



FINAL

DHS Children, Adults and Families  
Child Welfare Advisory Committee  
May 14, 2008

Members

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|--|--|--|--|---|
| <input type="checkbox"/> Dana Ainam                      | <input type="checkbox"/> Don Darland                 | <input checked="" type="checkbox"/> Robyn Cole for Phil Lemman | <input checked="" type="checkbox"/> Pam Patton             | <input checked="" type="checkbox"/> Judy Stiegler         |
| <input type="checkbox"/> Janet Arenz                     | <input checked="" type="checkbox"/> Rep. Sara Gelser | <input checked="" type="checkbox"/> Benjamin Hazelton          | <input checked="" type="checkbox"/> Angela Sherbo by phone | <input checked="" type="checkbox"/> Christine Stolebarger |
| <input checked="" type="checkbox"/> Mike Balter by phone | <input type="checkbox"/> Cathy Kaufmann              | <input checked="" type="checkbox"/> Christina McMahon          | <input type="checkbox"/> Becky Smith                       | <input type="checkbox"/> Ruth Taylor                      |
| <input checked="" type="checkbox"/> Iris Bell            | <input type="checkbox"/> Jean Lasater                | <input checked="" type="checkbox"/> Jerry Moore                | <input checked="" type="checkbox"/> Christine Stetzer      | <input checked="" type="checkbox"/> Nan Waller by phone   |
| <input checked="" type="checkbox"/> Leslie Currin        |  |  |  |   |

DHS Staff

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|--|---|--|---|--|
| <input checked="" type="checkbox"/> Bryan Johnston | <input type="checkbox"/> Jim Neely                | <input type="checkbox"/> Toni Peterson             | <input checked="" type="checkbox"/> Greg Parker | <input checked="" type="checkbox"/> Stacey Ayers |
| <input checked="" type="checkbox"/> Mickey Serice  | <input checked="" type="checkbox"/> Nancy Keeling | <input checked="" type="checkbox"/> Madeline Olson | <input type="checkbox"/> Debbi Kraus-Dorn       | <input checked="" type="checkbox"/> Bill Bouska  |

Minutes Recorded By Pam Pearson

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**OVERVIEW OF AGENDA, APPROVAL OF MINUTES**

- Stiegler: Welcomed the newest CWAC member: Christina McMahon, representing the Oregon Juvenile Department Directors Association. Reviewed today’s agenda. Moved the Teen Issues in Child Welfare Subcommittee to follow after the discussion on “How DHS can best engage CWAC.”
- Keeling: Introduced Stacey Ayers, CPS program manager. He will be on the Teen Issues on Child Welfare Subcommittee.

**ACTION: The minutes of the 3/12/08 and 3/25/08 CWAC meetings were approved.**

The minutes of the 2/6/08 and 2/13/08 Future Issues Work Group (FIWG) and 2/13/08 and 3/12/08 Teen Issues in Child Welfare Subcommittee were distributed. Questions about those minutes should be directed to Pam Patton for the teen issues subcommittee and any of the members for the FIWG.

**INTERIM ASSISTANT DIRECTOR REPORT – Bryan Johnston**

CIRT Review Committee

- Johnston: Nancy Keeling will summarize the work of the CIRT Review Committee. Benjamin Hazelton and Jerry Moore served on the committee and

can add to Nancy's report. The committee chair, Pete Shepherd was not available to attend CWAC today.

- Keeling: The committee's draft recommendations have been sent to Bruce Goldberg but are not available to share with CWAC today. Some of the recommendations are:
  - Use initials instead of names of children on CIRT reports.
  - The CIRTs should focus on system issues instead of case specific details to avoid making information public that could compromise the criminal process.
  - It should no longer focus on 30- and 60-day responses. An initial report should be made at 30 days with additional reports as additional information is received and recommendations are achieved.
  - Add an audit point using the DHS Audits office.
  - Engage the QA process.
  - Look at how CWAC can play a role in the implementation of some of the recommendations.
  - Consider submitting a request for additional funding because there are more cases that should have CIRTs.
  - Develop a template for the reports.

Two CIRTs have been recently posted using the proposed template.

- Hazelton: Regarding the 30- and 60-day reports, the recommendation was that the report be made available as soon as information is known, so reports may be completed sooner or later than 30 or 60 days.
- Stetzer: Will the audit reports be made public?
- Keeling: Assumes they would. Clarified that the addition of an audit point is a recommendation and is not in place yet.
- Gelser: Will it be similar to a Sensitive Review Committee and include non-DHS staff, particularly the local district attorney?
- Keeling: It will be the same in that it will include a thorough case review. The membership of CIRT teams was not addressed in the recommendations. The local district attorney participated in both recent CIRTs. A CIRT is to review a case of a serious injury or fatality of a child in DHS custody, or for whom Child Welfare received a referral within the last 12 months. The Sensitive Review Committee is not triggered by the same things. Concerns about secrecy around the CIRTs came out of our inability to post four CIRTs out of respect for the criminal investigations.
- Hazelton: Clarified that a fatality makes a CIRT mandatory. If it is a serious injury, a CIRT may be conducted.

- Gelser: The statutory changes to must/may were made last session.
- Moore: The CIRT Review Committee did a clean-up of the process to get away from pointing to who was at fault. It is meant to make sure the situation does not happen again. Internal issues involving employees will not be in the CIRT.
- Johnston: It is a management tool to find out what can be improved, find it out quickly and then do it. The media representative was favorable of the changes, but Bryan is of the opinion that the media as a whole will find they are not in favor of the changes in removing the details of the death or injury and who was at fault.
- Moore: If the media wants to find out a child's name, they can get it from sources other than the CIRT. It is called a critical incident and the critical piece is to determine what to do so that the incident doesn't happen again. It is not to lay out a criminal case.
- Keeling: One recommendation points out the barrier that exists to sharing information between Child Welfare and Self Sufficiency.
- Gelser: Will the parents (in particular, a non-custodial parent) in the case have the same access to information as they did with the previous CIRT process?
- Keeling: Yes.
- Ayers: If there is a criminal investigation, the parent is more involved through that process.
- Stetzer: Wants the CIRT process to include a way that lets her know the changes in CIRT recommendations are made.
- Keeling: The audit piece and adding CIRTs to our quality assurance process will help with that follow up.
- Moore: The CIRT may not be the right place for noncustodial parents to get their information on the situation. DHS and criminal investigators should have empathy to tell the noncustodial parent what they can outside the CIRT process.
- Keeling: Child Welfare is updated at each CIRT and that can include asking questions to guide workers to get information to the families.
- Patton: The audit point is critical and should be moved up earlier in the process.
- Hazelton: Agrees that the audit point was the priority for the CIRT Review Committee, as well collaborating with CWAC on what information needs to be institutionalized within a CIRT review. Perhaps a friendly amendment should be made to the CIRT Review Committee's report that DHS should have a companion report for those people with a more personal involvement in the case.

- Sherbo: We have not been provided with a copy of the draft report, yet we have spent 30 minutes discussing it.
- Stiegler: It has been submitted to Bruce Goldberg; where is the opportunity for CWAC comment as a second set of eyes?
- Keeling: The draft recommendations were given to Bruce, who will decide which recommendations to accept.
- Johnston: This discussion shows that CWAC wants to be involved. He will send a message to Bruce that CWAC wants to comment further. The intent of this morning's report to CWAC was not to seek comments, but to be informational. He will report to Bruce that CWAC agreed the recommendation of an audit point is important.

**ACTION:** • **Bryan Johnston will report to Bruce Goldberg that CWAC agreed the recommendation of an audit point is important.**

- **The final CIRT Review Committee report will be provided to CWAC and time for further discussion will be added to a future CWAC agenda.**

#### CAF Assistant Director Vacancy

- Johnston: His interim as CAF assistant director will end in mid-July. His goal was to stay through the McKenzie transformation work, which has happened. CWAC will have access into the selection of the next assistant director in that:
  - Some CWAC members serve on the Interim Assistant Director Advisory Committee which will reconvene to be a filter for the pool of applicants.
  - CWAC has direct access to Bruce and Bryan, who are developing the pool. CWAC members may submit applicant names and those people will be individually recruited. A job announcement has been posted, but we are also recruiting. Go to the DHS web for the announcement (<http://www.oregon.gov/DHS/jobs/index.shtml#jobs>).

We cannot rely on building a pool of applicants without individually recruiting. Gave the example of Henderson County, Nevada: They received no applicants for a position that has a higher salary and fewer responsibilities (overseeing child welfare only, not self sufficiency or vocational rehabilitation). There is also the mixed blessing of the Casey Foundation, which brings money and expertise, but takes away talent. The goal is to have someone named by the time he leaves in July.

- Sherbo: Is there any thought to having another interim person?
- Johnston: It has not been ruled out, but is not the preference.

#### Oregon Safety Model (OSM) Training

- Johnston: When the Oregon Safety Model was implemented, policy staff were tasked with training field staff. We have now created four teams of three staff each on rotation to become trainers and create the curriculum. They will travel to every Child Welfare office to train on site. They report to Toni Peterson.
- Hazelton: Are opportunities for case consultation built into the training?
- Keeling: Yes. They will go into each unit and apply the OSM to specific cases. The program consultants are going to each office immediately after the training to help staff practice what they learned.
- Johnston: This training will help in the institutionalization and socialization of the skills needed to implement the OSM.

#### DHS Transformation

- Johnston: The DHS transformation is on schedule. Bruce and the legislature deserve credit for the courage to undertake this endeavor. Will focus on child welfare this morning. We have identified potential courses of action, the net gains and possibility of accomplishing each one. We are at the phase of looking at each opportunity for how attainable it is and how much can be gained. We will use that information to decide if we want to pursue that course of action. For example: We used to have community development staff in local offices. Restoring those positions would result in a gain of 245 staff because they develop respite care and other community resources. Foster parents will get adequate respite, which improves foster parent retention, children don't have to move to a new home, and we don't have to find new foster parents. The 245 FTE is based on what we used to have. A gain of 200 FTE would come with paperwork reduction. Another idea is to equip caseworkers with docking laptops rather than PCs. A gain will come from the recent reorganization in the Attorney General's office so that one attorney keeps the case throughout the life of the case. We gain 16 staff because we are no longer having to write reports for the handoff to a new attorney.
- Keeling: The community development program is similar to the old volunteer program.
- Waller: Sits on one of the subcommittees of the Child Safety Work Group, which is charged with making sure children in Child Welfare thrive and reducing the number in foster care. That subcommittee was also talking about

how to free up caseworkers so there can be more contact with parents and children.

## **HOW CAN DHS BEST ENGAGE CWAC?**

- Stiegler: Summarized how CWAC was able to make some effective recommendations on the DHS policy option packages, but not for the Child and Family Services Review Program Improvement Plan (CFSR-PIP). During the last Future Issues Work Group (FIWG) meeting, we discussed how CWAC operates, the kinds of issues we take on and the need to recognize that we cannot make effective recommendations in all circumstances. This can be due to the rhythms of the budget and legislative processes as well as the expectations of DHS and CWAC. Described Nancy Keeling's realization during a previous CWAC meeting that DHS makes an assumption that distributing information to CWAC via email means CWAC as a committee has received it. DHS is not always clear what kind of feedback is wanted: individual comment, group consensus or none. There are lapses on both ends of the spectrum. CWAC was effective when Bruce Goldberg asked us for specific recommendations on what two things were important to keep children safe. We want to know how we can access other points of important work and be effective as an advisory group. Asked Mike Balter to expand on what FIWG discussed.
- Balter: What does the customer (DHS/CAF) want or need? What horizon are we looking at? Policy or operations? The policy horizon is multi-year and within a large context. The operations horizon is often shorter term, but with long term implications. CWAC needs better preparation for the context in which it will give advice. Also, if we are to do more complex advising, members have to prepare themselves to be effective advisors and have to do more than just attend the meetings. When we come to give advice, that advice should be based on reflection.
- Bell: Timing is another issue, i.e., when we get the issue and how much time we have to study it. With the PIP, we were too rushed.
- Stiegler: This gets us back to the need for DHS to be clear about what it wants from CWAC. We are bringing more structure and purpose to our discussions and have developed operating procedures and principles for child welfare system change as a result. One reason we were not able to produce consensus recommendations about the PIP was because we did not want to rubber stamp them. We take the process of advising seriously. Earlier in the PIP process, there was an assumption that because individual CWAC members were

involved in the domain workgroups, they were participating as CWAC members. In fact, we sometimes operate within our individual perspectives and other times we operate as a group. We want a discussion about where to go from here so we can be what the ORS says we are to be: to advise the department on the development and administration of child welfare policies, programs and practices.

- Balter: If DHS is going to ask for a decision of the group, CWAC needs the tools to make those decisions. He is willing to do that, but there needs to be an understanding that it involves a longer process to get to such agreement. If DHS wants to use CWAC to access a pool for individual input, then that input cannot be called CWAC advice. Those are two different tasks and where the confusion occurs.
- Johnston: Inside this room, you function as CWAC. Later today, Kevin George will come to you with a suggestion and CWAC will agree, disagree, or amend it. That will be a CWAC decision. When we want CWAC input, the only way is to bring it to all of you at a meeting. One of the recommendations Kevin will bring is to have some CWAC members more involved in the development of medication management. There is no expectation that they will speak for anyone other than themselves, but there will be an obligation for them to report back to CWAC. He does not see CWAC existing outside its meetings.
- Balter: Then CAF Administration needs to realize there will always be a need for a first reading to resolve conflicts among the members. More than one meeting may be needed for CWAC to develop group recommendations.
- Hazelton: Issues come on a sliding scale of complexity. Some are complex enough to need more than one meeting. Others are simple enough that CWAC can work through them in one meeting.
- Stiegler: Another option is to run an issue through a subgroup such as FIWG to prepare a recommendation for the full CWAC to consider.
- Hazelton: When we agreed to be part of CWAC, we should have agreed to the need to be prepared to respond quickly sometimes.
- Stiegler: The breakdown with the PIP was the agency not clearly communicating from the beginning that group action was needed.
- Hazelton: Sees his advice-giving role to be within what he knows, how an issue will impact his organization and to point out pitfalls and negative effects on children and families. Does not see his role being to write practice. CWAC has gotten bogged down in wanting to write rule or practice.
- Waller: For CWAC to fit in as an advisory group, we need regular updates on what other groups and initiatives are doing. Some of them are making

recommendations on issues CWAC has weighed in on. Requested CWAC receive a list of current child-welfare related initiatives.

- Stiegler: When she recently met with Mickey and Bryan, Mickey suggested bringing the list of initiatives to FIWG to prepare a recommendation to CWAC on how to pare down the list. The number of initiatives continues to grow and it is difficult to prioritize them. CWAC could provide an external look to prioritize.
- Serice: All of the initiatives are important; however, it would make sense to identify the top two or three that drive the others.
- Johnston: Hears these same frustrations in other advisory committees. The advisory role is vital and keeps DHS under pressure to do the right things. Your frustration is that you want to do more, know about issues earlier and not be asked to advise on complex things at the last minute. He will strive to do better.
- Keeling: The issue Kevin George is bringing to CWAC has a timeframe, set by someone else, that comes before CWAC meets again.
- Johnston: Which is why there is a sliding scale of complexity. It is an example of something that does not need another CWAC meeting or have time for members to take back to their constituencies.
- Stiegler: When an issue is brought to CWAC, DHS needs to be clear of the reason why it is being disseminated to CWAC. The medication management issue was sent to CWAC several weeks ago. We will be working to be more clear on the purpose for sending information to CWAC. If it is something that will be on a future CWAC meeting agenda, we will clarify what will be asked of CWAC. We need to be both prepared and flexible.
- Waller: The March 25 meeting on policy option packages went well and people were prepared in advance.
- Balter: Clarity is needed so we know if DHS is seeking individual or group advice. They involve different processes and approaches.
- Moore: Is not able to read all the information that is sent to CWAC. Would prefer to receive an executive summary of the issue with the detailed background available for those who are interested in more.
- Johnston: Agrees with Jerry.
- Currin: An executive summary with an attachment of the details would be helpful for her also.
- Hazelton: Is CWAC a group from which consensus is needed? Maybe we don't need to be making decisions as a group.

- Johnston: Earlier in today's meeting, heard CWAC's concern that an audit point be included in the CIRT. He will be taking that comment to Bruce Goldberg. Considers that a CWAC accomplishment even though it is not a group consensus decision.
- Stiegler: Cautioned against never making consensus decisions. Some issues need that.
- Moore: When DHS sends the CIRT Review Committee report to CWAC, a fact sheet/executive summary would be helpful.
- Patton: There are many different perspectives represented on CWAC. If an issue does not fit in her area of interest, she decides she does not have time for it. DHS needs to understand that members have different perspectives and they weigh each issue accordingly. Perhaps DHS should rate issues to sort out which ones absolutely need consensus decisions from CWAC. Maybe FIWG can develop a rating scale.

- ACTION:**
- **Continue discussion at June 11 FIWG meeting.**
  - **DHS staff will be asked to clearly state the purpose of why they are sending information to CWAC and to prepare executive summaries on issues that require a CWAC action.**

### **CWAC PARTICIPATION IN DHS MEDICATION MANAGEMENT ADVISORY GROUPS – Kevin George, Teri Shultz**

- George: Introduced Teri Shultz, RN. When you hear comments about the "lone nurse" in DHS Child Welfare, they are referring to Teri. The DHS Medication Management Workgroup focused its work on psychiatric meds taken by foster children. DHS policy has been in place since 1999 for tracking medications and authorization. Currently 29% of foster children take psychiatric meds. There is a lot of media interest. Bruce Goldberg created the workgroup to look at the issue across all divisions initially, but the focus was narrowed to foster children. Their recommendations were similar to those of a workgroup in Portland from two years earlier. Policy changes occurred in May 2007 as a result of the Portland report. The DHS workgroup recommends a medical director position be created and nurses be hired across the state. A policy option package is being considered to build the infrastructure. The recommendations have been discussed with district managers. Today we are seeking CWAC advice on three areas:

- Establishment of a CAF Child Welfare Medical Advisory Committee,
  - Establishment of a Behavioral Health Review Team, and
  - Development of policies and procedures.
- Johnston: District managers are concerned that they have legal authorization without medical expertise. Foster children are 6.5 times more likely to be on these drugs than other children. No one in a local office is qualified to question a doctor's orders. District managers propose forming a group (the Child Welfare Medical Advisory Committee) that includes medical directors to find a better way to manage the meds. Looking for input from CWAC on who else should serve on the medical advisory committee.
  - Stolebarger: Is a parent of a child taking a psychiatric drug. Normally the parent or foster parent goes to a doctor asking for help due to the child's behaviors. Suggested a parent representative be on the medical advisory committee. The parent is required to continue the child's prescription after the child returns home as long as DHS has legal custody.
  - Cole: OYA should be included, so they don't have to develop a parallel but separate program. They serve many of the same children. Also, the Board of Medical Examiners may have suggestions for membership.
  - Bouska: What would be the role of the mental health system? All foster children are on the Oregon Health Plan. If they are receiving comprehensive mental health assessments, then the local mental health provider can support the caseworker.
  - McMahon: Juvenile departments need to be included in the medical advisory committee. They provide services to Child Welfare children in shelter care.
  - Stiegler: Because there is duplication of process for these other agencies, they should be involved in the planning.
  - Johnston: The planning responsibility was given to Kevin George because there was no where else to put it. The rubber meets the road with the foster parent, parent and caseworker making decisions at the moment when the child is out of control, struggling in school, etc.
  - Cole: Medication management crosses over multiple systems. All the systems need to come together to manage the rule. They can either form parallel workgroups or come together on this one being formed by DHS.
  - Sherbo: Are we talking about forming another workgroup on who has authority to consent? Rules came out in September 2006 and we commented on them. Is this another workgroup on the same topic?
  - George: The rules were finalized and put in place in May 2007. The DHS Medication Management Workgroup recommended bringing the idea of a

medical advisory committee to CWAC to see if CWAC thinks it is the right direction to take to bring medical expertise to the table to discuss where to go with the policy and procedure in the future and to develop infrastructure within DHS Child Welfare.

- Waller: Spoke with medical directors earlier this week about the concerns from the bench. Judges are concerned not only with who gives the authorization. A better information management system is needed to track a child's physical and mental health care. Look at how a child can keep the same mental and physical health providers when moved to a different placement, similar to how foster children can remain in their resident schools.
- Bouska: Need to use a systemic approach rather than Child Welfare working in isolation. Do need to include the medical specialty in the advisory committee, but is unclear what is meant by "medical" in the name of the committee.
- George: Regarding data tracking, a Portland branch is working on it and FACIS screens are being developed.
- Stiegler: What does DHS want from CWAC today?
- Johnston: Heard CWAC say we need to branch out to other entities to include them in the medical advisory committee. The other part is the prevention of unnecessary medications and embracing appropriate medications. That work exceeds our grasp right now. CWAC's work is done for today.
- Stiegler: We also heard a suggestion about a different name for the advisory committee. Will this issue come back to CWAC?
- Johnston: We want some CWAC members to act as a bridge between the CWAC and medical advisory committee. They would not speak as the voice of CWAC, but serve as a bridge to report back.

**ACTION:** • **CWAC members recommend:**

- **The following entities be represented on the medical advisory committee: parents, OYA, DHS Mental Health, juvenile departments. Contact the Board of Medical Examiners for additional suggestions.**
- **Develop a system to track a child's physical and mental health care.**
- **Look at how a child can keep the same mental health and physical health providers if the child moves to another placement.**
- **Consider changing the name of the Child Welfare Medical Advisory Committee.**

- **Judy Stiegler will send an email to CWAC to solicit names of CWAC members interested in serving on the medical advisory committee. It will meet monthly starting in June 2008.**

### **CFSP – PIP UPDATE AND ONGOING DIALOGUE – Kathy Ledesma**

- Ledesma: Announced that she is leaving DHS to work with AdoptUSKids. Maurita Johnson is on job rotation to fill behind Kathy. Federal comments on our PIP were received on April 18. They asked for clarification on some things. The six domain workgroups met several times to begin the revisions. Community input has ended. The co-leads of the domain workgroups are working to make the PIP a single story, rather than several short stories. The next draft is due on June 30; however, we will be asking to negotiate that date due to the transition from Kathy to Maurita. Comments will come back again from the feds. The final PIP will be completed in late August probably. Thirty days later, the PIP goes into effect. Region X suggested we form an implementation team. We have discussed that with the Governor and are moving forward to form one. Maurita will have more information for CWAC in July. We hope our PIP effective date will be October 1 to fall in line with the federal reporting periods. Will send CWAC the next draft PIP by email. Updates are on the CWAC agendas for July and October 2008.

### **CWAC TEEN ISSUES IN CHILD WELFARE SUBCOMMITTEE REPORT – Pam Patton**

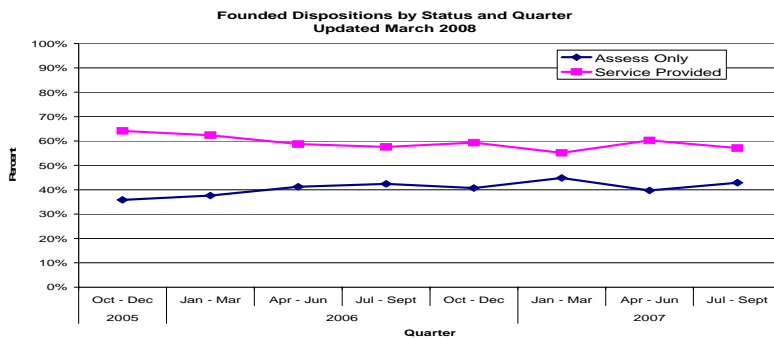
- Stiegler: This subcommittee has a life span to look at whether the Oregon Safety Model is impacting teens. Asked that the subcommittee come to CWAC today with a status report.
- Moore: Why would someone think teens lost access to DHS because of the OSM?
- Patton: When the OSM was implemented, its definition of vulnerability included an age factor. This subcommittee is the third iteration of a teen subcommittee. In the past, it had expanded beyond the child welfare domain. Its focus is back to teens in child welfare. The subcommittee's scope is to advise CWAC within the operational area of the Oregon Safety Model (OSM) on issues affecting teens in the child welfare system, specifically to answer the question: *Is the implementation of the Oregon Safety Model impacting teens?*

*access to Child Welfare or the services they receive?* We agreed to meet monthly for six months to establish a baseline for comparison to answer and/or inform this question. To that end we requested from CAF data for October 1, 2005, to September 30, 2007, which included six months of post-OSM implementation data (from April 1, 2007, to September 30, 2007). The “big” question (all teens accessing Child Welfare) was unanswerable by the current data collection capacity; therefore, we could only review founded cases. The only way to get data on reports of suspected abuse by age would be by a case review by a DHS staff with CPS knowledge. An extensive approval process would be necessary if it were to be completed by an outside research group. The review would determine if the closed-at-screening or unfounded decisions were made correctly based on policy and practice. Apparently CPS program staff did this in the past for their own quality assurance, but not based on age of alleged victim. It was discontinued when the CFSR process began. It is our understanding that CAF is currently rebuilding its QA process.

Additionally, in our proposal we said if there was enough time we had a request from Bryan Johnston to look at “*how well prepared are teens when they exit the Child Welfare System and what is the Child Welfare System’s responsibility for ensuring that they leave more squared away when they leave than when they came in?*”

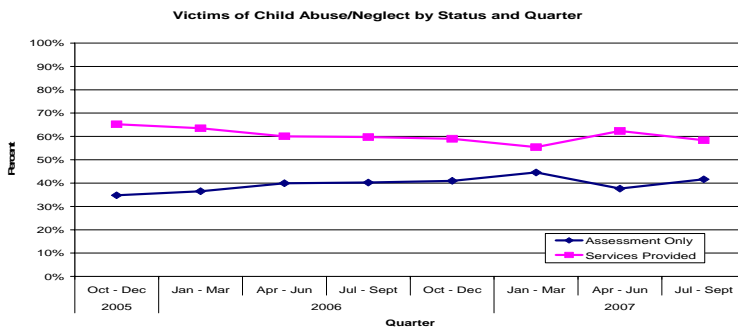
Commended Anna Cox, CAF Research, for her incredible contribution and thorough/understandable data research work. There are some limits on what DHS can measure and we asked for founded disposition data by age, gender, race and county/district. Although Anna did initially get us the county-by-county breakdown, it was clear that it is more difficult and time-consuming to report because the data has to be masked for confidentiality, so later requests did not include county/district breakdowns. **The graphs that follow show no statistical change in founded dispositions by age, race or gender before and after the implementation of the first six months of OSM.**

**Figure 1.**



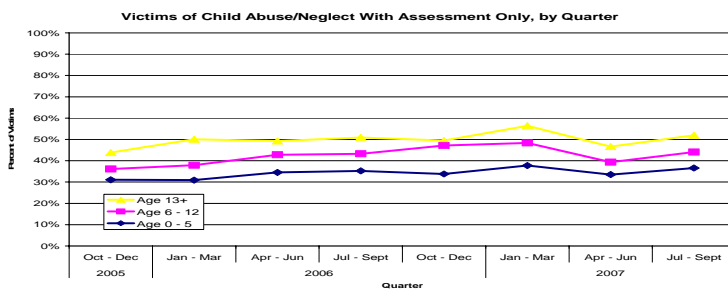
This data is at the referral/case level. Overall the percent of cases that are not provided services past the assessment remains around 40%.

**Figure 2.**



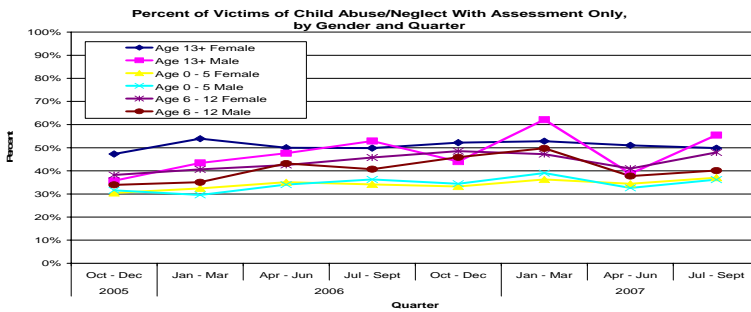
Shows the same data for victims of child abuse/neglect. Each founded report of child abuse/ neglect can have one or more victim of abuse. It is only after a report is founded for abuse that child-specific information is recorded as discrete data.

**Figure 3.**



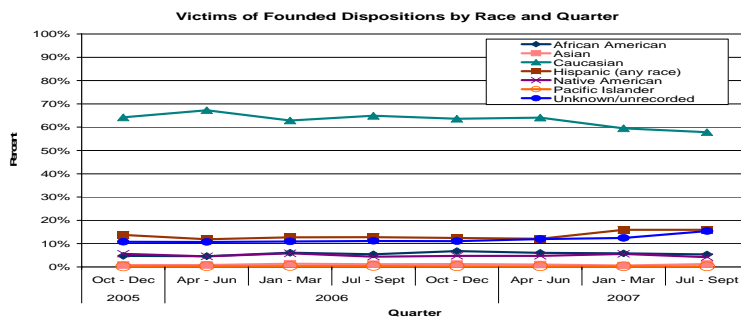
Shows the age ranges for victims of child abuse and neglect when the report was an “assessment only” (i.e. no plan for services were opened during the assessment period). Each age group has a different percent of assessment only victims over time, but the relationship between the different age groups has remained the same.

**Figure 4.**



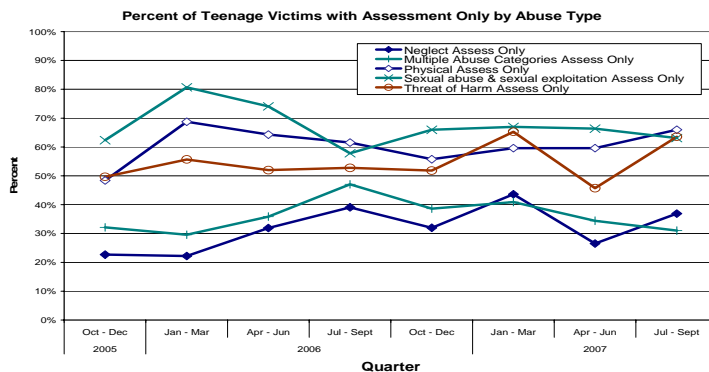
Shows the percent of victims with assessment only cases by the age range and gender of the victims. The same general pattern exists here as seen by age groups alone.

**Figure 5.**



Shows no change in founded dispositions by race, and no significant changes within the first 6 months of the OSM.

**Figure 6.**



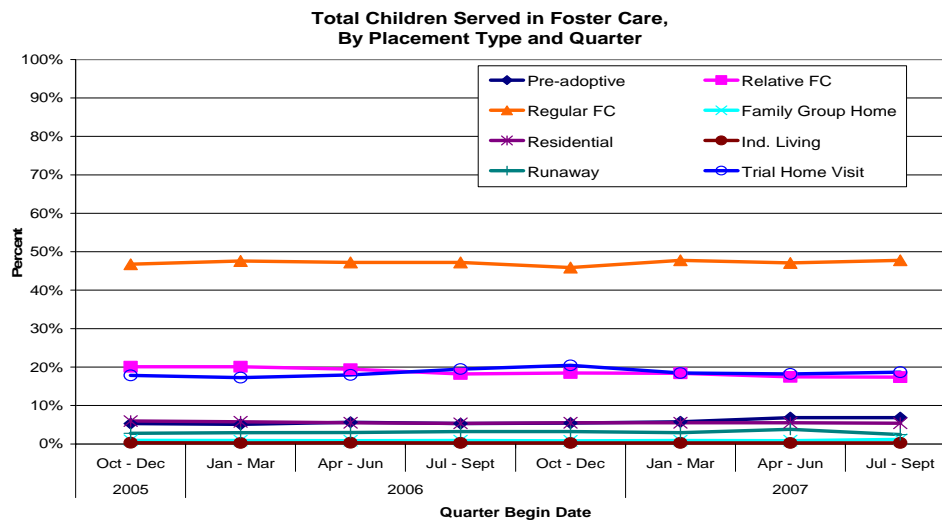
Shows the percent of teenage victims on assessment only cases by the type of abuse noted in that assessment. There has been little recent change in the percent of victims with assessment only founded referrals in the abuse categories of physical abuse, sexual abuse and sexual exploitation, and victims with multiple abuse types. Victims of threat of harm and neglect have some variation in the percent of victims that had assessment only referrals, but the final quarter of the period examined shows a return to the historical levels.

Now that a pre-OSM baseline has been established and the first six months of data reported, TICWS or CWAC will receive updated reports every six months on the status of founded teen cases' access to Child Welfare to ensure that there continues to be no impact.

After we received our baseline information on the data available to us, we began to look at: *Has the implementation of the Oregon Safety Model impacted teens' access to the services teens receive?*

The subcommittee first looked at DHS placement services:

**Figure 7.**



Shows no change in total number of children served by placement type since OSM.

The other graphs also showed that placement percentages by age, race and gender have been static over this time period. Anna said that they expect to see a change in the length of stay for older children, but that is not an OSM issue. The county details show that while the percentages remained static, the actual numbers in foster care decreased. Last year we saw fewer enter foster care than exited, the first time the trend was reversed. In the county breakdown of the number of children in foster care it was noted that the percentage by gender is 51% boys to 49% girls; whereas the general population in Oregon is approximately the opposite (49% boys and 51% girls).

We wanted to look at other DHS services besides placement; i.e., parent training, counseling, family and child safety meetings, and supportive/remedial day care. There is also a separate category of system of care services and Independent Living Program (ILP). To summarize the data, we wanted to distinguish between teens receiving one service and teens receiving multiple services to see if teens coming in for the same reason are getting different services. Collecting this data presented a new problem. For instance; there is a difference between applying for a service and a teen becoming eligible for a service such as ILP. And a report showing what services teens receive does not tell us if the services were effective unless the disposition code is entered to show achieved, not achieved, etc. And those codes may be telling us that they achieved access to the service, but not tell us if the services were effective.

The subcommittee also wanted to look at what services are currently provided to teens by DHS Addictions and Mental Health Division (AMH). To get mental health data, there would need to be some data exchange with CAF because AMH does not identify if the client is a Child Welfare child. Again, data on numbers of services will not show if the service helped the youth exit successfully. It will be quantitative only. Overall the numbers alone will not tell us what we want to know. Nor would that data show us that it was causal or deterministic. So we decided we could take a better look at services by moving to Bryan's question.

I contacted and confirmed with Judy Stiegler that it was within our proposal to CWAC to look at services teens received by attempting to answer the question asked by Bryan, *"How well prepared are teens when they exit the child welfare system/leave foster care for adulthood and what is the child welfare system's responsibility for ensuring that they are more squared away when they leave than when they came in?"*

We are currently looking at the Northwest Foster Care Alumni Study which identified certain things that help lead to positive outcomes (graduation, employment and not entering the adult correctional system) to answer Bryan's question. We will be determining this afternoon what information Child Welfare has readily available to correspond with the NW Foster Care Alumni Study.

- Stability of placements while in child welfare,
- Stability of the placement when they exit,

- If their educational needs are met (by looking at the number of schools attended while in child welfare and where they are at educationally when they leave),
- At what age they leave, and
- The reasons why teens leave.

We should have a final report to CWAC at the July meeting.

- Keeling: What do you mean by saying teens are “in better shape” when they leave?
- Patton: We defined it as being successful in adulthood.
- Keeling: There is a lot of national data on that. You could use what was gathered from Oregon for a recent national conference in Washington, D.C., on children who have aged out.
- Patton: The subcommittee will report to CWAC again in July, which will be the end of the subcommittee’s current work. We may have recommendations on what we could not find.
- Stiegler: Sometimes identifying what is lacking is better than a recommendation.
- Keeling: That identification would be timely as we build OR-Kids (our SACWIS database).
- Patton: Thanked Bryan for asking such a straight forward question.
- Stiegler: CWAC will have to make a group decision regarding the continued operation of the teen subcommittee. It may go on hiatus until another question is posed for them. They may come back in July with recommendations on missing data and what data points should be gathered.
- Patton: At a previous CWAC meeting Jerry Moore asked “how most children get into foster care. Is the reason connected with how successful they are when they leave?” That may be a future topic for the subcommittee. Will come to CWAC for approval to continue after a summer break.

**ACTION: Time on the July 9 CWAC agenda will be scheduled for a report to conclude the current task of the subcommittee.**

## **OTHER**

- Stiegler: The next Future Issues Work Group meeting is scheduled for June 11. All CWAC members are welcome to attend.

Meeting adjourned.