Allegheny County
Department of Human Services
Foster Care Concept Paper Community Comments

Except where otherwise noted, all comments are posted unedited.

July 22, 2020

Comment 1 – paragraph breaks inserted by DHS

Upon review of the concept paper several thoughts come to mind. There needs to be a way to tie in expected performance with payment. The areas mentioned in the paper have been ongoing areas of struggle not only at a local but national level. Foster home recruitment- there needs to be a process by which the county shares trend data about the geographical needs and special populations to providers. This information should be shared no less than quarterly. Providers can then transition recruitment efforts and foster parent development efforts to meet the emerging trends.

You cite the need to more foster homes willing to accept emergency placements and placements of older youth, sibling groups, children with challenging behaviors and special populations. This is an area where providers and families can be encouraged through incentives. In the standardized rate structure that was mentioned, you can add an additional amount per day for the first 30 days of placement. This can easily be tracked in KIDS system. You might ask why the increase is important. I allows providers to use the extra money to build capacity for emergency placements. Capacity by providing the monetary means to pay foster families accepting emergency placements a higher per diem, while allowing the provider to enhance their capacity to support these placements which at times are complex children. In essence if you do the work, you get the extra financial support a provider needs to maintain and grow a pool of emergency foster homes centered on stability.

In the area of timely permanency, you comment the need to make sure the first placement is the right placement. This is an area that providers have benefited from the support of the county to make this happen. However, this is difficult to balance when making emergency placements. This can only be successful if when making emergency placements, efforts are made to locate the nest home for the child(ren) not the first home. When the opportunity presents to have multiple homes available the county should ensure that a matching process is in place to vet all of the homes against what is best for the child. In making these placement decisions, a question to the provider should be their capacity to support the placement. Capacity in this sense goes beyond availability, but the support being offered to the child, foster family and birth family. If there are needs then a plan should be placed in writing that identifies how these needs will be addressed and who is responsible for this. Presently, this discussion does occur, but it happens at so many different levels; often resulting in the provider not knowing who to address the needs with from the county and how to submit for the help provided.

The concept paper speaks about the goals of the county relaying on data. As a provider, it has been the experience that new tools are implemented on behalf of the county to track information. However, upon presentation the information is often fragmented. And as a result, the county has the provider, providing the information on the tool and then reporting it out one of two other different manners, which is time consuming for the provider and undermines the perception that the county tool is useful and meaningful. You have the goal of an ice breaker within the first 24 hours of placement. The majority of the time this is not realistic. There is a delay is assigning cases to providers through KIDS and the contact information is often in KIDS. The contact information provided at the time of placement is often lacking of correct phone numbers and providers just have an address. If this is the goal, then the county would need to come up with a consistent way for providers to document in KIDS when this 24 hours meeting cannot occur due to no KIDS assignment and no phone number.

Comment 2 – paragraph breaks inserted by DHS

Part of foster home recruitment is also the retention of existing homes. The county should track the number of homes that a provider retains. Retention of families is important as the families become mentors for others and through experience feel comfortable expanding their parameters (age and behaviors).

The paper cites the need for foster parent support. The county has tried in the past to implement a centralized support through AFN for foster families. It has been my experience that if a family feels supported within their own agency, they will not access the support. As a provider, we refer families to this resource and share information about AFN on a regular basis to the families. However, we have very low participation. What we do have is a great internal peer support system among our foster families. Our families pair with one another based on location (Mocking Bird Model) and based on issue they are and have encountered. Location is great, as it builds informal support not only for the families but also for the foster children. Issue support is also great. It providers families encountering an issue hope when they pair with a family who has successfully weathered the issue. I would caution that in the area of support one size does not fit all. The county should monitor that providers are promoting a support system within their program and can supplement this with external supports like AFN as well.

The county has been great in supporting training initiatives to providers and providers' families. Families have shared that they would like more on line classes for CSEC, AFFIRM, etc. In caring for special populations and siblings, families often find that their free time to travel to a class setting is slight. Having access to on-line materials has worked and have shared their desire for this format.

Comment 3

My spouse and I (current foster parents) strongly support this plan. We have done respite care, emergency placement and are trying to match for adoption. We had a recent experience with emergency placement where Allegheny County CYF lied to us and told us via our agency that a placement of 3 siblings was for respite care, when in fact it was an emergency placement of children who had never been in foster care before. The 3 children were dropped off at our house by CYF workers without notifying our agency, with little appropriate clothing and we were only told their first names. We waited several days for their CYF caseworker to visit them. Had this particular caseworker not done an excellent job at helping us get the information and resources we needed, and likewise our agency was extremely supportive and the children been randomly enough a good match for us, then this could have been our first and last fostering experience. We have heard horror stories of CYF workers taking 5 weeks to visit a child for the first time in placement and foster agency caseworkers calling them from private numbers in order to get them to answer the phone. We thought we would have these children with us for a week or so, but it turned into 6 weeks. As you can see, I work for ACHD and we had decided not to do emergency placements from AC due to the nature of our jobs. Once we found out the full names of the children in our care, we realized I had previously worked with this family in another role and made us uncomfortable. We felt like we had our choices (to not do emergency placement of AC children) completely taken away from us in this case. We strongly believe that there is more transparency, accountability, and customer service training needed on the part of CYF staff in order to retain foster families.

Thankfully, the caseworker was able to find a family that spoke the birth parents' native language, so that they could supervise video chat visits and provide culturally appropriate care. Having a better system to recruit, train and match with diverse groups of foster parents will decrease the times that children like this need to be moved from placement to placement. We also support CYF facilitating connection with the birth family. We were able to do a video chat where the mother of the children showed us and the teenager how to prepare food from their home country and we feel like this was a positive experience for everyone involved.

In terms of increasing TFC options, we are currently seeking placement with a teenager who is in a residential treatment facility for behavioral health treatment. We inquired with our agency about doing the training to become a CRR (this had been requested by previous providers for this teen's placement, but was not available). We learned that we'd have to switch agencies if we wished to become TFC. At this point, we are hoping to do some of the training in order to better prepare ourselves for this placement and potential permanency, even if we aren't able to become a CRR. The re-traumatization that this particular child has been through in other foster homes is particularly striking. This teen has had to face IPV between foster parents, large number of foster siblings with substance use and dealing, and foster parents who were unsupportive of basic components of the child's identity including religious practices. We truly hope for a system that would train families better, decrease the number of foster children per home and better match children with supportive homes. As a family, we would love to be able to access more training

without having to switch agencies, so we can provide the highest level of care we're able to give this teen and others.

July 27, 2020

Comment 4

I am writing as both a foster parent and as a service provider in the Latinx community. Here are some concerns I have and areas where there could be some improvement.

There is little to no language access. As we see the populations of our immigrant populations grow, so does the need for services such as this. Based on my experience there is no one that is bilingual and bicultural that works in this department that works directly with children and families.

The case workers that I work with are extremely overwhelmed and carry large caseloads, if they are going to provide quality service they need smaller caseloads.

On several occasions I have called child line and have been confronted with disturbing suggestions on what to do with the children I work with. One time I was told to call the police. Many of the children and/or families are recent immigrants and have a fear of the police, many are out of status and so that would result in deportation. Staff need to be trained and have compassion for the families that they are being asked to serve.

July 31, 2020

Comment 5 – paragraph break inserted by DHS

Although I appreciate this concept paper, it feels like a grab bag of "best practices" from around the country that when you dig deeper, have not shown to be effective in achieving the actual outcomes projected. This proposal fails to address the retention of foster parents as a goal and sometimes flies in the face of it. As a foster parent from multiple states, my experience in another state far exceeded my experience here in Pennsylvania for many reasons, but the core reasons are poor customer service with Allegheny County CYF and the lack of anonymity. The agency that certified me provides me with adequate support; however, my CYF caseworkers have all been substandard. They have been assigned tasks by the courts and not completed them. They have lied when asked questions by the courts. They do not communicate effectively. So, this concept attempts to fix agencies and foster parents, but does not address some of the core issues regarding their own team.

Regarding anonymity, I understand Pennsylvania's push for a team environment and partnership between birth and foster families; however, I believe other states' typical practices to maintain the anonymity better address the safety and security concerns I have being a foster parent in Pennsylvania. In another state, my full name was never released or used. I was surprised that when I relocated, not only full name was released, but also my address. I was assured that I

4

would be safe and this was incorrect. My family has been threatened and my home violated on several occasions with no support from CYF. If I was better supported by CYF, I would be more apt to continue as a resource parent. I wish this was addressed in this concept paper.

Comment 6

I have been a caseworker for more than 30 years and have watched good ideas disappear or never come to fruition. It was refreshing to see that some of the concepts that have been discussed over the years are finally being considered.

As a permanency worker, I have always felt having standard rates across the board would be beneficial. Standard rates for all agencies with fluctuations based on individual needs that consider mental health, trauma, and collaboration with birth families seems fair.

Recruitment strategies must be permanent and tied to incentives that are closely regulated so that agencies cannot just manipulate their numbers to continue to receive funding.

Stop overloading good foster homes. Kids deserve the individual love, care, compassion, and attention they need.

Overlap with the MH system is essential. People are generally afraid due to lack of support. This lack of support hits them from many fronts. Unavailable support at crucial times in the placement, leads to too many premature removals. Overwhelmed CW's who don't have the time or experience to resolve issues without removal. Respite should be the last option. Our kids need to be able to work through issues in the home chosen for them. This will only strengthen the bond between kids and foster parents.

Taking time to choose the right home. Planning for any move is very crucial. The child's input is also needed and shows respect.

Foster parents must be trained and retrained to understand how significant the trauma these kids have endured and how it will effect their behavior. FP's who can realize the reason for acting out behaviors may be more understanding and work through vs. giving up. Trauma based therapy and attachment therapy must be available for foster families and kids. Let me say that again trauma therapy and attachment therapy must be available for families and kids. Initial training and ongoing support in these areas is critical. Again, collaboration with the MH system is paramount. It seems the importance of trauma based and attachment therapy are being taken seriously. A dedicated effort to recruit, and maintain these types of therapists is necessary. Voice the need for this type of training to schools, leaders who have the ability to promote the need for this type of intervention.

Consider that the mental health needs for children in foster care are unique and the services they receive must be more specific to those needs, not just "traditional" therapy. Each agency should employ a trauma-based therapist.

5

Having a consistent team (both MH and CYF) that follows a child throughout placement. Our kids have to tell their stories over and over again to new therapists, teams, CW's, foster parents. A MH team that follows a child wherever they go would provide the consistency, confidentiality, and the trust our kids need most. Prep services should look the same. We contract with SWAN to provide child prep and profile. Why can't a SWAN worker be connected to a child from initial placement to closure whether it be reunification or adoption. Again, one worker that gets to know the story well, understands all the players, and their role in the case. Works with birth families.

Kids need connections and trust.

My experience with integrating birth and foster families has been a failure. Foster parents are always hesitant to bring people who they view as bad or dysfunctional into their homes. Most foster parents don't want anything to do with birth families, even kin. If each agency had a neutral space, like a community center, that they could bring everyone together and have trained personnel to facilitate positive interactions between all parties, modeling good parenting, and an understanding of working for the best interest of children. Most foster parents have no clue that birth parents have positive qualities. They only hear the negative. Families I have worked with that have incorporated the birth parents or relatives into their lives have seen the good and understood more about the addiction, MH issues etc… and have gained a respect or compassion for the birth parent.   Careful consideration is a must to ensure kids can relax knowing everyone is working together.

Foster parents should be more accountable for transportation, appointments, and visits. Our kids go everywhere with strangers driving them. Within a normal family this would be unthinkable. Children get the wrong impression about commitment when FP's just let them go with anyone or are not there to hear what the doctor, therapist, birth parent has to say. Financial incentives can be tied into each individual case depending on the level of care needed in this area. Foster parents should embrace birth relatives when reunification is no longer a goal. Extended families may not be a placement option, but they can be a support and a connection.

Connections must be maintained.

Determine permanency as soon as possible and provide appropriate services to deal with permanency issues.

And finally, to beat a dead horse, staff recruitment and retention, for county caseworkers and providers. Our kids benefit greatly from consistent people in their lives. Smaller caseloads with experienced caseworkers who are paid enough that they stay as opposed to leaving before learning the job due to burn out has been an issue forever. Fix this problem and service delivery would be much easier. Better decisions would be made in a timely manner. Families may work harder if they know their CW and feel respected. Kids would be more comfortable and relaxed knowing the person who is looking out for them. Better information would be provided to the court when life changing decisions are being made.

Comment 7

We shared the concept paper with a group of existing foster families. Some of those families have experience with multiple foster care agencies.

All agreed that there is a need for more foster homes to meet the needs cited in the concept paper. In regards to making a placement of a child into a foster home, they all expressed that the county needs to do a better job initially in gathering information. They were realistic knowing that some information would be lacking at the time of placement, but information about the child's interests and likes can be shared at placement. This information is easily gained by the worker spending time and engaging a child during the crisis that resulted in removal from the home. They cited that there is a lack of follow through by the caseworker in securing the needed information about health, allergies, doctors after the initial placement is made and providing this information to the provider and contracted foster home. They cited the lack of unity between the county and provider. They perceived that the county worker often bypassed the provider worker thus undermining the team atmosphere that the concept paper was projecting.

Foster families shared in their provider agency they are viewed as an essential part of the team. They cited that being valued as an individual helps to build trust between the family and agency. They expressed that this is important in the matching process with children. Having the trust in your agency to match you with a child that meets your needs. This trust is also import in advocating for a family's needs and growth; especially matching beyond the family's identified barriers. This helps with retention.

The foster families strongly shared that capacity of the agency to be responsive to the foster families' needs is essential. They cited past experiences that following a placement their previous foster care agencies would be absent and their calls would go unanswered. The foster families shared that with their current agency they are experiencing a strong sense of support. They supportive relationships began during the certification process. They shared positive experiences of the assigned workers/team members being present in the foster home on a regular basis and being accessible by telephone. They shared that the presence is coupled with staff members who understand trauma and can provide guidance that is directed from the training the families have received. They expressed it was important not only to be trained in trauma but to be able to realistically guide and support families in a trauma informed manner.

The foster families shared support comes in many different forms. The families spoke about support from the cohort group that they entered foster parent training with to the peer support built into ongoing training. They identified that support is broader. Support needs to come from your agency to provide practical solutions to barriers. Support needs to come from the county caseworker keeping all team members updated. They cited examples of last minute notices of hearings and appointments by the county workers that caused struggles rather than support. Support needs to include foster parent's input. They shared that this is essential in scheduling visits and appointments. As this is part of their role as a caregiver, they expressed that they often dictated by the courts and county when the appointments and visitation will occur

7

without regards to their input and schedule. They expressed that if this practice continued it would undermine the birth/foster parent engagement that the concept paper is striving to meet. They shared positive experiences that the pandemic brought in enhancing birth/foster parent engagement, as they are now the ones facilitating the virtual visits.

The foster families also shared that they noticed an improvement in behaviors with the children during the pandemic. They credited this to the children having more time in the foster home; allowing them to better integrate to the home without multiple interruptions to attend appointment, visitation etc.

In the area of training, the families all prefer in-person training as it promotes peer support. They felt that required trainings should be accessible on-line.

August 11, 2020

Comment 8

- "Within each region, some of the homes will be therapeutic foster care homes and every foster care home will be trained in trauma-informed care."

    o Will the county have a prescribed set of requirements for the training? Also, will Family First provide some guidance on the training and curriculum? Will the provider have a role establishing their training curriculum?

- "Additionally, CYF provides specific supports for young adults who are in out-of-home care to help them transition to adulthood"

    o Is the provider able to integrate transition services into the program as an additional service? Would the county give consideration to a different rate for youth 14+ to compensate for the additional services?

- "DHS will leverage the RFP process to restructure funding for providers by supporting and acknowledging strong provider performance that best meets the needs of children and families served. This will be done through an evaluative process that tracks quality of services and outcomes across providers."

    o Could you be more specific about the types of restructured funding you are considering? Would you consider VBP? It is clear that quality is of the highest concern. What outcomes are of highest priority?

- "DHS will work with the state and providers to create an expedited certification process to remove the barriers that a long certification process creates for many children and families and ensure we are flexible in meeting the needs of children without compromising safety."

    o What steps could be taken to expedite the process? Will there be some sort of special waiver?

- "DHS will work with providers to implement an aftercare model to support reunification."

    o Is there a specific aftercare model you are interested in?

August 13, 2020

Comment 9

Standardized rates are an issue and should be addressed by the county. Standardized rates across providers for each level of care should be published by the county in the Spring of each year. there should not be discrepancies in rates across providers. The number one goal of agency in foster care is reunification. As the agency executive, my heart is always filled when I receive an email or call that indicate a child has been discharged from care to parents. Our agency works hard with resource families to continue and grow relationships with birth families. We support this goal of Allegheny County 100%. Our second goal is to practice cultural humility. As our agency grows in its resource family recruitment, we realize that before we recruit families we have to listen and learn about their culture and their lives. As a Christian- based organization we are working with pastors and ministers in communities that are underserved. While, we can endorse, believe in, and share the vision and mission of Allegheny County DHS, we also believe that as part of the procurement process the county should look for and acquire multiple providers for kinship and family preservation. There are providers across the network who have EBP that for years have prevented long-term placements in other counties, that Allegheny county should explore that will help it meet its vision, mission, and goals. The goals of: promote placement stability, reduce time to permanency, ensure foster care families and providers have the support and resources they need, and create accountability measures to emphasize service quality are goals that have been the essence and belief of our agency for years. We appreciate and endorse the county's efforts and position to work with providers who have the same vision and practice. It seems that Allegheny County is planning on working with providers who are concerned with reunification, placement stability, relationships with birth parents, and standardized and fair rates. We look forward to the RFP and working with Allegheny County DHS in working toward and achieving these goals.

August 14, 2020

Comment 10

I am concerned that the approach outlined in the concept paper forces a quick route to permanency which undermines the desires of the foster youth in care. This triggered me because it read as policy that speaks to the experience I have had that has left me feeling like despite my foster child wanting to remain in the status quo status of foster care and me as a foster parent being okay with that, we are constantly being pressured into SPLC or adoption.It also has made me feel like the new law providing free college tuition to foster youth to be used at state and

9

private schools is the reason for this move. It feels like DHS and organizations do not want foster youth to access this opportunity. SPLC and adoption can take this away from a foster youth. It also concerns me that there is a provision in here about a foster parent having to contact the birth family within 24 hours of a youth being placed in foster care. This is a terrible idea. There are situations where it is entirely inappropriate and unsafe for a foster youth and a foster parent to be contacting the birth family. In cases of abuse in particular, I do not know how this within 24 hour mandate is going to help a foster youth experiencing trauma. Even if as a foster parent I was asked to contact extended family and not the family member who caused the abuse, what prevents the extended family from sharing my contact information with the abuser? This seems like a safety issue that would dissuade someone from becoming a foster parent. This should not be a responsibility of a foster parent and an arbitrary time limit that is not flexible to the unique circumstances of a foster youth seems poorly developed and more harmful than positive. A better approach to support foster youth connections to birth families should be developed because this just does not work in practice. The mockingbird model sounds interesting, but I have concerns about forced constellation groups. If there are issues with various foster families within a constellation group, how can I change or move out of the group? While I would like to think all foster families are good people, I have met foster parents who have been blatantly racist, homophobic, xenophobic, etc. Being forced to rely on a constellation group member who does not align with my values and who spews hate is concerning. There are currently organizations in Allegheny County that have reinforced these messages and have discriminated against foster parents who were not white and heterosexual. It makes me wonder who those organizations are approving and if I have to rely on those families, sounds like you are setting us up for conflict.

Comment 11

Upon review of the Foster Care Concept Paper, it is clear that Allegheny County DHS's vision for foster care will require providers to implement changes to further stabilize and support families in crisis to prevent foster care placement and to provide foster care services for children not able to safely remain at home. Therefore, our agency discussed this paper with our staff, resource parents and involved community members. Listed below are the suggestions that resulted from those conversations.

- To successfully achieve Allegheny County DHS's strategic priorities for 2020 that ties back to the mission, one additional choice for consideration is an increased need for uniform training and education of county caseworkers, provider's staff and resource families. Uniformity in training modules will build the framework to increase the collaboration between county and provider staff.
- To improve length of stay outcomes for children in the foster care system is to encourage provider team members to have the opportunity to offer pertinent information that may not otherwise be consistently conveyed or accurately shared in court proceedings.
- Providers could better their ability to self-evaluate services towards achieving DHS goals by having access to data reports derived from the counties electronic record

system. This could be implemented by stream lining provider data collection with county outcome data reports.

- The ideas presented to promote placement stability utilize services that result in a more robust, comprehensive, and seamless system that enables children and families to experience improved outcomes for safety, permanency, and well-being. Realistically, to excel in the provision of these services, will require providing agencies to make budget changes, implement new and required trainings and change marketing plans. Whether it is a larger providing agency or a smaller agency in the "grass root" phase of development, to ensure lasting growth, a one to three year strategic plan is required.
- Communication between the resource family and the birth parents is an integral piece of helping the child heal and adjust. However, our suggestion is that the first contact be completed by the providing agency within 24 hours of placement. Should the child remain in care after the shelter hearing, the providing agency will hold an ice-breaker meeting within 24 hours of the shelter hearing.
- One Family, One Home has many advantages, however, it may also diminish the number of available placements.

Overall, the concept paper was an all-encompassing portrayal of Allegheny County's vision of foster care. Thank you for including our agency in this process and actively seeking a dynamic partnership with your providing agencies.

Comment 12

Introduction:

Our organization agrees with DHS's overall vision of Foster Care in Allegheny County and looks forward to the RFP process. Having said that, there are a few areas of importance we would like to comment on, as well as several questions the concept paper has brought to light. We recognize that the vision of Foster Care described in the Concept Paper constitutes a major cultural shift for Allegheny County and the foster care community. With such a significant shift in normal procedures, we believe that a "roll-out" period for contracted providers is necessary to ensure fidelity to the described model. Such a significant shift will require adequate financial and resource support, as well. We find the following ideas outlined in the concept paper to be of particular importance: matching foster youth to foster parents, Conferencing and Teaming, and standardization.

Promote Placement Stability:

Currently, our organization has found that the process of "matching" youth with foster parents is not often a priority and rarely occurs. On most occasions, foster youth are emergency or shelter placements and the necessity of a bed overshadows the successful matching of that foster youth to an available foster parent. We believe that taking the time to adequately match youth with foster families will have a positive effect on placement stability and improve outcomes as outlined in the Concept Paper– we have seen this amongst our foster youth.

11

Support & Resources for Foster Families:

Also, our organization has found that "Conferencing and Teaming" is inconsistently implemented across the board and left to each case worker's discretion. Ensuring consistent implementation of "Conferencing and Teaming" as a core case management practice will ensure the quality of services as well as placement stability for foster youth. Finally, we support the standardization of rates, accountability measures, and trauma-informed training among foster care providers. All foster care providers in Allegheny County should be held to the same standards concerning service quality and receive the same rates for services, especially if those services are standardized.

Mockingbird Family Model & One Family, One Home:

Concerning the two evidence-based models detailed in the Foster Care Concept Paper, our organization believes that the Mockingbird Family Model shows great potential in theory. Concerns arise, however, when determining the best way to recruit the Hub Home, and the Hub Family's ability to act as a peer mentor and respite to the satellite homes that are part of each constellation.

As for the One Family, One Home concept, we find this model to be positive in theory, but unrealistic to implement in the current foster care environment. As the current foster care system struggles to recruit and maintain foster care homes with enough beds for all the youth in placement, the One Family, One Home concept would leave a lot of beds unused and overtax the already stressed system. Also, we find the idea of a single youth with no birth relatives in the child welfare system who is unable to have a non-relative youth placed in the same home to be isolating and in some ways unfair to that youth. Furthermore, other youth awaiting placement that may be matched to a foster family who already has a foster child would be negatively impacted under One Family, One Home. For One Family, One Home to succeed, recruitment strategies would have to focus on recruiting homes specifically for sibling groups.

Systemwide Improvements:

DHS's system of foster care is predominantly comprised of kinship services. Absent from this Concept Paper is the glaring exclusion of kinship care services. Significant change cannot be advanced with the exclusion of the part of the system of care that serves the majority of kids. While it may be argued that non-kinship is a starting place there should be a more comprehensive strategy where gross change can be launched. With an exclusive focus on non-kinship care, it raises considerable concerns about the intentionality of real change.

As we know it kinship care has been an exclusive domain of a single provider. In recent years while there has been some contract modification to include kinship services to other providers, old politics seem to be more sacred to DHS than a more equitable marketplace. The intentional preservation of a bifurcated system does little to safeguard the masses that are served in out of home placement. We look forward to the inclusion of kinship care in the very near future in order to remain hopeful that real system change can be transformative for children in our care

Questions:

12

In addition to the comments above our organization has several questions about Foster Care as defined by the Concept Paper:

1. The concept paper stated that OCYF plans to have providers focus their programs in specific geographic areas. Would providers who receive the foster care contract under the RFP be restricted to recruiting families from specific areas? Furthermore, would providers be able to maintain their current foster homes even if they are outside of the specified geographic region?
2. For a provider who does not receive the contract from the RFP, what is the plan for their current foster families?
3. The Concept Paper mentions Therapeutic Foster Care – would the awarded provider be required to maintain a certain number of Therapeutic homes?
4. The concept paper refers to non-kinship foster care, would awarded providers still be able to provide kinship placements?

Comment 13

Training and Support of Foster Families

Finding ways to expedite parts of the certification process would be beneficial, such as working with the state around requirements or finding ways to expedite clearances. It would not be beneficial to reduce any amount of pre-service training—that would be a detriment to preparing parents for their roles and would lead to placement disruptions in the long-run.

Determining a pre-service model would be beneficial specifically for those organizations that are providing treatment foster care and it should be standardized across providers. Our organization would be interested in providing our evidenced-based pre-service model as an option. Pressley Ridge's Treatment Foster Care (PR-TFC) pre-service training is the only evidence-based training available that was developed specifically for treatment foster parents and it incorporates all the elements included in the concept paper; cultural humility, connections with birth families, and trauma-informed.

If there is a plan to ask for input from foster parents (surveys, exit interviews), sharing the raw data with providers would reduce duplicating efforts. We have developed a standardized satisfaction survey, which would allow for the opportunity for organizations to benchmark results with each other.

Mockingbird Family Model

While this approach has merit, it does not have any strong evidence of effectiveness. It would be important to ensure the developers are in a position to support large-scale adoption of their model, which may not be the case. Instead, there are other evidence-based models that have been shown to be effective in supporting foster parents (Together Facing the Challenge, for example).

Pre-placement

Pre-placement is an important part of ensuring the first placement is the best placement and is part of the Pressley Ridge –TFC model, but this rarely happens in a system that operates mainly in emergency placements and when courts mandate conversion from shelter to foster care in the same home. The lack of short-term diagnostic congregate care and shelter placements makes pre-placement very difficult. In addition, when the team working with foster parents sees children and families struggling to form bonds, after interventions and trainings, the decision for a youth to remain in a home to avoid a move should be looked at closely.

Foster Homes by Region

Most of our foster home referrals come from word of mouth from already certified foster parents and include friends, co-workers, and family members that do not necessarily live in geographical proximity. Limiting a provider's reach across the county would hamper this process.

One Family One Home

While this could be ideal, it will limit the number of foster beds available. A better approach might be to look at each foster family individually regarding their experience fostering more than one youth, their current family composition, their support system, and the outcomes for the youth they have fostered (for example are youth moved to permanency or have there been multiple disruptions in a home). Implementing a competency based annual evaluation may be an important part of this approach; we do this as a part of our model in order to evaluate our treatment parents' competency levels in the skills they were taught in pre-service training.

Transparency/Conferencing and Teaming

In addition to what is being proposed, implementing a standardized feedback process for each Conferencing and Teaming meeting, to include family and providers feedback, could be effective in ensuring the practice works as intended.

Transparent Rate Setting

Utilize state approved cost reporting in the IVE process as a basis for rates.

Accountability Measures

Accountability measures should include all team members including, CYF, advocates, providers, and other members of the team. They should take into account court orders and judicial mandates. Providers are often held accountable for decision and activities that are outside of their control.

Aftercare

It would be beneficial to utilize an evidenced based or evidenced informed after care model. Currently Homebuilders can be utilized for reunification but with some work with the Institute for Family Development (IFD), the PACT model may also be able to be used. Providers could be asked to submit specifically around an aftercare model.

Comment 14

As a foster care provider, we are acutely aware of the shortcomings of the current foster care system. We fully support, and share in, the goal to recruit more foster homes that are responsive to the unique needs and experiences of all children in care. Allegheny County's collaboration with the provider community and its stated commitment to transparent communication are deeply appreciated and we look forward to working together to achieve permanency for all children in our community. While the DHS Foster Care Concept Paper is well-intentioned, it does raise several questions and concerns that we hope will be considered before any of the ideas raised within it can successfully be implemented.

Coordinated Recruitment

Providers need greater detail on what Allegheny County envisions for recruitment coordination among providers and what data would be expected to be shared across providers. Providers invest significant resources and time in our work with prospective foster families. Indeed, foster families often choose a foster care agency after engaging with several based upon the training, philosophy, values espoused, and supports offered. While we routinely share information about other agencies with our foster family prospects, we would not share the foster family's contact information with other agencies. To do so would be a violation of their privacy and would undermine the trust providers must build with their foster families to ensure placement stability.

Expedited Certification

Again, we need additional information regarding how expedited certification would work. On its face, expediting certification would represent an enormous risk to foster care providers, such that we would likely be unable to obtain professional liability insurance or would be offered only limited policies that would be cost prohibitive. The certification process is a risk mitigation step that providers have significant control over. From a quality and placement stability perspective, expedited certification would undermine both. Rushing families through a process, whether it be training, the home study, or the background check, would result in many families being unprepared for the realities of foster care. What we are asking of families is to open their homes, their hearts, their entire lives to children they don't yet know and to risk the heartbreak, stress, and invasion of privacy that often come with this endeavor. That is not something that they should do lightly and the weeks, and sometimes months, of the certification process prepare them for what we are asking them to do – and to do it well.

Customer Service

All foster care providers work very hard to support their foster families. But it is ill-advised and inaccurate to refer to foster families as "customers." Our focus is on the children in our region in need of placement services. Ultimately, they are our "customers." We work to recruit families who will best meet **their** needs. Our foster families are our partners in achieving permanency for our children and we hold each other accountable for the responsibilities we each have in achieving that. It's also important to note that, while there are many dedicated, responsive, and supportive CYF caseworkers, the biggest complaint we hear from foster families is how they are

treated by their county caseworker. Complaints include providing little or inaccurate information about a child, treating them with suspicion or, in some cases, open hostility, failing to return calls, no-showing for home visits, dismissing safety concerns they express and more. We have had more than one foster family decline to work with Allegheny County going forward as a result of their experience with the county. So, as we contemplate how to better support foster families, providers AND CYF need to examine their current practices and identify areas for improvement. And we should remove the term "customer" from the discussion and instead acknowledge and affirm the partnership we must build with our foster families.

Peer Support

The Mocking Bird Family Model is certainly worthy of consideration. However, many agencies are already providing significant opportunity for peer support amongst their foster families, including providing respite, training, and advice. DHS should consider surveying agencies and families regarding what supports they currently use, what additional supports they need, and how best to provide them. Dictating a specific model may well be necessary – but we may also find that a lot of what is being done already works very well.

Reduced Time to Permanency

We applaud this commitment to concurrent planning and moving children more quickly to permanence. We do urge the county to engage the Allegheny County Family Court in this discussion as well, as often delays in permanency, whether reunification or adoption, can be mitigated with definitive timelines set by Order of Court.

We fully support the concept of "ice breaker" meetings between foster families and birth families and routinely facilitate such meetings. However, we urge an individualized approach to when and how those meetings take place. Children, and birth parents, are traumatized immediately following a removal. In some cases, having a face-to-face meeting with foster families right away can alleviate a birth family's anxiety about the placement. In other cases, it can be helpful to wait a few days to give everyone a bit of a cooling off period. We have always tried to hold these meetings as quickly as possible, and just urge flexibility in the approach to best meet the needs of the child.

Accountability Measures

We look forward to the opportunity to bring more data-driven decision making to foster care and collaboratively establish accountability measures. This has been previously implemented in prior foster care RFPs and other initiatives. It would be helpful if DHS could share lessons learned from that process and transparently share benchmark data sooner rather than later.

Other Considerations

Standardized rates tied to expectations and service quality are essential for ensuring foster care services are sustainable for service providers. In addition to expectations and service quality, the actual cost of care must be considered. To effectively address the cost of care, the county and providers must work together to solve the issue of transportation. While making all reasonable

efforts to place children in their home school district will help, that is just one component to transportation. Visitation requires enormous personnel resources and is one of the most difficult aspects of placement services to manage. Visitation frequency and location can change with very little notice – and often visits with multiple family members, including siblings, must be coordinated. While our foster families transport our children as much as possible, many of our families have multiple children in their home and also work full time. The responsibility for transportation and visit supervision falls to the foster care provider. Requisite staffing is difficult to predict, so often visit supervision and transportation fall to part time or casual case aides. As you are aware, there is significant turnover in these positions. When calculating a sustainable standardized rate, transportation expenses must be included. Providing some leeway in visitation schedules immediately following a hearing in which visitation is increased would be an enormous help for providers in planning. Transportation could be addressed much more efficiently with collaboration across multiple foster care providers, together with CYF.

Thank you for the opportunity to offer comment on this important step in improving outcomes for children in placement in Allegheny County.

August 18, 2020

Comment 15

Our goal with this feedback is to make the case for the value of new technologies and tools that would enable the DHS or community-based care providers to fulfill the strategic priorities that have been described in this concept paper. We wish to provide information about tools that currently exist in two areas: 1) the foster care matching process and 2) the continuous collaboration between the agency and the foster parents. By describing the benefits of each, we aim to encourage an awareness of these tools and their value whether they are employed by the DHS or by the community-based providers.

The Foster Care Matching Process:

Instituting a data-driven, research-informed placement matching process for your county's foster care population can help improve outcomes for children and families. Finding the right match can have a significant impact on children's lives both in measurable outcomes in areas such as placement stability and timely permanency, but also in immeasurable outcomes such as a child's ongoing psychological health and the utilization of publicly provided services related to mental illness, homelessness, and other difficulties that become more likely for individuals who experience trauma during childhood. Poor matches between children in foster care and foster families can also significantly impact the retention rates of foster families, and the costs of care that an agency must bear when moving children more often and waiting longer for them to achieve permanency. Simply put, the placement decision for each child or sibling group is one that should be considered carefully and judiciously, taking into account many different factors that should be guided by the DHS's placement outcome goals.

The Foster Home Collaboration Process:

17

The recruitment and retention of effective foster parents begins with the initial licensing process and continues throughout the family's engagement with the licensing agency. There are tools in a variety of formats, including applications for mobile devices, that encourage collaboration between licensing entities and foster parents. Such applications make the licensing and renewal processes more transparent and effective, help parents care more effectively for their current placements, and open up new channels of communication between parents and their agencies.

Comment 16

- Reunification-positioned recruitment in which recruitment messaging could emphasize reunification, the foster parent's role of providing temporary assistance while families stabilize and the partnership between the foster parent and biological parent in the work towards reunification.
- Necessity to ensure that foster parents or potential foster parents have the needed resources to be able to take in children in their homes which includes childcare, assistance with transportation (if they do not have a means for transportation), an appropriate stipend to meet the needs of the child, and immediate access to services for the children placed
- Through the process of matching youth to foster care placements it is critical to not only include the voice of the birth family and foster parent's willingness to accept the placement but when possible to also include the input of the youth (ex: if two homes are available let them make have a voice on which one is utilized)
- Provisions for "Family Time" so that parents and children move more quickly to unsupervised time based on appropriateness and thus increase the timeliness to reunification. These provisions would help ACCYF, the Provider and the family have a shared understanding of the "Family Time" process, expectations and how to partner for the shared goal.
- The concept of having surveys and focus groups with the foster parents is critical for foster parent retention and to ensure their experience is as smooth as possible however it is also necessary to have birth parent advisory groups that inform frontline practice for birth family engagement to continue to obtain their input on what supports, services and engagement they need when their children are placed in a traditional foster home. This could also assist in development of a continuum of birth parent services that address empowerment, stress and the ramifications of family separation.
- Parent and community voice through advisory boards and dedicated surveys should be utilized to inform practice and sensitize frontline staff to working with birth families. The onboarding training for foster care staff and training for foster parents could include co-facilitation with impacted youth and parents.
- Targeted intake case management practices that purposely engage birth parents early in the case to ensure that the birth parent starts to build a connection with the foster parent from day 1 of placement. In addition, engagement with the Provider and foster family

through Teaming immediately following placements to expedite ensuring that all parties have all needs met during this traumatic transition from removal to placement.

- Once basic safety has been established, providers should be familiarized with preventive models that can be used as a step-down to quickly return children in foster care to their family –this could be an opportunity to train the respective providers but also the foster parents on how they can be invaluable in this role –servicing as a kind of "co-parenting" model with the foster parent and birth parent during the transition to reunification so there is a consistency between the households regarding rules, boundaries, etc. to help reduce the trauma that the child will experience in the process.

- Trauma treatment and trauma-informed parenting: In addition to training foster parents in trauma-informed parenting strategies, this training could be provided to parents to provide consistency for children during the transition home through the reunification process.

- Access to trauma treatment services in communities should be expanded to allow for the services to be increasingly community based and accessible for the foster parents when children are placed in their homes.

- Pregnant and parenting youth **-** Young people in foster care who are expecting or parenting are at high risk for family separation. They should be offered comprehensive know-your-rights training delivered by peers and provided with peer support during the placement.

- When mentioned that providers will implement tenets of a Mockingbird Family Model of care it may be necessary to consider adjustments needed to respond in both a racial and culturally appropriate manner as the Mockingbird Model would need to be changed in how it responses to families of color, the LGBTQ community and provide for regional differences across neighborhoods.

- Maintain an intense kinship care model: While there remains a need for the recruitment and retention of traditional foster homes, uphold and continuing advocating for kinship care placements. When kinship care is unavailable at the onset of placement the culturally and racially appropriate principles of kinship care should be reflected in a traditional placement, where diligent search for relatives still remains proactive though assignment of Kinship Navigator referrals for children placed in traditional foster homes. Through the family finding process not only could placement options be identified but also other kin who may be willing to provide support to the child during the foster placement so that even while in a traditional placement there are still kin connections.

Comment 17

Mission and Vision

First and foremost, we agree with the concept paper's primary position that children belong with their own family. But when that is not possible, a family setting and permanence is essential to healthy development. As a demonstration of these commitments – we have actively worked to transition many young people out of our congregate care programs back to their family or into

19

foster homes. We have facilitated numerous adoptions over the years and effectively identified paths to permanence.

The question was posed if we prefer the term "foster care family" or "resource family". We believe that the term "foster care" has garnered a negative reputation. Children and families may feel the impact of that negativity. For that reason – we prefer the term "resource family".

Purpose

As the largest non-kinship foster care provider in Allegheny County, we have consistently demonstrated effective recruitment strategies resulting in high-quality families. However, we understand the urgency to recruit more families that meet the vision of the Concept Paper.

We agree with the Concept Paper and at this point we are looking forward to seeing the RFP and responding to it.

Goals and Strategies

We thoroughly agree with the Concept Paper on the four Goals and 17 strategies. We are eager to be a part of the team that make them a reality for our community.

Our new families are currently placed in geographical pods with current foster parents in their area to interact as mentors and support partners. Every new family has at least two mentors.

We agree that increasing culturally responsive, community-based placement options to help divert Black youth from congregate placement settings is essential.

We are currently partnering around the Thornton Initiative with churches in predominantly Black communities to find and recruit new Black foster families to reduce the disproportionate placement of Black children in white families.

The aftercare model to support reunification is particularly interesting. As we develop our SWAN program we can build this component.

Program Approaches

We support the program approaches including the need for TFC, effective recruitment, increased supports, birth family connections, One Family – One Home, and geographic recruitment.

The accountability emphasis and re-procuring contracts is particularly welcome. We pride ourselves on doing what we say we do and fulfilling and exceeding expectations. Over the years we have consistently heard about and seen providers that are not team players, not fulfilling the terms of their contracts and ultimately failing the children and families of our community where foster care in concerned. Reducing the number of players at the table will allow those of us truly committed to focus our collective energy and get the work done that is so very important to make the goals of this Concept Paper a reality.

Comment 18

Positive thoughts about the concept paper. Additional vetting, recruitment and training needed for potential resource families. Mocking Bird Model great idea. Other thoughts would include congruent care model with supporting providers for successful transition to foster home and aftercare supports.

Comment 19

Live in foster parents used as the hub to transition to foster care/adoption permanency - love geographic areas for the kids in care.

Comment 20

The Paper Concept was shared with foster care staff and resource families that have varies experiences working within the system. Overall, the general response was it "seems" like a great idea to have everyone working together to achieve permanency for the children, however when you add in the experience that most have had with the system that has rarely been the case. One of the main missing pieces is how OCYF is going to be involved and part of the team. We want OCYF to also be a part of the positive working relationship between the birth families, foster families, and providers. Often times, there is late notification or no communication from OCYF to resource families and providers. The communication from the beginning needs to improve. If we want to limit the number of disruptions and keep children in their first placement, then we need to have all the information from the beginning with those emergency placement calls. All families are different and know their limitations. We need to be mindful of that when the search is on to find the child(ren) a home. Open communication and ongoing communication is important. There have been times that children have been placed in foster homes and then there is no communication from OCYF for days to weeks in some incidences. We all need to work together and understand that each person's story is different, but have a level of training and expectation that is same for the team. Foster families expressed finding supports within their agencies and network (their families, community, and other supports). Supports within the agency were reported to begin during the certification processes and continue throughout the families' fostering journey. Families are feeling connected to their provider staff and other foster families. The need for additional foster homes is no secret as well as retention of homes, but foster families expressed that they need to do this on their time. Pushing families through the certification process is only going to create additional challenges as well as struggles. Foster parents want and need to feel fully supported and comfortable with bringing children into their homes. Staff expressed if the process is expedited, will there be enough time to get to know the foster families prior to certification to make sure they are a good fit for this new journey that they are about to embrace upon which typically occurs within one week of certification for most. Foster families have been spending more time with the children placed in their home during this pandemic. Most expressed that since this has occurred it has allowed more opportunity to build

relationships with the children in their home as well as their parents. It seems that the relationship between birth and foster parents has strengthened for most families during these challenging times. Foster parents are more involved in facilitating those virtual calls and keeping families updated on what is going on with their child. Contact between foster parents and birth parents is already a challenge as parents and children need to have time to process what occurred. Staff and families are already attempting to facilitate ice breaker meetings, however the timeline for each family varies greatly pending on the situation. The meetings are very helpful for everyone, however 24 hours would be a challenge for most participates. Staff and resource families look forward to assisting OCYF in reaching their goals.

Comment 21

Funding for this program: Will there be an increase in financial resources to develop and maintain this program? Will there be a difference in rates for families involved in the mockingbird model? Will the per diem be different for the hub home family? Mockingbird model: Will on-going consultation need to be obtained to remain certified in the mockingbird model? What is determined a warm handoff? What are barriers for warm handoffs> Aftercare is to be provided by providers, what are the expectations of this specifically length of time and reimbursement? What ideas has the department identified as accountability measures?

Comment 22

Transparency in the presentation of a case is critical to the success of any foster care placement. How can this be improved upon? Reducing time to permanency is a focus in this paper – how are the courts being included in this discussion? There is a lot of discussion on outcomes and quality tracking for rate increases – can this be further defined? Related to the mockingbird concept, will any type of stipend be built into contracts to acknowledge the foster parents that have a willingness to provide this support? What are the specific expectation of the of the hub leader in this model? There is reference to expedited certification yet increased expectations for foster parents, such as increased immediate contact with birth families – how does expedited certification allow for appropriate vetting and training for these experiences? How will the DHS supported matching events and pre-placement visits work in collaboration with the provider agency? Can the after care requirement be met with other contracted programs such as In-Home Services or Visit Coaching? What type of opportunities would this model present for CRR programs? Do you anticipate that each provider will need to respond to an RFP to continue to provide foster care services?