# Tennessee Child and Family Services Review Round 3 Program Improvement Plan—Progress Report

This document provides a template states may use to submit their Program Improvement Plan Progress Reports to the Children's Bureau.

The state should provide the name of the state/territory below and, in the "Reporting Period Date or Range" field, record the date or date range that the Program Improvement Plan (PIP) progress report is submitted to the Children's Bureau. Copy the PIP effective date, end of PIP implementation period, and end of non-overlapping year from the approved PIP and enter these dates in the respective fields below.

State/Territory: Tennessee

Reporting Period Date or Range: October 1, 2020 – March 31, 2021

PIP Effective Date: April 1, 2019

End of PIP Implementation Period: March 31, 2021 End of Non-Overlapping Year: September 30, 2022

# Part One: Strategies/Interventions and Key Activities Report

#### **Goals**

**Instructions:** Copy the goal(s) from the approved PIP, maintaining the same numbering sequence.

Goal 1:

# Strategies/Interventions

**Instructions:** Copy the strategies/intervention(s) from the approved PIP, maintaining the same numbering sequence. Following each strategy/intervention, summarize overall progress, if applicable.

## **Strategy/Intervention 1:**

**Progress:** 

#### **Key Activities**

**Instructions:** Complete the following table. Insert as many tables as required to address all the key activities for each strategy/intervention in the approved PIP. For each reporting period, add the most recent state progress in completing the key activities. If key activities are not completed in accordance with the schedule, or if sufficient progress is not being made, explain the steps the state is taking to address the concerns and ensure improvement is made within the required time frames. In the first

column, insert the name of each key activity. In the second column, insert the target completion date. In the third column, select the status from the options provided. If the status is "Completed," enter the date the activity was completed in the MM/YYYY format. If the status is on or ahead of schedule, select "On/ahead of schedule." If the activity is delayed or behind schedule, select "Behind schedule." A key activity that the state has completed or renegotiated in a prior reporting period is no longer applicable for the most recent progress period. If the activity is no longer applicable, select "No longer applicable." No additional progress notes are needed for activities after they are determined not applicable. In the fourth row of the table, provide a description of the successes, challenges, and next steps. If sufficient progress is not being made, provide an explanation of the steps the state is taking to address the concerns and ensure improvement is made within the required time frames. Include sufficient information to explain the status of each key activity and, as applicable, refer to the relevant section in the Child and Family Services Plan or Annual Progress and Services Report. In the remaining columns, indicate key activities that the state has completed or renegotiated in a prior reporting period as no longer applicable for the most recent progress period. No additional progress notes are needed for such activities once they are determined to be not applicable.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
-	-	<ul> <li>☐ Completed</li> <li>MM/YYYY</li> <li>☐ On/ahead of</li> <li>schedule</li> <li>☐ Behind schedule</li> <li>☐ No longer applicable</li> </ul>	1	<ul><li>☐ Completed</li><li>MM/YYYY</li><li>☐ On/ahead of</li><li>schedule</li><li>☐ Behind schedule</li><li>☐ No longer applicable</li></ul>	-

Goal 1: Ensure children and families receive timely, quality initial and ongoing assessments.

**Strategy 1:** Implement Quality Contacts Initiative. Supervisors provide caseworkers with monthly case specific coaching toward achieving improved global assessment that is integrated in case planning and ongoing assessment. Caseworkers and supervisors participate in ongoing learning and implement small tests of change to improve practice and related documentation over a six-month period.

**Progress:** Progress continues to move forward on this goal. All cohorts have been rolled out and an assessment tool will be designed in collaboration with the Program Evaluation Team prior to completion of the PIP. DCS has seen improvements in quality Caseworker visitation with children and parents since implementation of this project.

Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Implement a robust supervisory learning collaborative that involves education, skill building, and coaching with a focus on quality as an enhancement to the Quality Contacts Initiative for both In-Home, foster care and juvenile justice cases.  a. Develop and implement coaching model and curriculum using the Child Welfare Skills-Based Coaching Model and the Core Steps in Coaching outlined in the Capacity Building Center's Coaching in Child Welfare brief.  b. Conduct a one-day training for frontline workers, Team Leader Supervisors (TLs) and their Team Coordinator supervisors (TCs) in the regions to expand skills through case coaching toward achieving global assessment.  c. Team Leaders and Team Coordinators participate in three supervisory level, face-to-face small group, classroom style coaching sessions in the pilot regions (one every four weeks). Work through coaching on a	Quarter Eight	□ Completed     03/2021     □ On/ahead of         schedule     □ Behind schedule     □ No longer         applicable	All Regions have been fully trained and the collaborative has been completed. Case reviews have been conducted showing positive impact on practice. Results from reviews have been broken down by Region and shared with training which will help inform ongoing boosters and follow up trainings.  Case Recording Documentation Results from Quality Contact Training  1005  728  998  998  998  988  988  778  988  778  988  988  988  788  988	□Completed MM/YYYY □ On/ahead of schedule □ Behind schedule □ No longer applicable	Due to COVID- 19 Quality Contact trainings have moved to virtual classrooms and have worked well. Quality Contacts is on track for completion and all training is now being delivered virtually. The Training Division is working on an optional documentation training at the request of a few Regions that will support the Quality Contacts Collaborative and help staff to appropriately document the practice they are implementing. In addition, the Program Evaluation Division will work with the CQI

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selected case to receive and give coaching. These sessions will focus on caseworker practice regarding safety, permanency and well-being with each family and team member each month.  d. Partner with Vanderbilt University to create an ongoing coaching assessment and readiness evaluation to be conducted at regular intervals throughout the project.  e. Implement supervisory coaching by conducting a deeper dive on one case per caseworker to be tracked throughout the implementation of the model within each specific Region. Develop a portfolio of documentation, including case conference notes, use of the Desk Reference Guide, and case documentation from each worker that demonstrates improvements in caseworker's integration of global assessment during the supervisory coaching sessions two and three. Supervisors will receive feedback on their portfolio throughout the					Division to develop a review process for the project.
sessions. CPSA Supervisors					

Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
will track two cases and CPSI will track three cases.  f. Review on a quarterly basis three cases brought to the TL by the caseworker within the regions each quarter on an ongoing basis following the completion of the implementation phase. Three cases per TL will, in turn, be reviewed by the Team Coordinator. The Regional Administrator will review three cases per Team Coordinator per quarter.  g. Provide supervisory coaching to each caseworker each month between classroom sessions on the cases they are coaching each of the caseworkers on.  h. Conduct a case review (Office of Continuous Quality Improvement) on one case per supervisor from their portfolio to assess for progress during the training period.					
Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Revise Desk Reference     Guides based on feedback     and learning from evaluation	Quarter Two	⊠ Completed 05/2019	This key activity has been completed.	⊠ Completed 05/2019	This was completed in May 2019.

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Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
plan and implement changes through webinars provided to caseworkers and supervisors.		☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable		☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	There has been no further work, and none needed.
Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
3. Revise Quality Contacts Initiative based on learning and feedback from evaluation plan to develop a proposal for implementation.	Quarter Two	<ul> <li>Completed         06/2019</li> <li>On/ahead of         schedule</li> <li>Behind schedule</li> <li>No longer         applicable</li> </ul>	This key activity has been completed. An additional evaluation was completed during quarter eight.  Cohort One Improvements: Davidson – 16% Smoky Mountain – 52% Upper Cumberland – 36%  Cohort Two Improvements: Northeast – 0% Tennessee Valley – 4% Southwest – 28%  Cohort Three Improvements: East – -4%	<ul> <li></li></ul>	There is no further update.

Key Activity	Target Completio n Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
			Northwest – 20% Shelby County – 12%		
			Cohort Four Improvements: Mid-Cumberland – 24% Knox County – 56% South Central – 16%.		
			No improvements were noted in Northeast, however, that region had the highest level of quality visitation case		
			recordings prior to the initiative. Also, East Tennessee showed a decline, however, that decline was based on one Caseworker whose		
			recordings were better prior to intervention. This may have been due to other factors with that Caseworker.		

Key Activity	Target Complet ion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
4. Implement cohort #2 (3 regions) beginning in Quarter Three. The executive leadership team will identify these three regions based on CFSR data, input from the Regions, CFSR schedule, and COA schedule. An email with an overview of the model and implementation will be sent to regional leaders 2 months prior to implementation. One month prior to implementation, a call will be held with regional leaders to allow an opportunity for questions and answers as well as address logistics.	Quarter Three	<ul> <li>Completed         09/2019</li> <li>On/ahead of         schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	This key activity has been completed.	<ul> <li>Completed         09/2019</li> <li>On/ahead         of schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	This step was completed.
Key Activity	Target Complet ion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
5. Implement cohort #3 (3 regions) beginning in Quarter Six. The executive leadership team will identify these three regions based on CFSR data, input from the regions, CFSR schedule, and COA schedule. An email with an overview of the model and implementation will be sent to regional leaders 2 months prior to implementation. One month prior to implementation, a call will be held with regional leaders.	Quarter Six	<ul> <li>Completed         02/2020</li> <li>On/ahead of schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	This key activity has been completed.	Completed 02/2020 On/ahead of schedule Behind schedule No longer applicable	This step was completed, there are no further updates.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
6. Implement cohort #4 (3 regions) beginning in Quarter Eight. The executive leadership team will identify these three regions based on CFSR data, input from the Regions, CFSR schedule, and COA schedule. An email with an overview of the model and implementation will be sent to regional Leaders 2 months prior to implementation. One month prior to implementation, a call will be held with regional leaders to allow an opportunity for questions and answers as well as address logistics.	Quarter Eight	<ul> <li>         ⊠ Completed         3/2021         ☐ On/ahead of         schedule         ☐ Behind         schedule         ☐ No longer         applicable     </li> </ul>	The fourth cohort was completed at the end of January 2021. All make-up sessions have now been completed.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	The last 3 cohorts have rolled out and are scheduled to be completed in January 2021. This step is still on track for completion in January 2021. The sessions are being delivered based on the framework of the Quality Contacts Collaborative.

**Strategy 2:** Implement a statewide Assessment Integration Model for all program areas to ensure quality assessments are incorporated in case planning and service delivery throughout the life of the case.

**Progress:** Implementation of a statewide Assessment Integration model for all program areas has been completed.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Expand a Learning Collaborative statewide that uses data, science implementation, and Transformation, Collaboration,	Quarter One	Completed 07/2019 On/ahead of schedule Behind schedule	Results from the survey have been received and collected. Results were shared in the previous meeting with the CB. Overall, frontline staff and	<ul><li></li></ul>	Implementation of a statewide Assessment Integration model for all program areas has been completed

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Outcomes, and Management (TCOM) principles to support a culture shift in the assessment process; and promote utilization of Child Adolescent Needs and Strengths (CANS) and Family Advocacy Support Tool (FAST) as an Assessment Intervention. This collaborative will be for all program areas and will be considered the foundation and shared vision for all other initiatives addressing our assessment interventions. DCS has implemented the Assessment Integration in the Northwest, Southwest, and Tennessee Valley regions, and the learning collaborative will be implemented in the remaining nine regions by July 2019.  a. Supervisors use coaching sessions and		□ No longer applicable	supervisors are continuing to improve in their use of the CANS/FAST when working with children and family. The assessment consultants integrated the results in the newly updated CANS/FAST recertification training. All case management staff are required to recertify in their applicable assessment each year. This year's training is being conducted via Zoom. Training sessions began in March and are wrapping up in April. Within the training, the use of the assessments to engage and team with the families when scoring and in scoring of the assessments, as well as using the assessment to track needs and successes and implement a plan to address needs are being emphasized.  Currently, there is a new user workgroup made up of assessment consultants and DCS staff also working to update the initial CANS/FAST trainings for all new hires which will also incorporate the	□ No longer applicable	in all twelve regions. Since July 2019, an Assessment Integration Booster session was created to be available to regions to assist with skill and learning retention. This booster has been presented in the Tennessee Valley Region. During the booster there was no difference in staff retention and some participants had reverted back to old habits in their assessment practice. We recently sent out a survey to help us understand where the region sees their strengths and areas of improvement are as they relate to assessment. This is the same survey used pre and post Al rollout. Once all the
the CFTMs as the			information gathered in the survey results.		results are compiled,

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vehicles to drive this change in practice.  b. Supervisors use Motivational Interviewing techniques to reinforce these skills.  c. Holistic assessment approach includes all children and caregivers in the home.			An audit of case files was recently conducted for custodial and non-custodial cases to also gauge assessment practice a year after the completion of the Al learning collaborative training for each region. A sample CANS and FAST cases from cases opened between July 2020 and November 2020 was reviewed. This review was focused on evidence of, Teaming, Planning, Tracking and Implementation within each section of the CANS/FAST. A total of 116 CANS and 80 FAST were reviewed. The assessments categories were rated as a whole. Ratings were 1) No evidence of a need to improve; 2) Evidence of a need to improve; and 3) Significant evidence of a need to improve.		DCS and the COE Assessment Consultants will work to create a targeted booster training to help the region improve in those areas identified as needs.

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2. Implement the below strategies to focus on supervisors' role in	Quarter Three	⊠ Completed 07/2019	The key activity was completed, with no further updates.	⊠ Completed 07/2019	Follow up surveys were sent to Supervisors and

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supporting and coaching staff to use assessment interventions throughout the life of the case.  a. Collaborative Leads (Lead teams consist of two individuals – One DCS and one Vanderbilt Centers of Excellence) will meet with regional leadership prior to launch of the Collaborative to share information about the project and to explain the purpose of the work and importance of the role of regional leadership. Executive Leadership participated in the selection of the pilot counties. Collaborative was developed in partnership with Vanderbilt University and Regional staff. All levels from Regional Leadership to front line staff were involved in the		□ On/ahead of schedule □ Behind schedule □ No longer applicable		□ On/ahead of schedule □ Behind schedule □ No longer applicable	Caseworkers in every region regarding their use of the FAST/CANS. Vanderbilt University Centers of Excellence is doing the analysis of those surveys to determine where the regions are now compared to where they were at the end of the AI Learning Collaborative.  Once the analysis is complete results will be shared with the regions and to help design region specific booster training sessions.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
crafting and design of the Collaborative during the pilot phase.  b. Conduct webinar to lay the foundation for					
this work; frontline supervisors and Team Coordinators from all program areas will attend this webinar. The intent					
is to emphasize the importance of a Learning Collaborative approach to reinforce learning and ensure					
implementation of skills as well as begin to explore the concepts and overview of					
Assessment Integration. c.Conduct one Face-to- face session with frontline supervisors					
and Team Coordinators to promote key concepts and strategies; d. Conduct four coaching calls with					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
regional supervisors (1 per month over a 4-month period) to reinforce concepts and offer additional support; and, e. Conduct one Face-to- Face Sustainability session with regional supervisors to create a plan to continue to spread this work in the Region.					
Vanderbilt Assessment Consultants attend all of the webinars, face to face sessions, coaching sessions, and the Sustainability Planning Meeting. These consultants are an integral part of the process, and are also responsible for follow up coaching and consultation within the Regions.					
3. Implement an evaluation model that uses Continuous Quality Improvement (CQI) principles to measure outcomes. Three separate	Quarter 6	<ul><li></li></ul>	An audit of case files was recently conducted for custodial and non-custodial cases to also gauge assessment practice a year after the completion of the AI learning collaborative training for each region. A	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	Follow up surveys were sent to Supervisors and Caseworkers in every region regarding their use of the FAST/CANS.

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methods are utilized: CANS/FAST Uses and Supports- Supervisors (CUSS); CANS/FAST Uses and Supports- Practitioner (CUSP); and qualitative reviews and parent satisfaction survey.  a. Conduct the CUSS and CUSP in all regions for supervisors and practitioners to evaluate understanding and implementation of quality practice.  b. Sample 10% of cases in all program areas from each region using a specialized review tool to determine effectiveness of the model. This will be an ongoing strategy and to		□ No longer applicable	sample CANS and FAST cases from cases opened between July 2020 and November 2020 was reviewed. This review was focused on evidence of, Teaming, Planning, Tracking and Implementation within each section of the CANS/FAST. A total of 116 CANS and 80 FAST were reviewed. The assessments categories were rated as a whole. Ratings were 1) No evidence of a need to improve; 2) Evidence of a need to improve; and 3) Significant evidence of a need to improve.  Like the staff survey results, overall the results of the CANS reviews are positive with most cases showing No evidence of a need to improve. A small percentage show significant evidence of a need to improve. The FAST reviews are not as positive. The majority of cases show significant need to improve or evidence of a need to improve or evidence of a need to improve.		Vanderbilt University Centers of Excellence is doing the analysis of those surveys to determine where the regions are now compared to where they were at the end of the AI Learning Collaborative. Once the analysis is complete results will be shared with the regions and to help design region specific booster training sessions.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
gauge change over time.					
c. Conduct parent satisfaction survey to elicit parents' opinion of case planning, service delivery, and desired outcomes.					

#### Goal 2:

Utilize an enhanced service array that meets the assessed needs of children and families to ensure that services are trauma informed and personalized to meet their unique needs.

# Strategy 1:

Tennessee is developing strategies and key activities in coordination with the Administrative Office of the Courts (AOC) to support Safe Baby Courts (SBC) in Coffee, Davidson, Grundy, Johnson, Knox, Madison, and Stewart Counties and will identify future sites. These strategies address access and quality of services.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Support the existing SBCs by:      Implementation team for DCS and AOC will conduct on site visits to provide additional support for the	Quarter Two	<ul> <li>Completed 07/2019</li> <li>On/ahead of schedule</li> <li>Behind schedule</li> <li>No longer applicable</li> </ul>	The SBC Coordinator for Anderson County has been hired and the county will be fully initialized in the near future.  Anderson County is operational as of early 2021. Thus, all 12 courts are operational.	<ul> <li>         ☐ Completed 07/2019         ☐ On/ahead of             schedule         ☐ Behind schedule         ☐ No longer         applicable     </li> </ul>	4 out of 5 new SBC sites have been operationalized. Anderson County is behind schedule and is still trying to hire a Coordinator. DCS is working

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	strategic planning that was facilitated by Zero to Three during Q1 and Q2 in 2019.			The initial meeting of the SBC Advisory Council was held in November, 2020. Commissioner Jennifer Nichols chaired the council, and a brief overview of SBC		with its partners to address this issue.  The Safe Baby Court Advisory Committee will meet in
b.	Implementation team for DCS and AOC will debrief with courts, stakeholders and DCS staff to monitor implementation progress, practice application and address issues or barriers, which will occur after each site visit in Q1 and Q2 2019.			operations were provided to the Council's members which includes experts across a dozen or more fields. The second meeting of the Council will be held in the coming months.		November. This event should trigger rigorous discussion among SBC team partners and legislative partners to help bring new courts up to speed in a more efficient way moving forward. The COVID-19 pandemic has added to
c.	DCS Implementation team will provide initial consultation with SBC sites regarding specialized foster parent recruitment and relative caregiver support to coordinate efforts for building resource and					implementation challenges for new sites.

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relative caregiver capacity specifically suited for children involved in SBC, which needs to support increased service delivery, visitation, and coordination. Ongoing support will be provided as indicated by the regional needs.					
d. Support and assist in the development of services within Stewart County and Johnson County specifically related to A & D Assessment and Supervised Visitation due to the previously identified needs within these areas.					

	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
a.	DCS, in coordination with the AOC, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), and the SBC sites, will develop and implement: Finalize Safe Baby Courts Standards of Operation Guide.  Finalize, in collaboration with the AOC, data reporting requirements from the SBC Coordinators.  Implementation	Quarter Two	<ul> <li></li></ul>	Each of the 12 SBCs have received an initial training in the Best Practice Standards guide and more extensive follow-up training is ongoing.  The contract with Strongwell 180 Health Partners is up and running. Strongwell is seeing patients from across the state and providing much-needed wraparound comprehensive services to families (both for SBC and those involved with the Drug Teams) who do not have insurance or other means to obtain these services. The funding for the Strongwell contract is provided by a VOCA grant received by DCS.	<ul> <li>Completed 02/2019</li> <li>On/ahead of schedule</li> <li>Behind schedule</li> <li>No longer applicable</li> </ul>	Implementation of START was canceled by leadership in July 2020 due to COVID-related travel restrictions and budget cuts.  The SBC Best Practices manual is in final review. Target implementation date is December 2020.  A contract w/ Strongwell 180 Partners to provide comprehensive clinical services to families who have come to the attention of the DCS due to substance abuse is in the later stages of development. Both Specialized Drug Team and Safe Baby Courts have been identified as part of the project. The services will offer
0.	team from DCS and the AOC will explore expansion opportunities by meeting with DCS staff, community			DOS.		evidenced-based treatment and will also further assist in providing relevant data (redacted but still useful). The roll out of this statewide contract

stakeholders	will begin in December	
and interested	'20 or January '21	
Juvenile Court	aligning with the CPS	
Judges as	Re-design.	
identified by the	The design.	
AOC. This will	Zero to Three continues	,
be conducted in		'
partnership with	to provide ongoing	
Jurist in	support, TA and will	
Residence	begin a national learning	<b>g</b>
sponsored by	collaborative in	
the Casey	November '20 which will	ı
Family	be provided to SBCTs.	
Programs, who		
helps to	All DCS SBC staff have	
enhance	been certified in the 0-4	
communication	Toddler and Infant	
and strengthen	Needs and Strengths	
relationships	(TINS) assessment tool.	
between DCS	A protocol and work aid	
and the	for DCS staff is currently	
Juvenile Court	in policy review. The	<b>,</b>
Judges.	training on the TINS will	,
	be conducted in late	
	October 2020 with	
	implementation in	
	November 2020.	

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;	3. Support Court Coordinators in	Quarter Two	<ul><li></li></ul>	This key activity is completed and collaborative meetings will continue.	Completed MM/YYYY On/ahead of schedule	DCS has participated with AOC and DMHSAS in monthly support calls with each of the 12 SBC

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collaboration with the AOC:  a. Implementation		☐ Behind schedule ☐ No longer applicable		<ul><li>☐ Behind schedule</li><li>☒ No longer applicable</li></ul>	coordinators. Positive relationships have been developed and increased communication has led to greater collaboration.
team staff from DCS and AOC will coordinate monthly conference calls with Court Coordinators to provide guidance and support, increase consistent practice, and problem solve.					Monthly calls with DCS SBC staff in each of the regions began in August 2020. These calls support and guide DCS staff to an increased understanding of the SBC approach and ensure consistent practices.
b. Develop training opportunities and facilitate information sharing among the sites.					DCS SBC leadership team will continue the monthly calls and ongoing training for DCS SBC staff.  DCS will continue to
					collaborate with its AOC and DMHSAS partners to provide relevant training and networking opportunities with coordinators with the rollout of Best Practices Standards and other additional tools.

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	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
4. a. b. c.	the drug teams:  Continue to collaborate with University of Tennessee Hospital and East TN Children's Hospital by sharing information and including hospital staff in decisions related to discharge planning and child safety following release from the hospital.	Quarter Two	□ Completed     03/2021     □ On/ahead of         schedule     □ Behind schedule     □ No longer         applicable	This activity was completed. The redesign of CPS continues with new Drug Teams rolling out across the state. Collaboration with hospitals continues.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	a. The CPS Redesign is continuing as planned with full implementation in Shelby County and Upper Cumberland that provided the opportunity to create drug teams and strengthen relationships with local hospitals and treatment providers. The implementation of the CPS Redesign is progressing in East, Knox, Smoky and Northeast, where drug teams already exist. Additional training for staff and enhancing partnerships with hospitals and treatment providers will be reviewed as part of the implementation. The implementation will be complete in these Eastern regions by January 2021 and plans are underway for the implementation in NW/SW in early 2021 and Davidson County

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	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
	intensive In-Home services and case management to FSS cases transferred from the drug team in the Northeast region.					and South Central in early 2021.  b. Plans of Safe Care continue to be monitored by program coordinators and issues are addressed through training or supervisory
	d. Strengthen formal and informal services inclusive of the courts through permanency planning process with a focus on addiction, recovery/relapse and trauma through increased training for frontline staff related to addiction/recovery resources and monitored through the quality review process.  e. Conduct quarterly case file reviews					monitoring.  c. Omni collaboration continues in the eastern regions; however, a new provider has been identified that is more specialized in addiction and provides more direct services to families such as peer mentoring and A/D assessments. OCS is collaborating with this provider and the DMHSAS to develop a scope of services and enter into a contract to deliver substance abuse services in other regions across the state.
	on 5% sampling and aggregate data to identify gaps in service					d. During the implementation of the CPS Redesign, community partners,

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delivery and identify opportunities to develop and strengthen collaboration with external partners.					specifically courts and treatment providers are involved through meetings with OCS leadership to re-engage and strengthen relationships. Information is shared related to the Redesign and the outcomes expected with positive responses, affirmation and support garnered from our external partners. Provider partners are often involved in training new staff specifically related to the drug teams.

## Strategy 2:

Improve the match of service availability based on the family needs identified through the FAST for In Home cases by strengthening assessment quality to guide case planning and increasing collaboration with court staff and service providers.

**Progress:** This strategy is behind schedule. This project has been impacted by the COVID-19 crisis. The Blount and Marshall County Juvenile Court Judges are engaged and ready to work with DCS on this project. Trainings and a review of the data service needs of the children and families have been completed in both counties. However, the court dockets are full at this time due to rescheduled cases from early in the pandemic. The Magistrate in Blount County has been on leave and the Judge is hearing all cases in the county. This key activity as written cannot move forward. Suggested changes to key activity two are below. This change would allow for ongoing work with the courts outside of the PIP period.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Engage the Judiciary in Blount and Marshall Counties to create a shared understanding of the assessment, service planning, and service array support needs.  a. The DCS team will gather the relevant FAST data and CFSR and resource/services inventory to share with the Courts. Relevant data to include FAST scores/greatest needs specific to the In-Home families, resource linkage inventory/information around resources and services (availability, quality, gaps), and CFSR scores — strengths and opportunities for improvement.	Quarter Seven	Completed 3/2021 On/ahead of schedule Behind schedule No longer applicable	This key activity has been completed.	Completed MM/YYYY On/ahead of schedule Behind schedule No longer applicable	Blount County and Marshall County Juvenile Court Judges and staff have been engaged and trainings and discussions of data have been presented.  The Blount County Juvenile Court Judge and staff, as well as the Marshall County Juvenile Court Judge and staff, participated in a virtual training specific to their counties on the FAST and CANS. This training included three years of data on the assessed needs of families from those counties to assist the DCS regional
b. CFSR staff will meet with regional leadership in the counties to engage them in planning for the small test of change.					leadership team and the court staff to determine any needed improvement to services or missing services that could

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
c. A meeting with the Courts will be set at their convenience to explore FAST, CFSR, and resource data, as well as engage in discussion about the Department's use of assessments to plan with families, relevant data described above, and to collect input from courts about their experience with services in those counties. A mutually agreed upon small test of change will be identified to strengthen partnership opportunities.  d. Develop plan for ongoing engagement activities around FAST, planning, and service delivery/array with input	Date	report date)			benefit the families in those counties.  The Juvenile Court Conference for 2020 was cancelled due to the COVID-19 pandemic. However, DCS worked with the Administrative Offices of the Courts to offer a CANS/FAST Training to juvenile court staff on August 4, 2020. This training provided not only an overview of the assessment tools, but statewide data to demonstrate the needs of the families in Tennessee.  Program Evaluation staff will be working
from the Court, including the frequency of these collaborations.  e. Assessment Consultants will be available to provide					closely with CQI staff in Blount and Marshall County to involve juvenile court staff in CQI Teams that will help each region to plan for

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
FAST training or other consultation to Court staff to enhance their understanding of the tool.					any small test of change that the group may identify.
f. During the annual Juvenile Court Conference DCS will partner with conference officials to offer training for Judges and court personnel on the basics of the FAST assessment and its role in case planning and service delivery.					
g. Guardians ad Litem, Parent Attorney's, and Juvenile Court staff will receive information about the FAST and case planning, as well as other relevant information through quarterly newsletter produced by the Program Evaluation Team and delivered through e-mail using the EMMA system.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
2. Assess match of FAST outcomes and service array options for children and families in Blount and Marshall Counties.  a. DCS will form a Service Array CQI Team in Blount and Marshall Counties that will included foster care and in home providers, juvenile courts, and DCS staff to review FAST/CANS data to determine any service gaps for those counties. If service gaps are identified, this CQI team will present those findings to the Regional Community Advisory Board to determine what organizations are available to help eliminate those service gaps.  b. The Service Array CQI Team in Blount and Marshall Counties will meet monthly for a minimum of six	Quarter Eight	<ul> <li>Completed MM/YYYY</li> <li>On/ahead of schedule</li> <li>Behind schedule</li> <li>No longer applicable</li> </ul>	The Blount and Marshall County Service Array CQI Teams have been formed and are meeting regularly. The CQI Coordinators assigned to the regions where those counties are located are facilitating each monthly meeting. A representative from the Division of Program Evaluation has been assigned to each team to assist the CQI Coordinator. The Marshall County team is focusing on domestic violence issues and services within that region. The Blount County team is focusing more one process improvements around assessments and reporting to the court. The courts will determine at the end of a six month period if they wish to continue participation in this CQI team or join other already established regional CQI teams.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	Program Evaluation staff will be working closely with CQI staff in Blount and Marshall County to involve juvenile court staff in CQI Teams that will help each region to plan for any small test of change that the group may identify. Due to the COVID-19 pandemic the courts are not available to work collaboratively on this project within the PIP timelines.  Since the assessment of the needs of children and families has been presented and reviewed with both courts, we would like to change this key activity to the action steps of:  a. Involve the juvenile court staff in Blount and Marshall

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
months to review data; share ideas; and develop ongoing improvement goals while collaborating with the Community Advisory Boards. These meetings will be facilitated by the Regional CQI Coordinator.					County in the regional CQI process by inviting each court to have a representativ e on the Safety Circle and Permanency Circle.  b. Ensure that the juvenile court has a representativ e on the Community Advisory Board in each of these counties.  c. Develop a specialize CQI Team for both Blount/Marsh all County to include the court and providers for those counties to work collaborativel

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					y to address service needs and any barriers to quality services.
					We would request that the target completion date for implementation of these teams to be Quarter Eight.

#### Strategy 3:

Revitalize Child and Family Team Meeting (CFTM) process in all program areas, returning to a focus on the Practice Wheel as described in the Tennessee child welfare Practice Model (Engagement, Teaming, Assessment, Planning, Implementation, and Tracking & Adjustment).

**Progress:** Implementation of this strategy has been successful and ratings for Item 13 saw an improvement in 2020 over 2019 performance. The pandemic has created some delays in implementation of CFTM Training, and an extension for completion of that training for the entire state is being requested.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1.Implement enhanced oversight and support of the CFTM Facilitators through the Director of Permanency.	Quarter One	<ul> <li>         □ Completed             (various dates             are each listed             under each             task)         □ On/ahead of             schedule     </li> </ul>	This key activity has been completed.	<ul> <li>☐ Completed (various dates are each listed under each task)</li> <li>☐ On/ahead of schedule</li> <li>☐ Behind schedule</li> </ul>	a. CFTM team excellence is a multidisciplinary group of staff who have a great deal of knowledge and experience with CFTM. This team

a. Reinstate the	☐ Behind	☐ No longer	meets regularly to
CFTM Team	schedule	applicable	discuss how to
Excellence, with at	☐ No longer		utilize CFTM in
least one Team	applicable		practice, process
Excellence member			barriers and
from each region,			brainstorm new
with a defined set of			ideas.
core competencies			
and role			b. Facilitator CQI
expectations set by			meetings occur
the Facilitator			every other month.
Continuous Quality			In these meetings
Improvement group			the group
and Central Office			discusses child
Leadership.			welfare practice,
			CFTM issues, and
b. Implement new			needs of their
monthly Facilitator			teams around
Continuous Quality			CFTM. Members
Improvement (CQI)			of this team
calls to address			communicate with
ongoing quality			their local teams to
practice issues and			gather information
barriers, and to			and provide
share best practices			feedback on
across all regions.			various issues and
			topics. This dialog
c. Revise the initial			promotes an
CFTM Facilitator			efficient way to
Assessment, and			resolve issues,
design and			share successes
implement a new			and make
recertification			adjustments to
process to ensure			improve overall
ongoing quality of			practice.
facilitator skills.			
d. Develop and			
implement			

mandatory ongoing			
skill development			
opportunities to			
enhance CFTM			
Facilitator			
effectiveness.			
e. Schedule annual			
Facilitator Retreat to			
provide opportunities			
for shared skill			
development,			
coordinated review			
and revision of			
CFTM practices, and			
peer learning.			
f. Revise and re-			
educate field staff on			
the CFTM Appeals			
process.			
g. Develop and			
implement a			
randomized Quality			
CFTM review.			
3			

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	
2. Reinforce the roles and responsibilities of the Child and Family Team members and the CFTM model to ensure CFTMs are utilized throughout the life of the case, as informed by practice model components (engagement, teaming, assessment, planning, implementation of services, and tracking/adjusting).  a. Create and implement a CFTM refresher training for all staff.  b. Create and implement improved diligent search and concurrent planning training for all staff.  c. Develop and implement a CFTM User Guide.	Quarter Eight		a. CFTM Training is well underway and we are ahead of our expected 60% of staff. As of the end of this PIP 85% of staff have completed the CFTM training and we expect to have the remaining staff complete within three months.  f. The Clients Rights Handbook updates have been approved and placed on the intranet and internet for use.  k. The first CFTM survey has been implemented statewide.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	a. The CFTM Training that has been developed for the case management series staff is a one-day training that teaches staff how to conduct an effective CFTM by defining the stages and requirements of meetings, importance of preparation of the meeting and debriefing, and skills that staff can use in difficult CFTM situations. The Training for the Trainer was completed in August and full statewide training implementation has begun. We expect to have 60% of staff trained by then end of the PIP and the remaining 40% of staff trained within 6 months of the end of the PIP.

d. Revise the CFTM			b. Concurrent
Protocol to clarify			planning training
purpose and need			addresses and
for unbiased skilled			defines concurrent
facilitators leading			planning in child
particular types of			welfare practice
meetings,			and why it is
emphasize			important when
adequate	!		appropriate. This
supervision or	!		curriculum has
leadership support			been developed
in critical meetings,			and the training
and support the			team is currently
inclusion of			developing the
extended family and			course for
informal supports as			Computer Based
team members.			Training. It should
			launch by
e. Revise the CFTM	!		December 1, 2020.
form to include			Statewide
sections to	!		participation should
document	!		be complete by the
discussions of			end of the PIP.
diligent search and			Diligent Search
concurrent planning.	!		Training has been
			implemented and is
f. Revise the Client			conducted by
Handbook to include	!		regional staff who
emphasis on the	!		are skilled in
CFTM process and			Diligent Search.
expectations of			The training covers
family involvement.			the requirements of
a Dovolon and			diligent search,
g. Develop and			processes and tips
implement a CFTM			for what works well,
Preparation Tip Sheet for frontline			and why diligent
			search is important in the life of a child
staff to engage families and			welfare case. In
Idililies allu			wellate case. III

collaborators prior to			addition to the live
meetings.	!		webinar which
lgo.			occurs two time per
h. Develop and			month, we also
distribute a family			offer a recorded
oriented CFTM	!		version of the
brochure to			training for staff
communicate the	!		•
			who have difficulty
process to children,			fitting it into their
youth, families, and			schedules.
informal team			Statewide
members.			participation should
			be complete by the
i. Consult with other	!		end of the PIP.
parent mentoring			
agencies to explore			c. The new CFTM
the possibility of			guide provides
developing a			information for staff
parenting mentoring			about the CFTM. It
program with a	!		includes stages of a
focus on advocacy	!		CFTM, how it
and education for	!		relates to the
birth parents to			practice wheel,
better understand			expectations of the
their role in the Child			child and family
and Family Team,			team meeting,
and to enhance their	!		quick reference
ability to effectively			sheets to help staff
participate in	!		reference
meetings and the	!		requirements for
child welfare	!		frequency,
system.			supervision, and
System.	!		skilled facilitator
j. Reinstate the post-			involvement, and a
CFTM debriefing			detailed outline of
_	!		each CFTM type
process.	!		and information
k Davolar and			
k. Develop and	!		about the purpose
implement a post-			of that meeting and

CFTM family and partner survey.  I. Court Liaisons and representatives from the AOC have been invited and are participating in a leadership group that is also comprised of contract providers		details about how that meeting should be conducted. This tool provides all information regarding CFTM in one location which is available on the server which provides easy access to users.
and multiple levels of DCS staff, including legal. This group has been instrumental in the development of the plan of this strategy and will be the ongoing leadership group that will help drive the		d. The CFTM protocol was collapsed into the CFTM Guide to have all information about CFTMs in one location, and easily accessible for staff. There is no longer a separate protocol.
implementation of this strategy through regular ongoing meetings, consultations, and collaborations.  m. Identify targeted staff (current or additional, based on resources and need) to complete ongoing, intensive diligent search.		f. Suggested revisions of the Client's Rights Handbook have been submitted for approval. The revisions include the definition of the Child and Family Team Meeting in the glossary as the meeting is already referred to in other areas of the document as a

		routine and regular expectation throughout a Child Welfare Case.
		g. Work aids have been developed to assist staff in
		preparing for the CFTM which will help them have a
		more productive and effective meeting. The work
		aid, Preparing the Family for the
		CFTM, helps staff prepare families by providing sample
		questions staff members can ask families in an effort
		to prepare for the meeting. This work
		aid includes asking for information about other
		potential team members, helping the family
		understand the purpose of the
		meeting, helping the family identify their priorities and
		goals in the case, history of the family, and safety issues
		that need to be

		considered. There is also a work aid,
		Preparing the
		Facilitator for the
		CFTM, that
		provides staff a
		template of
		information they
		need to provide the
		facilitator (if a
		facilitator is
		conducting the
		meeting) in order to
		have an effective
		and productive
		meeting. This
		includes ensuring
		all needed parties
		and decision
		makers are invited
		to the meeting,
		letting the facilitator
		know if there are
		any safety issues or
		topics that need to
		be handled gently,
		and ensuring that the meeting stays
		on track to address
		the purpose of the
		meeting. The
		worker can use
		both of these work
		aids in a variety of
		ways as the forms
		provide a space to
		write or can be
		simply used as a
		reminder of

		important topics to cover. Both documents are currently online and is referenced in the CFTM Guide as tools available for staff to use.
		h. The CFTM brochure has been updated to reference our desired practice and has been modified to a one- page version. It is currently available online for both customers to view and for staff to access for printing or as a PDF to include with meeting invitations or as needed. Additionally, there is a separate CFTM one-page flyer for
		youth to help them understand the purpose of the CFTM which is also available online for customers and staff.  j. The debriefing process has been

following CFTMs with families. This process and purpose is covered in the new training for staff and in the CFTM Guide, but a work aid was also created for staff to assist in this process. The work aid provides a short list of questions staff can ask each other following meetings to ensure that we are providing excellent customer service and consistent feedback to one another for professional growth. The use of the work aid is not required but is recommended when the informal debriefing following CFTMs is not already happening or in staff relationships where there is less comfort in providing feedback.		,		,	
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debriefing following CFTMs is not already happening or in staff relationships where there is less comfort in providing feedback.					
CFTMs is not already happening or in staff relationships where there is less comfort in providing feedback.					
already happening or in staff relationships where there is less comfort in providing feedback.					
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		k. A proposed draft of the survey has been created and has been vetted through various workgroups. Implementation will be discussed at the Regional Manager meeting at the beginning of November to determine the best way to implement the surveys with so many meetings now being virtual. A decision is expected from that meeting and implementation of the surveys will begin no later than
		1/1/21, using the month of December to message the process to local staff.
		I. There is a multidisciplinary team which includes contract providers, the AOC, Court Liaisons, DCS and Legal that helped develop this plan and meeting periodically to

				discuss any barriers or changes in practice.  m. Regional and statewide leadership have identified individuals in their offices who could assist with diligent searches. Training has been provided to those identified staff so they can adequately assist.
3. Enhance the deployment of the CFTM Model in In Home Cases. a. Develop a CFTM Leadership Team for CPSI, CPSA, FSS, and JJ Probation/Aftercare to guide the development and implementation of CFTM practice in In Home cases through active participation in the following action steps b-d. b. Revise CFTM Protocol to include	Quarter Six	Completed MM/YYYY On/ahead of schedule Behind schedule No longer applicable	Completed MM/YYYY  On/ahead of schedule Behind schedule No longer applicable	a. A multi-discipline group leadership group was created, called CFTM Team Excellence. This group includes all different program areas and a variety of specialty positions to approach CFTM practice from a wholistic lens. This team meets on a monthly basis. b. The CFTM Protocol was revised and included in the CFTM guide that is

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required and				published in our
suggested meetings				policy section for
for In Home cases.				staff and
c. Identify CFTM				customers. Requir
Team Excellence				ed and suggested
members from				meetings for in
CPSI, CPSA, FSS,				home cases are
and JJ				included in that
Probation/Aftercare				protocol, as well as
to join the CFTM				required and
Excellence, monthly				suggested
CQI, and facilitator				meetings for all
retreat groups to				program areas.
bring In Home				c. Team members
casework				for CFTM Team
perspective to these				Excellence include
ongoing				members from all
improvement				program areas,
processes.				including CPSI,
d. Revise the Client				CPSA, FSS, JJ
Handbook to include				(custodial and
use of the CFTM				probation), and
process in In Home				facilitator retreat
cases.				groups to provide
e. Collaborate with				oversight and a
existing parent				
families involved in				•
In Home Cases to				handbook was
develop similar				revised to include
process for				additional
supporting parent				information for
				CFTM for all
In Home CFTMs.				program areas.
				e. We met with
				mentoring
				O
				(specifically dealing
existing parent mentor programs for families involved in In Home Cases to develop similar process for supporting parent mentoring related to				holistic approach to practice. d. The client's rights handbook was revised to include additional information for CFTM for all program areas. e. We met with existing parent mentoring programs

		with non-custodial cases) to learn more about their process and determine is something similar could be implemented within the agency in inhome cases as well as other cases.

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**Goal 3:** Ensure children have quality supports to promote safety and stability in their living situations, continuity of family relationships, and preserved connections to their identified home community and culture.

**Strategy 1**:Implement the Team Leader Mentoring Enhancement Project. This project is designed to enhance the frontline Supervisors' ability to serve as mentors to staff thereby improving the overall quality of monthly visitation between caseworkers and children/youth, as well as caseworkers and birth parents. This project includes clarifying Supervisor role confusion between primary mentoring versus completion of administrative tasks, and helping caseworkers understand that each visit is an opportunity to engage and assess families in order to achieve sustainable permanency.

**Progress:** Knox County and Tennessee Valley Regions continue to benefit from this project and receive onging support as requested. Northeast, Davidson County, and Southwest Regions will complete the project October 31, 2020. However, ongoing support and any final sessions between Team Leaders and their Mentors may occur through November. Three new regions (Smoky Mountain, Upper Cumberland, and Mid-Cumberland) will roll out November 1, 2020. Pre-meeeting were held with leadership in those regions and Team Leader/Mentor assignments have been made. The Program Evaluation Unit is on track to roll out the project to the final four regions on or before March 2021. Most sessions and all SimLabs have become virtual due to the pandemic. This project appears to be successful based on feedback and pre/post test data.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Assess Team Leader activities to determine what tasks do not add value to work products and prevent modeling and mentoring Caseworkers. a. Select up to 24 Team Leaders from across the state that have supervisory responsibility for Foster Care, In Home, and AR/DR cases to	Quarter One	<ul> <li></li></ul>	The mentors are currently working with the TL's in the East, Shelby, SC, and NW Regions. The SIM Labs are scheduled. For just the TL's the date is June 16 & 17. For the TL's and FSW/CM's, the date is July 21 &22.  Last month, we completed the SIM Labs with the UC, MC, and Smoky Mtn. Regions with the TL's and FSW's. We have had the last session with them	<ul> <li>☑ Completed</li> <li>12/5/2019</li> <li>☐ On/ahead of schedule</li> <li>☐ Behind schedule</li> <li>☐ No longer applicable</li> </ul>	Knox County and Tennessee Valley Regions continue to benefit from The Team Leader Mentoring and Enhancement Project. This process is now being implemented in the Southwest, Northeast, and Davidson County Regions. Each of these regions

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
participate in the assessment.  b. Program Evaluation Team members shadow Team Leaders for two business days to categorize and time tasks.  c. Program Evaluation Team members produce a SIPOC and A3 for each Team Leader shadowed.  d. Work Group of DCS employees identifies non-value added tasks (administrative, regional requirements, etc.) that prevent Team Leaders from mentoring and modeling quality visitation.			and requested for them to complete the Post Questionnaire.		were selected due to lower CFSR scores during the 2019 season. Three additional regions will roll out in November 2020. The final four regions will be rolled out in March 2021. Due to the COVID-19 pandemic the official Kick-off Meeting with each of the new regions occurred via Webex. Currently all mentoring is being conducted via Webex. With most Team Leaders, Caseworkers, and mentors working remotely, it has been more challenging to
					have quality mentoring sessions, with some participants. A

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					Team Leader Mentoring and Enhancement Protocol was developed during quarter three and quarter four. This new protocol was developed based on lessons learned from the initial two regions in order to ensure that the successes can be replicated in remaining regions. A new pre and post-test was developed during quarter four, as well as a mentoring plan, in order to produce evidence of the successes of the program. This will be replicated in the remaining seven regions. The SimLab process was switched to a virtual format due to the pandemic.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					A virtual training on formal and informal quality assessments was conducted on June 17, 2020. Additional virtual trainings will occur in July on the CFSR items to provide a better understanding of what is being rated and why during a CFSR review.  Ten (10) Team Leaders completed the project: Foster Care – 3  Juvenile Justice – 1 In-home (FSS) – 1 CPS Investigation – 3 CPS Assessment – 1 CFTM Facilitator – 1

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					Eighteen (18) Team Leaders are currently participating in the project: Foster Care - 7  Juvenile Justice – 3 In-home (FSS) - 2  CPS Investigation– 3  CPS Assessment – 3

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
2. Identified Team Leaders participate in the Team Leader Mentoring Enhancement Project. a. Executive Leadership Team will determine the counties and teams that participate in the	Quarter Two	<ul> <li>Completed         12/2019</li> <li>On/ahead of         schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	All twelve regions have now been involved with this initiative. The fourth cohort is currently in process.	<ul> <li>Completed         <ul> <li>12/2019</li> <li>On/ahead of                 schedule</li> <li>Behind schedule</li> <li>No longer                 applicable</li> </ul> </li> </ul>	<ul> <li>a. This step has been completed. The next set of regions will be implemented in November.</li> <li>c. Discussions on reducing non-value-added</li> </ul>

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
project based on the support of the project from regional leadership, staff capacity/vacancies, and availability/access to Program Evaluation Team members and experienced CFSR Reviewers who can provide assistance. Selected counties/teams may not be the same Team Leader who participated in key activity one.					tasks/roles have been held.
b. Program Evaluation Team meets with the Regional/Divisional Leadership of each Team Leader selected for the project to determine rationale for non-value added tasks/roles.					
c. Program Evaluation Team works with DCS Leadership to remove or reduce non-value added work from participants and develop a Mentoring Plan that outlines the					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
importance of modeling and coaching quality visitation and the use of visitation to improve the overall quality of initial and ongoing assessments (formal & informal).					
d. Participants complete the Quality Contacts InitiativesTrainings conducted by the Office of Training and Professional Development (Goal 1/Strategy 1) prior to starting the Mentoring Enhancement Project.					
3. Identified Team Leaders are assigned a CFSR Reviewer to serve as a mentor and must demonstrate understanding of a quality visit with a child/youth and a birth parent and be assessed on their ability to model quality visitation to Caseworkers.	Quarter Three	<ul> <li>         □ Completed     </li> <li>06/2020         □ On/ahead of schedule         □ Behind schedule         □ No longer applicable     </li> </ul>		<ul> <li>         ⊠ Completed     </li> <li>06/2020         ☐ On/ahead of         schedule         ☐ Behind schedule         ☐ No longer         applicable     </li> </ul>	

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
a. SimLab Model is used to allow participants to get real time feedback on their own ability to conduct quality visitation.					
b. Team Leaders document the quality visit conducted during the SimLab and receive feedback on the documentation of the visit.					
Team Leaders are assigned a Coach/Mentor who is a CFSR Reviewer or QA Reviewer who provides ongoing assistance and support to the Team Leader on visitation.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
4. Team Leaders discuss quality	Quarter Four	⊠ Completed 06/2020	First round of Sim Labs for the third cohort were	⊠ Completed 06/2020	Virtual SimLab was held in

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
visitation with Caseworkers during Monthly Performance Briefings, Staff Meetings, and Case Reviews.  a.Team Leaders provide training on quality visitation with their assigned Caseworkers after participation in SimLab activities.		☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	completed on February 8 <sup>th</sup> and 9 <sup>th</sup> . The second occurred on March 17 <sup>th</sup> and 18 <sup>th</sup> .	☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	August 17-18, 2020 with TLs in Southwest, Davidson and Northeast regions. A second SimLab was held on September 29-30 with case managers. The SIM Labs with the TL's and their identified
b.Team Leaders incorporate quality visitation discussions during Monthly Performance Briefings, Staff Meetings, and Case Reviews after participation in SimLab activities.  c. Coach/Mentor is available to participate in this training and discussions as needed.					FSW's were completed on September 29th and 30th.  Will continue to work with the three Regions (NE/SW/DV) through the end of October. Will review mentoring plan and ensure all identified goals have been met.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
5. Team Leaders accompany caseworkers on one visit each month to mentor quality visitation and appropriate documentation of visitation.	Quarter Four	<ul> <li>Completed         6/2020</li> <li>On/ahead of         schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	Cohort three concluded March 31, 2021 and cohort four began during quarter eight. All twelve service regions have now been involved with this initiative.	<ul> <li>Completed         06/2020</li> <li>On/ahead of         schedule</li> <li>Behind schedule</li> <li>No longer         applicable</li> </ul>	Due to the COVID-19 pandemic, team leaders can participate in visits with the caseworker virtually.
a. Team Leader model one quality child visit and one quality birth parent visit for each caseworker within two months of completion of the SimLab.					The Program Evaluation team has met with the Regional Administrators for the next three Regions identified for the project
b. Team Leader continue to accompany each caseworker on a minimum of one visit each month and provide feedback to each Caseworker.					(Upper Cumberland, Mid- Cumberland, and Smoky Mountain Regions) and all three Regions have identified the Team
c. Coach/Mentor accompanies Team Leader on one visit each month and provides feedback to					Leaders that will participate.

the Team Leader on					
6. Evaluate Effectiveness of the project.  a. Distribute and analyze survey data from parents, children, foster parents, and all parties directly involved in the case and data reports regarding the quality of service to evaluate the effectiveness of the model.  b. SimLab Model is used to assess the caseworker's ability to conduct quality visitation with children/youth and birth parents.  c. Caseworkers demonstrate the ability to conduct informal assessments	Quarter Five	<ul> <li>         □ Completed</li></ul>	Third cohort pre-test data was provided during the quarter seven report. Cohort three ended March 31, 2021 and data is begin processed. Cohort four began during quarter eight and includes the remaining four regions Northwest, East Tennessee, South Central, and Shelby County.  This project has been successful and Team Leaders that have participated feel that they have benefited from this initiative.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	Ten (10) Team Leaders completed the project: Foster Care - 3  Juvenile Justice - 1 In-home (FSS) - 1 CPS Investigation -3  CPS Assessment - 1 CFTM Facilitator - 1  Knox and TN Valley Post-test key themes:  • (100%) The knowledge that I have gained from the CFSR Team Leader Mentoring Enhancem ent Project will be useful to me in the future. • The importance of quality

of safety and	documenta
	documenta
well-being	tion
during	Better
visitation with	understand
children/youth.	ing of CFSR
d. Caseworkers	expectation
	s and how
demonstrate	the team
the ability to	leader can
conduct	coach and
productive and	support
engaging	staff
visitation with	SimLab
birth parents.	helped
e. Caseworkers	team
are provided	leaders
	identify
feedback on	strategies
the visitation	to improve
conducted in	engaging
SimLab by the	children
Team Leader.	and
f. Team Leaders	families
magaina	ghteen (18)
	am Leaders are
	the process of
	mpleting the
	oject:
	oster Care - 7
	uvenile
	ustice - 3
feedback.	n-home (FSS) -2
	PS
	nvestigation- 3
	rvoonganon o
	PS
	Assessment - 3
	avidson,
	ortheast, and

					Northwest Pre-test key themes:  • (61%) I am confident and use CFSR practice in my daily practice with my staff.  • Improving quality formal and informal assessmen ts  • Improving quality contacts/vi sits
7. Statewide Implementation will occur based on the effectiveness of the Team Leader Mentor Enhancement Project. a. Regional CQI	Quarter Eight	<ul> <li></li></ul>	Currently DCS has 87 employees who are Reviewers. Each of the twelve service regions, the Office of Juvenile Justice, and the Office of Child Safety all have trained CFSR Reviewers	☐ Completed MM/YYYY ☑ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	
Coordinators will be used to assist Regional/Divisi onal Leaders in determining		applicable	across the state that serve as mentors for other staff on CFSR best practices.		

non-value added work that can be reduced for Team Leaders.  b. Each region will have a minimum of two CFSR Reviewers who will be able to serve as Mentors to Team Leaders on the importance of coaching and modeling performance.	Eas Kno Mid Nor Nor She Smo Sou Sou Ten Upp OC: OJJ  Five Coo trair as O rem CFS and proc proc regi	e of the ten CQI ordinator have been ned and are certified CFSR Reviewers. The nining five attend SR reviews each year are trained on the cess in order to vide support to the ions.	
	prod prov regi Ider Cod sha Eva Tea and orde repl thei	cess in order to vide support to the fons.	

	The Division of Program Evaluation will also continue to offer the Team Leader Mentoring and Enhancement Project as requested by regional leadership.	
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**Strategy 2**: Build capacity through regional foster parent recruitment and retention plans, train program staff and foster parents and equip them with skills needed to meet the needs of older youth, and support proper placement matching for placement stability.

**Progress:** DCS has completed this strategy ahead of schedule. The curriculum is fully implemented statewide. Additionally, the Right Time Video series is offered as online courses and a virtual de-briefing component has been added to our monthly delivery. All data requirements have been met with the University of Washington. Finally, survey data continues to indicate that the curriculum and video series are beneficial for Tennessee's foster parents.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Implement the CORE for Teens training initiative in three Regions (Northwest, Shelby County, and Davidson County) along with a community provider, Omni Visions, who will work in conjunction with DCS in the western	Quarter Two	<ul> <li>Completed         12/2019</li> <li>On/ahead         of         schedule</li> <li>Behind         schedule</li> <li>No longer         applicable</li> </ul>	CORE for Teens continues. Survey data was provided during the Quarter Seven report. Lessons learned from this project have been implemented into ongoing training for foster parents.	<ul> <li></li></ul>	A staggered roll-out of CORE for Teens with the remaining regions, was to begin April 2020. However, due to COVID-19 barriers, this project is currently on hold until classroom delivery can resume. The evaluation of the curriculum from the University of Washington was received and adjustments have been

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
part of the state. The two urban regions were chosen for placement stability reasons and extensive involvement in placing teenagers in foster care. Northwest region was chosen as a rural region where Omni Visions is involved and has had an increase in the rates of entry for teens.  a. Build capacity through recruitment activities, by investing in personal relationships, implementing Right Time Training, and ongoing coaching at the point teenagers are placed in foster homes. Right Time Training is an evidence-based training model that assists foster parents in gaining a					made. Adjustments included delivering the curriculum in 12 hours virtually vs 14.5 hours in the classroom. The first statewide virtual offering was delivered in June. The following changes were implemented during our June delivery:  • Welcome and icebreaker activities were shortened or modified • Small group activities that included 4 or 5 scenarios were reduced to one scenario and changed to a large group activity • Decreased verbal communication for some activities due to usage of chat box for participant responses • Removed some information that is covered in our new Pre-Service TN KEY curriculum. For example, we did not deliver a Fight, Flight, or Freeze activity. We reviewed the information verbally as this

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Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
greater understanding of the needs of teens, to include themes on transitions, adapting parenting, developing relationships, trauma informed parenting and emotional regulation. b. Evaluation process will be completed by the University of Washington utilizing the following: i. Data collection fidelity checklist; ii. Outcome surveys completed by the resource parents and youth; iii. Foster parent self- assessments (before and after program); iv. Pre/post tests for the classroom curriculum (for seven modules); and,					information is covered in our TN KEY- Impact of Trauma course. The format was shared with Spaulding and other states as Tennessee's virtual option during our champion's meeting. The delivery was successful and survey data will be reported during the next APSR cycle.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
v. Evaluations linked to the Right Time training videos.  2. Establish baseline data metrics of current outcomes for CORE for Teens and evaluate outcomes through the following metrics:  a. Placement Stability b. Non-Permanent Exits c. Recruitment and Retention of Placements	Quarter Two (baseline) Quarter Six (evaluation)	Completed 03/2021 On/ahead of schedule Behind schedule No longer applicable	Reports provided by the University of Washington were previously shared regarding pilot outcomes. Tennessee is still awaiting additional information from University of Washington, since the additional request for a third AFCARS report was provided.	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	DCS has received the report. In addition, the University of Washington has requested another round of AFCAR data and plans to proceed with submitting the curriculum to be placed on the Evidenced Based list for states to choose from in the future. The additional information will provide greater analysis of TN's outcomes. The report from Spaulding was sent to the Children's Bureau. CORE Teen curriculum was adapted for virtual delivery and reduced to 12 hours.  TN version of the curriculum was reviewed with Spaulding and University of Washington during Champions meeting on 5/20. Additionally, de-
					briefing of first virtual delivery was shared during a meeting on 7/22.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					The curriculum was delivered statewide on 6/9, 6/13, 6/16, and 6/20 and will be offered once a quarter.  Qualitative data indicated that TN parents benefited from the Right-time videos and often accessed the videos immediately after a crisis. Therefore, we created online courses for foster parents to access the videos at any time and receive training credit.  Right Time Videos Training Submissions and Survey Responses the videos at any time and receive training credit.  Right Time Videos Training Submissions and Survey Responses to take below represents course completion from July 23 2020 to September 27, 2020.  Tole Training Submissions and Survey Responses to take the presents course completion from July 23 2020 to September 27, 2020.  Tole Training Submissions and Survey Responses to the videos Train

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
3. Implement Teen Connect in Davidson county as a first phase of a prevention continuum that includes a CFTM for all possible teen entries, enhanced kinship practice, and a court strategy for youth abandoned into the detention population, in collaboration with the Annie E. Casey Child Welfare Strategy Group (CWSG): a. Identify provider for Teen Connect and cohort for initial sessions. b. Identify a lead and workgroup to support CFTM. c. Identify lead and workgroup to support kin practice enhancements. d. Identify a lead and workgroup to develop	Quarter Three	□ Completed 6/24/2020     □ On/ahead of     schedule     □ Behind schedule     □ No longer applicable	Teen Connect continues in Davidson County, as does support from Annie E. Casey.  In regards to strengthening placement stability through improving the population of kids served by kinship placements, kinship practice coaching/mentoring for all CPS, Foster Parent Support and Placement staff was completed in March. Training is scheduled for East and Knox Region staff in May with the goal to train two regions each month thereafter.  Jan. – March 21, 2021 class: 7 graduates Davidson Co. (2 custodial and 5 noncustodial) - None of the noncustodial	□ Completed     06/24/2020     □ On/ahead of     schedule     □ Behind     schedule     □ No longer     applicable	With the onset of COVID and training delivered via video conferencing, our advisor, Dr. Vicky Green, with Annie Casey advised us to have around 6 parents in the group as it had to be changed to zoom format.  Summer/Fall 2020 Teen Connect Class was held via Zoom; 7 were enrolled/4 graduated; the 2 non-custodial youth have not entered custody; 1 custodial youth is currently on trial home visit; 1 custodial youth and parent are receiving family support services in anticipation of exit from custody. CFTM's are currently being facilitated for the majority of potential

children have entered custody on these cases. 2 of the cases have since closed and 2 remain open but are about to close. On one of the cases, a set of grandparents who have custody of the teen both attended and graduated. The children remain in custody on both custodial cases. A trial home visit is planned soon on one of the cases and there are 6 sibs in care on this one case.	teen entries with the contract provider, TN Voices serving as the workgroup lead in engaging parents and facilitating the work sessions. Annie E. Casey continues to provide technical support and parents continue to be incentivized to complete course work with Walmart gift cards.
urrent classes nderway:  arch 30 – June 1 parents are enrolled noncustodial parents om Davidson and 2 ustodial parents Rutherford) MC gion	
no om ist lut gio	ncustodial parents Davidson and 2 odial parents herford) MC

			6 parents are enrolled 4 custodial (Rutherford) MC Region and 2 noncustodial MC Region (1 from Rutherford and 1 from Montgomery)  Next class is planned for July 15-Sept. 16 and Oct. 5- Dec. 7.		
4. Evaluate placement process and make enhancements to support first right placement as part of the Teen Connect implementation in Davidson County and in collaboration with CWSG. Implementation in other regions will be determined based on success of intervention and funding.	Quarter Six	<ul> <li>         □ Completed         03/2022         □ On/ahead of         schedule         □ Behind schedule         □ No longer         applicable     </li> </ul>	Surveys were completed with providers, youth, DCS placement staff, and DCS Caseworkers and Team Leaders to solicit information from those stakeholders around any needed improvements to the placement process during the eight quarter. A listening session was held with youth, as well, during the sixth quarter.  Youth feel that more emphasis needs to be placed on matching their interests, beliefs, and culture to those of	☐ Completed MM/YYYY ☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	

the foster parent or facility. The youth felt that DCS and providers should focus on recruiting foster parents across a broad spectrum of different beliefs, activity levels, and cultures. These differences were noted as a primary reason they often disrupt those placements. Providers noted that having more information about youth, especially mental health assessments, would help them better determine the appropriateness of each child to placement withing their agency. DCS and placement staff noted that the lack of placement options were the primary barrier related to finding appropriate placements for youth. DCS placement staff also noted that not

	having up to date information from providers on availability is often a barrier, as well.  Tennessee has formed a committee to develop Assessment Foster Homes where youth can reside when coming into care and receive assessments that will help DCS better determine appropriate placements. This is based on the success of this initiative in the state of Indiana, who Tennessee continues to collaborate.  Developing recruitment and board rate for these Assessment Homes is a current focus of the committee. This will be piloted in three or four regions to determine effectiveness prior to rolling out statewide.
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**Goal 4:** Enhance the Continuous Quality Improvement process to monitor progress on the Child and Family Service Review Program Improvement Plan and program outcomes.

**Strategy 1**: In alignment with Tennessee's Child and Family Service Plan (CFSP) and CFSR Program Improvement Plan, DCS will integrate qualitative processes with its existing quantitative methods to strengthen evaluative standards for safety, permanency and well-being of the children and families served.

**Progress:** All key activities for this strategy have been fully implemented and are successful at this time. All key activities have been completed and will be ongoing for this strategy. The COVID-19 pandemic did impact attendance for some trainings and meetings. However, attendance is now growing as the pandemic continues.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Incorporate CFSR standards and expectations into the Case Process Reviews (CPR) and Quality Process Reviews (QPR). a. CQI Coordinators will be trained on CFSR standards and will serve as the Interrater Reliability (IRR) Reviewers for CPR and	Quarter One	<ul> <li></li></ul>	CPR IRR 2019-2020  100%  80%  60%  TI. Mentor Enhancement Project  100%  100%  TI. Mentor Enhancement Project  100%  100	□ Completed	a. The Program Evaluation division is conducting the CPR-IRR process. The transition began January 2020 Updates are being made to the CPR tools. The program evaluation division began the first round of IRR reviews in May 2020. We are completing the second round of quarterly CPRs by Oct. 31. The data analysis from the first round of CPR-IRRs is

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
QPRs completed each quarter by Team Leaders.  b. CQI Coordinators will review progress of quality visitation and documentation by Caseworkers, as well as the quality of Case Supervision narratives.			Project had the second highest level of inter-rater reliability. Team Leaders who were developing CFSR Reviewers were found to have the third highest level of inter-rater reliability, with Team Leaders not involved in CFSR or TL Mentoring and Enhancement having the least level of inter-rater reliability.		completed. Please see results below.  c. The Program Evaluation division is providing feedback to each region on the IRR results and monitoring quarterly for improvements. This feedback was provided in the first round of quarterly IRR reviews. CPR Inter-Rater Reliability Reviews are now conducted by Program Evaluation. Team. Reviews are
c. CQI Coordinators will provide feedback to each region on the IRR results and monitor quarterly for improvements.					currently in the third quarter period.  Quarter 2 CPR-IRR comparison results:  • JJ Custody: 62%  • Non-Custody: 53%  • CPSA: 67%

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					JJ     Aftercare/     Probation:     58%     Foster     Homes:71% Foster Care/ Kinship/Adoption: 63%

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
2. Conduct Monthly Provider Summary Reviews on a sample of contract provider agencies and will incorporate CFSR standards and expectations.	Quarter One	<ul> <li>         □ Completed     </li> <li>12/2019         □ On/ahead of schedule         □ Behind schedule         □ No longer applicable     </li> </ul>	Quarterly reviews of the Monthly Provider Summaries continue. Some improvements are being seen from providers over last year's review. Providers have noted that they feel these	Completed 12/2019 On/ahead of schedule Behind schedule No longer applicable	Monthly Provider Summary Reviews are conducted quarterly with feedback sessions. The Program Evaluation division is sharing feedback with providers on

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
a. Conduct Month Provider Summ (MPS) Reviews 75 randomly sampled cases across the state using the CFSF guidelines for quality visitation and assessment families.	nary s on e R		reviews have helped them to better understand expectations.		findings. This is an ongoing activity. A Unique Care Agreement (UCA) provider has asked to be included in the reviews.
b. Train CQI Coordinators, Program Evalu Coordinators, Placement Qua Team Coordinators, a Provider Accountability Review Coordinators o CFSR standard and the Monthl Provider Summ Review Tool ar form an MPS Review Team.	ality and n ds y nary				
c. Complete Moni Provider Summ	- 1				

	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
d.	Reviews on a quarterly basis. Share results from the MPS Reviews with contract providers and require providers to develop an improvement plan based on results.					
e.	Share results from the MPS Reviews during the monthly Quality Assurance/Quality Improvement Interagency WebEx, attended by quality and program evaluation staff from DCS and its provider agencies.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
3. Enhance the Quality Assurance/Quality	Quarter One	⊠ Completed 12/2019	DCS continues to meet quarterly with provider	⊠ Completed 12/2019	This key activity is complete and

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Improvement Interagency WebEx meetings to focus on CFSR Program Improvement Plan Strategies and Key Activities.  a. Expand the participant invitation list for the QA/QI WebEx to include additional providers that are sub-contracted by performance-based providers and community mental health providers.  b. Share Progress and Results from CFSR PIP Key Activities with external participants with information on how provider's performance impacts that particular Key Activity.		☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	quality assurance/improvement staff, DCS Network Development staff, and DCS CQI staff to share information and data. Providers are polled to determine future topics of interest and the Division of Program Evaluation develops agendas and recruits subject matter experts to discuss those topics of interest on an ongoing basis.	☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	monthly meetings continue to occur to share information with providers and DCS quality assurance staff. Results of CFSR performance is shared as well as special topics of interest to provider agencies.
c. Discuss barriers to quality service delivery and key					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
factors that impact performance and quality service delivery on each WebEx and brainstorm ideas to help improve outcomes.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
4. Conduct annual Provider CFSR Reviews for custodial provider agencies.  a. DCS Executive Leadership select up to four Foster Care provider agencies that are performing under targets as identified by the Provider Scorecard, Performance Based Contract, and Vanderbilt University ASQ.	Quarter Four	□ Completed     06/2020     □ On/ahead     of     schedule     □ Behind     schedule     □ No longer     applicable	DCS continued to review five provider agencies November 2020 – March 2021. Provider agencies were provided feedback on case progress, and most reported that they felt the process was very valuable in helping them understand expectations.	Completed 06/2020 On/ahead of schedule Behind schedule No longer applicable	a. Five provider CFSRs will be conducted between November 2020 and March 2021. All five providers have been notified that they were selected. Four providers have had initial training from the Program Evaluation Team on preparing cases for review. b. Five cases will be

	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
b.	At least five cases will be reviewed at each agency from December through March each year by the Program Evaluation Team, who are trained CFSR Reviewers.					reviewed at each provider agency. Those cases will have a Period Under Review beginning July 1, 2020. c. Leaders from each provider agency are encouraged
c.	Leaders, from provider agencies being reviewed, are required to shadow during the review week, as are DCS staff that are responsible for monitoring provider performance.					to shadow a case or assign a manager from the agency to shadow a case. This may be difficult during the COVID-19 pandemic, as these reviews will now be conducted
d.	CFSR Reviewers explain CFSR best-practice standards to shadows while reviewing each case.					virtually. d. CFSR training is provided to staff at the provider agency on preparing their
e.	A Debrief Session occurs upon completion of each CFSR to					case. This training includes best-practice standards.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
explain areas of strength and					e. A debrief session is
areas of needed					scheduled upon
improvement and					conclusion of
require the					each review at
development of					the convenience
an agency					of the provider
improvement					agency.
plan. DCS monitors the					
plans during					
strategic					
performance					
outcomes					
meetings.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
5. Continue to expand the CFSR process and use the OSRI as the official qualitative review process for Tennessee.  a. Provider agency staff will be invited to shadow CFSR reviews during the twelve regional reviews that occur annually April	Quarter One	<ul> <li></li></ul>	DCS continues to incorporate CFSR language in trainings for staff; policy updates; and Case Process Reviews conducted by Team Leaders. The agency also continues to review provider agencies November – March each year using the OSRI to help those agencies	<ul> <li>Completed</li></ul>	CFSR continues to be the official qualitative review process for Tennessee's child welfare system. All regions are being reviewed and feedback sessions are held at the end of each review week. The Department also invites internal and external stakeholders to serve

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
through September.  b. Provider agency staff will be invited to attend CFSR preparation trainings held in each region six weeks prior to the review.  c. DCS staff will be encouraged to participate as shadows during the annual CFSR reviews.  d. Results from the CFSR reviews will be shared at least quarterly at the DCS Executive Leadership, DCS Senior Management, DCS Strategic Outcomes and DCS Policy & Practice meetings, and as the Grand Regional			improve and understand the CFSR process.		as Shadow Reviewers. Due to the COVID-19 pandemic reviews were help virtually during the 2020 season. This impacted the number of shadow Reviewer spaces available. However, a Stakeholders who shadowed during the review cycle included Foster Care Review Board members, Court Appointed Special Advocates, and a Juvenile Court Judge. Currently DCS continues to recruit through the quarterly CFSR newsletter and promoting the sign-up link through the CFSR team's email signature. External trainings that are conducted are also ways we continue to encourage and recruit external partners and stakeholders to participate. Bootcamp CFSR training is required for anyone interested in becoming a developing

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Provider meetings.  e. CFSR results will be incorporated into each region's Continuous Quality Improvement process and will include reviewing quantitative data compared to CFSR qualitative data, as well as performance	Date	report date)		report date)	reviewer or to maintain lead reviewer status. Face to Face trainings in East and West Tennessee were held in February and March 2020. In April 2020, it was moved to a virtual training due to COVID-19 for Middle Tennessee. One hundred and fifty-four (154) people participated in the training statewide. In effort to measure the
expectations and results from the approved CFSR Program Improvement Plan.					effectiveness of the training a pre and post-test was administered in all three trainings. Overall, participants demonstrated an improved understanding of the process and item ratings.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
6. DCS will use the current CQI system to	Quarter One		Strategy Leads met monthly during quarter eight of the	∑ Completed 12/2019	Strategy leads are meeting quarterly with

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
review CFSR PIP performance on a monthly basis.  a. Strategy Leads will continue to meet with representatives on a quarterly basis to review the progress and any need for adjustments for their assigned strategies. b. Strategy Leads will review data on a monthly basis and notify Program Evaluation Team if the need for additional intervention is necessary. c. Quarterly progress reports will be completed by the Program Evaluation Team on the		☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	PIP to ensure that all key activities were on track for completion. Key activities that were due to be completed have been finished. Key activities that were scheduled to conclude after the end of quarter eight are all progressing.	☐ On/ahead of schedule ☐ Behind schedule ☐ No longer applicable	representatives. Some strategy lead teams are meeting monthly. The Division of Program Evaluation and a CQI Coordinator from the Continuous Quality Improvement Team of the Division of Performance and Quality Improvement continue to provide ongoing trainings around CFSR and performance improvements that are linked to the PIP. These trainings are customized to meet the needs of the target participants and are often aimed at improving Caseworker Parent/Child visitation and the quality of assessments. In addition, the program evaluation team and CQI Coordinators teamed together to conduct a deep dive analysis for each region on items tied to the PIP (items 3, 5,6

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
progress of Goals, Strategies and Action Steps for the CFSR Program Improvement Plan and shared with DCS Leadership and CQI Coordinators for integration into the CFSR process.					and 15). Results identified each regions performance and which regions to target to identify strategies for improvement in other regions. During a recent debrief session the need to integrate item 6 (Achieving Permanency Timely) to the DCS ChildStat tracker was identified so this item can be monitored more frequently in the regions for improvement. DCS is also looking into additional support from the Children's Bureau to help improve outcomes from the measurement plan.

**Strategy 2**: Tennessee will integrate feedback from internal and external stakeholders into developing and assessing services provided to children and families.

**Progress:** All key activities for this strategy have been fully implemented and are successful at this time. Key activities will be ongoing and will be adjusted if needed based on feedback from internal and external stakeholders.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. DCS will partner with the Capacity Building Center in order to explore resources to better engage birth families in the development of programs and providing feedback on service delivery.	Quarter Four	□ Completed     02/2020     □ On/ahead of schedule     □ Behind schedule     □ No longer applicable	DCS is currently working with the Capacity Building Center for states to help explore avenues to better engage birthparents in the development of programs.	□ Completed         02/2020     □ On/ahead of         schedule     □ Behind schedule     □ No longer     applicable	In order to include feedback from birth parents on programs, DCS is distributing surveys to CFSR quality assurance staff and reviewers to assess gathered information shared during CFSR. Also, the department has engaged providers to recommend birth parents to participate in committees in order to provide feedback on service delivery and to assist in developing programs. If there are birthparents that would like to attend meetings with the department, private providers are also asked to attend. The CQI

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					division is working with Independent Living on Youth Advisory Councils. The department is using the CFSR process to recruit birth parents to participate on the CFSP advisory board and in Joint Planning.

	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
2.	DCS will begin conducting Stakeholder Focus Groups via WebEx annually to solicit the feedback of birth families in an effort to improve services provided.	Quarter Six	<ul> <li></li></ul>	DCS continues to use focus groups, surveys, and listening sessions with internal and external stakeholders to solicit feedback on improving services to children and families. DCS has begun working with the Capacity Building Center for States to help improve capturing the voice of the birth parent in improving services at the macro level.	<ul> <li>Completed 04/2019</li> <li>On/ahead of schedule</li> <li>Behind schedule</li> <li>No longer applicable</li> </ul>	DCS has used the CFSR interview process to gather birthparent feedback that can be used to listen to the voice of service recipients. Program Evaluation staff will be targeting Regional CQI Teams, such as Permanency

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					Circles to
					encourage them
					to involve birth
					parents in those
					meetings. The
					Program
					Evaluation Team
					has been
					soliciting feedback from
					CFSR Reviewers
					and providers for
					recommendations
					of parents that
					would be willing
					to serve on focus
					groups that will
					help DCS ensure
					that services are
					effective in
					meeting their
					identified needs.
					The Program
					Evaluation Team
					will host a
					Birthparent Focus
					Group in
					December 2020.

	Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
3.	DCS will solicit internal and external Stakeholder participation in the development of the Child and Family Service Plan (CFSP), which will incorporate the findings of the CFSR.	Quarter Two	<ul> <li></li></ul>	The Child and Family Service Plan Advisory Council continues to meet on a quarterly basis with membership across multiple internal and external stakeholder levels. Each quarter members are informed of important updates and progress made on the CFSP and CFSR.	□ Completed         06/2019     □ On/ahead of         schedule     □ Behind schedule     □ No longer     applicable	This work continues through the CFSP Advisory Council, as well as through the Citizens Review Panel's annual meeting and Joint Task Force.  CFSP Advisory Council meets quarterly to provide input on CFSP and APSR. Membership includes youth, providers, Guardians ad Litem, parent attorneys, university partners, FCRB members, CAB members, CAB members, and DCS employees of all levels. Joint Planning and Annual PIP Report was conducted in May 2020 and included external

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
					and internal
					stakeholders.
					A new birthparent
					survey was
					developed and
					expanded for CFSR
					participants to
					capture more
					accurate
					representation of
					stakeholder
					experiences.
					Stakeholder
					Focus Groups will
					occur during late
					quarter six/early
					quarter seven via
					Webex.

**Strategy 3:** Build partnerships and understanding between DCS, providers, Juvenile Judges and courts, Administrative Office of the Court (AOC), and attorneys to positively impact the overall child welfare system in order to promote permanency and reduce the number of children/youth in State's custody.

# **Progress:**

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
1. Engage the AOC, and the Executive Committee of the	Quarter Six	Completed 09/2020 On/ahead of schedule	Quarterly calls between DCS, the AOC, and the executive committee of the TCJFCJ are	<ul><li></li></ul>	First meeting between DCS, AOC, and TCJFCJ successfully

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Council of Juvenile and Family Court judges to increase understanding and to gather input into the department's work by offering quarterly meetings.		☐ Behind schedule ☐ No longer applicable	ongoing and scheduled through the end of 2021.	☐ Behind schedule ☐ No longer applicable	occurred on July 2, 2020. At this meeting, the group tackled COVID-19 related challenges. Group agreed to set up quarterly meetings. AOC agreed to schedule and send out invites for the recurring appointment. All key activities of this strategy have been completed. Quarterly meetings are ongoing and scheduled through next year (12/18/2020; 3/19/2021; 6/18/2021; 9/17/2021; and 12/17/2021. Two meetings have already occurred (7/2/2020 and 9/18/2020).
2. Chancellor Fansler will compile and provide a report to inform DCS of the results from his meetings and observations with the courts.	Quarter One	<ul><li></li></ul>		<ul> <li></li></ul>	On January 8,2019, Chancellor Fansler provided a 'Year End Report' summarizing his activities as Jurist in Residence (JIR).

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
3. DCS staff will observe 12 court proceedings, one court in each service region, from a systems perspective. Compile a report to compare with the Chancellor's report and findings. These results will inform the assessment. Regional Administrators (RAs), Regional General Counsels (RGCs), and Regional Investigative Directors (RIDS) and other DCS	Quarter One	□ Completed         02/2019     □ On/ahead of         schedule     □ Behind         schedule     □ No longer         applicable		<ul> <li>         ⊠ Completed         <ul> <li>02/2019</li> <li>On/ahead of schedule</li> <li>Behind schedule</li> <li>No longer applicable</li> </ul> </li> </ul>	Between August 2018 and December 2018, DCS staff observed court in all twelve regions. A report summarizing the observations was provided to interested stakeholders in February 2019.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
staff provided their ideas on what the courts should include. The Commissioner and DCS leadership made the final determination based on the input. The department also considered the court's availability, especially in multiple county regions.					
Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
4. DCS will conduct an assessment and identify 1-2 court jurisdictions in order to conduct a "deeper dive" based on the Chancellor's and DCS' reports.	Quarter Four	Completed 9/2020 On/ahead of schedule Behind schedule No longer applicable	In Blount, this has included providing training to local CASA on DCS policy and procedure; engaging the judiciary to foster a positive working relationship; providing 'exit strategies' training to DCS staff;	<ul> <li>☑ Completed</li> <li>09/2020</li> <li>☐ On/ahead of schedule</li> <li>☐ Behind schedule</li> <li>☐ No longer applicable</li> </ul>	This activity is completed. Two jurisdictions identified were Blount and Dickson counties. Ongoing work is still occurring as a result of this deeper dive.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
This will not necessarily include the courts with the most barriers but will instead incorporate the jurisdictions most willing to participate in a more structured project. The Department will engage the AOC and providers in this work as well (i.e., CASA, GAL, other attorneys, providers, etc.).			participating in a 'mini-conference' CLE; and working on improving docket management/case distribution for DCS attorneys.  In Dickson, this has included participating in at least quarterly meetings with the local judiciary; internal work analyzing county-specific data, particularly around court-ordered family support services cases; developing a positive relationship with CASA; and planning for a 'mini-conference' CLE.		
Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
5. Plan and hold a retreat with Regional Leaders and RGCs to further expand on the work with courts and partners. DCS	Quarter Three	<ul><li></li></ul>		<ul> <li></li></ul>	This retreat was held as planned on November 8 <sup>th</sup> , 2019. Regional leaders from all program areas participated.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
Jurist In Residence stressed the importance of making personal and professional connections with Judges by increasing number of formal and informal contacts and meetings, as these relationships will help guide practice and decisions. Regional General Counselors are involved in this work to help create a shared vision and a better understanding of the expectations and how to initiate these relationships. This retreat at an offsite location will be held to facilitate this shared vision.		□ No longer applicable			
Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress

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Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
6. The department's Regional Leaders (RAs/RIDs/Juvenil e Justice Directors (JJDs)) and RGCs will discuss the creation of a deeper working relationship with at least one Judge who is willing to be a champion of change.	Quarter Three	<ul> <li>         □ Completed</li></ul>	Judge Guffey continues to be the Champion of Change for DCS. She is also an active member of the CFSP Advisory Council and attends the state's annual Joint Planning Session.	<ul> <li></li></ul>	Williamson County Tennessee Judge, Sharon Guffee, is working with the department. The judge shadowed one of the department's lead reviewers on a CFSR case. She is also involved in department meetings and received training on CFSR.
Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
7. Address the court liaison position by identifying resources and needs in order for the position to be more consistent across the state.  a. Develop a directory of all Court Liaisons from each region and their immediate supervisor.	Quarter Three	<ul> <li></li></ul>	Monthly Court Liaison calls continue in order to provide training and ensure consistency across regions. Court Liaisons are now supervised under a specific team in each region to provide better consistency, training and supervision.	<ul> <li></li></ul>	Ongoing work is still occurring, including monthly statewide court liaison calls.

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
b. OCQI Team will conduct a Focus Group with Court Liaisons to determine areas of need.					
c. Develop a consistent job plan for all Court Liaisons across the state.					
d. Implement monthly WebEx meetings with Court Liaisons to discuss roles, areas of need, court issues, and current court improvement work being conducted across the state, as well as services available.					
e. Partner with the AOC to help strengthen the relationship of Court Liaisons and Juvenile Courts.					

Key Activity	Target Completion Date	Most Recent Status (current report date)	Most Recent Progress	Prior Report Status (prior report date)	Prior Progress
f. Train Court					
Liaisons to inform					
the court of the					
CFSR PIP, CFSP,					
and other					
initiatives.					
DCS Court					
Liaisons are					
caseworker level					
positions that are					
present at					
hearings and					
assist juvenile					
court staff in					
determining					
possible in-home					
services available for families. The					
Court Liaison is					
also responsible					
for completing the					
initial intake					
paperwork on					
families committed					
into DCS custody					
or who have court					
ordered in-home					
services including					
FSS or Probation.					

# **Part Two: Measurement Report**

Performance on statewide data indicators is jointly monitored and evaluated by the Children's Bureau and the state using data profiles. The state is not required to include information on state performance on the indicators in its PIP Progress Reports. For case review and systemic factor items, the Children's Bureau may request additional supporting details to inform evaluation discussions with the state or when making a final determination of goal achievement. Additional supporting details may include but are not limited to case review result reports, distribution of Strength ratings by sites, and copies of information management reports.

### **Case Review Items**

Instructions: For each case review item requiring improvement, complete the Case Review Item Information table below. Identify the case review item and the improvement goal for that item. Complete a Performance table for each case review item. To complete the table, enter the current data period in the first row beginning with the baseline period and update the table with information from the corresponding data period. Insert as many columns as needed to cover all of the reporting periods. Provide the total number of cases rated as a Strength in the second row; provide the total number of applicable cases for the item in the third row; and calculate the state's performance by dividing the number of cases rated as a Strength by the total number of applicable cases and insert this percentage in the fourth row. The state may add progress notes in the fifth row to provide additional information. Insert as many items and tables as required to address all the case review items requiring improvement in the approved PIP.

**Progress:** DCS made improvements in most CFSR Items that have measurement plan goals. DCS did not meet any new measurement plan goals during the 2020 review season. DCS saw a 12% improvement in Item 4 over 2019 performance. DCS also saw the following improvements over the 2019 season: Item 3 improved by 1%; Item 4 improved by 4%; Item 5 improved by 2%; Item 5 improved by 1%; Item 13 improved by 13%; Item 14 improved by 7%; and Item 15 improved by 2%. DCS only saw one area decline over the 2019 season. Item 6 performance declined by 1% from the 2019 review season.

Case Review Item: Item 2 – Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care. Improvement Goal (%): 48%

#### **Performance**

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	22	23	-	27	-

Number of Total Applicable Cases	55	68	-	59	-
Performance (%)	40%	34%	-	46%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 2% to meet this goal. Six of twelve regions exceeded the improvement goal with performance ranging from 50% to 71% strength ratings. The six regions that did not meet this goal (Smoky Mountain, Davidson County, Southwest, Tennessee Valley, Northeast, Northwest), had performance ranging from 0% to 25% strength ratings.

Case Review Item: Item 3 – Risk and safety assessment and management.

Improvement Goal (%): 27%

#### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	33	35	-	37	-
Number of Total Applicable Cases	144	152	-	152	-
Performance (%)	23%	23%	-	24%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 3% to meet this goal. Six of twelve regions exceeded the improvement goal, with performance ranging from 29% - 42% strength rating. The six regions that did not meet this goal (Davidson County, Upper Cumberland, Mid-Cumberland, Northeast, Shelby County, East Tennessee) had performance ranging from 8% to 21% strength rating.

DCS conducted a deep dive analysis of Item 3 during the month of August 2020. Findings from the analysis were shared with the Children's Bureau on September 2, 2020. The two primary practice issues that negatively impacted ratings for Item 3 were not including the known history of the family in safety assessments, as well as not including all family/household members in these assessments.

Case Review Item: Stability of foster care placement.

Improvement Goal (%): 88%

### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	63	54	-	58	-
Number of Total Applicable Cases	76	84	-	84	-
Performance (%)	83%	64%	-	69%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 19% to meet this goal. Two of twelve regions (Tennessee Valley and Southwest) exceeded the improvement goal, both with a 100% strength rating. The ten regions that did not meet the improvement goal had ratings ranging from 50% to 86% strength. DCS is currently conducting a deep dive analysis of Item 4 and will be discussing findings with the Children's Bureau on November 5, 2020.

Case Review Item: Item 5 – Permanency goal for child.

Improvement Goal (%): 49%

### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	32	39	-	40	-

Number of Total Applicable Cases	75	84	-	84	-
Performance (%)	43%	46%	-	48%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 1% to meet this goal. Seven of twelve regions exceeded the improvement goal with rating ranging from 50% to 86% strengths. The five regions (Smoky Mountain, Davidson County, Upper Cumberland, Southwest, Shelby County) that did not meet the improvement goal had ratings ranging from 25% to 33% strengths.

DCS conducted a deep dive analysis of Item 5 during the month of August 2020. Findings from the analysis were shared with the Children's Bureau on September 2, 2020. A key finding from the analysis included a number of children who had permanency goals established that were not viable due to the circumstances of the case.

Case Review Item: Item 6 – Achieving reunification, guardianship, adoption, or other planned permanent living arrangement. Improvement Goal (%): 43%

#### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	28	31	-	30	-
Number of Total Applicable Cases	76	84	-	84	-
Performance (%)	37%	37%	-	36%	-

**Progress Notes: Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 7% to meet this goal. Five of twelve regions exceeded the improvement goal with strength ratings ranging from 50% to 86%. The seven regions (Smoky Mountain, Davidson County, South Central, Mid-Cumberland, Southwest, Tennessee Valley, Shelby County) had strengths ratings that ranging from 0% to 33%).

DCS conducted a deep dive analysis of Item 6 during the month of August 2020. Findings from the analysis were shared with the Children's Bureau on September 2, 2020. Findings from the analysis included court delays; lack of work with the permanency option; and permanency goals that were not achievable as primary causes for delays to permanency for children and youth.

Case Review Item: Item 12 – Needs and services of child, parents, and foster parents.

Improvement Goal (%): 25%

### **Performance**

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	30	27	-	29	-
Number of Total Applicable Cases	144	152	-	152	-
Performance (%)	21%	18%	-	19%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 6% to meet this goal. Five of twelve regions (Smoky Mountain, South Central, Southwest, Northwest, and East Tennessee) exceeded the improvement goal with strength ratings ranging from 25% to 29%. The seven regions that did not meet the improvement goal had ratings ranging from 8% to 21%.

Case Review Item: Item 13 – Child and family involvement in case planning.

Improvement Goal (%): 39%

### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period	April 1 – September	April 1 – September	October 1 – March	April 1 – September	-
(insert date or range)	30, 2018	30, 2019	31, 2020	30, 2020	

Number of Cases Rated as a Strength	48	47	-	57	-
Number of Total Applicable Cases	141	151	-	149	-
Performance (%)	34.%	31%	-	38%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve 1% to meet this goal. Seven of twelve regions exceeded the improvement goal with strength ratings ranging from 42% to 55%. Five regions (Davidson County, Upper Cumberland, Southwest, Northeast, and Shelby County) did not meet the improvement goal and had strength ratings ranging from 255 to 33%.

Case Review Item: Item 14 - Caseworker visits with the child.

Improvement Goal (%): 39%

### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	49	66	-	76	-
Number of Total Applicable Cases	144	152	-	152	-
Performance (%)	34%	43%	-	50%	-

**Progress Notes:** DCS exceeded the improvement goal during year one by 4%. Tennessee continued to improve during the 2020 CFSR season by an additional 7% and is currently performing at 11% above the improvement goal. Nine of twelve regions exceeded the improvement goal with strength ratings ranging from 42% to 71%. Three regions (Davidson County, Upper Cumberland, Mid-Cumberland did not meet the improvement goal and had strengths ratings from 25% - 33%.

Case Review Item: Item 15 - Caseworker visits with the parents.

Improvement Goal (%): 21%

### Performance

-	Baseline	Reporting Period 1	Reporting Period 2	Reporting Period 3	Reporting Period 4
Data Period (insert date or range)	April 1 – September 30, 2018	April 1 – September 30, 2019	October 1 – March 31, 2020	April 1 – September 30, 2020	-
Number of Cases Rated as a Strength	23	24	-	26	-
Number of Total Applicable Cases	130	144	-	140	-
Performance (%)	18%	17%	-	19%	-

**Progress Notes:** DCS did not meet the improvement goal during year two. DCS must improve by 2% to meet this goal. Six of twelve regions exceeded the improvement goal with strength ratings ranging from 23% to 33%. Six regions (Smoky Mountain, Davidson County, Upper Cumberland, South Central, Southwest, Shelby County) did not meet the improvement goal and had strengths ratings ranging from 0% to 20%.

DCS conducted a deep dive analysis of Item15 during the month of August 2020. Findings from the analysis were shared with the Children's Bureau on September 2, 2020. The lack of quality visits with birth parents was found to be the key indicator driving ratings. This included not visiting birth parents in a private location, or at a location convenient to the parent. Also, the frequency of the visits was found to be an area of improvement for some regions.

## **Systemic Factors**

**Systemic Factor Information** 

Systemic Factor Item: Case Review System (Goal Three)

**Progress:** Tennessee continues to work closely with the judiciary through Safe Baby Courts: Blount County Juvenile Court Deep Dive Project: DCS/Court Continuous Quality Improvement Teams with Blount County and Marshall County Juvenile Courts: and

involvement of Juvenile Court Judges on the Child and Family Service Plan Advisory Council. The DCS ChildStat process monitors the progress of children as they move to permanency to spot potential barriers and has proven to be successful.

## Systemic Factor Item: Service Array (Goal One/Goal Two/Goal Three)

**Progress:** Tennessee continues to work closely with providers in an effort to strategically implement the Families First Prevention Services Act. This work is facilitated through the FFPSA Congregate Care Workgroup and Prevention Workgroup. The Program Evaluation Division continues to work with providers to ensure that quality services are delivered that are tailored to the needs of families through the monthly QA/QI meetings and Quarterly Monthly Provider Summary Reviews. The Program Evaluation Division conducted provider CFSRs November 2020 through February 2021, and reviewed five private providers. DCS submitted a request for technical assistance from the Capacity Building Center for States around placement stability. This request was accepted and the state has begun to work with the Center to conduct an analysis of contributing factors.

## Systemic Factor Item: Foster and Adoptive Parent Licensing, Recruitment and Retention (Goal Three)

**Progress:** Tennessee applied for and received the NIECE grant to meet the FFPSA ICPC requirement. The functioning of this system was noted as an issue during the Statewide Assessment.

Tennessee dually approves foster parents as foster/adopt parents. Foster Parent approval standards were updated according to recommended changes from the Children's Bureau to DCS Policy 16.4, Foster Home Selection and Approval becoming effective October 2019. Assurance that licensing standards are applied to all foster homes includes checks and balances between foster parent support workers and home study contractors. Foster home approval requires a two-tiered approval process. On a quarterly basis, regional quarterly case process reviews occur for foster parent case files.

Foster Parent approval involves an extensive criminal background history check which is reviewed by the home study writer and the foster parent support unit. At the Central Office level, the Resource Eligibility Team (RET) reviews home approval documentation, specifically the criminal background checks, for IV-E compliance. This has been noted as a strength during IV-E reviews and CFSR review.

Each region writes an annual recruitment and retention plan utilizing regional demographic data of the children and families and the foster homes served by the region. Based on the identified needs, the plan identifies general and targeted recruitment efforts of the region. The recruitment and retention plan also include goals to retain foster parents and engage them as partners in the recruitment process. Identifying needs on the front end of the foster care process allows for success in permanency. In Tennessee, over 80% of children are adopted by their foster parents.

Plans are approved by Central Office and monitored quarterly to address progress of the plan, discuss successes and challenges to meeting recruitment goals and provide technical support.

The child's Child and Family Team conducts diligent searches for relatives/kin at time of custody and quarterly throughout the case for placement options and family support. Searches for relative/kin are not isolated the removal county but statewide and nationwide through the ICPC process. Anyone identified as a placement option and willing to foster is assisted through the foster home approval process.

To improve the success of interjurisdictional placements through the ICPC process, for outgoing placements, a protocol was established to assist regional staff in making referrals that require the services of a private provider agency by way of a unique care agreement. Currently, efforts are focused on expanding the protocol to address service care needs for the child and family and insurance coverage to support the placement during planning and prior to placement. These efforts will provide stabilization to placement where permanency can be reached.

For incoming placements, ICPC processes the request to the local office for completion of home studies. ICPC has a timeframe noted to the local office and request status updates at the 60-day mark to ensure timely completion.