



State of Mississippi: 2020-2024
Child and Family Services Plan (CFSP)

Table Contents

I. Organizational Structure, Collaboration and Vision.....	4
A. State Agency Administering the Programs.....	4
1. Deputy Commissioner of Child Welfare	4
2. Deputy Commissioner of Child Safety	6
3. Deputy Commissioner of Administration.....	6
4. Chief Legal Counsel.....	7
B. Collaboration.....	7
C. Vision and Mission of the State	13
II. Assessment of Current Performance in Improving Outcomes.....	17
A. Safety Outcomes 1 and 2 (1355.34 (b)(1)(i)).....	17
B. Permanency Outcomes 1 and 2 (1355.34 (b)(1)(ii)).....	18
C. Well-being Outcomes 1, 2 and 3 (1355.34(b)(1)(iii))	19
D. MDCPS Self-assessment of the CFSR Systemic Factors.....	20
E. Case Review System	24
F. Quality Assurance System (45 CFR 1355.34(c)(3)).....	25
G. Staff Training (45 CFR 1355.34 (c)(4)).....	26
H. Service Array (45 CFR 1355.34(c)(5)).....	27
I. Agency Responsiveness to the Community (45 CFR 1355(c)(6))	27
J. Foster and Adoptive Parent Licensing, Recruitment, and Retention (45 CFR 1355.34 (c)(7)).....	28
III. Plan for Enacting the State’s Vision.....	30
A. Further Evaluation of and Research Activities Underway	45
IV. Services	46
A. Service Continuum and Coordination (45 CFR 1357.15(m)).....	46
B. Service Description (45 CFR 1357.15(o)).....	49
C. Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1).....	52
D. Services for Children Adopted from Other Countries (Section 422(b)(11) of the Act)	52
E. Services for Children Under the Age of Five (section 422(b)(18) of the Act).....	52
F. Efforts to Track and Prevent Child Maltreatment Deaths	56
G. Promoting Safe and Stable Families (PSSF) (Title IV-B, subpart 2).....	57
1. Family Preservation, and Family Reunification Services	57
2. Adoption Promotion and Support Services.....	61

2020–2024 Mississippi Child and Family Services Plan

- 3. Recruitment of Adoptive Families61
- 4. Support Groups for Foster and Adoptive Families62
- 5. Adoption Collaborations63
- 6. Rapid Permanency Supports63
- H. Service Decision-Making process for Family Support Services (45 CFR 1357.15(r))64
- I. Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act).....64
- J. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits.....66
 - 1. Online Resource Tool66
 - 2. Vendor Services through Contractual Agreement66
- K. Additional Services Information70
 - 1. Child Welfare Demonstration Activities70
 - 2. Adoption and Legal Guardianship Incentive Payments (section 473A of the Act).....70
 - 3. Adoption Savings (section 473(a)(8) of the Act).....72
- V. Consultation and Coordination Between States and Tribes72
- VI. John H. Chafee Foster Care Program for Successful Transition to Adulthood.....76
 - A. Agency Administering Chafee (Section 477(b)(2) of the Act)76
 - B. Description of Program, Design and Delivery76
 - C. Serving Youth Across the State81
 - E. Collaboration with Other Private and Public Agencies (Section 477(b)(2)(D) of the Act)86
 - F. Determining Eligibility for Benefits and Services (section 477(b)(2)(E) of the Act)88
 - G. Cooperation in National Evaluations (section 477(b)(2)(F) of the Act).....88
 - H. Chafee Training88
 - I. Education Training Vouchers (ETV) and Educational Services89
 - J. Consultation with Tribes (section 477(b)(3)(G)).....92
- VII. Attachments -CFSP Targeted Plans.....94
 - A. Foster and Adoptive Diligent Recruitment Plan.....94
 - B. Health Care Oversight and Coordination Plan.....94
 - C. Disaster Plan.....94
 - D. Training Plans94
 - E. Organizational Chart94
 - F. ETV Flow Charts94

Child and Family Services Plan (CFSP) Requirements

I. *Organizational Structure, Collaboration and Vision*

A. *State Agency Administering the Programs*

The Mississippi Department of Child Protection Services (MDCPS) is Mississippi’s lead child welfare agency, responsible for administering Mississippi’s programs under Title IV-B and Title IV-E of Social Security Act. MDCPS is a “subagency independent of, though housed within, the Mississippi Department of Human Services” (MDHS). MDCPS is led by a Commissioner who is appointed by the Governor, and who exercises complete and exclusive operational control of the Department’s functions, independent of MDHS, except where he and the Executive Director of MDHS agree to share administrative support services.¹ At this time, pursuant to a memorandum of understanding between the two agencies, MDHS provides administrative support services for MDCPS in the following areas: accounts payable, accounts receivable, purchasing, travel reimbursement, employee benefit coordination, subgrant monitoring and audit, cost allocation, property management, and network and hardware information technology services. MDCPS maintains sole responsibility for its programmatic functions.

Mississippi law assigns MDCPS responsibility for “[t]he programs and services [formerly] provided by the Office of Family and Children’s Services of the Department of Human Services.”² This statutory authority includes primary responsibility for protective services for children, foster care, adoption, interstate compact, and licensure.³ MDCPS is led by an Executive Leadership Team, which includes the Commissioner, Chief of Staff, Director of Communications, Deputy Commissioner of Child Welfare, Deputy Commissioner of Child Safety, Deputy Commissioner of Administration, and Chief Legal Counsel.

As of August 22, 2019, the agency’s organizational structure consists of Jess H. Dickinson as Commissioner for the agency. Taylor Cheeseman serves as Chief of Staff with three (3) Deputy Commissioners and one (1) Chief Legal Counsel. A chart of the agency’s structure is located under Attachment E. The following predominant areas are detailed below:

1. *Deputy Commissioner of Child Welfare*

The Deputy Commissioner of Child Welfare leads MDCPS’s field and programmatic staff through six (6) direct reports: the Director of Field Operations, East; the Director of Field Operations, West; the Director of Field Operations, South; Director of Permanency Support Services; Director of Licensure and Director of Therapeutic and Prevention Services.

The three directors of field operations are responsible for managing the frontline case-management workforce across the western, eastern, and southern thirds of the state. This staff is divided into fourteen regions.

¹ Miss. Code Ann. 43-26-1.

² *Id.*

³ Miss. Code Ann. 43-1-51.

Each region is led by a regional director. Each regional director is supported by two or three regional supervisors, who supervise the frontline supervisors. Each frontline supervisor manages five caseworkers. These caseworkers have responsibility for investigating all allegations of child maltreatment reported to MDCPS except maltreatment in care, and to provide case management for children in foster care or receiving in-home services from MDCPS. MDCPS caseworkers in most counties carry mixed caseloads of investigations, in-home cases, and foster-care cases, however, in some of Mississippi's more populous counties investigations are specialized with dedicated units of caseworkers.

The Director of Permanency Support Services leads MDCPS's independent living program, state office support units for both termination of parental rights and adoption, and a specialized staff of adoption caseworkers across MDCPS's fourteen regions. An adoption caseworker is assigned in addition to a child's frontline caseworker when the child's permanent plan changes to adoption, and these caseworkers specialize in preparing the necessary paperwork for adoption and identifying an adoptive family if the child's foster family does not intend to adopt. A similar supervisory structure to that of the frontline staff exists for the adoption caseworkers, with adoption caseworkers reporting to adoption supervisors, adoption supervisors reporting to regional adoption supervisors, and the regional adoption supervisors reporting to adoption bureau directors for the eastern and western halves of the state.

The Director of Licensure manages MDCPS's efforts to recruit and license foster homes, license facilities, and manage ICPC placements. Bureau directors of foster-home licensure for the eastern and western halves of the state manage a staff of licensure workers that mirrors the structure of MDCPS's frontline and adoption workforce across the fourteen regions: i.e. licensure worker, licensure supervisor, regional licensure supervisor. The licensure workers have responsibility for licensing new MDCPS foster homes, performing periodic checks of existing MDCPS foster homes, renewing expiring foster home licenses, and assisting frontline staff with identifying available placements for children who enter custody. A bureau director manages Rescue 100, MDCPS's primary mechanism for foster-home recruitment through faith-based organizations. Finally, the last bureau director manages a state office staff coordinating ICPC placements to and from Mississippi.

The Director of Therapeutic and Prevention Services has primary responsibility for managing MDCPS service contracts and coordinating the delivery of services to children and families served by MDCPS. A prevention services bureau director manages staff that coordinate referrals to community service providers for substance affected infants and their families as an alternative response to MDCPS intervention as part of Mississippi's implementation of the Comprehensive Addiction Recovery Act. The prevention staff also coordinates referrals to in-CIRCLE, MDCPS's primary intervention for preventing children's entry in foster care after a report of child maltreatment. The staff also administers MDCPS's primary prevention grants. The bureau director of therapeutic services' staff includes nurses, who assist frontline staff with coordinating and tracking medical services for children in custody; interpreters, who assist frontline staff serving children or families needing interpreter services; and

the therapeutic placement unit, who assists frontline staff with finding placement for children in foster care with therapeutic needs.

2. *Deputy Commissioner of Child Safety*

The Deputy Commissioner of Child Safety leads MDCPS’s efforts related to continuous quality improvement, federal and data reporting, and special projects for children in and out of custody through three (3) direct reports: the Director of Continuous Quality Improvement, Director of Reporting, and Director of Special Projects.

The Director of Continuous Quality Improvement manages a staff of quality assurance reviewers across MDCPS’s fourteen regions. The reviewers have responsibility for performing both periodic and ongoing case reviews. The reviewers are supervised by case review supervisors, who report to a director of CQI reviews. MDCPS CQI also includes MDCPS’s Special Investigations Unit and the Division of Congregate Care. SIU investigates all allegations of maltreatment in care and all child fatalities. SIU is managed by two bureau directors for the eastern and western halves of the state. In addition to SIU, CQI supports the agency’s response to maltreatment in care through the Safety Review Unit, which provides quality assurance review for all maltreatment in care investigations. CQI’s consumer solutions unit responds to constituent concerns related MDCPS matters. The Director of Congregate Care manages MDCPS’s facility licensure staff, who has responsibility for licensing emergency shelters, group homes, and therapeutic group homes that accept children from MDCPS for placement, and for monitoring facilities’ compliance with MDCPS contract requirements

The Director of Reporting manages the Office of Reporting. This area agency’s federal reporting. This consists of two units, one dedicated to federal reporting, the other to Olivia Y reporting. These units will have responsibility for fulfilling all MDCPS’s reporting obligations, including the APSR, Federal PIP progress reports, Federal AFCARS and NCANDS, Olivia Y quarterly reports, other Olivia Y submissions, and any other reporting obligations that arise.

The Director of Special Projects manages the Office of Agency Improvement. This area will have the responsibility for managing all major projects designed to bring long-term improvement to the agency’s operations: i.e. implementation of the FFPSA or the CFSR PIP improvement strategies.

3. *Deputy Commissioner of Administration*

The Deputy Commissioner of Administration has responsibility for finance, human resources, information technology, procurement, contracts, professional development, central registry, fingerprint and background checks, and Mississippi Centralized Intake.

The Director of Human Resources manages all hiring for MDCPS as well as all disciplinary actions involving MDCPS employees. The Director of Professional Development manages a staff of trainers and coaches that provide preservice training to MDCPS frontline, licensure, and adoption workers, as well as clinical supervisory training for all new frontline, licensure, and adoption supervisors, and ongoing training for all MDCPS employees. The Chief Financial Officer supervises a staff that manages

MDCPS’s budget, coordinates the use of children’s funds, makes board payments for children in MDCPS custody, performs eligibility determinations, and administers federal claiming and financial reporting. Another director manages MDCPS’s centralized call center for receiving reports of child maltreatment, fingerprinting and background checks for MDCPS and provider employees, and MDCPS’s central registry of substantiated perpetrators. Finally, the Director of Procurement manages staff involved with planning, directing, and coordinating the purchase of materials, products, or services. Procurement includes the negotiation of contracts with vendors and suppliers, preparation of RFPs, review of bids, presentation of procurement information for contract approval, analysis of contracts for compliance with regulations. Director is also responsible for implementation of state and federal procurement regulations.

4. *Chief Legal Counsel*

MDCPS’s Chief Legal Counsel, with the assistance of two staff attorneys, provides legal review for MDCPS policy, litigation reporting, and any other legal matters that arise in MDCPS’s operations. The Chief Legal Counsel also coordinates these matters with the Office of the Attorney General and outside counsel.

B. *Collaboration*

To carry out its mission, MDCPS collaborates with stakeholders and those with lived experience on both an ongoing and as-needed basis. This collaboration occurs through a variety of commissions, committees, joint trainings, focus groups, and agreements.

- ***Mississippi Commission on Children’s Justice*** -One of the primary mechanisms for ongoing stakeholder collaboration in Mississippi’s child welfare system is the Mississippi Commission on Children’s Justice. The Commission, organized by order of the Mississippi Supreme Court, is tasked with “developing a statewide comprehensive approach to improving the child welfare system; coordinating the three branches of government in assessing the impact of government actions on children who are abused or neglected; and recommending changes to improve children’s safety, strengthen and support families and promote public trust and confidence in the child welfare system.” The Commission’s membership, which meets quarterly, includes representatives from MDCPS; the Mississippi Supreme Court; MDHS; the Department of Mental Health; the Office of the Attorney General; the Mississippi Judicial College; the Children’s Advocacy Centers; the University of Mississippi Medical Center; the University of Mississippi School of Law; Mississippi College School of Law; the Mississippi Band of Choctaw Indians; private service providers; circuit courts; chancery courts; youth courts; and others. Commission meetings serve as a forum for the discussion of pressing issues, the proposal of new initiatives, and to keep the membership abreast of changes and progress made in each member’s sphere of influence in the child welfare system.
- ***The Legislative Subcommittee of the Commission on Children’s Justice*** -The Legislative Subcommittee of the Commission on Children’s Justice was developed in the months preceding the 2019 Session of the Mississippi Legislature to develop joint legislative agenda for the Commission on Children’s Justice. Through this

subcommittee, representatives of the Commission’s membership—including members of both the executive and judicial branches of government—gathered to discuss proposed legislative action and agree on compromise versions draft amendments to which all or most could agree. By doing so, the membership was positioned to provide a united voice for needed reforms during the session, which ultimately proved successful when the Commission’s bill was passed. When legislative action is needed in the future, this subcommittee will continue to provide a venue for effective legislative advocacy.

- ***The Multi-Disciplinary Team Subcommittee of the Commission on Children’s Justice*** -Mississippi statute provides for the creation of local multidisciplinary child protection teams, when authorized by the youth court judge, “to implement a coordinated multidisciplinary team approach to intervention in reports involving alleged severe or potential felony child physical or sexual abuse, exploitation, or maltreatment” and “assist in the evaluation and investigation of reports and to provide consultation and coordination for agencies involved in child protection cases.”⁴ The membership of these teams includes MDCPS, MDHS, law enforcement, prosecutors, and other entities as needed. As of June 2019, sixty-two of Mississippi’s eighty-two counties had MDTs. This collaborative effort of the Commission’s membership is to increase participation in, and improve the quality of, MDTs across Mississippi. This subcommittee also provides a forum for discussing issues particular to MDTs and developing strategies for improvement related to their work.
- ***The Education Subcommittee of the Commission on Children’s Justice*** -This subcommittee of the Commission is focused on developing and implementing multidisciplinary training for professionals who have an effect on the wellbeing of children. The subcommittee is tasked with developing educational programs for Mississippi institutions of higher learning and for continuing education among agencies involved in the child welfare system.
- ***The Community Wraparound Subcommittee of the Commission on Children’s Justice***-This subcommittee of the Commission is focused on finding ways to better coordinate the delivery of services across systems and agencies, and to foster the development of local resources.
- ***The Faith-Based Subcommittee of the Commission on Child’s Justice***-This subcommittee was created to find opportunities to integrate faith-based organizations into the Mississippi’s child welfare system.
- ***The Family First Initiative of the Commission on Children’s Justice***-The Family First Initiative is a collaborative effort organized by the Commission on Children’s Justice to work towards increased primary prevention of child maltreatment in Mississippi. The Initiative is led by a statewide steering committee that includes a membership similar to that of the Commission itself. It is also led by local steering

⁴ Miss. Code Ann. 43-15-51.

committees organized in pilot sites around the state. The Initiative works to build on the work of MDHS and Families First for Mississippi—a private provider funded by MDHS to operate family resource centers across Mississippi—to integrate and streamline access to needed family support services before a report of child maltreatment is made to MDCPS. Local steering committees work to identify resources available in the local community as a supplement to the economic assistance programs available through MDHS, and the family support services available through Families First for Mississippi.

- ***The Mississippi Parent Representation Task Force***-The Parent Representation Task Force, established in 2012, is a collaborative Court Improvement Program effort between the Judiciary, MDCPS, Casey Family Programs, Kellogg Foundation, University of Mississippi School of Law, Mississippi College School of Law Mission First Legal Aid Office, the American Bar Association, Mississippi Center for Legal Services, Mississippi Attorney General’s Office, Office of State Public Defender and the Mississippi Judicial College. The Task Force, though formerly independent, now works under the auspices of the Commission on Children’s Justice. The members of this task force develop strategies for expanding parental representation in youth courts across Mississippi.
- ***The Commission on Guardianships and Conservatorships***-The Commission on Guardianships and Conservatorships is another offshoot of the Commission on Children’s Justice focused on modernizing Mississippi law related to guardianships and conservatorships and, more particularly, improving coordination between youth courts and chancery courts, both of whom handle legal issues related to the wellbeing of children and families.
- ***Administrative Office of Courts/Court Improvement Program***-In addition to the commissions, committee, and task forces described above, MDCPS also collaborates with the AOC and CIP on periodic joint trainings, conferences, and joint planning as necessary. The Jurist in Residence at the Mississippi Supreme Court serves as a resource to the judicial system and MDCPS providing technical assistance related to legal/judicial issues in Mississippi’s child welfare system.
- ***The Mississippi Judicial College***-The Mississippi Judicial College provides most of Mississippi’s continuing education for sitting judges. The Judicial College hosts an annual youth court judges conference during which the college provides targeted training on pressing issues related to youth court. MDCPS collaborates with the Judicial College in identifying appropriate topics for presentation at the conference, and ordinarily provides some of the training.
- ***CASA***- MDCPS is collaborating with CASA in Mississippi to developing training for MDCPS caseworkers that will help them better understand the role of a CASA and facilitate enhanced collaboration in cases where a CASA has been appointed.

- ***Families First for Mississippi***- Families First for Mississippi is a collaborative effort of two nonprofit entities funded by MDHS to operate family resource centers across Mississippi. MDCPS collaborates with Families First to develop and provide training to MDCPS caseworkers on the services available through the resource centers and how those services can be accessed for children and families served by MDCPS. FFM also provides training for MDCPS foster parents.
- ***Mississippi Association of Child Care Agencies (MACCA)***- MACCA is the trade association for private agencies in Mississippi that provide services to children. Most MACCA members are MDCPS contracted providers. MDCPS staff attend most of MACCA’s monthly meetings. Those meetings serve as an opportunity for MDCPS to provide updates on current developments to the providers, and for the providers to express concerns, raise ideas, and ask questions for MDCPS’s consideration.
- ***MDHS***- As discussed above, MDCPS is a sub agency operationally independent of MDHS, and MDHS performs certain administrative support services for MDCPS. In addition to that ongoing operational connection, MDCPS and MDHS engage in data sharing related child support and childcare vouchers and collaborate in joint planning on an as needed basis.
 - In addition to that general work, the MDHS Division of Early Childhood Care and Development (DECCD) administers a Maternal Infant and Early Childhood Home Visiting (MIECHV) grant for a voluntary comprehensive home visiting support program, called Healthy Families Mississippi. Healthy Families Mississippi provides family support workers who assists families by linking them to community services and resources, providing child development, nutrition, financial and safety education, along with referrals for families to other support services. Healthy Families Mississippi serves pregnant mothers or families with children three (3) months or younger who are low income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration. MDCPS partners with Healthy Families to support mothers that are referred by MDCPS’s Comprehensive Addiction and Recovery Act (CARA) program. MDCPS also serves as a representative on the Mississippi Home Visiting Partnership Advisory Group.
 - The MDHS Division of Economic Assistance is the division that administers the Supplemental Nutrition Assistance Program (SNAP) and the Temporary Assistance to Needy Families (TANF) cash assistance program. The MDCPS State Refugee Coordinator (SCR) collaborates with this division for the Refugee Cash Assistance Program (RCA). RCA is part of the Office of Refugee Resettlement (ORR) Program.
 - The MDHS Division of Youth Services (DYS) administers probation, aftercare services, and institutional programs for juveniles who have been adjudicated delinquent in Mississippi youth courts. MDCPS and DYS meet to discuss and track the status of crossover youth. This is a joint effort that targets open protective cases for clients that have been transferred to the state juvenile institution, Oakley

Youth Development Center (OYDC). Additionally, DYS submits a quarterly report to MDCPS for review to assist with identifying crossover cases and issues.

- **Mississippi Department of Mental Health** -MDCPS and DMH collaborate to provide children and youth in foster care with needed therapeutic services. DMH certifies MDCPS licensed group homes and foster care programs to provide therapeutic services for children and youth with serious emotional or behavioral disorders. Both DMH and MDCPS monitor and evaluate therapeutic group homes and therapeutic foster care providers' performance. MDCPS and DMH also collaborate through local MAP teams and the State Level Case Review Team to address challenges related to hard-to-place youth. MDCPS and DMH also collaborate to arrange appropriate treatment programs for youth in need of such services, and on discharge planning after in-patient treatment. Finally, MDCPS collaborates with DMH to provide substance abuse treatment for parents referred by MDCPS's CARA program.
- **Mississippi Division of Medicaid**-MDCPS and the Mississippi Division of Medicaid engage in data sharing related to Medicaid eligibility and medical care for children in MDCPS custody. They provide an opportunity to address any challenges that arise in the processes, monthly calls are held between staff from each agency. These calls provide a forum to strategize solutions to problems and identify ways to streamline eligibility and healthcare for children in MDCPS custody.
- **Mississippi Department of Education**-MDCPS and MDE work in partnership to promote the educational stability for all children in foster care. The departments have issued joint guidance that provides clear and concise educational placement procedures to ensure educational stability by outlining the roles and responsibilities of each agency. This partnership works to implement Every Student Succeed Act.
- **Children's Advocacy Centers of Mississippi**-CACM is a network of eleven Child Advocacy Centers (CACs) which partner with MDCPS on several ongoing collaborative efforts. A strong partnership between these two agencies has helped support several programs and projects that are improving the response to victims of abuse. These programs include work to enhance multidisciplinary team, provide training on mandated reporting, managing the Children's Justice Act and Task Force, train faith-based institutions in best practice for preventing child abuse, and plan an annual multidisciplinary conference on child protection work.
- **Mississippi Youth Voice**-The Mississippi Youth Voice is project of First Place for Youth in partnership with the Jim Casey Youth Opportunities Initiative to provide a forum for former foster youth to advocate for change and develop leadership skills. A leader board consisting of eighteen to twenty-six-year-olds meets monthly. This group educates others about issues affecting foster children, advocates for improvements to the foster system, and builds partnership opportunities for youth who have been in care. MDCPS's independent living program coordinates closely with Mississippi Youth Voice, and the members of the Youth Voice Board are invited to provide

feedback in various MDCPS forums, including leadership conferences and joint planning sessions.

- ***Foster Parent Focus Groups***-MDCPS recently held a foster-parent focus group. A group of experienced foster parents were invited to meet with senior leadership at MDCPS’s state office, share their experiences as foster parents, and provide their input about needed improvements and what they would like to see in the future of Mississippi’s child welfare system. MDCPS intends to make this a regular practice going forward, though the frequency has not yet been decided. To facilitate this collaboration, MDCPS has created the position of Foster Parent Liaison. This dedicated staff person, in addition to organizing the foster parent focus groups, will travel the state to meet with foster parents, answer their questions, respond to their concerns, and solicit their feedback about MDCPS and the child welfare system.
- ***Parent Focus Groups***-In the coming months MDCPS plans to institute a similar practice of focus groups with parents of children who have been in MDCPS custody or who have received in-home services from the Department.
- ***The Mississippi Band of Choctaw Indians***-MDCPS staff participate in quarterly meetings with Mississippi Band of Choctaw Indians. These meetings provide an opportunity discuss ways to improve collaboration through changes to the memorandum of understanding between the agency and the tribe, and to identify opportunities for joint training. MDCPS also collaborates with the tribe and the AOC/CIP to organize Mississippi’s annual ICWA conference.
- ***The Mississippi Child Death Review Plan***-Mississippi law creates the Mississippi “Child Death Review Panel, whose primary purpose is to foster the reduction of infant and child mortality and morbidity in Mississippi and to improve the health status of infants and children.”⁵ The panel’s membership consists of “one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General’s office, the State Sheriff’s Association, the Mississippi Police Chiefs Association, the Department of Human Services [MDCPS], the Children’s Advocacy Center, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children’s Safe Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal’s office.”⁶ Each year the panel is tasked with creating a report for the Mississippi Legislature outlining “appropriate recommendations to the Legislature on how to most effectively direct state resources to decrease infant and child deaths in Mississippi.”⁷
- ***Stakeholder Involvement in CFSP Development***-The selection of goals and objectives for improvement, and the strategies to achieve that improvement, included

⁵ Miss. Code Ann. 41-111-1.

⁶ *Id.*

⁷ *Id.*

in this CFSP have not been developed from a clean slate. The Mississippi Legislature has developed a statewide strategic plan that names certain performance benchmarks for child welfare in Mississippi. Mississippi is also operating under the 2nd Modified Settlement Agreement and Reform Plan (2nd MSA), a federal consent decree in the Olivia Y class-action litigation that sets other measures of success for Mississippi’s child welfare system. Additionally, Mississippi completed Round 3 of the Child and Family Services Review in September of 2018, and this CFSP has been developed simultaneously with the Round 3 CFSR PIP.

At this juncture, MDCPS is on the cusp of finalizing its PIP related to the 2018 CFSR and that work will heavily impact practice during the first two years of this CFSP and beyond. As such, the stakeholder involvement in the development of the CFSP was bifurcated. Stakeholder involvement has occurred on all fronts. Throughout the forums of collaboration discussed above, Mississippi’s statewide goals and the Olivia Y litigation are an ever-present part of the conversation. The collaboration through our various commissions, committees, task forces, and agreements has resulted in several strategies that have been included in the CFSP where appropriate.

After the CFSR’s conclusion, MDCPS hosted three days of meetings involving MDCPS staff, judges, Administrative Office of Courts staff, youth court prosecutors, guardians ad litem, parent representation attorneys, CASA, former foster youth, parents of children in custody, staff from the Capacity Building Centers for Courts and States, and Children’s Bureau staff. At the meetings, the attendees discussed root causes of untimely permanency in Mississippi and worked to develop legal/judicial strategies related to improving timely permanency. During those meetings, the theme of inadequate family engagement impeding efforts to prevent removal and achieve reunification re-emerged, as did the barriers to effective collaboration between MDCPS and the courts. As these themes emerged, they were further assessed and became the foundations of the developing PIP. MDCPS plans to use this forum and platform on a continuous basis for accountability to the stakeholders with respect to the CFSR PIP progress.

C. Vision and Mission of the State

Pursuant to the Mississippi Performance Budget and Strategic Planning Act of 1994, the Mississippi Legislature has adopted a statewide strategic plan to serve as guide and umbrella plan for all strategic planning by Mississippi state agencies. The plan—named “Building a Better Mississippi, The Statewide Strategic Plan for Performance and Budgetary Success”—sets a statewide vision, mission, and philosophy for Mississippi state government; and more particular statewide goals and benchmarks in key areas of state public policy.

- ***The Vision of Mississippi State Government***-The Legislature envisions a lean and effective Mississippi state government that empowers its people to live healthy, productive lives through the provision of quality, appropriate services and strategic investment in the state’s human capital. Through this empowerment, our state’s citizens will experience a better quality of life than the generation before them and will leave their individual communities better for the generation that follows.

- ***The Mission of Mississippi State Government***-In general terms, the primary role of state government is to:
 - protect the safety and well-being of its citizenry;
 - preserve the dignity of every human life; and,
 - promote economic growth and the public good through the advancement of the individual.

- The 10th Amendment to the United States Constitution reinforces the sovereign powers of the states by providing that:

‘the powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people.’

In drafting this amendment, the framers of the Constitution recognized that when state and local communities take the lead on public policy, the people are that much closer to the policymakers, which makes the policymakers that much more accountable to the people.

- ***The Philosophy of Mississippi State Government***-The State of Mississippi provides quality and appropriate services to its citizenry guided by the principles of:
 - Preserving the liberty of all citizens by providing the least intrusive state government;
 - Practicing accountability and transparency at every level of government; and,
 - Placing ultimate value on efficiency and effectiveness of government service to taxpayers and citizens.

- ***Mississippi Statewide Goal for Human Services***-To ensure that Mississippians are able to develop to their full potential by having their basic needs met, including the need for adequate food and shelter and a healthy, stable, and nurturing family environment or a competent and caring system of social support.

Within the policy focus of human services, the Mississippi Legislature’s strategic plan sets the following benchmarks for success in child protection services:

- Substantiated incidence of child abuse or neglect (per 1,000 population)
 - Number of children in agency custody
 - Average time (in days) a child is held in emergency shelters and other temporary holding facilities before being placed in foster care
 - Average time (in months) a child is in foster care
 - Average time (in days) between a child in foster care being declared legally eligible for adoption and adoption
 - Percentage of children in foster care legally eligible for adoption who are adopted, by category [i.e., by age range (less than 1 year, 1-3 years, 4-6 years, 7-9 years, 10-14 years, 15+ years), special needs]
 - Substantiated incidence of abuse of vulnerable adults (per 1,000 population)
 - Percentage of child support cases current on payments
- ***MDCPS Vision, Mission, & Philosophy***-To implement this statewide vision, mission, philosophy at the agency level, MDCPS has developed its vision, mission, philosophy.

MDCPS’s vision is “Mississippi’s children will grow up in strong families, safe from harm and supported through partnerships that promote family stability and permanency.” Our mission is “to lead Mississippi’s efforts in keeping children and youth safe and thriving by

- strengthening families;
- preventing child abuse, neglect, and exploitation; and,
- promoting child and family well-being and permanent family connections.

MDCPS believes neither government nor other social institutions can ever fully replace a child’s family. Conversely, Mississippi’s children and families will thrive when parents are supported, prepared, and equipped to raise their own children in a safe, loving, and protective environment without life-long government involvement. The MDCPS Safe at Home philosophy is founded in the belief that the first and greatest investment of time and resources should be made in the care and protection of children in their own homes. With the appropriate investment of short-term services and intensive supports designed to strengthen families, even those who experience temporary family disruption can reach sustainable, long-term familial safety and stability. Through these supports, MDCPS can prevent unnecessary family separation and out-of-home placement, reducing additional trauma to children and families while also achieving safety and maintaining permanency.

However, when a child cannot safely remain in his or her own home because of eminent or actual danger, MDCPS recognizes immediate steps must be taken to protect and care for that child while simultaneously working toward timely reunification with the child’s family whenever safely possible. When this is not an option, MDCPS works to assure timely completion of other permanent plans—adoption, durable legal custody, guardianship or a successful transition to independence. Overall, MDCPS works to empower the family and encourage self-sufficiency while meeting the child’s needs for safety and well-being and achieving timely permanency.

MDCPS’s philosophy recognizes that Mississippi cannot achieve sustainable, long-term child and family well-being and permanent family connections simply by operating a foster care system in which government raises children in lieu of their families. Rather, MDCPS believes long-term wellbeing for children and families only can be achieved by ensuring foster care is one tool in a much broader child welfare system which seeks to preserve the family whenever possible. Key to this is establishment of a statewide partnership with community connections essential to the safety, well-being, and permanency of all Mississippi families. This safety net is particularly critical when a child is removed and placed into state custody. Immediate and diligent efforts must be made to place the child and/or sibling group with other relatives, if possible, or with a licensed foster family which can maintain the child and/or sibling group in their own schools and communities. The goal is to minimize trauma to the child and birth family as much as possible. In these situations, families can best be supported by a strong safety network, extended family and community. Frontline staff and other partnerships supporting them are, cooperatively, leading agents of positive change in the lives of these children, youth, and families -- working

2020–2024 Mississippi Child and Family Services Plan

in tandem toward sustainable, long-term child and family well-being and permanent family connections.

II. Assessment of Current Performance in Improving Outcomes

A. Safety Outcomes 1 and 2 (1355.34 (b)(1)(i))

Safety Outcomes include: (A) children are first and foremost, protected from abuse and neglect; and (B) children are safely maintained in their own homes whenever possible and appropriate.

The vision and missions of both Mississippi state government and MDCPS are outcome-focused. Our work is dedicated to ensuring the safety and wellbeing of Mississippi’s citizens. With that in mind, both Mississippi’s assessment of current performance and goals for improvement over the next five years have been crafted to keep Mississippi’s focus on outcomes. The State has developed and submitted its CFSR PIP to the Children’s Bureau and is awaiting approval. This area of concern is being addressed in the CFSR PIP. The first component of Mississippi’s assessment of current performance is OSRI from MDCPS CQI reviews performed throughout calendar year 2018. Safety Outcomes 1 and 2 (Table 1) provide statewide results from 495 randomly selected in-home and foster care cases.

Table 1: Safety Outcomes 1 and 2								
		Performance Item Ratings			Outcome Ratings			
		S	ANI	NA	SA	PA	NACH	NA
Safety Outcome 1 Children are, first and foremost, protected from abuse and neglect.					56.58% n=159	0% n=0	43.42% n=122	n=214
Item 1	Timeliness of Initiating Investigations of Reports of Child Maltreatment	56.58% n=159	43.42% n=122	n=214				
Safety Outcome 2 Children are safely maintained in their homes whenever possible and appropriate.					57.78% n=286	10.91% n=54	31.31% n=155	n=0
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	71.02% n=125	28.98% n=51	n=319				
Item 3	Risk and Safety Assessment and Management	58.59% n=290	41.41% n=205	n=0				

B. Permanency Outcomes 1 and 2 (1355.34 (b)(1)(ii))

Permanency Outcomes include: (A) children have permanency and stability in their living situations; and (B) the continuity of family relationships is preserved for children. This area of concern is being addressed in the CFSR PIP.

Table 2: Permanency Outcomes 1 and 2							
Permanency Outcome 1 Children have permanency and stability in their living situations.				31.35% n=58	61.08% n=113	7.57% n=14	n=0
Item 4	Stability of Foster Care Placement	80% n=148	20% n=37	n=0			
Item 5	Permanency Goal for Child	55.68% n=103	44.32% n=82	n=0			
Item 6	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	50.27% n=93	49.73% n=92	n=0			
Permanency Outcome 2 The continuity of family relationships and connections is preserved for children.				58.7% n=108	36.41% n=67	4.89% n=9	n=1
Item 7	Placement with Siblings	91.34% n=116	8.66% n=11	n=58			
Item 8	Visiting with Parents and Siblings in Foster Care	48.67% n=73	51.33% n=77	n=35			
Item 9	Preserving Connections	81.01% n=145	18.99% n=34	n=6			
Item 10	Relative Placement	72.83% n=126	27.17% n=47	n=12			
Item 11	Relationship of Child in Care with Parents	38.52% n=47	61.48% n=75	n=63			

C. Well-being Outcomes 1, 2 and 3 (1355.34(b)(1)(iii))

Well-being Outcomes include: (A) families have enhanced capacity to provide for their children’s needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs. This area of concern is being addressed in the CFSR PIP.

Table 3: Well-being Outcomes 1, 2, and 3								
Well-Being Outcome 1 Families have enhanced capacity to provide for their children's needs.					26.06 % n=129	45.05% n=223	28.89% n=143	n=0
Item 12	Needs and Services of Child, Parents, and Foster Parents	30.71% n=152	69.29% n=343	n=0				
Item 12A	Needs Assessment and Services to Children	64.65% n=320	35.35% n=175	n=0				
Item 12B	Needs Assessment and Services to Parents	29.58% n=134	70.42% n=319	n=42				
Item 12C	Needs Assessment and Services to Foster Parents	85.29% n=145	14.71% n=25	n=325				
Item 13	Child and Family Involvement in Case Planning	38.82% n=184	61.18% n=290	n=21				
Item 14	Caseworker Visits with Child	63.64% n=315	36.36% n=180	n=0				
Item 15	Caseworker Visits with Parents	32.27% n=142	67.73% n=298	n=55				
Well-Being Outcome 2 Children receive appropriate services to meet their educational needs.					68.18 % n=150	5% n=11	26.82% n=59	n=275
Item 16	Educational Needs of the Child	68.18% n=150	31.82% n=70	n=275				

2020–2024 Mississippi Child and Family Services Plan

Well-Being Outcome 3					49.33	16.17%	34.5%	n=124
Children receive adequate services to meet their physical and mental health needs.					%	n=60	n=128	
					n=183			
Item 17	Physical Health of the Child	62.45%	37.55%	n=226				
		n=168	n=101					
Item 18	Mental/Behavioral Health of the Child	55.17%	44.83%	n=234				
		n=144	n=117					

D. MDCPS Self-assessment of the CFSR Systemic Factors

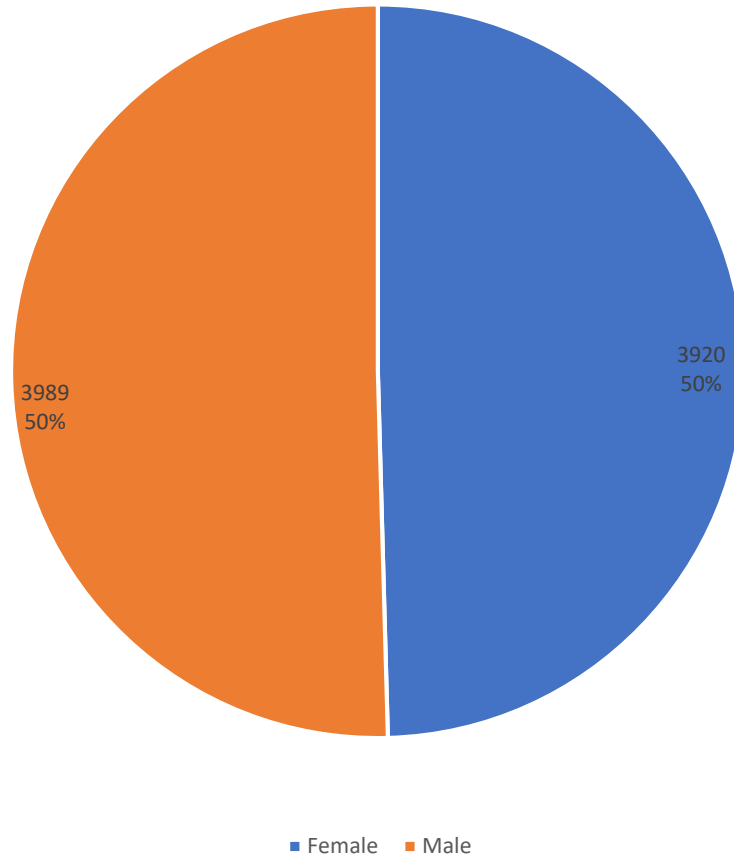
Planned activities targeted at improving performance is addressed in the CFSR PIP.

Item 19: During FFY2018, MDCPS served 7,910 children in foster care. Data from MACWIS, submitted to the Children’s Bureau, as required for AFCARS reporting was used as the basis for analysis for this systemic factor. The figures below display the status, demographic characteristics, location and goals for children served during the period.

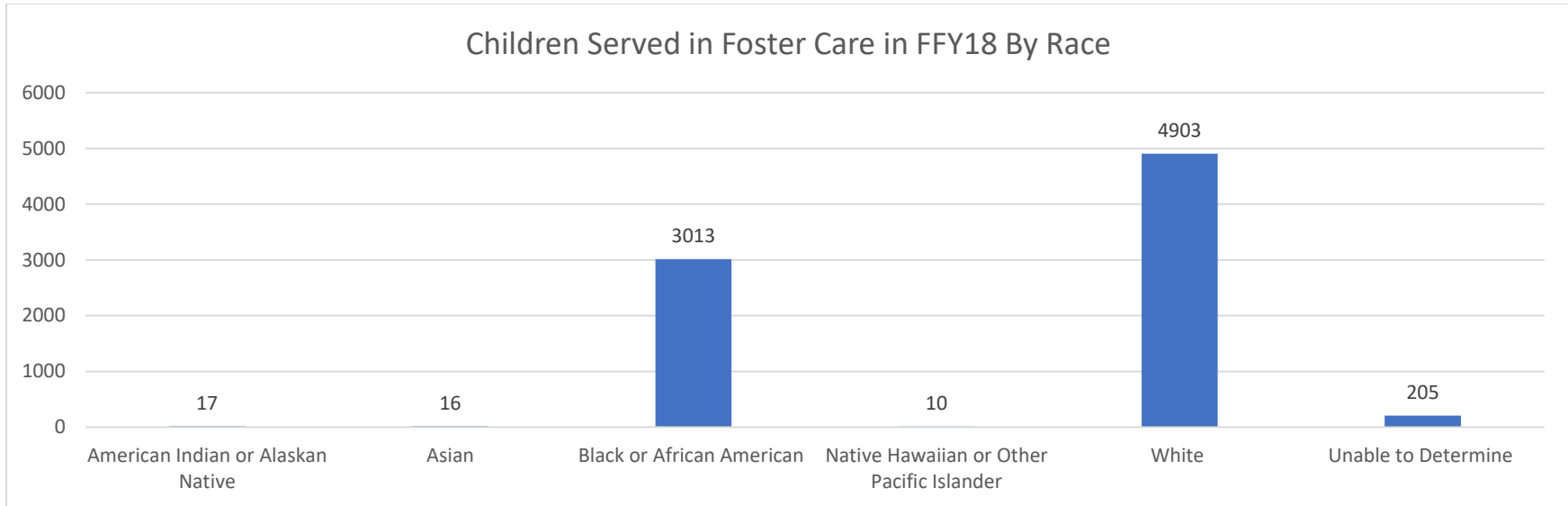
Findings from the 2018 CFSR noted that MDCPS was not in substantial conformity with this systemic factor due to varied timeliness of data entry particularly for current placement information even though MDCPS demonstrated that the data was readily available. During stakeholder interviews, it was also shared that caseworker understanding of the elements, workload and turnover contributed to timeliness concerns. MDCPS is currently engaged with the Children’s Bureau to finalize all plans to procure a CCWIS (Comprehensive Child Welfare Information System). Caseloads and caseworker turnover are addressed in another section of the CFSP.

2020–2024 Mississippi Child and Family Services Plan

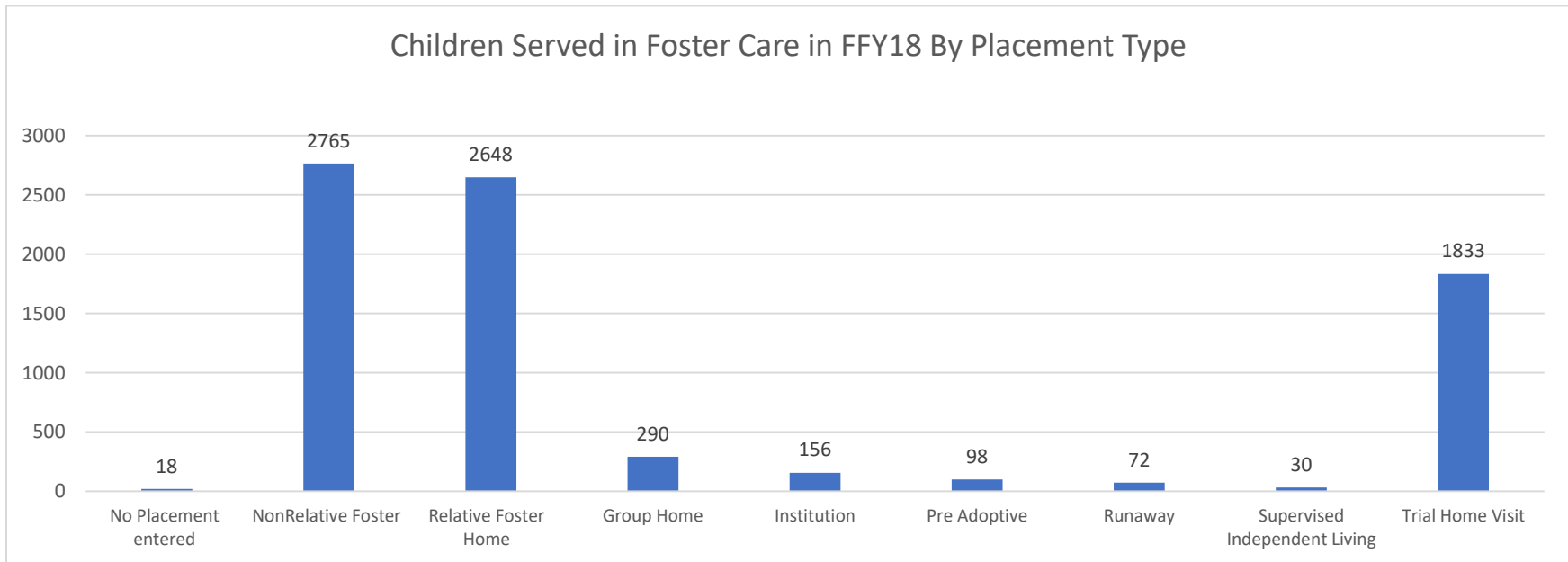
Children Served in Foster Care in FFY18 By Gender



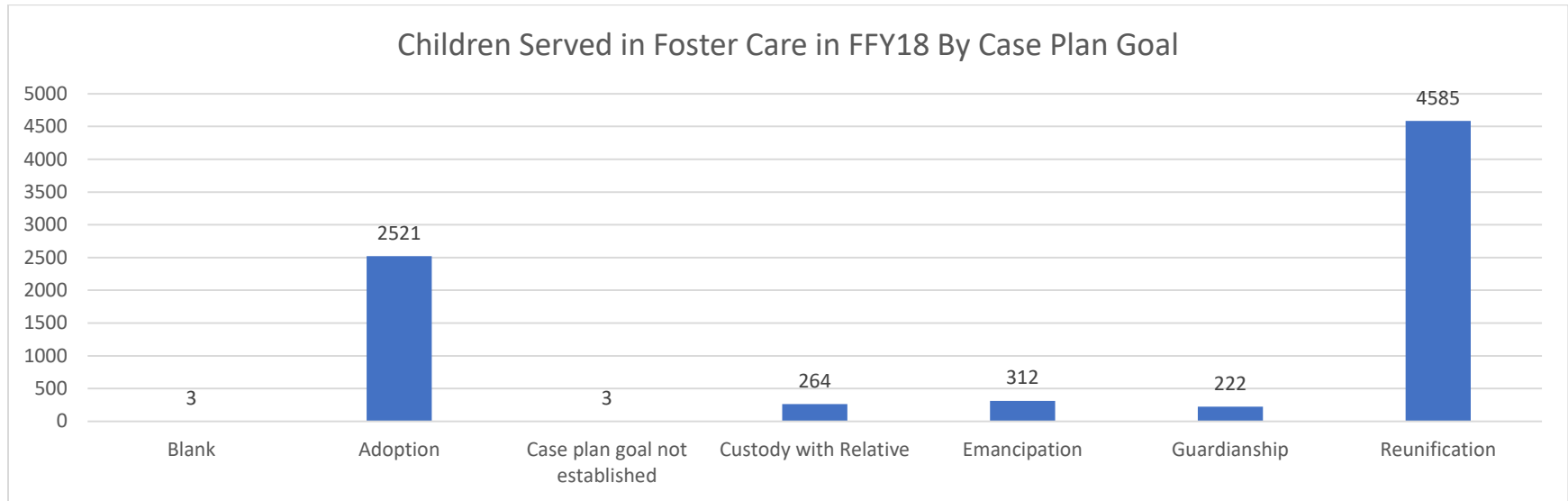
2020–2024 Mississippi Child and Family Services Plan



**Note: Numbers may exceed total number of children served due to multiple races selected*



2020–2024 Mississippi Child and Family Services Plan



E. Case Review System

Item 20: Written Case Plan. The case review system is functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions.

Response: Item 20. Information in the statewide assessment showed that although the Family Team Meeting process is used to develop case plans, it does not effectively ensure that parents are engaged in the development of initial and ongoing case plans.

Results from a qualitative review conducted for the period January 2019 – March 2019 by the foster care review staff for *Olivia Y.* reporting found that 50% (n= 151) of the applicable cases rated as compliant. The method of analysis was related to provision 6.1.a. Within 45 days of taking a child into custody, MDCPS shall complete a comprehensive Family Service Plan which shall be developed in consultation with (1) the child and the MDCPS caseworker; (2) the child's parents and the MDCPS caseworker; and (3) the foster care provider and the MDCPS caseworker. The Family Service Plan shall address the strengths, needs and services required for both the child and their parent(s); shall be reviewed and approved by the supervisor and shall be maintained in the child's case file.

This finding suggests the need to strengthen engagement with caregivers in the development of the comprehensive service plans. Further discussion of the item is included in the CFSR PIP.

Item 21: Periodic Reviews. The case review system is functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review. This systemic factor rated as a strength based on information provided during the statewide assessment. MDCPS continues this case review process.

Item 22: Permanency Hearings. The case review system is functioning statewide to ensure that each child has a permanency hearing in a qualified court or administrative body that occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

Response. Item 22. MDCPS has had challenges in ensuring that permanency hearings are occurring as required. The agency has and continues to collaborate with the AOC (Administrative Office of Courts), the Jurists in Residence, and local youth court judges in sharing data around timely hearings. Court engagement and collaboration is discussed in detail in the CFSR PIP.

Results from a qualitative review conducted for the period January 2019 – March 2019 by the foster care review staff for *Olivia Y.* reporting found that 87% (n= 480) of the applicable cases rated as compliant. The method of analysis was related to provision 6.4.a. A child's permanency plan shall be reviewed in a court or administrative case review at least every six months. Foster care reviews shall satisfy this administrative case review requirement. MDCPS will take all reasonable steps, including written notice, to ensure the participation of the child, parents, caregivers, and relevant professionals in court or administrative reviews.

Item 23: Termination of Parental Rights. The case review system is functioning statewide to ensure that the filing of termination of parental rights proceedings occurs in accordance with required provisions.

Response. Item 23. Results from a qualitative review conducted for the period January 2019 – March 2019 by the permanency support unit for *Olivia Y.* reporting found that 37.97% of the applicable

2020–2024 Mississippi Child and Family Services Plan

cases rated as compliant. The method of analysis was related to provision 6.3.b.2. A termination of parental rights (TPR) referral shall be made on behalf of a child before the child has spent more than 17 of the last 22 months in foster care unless an available exception pursuant to the federal Adoption and Safe Families Act ("ASFA") has been documented by MDCPS in the child's case record. Subsequent to the initial ASFA exception, MDCPS may continue the exception for only one additional six-month period unless continued invocation of the exception is reviewed, approved and documented semi-annually by the RD assigned to the county of responsibility for the child.

This quality assurance process has been established within the permanency support unit as part of the *Olivia Y.* CQI plan to ensure proper tracking, reporting and accountability to this provision. MDPS details a process of leveraging timely termination of parental rights through court engagement and collaboration to ensure timely permanency for all children in care in the CFSR PIP.

Item 24: Notice of Hearings and Reviews to Caregivers. The case review system is functioning to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child.

Response. Item 24. Results from a qualitative review conducted for the period January 2019 – March 2019 by the foster care review staff for *Olivia Y.* reporting found that 53% (n= 384) of the applicable cases rated as compliant. The method of analysis was related to provision 6.4.a. A child's permanency plan shall be reviewed in a court or administrative case review at least every six months. Foster care reviews shall satisfy this administrative case review requirement. MDCPS will take all reasonable steps, including written notice, to ensure the participation of the child, parents, caregivers, and relevant professionals in court or administrative reviews.

Over the next five years, MDCPS will develop plans for improving notifications to parent, foster parents, and others. MDCPS first will consider whether important notices can be automated in MDCPS's CCWIS system, which it will develop over the next two years.

F. *Quality Assurance System (45 CFR 1355.34(c)(3))*

Item 25: Quality Assurance System. The quality assurance system is functioning statewide to ensure that it (1) is operating in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures.

Response. Item 25: Continuous Quality Improvement (CQI), was formalized during the inception of the 1st *Olivia Y.* Settlement agreement. The agency began implementing CQI activities to identify strengths as well as areas needing improvement in case practice. These activities were developed to monitor and inform practice in such a way as to lead to timely services to clients, improved outcomes for Mississippi families and to inform agency leadership and stakeholders of the well-being of the agency. Today, the Mississippi Department of Child Protection Services Continuous Quality Improvement activities have grown significantly from its early roots, yet the mission remains the same: to see improved outcomes for Mississippi Families who are involved with MDCPS.

To meet the periodic administrative determination AFCARS element, staff in the Quality Assurance Unit facilitate county conferences every six months for children in foster care and who remain applicable for such reviews. Annually, regional reviews are held in each of the 14 regions to assess

2020–2024 Mississippi Child and Family Services Plan

case practice. These reviews yield findings from 350 cases (foster care and In-home). The cases are critically reviewed and documented in the Children’s Bureau electronic database by Quality Assurance Unit staff. Information from those reviews helps inform case practice, performance on the Child and Family Services Review and subsequently using the CQI process will establish the CFSR PIP baseline and performance on the PIP through the first two years of the CFSP.

In July 2018, the Mississippi Department of Child Protection Services reorganized its agency structure to create two parallel areas of focus and operation: Child Welfare and Child Safety. Under the new organizational structure, the CQI unit is positioned under the Deputy Commissioner of Child Safety while the day-to-day tasks of the CQI staff are managed by one bureau director. This structure has created a larger pool of reviewers under the leadership of one director. This change has better aligned skills and resources to the work required. What was previously known as the Foster Care Review unit and the Evaluation and Monitoring unit are now consolidated into the Quality Case Review unit. This arrangement increases staff capacity to perform the functions of quality case reviews with consistency and integrity of the process.

The Continuous Quality Improvement/Quality Assurance system within the Mississippi Department of Child Protection Services seeks to be an institution of learning that operates in a non-punitive manner while monitoring and informing practice. This organizational structure offers a more diplomatic approach to providing CQI activities throughout the agency. The CQI unit now benefits from direct leadership of executive management who are always mindful of data trends and the need for training or policy considerations as it relates to CQI findings. Although CQI is an identified program unit, its activities and processes are intentionally embedded throughout the fabric of the agency in collaboration with and, in some instances, led by other program units.

Further enhancements to the current CQI system include ongoing collaboration with the various program units, field operations and stakeholders. Currently, field operations staff complete quality review activities and feedback is provided through structured case staffing along with periodic administrative reviews, post the Foster Care Review. In addition to county level reviews, quarterly reviews are conducted by the various program units including Youth Transition Support, Therapeutic Services/Nursing, Permanency Support, Licensure Unit and Case Review Unit. The agency’s efforts to establish strategies for sustainable improvement through monitoring and assessment of programmatic goals, data collection and analysis at the program level and agency wide level, inclusive of staff and stakeholder input through surveys, and focus groups creates opportunities for quality feedback loops. Through focus groups and surveys the agency will continue gathering specific insights from those who are delivering services, receiving services or who have partnered with the agency to provide such services.

While the CQI processes and activities are functioning as designed, the agency must stay up to date with changes in federal and state programs. As such, CQI will continue their core functions already imbedded in the agencies work and will also lend itself, as applicable, to any new programs introduced and implemented under the CFSP.

G. Staff Training (45 CFR 1355.34 (c)(4))

Item 26: Initial Staff Training. MDCPS’s initial staff training was rated as a strength during the 2018 CFSR. MDCPS’s initial staff training is described in Section 7 of this CFSP.

Item 27: Ongoing Staff Training. MDCPS’s ongoing staff training was rated as an area needing improvement during the 2018 CSFR. This item was rated as needing improvement because MDCPS

2020–2024 Mississippi Child and Family Services Plan

had not yet launched its new online training system and had no mechanism for user feedback. That system is now operational and contains a survey system for user satisfaction. MDCPS's ongoing staff is described in Section 7.

Item 28: Foster and Adoptive Parent Training. MDCPS's foster and adoptive parent training is described in Section 7 below. This item was rated as needing improvement because MDCPS had no mechanism for user feedback on the effectiveness of the training. MDCPS now has an online learning system that allows user feedback. MDCPS also is putting in place a dedicated foster parent liaison who will be able to field feedback from foster parents.

H. Service Array (45 CFR 1355.34(c)(5))

Item 29: Service Array. Mississippi's service array was rated as an area needing improvement in the 2018 CFSR. Mississippi's service array is described in Section 4 of this CFSP. Further Mississippi's goals and strategies for improvement in Section 3 of this CFSP address improvements to the service array.

Item 30: Individualizing Services. This item was rated as an area needing improvement in the 2018 CFSR. Mississippi's goals and strategies for improvement in both Section 3 of this CFSP and Mississippi's Round 3 CFSR PIP address improvements to the individualization of services through improvements to assessment, family involvement in case planning, overall family engagement, and expansion of the service array.

I. Agency Responsiveness to the Community (45 CFR 1355(c)(6))

Item 31: State Engagement and Consultation with Stakeholders. This item was rated as a strength in Mississippi's 2018 CFSR. MDCPS's engagement with stakeholders is described in Section 1 of this CFSP.

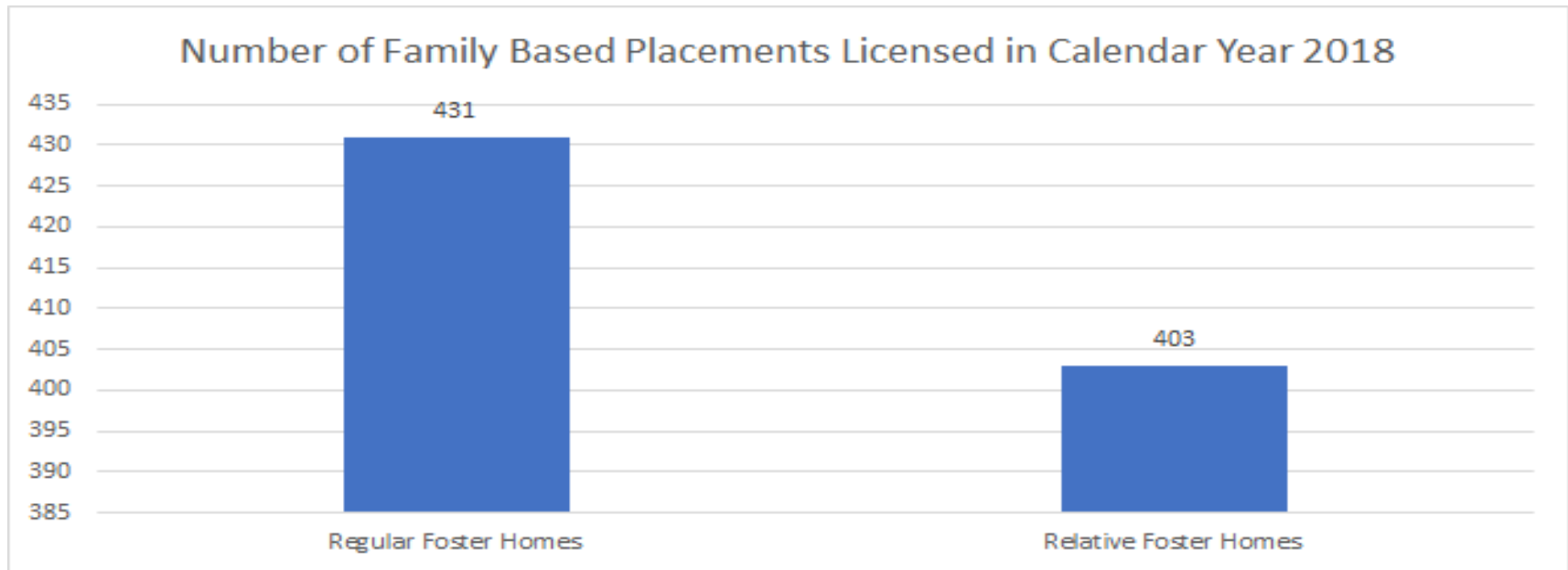
Item 32: Coordination of CFSP with Other Federal Programs. This item was rated as a strength in Mississippi's 2018 CFSR. MDCPS's engagement with stakeholders is described in Section 1 of this CFSP.

J. Foster and Adoptive Parent Licensing, Recruitment, and Retention (45 CFR 1355.34 (c)(7))

Item 33: Licensure Standards Applied Equally. This item was rated as a strength in Mississippi’s 2018 CFSR. For calendar year 2018, MDCPS licensed over 431 homes, and the Olivia Y court monitored has certified that MDCPS licensed these homes using its approved licensure process. This item remains a strength for MDCPS.

Item 34: Requirements for Criminal Background Checks. This item was rated as a strength in Mississippi’s 2018 CFSR. MDCPS recently received approval of its compliance with the model licensing standards under FFPSA, including its background check requirements. For calendar year 2018, MDCPS licensed over 431 homes, and the Olivia Y court monitored has certified that MDCPS licensed these homes using its approved licensure process which includes criminal background checks for all adults in the home.

Item 35: Diligent Recruitment of Foster and Adoptive Parents. This item was rated as an area needing improvement in Mississippi’s 2018 CFSR. MDCPS’s diligent recruitment plan is described in detail in Section 7 below. MDCPS’s performance during the 2018 CFSR was based on the CB’s concern that Mississippi’s recruitment of foster and adoptive parents did not ensure that the pool of foster and adoptive parents reflects the racial and ethnic diversity of the foster care population. As the table above demonstrates, MDCPS makes placement with a relative a priority for children entering custody, licenses relative placements as foster parents, has implemented an expedited licensure process for those relatives, and has achieved relative placement for approximately fifty percent of all children in out-of-home placements. Relative placements generally reflect the racial and ethnic background of the children. Mississippi’s faith-based foster parent recruitment, Rescue 100, which is described in Section 7, is open to churches whose congregations reflect the racial and ethnic diversity of the state.



Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements. This item was rated as needing improvement during Mississippi's 2018 CFSR because of concerns related to its ability to track the timely completion of home study requests from other states. MDCPS is now utilizing the NIECE electronic database to track requests, even those sent by mail through MDCPS entry into the system.

III. Plan for Enacting the State’s Vision

In the past, Mississippi’s five-year CFSP goals have been focused on discrete steps forward. However, as discussed above, both the State and agency’s visions and missions are outcomes-focused. Every system should be judged on whether it produces its intended results. For Mississippi’s child welfare system, this reduces to three points of emphasis:

- First, Mississippi intends to ensure the safety and wellbeing of its children by preventing child maltreatment.
- Second, when primary prevention efforts fail, Mississippi wants to avoid further damage to child wellbeing caused by the trauma of removing a child to foster care whenever safely possible to maintain the child in the birth home.
- Finally, for every child who must enter foster care, Mississippi seeks to achieve lasting permanency as rapidly as safely possible.

The 2020-2024 CFSP’s five-year goals are guided by these three priorities. However, the CFSP goals, and the strategies to achieve them, have not been developed in isolation. At the same time, this CFSP has been developed, Mississippi also has been in the process of developing its Round 3 CFSR PIP and has been operating under the 2nd Modified Settlement Agreement and Reform Plan in the Olivia Y federal class-action litigation. Both of these documents guide and direct Mississippi’s improvement efforts for the foreseeable future. Upon finalization of the State’s CFSR PIP, goals, objectives, and strategies will be strengthened and updates will be provided in subsequent APSRs.

While the goals of this CFSP focus on intended improvement in the ultimate outcome measures for success in Mississippi’s child welfare system, the goals of Mississippi’s CFSR PIP and the deliverables of Mississippi’s 2nd MSA focus on areas of focus in practice designed to bring about those outcomes. Thus, the CFSP’s goals for improving outcomes can be understood as building upon the foundational work in the PIP and 2nd MSA. Another distinction is that this CFSP includes a goal related to primary prevention, which falls outside the scope of the other two documents.

Goal 1: Mississippi will ensure the safety and wellbeing of its children by reducing rates of child maltreatment through community collaboration to identify and develop local resources, and increased access to civil legal aid.

Overall Measures of Progress:

Measure of Progress	Baseline Performance	Performance Improvement Target
Substantiated victims per ten thousand population.	11.6 (October 2017–September 2018)	2% Annual Target 10% Five-Year Target

Mississippi’s statewide strategic vision seeks a better quality of life for each generation than those that came before. Consistent with the CFSR outcomes, the State’s mission recognizes that the first role of government is to protect and ensure the safety and wellbeing of its citizenry. For Mississippi’s human services agencies, this requires a focus on ensuring children have a healthy, stable, and nurturing family environment, which must be free of abuse, neglect, or other maltreatment. To that end, Mississippi’s statewide strategic plan identifies the number of substantiated incidence of child abuse or neglect (per 1,000 population) as one of its benchmarks for measuring success. This focus is mirrored in MDCPS’s mission statement, which includes focus on preventing child abuse, neglect, and exploitation.

2020–2024 Mississippi Child and Family Services Plan

Between FFY 2013 and FFY 2018, the number of substantiated allegations of child maltreatment has risen. During FFY 2013, MDCPS substantiated 5,479 reports child maltreatment. By FFY 2018, that number had climbed to 7,036. The total number of unique reports investigated and closed by MDCPS during that time also rose from 22,238 in FFY 2013 to 28,607 FFY 2018. From FFY 2013 to FFY 2018, the percentage of all reports investigated and closed that were substantiated stayed constant around 25%, suggesting that the increase in the raw number of substantiated reports may be explained by increased awareness about reporting responsibilities, not an actual increase in the frequency of child maltreatment. Nevertheless, the data indicates at least that child maltreatment is not declining in Mississippi.

Consistent with national trends, most maltreatment allegations investigated by MDCPS are allegations of neglect. During FFY 2018, 54% of all allegations were for neglect, with an additional 5% for medical neglect. Psychological or emotional abuse accounted for 18% of all allegations; physical abuse, 15%; and sexual abuse 8%. These numbers were largely consistent with those in FFY 2017 and FFY 2016, meaning neglect consistently is the source of most allegations, and that addressing root causes of neglect presents the greatest opportunity for a reduction in rates of maltreatment.

In Mississippi, the child welfare agency—MDCPS—is not the agency tasked or empowered by state statute with implementing the programs best geared towards primary prevention. Prior to the 2016 Legislative session, Mississippi had one consolidated human services agency, including child protection functions. But, as a part of Mississippi’s reform efforts related to the foster-care focused Olivia Y class-action law suit, Mississippi created MDCPS separating the child protection functions from the rest of Mississippi’s human services programs. Today, MDCPS tasked and empowered to respond to reports of child maltreatment. But the responsibility for programs that can serve as effective primary prevention falls on many others: MDHS—which administers TANF, SNAP, LIHEAP, childcare vouchers, and child support enforcement—the Mississippi Division of Medicaid, the Mississippi Department of Mental Health, the Mississippi Department of Education, civil legal aid organizations, and others.

Objective 1: Prevent child maltreatment through local community collaboration to identify and develop resources that strengthen families’ capacity to care for their children.

Because of this divided responsibility, the Mississippi Commission on Children’s Justice has adopted a focus on primary prevention. To advance primary prevention work in Mississippi, the Commission’s stakeholder group has jointly launched the Mississippi Family First Initiative, one of the priority areas identified in the CIP strategic plan. The Initiative promotes the safety of Mississippi’s children and the stability and self-sufficiency of Mississippi’s families by pulling together community resources for multi-generational care. Its focus is prevention of neglect, child maltreatment and unnecessary placement of children in foster care by providing community services/resources, to reduce the need for state intervention in families.

The initiative kicked off with a summit in July 2018 involving more than 300 representatives of the executive, legislative, and judicial branches of Mississippi state government as well as service providers, grant funding groups, and philanthropic stakeholders. The summit emphasized Mississippi’s commitment to reduce the number of children removed from their homes by providing services to strengthen and enable the families to care for their children. It also identified the Initiative’s focus on leveraging local stakeholder groups to identify all available resources in the local community.

Implementation of the Initiative’s work began with the creation of a state-wide steering committee and the identification of five pilot sites led by local steering committees. The goal for each local steering committee is to create a database of service providers and connect families to the services prior to interaction with MDCPS. To begin local operations town hall meetings were held in each site during the

2020–2024 Mississippi Child and Family Services Plan

month of August 2018 to raise community awareness and promote involvement in providing services for the children in the county. The Jackson-metro area, originally identified as a single three-county site, determined that each county's needs would be better served by separating into three sites, which first convened in September and October 2018, bringing the total of pilot sites to eight.

Since then, in Lee County, the local steering committee has created an action plan targeting education, addiction, and poverty. Members worked with Mississippi's Access to Justice to provide free legal clinics involving case work to prevent child removals. The committee selected a specific neighborhood, Haven Acres, and worked to build a rapport with its community. They have implemented reading clubs, summer learning programs, and quarterly neighborhood events to generate resource awareness and connect needs with resources.

In Bolivar County, the committee has identified priorities for change: education, employment, transportation, substance abuse treatment, domestic violence prevention, and crime. Members of this committee are very active in the community and have provided the area with great opportunities. Pam Chatman, the steering chair, helped create a connection with FedEx out of Memphis. Several job fairs have happened, resulting in an influx of employment through a new, free shuttle service. The committee's action plan consists of two major goals: 1) an upcoming expungement clinic to assist with employment opportunities and 2) an upcoming resource fair to create awareness in the community and connect needs with resources.

In Lauderdale County, the committee is taking additional time to further assess the needs within the community and are developing individualized action plans separate from the 3-step process designed by the state.

In Pearl River County, a new position was created at the Pearl River County Youth Court. This Resource Coordinator is tasked with connecting the youth court families with available resources. The committee has created a spreadsheet of organizations and services that is updated regularly. Pearl River County has seen several successful examples of intervention ranging from work on homes to donated dental work, all of which allowed for children to remain with their parents. Priorities for change include: employment, housing, and poverty.

In Jackson County, efforts are unique in that members observed the major problem was awareness. Members identified several organizations and resources and the committee was successful in recruiting a large, diverse membership. As a result, the committee is working to improve connection of these resources with the community. They have started hosting regular resource fairs for the community with family-friendly events. The youth court judge is working on several court programs, including a holistic program for incarcerated parents of foster children and another program focused on aging-out preparedness. Committee members are prioritized three areas of care: employment, mental health treatment, and physical health care.

In Madison County, the committee is seeking community buy-in and is in the process of planning a reception at the county courthouse. Members also seek to recruit more agencies and organizations in the area. The greatest challenge they face is creating public awareness of the need within the community. Priorities for change include: poverty, crime, substance abuse, and education.

In Rankin County, the committee members have identified priorities for change—poverty and education—but are taking time to conduct further assessment. The committee is seeking more involvement from residents regarding their specific needs. A survey is under development and will be distributed to community members.

2020–2024 Mississippi Child and Family Services Plan

In Hinds County, the committee reviewed the census and MDCPS geo data specific to their area and determined that additional input is necessary before deciding on exact priorities for change. Members would like as much residential involvement as possible and have started hosting meetings in local libraries and schools to generate community buy-in. Going forward, the Initiative plans to continue the development of resources in the pilot sites and to eventually expand the number of sites statewide.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
Develop local resources through FFI pilot site steering committees to prevent child maltreatment and MDCPS involvement.	Progress reports on each site’s activity.	The statewide steering committee receives technical assistance from Casey Family Programs.	The statewide steering committee provides guidance to local steering committees.
Increase the number of FFI sites across Mississippi working to prevent child maltreatment and MDCPS involvement.	The number of new active FFI local steering committees.	The statewide steering committee receives technical assistance from Casey Family Programs	The statewide steering committee provides guidance to local steering committees.

Goal 2: Mississippi will safely reduce the rate at which substantiated victims of maltreatment are removed from their homes and placed in foster care through improved risk and safety assessment, a diversified and expanded array of services designed to safely maintain children at home, and implementation of statewide parent representation.

Overall Measures of Progress:

Measure of Progress	Baseline Performance	Performance Improvement Target
Percentage of substantiated victims removed to foster care.	18.5% (October 2017–September 2018)	2% Annual Target 10% Five-Year Target
Percentage of non-removed substantiated victims of maltreatment revictimized within six months.	7.5% (October 2017–September 2018)	2% Annual Target 10% Five-Year Target

Mississippi’s Round 3 CFSR results revealed that concerted efforts were made to prevent removal to foster care in only 37% of 19 applicable cases. Of the cases in which concerted efforts were not made, necessary services were not explored in nine cases. In five cases, a child remained in a home without necessary services. Appropriate and accurate risk and safety assessment occurred in only 46% of applicable cases, and only 33.33% of the cases had appropriate safety plans. Needs assessment struggled

2020–2024 Mississippi Child and Family Services Plan

with only 44% of twenty-five applicable in-home cases having an adequate assessment of the child’s needs and only 24% having an adequate assessment of the parents’ needs. In five in-home cases, no needs assessment occurred, or the assessment occurred late. In cases where needs assessment occurred, some assessments were superficial, some lacked consideration of collateral contacts, some involved minimal contact with the children in question, and some failed to identify and address underlying needs or causes of the maltreatment report. Accurate initial and ongoing assessment of risk, safety, and needs suffered because of a lack of family contact in eight cases. Comprehensive and accurate needs assessment occurred only 40.74% of the time for mothers and 18.76% of the time for fathers. Appropriate services were delivered in only 33.33% of cases for mothers and 17.07% of cases for fathers.

Mississippi CQI data demonstrates similar challenges in assessment statewide in 2018’s CQI case reviews. Out of 495 in-home and foster care cases, only 58.59% had satisfactory risk and safety assessment, 64.65% adequate needs assessment for children, and only 29.58% adequate needs assessment for parents. Similar concerns have emerged in qualitative CQI case reviews from the first quarter of 2019, which found that the development of quality family service plans suffered due to no documented assessment family strengths and needs.

At the core of MDCPS’s vision for the future are effective efforts to prevent unnecessary entry into foster care. However, a clear line of causation in the agency’s and the courts’ failure to prevent unnecessary entries is apparent. Children are removed to foster care because concerted efforts to prevent removal are not made. Concerted efforts cannot be made without effective safety planning. An effective safety plan cannot be developed without an accurate assessment of risk, safety, and family strengths and needs.

For this reason, Mississippi’s first objective related to its goal of safely reducing entries into foster care focuses on ensuring complete and accurate assessments.

Objective 1: Increase the number of children safely maintained at home through improved risk, safety, and family needs assessment.

The efficacy of assessments depends on two main factors: the quality of the assessment tool utilized and the competence of staff to administer the tool. To improve the quality of its assessments, MDCPS is taking a two-prong approach to determine whether improvements can be made to either the tools used or staff skill in administering those tools.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
An evaluation team has begun work to evaluate assessment tools utilized by other states, as well as those currently in use by MDCPS, to consider (1) whether more reliable tools exist than	A workgroup recommendation about whether to replace existing MDCPS tools. If procurement is recommended, the requirements for the	A contractor will provide technical assistance to the evaluation team, providing resources on best practices for evaluating interventions as well	The timetable for implementing this strategy will be within the first year of this CFSP. Implementation supports for this strategy include the

2020–2024 Mississippi Child and Family Services Plan

<p>those presently utilized by MDCPS, and (2) if so, to develop requirements for the procurement of such tool.</p> <p>The evaluation team’s recommendation will be provided to MDCPS leadership to determine whether a new tool will be procured. If so, the requirements developed by the team will be included in an appropriate procurement. Once procured, the new tool will be rolled out to MDCPS staff with an appropriate training plan.</p> <p>If the evaluation team or MDCPS executive leadership determines that a new tool is not appropriate, and that MDCPS will continue to use its existing tools, a training plan will be implemented to improve caseworkers use of the existing tools.</p>	<p>tool to be included in that procurement.</p> <p>A decision from MDCPS executive leadership about whether to proceed with procuring a new tool.</p> <p>If so, an appropriate procurement.</p> <p>Once procured, an appropriate training plan for rollout.</p> <p>If a new tool is not procured, an appropriate training plan for improving caseworker use of existing assessments.</p>	<p>as identifying tools for review.</p> <p>MDCPS has requested the participation of an experienced Mississippi youth-court judge on the evaluation team to provide judicial insight.</p> <p>MDCPS utilizes a three-prong training strategy. First, all MDCPS caseworkers must complete 270 hours of preservice training, consisting of both classroom and on-the-job components, before receiving a caseload. Likewise, all new MDCPS supervisors must complete a 40 hours clinical supervisory training within ninety days of hire or promotion. Second, for ongoing training, MDCPS utilizes an online learning system. Each MDCPS caseworker must receive 40 hours of ongoing training per year, and each supervisor 24. Finally, MDCPS utilizes a combination of staff and contracted practice model coaches to provide ongoing professional coaching in the field.</p>	<p>contractor’s assistance with tool evaluation, the youth court judge’s judicial perspective on tool requirements, and the three-prong training plan.</p> <p>This strategy is included in Mississippi’s Round 3 CFSR PIP. The CIP strategic plan includes support for implementing CFSR PIP strategies. So, CIP support for judicial education if a new tool is selected will be needed.</p>
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		<p>If MDCPS selects a new tool, instruction on its use will be incorporated into all three phases of MDCPS training. If MDCPS does not adopt a new tool, each of the three phases will incorporate revised curriculum around the use of MDCPS’s existing tools.</p>	
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Objective 2: Increase the number of children safely maintained at home through an expanded array, and increased quantity, of intensive in-home services.

Mississippi’s Round 3 CFSR results found another barrier to safely maintaining children in their homes that goes beyond inadequate assessments. The lack of a robust enough service array also was cited as a contributing factor. MDCPS’s in-CIRCLE program is a pair of contracts with two service providers for intensive in-home services designed to prevent removal. At present, MDCPS data shows that these programs have been incredibly successful. MDCPS has had an independent third party evaluate the two contractors’ performance. During the first year of the contracts, the contractors served 417 families. The average tenure of a family in the program was 93.5 days. The contractors employed three evidence-based practices in their work: Collaborative Problem Solving, MAP System, and Risking Connections. They also provided other support through school interaction and relationships, mental health/physical health connections/support, job search and placement activities, financial management assistance, youth court and law enforcement relations, housing connections, MAP team support, thrift store relations for obtaining needed household goods, and church outreach.

MDCPS contracted with an independent external evaluator on October 1, 2017, to ensure quality measures would be met by the in-CIRCLE providers, Canopy and Youth Villages. The evaluation areas assessed were safety, family functioning, and program satisfaction. Each family served by Canopy and Youth Villages receives a North Carolina Family Assessment Scale (NCFAS) at admission and discharge. The NCFAS is an assessment tool designed to examine family functioning in the domains of Environment, Parental Capabilities, Family Interactions, Family, and Child Well-being. The independent evaluator received the scores from the NCFAS. Using a sample of the NCFAS scores to compare to satisfaction surveys conducted by the independent evaluator to determine the validity of the data provided. The cumulative data provided by the independent evaluator, reflects the total average difference from intake to discharge per category. In both Preservation and Reunification cases, previous yearly average totals showed a consistent increase in family functioning because of services provided. Current documentation, continued to reflect an increasing trend with a 16.70 % positive change overall through the last report received from the independent contractor dated April 26, 2019. The current reporting reflected increases evident in all twelve areas assessed.

2020–2024 Mississippi Child and Family Services Plan

Among the families served, 94% of all children successfully remained at home and avoided entering or reentering foster care. Aggregate survey data of families, provider staff, and MDCPS staff reflected 88% positive responses about program effectiveness, 90% positive responses about program satisfaction, and 90% positive satisfaction with the referral process. Evaluation at discharge showed a 92% of participants experienced increased or significantly increased parental capacity, knowledge, and skill; 95% experienced improved or significantly improved family interaction; 95% experienced improved or significantly improved home management knowledge and skill; 96% experienced significant increase in access and use of social supports; 98% experienced significant improvement in the child/caregiver relationship; and 93% experienced significant improvement in child wellbeing and safety.

However, despite these results, the CFSR recognized a challenge related to in-CIRCLE. While MDCPS has implemented a highly successful intensive in-home services program, financial constraints have limited the number of families that can be served, and waitlists for the services have developed. So, to build on the success of these programs, MDCPS has set an objective of an expanded intensive in-home service array over the next five years. MDCPS will utilize several strategies to advance this objective.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
<p>MDCPS has begun preliminary discussions about diversifying its intensive in-home services array. Several service providers in Mississippi have approached MDCPS suggesting that alternative service models and evidence-based programs could serve more families at the same cost, particularly due to MDCPS’s stringent staffing requirements for in-CIRCLE. Given in-CIRCLE’s success, MDCPS needs to engage in appropriate study of the available alternative options to determine whether it</p>	<p>MDCPS’s intensive in-home services contract are competitively procured. If MDCPS’s analysis of the issue determines that a diversified service array is appropriate, a procurement for those programs would be the progress benchmark.</p>	<p>Based on information provided to MDCPS from service providers in Mississippi, MDCPS expects that the implementation of this strategy would involve contracting for service models and programs on which provider staff already have been trained.</p> <p>There will be an evaluation element to this strategy in that MDCPS will research whether the proposed alternatives have proven track record providing sufficient confidence that MDCPS could diversify the service array without compromising the</p>	<p>The primary implementation support for MDCPS staff will be an internal communication explaining the diversified service array now available. A centralized prevention unit handles the referrals for service, and they will be provided revised procedures related to determining the appropriate referral to be made.</p> <p>Externally, MDCPS will develop a communications plan to explain the diversified service array to youth court judges. If the need to do so arises, MDCPS will request that education on the service array be incorporated</p>

2020–2024 Mississippi Child and Family Services Plan

<p>is willing to adopt any of these alternatives. This analysis and discussion also will include consideration of whether MDCPS can implement a continuum of in-home service programs based on the acuity of a family’s needs, providing less intensive—and therefore more cost effective—programs where appropriate for the family in question.</p>		<p>results achieved by in-CIRCLE thus far.</p>	<p>into the judicial training provided both by the Mississippi Judicial College and the AOC/CIP.</p>
<p>MDCPS will implement the Families First Prevention Services Act to increase the availability of funds for intensive in-home services and increase the quantity of such services available.</p>	<p>Mississippi has elected to take advantage of the full two-year delay for implementation to October 1, 2021.</p> <p>Interim benchmarks will include, but are not limited to, the development of Mississippi’s state prevention plan and the issuance of new licensure standards meeting the Act’s requirements for a Qualified Residential Treatment Facility.</p>	<p>MDCPS has initiated conversations with congregate care providers regarding the changes that will come at the time of implementation based on the Act’s QRTP requirements, including outside training from outside consultants.</p> <p>MDCPS leadership has received training from a team of outside consultants on the Act’s requirements.</p> <p>As part of the CIP strategic plan, judicial training has been provided, and will continue to be provided, about the requirements of the act.</p> <p>When Mississippi nears implementation,</p>	<p>MDCPS currently is considering the viability of dedicating fulltime staff to managing FFPSA implementation. MDCPS also is considering contract for technical assistance with the Act’s implementation. Decision will be made early in Mississippi’s next state fiscal year, beginning July 1, 2019.</p>

2020–2024 Mississippi Child and Family Services Plan

		FFPSA content will be incorporated into all MDCPS’s training phases: preservice training, clinical supervisory training, online learning modules for ongoing training, and ongoing coaching in the field.	
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Objective 3: Increase the number of children safely maintained at home through implementation of statewide parental representation in youth court.

Like the Family First Initiative discussed above, moving toward statewide parental representation in youth court is a priority area identified in Mississippi’s CIP strategic plan. The Court’s focus on expanding parent representation comes as part of Mississippi’s larger efforts to reduce to the number of children entering foster care. For several years, the CIP strategic plan has adopted a theory of change that posits that by providing parent attorneys to indigent parents in youth court, the attorneys will work with parents to advocate for appropriate services and compliance with service plans, and parents will be better supported and engaged, judges will be better informed, and there will be fewer removals, shorter times to permanency, and fewer re-entries.

During Mississippi’s work to develop its Round 3 CFSR PIP in early 2019, three days of stakeholder meetings were held to discuss the final results and strategize solutions for improvement. Advancing parent representation was identified as one such solution. Those in attendance agreed that the CFSR’s findings around lack of family engagement could be improved with the presence of an attorney to advocate for a parent’s interests and encourage the parent’s participation.

Some steps already have been made in advancing this work. First, the Legislature was successfully persuaded to grant youth court judges the power to appoint attorneys to represent parents in youth court. Parent representation has been piloted in several counties for some time: Adams, Forrest, and Rankin since 2012; Harrison since 2013; Hancock since 2015; DeSoto, 2016; Bolivar and Hinds, 2017; Jackson, 2017; and Pearl River, 2018. Work remains, however, to make high quality parent representation available statewide.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
Continue work to strengthen the quality and capacity of parent representation in pilot counties.	Model standards are being developed for attorneys representing parents in child protection or termination of parental rights cases. The issuance of those	Office of the State Public Defender has developed and provided training for parent representation attorneys on a multidisciplinary approach to addressing safety issues and	MDCPS will continue to provide data as needed to the Parent Representation Task Force and CIP. Casey Family Programs and the Kellogg Foundation will

2020–2024 Mississippi Child and Family Services Plan

	<p>standards will be a benchmark for progress.</p> <p>Social work staff will be added in some counties to provide support to the parent representation attorney.</p>	<p>preventing removal. Training will be ongoing.</p> <p>Data on removals and permanency in counties with parent representation will be studied by the Parent Representation Task Force to evaluate the impact of parental representation.</p> <p>The Parent Representation Task Force and CIP also receive technical support from Casey Family Programs and the Kellogg Foundation for their work to advance parent representation.</p>	<p>continue to provide support for this work as it proceeds.</p>
<p>Expand parent representation statewide through a two-pronged approach. First, MDCPS will work with the Parent Representation Task Force and CIP to develop a plan for claiming IV-E reimbursement for parent attorneys. Second, MDCPS will work with the Parent Representation Task Force and CIP to advocate for increased state funding for parent representation.</p>	<p>Benchmarks for progress will be the number of counties that add parent representation.</p>	<p>MDCPS will work with the Parent Representation Task Force and CIP to develop an educational plan for members of the Mississippi Legislature to pursue increased funding for parent representation.</p>	<p>None.</p>

2020–2024 Mississippi Child and Family Services Plan

Goal 3: Mississippi will increase the percentage of children entering foster care who achieve timely and lasting permanency, preferably through reunification.

Overall Measures of Progress:

Measure of Progress	Baseline Performance	Performance Improvement Target
Percentage of children reunified within 12 months	64% (April 2018–March 2019)	2% Annual Target 10% Five-Year Target
Percentage of children adopted within 24 months	78% (April 2018–March 2019)	2% Annual Target 10% Five-Year Target
Percentage of children exiting custody who exited to reunification	51% (April 2018–March 2019)	2% Annual Target 10% Five-Year Target
Percentage of children exiting custody who exited to adoption	21% (April 2018–March 2019)	2% Annual Target 10% Five-Year Target
Number children reentering custody.	381 (April 2018–March 2019)	2% Annual Target 10% Five-Year Target

As discussed above, both Mississippi’s Round 3 CFSR and Mississippi’s OSRI CQI review data demonstrate that accurate and complete assessment is a challenge in MDCPS’s practice. In addition to impeding Mississippi’s efforts to prevent removal, the lack of quality assessment impacts Mississippi’s ability to timely achieve lasting reunification. This is evident in the fact that the OSRI CQI data demonstrates that the worst performance in the area of assessment was in needs assessment and services for parents: 29.58% of 134 cases. This data informs the first objective related to Mississippi’s goal of achieving timely permanency.

Objective 1: Increase the number of children safely reunified through improved family needs assessment.

As stated above, the efficacy of assessments depends on two main factors: the quality of the assessment tool utilized and the competence of staff to administer the tool. To improve the quality of its assessments, MDCPS is taking a two-prong approach to determine whether improvements can be made to either the tools used or staff skill in administering those tools.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
An evaluation team has begun work to evaluate assessment tools utilized by other states, as well as those currently in use by MDCPS, to consider (1) whether more reliable tools exist than	A workgroup recommendation about whether to replace existing MDCPS tools. If procurement is recommended, the requirements for the	A contractor will provide technical assistance to the evaluation team, providing resources on best practices for evaluating interventions as well	The timetable for implementing this strategy will be within the first year of this CFSP. Implementation supports for this strategy include the

2020–2024 Mississippi Child and Family Services Plan

<p>those presently utilized by MDCPS, and (2) if so, to develop requirements for the procurement of such tool.</p> <p>The evaluation team’s recommendation will be provided to MDCPS leadership to determine whether a new tool will be procured. If so, the requirements developed by the team will be included in an appropriate procurement. Once procured, the new tool will be rolled out to MDCPS staff with an appropriate training plan.</p> <p>If the evaluation team or MDCPS executive leadership determines that a new tool is not appropriate, and that MDCPS will continue to use its existing tools, a training plan will be implemented to improve caseworkers use of the existing tools.</p>	<p>tool to be included in that procurement.</p> <p>A decision from MDCPS executive leadership about whether to proceed with procuring a new tool.</p> <p>If so, an appropriate procurement.</p> <p>Once procured, an appropriate training plan for rollout.</p> <p>If a new tool is not procured, an appropriate training plan for improving caseworker use of existing assessments.</p>	<p>as identifying tools for review.</p> <p>MDCPS has requested the participation of an experienced Mississippi youth-court judge on the evaluation team to provide judicial insight.</p> <p>MDCPS utilizes a three-prong training strategy. First, all MDCPS caseworkers must complete 270 hours of preservice training, consisting of both classroom and on-the-job components, before receiving a caseload. Likewise, all new MDCPS supervisors must complete a 40 hours clinical supervisory training within ninety days of hire or promotion. Second, for ongoing training, MDCPS utilizes an online learning system. Each MDCPS caseworker must receive 40 hours of ongoing training per year, and each supervisor 24. Finally, MDCPS utilizes a combination of staff and contracted practice model coaches to provide ongoing professional coaching in the field.</p>	<p>contractor’s assistance with tool evaluation, the youth court judge’s judicial perspective on tool requirements, and the three-prong training plan.</p> <p>This strategy is included in Mississippi’s Round 3 CFSR PIP. The CIP strategic plan includes support for implementing CFSR PIP strategies. So, CIP support for judicial education if a new tool is selected will be needed.</p>
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2020–2024 Mississippi Child and Family Services Plan

		If MDCPS selects a new tool, instruction on its use will be incorporated into all three phases of MDCPS training. If MDCPS does not adopt a new tool, each of the three phases will incorporate revised curriculum around the use of MDCPS’s existing tools.	
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Likewise, Mississippi’s work towards expanded parent representation also relates to its work to achieve timely permanency.

Objective 2: Increase the percentage of children achieving timely permanency through implementation of statewide parental representation in youth court.

As discussed above, expanding parent representation in youth court has been an ongoing project in Mississippi for some time. But during this year’s planning work around the Round 3 CFSR PIP, Mississippi has tied its work to expand parent representation closely to its efforts to achieve permanency. The working theory Mississippi has adopted is that the present of parent attorney advances permanency in several ways. First, the attorney may serve as a bridge of communication with the parent emphasizing the importance of working through a service plan. Second, the parent attorney can advocate for the parent’s involvement in case planning, a challenge in Mississippi: 38.82% of 184 in 2018 OSRI data from MDCPS CQI reviews. Third, the parent attorney will litigate the parent’s rights in court, both making the case for reunification when appropriate and ensuring the State satisfies its obligations, likely eliminating legal barriers to termination of parental rights if efforts at reunification fail.

Strategy	Progress Benchmarks	Staff Training, Technical Assistance, and Evaluation	Implementation Supports
Continue work to strengthen the quality and capacity of parent representation in pilot counties.	Model standards are being developed for attorneys representing parents in child protection or termination of parental rights cases. The issuance of those standards will be a benchmark for progress.	Office of the State Public Defender has developed and provided training for parent representation attorneys on a multidisciplinary approach to addressing safety issues and preventing removal. Training will be ongoing.	MDCPS will continue to provide data as needed to the Parent Representation Task Force and CIP. Casey Family Programs and the Kellogg Foundation will continue to provide

2020–2024 Mississippi Child and Family Services Plan

	<p>Social work staff will be added in some counties to provide support to the parent representation attorney.</p>	<p>Data on removals and permanency in counties with parent representation will be studied by the Parent Representation Task Force to evaluate the impact of parental representation.</p> <p>The Parent Representation Task Force and CIP also receive technical support from Casey Family Programs and the Kellogg Foundation for their work to advance parent representation.</p>	<p>support for this work as it proceeds.</p>
<p>Expand parent representation statewide through a two-pronged approach. First, MDCPS will work with the Parent Representation Task Force and CIP to develop a plan for claiming IV-E reimbursement for parent attorneys. Second, MDCPS will work with the Parent Representation Task Force and CIP to advocate for increased state funding for parent representation.</p>	<p>Benchmarks for progress will be the number of counties that add parent representation.</p>	<p>MDCPS will work with the Parent Representation Task Force and CIP to develop an educational plan for members of the Mississippi Legislature to pursue increased funding for parent representation.</p>	

A. Further Evaluation of and Research Activities Underway

MDCPS is currently contracting with an independent contractor that is conducting a feasibility study to analyze the value of implementing a Kinship Navigator program in Mississippi and measure the likelihood of successfully developing such a program. The study is evaluating the need for such a program based on caregiver reports and evaluation to relative merits of various Kinship Navigator program models in relation to needs in Mississippi. The study will also identify any potential barriers to implementation and plausible solutions to overcome those challenges. The study will identify relevant stakeholders in the community and existing resources that could be leveraged to maximize the impact of a Kinship Navigator program and enhance service coordination for those that identify as kinship caregivers. The study will also serve as the foundation for developing and implementing the program. The study was launched in June of 2019 and is currently on target. The contractor has provided MDCPS with a Situation Analysis that included preliminary issues for the agency to consider during the needs assessment and remainder of the feasibility study.

IV. Services

A. Service Continuum and Coordination (45 CFR 1357.15(m))

Services and coordination of services began at intake. To accomplish this, MDCPS must assess to determine if information reported meets the statutory definition of abuse and neglect, complete timely and accurate investigations and make reliable well supported recommendations to the youth court. If it is determined that a child cannot remain safely in the home the agency works to maintain every possible connection of the child including a continuation of services being received if safely possible to do so. Stakeholder and governmental agency collaboration is vital to service coordination for children and families even when a child can remain safe in their home with appropriate referral to services and supports. There is coordination that takes place prior to in-Circle involvement however family satisfaction rates for in-Circle through the external evaluation process showed very positive outcomes. Post 12-month follow up data from families indicated a 94% satisfaction rate. The outcomes also reflected 94% of families were able to have the children successfully remain in the home due to Family Preservation Services. The same data reflects a 94.96% success rate for Family Reunification Services where children avoided a return to foster care. The outcomes have led to increased referrals to the program for preservation/reunification services which leads to in-Circle providers completing further assessment of the family's needs. and making additional referrals when needed. Both in-Circle providers provide an array of mental health services and can make referrals to other services when appropriate. In-Circle providers also make referrals to Families First Mississippi and other agencies to help families meet their needs that are beyond the scope of in-Circle services. In-Home program staff and MDCPS work together to formulate a collaborative treatment direction which is vital to progress towards permanency.

In addition to establishing collaborative treatment directions for children and families through in-Circle services, as a part of continuum of care through MDCPS Therapeutic and Prevention Services Unit, there is ongoing collaboration and discussions with the Division of Medicaid, Managed Care Organizations, MS Department of Mental Health, Families First, Healthy Families and many other organizations. A member of MDCPS staff serves as a member of the State Early Childhood Advisory Council for information sharing and coordination. Over the next five years, MDCPS plans to continue discussions with members from substance abuse prevention and treatment programs, domestic violence prevention and treatment providers, faith-based communities, and other community programs, to determine an interest in a state-wide coalition against child abuse and neglect. The interest has been very encouraging. Members of the state prevention staff have been gathering contacts to develop an alliance that would integrate partners from several areas into the state's including, but not limited to Temporary Assistance for Needy Families, Medicaid, Child Care, Head 30 Start, Supplemental Nutrition Assistance Program, etc., and state, local, tribal and community-based public and private providers for programs such as substance abuse domestic violence, behavioral health, schools, developmental disability, private child welfare services, etc.

Additionally, the state will continue to engage all stakeholders and representatives for the following Children's Bureau grant programs:

- **Community-Based Child Abuse Prevention**-MDCPS continues to engage and build ongoing relationships with FRIENDS National Center for Community-Based Child

2020–2024 Mississippi Child and Family Services Plan

Abuse Prevention representatives. Prevention strategies and goals are discussed through peer learning calls, annual meetings, and technical assistance via email or by phone. Efforts will be made to schedule face-to-face technical assistance from our CBCAP TA Coordinator. Additionally, collaboration will continue for the service array of programs and supports from other agencies including faith-based organizations to address the needs of children, youth, and families.

- **Children’s Justice Act-** As stated in the states 2015-2015 CFSP Final Progress Report, CACM became the designee to manage the CJA grant and task force In October 2016. MDCPS had previously been designated lead agency responsible for administering this grant and providing support services to the CJA Task Force. MDCPS and CACM collaborated on the transition of the Children’s Justice Act Task Force from MDCPS to CACM.

The CJA task force continues to meet on a quarterly basis on the first Friday of the first month of the quarter. MDCPS will continue to serve as a member on the CJA task force. The task force and is a gubernatorial appointed multi-disciplinary group with primary responsibility for meeting the mandates of Section 107 of CAPTA. Each member was appointed based on the individual’s experience and knowledge of the investigation and prosecution of child abuse. The members continually provide oversight and management for the Children’s Justice Act Grant. The Task Force routinely reviews the three-year assessment to review the status of the goals. The Task Force has elected officers and the new officers will take their position in July 2019.

CACM and MDCPS will also continue collaborate and support the Multidisciplinary Team (MDT) Enhancement Project. Goals of the MDT Enhancement Program with Pilot Counties:

- Proactively strengthen and sustain CAC Multidisciplinary Teams
- Fortify overall MDT component within CACs to ensure effective communication, coordination and collaboration at all stages of child abuse cases
- Ensure timely access to full array of MDT/CAC services for all children within a CAC’s official service area and existing protocol case criteria

This pilot project developed between CACM and the MDCPS allowed the CAC to receive access to all of the centralized intake hotline reports in their assigned service area. The goal of the program is to assist MDCPS and law enforcement with initiating a joint investigation, which would enable CACs to engage children and families with critical services at an earlier point in the investigation timeline.

By sharing intake notifications with the CAC, the local center can assist in identifying cases within the MDT’s defined working protocol (cases fitting a specific criterion wherein the MDT has already determined a CAC/MDT-style joint investigation is necessary). The ultimate beneficiary are Mississippi’s children as this system will allow CACs to engage with children and families at a much earlier point in time, providing critical intervention, family advocacy and therapeutic services more efficiently.

2020–2024 Mississippi Child and Family Services Plan

Since the start of this grant, fourteen counties have been participating in the project. This project includes support to all eleven child advocacy centers in Mississippi. There is a plan to roll on five more counties before the end of this grant year. This project includes a joint training between CACM and MDCPS to prepare for each county rollout of the project. The CACs have received access to MACWIS (the computer system for MDCPS) for their respective county and have begun the process of observing the reports that are submitted into to the Mississippi Centralized Intake. The CACs log all reports for their county, observe the number of reports that meet their MDT's protocol for a collaborative investigation, and observe and log the responses of their partner agencies regarding these reports.

- **Court Improvement Project-** Over the next five years the agency will continue to work with Administrative Office of the Courts (AOC) regarding their 2017-2021 Strategic Plan for CIP. The department and the courts will continue to work together along with other stakeholders to support the following collaborative efforts:
 - **Parent Representation Court Improvement Program Joint Project Between MDCPS and Administrative Office of the Courts** - The Parent Representation Task Force is a collaborative effort between the judiciary, Child Protection Services, Casey Family Programs, the Kellogg Foundation, University of Mississippi School of Law, Mississippi College School of Law, the American Bar Association, Mississippi Center for Legal Services and the Mississippi Judicial College.
 - **MS Children's Commission on Justice, Family First Initiative-** As an arm of the Mississippi Children's Commission on Justice, the Mississippi Family First Initiative aims to promote the safety of Mississippi's children and the stability and self-sufficiency of Mississippi's families by pulling together community resources for multi-generational care. The focus is prevention of neglect, child maltreatment and unnecessary placement of children in foster care by providing community services/resources, in order to reduce the need for state intervention in families.
 - **CFSR and APSR-** Assistance with any resulting Program Improvement Plan to correct deficiencies in timeliness of hearings and other court issues and analyze data from Mississippi Youth Court Information Delivery System (MYCIDS). Collaboration between Administrative Office of Courts and Department of Child Protection Services on the Annual Progress Services Report for 2017-2021.
 - **MYCIDS Training-** 1500 MDCPS workers will receive initial training and continued MYCIDS training and support in basic court procedures, testimony, reports and practices. A training schedule is developed annually and provided on an as needed basis when staff changes occur.
 - **Indian Child Welfare Act Training and Collaboration between the Judiciary, the Tribe and Child Protection Services-** Collaboration with the Mississippi Band of Choctaw Indians (MBCI)-Choctaw Tribe and, in conjunction with NCJFCJ, Casey Family Programs, and the Attorney General's Office, will develop and convene Annual Indian Child Welfare Conferences 2017-2021 to promote communication, cooperation, cultural awareness, recognition of and compliance with federal ICWA regulations.

2020–2024 Mississippi Child and Family Services Plan

- **Judicial Training-** Youth Court Judges will register annually to participate in summits/conferences sponsored by the National Council of Juvenile and Family Court Judges and other entities offering certified judicial training which aide in the achievement of positive outcomes for families.

MDCPS continues to meet regularly through monthly, bi-monthly, and as needed/called meetings with its stakeholders (including the Administrative Office of the Courts, Children Advocacy Centers of Mississippi, Tribal partners, representatives from mental health, education, state universities, and others) to discuss the progress and/or barriers to the goals, objectives, interventions identified under the 2015-2019 CFSP. For the development of the state’s final progress report, MDCPS’s Division of Federal Reporting contacted its stakeholders to request quarterly and periodic updates about joint initiatives, successes, barriers, and strategies for improvement regarding the state’s 2015-2019 CFSP final report. Copies of the 2015-2019 CFSP and subsequent APSRs were also provided to our stakeholders to help with reviewing and sharing needed information for the development and finalization of the state’s final report. Lastly, MDCPS also shares the annual reporting program instructions with its stakeholders.

B. Service Description (45 CFR 1357.15(o))

The following services are available throughout the state; however, availability and utilization may differ based on service location.

MDCPS’s Office of Therapeutic and Prevention Services – The Office of Therapeutic and Prevention Services works through Memorandum of Understandings (MOUs) with the DMH, Bureau of Alcohol and Drug Services, MS State Department of Health for Comprehensive Addiction and Recovery Act referral system. CARA is federally mandated to assist pregnant mothers up and their infants up to the discharge date from the hospital, offering substance use education and treatment options. Weekly conference calls and reports are generated for CARA compliance regarding the number of referrals received and processed. CARA Coordinators continues to provide education to hospitals, clinics, and other community agencies as needed on updated CARA policies. The MDCPS Therapeutic and Prevention Services Division implemented the CARA referral process in May 26, 2018. CARA referrals are assessed and referred to partnering agencies by the CARA coordinator. Quarterly meetings are held to discuss plans of safe care, progress, strengths and weaknesses. CARA education and outreach is provided to hospital staff and other community providers as requested. Partnering agencies also provide information regarding success during these meetings. Over the next five years, MDCPS plans to continue receiving, assessing and making CARA referrals to partnering providers. MDCPS will work towards identifying additional providers to enter in Memorandum of Understandings for direct receipt of CARA referrals. MDCPS would also like to work with community providers to increase the availability home visiting programs that will be beneficial in sustaining infants and children in their homes safely across the state.

Interpreter Services-The MDCPS interpreter program was created to assist field staff with Limited English Proficiency (LEP) clients. We have interpreters in the field as well as access to contract interpreters of any given language needed, that includes American Sign Language (ASL), Arabic and Vietnamese clients. During the 2015-2019 plan our objective was to provide services regardless of cultural or linguistic background to all LEP clients involved with MDCPS. We have met and exceeded this goal over the past 5 years. The interpreter unit works closely

2020–2024 Mississippi Child and Family Services Plan

with contract interpreters across the state of Mississippi and has made connections with contract language providers organizations who have assisted us in meeting the needs of our clients statewide. Benchmarks and timeframes were to ensure that LEP persons received access to some interpreter 24 hours a day, 7 days a week. Our unit has made sure that this is possible by our monthly on-call schedule with Mississippi Centralized Intake (MCI). We rotate being on-call each week statewide for all field staff and MCI workers. The outcome that is in the plan we have met successfully; we currently keep track of all data via excel spread sheets because MDCPS electronic data systems do not have the ability to process this information. The current plan is for the MDCPS interpreter program to continue providing support to field staff with LEP (Limited English Proficiency clients).

Therapeutic Placement- The Therapeutic Placement unit works diligently to improve discharge planning between the agency and treatment facilities. MDCPS, in collaboration with the DMH, was able to engage two therapeutic providers (Oak Circle Center and Specialized Treatment Facility) in the state level case review process for children in MDCPS custody placed in their facilities. This process allows MDCPS and the collaborating agencies to start planning for discharge during admission. The Director of Therapeutic Placement participates every other Monday in scheduled Specialized Planning, Options to Transition Team (SPOTT) meetings to discuss therapeutic foster children. The specialized team is made up of individuals from DMH, Medicaid providers, The Arc of Mississippi, Community Mental Health Center (CMHC), MDHS, and MDCPS. The therapeutic foster children who are mainly discussed at SPOTT are children with intellectual and developmental disabilities; however, some of the referrals are children who are in need of additional mental health services. The Placement Director also participates in State Level Case Review (SLCR) on the second Thursday of each month. The SLCR is the next level of the MAP Team process which is comprised of a multidisciplinary task force of state level agency representatives. The SLCR team reviews referred therapeutic foster children ages 0-21 who have serious emotional disorders. The SLCR team is made up of individuals from DMH, Medicaid providers, MDHS, and MDCPS. Emergency SLCR are needed on occasion for foster children due to needs in between the scheduled SLCR.

Therapeutic Placement Unit staff also collaborate with community stakeholders in and out of state who also work with foster children and/or Medicaid. Agencies the Therapeutic Placement Unit utilizes are, but are not limited to, contracted therapeutic providers, DMH, Medicaid providers, local Community Mental Health Centers, FamiliesFirst for MS, South Mississippi Regional Center, Boswell, Mississippi Adolescent Center, North Mississippi Regional Center, Louisiana Coalition Against Human Trafficking: The Free Indeed Home, Specialized Treatment Facility, Brentwood, Diamond Grove, Parkwood, The Crossings, Cares, Youth Villages, Millcreek of Magee, Millcreek of Pontotoc, Oak Circle Center, acute facilities throughout and outside of Mississippi, Chris Kids/Chris 180, and Montgomery Alabama Pediatric Nursing Home. The Therapeutic Placement Unit researches other agencies and placement treatment options, on an as needed basis, to serve therapeutic foster children. The cross-system collaboration for the above listed resources are based on the following factors:

- Community Mental Health Centers (CMHC) assist therapeutic foster children with gaining ongoing therapeutic services in the community. CMHC also work with MDCPS frontline staff to provide foster children with needed evaluations to ensure all needed services are available.

2020–2024 Mississippi Child and Family Services Plan

- FamiliesFirst for MS works with Therapeutic Placement Unit staff and MDCPS frontline staff on providing a flexible environment for foster children to obtain an accredited high school diploma.
- The Therapeutic Placement Unit has ongoing work and advocates with South Mississippi Regional Center (SMRC), Boswell, and North Mississippi Regional Center (NMRC) to gain needed evaluations and services for therapeutic foster children with Intellectual and Developmental Disabilities.
- The Therapeutic Placement Unit collaborates daily with Specialized Treatment Facility, Brentwood, Diamond Grove, Parkwood, The Crossings, Cares, Youth Villages, Millcreek of Magee, and Millcreek of Pontotoc to gain and plan treatment for therapeutic foster children.
- Oak Circle Center staff/Executive staff, MDCPS Therapeutic Placement staff, and MDCPS Executive staff participated in a meeting to address treatment concerns and appropriate placement concerns for therapeutic foster children.
- Specialized Treatment Facility, Oak Circle Center, DMH, and MDCPS participate in a monthly meeting to discuss discharges from Specialized Treatment Facility and Oak Circle Center. During this meeting, any concerns an agency may have regarding a placed therapeutic foster child are discussed.
- Louisiana Coalition Against Human Trafficking: The Free Indeed Home collaboration has provided a placement resource for sex-trafficked foster children. The home is a faith-based home dedicated to the rescue and restoration of girls ages 12 to 17 who have been victimized by child sex trafficking.

Well Being Services in Foster Care- The nursing unit continues to collaborate with Magnolia Healthcare, Medicaid, DMH, and other providers both in and out of state that provide services to children in the Mississippi foster care system. A representative from the nursing unit and the Director of Field Support Services participate in a bi-monthly meeting with Magnolia and Medicaid. The nursing supervisor has also held meetings with Montgomery Pediatric Nursing unit about the services it provides to some of the state’s children in care. MDCPS engages in continued collaboration with Medicaid and managed care organizations that serve foster children throughout the state for the purpose of connecting children in foster care to appropriate medical providers for Health and Developmental screening and follow up care. Children entering foster care receive an EPSDT or other comprehensive medical exam within 30 days of entering foster care. EPSDT is Early and Periodic Screening, Diagnostic, and Treatment (EPSDT). The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services. EPSDT is:

- Early: Assessing and identifying problems early
- Periodic: Checking children's health at periodic, age-appropriate intervals
- Screening: Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
- Diagnostic: Performing diagnostic tests to follow up when a risk is identified, and
- Treatment: Control, correct or reduce health problems found

C. *Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)*

The State will use 100% of these funds for board payments of children that are not IV-E eligible.

D. *Services for Children Adopted from Other Countries (Section 422(b)(11) of the Act)*

Post-Adoption Services in Mississippi remain available through a sub-contract with Southern Christian Services for Children and Youth (SCSCY). These post-adoption services consist of counseling, mental health treatment, family preservation and stabilization, crises intervention and management, peer support, and respite. There is also a public awareness component of this sub-grant which requires that SCSCY raise awareness of the availability and accessibility of these services throughout the state. These public awareness avenues consist of meeting with the county adoption staff, creating a Facebook page and a brochure summarizing their services. These services are available to children adopted from other countries.

E. *Services for Children Under the Age of Five (section 422(b)(18) of the Act)*

Over the next five years, MDCPS plans to address the developmental needs of all vulnerable children under five years of age and under by continuing to ensure that children entering custody receive EPSDT screenings and any medically recommended follow up. MDCPS will continue to refer children to the Perinatal High-Risk Management/Infant Services System through the MS Department of Health, Head Start and Early Education Programs, Healthy Families and other programs that attend to the developmental needs of children under five years of age in Mississippi. As stated in the 2015-2019 CFSP, MDCPS uses the following services and activities directly or through contractual agreements for children birth to five years old to address their overall safety, permanency and well-being needs:

- ***Permanency and Concurrent Planning-*** Caseworkers engage in permanency and concurrent planning regardless of the age of the child to facilitate permanency for children in foster care. Mississippi's family centered practice uses an approach to permanency and concurrent planning that involves the immediate and ongoing implementation of strategies designed to assure the healthy development of children through a sense of continuity and connectedness.

Adoption is also added to a child's permanent plan when all other plans are no longer appropriate. When this happens, an adoption specialist is assigned to the case to hold regular adoption status meetings. Weekly adoption status meetings are required for infants up to twelve months of age until permanency is achieved. MDCPS continue to have adoption status meeting for children who are free for adoption, but without an identified adoptive placement. These meetings are held monthly for children over twelve months of age. Typically, by the time a child under the age of five is freed for adoption, the adoption finalization can take place within 60-90 days. The state also has quarterly calls that provide updates on children who are in the process of TPR and adoption. This process is known as Rapid Permanency Supports (RPSs).

- ***Parent-Child Visitation-*** Caseworker visits to families are essential to engaging families and assessing safety and well-being. It is the policy of MDCPS that all families, with whom the agency is engaged, be seen at a minimum twice a month. A successful, purposeful visit

ensures a worker develops a connection with a parent/guardian/child, identifies the parent/guardian/child's needs and engages each family member in case planning decisions. During contacts with parent(s)/guardian, the worker should assess and document progress on case plans, address the safety and well-being of all children involved and problem-solve situations that are identified.

- ***Safety and Risk Assessment and Child and Family Assessments***-The Safety and Risk Assessment is completed during all open investigations. This tool is used to help assess the safety and risk of children and to determine if ongoing services are needed with the family. If it is determined that ongoing services are needed, an In-Home services case is to be opened or appropriate referrals are made for the identified services. When an ongoing service case is opened, the Child and Family Assessments (CFA) are completed. This tool helps to identify areas to be addressed within the family to mitigate harm and/or risk factors and is listed as tasks/goals in the Family Service Plan (FSP). Together the CFA's and FSP's are jointly developed with the family, within 45 days of case opening, and updated every 90 days thereafter as long as the case remains open.
- ***Health and Developmental Screenings***- Children entering foster care receive an EPSDT or other comprehensive medical exam within 30 days of entering foster care. EPSDT is Early and Periodic Screening, Diagnostic, and Treatment (EPSDT). The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services. EPSDT is:
 - **Early:** Assessing and identifying problems early
 - **Periodic:** Checking children's health at periodic, age-appropriate intervals
 - **Screening:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
 - **Diagnostic:** Performing diagnostic tests to follow up when a risk is identified, and
 - **Treatment:** Control, correct or reduce health problems found
- ***Family, Preservation, Family Support and Family Reunification***- in-CIRCLE is an intensive, home and community-based family preservation, reunification and support services program for families with children who are at risk of out-of-home placement. It was designed and implemented to help break the cycle of family dysfunction by strengthening families, keeping children safe, and reducing foster care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families. The target population for this program: (1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option.

2020–2024 Mississippi Child and Family Services Plan

(2) Families with pregnant mothers who were at high risk of the child being removed due to substance use issues once the child was born.

Pregnant mothers are being served through the Program; as of October 1, 2018; however, the referral process has been revised to include those mothers who do not have other children in the home and methods to engage these families as well. Referrals to the program may come from the court system or MDCPS staff who identified the family and child(ren) as appropriate for and in need of program services. MDCPS currently have two staff serving as in-CIRCLE Program Coordinators, one for the northern part of the state and one for the southern part of the state.

- ***Maternal, Infant, and Early Childhood Home Visiting*** – MDHS, Division of Early Childhood Care and Development (DECCD) receives the Maternal Infant and Early Childhood Home Visiting (MIECHV) Grant. This Grant funds the Healthy Families Mississippi program. This is a voluntary comprehensive home visiting support program that provides family support workers to assist families by linking them to the following community services and resources: child development, nutrition, financial and safety education, and referrals for family support services. Healthy Families Mississippi serves pregnant mothers or families with children three (3) months or younger who are low income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration. Also, Healthy Families Mississippi has implemented the Healthy Families America home visiting model and the Partners for a Healthy Baby parenting curriculum. Healthy Families also serve mothers that are referred by the Comprehensive Addiction and Recovery Act (CARA) program. All services are provided free of charge. The program serves families in Claiborne, Coahoma, Copiah, Holmes, Humphreys, Issaquena, Jefferson, Neshoba, Sunflower, Sharkey, Tallahatchie, Tunica, Washington and Wilkinson counties. MDCPS continues to serve as a representative on the Mississippi Home Visiting Partnership Advisory Group. Due to the limited counties that are served by Healthy Families, enrollment to Healthy Families have been very limited and only three (3) families have been served.
- ***Project Care and Families Strengthening Families***-Starkville Oktibbeha School District Family Centered Programs has two (2) contractual agreements with MDCPS. These agreements consist of Project Care which is funded by the state’s CBCAP Grant and Families Strengthening Families which is funded by the Children’s Trust Fund. Project Care provides child abuse and neglect prevention services to increase protective factors that include parental resilience, knowledge of parenting, social connections, concrete supports, and social and emotional competence in children for Oktibbeha County families. These services are administered through a two-tiered program focusing on parental educational and support services. Universal services include alerting the public about child abuse and neglect prevention to include identifying and reporting child abuse and neglect.
- ***Emerson Family Resource Center activities*** -The Starkville Oktibbeha Consolidated School District sub-grantee through the Community Based Child Abuse Prevention Grant (CBCAP) provides services through their Emerson Family Resource Center activities. The program used the Active Parenting curriculum to provide parent education on a weekly basis for parents, grandparents, caregivers, and future parents. Temporary respite services

are provided Monday through Thursday for children eight (8) weeks through five (5) years old to allow parents time for doctor’s appointments, grocery shopping, adult education, job interviews, training, etc. Staff administers a home visiting program for families with pregnant mothers or families with newborn children. The program provides for support services and parenting education through the Nurturing Parenting curriculum. In addition, education on child development, breastfeeding and infant safe sleep education is provided. Support Services in the way of case management and support groups are also provided to families and parents in need of support.

- ***Infant Safe Sleep-*** Beginning in February 2018, the MDCPS Prevention Unit began an Infant Safe Sleep Campaign Initiative with the distribution of prevention gift packages. This campaign is available to community programs that serves families with expectant or post-partum mothers in high risk categories such as substance abusing mothers, low-income households, teen parents, infants with disabilities, and other high-risk groups. The safe sleep gift package includes a “This Side Up” onesie educating on the suggested sleeping position, a baby wipe case noting the ABC’s of safe sleep, plastic child abuse & neglect/MS Child Abuse reporting hotline bags, a reusable bandage case, and other educational material. During engagement with participants, the program representative reviews the safe sleep brochure and video produced by the National Institutes of Health’s (NIH) Safe to Sleep® Campaign with the parent and then ensures the parent completes the checklist form. Once complete, the program representative provides the gift package to the mother/caregiver. The following providers have partnered with MDCPS in this campaign; Starkville Oktibbeha Consolidated School District, Fairland Treatment Center, Healthy Families Mississippi, Vicksburg Family Development Services, and Southern Christian Services.

Additionally, the Prevention Unit in partnership with Mississippi SIDS and Infant Safety Alliance offers a statewide program for Infant Safe Sleep Practices. The program includes Media Campaigns, direct training and education on safe sleep practices and the provision of Infant Safe Sleep items to new parents or infants. The Infant Safe Sleep Initiative Prevention Program is covered by the Children’s Trust Fund of Mississippi. The effective start date of the program was on June 1, 2018 and it will end on April 30, 2020.

- ***IDEA (Individuals with Disabilities Act)*** - Individuals with Disabilities Education Act (IDEA), seeks to ensure services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities. Infants and toddlers with disabilities (birth-2 y/o) and their families receive early intervention services under IDEA Part C. Children and youth (ages 3-21) receive special education and related services under IDEA Part B.
- ***Comprehensive Addiction Recovery Act (CARA) referral services*** – As defined in the program instruction, MDCPS is in compliance with the federal requirements for CARA. The agency receives and accepts referrals from medical staff regarding infants born and testing positive for substance use by their mothers. The calls are received by MCI (Mississippi Centralized Intake) and in addition to an ANE screening, a CARA screening is completed to inform if the criteria are met for a CARA referral versus an ANE referral.

2020–2024 Mississippi Child and Family Services Plan

The Office of Therapeutic and Prevention Services staff will receive MACWIS tickler notification when a referral is determined to be a CARA intake and then reviews and screens the referral to an appropriate collaborating partner for services. MDCPS therapeutic and prevention services staff works, through Memorandum of Understandings (MOUs), with the Department of Mental Health’s bureau of Alcohol and Drug Services, MS State Department of Health (MSDH), Families First of MS, and Healthy Families of MS to refer children and their caregivers for appropriate CARA related services to include a single or combination of addiction services (in and our patient), home visiting services, and healthy parenting learning opportunities.

- ***Professional development to foster and adoptive parents regarding the care of children zero (0) to five (5)***- The state requires its foster and adoptive parents to complete pre-service training prior to being licensed, and regular ongoing training on an annual basis. Currently, MDCPS is contracting with two providers to offer pre-service training to its foster and adoptive parents. MDCPS collaborates with Family Resource Center of North Mississippi (FRC) who provides the training in North Mississippi, and Mississippi Community Education Center (MCEC) who provides the training in Central and South Mississippi. Training timeframes consists of three (3) sessions per quarter per region. Training topics include the following:
 - Characteristics of Children Served
 - Separation and Attachment
 - Developmental Stages
 - Behavior Management
 - Adoption Issues
 - Blood Borne Pathogens
 - Child Safety Course
 - First Aid/CPR
 - Travel and Finance

F. Efforts to Track and Prevent Child Maltreatment Deaths

Mississippi Child Death Review Panel- Mississippi law creates the Mississippi “Child Death Review Panel, whose primary purpose is to foster the reduction of infant and child mortality and morbidity in Mississippi and to improve the health status of infants and children. The panel’s membership consists of “one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General’s office, the State Sheriff’s Association, the Mississippi Police Chiefs Association, MDCPS, CAC, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children’s Safe Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal’s office. The panel is tasked with creating a report for the Mississippi Legislature outlining “appropriate recommendations to the Legislature on how to most effectively direct state resources to decrease infant and child deaths in Mississippi through case review. The CDRP aspires to:

- Identify factors that put children at risk of injury of death
- Share information among agencies that serve children and families
- Improve local investigations of unexpected child deaths

2020–2024 Mississippi Child and Family Services Plan

- Identify and fill gaps in existing service systems
- Reveal trends in unexpected child injury and death
- Educate the public about child injury and death prevention strategies

The link to the MS State Department of Health website where CDRP annual reports are located is: https://msdh.ms.gov/msdhsite/_static/31,0,392,63.html

G. Promoting Safe and Stable Families (PSSF) (Title IV-B, subpart 2)

Listed below are services available for children and families who meet the criteria for the following services:

- Family Preservation
- Family Reunification
- Adoption Promotion and Support Services

1. Family Preservation, and Family Reunification Services

Beginning October 1, 2017, CFSSP transitioned to the in-CIRCLE Family Support Services Program. Youth Villages and Canopy were contracted to provide services for this program. However, only Youth Villages provides services funded by PSSF funds. Canopy Children’s Solutions utilizes state general funds to provide services. Both vendors provide Family Preservation Services as defined in “Title IV-B, subpart 2 – Promoting Safe and Stable Families” regarding pre-placement preventative services designed to help children at risk of foster care placement remain safely with their families. However, the expanded definition of Reunification Services within the new in-CIRCLE program and the blended funding provided to each vendor offered different definitions for each vendor, but both fit within the PSSF definition structure. Canopy’s definition of Reunification Services and those cases they serve meet both the Time-Limited Family Reunification Services definition and the Family Preservation Services definition under PSSF of service programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement. There was no 15-month time limit as in the definition required to meet criteria under the definition for Family Preservation Services and Time Limited Family Reunification Services. No Family Support Services were being provided by either vendor nor under PSSF through the in-CIRCLE program.

The in-CIRCLE initiative is an intensive, home and community-based family preservation, reunification and support services program for families with children who are at risk of out-of-home placement. It was designed and implemented to help break the cycle of family dysfunction by strengthening families, keeping children safe, and reducing foster care and other forms of out-of-home placements. The primary goal of the program is to remove the risk of harm to the child rather than removing the child by (1) reducing unnecessary out-of-home placements, (2) preventing and/or reducing child abuse and neglect, (3) improving family functioning, (4) enhancing parenting skills, (5) increasing access to social and formal and informal concrete supports, (6) addressing mental health and substance use issues, (7) reducing child behavior problems, and (8) safely reunifying families.

The target population for this program: (1) Families with children birth to 18 who were under the care and jurisdiction of MDCPS, who were at-risk of being removed from the family and placed in foster care, group care, psychiatric hospitals, or juvenile justice facilities, or who had been removed and for whom reunification was an appropriate option; (2) Families with pregnant mothers who were at high risk of the child being removed due to substance abuse issues once the child was born. Pregnant mothers are also being served through the program. As of October 1, 2018, however, the referral process was revised to include those mothers who do not have other children in the home and now incorporates methods to engage these families as well.

Referrals to the program continue to come from the court system or MDCPS staff who identify the family and child(ren) as appropriate for and in need of program services. MDCPS currently has two staff serving as in-CIRCLE Program Coordinators, one for the northern part of the state and one for the southern part of the state. Previously, a Division Director provided oversight to the two staff coordinators over the program. This position is currently vacant, and interviews are being held to fill this position. In the interim, the two Coordinators report directly to the Bureau Director on matters related to in-CIRCLE. The duties of the two (2) program coordinators include:

- Review referrals from MDCPS, Courts, and Judges' staff to determine eligibility for in-CIRCLE by reviewing the online form (Smartsheet), attachments, etc., and reviewing the case in MACWIS
- Assess families for alternative/additional services
- Review current case files to determine if cases are handled appropriately in MACWIS
- Assist with drafting updated policy
- Meet with the in-CIRCLE contract staff; attend home visits as needed
- Provide technical assistance/training as needed
- Revise packet for staff on the in-CIRCLE referral process as needed

The in-CIRCLE Coordinators are responsible for managing through tracking and assigning referrals, maintaining programmatic data, correcting and requesting any missing documentation from the providers through Smartsheet. Smartsheet is a web-based software service application that is used for collaborating with providers to manage the in-Circle program. Information is also assessed and compiled from Smartsheet along with the caseload data from the states' two contractual providers to generate weekly and monthly reports to senior and executive leadership for review and feedback. The coordinator is also responsible for reviewing child fatality reports to determine if they had received in-CIRCLE services. The referral process for the In-Circle program consists of the following procedures:

- In-Circle referrals are submitted through Smartsheet. Referral sources completes the information on the web-based form and uploaded in an in-CIRCLE Participation Form. Smartsheet provides a secure method of distribution of referrals to the providers. All providers have access to their specific referrals via a secure email and password protected process through Smartsheet.
- Applications are reviewed for suitability for the program by the in-state coordinators and then forwarded to providers for consideration for services. Once a valid referral

is made, the family is visited by program staff within 48 hours. If deemed an emergency, the family is visited as soon as possible, but within 24 hours. Once a Provider receives the referral, attempts are made to contact the family in order to set a schedule of service delivery. If after contact are made and it is deemed that the family is not in need of the intensity of services provided by the in-CIRCLE program, Providers worked with MDCPS and the family to make a more appropriate referral to a community resource that would better suit the needs of the family. Some alternative referrals include referrals to MYPAC (Mississippi Youth Programs Around the Clock) services, Families First for Mississippi Centers, local mental health professionals, and community mental health or substance use disorders treatment facilities.

- **Assessment Phase-** During the initial visit, any immediate crisis will be diffused, and the family functioning assessment process began. The Program worker(s) assess family functioning and develop an assessment report within 3 working days of referral. Once the family functioning assessment is completed, a Family Service Plan (FSP) is developed with and for the family within seven (7) working days of referral. During this assessment, however, any needed crisis services deemed necessary to protect the child(ren) is to be provided by appropriately licensed and/or credentialed program staff. Once completed, a copy of the family functioning assessment is submitted to MDCPS. A Family Service Plan (FSP) is developed for each family and includes at a minimum the following:
 - Family outcome goals
 - Strategies and procedures for achieving the goals
 - Specific therapeutic, social, and psychological services to be delivered, including intensity, provider(s), tenure, etc.
 - Specific parenting, social, employment, educational, home economic, and other identified concrete supports to be provided, including method for acquiring, provided by whom, intensity, etc.
 - Responsibility of parties
 - Methods for measuring impact of each service and support, as well as progress toward overall goal
 - Timeframe for completion-once completed, a copy of the FSP is submitted to the MDCPS.

- **Program Components and Strategies-** The primary intervention components of the program is engaging and motivating family members, conducting holistic, functional assessments, developing outcome-based goals, using evidence-based practices and interventions, teaching skills to facilitate behavioral change, and developing and enhancing ongoing community supports and resources. The core strategies to be utilized are:
 - **Crisis Management** – program staff are to intervene as soon as possible (within 24 hours of referral) if family is deemed to be in crisis
 - **Accessibility** – Services are provided in the family’s home and community at times convenient to families. Appropriate staff are available 24 hours a day, 7 days a week for crisis intervention.

2020–2024 Mississippi Child and Family Services Plan

- ***Flexibility*** – Intervention support strategies and methods are tailored to meet the needs, values, and lifestyles of each family, as well as, to provide a wide range of services/supports, such as meeting basic needs of food, clothing, and shelter, home economics and management, job readiness, parent education, substance abuse issues, medical care, and navigating public services system to individual and family therapy, individual and family case management, and crisis intervention.
- ***Time-limited and low caseload*** – Families receive 8-12 weeks of intensive interventions with 8-10 hours of face-to-face contact per week. Program staff (teams) served a limited number of families at a time so that at least 80-100 hours of services could be provided per family during this period. The family can continue to receive services and supports up to another 12 weeks (period) with reduced intensity if deemed necessary for child safety and family preservation by program staff and MDCPS. Finally, program staff maintain a casual, professional relationship with families in a soft support stage for up to 1 year from time of entering the program to check on from time to time or to receive a call seeking advice or information. Under certain circumstances, a family can be re-referred to a more intense services stage if MDCPS or program staff so recommend for child safety and family preservation.
- ***Family-centered assessments and service planning*** – Assessments are strengths-based and family-focused. Plans are individualized with measurable goals, developed collaboratively with the family, and in sync with the MDCPS plan for the family.
- ***Research-based practices*** – Program staff use interventions, such as motivational interviewing, behavioral parent training, cognitive-behavior therapy strategies, wraparound, and relapse prevention strategies. Family members are taught a variety of skills, including child behavior management, effective discipline, positive behavioral supports, communication skills, problem-solving skills, mood management skills, safety planning, and routine daily planning.
- ***Community engagement and resource building*** – Appropriate program staff encourage and facilitate the family’s involvement and engagement in the community for continued relationships and supports, and help families assess their formal and informal support system, develop and enhance ongoing resources needed to facilitate and maintain change after program is concluded.
- ***Collaboration with Families First Programs*** – Where available and appropriate, program staff utilize the family-supporting services provided through the Families First of Mississippi Centers, or similar entities, throughout the state.
- ***Termination of Program Services and Supports*** -- When the family is deemed ready to function safely on its own, based on family-functioning evaluation scores, FSP goal accomplishment, and consensus of MDCPS and program staff, a termination summary report is submitted to MDCPS and to the court, if applicable. This report provides an assessment of the family functioning abilities and outcomes of FSP goals. Peer support for the family is still accessed when possible. When convinced that program efforts are not enough to ensure sufficient family functioning and child safety, program staff submits a

termination report to MDCPS and to the court, if appropriate, providing evidence of a lack of family effort, capacity, and/or willingness to implement the elements of the FSP which may result in termination of parental rights.

Due to the high volume of referrals in Region I South and Region 3 South, there is waiting list managed by the two state program coordinators to provide for expeditious entry into the program. Both contract providers are also adding response teams/staff to reduce the wait list.

2. *Adoption Promotion and Support Services*

Permanency Support Services (PSS) responsibilities include certifying adoption assistance for children who are legally free for adoption, preparing legal documentation for adoption finalizations, coordinating adoption related policy changes, and offering guidance to Adoption staff workers in MDCPS' county offices. Effective July 1, 2018, PSS restructured its oversight areas by adding Chafee and Education Training Voucher (ETV) services and reassigning the Foster Care and Licensure Unit to the Office of Licensure, reporting to the Deputy Commissioner for Child Safety. Adoption staff workers assigned to county offices are supervised by two (2) Bureau Directors, East and West. These staff are tasked with identifying and licensing adoptive families, preparing legally free children and youth for adoption, and other duties necessary to finalize adoptions for Mississippi's children in-care. The PSS/Adoption Unit and adoption staff in the county work together to achieve timely permanency for Mississippi's children. Permanency Support Services includes:

- Adoption
- Termination of Parental Rights (TPR)
- Chafee and Education Training Voucher Services (ETV)
- Adoptive Parent Recruitment

Each of the 14 MDCPS regions have Licensure Units and Adoption Units composed of specialists and supervisors who focus on the recruitment/retention of foster and adoptive homes at the county level. Both units work cooperatively to provide recruitment, pre-service training, in-service training, and home studies to license foster/adoptive homes statewide. Adoption Specialists also support all children/youth in care whose permanent plan includes adoption.

3. *Recruitment of Adoptive Families*

MDCPS focuses its adoptive parent recruitment through its Heart Gallery promotions – both in digital format on the agency website and various social media platforms and in the physical photo display featured year-round at various locations and special events statewide. MDCPS Heart Gallery's physical photographic display includes professional portraits of children freed for adoption as well as a card rack with each child's photo card and biography. The display travels across the state, with special event showings at public buildings, churches and civic locations. Most showings extend from a week to two weeks in duration. The Heart Gallery is scheduled through the Recruitment Manager who transports and sets up the display for the organizations. Marketing and advertising efforts accompany each showing.

Professional photographers from across Mississippi donate their services for a photo shoot to create professional portraits of every child featured in the Heart Gallery promotion. In addition to the framed physical portraits in the traveling display, the pictures are used for the online Heart Gallery website and Adoptuskids.org. Children’s pictures are also used on their biography cards and will be featured throughout the year in a series of a newspaper features distributed through the Mississippi Press Association to all state weekly and daily newspapers and magazines. MDCPS partners with Adoptuskids.org to list children who are legally free and available for adoption to their nationally promoted website.

MDCPS relies heavily on social media platforms such as Facebook to reach a broader audience. MDCPS features a Heart Gallery page on the agency website displaying children’s portraits and biographical information as well as upcoming events for the Heart Gallery display. Both the website and the Heart Gallery Facebook page include contact information for questions regarding foster/adoption.

Interested individuals are encouraged to inquire about any featured child. The Recruitment Manager responds to inquiries and, if requested, can instigate a family home study for a potential match. Once the home study is received, the Recruitment Manager forwards the home study to the child’s Adoption Specialist and Adoption Supervisor for review. Adopt US Kids utilizes a Resource Tracking Tool for unlicensed resource families to provide their personal information and submit via email to MDCPS through adoptms.kids@mdcps.ms.gov. The Recruitment Manager responds to those inquiries as well and informs the family on steps to becoming a resource parent.

Recruitment results continue to escalate. In SFY 2018, MDCPS increased the number of adoptions finalized to 647, compared to 302 in the previous year. In SFY 2019, the agency anticipates finalization of more than 700 adoptions. The agency attributes this success to the Rapid Permanency Supports, quarterly TPR/Adoption calls with each region and monthly TPR/adoption staffings with each county office, a streamlined adoption process, and a concerted effort by MDCPS and its community partners. MDCPS received 370 inquiries for children through its MS Heart Gallery this past year and 247 inquiries for children through Adopt US Kids website. Currently, the agency is exploring a means to track the number of cross jurisdictional placements directly resulting from the MS Heart Gallery and Adopt US Kids website.

4. *Support Groups for Foster and Adoptive Families*

During the 2019 APSR timeframe, support groups were coordinated by Southern Christian Services for Children and Youth through the Post Adoption Services contract. MDCPS moved coordination of the support groups in-house on October 1, 2017, to improve the quality and number of the groups. Currently, MDCPS adoption staff and Rescue 100 staff provide support, coordination and serve as liaisons with faith-based organizations and local communities to meet foster and adoptive needs within the foster care system.

A newly created staff position of Foster Parent Coordinator will continue to engage local churches and communities to support foster and adoptive families and focus of developing a statewide network of support groups to increase community awareness about the critical need for foster homes, resources for foster families, birth families and

children in custody. There are currently 39 support groups across the state. Scheduling and notification of support group meetings is done via email and through a monthly Foster Parent newsletter distributed by MDCPS. Licensure, Permanency Support Services, and partnering therapeutic foster care agencies are also notified of the scheduled foster support group meetings. Sign In-sheets that documents participation are also collected and distributed to the licensure staff in each region for follow-up.

5. *Adoption Collaborations*

Permanency Support Services partners with the Office of the MS Attorney General and with the Adoption Clinic at Mississippi College's School of Law to complete TPRs, adoption finalizations and secure new birth certificates for families adopting through MDCPS. The agency also partners with the Mississippi State University to assist the agency's foster and adoptive parents in meeting their training requirements. The partnership offers in-person training to the agency's foster and adoptive parents on a quarterly basis at no cost to the state or the parents.

6. *Rapid Permanency Supports*

Rapid Permanency Supports (RPS) were initiated January 2017 to review children who had been in custody at least two years, in a family-based placement at least one year, and who had a permanent plan of adoption or custody with a relative. RPS were initially implemented in four regions but are now operational statewide. The goal is to identify, address, and eliminate systematic barriers in the various paths to Permanency. The intended outcome for RPS is to move children that enter MDCPS's care towards Permanency on a more timely basis.

When RPS was implemented, the agency focused its efforts on children who had a permanent plan of adoption. The RPS team along with its partners from the Casey Family Programs reviewed several hundred cases in a relatively short amount of time. Barriers that were identified through the RPS process included timely TPR packet submissions, timely adoption after TPR judgment, various issues with youth courts, and limited providers to complete psychological evaluations for the TPR process. MDCPS' Executive team and State Office and Regional, and the Attorney General Office staff worked together to address the barriers identified. In July 2017, the agency implemented a quarterly regional conference call to identify, address, and eliminate barriers in the termination of parental rights and adoption processes using techniques gained through the RPS process. This method consists of having quarterly call that provide updates on children who are in the process of TPR and adoption. These quarterly conference calls consist of the following County and State Level Administrative staff: Regional Directors, Adoptions Directors, Area Social Work Supervisors, Deputy Field Directors, Deputy Director for Field Support Programs, Deputy Director of Field Operations Field Resources and an assigned attorney from the Office of the Attorney General.

Presently, all children who have a permanent plan of adoption are reviewed – a number that has decreased from more than 1,500 in mid-2017 to around 1,200 in mid-2019. An updated list of children with a permanent plan of adoption is run every quarter and provided to regional frontline and adoption staff up to a month in advance. Regional staff gather updates on the cases in preparation for the conference calls. Regions submit their updates by close of business before their respective conference calls, and the information

is reviewed on the calls. Additionally, deadlines are set for task to be completed that maybe preventing cases from moving forward.

These calls have been very effective in that they inevitably foster a level of accountability having all parties at the table. Also, the agency saw a drastic increase in the number of termination of parental rights judgments (SFY 17 = 392, SFY 18 = 605) and adoption finalizations (SFY 17 = 302, SFY 18 = 647). Finally, adoption status meetings are very effective in moving the adoption cases forward. The child’s case worker, adoption worker, and supervisors are present for this meeting. Tasks needing completion are identified and assigned to staff responsible, pertinent information is gathered, and TPR statuses and hearing dates are discussed. The goal of the adoption status meetings is to move the child towards adoption timely by ensuring that barriers are eliminated. This process has been very valuable to case and adoption workers as it is another means of case evaluation.

H. Service Decision-Making process for Family Support Services (45 CFR 1357.15(r))

Please see Section G that identifies how the state addresses the Family Support Services component of the PSSF program. Specific percentages of title IV-B, sub-part 2 funds are identified in the CFS 101-Part 1.

I. Populations at Greatest Risk of Maltreatment (section 432(a)(10) of the Act)

This requirement represents a critical opportunity for states to convene communities and other collaborators to understand where and what services and supports are needed to prevent maltreatment. As outlined in CB’s priorities, easily accessible services located within communities are critical to preventing maltreatment.

MDCPS continues to see the following underlying conditions contributing to abuse or neglect:

- Substance abuse by caregiver
- Untreated mental illness
- Domestic Violence
- Unrelated caregivers in the home
- Unsafe sleep environments
- Lack of a good, personal support system, including single caregivers, caregivers estranged from extended families, or living in environments not conducive to safe care of children, lack of informal, positive role models

Unsafe Sleep Environments

The MDCPS Prevention Unit utilized prevention resources to combat sleep-related risks to children with public awareness and by educating professionals serving families with children of this age. Further efforts consisting of posters and flyers promoting Safe Sleep practices were used regularly throughout the state by MDCPS and collaborative partners to educate the public.

Also, MDCPS collaborates with the Mississippi Child Death Review Team to assess fatalities related to unsafe sleep practices and explored ways to educate medical staff, law enforcement, and the public. Additionally, MDCPS utilizes the Special Investigations Unit to investigate child fatalities to provide consistency and expertise. The investigators in this unit tailor their

2020–2024 Mississippi Child and Family Services Plan

training opportunities to increase knowledge and skill in specialized areas, including fatalities. The Unit collaborates with law enforcement and medical staff to improve these investigations and to inform ways the agency and the public can benefit from the sorrow of these deaths to prevent others from the same. To combat these preventable deaths, MDCPS has introduced an expanded Infant Safe Sleep Initiative (ISSI). The goal is to make infant safe sleep practice a norm in Mississippi through targeted evidenced-based programs and messages tailored toward parents and infant caregivers. The ISSI is a multi-faceted initiative that covers public awareness, education and safe sleep related products. All messages and services are consistent with the American of Pediatrics recommendations for safe infant sleeping.

Beginning in February 2018, the MDCPS Prevention Unit began an Infant Safe Sleep Initiative Prevention Gift Package program. This program was available to community programs that served families with expectant or post-partum mothers in high risk categories such as substance abusing mothers and low-income households. MDCPS is partnering with programs that serve teen parents, women with substance use disorders, infants with disabilities, and other high-risk groups. The safe sleep gift package includes a “This Side Up” onesie, a baby wipe case with the ABC’s of safe sleep on the front, plastic child abuse & neglect/ MS child abuse reporting hotline bags, a reusable bandage case, and educational materials. The program representative is to review the brochure and safe sleep video produced by the National Institutes of Health’s (NIH) Safe to Sleep® Campaign with the parent and ensure the parent completes the checklist form. The program representative then provides the gift package to the mother. The program representative is responsible for submitting the previous month completed checklists to the prevention email by the first of every month. The prevention coordinator keeps track of the program’s data: inventory and checklists. The following providers have partnered with MDCPS: Starkville Oktibbeha Consolidated School District, Fairland Treatment Center, Healthy Families Mississippi, Vicksburg Family Development Services, and Southern Christian Services. These locations represent the highest concentrations of child deaths in Mississippi during the preceding five years.

Mississippi SIDS and Infant Safety Alliance was selected to provide a statewide program for Infant Safe Sleep Practices, which is centered on executing The Infant Safe Sleep Initiative (ISSI) Prevention Program. The program includes media campaigns, direct training and education on safe sleep practices and the provision of Infant Safe Sleep items to new parents or infants. The Infant Safe Sleep Initiative Prevention Program is underwritten by grants from the Children’s Trust Fund of Mississippi. The effective start date of the program was June 1, 2018 and it will end on April 30, 2020. Cathey Files is Chief Executive Officer of Mississippi SIDS and Infant Safety Alliance. Samantha Kalahar is the Director of Programs with the Mississippi SIDS and Infant Safety Alliance. She is responsible for submitting a grant report narrative that contains all the following reports: grant administration and reporting, strategic marketing plan and deliverables, healthcare system outreach and engagement, community outreach and direct service delivery. A narrative report is due on the 10th of every month and must be submitted to the prevention email.

J. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

During the 2020-2024 CFSP, MDCPS intends to use the Monthly Caseworker Visit Formula Grant to support the following initiatives:

- procure and implement an online tool designed for direct feedback from foster parents
- fund vendor services for the Center for the Support of Families (CSF) contractual agreement

1. Online Resource Tool

A MDCPS worker must meet with a foster child, in person, at least twice a month to assess the child’s safety and well-being, service delivery, and achievement of permanency and other service goals. At least one visit per month must occur in the child’s placement. If a child’s permanency goal is reunification, a caseworker must meet with the parent(s) to whom the child is to be reunified at least once a month. The worker must discuss progress made on the family service plan and the child’s well-being. A worker does not have to conduct monthly visits if one of the following exceptions is present:

- The parent(s) reside out-of-state; or
- The parent(s) are incarcerated.

A caseworker must visit foster parents who have one or more foster children residing in their home at least once a month to assess child safety and well-being in the placement and ensure appropriate services are provided. During any 90-day trial home visit, a worker must visit the child in the home at least twice each month.

Recently, MDCPS has been oriented to an online tool designed to allow for direct feedback from foster parents that can support the agency's efforts to improve the quality of caseworker visits. The tool provides resource parents a mechanism to provide real-time feedback about the quality of a visit that has just occurred in their home from a caseworker. Through an online portal, the resource parents can answer a series of scripted questions that identify the degree to which the caseworker successfully addressed pertinent issues during the visit, the quality of the interactions between the caseworker and the foster child and resource parents, and any other issues of concern. This also offers an opportunity for stakeholder involvement in strengthening case practice. The online system then aggregates the data, which can function as a CQI process for identifying specific points of needed improvement in the content, form, and manner of caseworker visits, supporting the identification of needed training or other supports.

2. Vendor Services through Contractual Agreement

The Monthly Caseworker Visit Grant will also be used to fund vendor services for the Center for the Support of Families (CSF) contractual agreement. CSF will continue to work with the state to improve the quality of caseworker visits by assisting the state with the development and implementation of the child welfare practice model and the provisions of the Olivia Y Settlement. Tenets of this model include the following, in part; Practice Model Coaching for Practice Model Implementation and Intensive Supervisory Support. CSF also continues to support the state by participating in regular leadership meetings with MDCPS centered on training and coaching needs, supporting the MDCPS’s Safe at Home mission and plan of work, regional implementation of the

practice model, supporting the professional development needs of MDCPS, and additional support to MDCPS with meeting departmental goals. Services CSF will provide during 2020-2024:

a. Olivia Y. Settlement Provisions

CSF was originally hired in 2009 to assist MDCPS to help address the concerns outlined in the Olivia Y Settlement Agreement. During the 2020-2024 CFSP timeframe, CSF will continue to provide support relating to the agency addressing the 2nd MSA. During this period, CSF and MDCPS leadership will continue to assist regions to comply with performance indicators required by the court settlement. As part of this process, CSF continues to analyze regional performance and provide leadership with observations and suggestions at monthly performance management meetings.

b. Practice Model Learning Cycle

The Mississippi's practice model learning cycle was developed in 2010 and was updated in 2017 to reflect MDCPS's commitment to a trauma-informed practice as a foundation for the agency's Safe at Home practice. The six components of the practice model are Involving Children and Families in Case Planning, Assuring Safety and Managing Risk, Strengths and Needs Assessment, Individualized Case Planning, Mobilizing Services Timely and Preserving and Maintaining Connections. To support the revamped practice model with a trauma focus, CSF developed and implemented the Mississippi Practice Model Learning Cycle which includes preparation activities, multiple virtual learning modules, and structured practice application opportunities. The preparation activities are geared toward regional leadership and supervisors, giving them an overview of the content of the module and how they should introduce and support their staff for meaningful participation in the module. The virtual learning modules included a virtual learning tutorial, akin to a traditional classroom learning environment, and a virtual practice scenario, where users are given the opportunity to practice the key behaviors they have just learned in the module. The structured application sessions for all staff led by CSF coaches, give opportunities to further practice the key behaviors, how to monitor fidelity to those key behaviors, and how the behaviors can be applied in the field. The PMLC includes content on trauma focused child welfare practice within the context of the six Practice Model competencies. For each Practice Model competency, CFS selected key behaviors, practice areas, and fidelity measures to be focused upon during the virtual learning modules and structured practice application sessions. CSF worked with MDCPS to implement the PMLC in 2017 in seven regions, three regions in 2018, and the remaining four regions will complete training by December 2019. Following participation, CSF will continue to support regions in practicing the learned behaviors through coaching activities and reinforced through group coaching and learning labs.

c. Coaching Support

CSF will provide coaching support in all 14 regions throughout the 2020-2024 CFSP timeframe. To provide intensive supervisory support, activities will include a combination of individual mentoring for identified supervisors, group coaching,

aggregate coaching labs for supervisors on topics directly related to meeting the requirements of the 2nd MSA and targeted coaching for individual supervisors identified in collaboration with MDCPS and CSF. Additionally, CSF will continue to provide the regions off site support including routine communication, group coaching via webinar, as well as providing data analysis and other materials as requested to support improvement efforts.

d. Safe at Home Initiative Support

In support of the MDCPS Safe at Home initiative to avoid unnecessary removal of children from their homes and to achieve timely permanency placements for those who must be brought into protective custody/foster care, CSF is working with MDCPS to develop a theory of change by facilitating planning sessions with state office leadership to develop an initial set of core activities for State Office, Regional and Bureau Leadership, and Supervisors. CSF will continue to work with MDCPS leadership to develop staff level responsibilities for each of the five key Safe at Home areas of work: 1) Use of Available Federal Funds and Other Resources, 2) Safety Assessments and Ensuring Services are in Place, 3) In Home and Prevention Services, 4) Partnerships with the Courts and Ensuring Reasonable Efforts, and 5) Promoting Permanency. CSF also helped MDCPS envision a data plan to track implementation of Safe at Home and its impact on children and families in Mississippi, focusing on the work happening within the counties and regions in Mississippi as well as through providers and agencies.

e. Supporting an Annual Statewide Leadership Training Meeting

CSF will continue to support MDCPS by sponsoring the annual statewide leadership training meeting, aimed at improved consistency, promoting best practice, fostering connections and comradery across the state and regions, and promoting the goals and vision of the agency. The themes of previous conferences: Trauma-Informed Practice and Adaptive Leadership (July 21-22, 2015), New Beginnings (June 28-30, 2016), Leading through Change (June 21-23, 2017), Safe at Home (June 6-8, 2018) and Leadership (June 5-7, 2019). CSF assists MDCPS leadership in developing the agendas to support the themes, identifying keynote speakers, structuring breakout sessions, and evaluating feedback from conference participants.

f. Capacity Assessments and Strategic Planning

Through coaching efforts at the beginning of the CFSP timeframe, seven regions were identified as being ready to participate in the Practice Model Learning Cycle, while the remaining seven regions were determined as not ready to participate for a variety of reasons, including inadequate staffing or excessive workloads, as well as poor performance in key indicators. For the seven regions determined not ready for participation, CSF coaches conducted capacity assessments to inform CSF's coaching support for the remainder of 2017 with the goal of these regions being prepared to participate in the PMLC at a future date. The capacity assessments contained information on concerns such as shortage of caseworkers, shortage of supervisors, overdue investigations, backlogs of pending resource family applications without home studies, and need for a regional leadership structure prepared to oversee implementation of the PMLC. All seven of these regions took

part in a planning process based on a Theory of Change approach to prioritize problems to be addressed, identify root causes, and develop strategies to make improvements. CSF developed a template for these regions to use to monitor their progress in key areas, both through data collection and identifying and implementing strategies to address deficiencies. CSF assisted regional leadership monitoring these plans and refining strategies in their assessments, and in 2018, State Office identified the next three regions ready to participate in the PMLC, with the remaining four regions determined ready to participate in 2019. All regions are scheduled to have completed the PMLC by December 2019.

g. Reasonable Efforts Virtual Training

Between February and June 2018, CSF developed a virtual training module on Reasonable Efforts to support one of the agency’s identified priorities. As part of this work, CSF provided technical assistance to MDCPS state leadership to ensure the modules developed were compatible and functioned smoothly with MDCPS’s online Cornerstone application (learning management system). The training, designed with the adult learner in mind, was centered on three modules: Reasonable Efforts to Prevent Removal and Strengthen the Family, Reasonable Efforts to Return the Child Home, and Reasonable Efforts to Achieve Permanency Swiftly. Each module contains five practice scenarios or activities where users are able to practice five key behaviors associated with the module, as well as find additional supporting materials including policy references, resources for workers on the topics of the activities, and resources for supervisors, including staffing note sheets on how to monitor fidelity to the key behaviors. In addition, the training provides additional overall information on reasonable efforts, including the federal and state statutes; why reasonable efforts are important to the Courts, MDCPS, parents and children; how reasonable efforts connects to MDCPS’s Practice Model; general resources and a glossary. CSF also developed one-page guidance for Regional Directors and Supervisors to support and monitor implementation of the Reasonable Efforts Virtual Training. The three-module training was held between July and November 2018, and CSF also provided coaching assistance as requested by regions to understand and use the principles and key behaviors of the Reasonable Efforts modules.

h. Regional Leadership Training

To further support supervisors in 2017, CSF developed, in conjunction with MDCPS, a leadership training centered around four leadership behaviors to be developed among supervisors and leadership at the regional level. The four leadership behaviors were Monitoring Performance, Clarity of Expectations, Providing Feedback, and Building a Team. As part of this effort, CSF developed materials, worked with coaches to prepare them on how to present the leadership behaviors to supervisors and how to reinforce the behaviors in practice. Also, as part of this effort, CSF helped develop relevant job aides.

i. State Office Support

During the CFSP 2020-2024 timeframe, CSF staff will participate in regular monthly face-to-face status update meetings with MDCPS leadership to coordinate

work with MDCPS, discuss training and coaching needs, and to identify needs and monitor progress on Olivia Y and specific project activities, including:

- Working with the MDCPS Continuous Quality Improvement leadership and staff to prioritize areas of focus;
- Working with MDCPS leadership to hear concerns about child welfare services from the Judiciary;
- Assisting with preparation of information to be shared with the Judiciary on current practice and plans moving forward;
- Working with the professional development division as they transition all training activities, including pre-service training, to an in-house operation;
- Assisting MDCPS with its efforts to update the agency CQI plan; and
- Preparation and planning activities for the Safe at Home initiative, helping incorporate goals and objectives into a *day-to-day plan of work and policy upgrades*.

K. Additional Services Information

1. Child Welfare Demonstration Activities

The state does not have an approved child welfare waiver demonstration project under section 1130 of the Act.

2. Adoption and Legal Guardianship Incentive Payments (section 473A of the Act)

The Adoption and Legal Guardianship Incentive Payments program recognizes improved performance in helping children and youth in foster care find permanent homes through adoption and legal guardianship. On July 8, 2015, CB issued ACYF-CB-PI-15-0811 to inform title IV-E agencies of the steps they must take to qualify for payments under the Adoption and Legal Guardianship Incentive Payments program and the procedures that ACF will use in calculating payments for eligible title IV-E agencies. States receiving adoption and legal guardianship incentive awards must spend the funds for services (including post-adoption services) and activities allowable under titles IV-B and title IV-E of the Act.

For the 2020-2024 CFSP timeframe, the Adoption Incentive Payments Program will allow MDCPS to enhance the state’s adoption program in several ways. Funds are used to:

- Provide home study training, materials, and support for all Adoption staff within MDCPS and private child-placing agencies in Mississippi. The state is using two different home study models approved by Public Catalyst, the court monitor in the federal Olivia Y foster care lawsuit. The Non-Relative Home Study format closely aligns with nationwide standards for fostering. The Relative Home Study format is used for homes where a relative is already placed in that home. The state does offer exceptions for a relative wanting to be licensed when they are not yet 21 years of age or not legally divorced or married. The final MDCPS home study models were implemented on July 1, 2018 and are currently in use to-date.
- Hire support staff for the MDCPS state office Adoption Unit. Also, Adoption Incentive Funds will be used to hire support staff for the Permanency Support

2020–2024 Mississippi Child and Family Services Plan

- Services/Adoption Unit to assist with the drastic increase in children achieving permanency through adoption.
- Provide Life Book kits in each MDCPS county office for use with all children entering foster care; Life Book kits will be provided on an ongoing basis to county offices.
 - Fund recruitment activities and adoption awareness events across the state. MDCPS staffs these efforts with a Mississippi Heart Gallery coordinator who manages recruitment services for children who are free for adoption and in need of a permanent home. Children looking for their forever homes are matched with adoptive families who viewed professional photographs and biographical sketches featured on various websites, social media platforms and displayed on the Mississippi Heart Gallery physical exhibit which travels to host locations each month throughout the State of Mississippi.
 - Maintain and expand the Foster Parent Pre-Service Curriculum that enhances the training provided to Foster and Adoptive parents across the state of Mississippi. MDCPS staff and private contractors still utilize this curriculum throughout Mississippi to ensure foster/adoptive parents are prepared to foster and/or adopt. PATH trainings are held in every region of the state throughout the calendar year. MDCPS's Licensure Unit has updated and reformatted the PATH curriculum for foster parent pre-service training into a hybrid in-person and online delivery format. Private contractors continue to provide in-person preservice training for foster parents. Funds are used to continue training contracts with the Family Resource Center of North MS and MS Community Education Center.
 - MDCPS continues to designate a position in the Bureau of Permanency Support Services' Termination of Parental Rights (TPR) Unit to conduct diligent searches for family members throughout the life of every adoption placement case. This position supports the field workers by conducting these searches to locate family members to serve as fosters when children come into the custody and to assist in achieving permanency matches for children who are free for adoption and in need of permanent placement/connections. Diligent searches are currently conducted at the district/regional level. This new process was implemented January 10, 2019. The position previously used to conduct these searches was repurposed to support adoption paperwork processing in the Bureau of Permanency Support Services. Additionally, Adoption Incentive funds were used to fund MDCPS' new online search engine contract for diligent searches – Transunion TLOx.
 - Enhance the state's post-adoption services by identifying and developing foster and adoptive parents as leaders to build stronger support groups linked by a statewide association.
 - Develop a foster and adoptive parent mentoring program where newly licensed foster and adoptive parents are connected to more experienced parents.
 - Provide more training opportunities and easier access to training for both resource parents and MDCPS staff through online training programs such as fosterparentcollege.com. MDCPS has an active contract with Northwest Media/Foster Parent College, an entity providing online training to adoptive parents. The contract's period of performance is December 1, 2018, through November 30, 2019.

- Provide MDCPS staff and resource parents with opportunities to attend adoption-related, permanency-focused training both in-state and out-of-state.
- Expand child-specific recruitment activities such as printing and distributing materials, hosting Heart Gallery events, and working with private adoption agencies to recruit adoptive families for children at-risk of lingering in foster care. MDCPS will continue its targeted recruitment activities by working with private partners to recruit families for children who are harder to place.

3. *Adoption Savings (section 473(a)(8) of the Act)*

Due to the increase in caseloads, the State will be using the funds to expand its adoption assistance team. Additionally, the state will continue to use the Children’s Bureau Method with Actual Amounts as its Adoption Savings Method.

V. Consultation and Coordination Between States and Tribes

MDCPS and the Mississippi Band of Choctaw Indians (MBCI) have continued to achieve the cooperative goals during this reporting period. MDCPS maintained a collaborative relationship with the MBCI. MDCPS continues to assist the MBCI in such areas as joint training, Independent Living services, foster care and adoption services.

The tribes of affiliation, as well as Indian parents, are notified any time MDCPS is involved with a child or family that meets tribal membership requirements. The MBCI is available to assist MDCPS with tribal identification and notification as needed. MDCPS and Choctaw Social Services continue making cooperative efforts to identify potential Native American resource parents. MBCI is notified of any state proceedings involving tribal children and given the opportunity to assume jurisdiction or authority at any point in the proceedings. ICWA posters are placed on the door or near the entrance to the Youth Court courtroom. The poster instructs persons with Native American heritage to let the court know so that their rights under ICWA can be protected. The posters were created by the MBCI to include clearly identifiable Native American designs.

Active case planning is pursued to maintain or reunite Native American families as soon as safely feasible when safety concerns are identified. Choctaw Social Service’s staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act. MDCPS Workers continue to ask any family the following questions to gain knowledge in deciding what is in the best interest of the child, and document the discussion in the narrative section of the Mississippi Automated Child Welfare Information System (MACWIS):

1. Is parent or child of Native American heritage?
2. Is parent eligible for tribal membership?
3. Is parent registered with Native American tribe?
4. Is child eligible for tribal membership?
5. Has child been registered with Native American tribe?
6. Does the family live on tribal land?

The Mississippi Band of Choctaw Indians or any other Native American tribe, to which the child belongs, has the right to accept or deny jurisdiction of the child and to help with placement resources.

2020–2024 Mississippi Child and Family Services Plan

A tribal court may assume jurisdiction over any Native American child whether the child is living on or off a reservation at any time. The tribe is notified of any court hearings involving an Indian child. Notification is provided immediately, by telephone and certified letter, to the tribe when a Choctaw child, or other Indian child, is taken into MDCPS custody. If services are being provided by MDCPS and the child holds membership in a tribe or is eligible for tribal membership the tribe may assume jurisdiction at any point in the service provision process, including the investigation process and foster care services.

The tribal lands of the Mississippi Band of Choctaw Indians are found in eight counties in Mississippi: Neshoba, Attala, Jones, Kemper, Leake, Newton, Scott and Winston. Information about children who are determined to be members of a tribe other than Choctaw is provided to the District Worker, Bureau of Indian Affairs, Eastern Area Office, and Washington, D.C. If the tribe is unknown, MDCPS shall contact the Mississippi Band of Choctaw Indians who is willing to help identify the child's tribe and refer appropriately. (See <http://www.neshoba.org/community/ms-band-choctaw-indians.php>)

Furthermore, a copy of the state's 2015-2019 Final Report, 2020-2024 CFSP, and other state plans will be available on MDCPS's website. The MDCPS website is: <https://www.mdcps.ms.gov/reports/>. Additionally, an electronic copy of the 2015-2019 final report and new five-year plan will be emailed to MBCI Children and Family Services staff by MDCPS Director of Federal Reporting.

Measurement of ICWA Contact

As of December 2012, documentation of the ICWA contact questions became a required step in completing the Family Service Plans located in MACWIS. The FSP is developed and submitted to the supervisor within thirty (30) calendar days of the custody date, unless the court determines otherwise. This process ensures ICWA contact is made in every case. MDCPS will look to continue to improve its data collection within the development of its Comprehensive Child Welfare Information System in order to assess ongoing compliance with ICWA. Consultation with tribes will continue to address the following:

- Notification of Indian parents and tribes of state proceedings involving Indian children and their right to intervene;
- Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes;
- Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption; and
- Tribal right to intervene in state proceedings, or transfer proceedings to the jurisdiction of the tribe.

MDCPS has and will continue to receive reports of abuse/neglect regarding Native American children whether they live on or off tribal lands. Should Mississippi Centralized Intake (MCI) receive such a report, a determination shall be made as to whether:

- The child is a member of a Native American Tribe and falls under the purview of ICWA;
- The child resides on designated tribal lands where an Indian tribe has jurisdiction.

If a child is identified at intake as a member of the Choctaw tribe or another Native American tribe and lives on tribal land, an MCI Worker sends the report to the county where the child resides. The County of Responsibility Intake Supervisor notifies the Mississippi Band of Choctaw Indians or any other tribal court and provides them with the allegations and all identifying information. If they do

2020–2024 Mississippi Child and Family Services Plan

not wish to retain jurisdiction and request the county to investigate the allegations, the county will follow normal investigative procedures.

Annual ICWA Conferences

The Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, the Attorney General's Office at Choctaw, Mississippi Department of Child Protection Services and the Administrative Office of Courts, with the assistance of the National Resource Centers for the Tribe and for Legal and Judicial Issues, as well as the National Council of Juvenile and Family Court Judges and Casey Family Programs, developed the First through the Eighth Annual Indian Child Welfare Conferences held in August 2011-2018, to promote cultural awareness, understanding and implementation of the Indian Child Welfare Act. MDCPS and MBCI made great progress in achieving the cooperative goals during the reporting period and continue with a collaborative relationship in 2019. MDCPS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services. Choctaw Social Service's staff attended trainings on MDCPS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. MDCPS staff participated in tribal training on the Adam Walsh Act.

The tribes of affiliation, as well as Indian parents, are notified any time MDCPS is involved with a child or family that meets tribal membership requirements. The MBCI is available to assist MDCPS with tribal identification and notification as needed. MDCPS and Choctaw Social Services made cooperative efforts to identify potential Native American resource parents. MBCI is notified of any state proceedings involving tribal children and given the opportunity to assume jurisdiction or authority at any point in the proceedings. In March 2014, ICWA posters were mailed to youth court judges, referees and chancellors requesting that the posters be placed on the door or near the entrance to the courtroom. The posters remain in Mississippi Youth Court and instruct persons with Native American heritage to let the court know so that their rights under ICWA can be protected. Active case planning is pursued to maintain or reunite Native American families as soon as safely feasible when safety concerns are identified.

MBCI Chief Justice Kevin Briscoe (formerly Senior Youth Court Judge) and Youth Court Judge Holly Peters are actively involved with MDCPS. In 2019, both were appointed to the Mississippi Commission on Children's Justice. The Administrative Office of Courts, MDCPS and the Tribe collaborated to develop Indian Child Welfare Act (ICWA) training in 2011-2019. The next upcoming training is scheduled for August 13, 2019 on the MBCI Reservation. ICWA training is included in the Child Welfare Professional Development curriculum and new curriculum being developed that is required for all new MDCPS social workers and support staff. In addition, the State of Mississippi is in the process of improving collaboration with the MBCI Social Services in coordinating protective service cases related to children of Choctaw families who are not covered or eligible for services through the Mississippi Band of Choctaws or their Social Services.

MOU Between MBCI and MDCPS

Following the first ICWA conference on June 22, 2011, negotiations reopened toward a Memorandum of Understanding between the MBCI and MDCPS. Representatives from the MBCI judiciary, Tribal Attorney General’s Office and MDCPS drafted the Memorandum and presented it to the Tribal Counsel April 10, 2012. The MOU was signed October 25, 2012 and remains in force as of 2019. The objectives of the MBCI and MDCPS are to promote the safety and proper placement of Choctaw children. The MOU sets forth the respective duties for cases involving Choctaw children as described below:

MBCI agrees to respond to any allegation of abuse or neglect within the Reservation; determine whether the child is an “Indian child” subject to the authority of MBCI; to assist with placement of Choctaw children with Choctaw families; to aid the State in identifying Choctaw families and other tribal families living off-Reservation who may be eligible to serve as State “MDCPS Resource Families”; to establish procedures to assist all State caseworkers when conducting monthly in-home assessments of Choctaw children on-Reservation; to jointly provide training once a year related to Choctaw culture and established protocols; to testify in State court proceedings involving Choctaw children living off-Reservation, whether or not they have assumed authority over the child; to report criminal charges in the appropriate jurisdiction if MBCI is the investigating agency; to accompany MDCPS workers when visiting Choctaw children on-Reservation.

MDCPS agrees to respond to any allegation of abuse or neglect, including families of Choctaw heritage; to determine if a child is an “Indian child” and contact MBCI immediately so they can assume authority; to jointly train annually these protocols; to testify in Tribal Court proceedings involving Choctaw children living on and off-Reservation; to make every effort to place Choctaw children living off-Reservation with Choctaw families; to report criminal charges in the appropriate jurisdiction if they are the investigating agency; to comply with agreed procedure for monthly in-home assessments of Choctaw children on-Reservation; to provide MBCI with the Mississippi Central Intake phone number for all reports of abuse or neglect involving Choctaw children off-reservation; and to accompany Tribal workers, if requested, to visit Choctaw children off-reservation.

VI. John H. Chafee Foster Care Program for Successful Transition to Adulthood

A. Agency Administering Chafee (Section 477(b)(2) of the Act)

MDCPS is the state agency that will administer, supervise, or oversee the Chafee program. All Independent Living Services are presently offered directly by state office staff. Program planning and re-structuring began in January 2018 through a partnership with Mainspring Consulting from Long Island City, New York, Jim Casey from Baltimore, Maryland, and First Place for Youth from Oakland, California. Through this partnership, the Division of Independent Living Services changed its name to Youth Transition Support Services (YTSS). This change refocused the agency to provide individualized supports and resources to youth as they transition out of care. During the 2018 APSR, YTSS functioned under the Office of Field Support Services before transitioning to the Office of Permanency Support Services in June 2018.

B. Description of Program, Design and Delivery

Chafee Independent Living Services helps adolescents acquire basic life skills in their progress from dependency toward self-sufficiency. All youth ages 14-21 have the opportunity participate in Chafee services regardless to the youth's permanent plan. Refusal by the youth to participate is not a valid reason for non-participation. These services are mandatory and not optional for all youth in care who are at least 14 years old or less than 21 years old. Youth in care ages 14 to 21 are eligible to receive Independent Living Services, based on the youth's individual Transitional Living Plan (TLP). The Mississippi Band of Choctaw Indian Tribe youth are eligible for Independent Living Services based on the same criteria for MDCPS youth in care. Youth are eligible for Independent Living Services based upon the following criteria:

- Youth in care, ages 14 until their 21st birthday, are eligible for all independent living services except for the criteria placed on the Education and Training Voucher program;
- Youth who leave custody, ages 18 to their 21st birthday have access to a Transition Navigator and are eligible for community-based referral services until their 21st birthday;
- Youth who enroll in post-secondary education and vocation program are eligible to receive Education and Training Voucher (ETV) services until their 26th birthday or for 60 consecutive months.

To continue improving services and practice to independent living age youth, YTSS expanded its scope of services to include Education Services for all school age youth starting in May 2018. YTSS employ both office based and telecommuter staff. Office based, and telecommuter staff are strategically placed in regions throughout the state. On June 1, 2018, MDCPS officially launched Youth Transition Support Services. Youth Transition Support Services is the home for Independent Living Services Program, Educational Services and Human Trafficking policy and training work.

YTSS staff capacity consists of the following: One (1) Bureau Director, two (2) Division Director II (Director of Field Transition Support Services), Eight (8) Transition Navigators, one (1) Director of Education and five (5) Education Liaisons. Currently, the Education Unit has three (3) Education Liaison positions with two (2) of those positions being vacant. The state is

2020–2024 Mississippi Child and Family Services Plan

aggressively working to fill these vacancies. Administrative and programmatic oversight consists of the following:

- ***YTSS Bureau Director*** - responsible for overseeing the operation of Youth Transitions Support Services. The two Directors of Field Transition Support Services and Director of Education are directly under the Bureau Director's leadership. Other responsibilities include overseeing the Chafee budget, service contact management, policy development and implementation, data analysis for program/service improvement, Modified Settlement Agreement (2nd MSA) reporting, federal reporting, community/provider engagement, and other duties as assigned.
- ***YTSS Director of Field Transition Support Services*** - responsible for overseeing daily operations of the Independent Living Program. Each director supervises four Transition Liaisons. YTSS Field Directors provide training and coaching to Transition Navigators, collect program/service data for review, develop training curricula to improve program practices, work closely with field supervisory staff to assist Transition Navigators in training/coaching caseworkers.
- ***Transition Navigators*** - responsible for ensuring case workers integrate independent living specific services into practice with youth, provide technical assistance around developing youth engagement strategies, offer technical assistance to case managers around completing the Youth Appraisal (the agency's new Youth Assessment tool) and assisting workers with crafting youth-focused family team meeting agendas based on results from the Youth Appraisal. Other duties include providing direct independent living services to youth ages 14-21, completing monthly reporting requirements, attend case manager staff meetings, attend family team meetings, make independent living stipend request, build community resources and make referral to community resources based on a youth's identified needs.
- ***Director of Education*** - responsible for ensuring the agency makes reasonable efforts to address the education needs of all school age children/youth in custody. The Director of Education supervises three (3) Education Liaisons. Other duties include acting as the MDCPS/YTSS Education Point of Contact (POC) to the Mississippi Department of Education and the state's individual school districts, monitor Education Record Reviews (ERR), monitor Custody Placement Reviews (CPR), ensure youth are enrolled in school within seven days of being placed in a foster home or facility, meet Every Student Succeeds Act (ESSA) mandates and provide training and coaching to Education Liaisons.
- ***Education Liaison*** - responsible for assisting case managers with addressing the educational needs of foster youth. Other duties include conducting Education Record Reviews, conducting Custody Placement Reviews, connecting youth to education resources to fit their

identified needs, providing Best Interest Determination (BID) consults to case managers, acting as an education advocate for youth in care and meeting education monthly reporting requirements.

Independent Living Support Services and Stipends

YTSS have made changes to stipends to complement the new program/services.

- ***Life Skills Training Stipend:*** A \$25.00 stipend can be earned for the completion of six (6) Skills Hours. These skills groups are available through the Transition Care Coaches (TCC). The Specialist will document earned skills hours and will notify the COR Worker that the youth has accumulated the required hours. The Worker will submit the request to the Independent Living Coordinator through MACWIS under State Funds. Youth will receive hour for hour credit for skills group participation. This stipend will be issued directly to the youth. Teen parents shall receive six (6) hours for completion of parenting classes.
- ***Teen Advisory Board (TAB) Participation Stipend:*** A \$25.00 stipend can be earned for participation in scheduled TAB activities. These trainings are planned through the Transition Care Coaches (TCC). The Specialist will document satisfactory participation in the training and will notify the COR Worker. The Worker will submit the request through MACWIS under State Funds. This stipend will be issued directly to the youth.
- ***Youth Conference Stipend:*** A youth will receive a \$40.00 cash stipend for successful completion of participation in the annual conference. This stipend will be requested in MACWIS by the COR Worker.
- ***Senior Year Stipend:*** A \$600.00 stipend is available to help defray senior/final year expenses for youth receiving a diploma, GED or a Certificate of Attendance at the close of the school/program year in which the stipend is requested. The youth shall also be a participant in Independent Living Program activities. This stipend should be requested during the youth's senior year, in MACWIS, by the COR Worker under State Funds. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. A statement from the youth's school verifying enrollment, as a senior/final year with anticipated graduation/completion being that same academic/program year, must be filed in the paper case record in the county. Typical senior/final year expenses include, but not limited to, pictures, invitations, cap and gown, prom attire, senior trip expenses. All purchases must be receipted, and all receipts kept in the COR office.
- ***High School Graduation/GED Stipend:*** A \$200.00 Graduation Stipend is available to all youth in custody who receive a high school diploma or successfully completing a GED program. A copy of the diploma or GED Certificate must be filed in the paper case record in the COR office. This stipend can be accessed from the appropriate MACWIS screen. This one-time stipend should be issued to the youth as a graduation gift to spend as the youth wishes. A signed receipt from the youth must be sent to the bookkeeper in the COR.

2020–2024 Mississippi Child and Family Services Plan

- **College Stipend:** A \$600.00 (1st year of college) College Bound Stipend is available to youth in care who plan to attend a post-secondary education program. A \$250.00 College bound stipend can be requested each year thereafter until their senior year to assist youth with initial college registration needs. This stipend is requested through the appropriate MACWIS screens after the COR Worker receives verification that the youth has been accepted in a post-secondary education program. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. All purchases must be receipted, and all receipts kept in the COR office. Allowable purchases are items needed to furnish a residence (on or off campus) such as, but not limited to bedspread, curtains, rugs, refrigerator, microwave, trunk, bookcase, small appliances, computer, furniture items, and books/resource materials.
- **Start-Up Stipend:** A \$1500.00 Start-Up Stipend is available to youth who leave care after turning age sixteen (16) and who have participated in the available Independent Living Program activities. The youth must have been in care for a minimum of six (6) months. This stipend may be requested during the six months prior to release from custody and up to the six months following release from custody. Youth who have been approved for the Independent Living Placement, shall have the option to utilize this one-time stipend upon approval. This stipend must be issued directly to the vendor(s). A reimbursement payment may be issued to an individual/party including the youth in the event a purchase was made and proof of payment was rendered. An itemized receipt must be given to the COR bookkeeper before a check can be issued. All purchases must be receipted, and all receipts kept in the COR office. Acceptable purchases may include any items associated with the establishment of a home such as, but not limited to: dishes, cooking utensils, appliances, linens, furniture, cleaning supplies, curtains, and rugs. The COR Worker should request this one-time stipend through the appropriate MACWIS screens. A youth released from custody at age 17 or older and already has a job may use a portion of this stipend to assist in the purchase or repair of a vehicle, if the vehicle is needed in the youth's job and if the youth already has the minimal essential items needed to live independently. This youth must show proof of having a driver's license and State required liability insurance.
- **Personal Enhancement Stipend:** The Personal Enhancement Stipend is available to youth who need additional financial assistance with secondary educational needs, extracurricular activities, and college prep activities. Education needs are defined as but are not limited to tutoring; GED prep; ACT prep; and/or additional academic opportunities beyond school curricula. Extra-curricular activities include but are not limited to fees for sports; fees for school clubs; participation in other extracurricular activities. College prep activities include but are not limited to housing fees; college/post-secondary education application fees; or college/postsecondary education registration fees. This stipend was developed to fill the financial gaps for youth needing additional funds to participate in school activities and to continue their education beyond high school or GED. The amount of this stipend is based on the need. A maximum of \$500.00 will be allowed per request. Youth are allowed two (2) request per FFY.

2020–2024 Mississippi Child and Family Services Plan

- ***Peer Mentoring Stipend:*** A \$25.00 Peer Mentoring Stipend is available to young people participating as a program peer mentor to younger youth in care. A peer mentor must see their mentee in-person at least twice a month to earn the stipend. Mentors are identified through the Teen Advisory Board. Mentor/mentee interaction happens as a part of Teen Advisory Board activities. This stipend was developed to encourage youth participating in Teen Advisory Board to become mentors.

Youth Involvement in Chafee Planning

MDCPS/YTSS engages the Teen Advisory Board (TAB) in policy changes/updates and in the development of the Chafee plan through monthly meetings and quarterly state level meetings. Each meeting has a specifically crafted agenda that identifies program goal/objectives, service delivery methods, policy, and Chafee plans. Youth are engaged in intense conversation around how to improve YTSS program and services. TAB participants receive a stipend of \$25.00 for participating in scheduled TAB activities. This stipend is intended to offer youth compensation for their time and act as an incentive to participate.

Mississippi Youth Voice is an alumni youth board comprised of former foster youth and operated by First Place for Youth. Mississippi Youth Voice has partnered with the agency to deliver youth engagement training to MDCPS/YTSS staff/agency leadership and participate in federal reviews. The Alumni Board engages in policy changes at the legislative level. Policy change efforts are focused on extending foster care to age 23 and tuition waivers for foster youth at all Mississippi post-secondary institutions. The members of this board volunteer their time and talents to making impactful change to Mississippi's foster care system.

Positive Youth Development (PYD)

Positive Youth Development (PYD) is woven into our assessments, program activities and policy. We strive to meet youth where they are. As part of this effort, the YTSS program contains several outreach programs for youth in the custody of MDCPS. These programs allow young people to participate in activities to gain knowledge and skills related to independence and prepare for transitioning out of care. Youth have the opportunity to participate in Peer-to-Peer mentoring, Life Skill classes (Provided by Families First), Youth Conference, and Teen Advisory Board. MDCPS/YTSS policy mandates that youth age 14 and older actively participate in the development of their ILP, TLP, Family Team Meetings, Youth Appraisal completion/update and court hearings.

NYTD

The Mississippi Department of Child Protection Services began offering independent living services to youth age 14 and up in-house through the newly developed Youth Transition Support Services (YTSS) on June 1, 2018. This allows the agency to improve the outcomes for youth transitioning out of care and broaden the service array available to youth based on individualized needs. NYTD outcomes will directly affect our ability to indicate any gaps in services for youth while in care, during their transition out of care, and once they are out of care by implementing updated policy and procedures identified through the completion of the NYTD survey.

2020–2024 Mississippi Child and Family Services Plan

In collaboration with the MACWIS Data Unit and our federal partners, we were able to identify and remap the following data elements allowing us to capture and report more accurate information on youth receiving Independent Living services:

- Data Element 31: Room and board financial assistance is a payment that is paid for or provided by the state agency for room and board, including rent deposits, utilities and other household start-up expenses.
- Data Element 32: Education Financial Assistance is a payment that is paid for or provided by the State agency for education or training, including allowances to purchase text books, uniforms, computers, and other educational supplies; tuition assistance; payments for educational preparation and support services. This financial assistance also includes vouchers for tuition, vocational education or tuition waiver program paid for or provided by the state agency.

C. Serving Youth Across the State

Youth Transition Support Services (YTSS) office and telecommuter staff are strategically placed in 14 regions throughout the state to ensure youth and MDCPS staff have access to YTSS program and services. On June 1, 2018, MDCPS successfully launched Youth Transition Support Services. YTSS is the home for the Independent Living Services Program, Educational Services, and Human Trafficking policy and training work. As stated, YTSS staff capacity consist of the following: One (1) Bureau Director, two (2) Division Director II (Director of Field Transition Support Services), eight (8) Transition Navigators, one (1) Director of Education and five (5) Education Liaisons. Service Areas consist of the following:

- ***Transition Navigators (TN):*** Region I-North: One (1) TN; Region I-S: One (1) TN; Regions II-East and II-West: One (1) TN; Regions III-North and II-South: One (1) TN; Regions IV-North and IV-South: One (1) TN; Region V-West: One (1) TN; Regions V-East and VI: One (1) TN; and Regions VII-Central, VII-East and VII-West: One (1) TN.
- ***Education Liaisons (EDL):*** Regions II-East, I-North and I-South: One (1) EDL; Regions II-West and III-North: One (1) EDL; Regions III-South, V-East and V-West: One (1) EDL; Regions IV-North and IV-South: One (1) EDL; and Regions VI, VII-Central, VII-East and VII-West: One (1) EDL.

NYTD or Other Data Sources to Address Service Variations

Youth Transition Support Services (YTSS) currently employs the following variety of data sources to identify and address the service variance throughout the state:

- ***Modified Settlement Agreement (MSA) Reporting:*** MSA reporting captures the number/percent of youth participating in the development of their Independent Living Plan (ILP) and Transitional Living Plan (TLP). The MSA reporting tool also captures the number/percent of youth who receive IL related services such as: Employment; Community Resources; Transportation; Communication Skills; Social Development; Youth Law; Money Management; Self-Care; Decision Making; Housing; Relationships; and Daily Living Skills.

- **Mississippi Automated Child Welfare Information System (MACWIS) Reports:** MACWIS captures the ILP, TLP and IL related services received by youth based on their individual ILP or TLP. Other IL related information is captured in the narrative section of MACWIS.
- **Youth Appraisal:** The Youth Appraisal captures information regarding a youth’s education, placement and safety, housing, pregnant and parenting, supportive connections, employment, health and criminal justice involvement. This assessment focuses on a youth’s individual needs. Information collected in the Youth Appraisal can be used to make connections to supports/resources to mitigate a youth’s identified needs.
- **Qlik Data Tool:** Qlik is used to capture data collected in the Youth Appraisal. Qlik disaggregates the data by region, county, age, race and gender. The tool offers additional information such as the number/percent of completed/updated Youth Appraisals and the number/percent of youth who have identified risk factors.
- YTSS provides specific support through training and hands on coaching to counties, regions and workers with lower performance data by deploying Transition Navigators to assist with implementing Independent Living services based on the youth’s needs. The Transition Navigators collaborate with the county staff to develop plans and methods to deliver services using best practices and coaching.

D. Serving Youth of Various Ages and Stages of Achieving Independence (section 477(b)(2)(C) of the Act)

YTSS started using the Youth Appraisal tool to assess and identify needs of all youth ages 14-21 in foster care. The Youth Appraisal was co-developed by MDCPS/YTSS, First Place for Youth and Jim Casey and adopted by MDCPS as the new Independent Living assessment tool. The Youth Appraisal was implemented statewide to case workers on May 15, 2019. The initial assessment will be completed at a youth’s next scheduled Family Team Meeting. Coaching and training to MDCPS field staff consist of YTSS Directors and Transition Navigators offering technical assistance on how to administer the Youth Appraisal, using data from assessments to inform practice, assist case workers in completing Transitional Living Plans (TLP) and youth engagement. Coaching activities with case workers started in June 2018.

MDCPS/YTSS is working to implement internal policies around administering the Youth Appraisal, and the expansion of Education and Training Voucher services. Additionally, there will be work around expanding community partnerships to include representatives from the Mississippi Department of Education, the Institutions of Higher Learning and partners with connections to living wage employment. This partnership will also help to start development of YTSS policy workgroups. The first workgroup will meet in July 2019.

Another objective will be to implement new youth-driven transition planning process. Training focused on youth engagement was made available to case managers in November 2018. Additional face to face regional training to reinforce youth engagement principles started on

2020–2024 Mississippi Child and Family Services Plan

05/01/2019. Currently, we do not have a baseline for the data we plan to collect from the Youth Appraisal. We plan to collect the following baseline data six (6) months post Youth Appraisal rollout:

2020–2024 Mississippi Child and Family Services Plan

<p>Permanency</p>	<ul style="list-style-type: none"> • # & % with a TLP that identifies supportive relationships • # & % with supportive connections who are engaged in the TLP process • # & % discharged before 21 disaggregated by age
<p>Housing</p>	<ul style="list-style-type: none"> • # & % not experiencing homelessness at their 1st NYTD survey post-discharge from foster care (age 19) • # & % who have a TLP identifying stable housing at discharge that has been updated within the last 90 days
<p>Pregnancy Prevention</p>	<ul style="list-style-type: none"> • # & % who have a child (14 – 21) at age 17, 19, 21 • # & % who report having a child on NYTD that report not having another child by the next survey • # & % who exit care who enrolled in Medicaid
<p>Education and Employment</p>	<ul style="list-style-type: none"> • # & % reporting HS diploma at 19 and 21 • # & % reporting GED at 19 and 21 • # & % enrolled in post-secondary education or vocational training • # & % completing post-secondary education or vocational training • # & % accumulating appropriate credits for age/grade level or # & % of young people passing required tests • # & % who report being employed consistently for 6 months and for 12 months • For youth not in school - # & % earning a livable wage • For youth in school, # & % having sufficient income to meet their needs • # & % depositing dollars in a savings account • # & % purchasing an asset

2020–2024 Mississippi Child and Family Services Plan

YTSS aftercare will function as an assessment/community-based program to youth out of care ages 18-21. Transition Navigators will administer the Youth Appraisal to youth seeking aftercare assistance to identify needs and make soft referral recommendations.

Additional Transitional Living Services will be provided to youth aged 17 to 21 years old as they leave MDCPS. Services rendered will assist youth in making a successful transition to adulthood. A successful transition includes the following:

- Maintaining stable and suitable housing;
- Remaining free from legal involvement;
- Participating in an educational/vocational program;
- Developing life skills;
- Building social and financial capital;
- Building community connections; and,
- Connecting to needed community-based resources necessary to pave the path to self-sufficiency.

All eligible youth are encouraged to participate in community-based life skill learning opportunities offered through Families First and other community-based organizations. Youth ages 17-21 will be strongly encouraged to strengthen life skills through participation in life skill classes offered by Families First, and one on one coaching from their Transition Navigator.

The Jim Casey Initiative financial literacy/asset matching (Opportunity Passport Program) is being implemented to encourage youth to obtain bank accounts. The Jim Casey program offers participating youth a series of financial literacy classes and the opportunity to start a checking and savings account with a local financial institution. Youth can participate in this program for two years. After the two years, Jim Casey will match, up to \$5000.00, the amount of money each youth saves. Youth must identify an asset before Jim Casey will match funds. Youth commonly use match funds to purchase a vehicle. Currently six (6) youth have participated and received a match through the Opportunity Passport Program.

Teen Advisory Boards (TAB) continue to engage youth in independent living program and policy changes/updates through monthly regional meetings and quarterly state level meetings. YTSS has eight Teen Advisory Boards in the areas served by Transition Navigators. Advisory board activities are held in a central location to allow participation from other regions served by the Transition Navigator. YTSS hosted the SPEAK UP 2019! Technology Based Entrepreneurial Youth Conference on June 10-13, 2019. The focus of Speak-up Youth Conference 2019 was technology exploration through coding and software design, ABCs of post-secondary education and authentic youth engagement. Furthermore, the use of technology was exercised to offer youth the tools to explore ideas, put their ideas into action, develop a product, and overall help develop resilient, confident youth who will be better equipped for the challenges of today and tomorrow. Participating youth received an Acer tablet/computer with a protective case. MDCPS provided technology-based entrepreneurial services to youth in care aged 15 to 18. A total of 81 youth participated in the 2019 conference.

Tools for Need Assessments and Evaluations for Services

YTSS started using the Youth Appraisal tool to assess and identify needs of all youth ages 14-21 in foster care. The Youth Appraisal was co-developed by MDCPS/YTSS, First Place for Youth and Jim Casey and adopted by MDCPS as the new Independent

Living assessment tool. The Youth Appraisal was implemented statewide to case workers on May 15, 2019. The initial assessment will be completed at a youth's next scheduled Family Team Meeting. Coaching and training to MDCPS field staff consist of YTSS Directors and Transition Navigators offering technical assistance on how to administer the Youth Appraisal, using data from assessments to inform practice, assist case workers in completing Transitional Living Plans (TLP) and youth engagement. Coaching activities with case workers started in June 2018.

MDCPS/YTSS is working to implement internal policies around administering the Youth Appraisal, and the expansion of Education and Training Voucher services. Additionally, there will be work around expanding community partnerships to include representatives from the Mississippi Department of Education, the Institutions of Higher Learning and partners with connections to living wage employment. This partnership will also help to start development of YTSS policy workgroups. The first workgroup will meet in July 2019.

Another objective will be to implement new youth-driven transition planning process. Training focused on youth engagement was made available to case managers in November 2018. Additional face to face regional training to reinforce youth engagement principles started on 05/01/2019. Currently, we do not have a baseline for the data we plan to collect from the Youth Appraisal.

E. Collaboration with Other Private and Public Agencies (Section 477(b)(2)(D) of the Act)

MDCPS continues to collaborate with youth by selecting them to represent their peers in foster care as members of the Teen Advisory Board (TAB). TAB meetings are youth driven and co-facilitated by Transition Navigators. The Mississippi Youth Alumni Board also assists MDCPS/YTSS with program structure and policy development. The Teen Advisory Board and Youth Alumni Board are engaged in the CFCIP, CFSR, NYTD and other related agency efforts through regular scheduled meetings.

As stated previously, the state has shifted its focus to a smaller partnership board that consists of MDCPS/YTSS, First Place for Youth and Jim Casey. Through this collaboration, this partnership has worked together to restructure Independent Living program and services.

The Independent Living program continues to coordinate efforts by collaborating with the Mississippi Department of Rehabilitation Services, Jim Casey Youth Opportunities Initiative, Methodist Children's Home (Transitional Living Placement for youth with special needs) and the Mississippi Integrated Basic Education and Skills (MI-best) program (GED/High School diploma attainment with progression into post-secondary school opportunities). Additionally, Independent Living has collaborated with governmental or other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking.

2020–2024 Mississippi Child and Family Services Plan

Collaboration examples consist of ILP implementing Teen Advisory Board and Youth Alumni Boards to engage government and non-profit agencies to assist in providing needed services to transition age foster youth. Government agencies such as the Mississippi Department of Human Services, Institution of Higher Learning (IHL), Community Colleges, Mental Health, Health and Medicaid are engaged to ensure processes to receive services are clear and manageable for youth transitioning out of custody. Non-profit agencies that focus on education, employment, housing and various needed services are engaged to ensure youth have connections to community-based organizations that can assist them during transition. Participating non-profit agencies are:

- Methodist Children’s Home: Congregate care/ transitional living facilities;
- Catholic Charities (ORR/URM);
- First Place for Youth
- Jim Casey
- Open Arms Health Clinic: Health and counseling services; Free STI testing/treatment; and Services for LGBTQ persons.

Additional Partnerships that Offer Intensive Support

- ***First Place for Youth:*** First Place for Youth, based in Oakland California, is an agency that focused on best practices for transition age youth. First Place has partnered with MDPCS to assist in creating the Youth Transition Support Services program design, youth centered training modules and practice guides for MDCPS workers and building capacity for the Jim Casey Youth Opportunities Initiative.
- ***Jim Casey Youth Opportunities Initiative:*** Jim Casey, based in Baltimore, Maryland, is a youth initiative driven agency that focused on youth development based on brain science research and youth empowerment. The agency has partnered with MDCPS and First Place for Youth to implement Race Equity and Inclusion work, the Opportunity Passport Match Savings program and assist MDCPS with building capacity around education and employment resources.
- ***Mississippi United to End Homelessness (MUTEH):*** MUTEH is a Mississippi based program that offers housing to youth with a mental health diagnosis. MUTEH provided rent free housing along with intensive case management for up to 24 months. Intensive case management includes but is not limited to: connecting youth to education and employment opportunities, assisting youth make manageable transitions into community settings, and assist youth with managing daily life stressors to ease transition difficulties.
- ***Mississippi Integrated Basic Education and Skills Training (Mibest):*** Mibest, a Mississippi based program, quickly teaches students literacy, work, and college-readiness skills so they can move through school and into living wage jobs. Mibest has dedicated staff and funding to youth who have experienced foster care in Mississippi. This partnership allows MDCPS to connect current and former foster youth to a non-traditional education setting that leads to a living wage job.

Collaboration with Other Federal Programs

Unaccompanied Refugee Minor Programs (URM) for Chafee Services and Education and Training Vouchers: MDCPS works closely with unaccompanied refugee minors in the Education and Training Vouchers Program. MDCPS staff works closely with Catholic Charities’ Unaccompanied Refugee Program to ensure that youth are aware of the program and application

process. In 2018-2019, six (6) youth from the unaccompanied refugee minors were awarded Education and Training Vouchers and only one youth received apartment services.

F. Determining Eligibility for Benefits and Services (section 477(b)(2)(E) of the Act)

All youth ages 14-21 have the opportunity participate in Chafee services regardless to the youth’s permanent plan. Refusal by the youth to participate is not a valid reason for non-participation. These services are mandatory and not optional for all youth in care who are at least 14 years old or less than 21 years old. Youth in care ages 14 to 21 are eligible to receive Independent Living Services, based on the youth’s individual Transitional Living Plan (TLP). The Mississippi Band of Choctaw Indian Tribe youth are eligible for Independent Living Services based on the same criteria for MDCPS youth in care. Youth are eligible for Independent Living Services based upon the following criteria:

- Youth in care, ages 14 until their 21st birthday, are eligible for all independent living services except for the criteria placed on the Education and Training Voucher program;
- Youth who leave custody, ages 18 to their 21st birthday have access to a Transition Navigator and are eligible for community-based referral services until their 21st birthday;
- Youth who enroll in post-secondary education and vocation program are eligible to receive Education and Training Voucher (ETV) services until their 26th birthday or for 60 consecutive months.

G. Cooperation in National Evaluations (section 477(b)(2)(F) of the Act)

MDCPS will cooperate in any national evaluations of the effects of the programs in achieving the purposes of Chafee.

H. Chafee Training

YTSS annual activities consist of providing more community awareness of the needs of youth in and out of care by participating in local forums and focus groups that openly express and advocate for their services and resources. YTSS in partnership with former foster youth are co-facilitating regional training with MDCPS field staff. The training is focused on youth engagement, family team meetings for older youth in care and youth rights and responsibilities.

Another annual activity offered by YTSS is providing Independent Living training to MDCPS staff and MDCPS Licensed Resource Parents. These training activities consist of the following: quarterly Independent Living training which made be offered at conferences and foster/resource parent trainings. The training priority has shifted from training resource parents to training direct service workers. State is building capacity with its direct services workers by enhancing the knowledge and expertise in the area of independent living before training stakeholders. MDCPS staff have received the following ILS training through Cornerstone:

2020–2024 Mississippi Child and Family Services Plan

- ***Healing Comes First:*** Healing Comes First addresses the trauma of children/youth who enter foster care.
- ***Permanence:*** Permanence addresses the importance of a youth's need to be connected to family, peers and the community supports.
- ***Successful Connections:*** Successful Connections discusses how MDCPS Workers can support youth in developing, maintaining and preserving connections to family, peers and community supports.
- ***Family Team Meetings:*** Discusses the importance of a youth's involvement in family team meetings and how to structure team meetings for older youth in care.
- ***MDCPS Foster Youth:*** Discusses the rights and responsibilities of youth in foster care.
- ***Population Needs and Services:*** Discusses needs and services provided by Youth Transition Support Services to address the unique individual plans of foster youth ages 14-21.
- ***Adolescent Brain Development:*** Discusses the different stages of adolescent development.
- ***Stable Housing:*** Discusses permanent solutions to affordable and safe housing for youth transitioning out of custody.
- ***Young Parents:*** Discusses the barriers and additional needs of parenting youth.
- ***Transition Planning:*** Discusses how to effectively develop a realistic plan for youth transitioning out of care.
- ***Youth Assessment/Appraisal:*** Guides the development of the transitional living plan and explains how to complete each area of the assessment/appraisal.
- ***Youth Engagement:*** Discusses how to effectively engage youth in all aspects of their case planning.

Module Training workshops will occur throughout the state. All six identified curriculum areas will be covered twice (2) in each region. Module Training workshops are facilitated by Families First Resource Centers around the state. Youth are referred to Families First to strengthen skills the youth, case worker or Transition Navigator identified as a weakness.

I. Education Training Vouchers (ETV) and Educational Services

MDCPS must make all reasonable efforts to ensure continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood when this is in the child's best interests and feasible, and by eliminating the number of school changes the child experiences. Therefore, any child that comes into MDCPS custody or placement changes while in custody, a Best Interest Determination (BID) must take place with the local education agency (LEA)/ district of origin or facility. The custodial agency must notify the LEA within one day that the child has come into care or their placement has changed. All factors should be considered as part of evaluating the appropriateness of the current educational setting, to make a holistic and well-informed determination. In July 2018, a BID form and guide was presented to all MDCPS staff. To further ensure educational stability, our policy dictates that we designate a point of contact (POC) to support and represent each child. At present, the MDCPS COR workers serve as the POC for every compulsory school-aged child on their caseload. Each LEA has a staff member that serves as POC for their school district.

Although the Education Policy and Procedures final copy was released in June 2018, this unit has started creating policy work groups to ensure that our procedures and policy directly correlate

2020–2024 Mississippi Child and Family Services Plan

and are congruent with the ESSA guidelines and 2nd MSA requirements. Our workgroups will consist of local school districts, group homes, and treatment facility personnel and our very own agency staff along with First Place for Youth staff. The Education Liaisons will serve as the facilitators for each work group and have a specific section of the policy to review. Once the recommendations are made by each group, the revisions will be sent to the Executive Team; comprised of Deputy and Bureau Directors of YTSS unit, Education Director, and Mississippi Department of Education (MDE) Bureau Director and/or designee and MDCPS staff attorney for review. The first policy work group will be July 1, 2019.

MDCPS and MDE work in partnership to promote the educational stability for all children in foster care. MDCPS/ MDE Joint Guidance provides clear and concise educational placement procedures to ensure educational stability by outlining the roles and responsibilities of each agency. In accordance with the state policy and procedure, MDCPS and MDE are committed to helping students in foster care remain academically stable while completing courses and advancing to the next grade/level. This partnership has been found to be a strength for both agencies as we work closely together to monitor and maintain as much educational stability for children in care by implementing Every Student Succeed Act. This law was signed, December 10, 2015 and the implementation began in January 2016. The law emphasizes the importance of limited educational disruption of children in foster care. This law has help to improve the awareness of the unique needs of children in foster care by creating and increasing meaningful dialogue specifically focusing on what is in the best interest of the child.

To respond accordingly to the 2nd MSA requirements for Education Services, effective February 1, 2019, several monitoring tools were implemented:

- 8.2a. MDCPS shall review the educational record of each child who enters custody for the purpose of identifying the child’s general and, if applicable, special educational needs and shall document the child’s educational needs within 30 calendar days of his/her entry into foster care.
- 8.2b. MDCPS shall take reasonable steps to ensure that school-age foster children are registered for and attending accredited schools within seven (7) calendar days of initial placement or any placement change, including while placed in shelters or other temporary placements.
- 8.2c. MDCPS shall make all reasonable efforts to ensure the continuity of a child’s educational experience by keeping the child in a familiar or current school and neighborhood, when this is in the child’s best interest and feasible, and by limiting the number of school changes the child experiences.
- 8.2a Education Records Review: EDLs will conduct a weekly teleconference review with COR/ASWS who has the case of child that has come into custody within the last 30 days. Action steps are discussed with the worker and documented in Smart sheet and MACWIS.
- 8.2b.2c. Child Custody Placement Change Report: EDL will review the weekly report that identifies and tracks children/youth that have experienced a placement change. To ensure and safeguard the continuity of the child/youth’s education experience; the EDL will send a follow-up email with proper steps in completing a BID to the COR worker/ASWS and document in MACWIS the date of completion.
- In addition, EDLs can be engaged through the Education Referral Form to assist and support COR Workers with any and all educational needs for children in foster care. In

2020–2024 Mississippi Child and Family Services Plan

July 2018 the updated Education Referral form was presented to all MDCPS via e-bulletin. The form outlines all types of educational needs that a child in care may have.

Youth Transition Support Services (YTSS) is responsible for enrolling, approving and tracking current and former foster youth receiving Educational Training Voucher (ETV) funds. This number may increase or decrease from year to year based on the following factors:

- Youth attending accredited post-secondary educational programs
- Youth's ability to maintain a 2.0 GPA necessary for eligibility
- Youth completing the enrollment process required to receive funds
- Youth who are eligible to receive ETV funds based on the federal guidelines

MDCPS/YTSS policy has been updated to extend eligibility to youth who experienced custody based on the following criteria:

- Youth who have left custody at the age of 16 year or older, and no yet reached 21 years of age;
- Youth who were reunified on or after reaching age 16 and have not yet attained 21 years of age;
- Youth who were adopted on or after reaching age 16 and have not attained 21 years of age; and
- Youth who participated in the ETV Program prior to their 21st birthday.
- Youth participating in the ETV Program prior to their 21st birthday are eligible to continue receiving ETV funds until their 26th birthday or for a maximum of 60 months. A month is calculated at 30 calendar days. The months of enrollment do not have to be consecutive. Failure of a class or semester will still be counted toward use of ETV funds. Youth who have not participated in the ETV program prior to their 21st birthday will not be eligible for ETV funds.

Methodology to Avoid Excessiveness and Duplication

The ETV program provides supplemental resources to meet the cost of attendance in post-secondary educational and vocational programs. The methodology used is based on the requirements given to the youth; he/she must apply for and receive an award letter from the institution they plan to attend, submit a copy of the most current school statement of accounting to include all financial aid they are to receive (tuition/balance). Additional methods used are reviewing the need for the \$5000.00 yearly allotment. The ETV request and approval process as outlined in policy and the yearly balance log track each youth's monthly expenditures. Monthly expenditures include tuition, books, tutorial services, monthly allowances (\$150 on campus and \$300 off campus), school supplies, computer needs (not to exceed \$850.00), child and health care, housing, transportation (not to exceed \$1500.00), and extracurricular activities. See Attachment F-ETV Flow Charts

Coordination with other ETV programs

Educational Liaisons (EDLs) aid and support youth enrolling(ed) in ETV by identifying, advising and connecting them with community resources; e.g. Financial Aid Advisors, Counselors, Get2College, MI Best and other vocational and training programs based on the need and interest of the youth. In addition, youth appraisals are reviewed to help assess and determine appropriate education and training programs as well as other supportive services. As one of the

requirements to enrolling in the ETV program, youth must provide documentation of any and all programs that they are involved with. This is verified through the ETV enrollment and re-enrollment process which is described above.

Methodology for Unduplicated Number of ETV Awards

YTSS maintains an enrollment log for each semester a youth is enrolled in a post-secondary institution. This information kept through the ETV service request and approval process in MACWIS and Smartsheet. Smartsheet captures the following data:

- Number of youth currently enrolled in ETV, the semester they attended, the school/institution, classification, date of birth, county of responsibility, and individual ETV balances.
- Number of requests by youth for additional funds using ETV.
- Line item of allocation of additional funds requested; monthly allowance, books, computer, transportation, supplies, etc.

As outlined in YTSS policy, ETV request and approval process gives specific steps to request funds for youth in and out of custody.

- ***Requesting ETV Funds for Youth in Custody-***The County of Responsibility (COR) worker will enter the ETV request in MACWIS within seven (7) calendar days of receiving the request from the Education Liaison or the youth. MACWIS will send an electronic tickler notice to the COR Area Social Worker Supervisor (ASWS) to review and approve the ETV request in MACWIS. Steps consist of the following:
 - The COR Worker must notify the assigned Educational Liaison via email that ETV funds have been requested.
 - The YTSS Director or their designee will review and approve the ETV request in MACWIS within seven (7) calendar days.
 - The ETV request will go to the COR bookkeeper. The COR bookkeeper will prepare payment for the approved ETV Support Service vendor or youth.
- ***Requesting ETV Funds for a Youth Not in Custody-***
 - A youth out-of-care and eligible for the ETV program must contact their assigned Educational Liaison to request ETV funds.
 - The Educational Liaison must connect with a MDCPS caseworker to complete a case management service in MACWIS and request the appropriate support service for the ETV voucher.

J. Consultation with Tribes (section 477(b)(3)(G))

MDCPS consults with the Mississippi Band of Choctaw Indians (MBCI) about the programs, services and activities to be carried out under the CFIP through written communication. Through meeting with the tribe, the tribe has communicated that there have been no youth to meet Independent Living Services eligibility criteria. Although no youth meet the criteria for Independent Living Services, MDCPS continues its efforts to coordinate program and activities with the tribe. Consistent phone calls, e-mails, and traditional forms of written communication are done to encourage tribal participation. The MDCPS Youth Transition Support Services unit

2020–2024 Mississippi Child and Family Services Plan

invites Choctaw Child Welfare staff to independent living events and program related meetings. When invited, YTSS will attend Choctaw Child welfare trainings and staff meetings to coordinate services for youth in this population. Within Mississippi, Choctaw Child Welfare operates outside of MDCPS as its own functioning agency. Although MBCI functions as a separate entity, programs and services continue to be available to youth in the custody of Choctaw Child Welfare. The tribe is constantly made aware of this through email communication. Normally, all youth who are determined to be members of the Choctaw tribe are fully serviced through their child welfare system without assistance from MDCPS. Additionally, MDCPS has a Memorandum of Understanding (MOU) with Choctaw Child Welfare Services that outlines how the state shall proceed in administering and supervising services provided by MDCPS. This MOU guides the procedures in place for both MDCPS and Choctaw Child Welfare to provide needed services to families and youth. Lastly, there have been no concerns for accessing Chafee services.

VII. Attachments -CFSP Targeted Plans

A. Foster and Adoptive Diligent Recruitment Plan

B. Health Care Oversight and Coordination Plan

C. Disaster Plan

D. Training Plans

E. Organizational Chart

F. ETV Flow Charts