to care for youth up to age 21. The CCI must be approved through the Office of Provider Management (OPM) to serve children in DFCS custody.

**Child Placing Agency (CPA)** is agency that places children in foster and adoptive homes for individualized care, supervision, and oversight. Child placing agencies are responsible for assessing the placement regarding the appropriateness of the room, board, and watchful oversight that the prospective foster and adoptive families will provide. The CPA's employees and their foster and adoptive parents work as a team to provide a stabilizing and nurturing environment that promotes safety, permanency, and well-being.

**Corporal Punishment** means any physical punishment on a child that inflicts pain.

**CPA Foster Home** is a foster home approved by a Child Placing Agency for the temporary placement of children in foster care.

**DeKalb DFCS** means DeKalb County Department of Family and Children Services.

**DFCS** when used alone means the Georgia Division of Family and Children Services.

**DFCS Foster Home** is a non-relative foster homes approved by DFCS for the temporary placement of children in foster care.

**DFCS or CPA Adoptive Home** is an adoptive home approved for the foster care placement of a child for whom the established goal is adoption. Adoptive homes must meet the regular standards of care required for approved family foster homes and any conditions specified in that approval.

**DFCS Relative Foster Home** is a relative foster home approved by DFCS for the temporary placement of minor relatives. It is DFCS' preference that all relatives are approved as foster parents and receive a foster care per diem. The goal of relatives becoming foster parents is to ensure that the child has services to address his/her needs.

**DHHS** means the United States Department of Health and Human Services.

**DHR** means Georgia Department of Human Resources.

**Discipline or Other Serious Foster Care Violation** means and includes those acts or situations by the caregiver that pose an immediate or potential risk to the safety or well-being of the child in care. These may include, but are not limited to, inappropriate disciplinary measures (both physical/corporal and emotional), violations of supervision or other safety requirements that pose serious risk factors to the child.

**EPSDT** means the Early and Periodic Screening, Diagnosis, and Treatment Program for individuals under 21 years of age contained in Title XIX of the Social Security Act, as amended.

**Fictive Kin** means a person who is known to a child as a relative, but is not, in fact, related by blood.

**Foster Parent** means volunteers who are trained and certified by DFCS or Child Placing Agencies to provide for the temporary care of children placed in the custody of DFCS. Foster parents work as a part of a team to assure that a child's physical, emotional, medical, and psychological needs are met while they are in foster care. Although it is not the goal to replace the child's parents, foster parents are asked to assume the responsibility of parenting the children placed in their home.

**Foster Relative** means biological kin who are trained and certified by DFCS to provide for the care of relative children placed in the custody of DFCS. Foster relatives work as a part of a team to assure that a child's physical, emotional, medical, and psychological needs are met while they are in foster care. Although it is not the goal to replace the child's parents, foster relatives are asked to assume the responsibility of parenting the children placed in their home.

**Fulton DFCS** means the Fulton County Department of Family and Children Services.

**Georgia Health Check Program** means Georgia Medicaid's well-child or preventive health care program adopted pursuant to EPSDT and shall contain such components as they exist in the Georgia Health Check Program as of February 1, 2005.

**Governor** means the Governor of the State of Georgia.

**Legal Guardianship** means the appointment of an individual as a legal guardian for a child as authorized by either the probate court under O.C.G.A. Title 29 or the juvenile court under O.C.G.A. Chapter 15-11-2(36).

**One Episode of Foster Care** means the period of time that a child is in foster care from the date of removal from the home until the child is discharged from DFCS custody, except that a runaway does not trigger a new episode of foster care.

**Permanent Legal Custody** means custody granted in accordance with an order of the superior court or the juvenile court, which places a child in the custody of an individual or individuals until the child reaches 18 years of age.

**Permanent Placement with Relatives** means placing a child with a relative who is willing to assume long-term responsibility for the child, but has reasons for not adopting the child or obtaining guardianship or permanent legal custody, and it is in the child's best interests to remain

in the home of the relative rather than be considered for adoption, permanent legal custody, or guardianship by another person. In such circumstances, there shall be in place an agreement for long-term care signed by DFCS and the relative committing to the permanency and stability of this placement unless it is necessary to disrupt the long-term placement.

**Psychiatric Residential Treatment Facility (PRTF)** is a temporary non-hospital facility with a provider agreement with a State Medicaid Agency to provide intensive therapeutic intervention to a child to ensure safety and stability. PRTFs offer intensive behavioral health services to children in Georgia.

**Relatives** are persons who are related by blood, marriage or adoption including the spouse of any of those persons even if the marriage was terminated by death or divorce.

**Relative Placement** refers to placement in the home of a relative or fictive kin who do not receive a foster care per diem for the care of the child. The relative placement may be a non-paid placement or the relative may receive TANF or an Enhanced Relative Rate (ERR) Subsidy. Fictive kin are not eligible for TANF or an Enhanced Relative Rate (ERR) Subsidy. Fictive kin must become foster parents to receive financial assistance.

Placement with relatives or fictive kin may occur very quickly if there is a satisfactory CPS history check, safety and home assessment check, and a Georgia Crime Information Center (GCIC) check through the Office of the Inspector General (OIG) on all household members 18 years of age or older. A Relative or Non-Relative Care Assessment must be completed no later than 30 calendar days after the placement of a child.

**State DFCS** means the Division of Family and Children Services of the Georgia Department of Human Resources.

**Suspected Abuse or Neglect** means being based on reasonable cause to believe that a child may have been abused or neglected.

**Suspected Corporal Punishment** means being based on reasonable cause to believe that corporal punishment may have been used on a child.

## **APPENDIX C – COVID-19 GUIDELINES AND OPERATIONS**

Memoranda included in this appendix document DCFS' Emergency Plan, directives, and policy changes during the pandemic. Links to similar documentation from the Supreme Court of Georgia, Superior and Juvenile Courts of DeKalb and Fulton Counties, and school systems are provided below. Links are included where easily available; copies are otherwise attached, on the following pages, in chronological order.

### ***DFCS***

#### **Samples of DFCS Staff Memoranda Attached**

##### ***Provider Guidance:***

[GA+SCORE: E-Blasts](#)

[GA+SCORE: RCCL COVID Protocol](#)

[GA+SCORE: COVID-19: Temporary Extension of EYSS through 12/10/20](#)

[GA+SCORE: Updated FAQs: COVID-19 \(RCCL, RBWO CCI, RBWO CPA\)](#)

### ***Court Systems***

#### **Supreme Court of Georgia**

Original Emergency Order – <https://www.gasupreme.us/wp-content/uploads/2020/03/CJ-Melton-amended-Statewide-Jud-Emergency-order.pdf>

Most Recent Extension of Original Emergency Order – [https://www.gasupreme.us/wp-content/uploads/2020/11/Eighth-Order-Extending-Declaration-of-Statewide-Judicial-Emergency\\_As-Issued.pdf](https://www.gasupreme.us/wp-content/uploads/2020/11/Eighth-Order-Extending-Declaration-of-Statewide-Judicial-Emergency_As-Issued.pdf)

Clarifying Juvenile Court Videoconferencing Rules – [https://www.gasupreme.us/wp-content/uploads/2020/03/Juvenile\\_Court\\_COVID-19\\_Order\\_entered.pdf](https://www.gasupreme.us/wp-content/uploads/2020/03/Juvenile_Court_COVID-19_Order_entered.pdf)

#### **Fulton County**

Superior Court Emergency Order – <https://www.fultoncourt.org/temp/StampFiledJudicialEmergencyOrder.pdf>

Superior Court Guidelines for Expanding In-person Proceedings – <http://www.fultonjuvenilecourt.org/sites/default/files/sites/default/files/Guidelines%20for%20Expanded%20In-Person%20Proceedings%20June%202020.pdf>

Juvenile Court Operating Guidelines During COVID – <http://www.fultonjuvenilecourt.org/>

## **DeKalb County**

Judicial Operations During COVID – <http://dekalbjugendilecourt.org/2020/06/04/covid-19/>

## ***School Systems***

DeKalb County Schools – <https://www.dekalbschoolsga.org/covid-19/>

City Schools of Decatur – <https://www.csdecatur.net/Page/4271>

Fulton County Public Schools – <https://www.fultonschools.org/coronavirus>

Atlanta Public Schools – <https://www.atlantapublicschools.us/coronavirus>

<https://oca.georgia.gov/document/document/covid-19-dfcs-memo-school-enrollment/download>



**Kenny A. v. Kemp**BRIAN P. KEMP  
GOVERNORTOM C. RAWLINGS  
DIVISION DIRECTOR

March 3, 2020

Dear Colleagues and Partners,

**RE: Coronavirus (COVID-19) Prevention, Precautions, and Protocols**

We are all concerned about the coronavirus and remaining healthy. These concerns must be balanced with our unwavering commitment to serve vulnerable families throughout Georgia. That said, we will continue normal operations, focusing on prevention and planning for future developments as they relate to our virus response. We are working closely with other state, local and federal entities to monitor the situation and will provide additional information if and/or when the situation changes.

As we continue to serve Georgia's families and children, employees are expected to treat constituents with respect; understanding that symptoms commonly associated with coronavirus are similar to those of the common cold. Do not engage in behavior that could be perceived as bigoted or discriminatory in the name of virus avoidance. The best way to protect yourself and others is to implement the same measures you use to avoid any illness.

**General Prevention**

To avoid illnesses or infection:

- Wash your hands often, with soap and warm water, for at least 20 seconds;
- Avoid touching your eyes, nose, and mouth;
- Use an alcohol-based hand sanitizer with at least 60% alcohol;
- Try to remain about six feet away from others when possible;
- Cover coughs and sneezes with the sleeve of your shirt, not your hands, and immediately wash your hands thereafter;
- Avoid shaking hands;
- Clean and disinfect surfaces using a disinfectant spray or wipe; and
- Stay home if you feel ill, and encourage your employees, colleagues, and others to stay home if they are experiencing symptoms.

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The above recommendations are consistent with those previously communicated both by the Georgia Department of Public Health (DPH) and the Centers for Disease Control (CDC). More importantly, they're simple things you can do at work and home to reduce the risk of illness.

**DFCS Office Protocols**

Leaders are working with other state and local entities to develop protocols and policies to coordinate our response. Soon, these policies will be communicated at the county level to ensure that all offices are prepared to act in the event of a suspected or confirmed case.

In the interim, please observe the following protocols:

- Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants).
- Employees should notify their supervisors and stay home if they are sick.

**For Foster Parents and Caregivers**

Whether you are a foster parent or are caring for your own child, family member, or other member of your household who is ill, please follow these additional procedures:

- Have only people in the home who are essential for providing care for the person. Other household members should stay in another place of residence. If this is not possible, they should stay in another room, or be separated from the patient as much as possible. Use a separate bathroom, if available.
- Restrict visitors who do not have an essential need to be in the home.
- Keep elderly people and those who have compromised immune systems or chronic health conditions away from the person. This includes people with chronic heart, lung or kidney conditions, and diabetes.
- Make sure that shared spaces in the home have good air flow, such as by an air conditioner or an opened window, weather permitting.

Foster parents and relative caregivers are encouraged to check with their primary medical provider in case of an illness in the home, both for treatment recommendations as well as advice on preventing the spread of illness. **Please remember that only**

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**certain individuals will be eligible for coronavirus testing.** Testing policies will likely change over the coming weeks, and you should check with your healthcare provider and visit either <https://www.cdc.gov/coronavirus/2019-ncov/index.html> or <https://dph.georgia.gov/novelcoronavirus> for updated testing information.

If you have a child with a high fever or significant shortness of breath, please contact your primary physician as soon as possible.

**Constituent Calls**

In the coming days, we expect an increase in the number of inquiries surrounding coronavirus. Please refer these parties to CDC and DPH websites at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> or <https://dph.georgia.gov/novelcoronavirus>.

Over the next couple of weeks, the DPH will likely be inundated with requests. Please refer constituents to the websites above for regular updates on coronavirus.

Every year we are exposed to a variety of viruses that cause upper-respiratory infections. This coronavirus may be “novel,” but we will use tried and tested techniques to limit its impact on our friends, family, colleagues, and operations. Thank you for doing your part to keep yourself and your neighbors healthy.

Regards,

Tom C. Rawlings  
Director

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**Kenny A. v. Kemp****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

March 18, 2020

Dear Child Welfare Leaders:

In light of the extraordinary circumstances related to the COVID-19 pandemic and nationwide public health emergency, we are writing to advise you of some adjustments that we hope will allow you to continue to serve the children and families with whom you work, while being mindful of and adhering to current public health guidelines. We recognize that the current situation presents significant challenges, and appreciate your continued commitment to the safety, health, and welfare of the children and families within your states and tribes.

**Caseworker Visits**

As you know, section 422(b)(17) of the Social Security Act (the Act) requires that caseworkers visit children in foster care on a monthly basis. The policy, as currently posted, prohibits using videoconferencing for the purpose of meeting that requirement, and requires that such visits must be held face-to-face. See Child Welfare Policy Manual (CWPM), §7.3, #8.

The current public health challenges and guidelines require a reconsideration of that policy. While it is imperative that caseworkers continue to ensure the well-being of children in care, that imperative must be balanced against the health of caseworkers, children in care, and all of the people with whom they come into contact. The monthly caseworker visit requirement remains in place, but we are modifying our policy to permit such visits to be conducted by videoconferencing in these current extraordinary circumstances. The amended CWPM question and answer will be sent out on the Children's Bureau list serves and updated online in the coming days.

**Child and Family Services Review Program Improvement Plans**

We remind states currently implementing a Program Improvement Plan (PIP) developed to address the results of a Child and Family Services Review (CFSR) of potential flexibilities available to adjust PIPs in the face of these challenges. Specifically, 45 CFR 1355.35(d)(3) gives The Administration for Children and Families (ACF) the authority to approve extensions of PIP deadlines, and 45 CFR 1355.35(e)(4) gives ACF the authority to renegotiate the terms and conditions of PIPs with states.

Consistent with 45 CFR 1355.35(d)(3), ACF may approve extensions of deadlines in a PIP of up to one year. The circumstances under which requests for extensions will be approved are expected to be rare, and the title IV-E agency must provide compelling documentation of the need for such an extension specific to these circumstances. Requests for extensions must be received by ACF at least 60 days prior to the affected completion date.

States and ACF may also jointly renegotiate the terms and conditions of the PIP in accordance with the requirements of 45 CFR 1355.35(e)(4). We remind states that a renegotiated plan must:

- Be designed to correct the areas of the state's program determined not to be in substantial conformity and/or achieve a standard for the statewide data indicators that is acceptable to ACF;



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- the amount of time needed to implement the provisions of the plan does not extend beyond three years from the date the original PIP was approved;
- the terms of the renegotiated plan are approved by ACF; and
- the Secretary approves any extensions beyond the two-year limit.

If a state has concerns about the implementation of their ongoing CFSR PIP, it should contact the relevant ACF Regional Office <<https://www.acf.hhs.gov/cb/resource/regional-program-managers>> to discuss these concerns and possible actions to ensure the state remains in compliance with its PIP.

**Title IV-E Eligibility Reviews**

We recognize how much long term work is associated with an onsite Title IV-E Eligibility Review, as well as the ongoing preparation for reviews that are scheduled to occur in the immediate future. However, in light of current circumstances, and for the health and well-being of all prospective reviewers and the general public, we will be rescheduling some upcoming reviews. ACF's Regional Offices will be in touch to partner with the relevant states to take appropriate steps.

**Child Abuse and Neglect Investigations**

We remind states that there are no federal requirements that govern the procedures for conducting investigations of alleged child abuse and neglect. Instead, states are required to adhere to their own protocols and timelines for contact, safety and risk assessments, and other investigation procedures. State and local child protective services agencies should follow the guidance of state and local public health officials with respect to conducting investigations at this time, including whether caseworkers should initiate in-person contact.

**Other Legislative and Regulatory Flexibility**

Absent Congressional action, the Department of Health and Human Services (HHS) is unable to waive or alter requirements that are delineated in the Act or in regulation, including the case review system requirements that are delineated at section §475(5) of the Act.

Although periodic reviews and permanency hearings are important protections for children in foster care, we have explained that the case review requirements are not a title IV-E eligibility requirement and, therefore, delays in conducting these activities will not adversely affect a child's eligibility for title IV-E. See, for example, ACYF-CB-IM-05-06, accessible at:

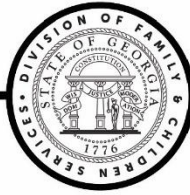
[http://www.acf.hhs.gov/programs/cb/laws\\_policies/policy/im/2005/im0506.htm](http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2005/im0506.htm)  
<[http://www.acf.hhs.gov/programs/cb/laws\\_policies/policy/im/2005/im0506.htm](http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2005/im0506.htm)> .

Thank you for your continued efforts.

Sincerely,

/s/

Jerry Milner  
Associate Commissioner  
Children's Bureau

**Kenny A. v. Kemp**BRIAN P. KEMP  
GOVERNORTOM C. RAWLINGS  
DIVISION DIRECTOR**Subject: DFCS Child Welfare Temporary Direct Services Continuity Standard Operations Procedure (SOP)****SOP Number: 20:01** (updated 4/17/2020)**Purpose:**

This Standard Operating Procedures (SOP) is a DFCS Field Operations specific process for the temporary, time-limited governance of direct services during the critical period of the COVID-19 pandemic. It is necessary that the agency takes measures consistent with its core charge of ensuring the safety of children while simultaneously taking efforts to reduce possible health risks to those children, their families and caretakers, and agency personnel. This SOP provides guidance for contacts involving initial responses to newly assigned reports, monthly in-home service contacts, and monthly contacts with children in foster care, their parents, and their caretakers.

**Applicability:**

Child Welfare staff

**Process:**

- A. Involves CICC inquiring and documenting reporter knowledge if families are currently or have recently been sick.
- B. Involves taking precautions when preparing for and responding to current and newly assigned assessment cases and cases requiring an in-person contact.
- C. Involves primarily utilizing Skype, Facetime, or similar applications to facilitate virtual "face to face" contacts with families and children receiving in-home services when there is a reasonable assumption, based on recent contacts that there is no present or impending danger in the home.
- D. Involves primarily utilizing Skype, Facetime, or similar applications to facilitate virtual "face to face" contacts with children in foster care, their parents, and their caretakers when there is a reasonable assumption, based on recent contacts, that there is no present or impending danger in the home.

**Responsibilities:***General SOP*

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- A. SOP related practices are communicated by the State Permanency Section to agency foster parents, private foster home providers, PRTF, CICC and other private providers.
- B. The State Permanency Section sends additional information and supports to foster parents during the period of time under this temporary SOP.

*Current and Newly Assigned Assessments*

- A. The case manager, in consultation with leadership staff, determines on a case by case basis, when there is a reasonable assumption of no present or impending danger, that Skype, Facetime, or similar applications are appropriate for initiating case contacts.
- B. CICC inquires and documents reporter knowledge regarding if families are currently or have recently been sick.
- C. The case manager, prior to making a home visit, calls the family and asks the following:
  - a. Have you traveled to a country for which the CDC has issued a Level 2 or 3 travel designation within the last 14 days?; <https://wwwnc.cdc.gov/travel/notices/>
  - b. Have you had contact with any Persons Under Investigation (PUIs) for COVID-19 within the last 14 days, OR with anyone with known COVID-19?; and
  - c. Do you have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?
- D. If unable to make contact prior to making a home visit, the case manager knocks on the door and asks the above-listed questions to the parent / caretaker while standing at the door / on the porch and maintaining a distance of approximately six feet.
- E. If contact is made at a hospital or at a police office or sheriff's station, the above-listed questions are asked, and a six-foot physical distance is maintained at all times.
- F. If the answer to any of the above-listed questions is yes, the case manager remains outside of the residence, if at a home visit, and provides the CDC COVID-19 handout and encourages the family to contact a medical provider.
- G. The case manager freely volunteers and shares with the family his or her own personal answers to the above-listed questions in the spirit of transparency and to reassure the family who may be nervous about having someone come into contact with them during this period.

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- H. If the answer to any of the above-listed questions is yes, the case manager remains outside of the residence and requests to interview the family members outside or at the doorway while maintaining a six-foot distance between each interviewee.
- I. If the answer to any of the above-listed questions is yes and the report involves allegations of an unsafe residence, the case manager looks through the door and asks that curtains be raised so that the residence can be observed from the outside.
- J. If the answer to all of the above-listed questions is no and both the case manager and family are comfortable and in agreement, the case manager enters the home and maintains a six-foot distance between all family members.
- K. Whether inside or from the doorway, the case manager observes undressed infants, per policy, and children with allegations of physical abuse.
- L. The case manager inquiries about the possibility of holding follow-up contacts utilizing Skype, Facetime, or similar applications.
- M. The case manager contacts law enforcement for support and assistance, as appropriate, to ensure the safety of the children in the residence.
- N. The county always practices team decision making through the PRE and PAUSE processes, respectively, prior to seeking custody or changing the placement of children in foster care.
- O. The county consistently applies the Abbreviated Investigations SOP (SOP 19-03) to limit and prevent unnecessary steps and interventions, as appropriate, when the facts show a clear lack of maltreatment and a low likelihood of future maltreatment.

***Family Preservation Services***

- A. The supervisor and case manager meet and determines on a case by case basis, when there is a reasonable assumption of no present or impending danger, that Skype, Facetime, or similar applications are appropriate for temporarily making case contacts.
- B. The use of telephone calls is considered only when there are technology limitations.
- C. These contacts and their documentation include the following components:
  - a. Adequately assessing safety and risk of harm to the child(ren);
  - b. Identifying needs and provision of services for the child(ren) and parents / caretakers;

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**Kenny A. v. Kemp**

- c. Assessing case plan progress and parental / caretaker behavioral change; and,
- d. Inquiring if any household members are sick or experiencing COVID-19 symptoms, and encouraging caretakers to contact a medical professional, as appropriate.

D. Additional virtual contacts are encouraged beyond the monthly requirement to further ensure and support safety and well-being of children, family members, and agency personnel.

E. Cases identified as requiring an in-person contact follow steps C – O listed above for Current and Newly Assigned Assessments, as appropriate.

***Foster Care***

A. The supervisor and case manager meet and determines on a case by case basis, when there is a reasonable assumption of no present or impending danger, that Skype, Facetime, or similar applications are appropriate for temporarily making case contacts.

B. The use of telephone calls is considered only when there are technology limitations.

- C. These contacts and their documentation include the following components:
- a. Adequately assessing safety and risk of harm to the child(ren);
  - b. Identifying needs and provision of services for the child(ren) and foster parents / caretakers;
  - c. Effectively involving the child(ren) in the case planning process; and,
  - d. Inquiring if any household members are sick or experiencing COVID-19 symptoms, and encouraging caretakers to seek medical professional, as appropriate.

D. Additional virtual contacts are encouraged beyond the monthly requirement to further ensure and support safety and well-being of children, family members, caretakers, and agency personnel.

E. Cases identified as requiring an in-person contact or placement move follow steps C – O listed above for Current and Newly Assigned Assessments, as appropriate.

**Verification:**

District and Regional Directors are responsible for ensuring appropriate and purposeful contacts are made, documented, and tracked during this period – including both in-person and virtual contacts.

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**Kenny A. v. Kemp**BRIAN P. KEMP  
GOVERNORTOM C. RAWLINGS  
DIVISION DIRECTOR**Memorandum**

To: Child Welfare Staff  
From: Mary Havick, Deputy Division Director of Child Welfare  
Date: July 1, 2020  
Re: Virtual Case Manager Contacts with Parents and Children

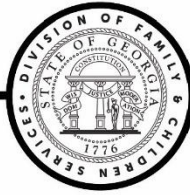
As you know, many court jurisdictions have resumed in-person visits for birth families and their children. We support these in-person visits and recommend working with our court partners to determine how they can happen safely for all children in foster care. In addition, we encourage the continued use of virtual platforms to supplement in-person visits between children and their parents or to replace in-person visits when there is no other option.

Despite the increase in in-person visits for birth families and their children, after careful consideration, we have decided to **extend virtual case manager contacts with parents and children through August 31<sup>st</sup>, 2020**. The virtual contacts will be for routine case management contacts in Family Preservation, Foster Care and Resource Development cases. Extending the virtual case contact practice an additional 60 days prioritizes the health and safety of constituents, employees and partners. It also allows us to monitor and assess a number of factors that will help guide future decisions regarding in person contacts moving forward.

**On August 1, 2020, you will receive additional guidance on case contact requirements beginning September 1<sup>st</sup>.** Our hope is that providing new information a month before new policies and practices take effect will allow everyone enough time to prepare for the changes. If our federal partners decide that virtual case contacts can no longer count as the required monthly contact, our policy may change before this date. For now, they are continuing to allow virtual contacts and have not given us an end date.

For reference, attached to this message is the COVID-19 Child Welfare SOP. If you have any questions regarding virtual contacts or other related policies and practices, please email Lon Roberts at [Lon.Roberts@dhs.ga.gov](mailto:Lon.Roberts@dhs.ga.gov).

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**Kenny A. v. Kemp**BRIAN P. KEMP  
GOVERNORTOM C. RAWLINGS  
DIVISION DIRECTOR**Memorandum**

To: District, Regional and County Directors

From: Mary Havick, Deputy Division Director of Child Welfare

Date: July 10, 2020

Re: Academic Year 2020-2021: Guidance on Alternative Public School Attendance Plans for Children and Youth in Foster Care

The Coronavirus pandemic is prompting some public school systems to offer alternative attendance choices for the upcoming academic year including hybrid or virtual only enrollment. Division of Family and Children Services (DFCS) policy requires children in foster care to attend public school and requires approved waivers to allow for them to participate in alternative learning environments. As a result of the pandemic, we are removing the waiver requirement and children in care may be enrolled in alternative public school attendance plans, when appropriate and available, to start the school year.

**The Division recognizes the educational and social value of children attending school in-person and strongly recommends this option for most children in care.** However, some children may be better served in hybrid or virtual only settings due to their health issues or the health concerns of those in their household. Enrollment decisions should be made collaboratively between caregiver(s), birth parents, external partners (when possible/appropriate) and the Division – with input from the child/youth, as appropriate. The team should consider factors such as the student's adaptability to virtual learning, caregiver support and the ability to independently obtain any needed equipment or services for virtual learning. If a consensus cannot be reached among the child's team, the final decision will rest with the department as the child's legal custodian. To make that decision, a staffing should be held including county and regional leadership.

**When in-person school attendance is available and the team determines that a virtual only enrollment is the best option, the case manager should complete the Educational Programming, Assessment, and Consultation Virtual Only Notification Form (attached).**

Thank you for your focus and attention to ensuring children in care are appropriately enrolled in school for the upcoming school year. Please address any specific educational questions to Carmen Callaway – [Carmen.Callaway@dhs.ga.gov](mailto:Carmen.Callaway@dhs.ga.gov).

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