

P.I.P. Draft Composite Plan: Working Document

November 6, 2007

Draft Composite Plan Development

Each of five workgroups (and one sub-workgroup) met several times and developed work plans to be included in the state's Performance Improvement Plan (PIP). Workgroup areas included:

- Assessment
- Courts (and APPLA sub-workgroup)
- Data/Quality Case Review
- Family Engagement
- Family Team Meetings/Case Planning

Each of the groups submitted work plans on one of three forms, which included different fields to be completed. After reviewing these forms and the forms included in the July 2007 draft of the federal P.I.P. instructions, a spreadsheet was created that included the fields from the three forms as well as fields from the PIP Matrix Part A: Strategy Measurement Plan and Quarterly Status Report (quarterly report form required for reporting progress once the PIP is in place). Following are the fields included on each of the planning forms and the reporting form:

	PIP Group Worksheet	PIP Work Plan Summary	Third Form *	PIP Matrix Part A **
Major PIP theme	√			
CFSR outcomes, items, systemic factors	√			√
Findings that relate	√			
Area needing improvement			√	
Goal			√	√
Strategy	√	√	√	√
Action steps	√		√	√
Key concerns		√		
TA resources needed		√	√	
Monitoring tools			√	
Measurable benchmarks			√	√

* Also includes start and completion dates and workgroup member responsibilities (may be form from an earlier PIP process)

** Also includes person responsible, evidence of completion and quarter due

Once each group's submission was transferred to the new spreadsheet, a composite plan was developed, organized by the CFSR outcomes, items and systemic factors. To this composite plan an additional field was added, "Family Practice Model Component." Each workgroup's strategies were incorporated into the composite plan in the primary area addressed (many strategies address more than one area), and references to CFSR items and Family Practice Model Components were added.

Safety Outcome 1: Children are first and foremost protected from abuse and neglect

- Item 1: Timeliness of investigations
- Item 2: Repeat maltreatment (strength)

Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate

- Item 3: Services to prevent removal
- Item 4: Risk of harm

	APPLA Workgroup
	Assessment Workgroup
	Courts Workgroup
	Data/QCR Workgroup
	Family Engagement Workgroup
	FTM/Case Planning Workgroup

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
Ensure appropriate response times are assigned Increased consistency in screening reports and response assignments	(2) Expand the regional model	Items 1,19,20	Engage Track/Supervise	(2) Implement a statewide call center for reports of abuse/neglect. (This center can be housed at one central location or strategically placed throughout the state. There should be only one published number for reporting statewide from which all calls are routed.	(2) Lack of face-to-face contact with children and household members in completing investigations	Consultation from the National Child Welfare Resource Center for Organizational Improvement.	Increase timeliness for initiation of reports by __%
Ensure that contact is made with each child victim within the identified response time		Items 2,3,4	Building Team	(2) Implement regional staffings especially for difficult cases to identify best practices and enhance supervisory skills.	(2) Inconsistent practice and application of policy		
Uniform understanding/application		Items 2,3,4,17	Engage Assess	(2) Implement a uniform assessment model for families at the point of entry to provide early assessment and/or preventive services (i.e., Family Support vs. Family Preservation)	(2) Inconsistent interpretation pertaining to the criteria for a subsequent referral for ongoing CPS cases		
Improved quality of case work		Items 3,4,17	Building Team	(2) Increase regional collaboration to ensure safety, permanency and well being	(2) Serious allegations not accepted by the agency; child-on-child reports		
Greater awareness and access of the array of services			Building Team	(2) Develop/Implement a regional intake protocol (make initial contacts regardless of county lines)			
Increased collaboration and rapport building across communities		Item 1	Track/Supervise	(2) Utilize designated staff to assist counties in completing investigations when there are significant vacancies (2) Designate regional staff supports for policy, training, FTMs, SACWIS (2) Implement/Continue regional G-Force Meetings to discuss and analyze data and trends			

NOTES: Numbers in parentheses relate to original workgroup plan submissions; texts in red are content additions based on work plan content.

Permanency Outcome 1: Children have permanency and stability in their living situations

Item 5: Foster care re-entry (strength)

Item 6: Stability of foster care placements

Item 7: Permanency goal for child

Item 8: Reunification, guardianship and placement with relatives

Item 9: Adoptions

Item 10: Other planned living arrangement

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Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	(1) Statutory changes in the law	Items 7,10	Engage Building Team Track/Supervise	(1) Create definition of APPLA that mirrors the Code of Federal Regulations and ASFA (1) Have Commissioner talk to Governor to get it introduced to the legislature			
	(2) Revamp representation of agency system - SAAG system	Items 7,8,9,10		(2) Train SAAGs in child welfare (2) Have SAAGs work for the agency (2) Increase SAAG pay			
	(3) Provide additional training	Items 7,8,9,10,18,19		(4) Look at first PIP and evaluate what worked and what didn't (3) Interdisciplinary - agency, attorneys, and court (3) Once APPLA is established as the permanency plan is not revisited (3) Need to go back to basics for training (e.g., transportation, telling social workers that they should be transporting families to court) (3) List foster parent's name if child is placed with foster parents	(3) A lot of turnover (3) Some social workers don't realize people can change and permanency plan can change (3) View of APPLA as synonymous with long-term foster care		
	(5) Improve evaluation	Items 7,8,9,10	Track/Supervise	(5) Add couple of questions to DFCS review to make sure (5) Supervisory tool (5) Need safety date on diversion and Family Centered practice	(5) What is the agency going to use to track improvement?	Supervisory Practice	

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	(6) Child advocates	Items 7,8,9,10	Engage Building Team Assess	(6) Provide additional GAL training and education (6) Collect additional data	(6) Not a uniform approach (6) Not all counties use attorneys for GALs (6) Fulton and Dekalb - staff-like PD's; other areas - contract providers or pro bono or CASAs (6) GALs are reluctant to embrace new model of family-centered practice (6) Need data and education	NRC Work with Courts	
	(8) Kids come to court	Items 7,8,9,10,18	Engage Building Team Assess Plan	(8) Requirement for kids over a certain age to come to court (8) Consider block scheduling (8) Have conversation with child before SAAG (8) Look at counties and see if there is a "cattle call problem" (needs to be individualized?)	(8) Varies widely across the state		
	(9) Caseloads	Items 7,8,9,10		(9) Reduce caseloads (9) Appoint social workers who have strength working with teens	(9) Large caseloads	ILP NRC	
	(4) Improve documentation tool for diligent relative search process: Affidavit	Item 8	Plan		(4) Diligent search process needs a better documentation tool: Affidavit.		

Permanency Outcome 2: The continuity of family relationships and connections is preserved

- Item 11: Proximity of placement (strength)
- Item 12: Placement with siblings
- Item 13: Visiting with parents and siblings in foster care
- Item 14: Preserving connections
- Item 15: Relative placement
- Item 16: Relationship of child in care with parents

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	(7) Agency involving parents and children in case planning	Items 14,16,17,18	Engage Building Team Assess Plan Track/Supervise	(7) Do a better job of telling parents how it affects them and encouraging them to come (7) Provide an orientation for children (7) Engage children (7) Get input from parents/children on goal, not just their signatures (7) Improve documentation		Supervisory Practice	
		Items 12,13,14	Plan Track/Supervise	Mandate regular sibling interaction		PSSF Caseworker Visits	

Well Being Outcome 1: Families have enhanced capacity to provide for children's needs

Item 17: Needs/services of child, parents and foster parents

Item 18: Child/family involvement in case planning

Item 19: Worker visits with child

Item 20: Worker visits with parents

Well Being Outcome 2: Children receive services to meet their educational needs

Item 21: Educational needs of child

Well Being Outcome 3: Children receive services to meet their physical and mental health needs

Item 22: Physical health of child

Item 23: Mental health of child

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		Item 17	Assess Plan		(1) Disconnect between identified needs of the family and the services provided to the family (2) Failure to re-assess family needs and adjust services accordingly (4) Evidence of case managers' limited ability to assess family/child needs		
	(5) Change policy to encourage more concurrent planning	Item 18	Assess Plan		(5) No evidence of concurrent planning		
	(6-10) More attention to case plans in general as an important legal document ensuring due process. Cross-training classes to reveal CFSR results and QA to measure change	Item 18	Engage Building Team Assess Plan Track/Supervise	(6-10) Classes for all disciplines should be scheduled during 2008. Agency or CIP to hire "compliance officers" which are attorneys or retired judges to travel state and review case plans and court orders as well as teach on the spot when a problem order is identified.	(6) Failure to identify paternal relatives (7) No clear documentation of parents or child involved in original case plans or periodic reviews (8) Case plans missing signature pages (9) Many case plans utilized over and over with the date scratched through (10) Cookie cutter case plans; documentation did not reflect case managers met standards for ongoing	Supervisory Practice	
		Items 17,18,21,22,23			(11) Family Team meetings held with no family members present (12) Youth not involved in WTLP CPS contacts	Supervisory Practice	

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
			Engage Building Team Assess Plan		(13) Documentation did not reflect that contacts were meaningful or that they addressed needs related to case planning (14) Documentation did not reflect discussion of permanency plans nor case planning (15) Documentation reflects no meaningful contacts with birth fathers even when the father has been identified		
		Items 18,19,20	Track/Supervise		(16) Documentation does not reflect clear and purposeful contacts with parents (17) Contacts with parents did not meet the agency's policy requirements		
		Item 21			(18) Failure to address educational needs in ongoing CPS cases when identified as a risk or need		
	(19) Require SAAG and Agency share CCFA recommendations with the Court and all parties as well as all attorneys of record	Items 3,17,21,22,23			(19) Failure to follow CCFA recommendations for foster children's educational needs	Supervisory Practice	
		Item 21	Track/Supervise		(20) Failure to address educational needs of children placed with CPS safety resources		
		Item 22			(21) CCFAs document physical needs of children in foster care (22) Failure to follow-up on physical health needs of children in ongoing cases	Supervisory Practice	
		Items 22,23			(23) Failure to access GAP services via Medicaid for special needs children due to lack of knowledge of these services by case managers and caregivers		

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	(1) Utilize family-centered practice model	Item 17	Engage Building Team Assess Plan Track/Supervise	(1) Use of FTMs (1) Supervisory oversight of FTMs	(1) Appropriate use of FTMs / utilizing the recommended standards for FTMs	Supervisory Practice; blended/cross-training for staff, resource parents and community partners	
	(2) Improve Parental Interaction/Contact	Items 17,18,19,20	Engage Building Team Assess Plan Track/Supervise	(2) Monitor CM documentation by supervisor (2) Policy change to require family involvement (2) Encourage shared parenting between FPs and birth parents/caregivers (2) Train Resource Parents / FPs on family-centered practice model		Supervisory Practice	
	(1) Include fathers and extended family members from onset of case	Items 14,15,17,18,20	Engage Assess Plan Track/Supervise	(1-3) Staff training	(1-3) Cookie cutter case plans	NRC on legislative changes; NRC on policy development; Supervisory Practice	
	(2) Increase consultation with children in design of case plan	Items 16,17,18,19	Engage Assess Plan Track/Supervise	(1-3) Improved new worker training to include components beyond mastery of basics	(1-3) Complexity of CPRS		
	(3) Children need separate case plan	Items 17,18,19	Engage Assess Plan			Supervisory Practice	
	(7) Improve coordination of FTM	Items 3,17,18	Engage Building Team Assess Plan Track/Supervise	(7) Set guidelines for FTM coordinators	(7) Time/ability of coordinators: 1. Dedicated coordinators 2. Should not be the caseworker for the case 3. Identified skill set	Supervisory Practice; (7-9) Pursue regional approach to FTM coordination: Look at Region 9 pilot	
	(8) Improve composition of FTM	Items 3,17,18	Building Team	(8) Set guidelines for FTM participants	(8) FTM participants: children, fathers, extended family, fictive kin, community partners, as determined by assessment	(7-9) Explore opportunities to capitalize on external funding sources for FTM coordination (Casey, CAPTA, PSSF)	
	(9) Improve communication with family regarding FTM	Items 3,17,18,19,20	Engage Building Team Assess Plan	(9) Consult with family around time of and follow-up immediately prior to FTM			

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
<p>Increase supervisors' ability to identify and analyze risk factors in the assessment, case planning, case monitoring, and case review process</p> <p>Increase supervisory consultation on cases</p> <p>Enhance the ability of case managers to identify and analyze causes of risk to safety</p> <p>Improve quality of case work</p> <p>Comprehensive assessments/ case planning and case monitoring</p>	(1) Staff development of supervisors and case managers	Items 3,4,17,18,21,22,23	Track/Supervise	(1) Implement an individualized one-on-one Supervisory Mentoring Program	(1) Risk Assessments were not completed or informative	Supervisory Practice	<p>Reduce CPS recidivism rate by 20%</p> <p>Reduce turnover rate by ___%</p> <p>Monitoring tools: E&R Reviews; Special Reviews; County Director Reviews; Data Reports; Outcome Measures Reports;</p>
			Engage Assess Plan	(1) Provide on-site "customized" regional trainings for county staff tailored to provide skill development to meet regional performance outcomes (beyond established new worker basic core training)	(1) Assessments were not utilized to identify needs of the family		
			Assess	(1) Research best practices to enhance new worker on-the-job training	(1) Not all adults in the home were included in the risk assessment (information on fathers not pursued)	Supervisory Practice	
			Assess	(1) Develop/Implement a training needs assessment form to assist supervisors in assessing and identifying staff training needs	(1) New reports of abuse were taken in isolation	Supervisory Practice	
			Engage Building Team Assess Plan Track/Supervise	(1) Develop/Implement a uniform case conference guide "purple sheet staffing form"	(1) Inconsistencies in services and practice prior to families placing with safety resources or relatives		
				(1) Implement required weekly case staffings in county offices	(1) Once children were placed with a relative, few services were provided and the child just languished in this new version of "sub-care"		
				(1) Expand/Replicate the MSW clinical supervision program at Valdosta State University which utilized MSW "master practitioners" to increase supervisory analytical skills in clinical assessment, intervention and permanency planning			

Statewide Information System (in substantial conformity) Item 24: Can readily identify status, demographic characteristics, location, goals for the placement of every child who is in foster care
(Note: Items edited for brevity)

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NOTE: Items to be considered for implementation but not to be included in PIP.

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
Consistent use and analysis of data to improve outcomes (safety, permanency, and well-being)	(1) Implement data systems training (hands-on, at computer)	Item 24	Track/Supervise	(1) Provide data training (initial and ongoing) for new workers and supervisors as well as veteran workers and supervisors (1) Explain how to ask for data/reports, how to interpret data/reports, how to use data/reports (1) Create understanding of the relationships between completing forms, data entry, reports, outcomes, federal evaluations of outcomes (1) Create tool - a matrix that identifies the items of CFSR and indicates the reports that would track performance (1) Explain relevance of data/reports to individual worker and supervisor			
Statewide, comprehensive, integrated review system to achieve a culture of continuous quality improvement integral to a learning organization and to measure progress in achieving goals	(3) Increase system linkages and usability of SUCCESS/SUCCESS Inquiry, Maxstar, CRS, KidSTAR, and other DFCS data systems	Item 24	Track/Supervise	(3) Develop "regional experts" (data specialists, state office data staff or other interested staff); identify people to serve in this role, train them so they can provide ongoing training of others in the region (3) Develop simple cheat sheet(s) for most common uses of system (could be online and printed) (3) Provide guidelines/training on how to check reports with user reports			

Case Item 25: Each child has written case plan developed jointly with child's parents
Review Item 26: Periodic review of each child's status at least every 6 months by court or administrative review
System Item 27: Each child in foster care has permanency hearing no later than 12 mos. from date child entered foster care and at least every 12 months thereafter
 Item 28: TPR process per Adoption and Safe Families Act
 Item 29: Notification/opportunity to be heard in any review or hearing for foster parents, pre-adoptive parents and relative caregivers
 (Note: Items edited for brevity)

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Goal	Applicable CFSR Items	Family Practice Model Component	Primary Strategy	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	Items 7,8,9,10,18,25,26,27,29	Assess Plan Track/Supervise	(3) Improve quality interactions/contacts - including absent parent(s)	(3) Implement continuous assessment of the goals, steps, and needs of the family plan			
	Items 18,29	Engage		(3) Provide ongoing opportunities for family feedback throughout the life of the case			
	Items 19,20	Engage Assess Plan Track/Supervise		(3) Review family plan with family (children, parents, etc.) at each interaction/contact			

Quality

Assurance System (in substantial conformity)

Item 30: Standards to ensure children in foster care are provided quality services that protect safety and health
 Item 31: QA system in jurisdictions where services included in CFSP are provided and evaluated, strengths and needs of services are identified, relevant reports are provided and improvement measured

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Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
		Items 3,8,17,21,22,23,35,36,37	Engage Building Team Assess Plan Track/Supervise		(3) Failure to hold providers accountable for quality services		
	(11) Analyze and monitor the quality of services provided on an ongoing basis	Items 3,8,17,21,22,23,35,36,37	Engage Building Team Assess Plan Track/Supervise		(11) Development and use of appropriate monitoring tool/scorecard	(11) Assistance with development of a monitoring tool	
	(2) Develop accountability system (data-based)			(2) Provide for accountability at all levels: supervisor, staff, county, and region (2) Measure percent accuracy (2) Reward performance			
	(4) Start with existing baselines and measure improvement regularly (CFSR, QCR, County Director/Supervisor) to see progress on an ongoing basis			(4) Determine what measures across review guides are comparable (4) Determine how to measure change from baseline			

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	(5) Establish consistent interpretations for reviews			(5) Make different review forms as consistent as possible (5) Define quality so that it can be documented (5) Provide training on reviews and interpretations (5) Conduct group case reviews, self review (5) Conduct regular forum on interpretation of review guides among all parties (5) Develop cheat sheets or templates for review guides (5) Provide guidelines/training on how to pull random sample for case reviews and which cases to include (5) Conduct regional reviews based on CFSR to ensure a majority of the counties are reviewed at least once a year	(5) Need consistency of data from reviews, forms (review guides)		
				Develop website with clearinghouse of reports, best practices, research, training, tips, etc related to each of the CFSR outcomes			

Training (in substantial conformity)

Item 32: Staff development supports CFSP goals and objectives, addresses services provided and provides initial training for all staff delivering services
 Item 33: Ongoing for staff addresses knowledge, skills needed for job, services provided
 Item 34: Training for current or prospective foster parents, adoptive parents and staff of facilities that care for children receiving foster care or adoption assistance
 (Note: Items edited for brevity)

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Goal	Primary Strategy	Applicable CFRS Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
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NOTE: Training strategies/action steps are included in the outcome area to be addressed.

Service Array Item 35: Array of services in place to assess strengths and needs of children and families
 Item 36: Services are accessible to families and children in all political jurisdictions covered in the CFSP
 Item 37: Services can be individualized to meet unique needs of children and families served
 (Note: Items edited for brevity)

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Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
		Items 3,17,36,37	Building Team Assess Plan		(1) Disconnect between identified needs of the family and the services provided to the family (2) Failure to re-assess family needs and adjust services accordingly		
		Items 36,37	Building Team Assess Plan	(3) Ensure age- and developmentally-appropriate interaction			
Improve family access to case staff and services	(6) Utilize non-traditional hours and work schedules	Items 35,36,37	Building Team Assess Plan	(6) Encourage non-traditional work hours to accommodate families' schedules	FLSA standards / How will FLSA standards affect this strategy?		
	(10) Improve resource availability	Items 35,36,37	Building Team Assess Plan				

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
	(4) Include concurrent plan options in the FTM (5) Strengthen concurrent component of CPRS	Items 35,36,37	Building Team Assess Plan	(4-5) Judicial, SAAG and staff training	(4-5) Need policy/guidelines defining circumstances suitable for concurrent planning and improved guidelines for decision making. (4-5) Judges/SAAGS/ Caseworkers lack understanding: 1. AFSA 2. Reasonable efforts	NRC Courts	
	(10) Improve family assessment	Items 1,2,3,4,17,20,21,22, 23	Engage Building Team Assess Plan Track/Supervise	(10) Adopt Family Preservation assessment as the primary assessment tool, as it incorporates parameters relevant to both CPS and Placement cases, including MH, SA, and parental capacity/ability which are components critical to the courts in their determination	(10) Need primary assessment tool (10) Family Preservation assessment not being utilized to its fullest capacity. (10) CPRS not effective as a case planning tool: 1. The risk assessment model utilized by CPRS is not user-friendly 2. Separate the safety assessment	Supervisory Practice; policy and programmatic expertise to assist with needed enhancements to procedures related to the assessment process	
	(11) Improve caseworker-family engagement			(11) Adopt FP assessment tool (or relevant components) as the standard assessment by all agencies/groups (i.e., CAN component of public health assessments should be reflective of the FP assessment framework)	(11) CPRS not effective as a case planning tool: 1. The risk assessment model utilized by CPRS is not user-friendly 2. Separate the safety assessment		
	(12) Improve monitoring of case progress	Items 25,26,27,28,29	Track/Supervise	(12) Create re-assessment process/protocol	(11) Over-reliance on external supports for completion of critical case component of assessment (12) Re-assessment process/protocol lacking: Need guidelines/policy developed for situations when no progress is made on case plan. Possible trigger for concurrent case plan initiation	Supervisory Practice	

Agency Responsiveness to Community (in substantial conformity)
 Item 38: Ongoing consultation with tribal reps., consumers, service providers, foster care providers, juvenile court and other agencies; includes their concerns in goals and objectives of CFSP (strength)
 Item 39: Develops, in consultation with above, annual reports of progress and services delivered
 Item 40: Coordinates CFSP services with services or benefits of other federal or federally assisted programs (strength)
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Community Outreach	(7) Involve successful families to help other families in system	Items 17,18,38	Building Team Assess Plan	(7) Recruit natural helpers from community (7) Utilize concepts/strategies of CPPC model (7) Include successful families in FTM as role models (7) Successful families participate in focus groups to improve process (7) Recruit positive male role models and fatherhood/male agencies	Identification of "successful" families: what do they look like? How do we measure a successful family?		
				(8) Hold stakeholder meetings (9) Increase community ownership			

Goal	Primary Strategy	Applicable CFSR Items	Family Practice Model Component	Action Steps	Key Concerns	TA Resources Needed	Benchmarks
Informed staff	(3) Enhance internal and external communication			(3) Designate a full-time manager to provide coordination of statewide initiatives to assure that they are not conflicting models/projects	(3) Lack of clarity of agency's purpose and mission within community		Monitoring tools: E&R Reviews; Special Reviews; County Director Reviews; Data Reports; Outcome Measures Reports
Improved community relations; more favorable perception of agency				(3) Develop/Implement regional/statewide news blasts to assure staff/stakeholders are aware of initiatives, changes and outcomes	(3) Perception of poor agency responsiveness by community stakeholders		
Enhanced collaboration within/across DFCS programs and with the external community				(3) Hire a public relations firm to develop/implement a marketing plan to enhance agency's perception in the community	(3) Inconsistent message to staff/stakeholders		
Increased partnerships that meet the needs of families				(3) Assure timely and consistent message from top down			
More appropriate referrals; more qualified pool of applicants				(3) Provide clear and consistent communication to external providers and community agencies regarding the agency's mission and scope of work			

Foster and Adoptive Parent Licensing, Recruitment and Retention (in substantial conformity)

- Item 41: Standards for foster family homes and child care institutions
 - Item 42: Standards applied to all licensed or approved foster family homes or child care institutions
 - Item 43: Complies with federal requirements for criminal background clearances
 - Item 44: Diligent recruitment of potential foster and adoptive families that reflect ethnic/racial diversity of children who need homes
 - Item 45: Effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements
- (Note: Items edited for brevity)

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