

Tennessee Department of Children's Services



Annual Report

Fiscal Year

July 1, 2008-June 30, 2009

Dear Governor Bredesen,

The Department of Children's Services (DCS) continues its efforts to ensure the safety, stability and permanency in the lives of those we serve and address issues of community safety. Below are a few of the Department's more memorable accomplishments during the past year:

- The Multiple Response System (MRS) was legislatively mandated in 2005 with a statewide implementation deadline of 2010. As of April, 2009, all 13 regions in the State of Tennessee were fully implemented ahead of schedule allowing for the opportunity to make even more improvements. This practice model allows for more than one approach in responding to child abuse and neglect reports. It moves the system from investigating in an incident based manner to a more strengths-based, family assessment approach for some reports. This model embraces the engagement of parents, involving families in protecting their children and community involvement in addressing the needs of our children and families. There are three tracks to the MRS system which include investigation, assessment and resource linkage.
- Tennessee continues to work diligently in our efforts to find permanency for children in full guardianship. Since, December, 2006, DCS has participated in the IV-E Waiver Demonstration project. During this time period we have had approximately 380 children leave custody to Subsidized Permanent Guardianship with either a relative or kin family. Our participation in the Waiver Demonstration project paved the way for new federal legislation known as Fostering Connections to Success and Increasing Adoptions Act. In FY 07-08, there were 1,091 adoptions finalized. And, during FY 08-09, 1,038 children reached permanency through adoption. Despite the fluctuations, our success with finalized adoptions continues to make our state one of the top in the nation.
- Tennessee received its Child and Family Service Review (CFSR) final report in March, 2009. DCS is working diligently to develop a Program Improvement Plan that requires the approval of the Administration for Children and Families (ACF). The plan is designed to improving outcomes for children in Tennessee.
- The department once again closed the year successfully meeting increased reversion targets for the fourth consecutive year, demonstrating our continued excellence in fiscal planning and financial management.
- The Accreditation process continued to move forward with the submission of the DCS Self Study to the Council on Accreditation (COA). Site visits by COA Peer Reviewers began in November of 2008 with a visit to the DCS Central Office. Regional reviews were initiated in January 2009 and will conclude in November 2009. It is anticipated that official notification of the successful completion of the accreditation process will occur in January 2010.



- One of the most exciting improvements in Juvenile Justice is the implementation of Aggression Replacement Training (ART) in our state youth centers and group homes. ART is a nationally recognized evidence-based program that has a proven track record in reducing delinquent behavior. It will be fully operational by June 30, 2009 and will significantly improve the quality of programming for our high risk youth.
- In spite of the economic crisis experienced throughout the nation, we are confident that improvement to programmatic outcomes and the management tools in place will equip us to address the fiscal challenges of the coming year.

Service to the children and families of the State of Tennessee is a sometimes difficult but highly rewarding task. Although there is so much yet to be done, clearly much has been accomplished. The following report will give you a much more detailed snapshot of where we are as a department and public service entity.

Respectfully,

A handwritten signature in black ink that reads "Viola P. Miller". The signature is written in a cursive, flowing style.

Commissioner Viola P. Miller

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Vision, Mission and Values

Vision

Leading the way for safety and permanency in the lives of children and families by championing excellence in service.

Mission

Our mission is to empower families, and support community safety and partnerships, to help ensure safety, permanency and well-being for children.

Values

Integrity - The department values honor, respect, trustworthiness and principled action.

Commitment to Excellence - The department expects peak performance from all levels of staff, every day, in every degree.

Diversity - The department respects, celebrates and seeks to maintain the integrity of all cultures.

People - The department values all people, promoting partnerships between staff, families and community partners in order to create a comprehensive network of services.

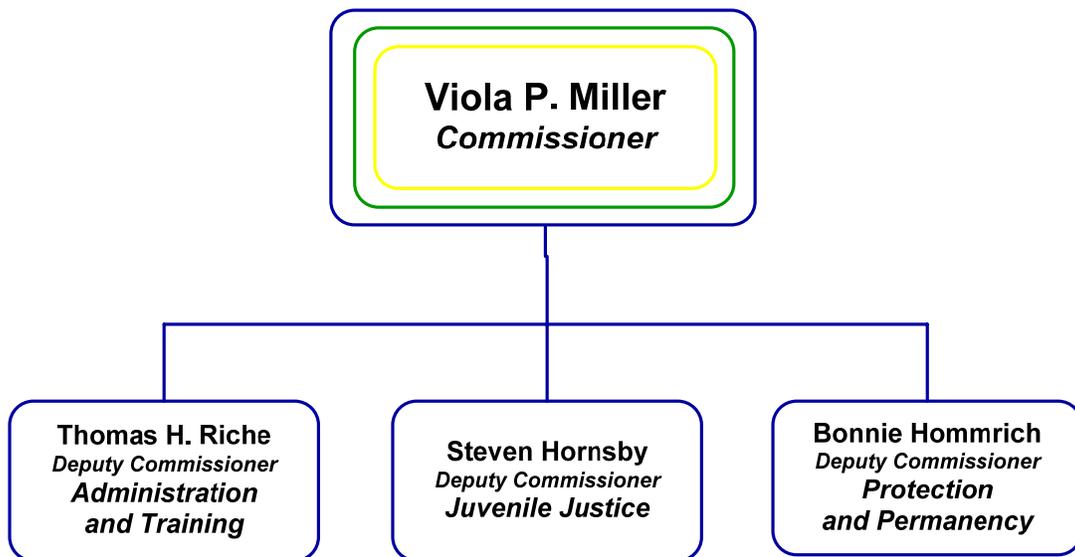
Family-Focused - The department takes a strengths-based service approach, coordinating with family members as well as professionals and others to form an all-inclusive team promoting stability and permanence for children.

Community Partnerships - The department actively engages community stakeholders.

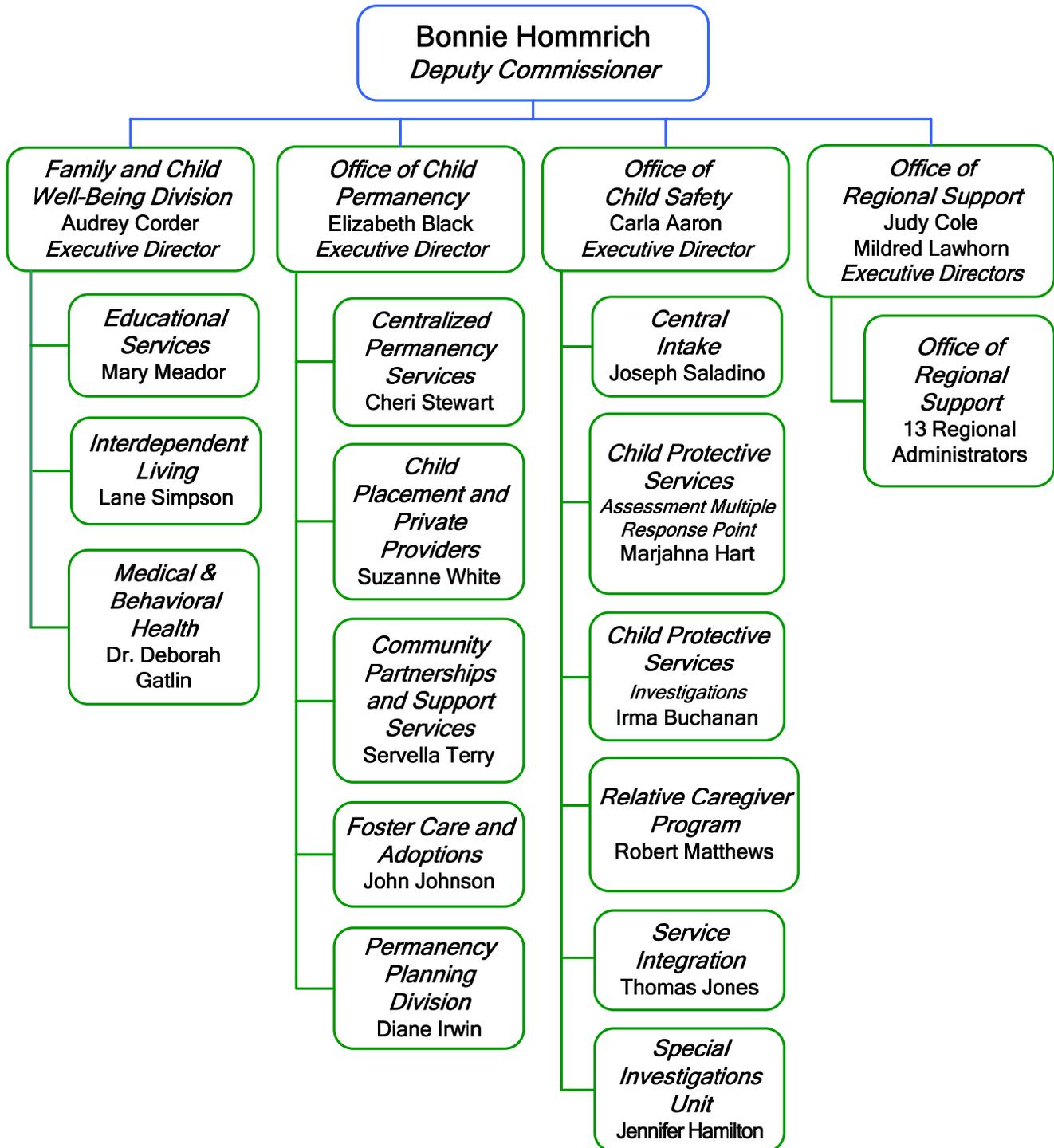
Safety - The department makes every effort to ensure the safety of children, families, staff and the community.

Employees - The department strives to create a work environment that allows for personal and professional growth, affording each employee a high quality of life. The department will also respect and promote each staff member's personal family interests recognizing that we must have the opportunity for safety and stability in our own lives before we can adequately and appropriately serve others.

DCS Organization Chart



Protection and Permanency



The department's primary responsibility is always to protect children from abuse and neglect. In order to uphold this responsibility, DCS staff investigate reports of abuse and neglect, working with families to resolve issues that may threaten the safety or well-being of children. DCS also works to maintain children in their own homes whenever safe and appropriate. The department is also responsible for providing care for children who cannot remain in their own homes. This includes temporary out-of-home care for children whose safety is in jeopardy.

ardy. The department works with families and other involved parties to achieve permanency and stability in the child's living situation. When it has been determined that a child cannot safely return home, the department strives to provide a nurturing permanent home through placement with relatives, friends or adoption.

Protection and Prevention also encompasses the department's Interdependent and Transitional Living Program. This program offers important opportunities expanding the competencies, resiliency and self-confidence of youth transitioning from foster care to independence. An estimated 500 young adults leave foster care at age 18 or 19 each year in Tennessee without a formal connection to family. These youth are typically in need of services and support to assist with their education, physical health, mental health, employment, housing and personal support needs. This program seeks to help these young adults through the provision of such services.



Family and Child Well-Being Division

Audrey Corder, Executive Director

The Office of Well-Being has three divisions: 1) Education, 2) Interdependent Living and 3) Medical and Behavioral Health. These divisions make every attempt to support the children they serve and are committed to helping make families secure, healthy and happy. Through its Education Division, this office manages the in-house schools operated by the department or its private contract agencies to ensure compliance with education laws, particularly those regarding special education. Its Interdependent Living Program aids in the transition of youth to adulthood through training, education, and financial support and has a goal that no child leaves care without a connection to a caring adult. Finally, the Division of Medical and Behavioral Health works constantly to maximize service delivery to meet the physical and mental health needs of children by collaborating with other state agencies and community partners (e.g., Bureau of TennCare, Department of Mental Health and Developmental Disabilities, Department of Health, Private Contract Providers, etc.), maintaining qualified nurses and psychologists to provide consultation to field staff, advocating and accessing services for children and families, and ensuring that children and youth are protected from harm through medication monitoring and oversight of the use of restrictive interventions such as seclusion and restraint. Each region in the DCS has a Well-Being team that works closely with central office as well as their respective regional office.

Educational Services

Mary Meador, Director

The Education Division of the Department of Children's Services oversees education services for students in state custody who reside in Youth Development Centers (YDCs) or DCS group homes, and is recognized by the Tennessee Department of Education as a Local Education Agency (LEA) for the schools in these facilities. In addition, the Education Division, primarily through its

regional education specialists, provides technical assistance to contract facilities with on-site schools. The division staff also advocates for students in state custody who attend public school.

All youth committed to the Department of Children's Services are screened by a community or facility classification/assessment team to determine their educational needs. A treatment team develops an Individual

Program Plan (IPP) for each student. An Individual Education Program (IEP) is developed for students eligible for special education services.

Interdependent Living Program

Lane Simpson, Director

The purpose of the Interdependent/Transitional Living Program is to build a network of relevant supports and services for participating youth. This network is designed in such a way that these youth will have ongoing connections with caring adults, be productive individuals within their community, obtain and maintain employment, as well as obtain educational goals. Under this program, participating youth may receive financial assistance and skills training, as well as other resources to facilitate their transition to adulthood.

Interdependent/Transitional Living is responsible for developing a statewide program in concert with the provisions of the Chafee Foster Care Independent Living Program (CFCILP) and the Education and Training Voucher (ETV) Program. These programs allow the state to increase its capacity to engage the community and provide culturally sensitive and developmentally age-appropriate services. These services are strengths-based, family-focused and child-centered, serving youth and young adults ages 14-22 (up to their 23rd birthday), who remain in care and/or age out with interdependent living services.

Medical and Behavioral Health

Dr. Deborah Gatlin, Chief Medical Officer

The Division of Medical and Behavioral Health was created in 2002 in response to the Brian A. Settlement Agreement and is responsible for reviewing and overseeing the implementation of policies, procedures and

practices related to the medical and behavioral health care of children in the care and custody of the Department of Children's Services. Within DCS Central Office, this division consists of the Chief Medical Officer, and two Nurse Consultants who interface with the Director of TennCare Policy. Regionally, the division has Doctoral Mental Health Clinicians and Regional Nurses who interface with Health Advocacy Representatives and Service and Appeals Tracking Staff. This division's primary mission is to ensure that all children in the care of DCS and their families have appropriate access to all needed services to promote quality of life and achieve permanency. The division provides consultative supports in the area of medical and behavioral health for DCS staff, resource parents and community stakeholders (e.g., private contract agencies) to improve services for children and their families. This division also functions as the health advocacy area of the department and promotes improved access to medical and behavioral services for children who are at risk of coming into state custody. This division serves as a liaison for other state agencies, as well as TennCare managed care organizations (MCOs), and behavioral health organizations (BHOs). It also aids in departmental implementation of compliance with TennCare issues and assists in developing policies and procedures related to health services for children in custody. Support and technical assistance to the regional health advocacy units is also accomplished through this division. Additionally, the division provides oversight of health services and technical assistance for the departmental residential treatment facilities and group homes as well as the Youth Development Centers. The division oversees practice and policy change concerning protection from harm issues, which include the use of psychotropic medication and the use of seclusion and restraint methods for children in care.



Office of Child Permanency

Elizabeth Black, Executive Director

The mission of the Office of Child Permanency is to ensure the provision of adoption, foster care and permanency planning services for children and families throughout Tennessee. The goal is to ensure that every child in state custody returns to his or her own family or becomes a member of a new family in a timely manner. The Office of Child Permanency has six primary divisions: Foster Care and Adoptions, Child Placement and Private Providers, Permanency Planning, Community Partnerships and Support Services, Child Welfare Reform, and Centralized Permanency Services.

Centralized Permanency Services

Cheri Stewart, *Director*

The Division of Centralized Permanency Services is responsible for assuring high quality performance through individual case management in program areas which have state-wide impact on permanency for children and families served by the department and community partners, as well as impact on persons who have secured adoptions in Tennessee.

These programs include the Interstate Compact on the Placement of Children (ICPC), the Adoption Registry, the Putative Father Registry, and the Post-Adoption Services.

Annually, the Interstate Compact on the Placement of Children manages over 2,500 new referrals/requests for placement, maintaining an active caseload of approximately 1,500 active cases. The Adoption Registry accepts approximately 1,500 records for preservation and sealing. The Putative Father Registry processes approximately 5,038 requests for clearances annually. The Post-Adoption Services receives over 400 requests for access to records - approximately 100 requests for contact which results in over 250 search activities.

Child Placement and Private Providers Division

Suzanne White, *Director*

The Child Placement and Private Providers Division oversees the provision of technical assistance and support to the regions in de-

veloping a collaborative system of care between private contract agencies and the department. This division is a conduit through which residential services are coordinated and supported in a manner that improves outcomes for children in the care of DCS.

This division manages all active contracts with public and private agencies to provide out-of-home care and services to families with children in the custody of the department. A significant portion of those contracts are out-of-home continuum contracts. Continuum contracts allow both providers and regions to coordinate services to children and their families while providing the flexibility to customize service delivery on an individual basis.

This division is responsible for providing support, information, guidance, training, coordination and oversight of residential services to ensure an adequate supply of residential resources are delivered expeditiously and efficiently. Detailed below are some of the various functions of the Child Placement and Private Providers Division.

Performance Based Contracting

The department's Performance-Based Contracting (PBC) initiative is an overarching plan to achieve better outcomes for the children served in out-of-home care by DCS' privately contracted providers. Prior to the implementation of the PBC model, DCS purchased out-of-home care services for children in its custody via a per diem reim-

bursement system. Performance-Based Contracting uses an innovative approach that stresses permanency outcomes for children and utilizes a payment structure that reinforces provider agencies' efforts to offer services that improve those outcomes. Those permanency outcomes that will be measured include: improved timeliness and likelihood of permanency (reunification, adoption, or guardianship), reduced placement moves and reduced instances of re-entries into care.

General PBC Initiative Update

As of July 1, 2009, with the implementation of Phase IV of the PBC initiative, the entire network of DCS primary contracting agencies is now made up of Performance-Based Contractors. Including Phases I, II, III and IV, and numbering 35 altogether, these agencies represent all levels of service from standard foster care through to the highly specialized and intensive Level IV sub-acute Psychiatric Hospitalization. This network of PBC providers possesses the service array to appropriately address any of the ever-changing needs of the children and families coming to the attention of the department.

The beginning of the 2009-10 fiscal year (July 1, 2009) marks the date of full PBC network implementation. From this point forward all primary contractors with DCS will do so under a performance-based contract. These contractors will be evaluated annually on data collected and analyzed by the department in conjunction with consultants from the Chapin Hall Center for Children.

On a yearly basis, usually in mid to late-October, individual meetings are held with each of the PBC providers in order to review their previous fiscal year outcomes and determine the financial calculation of either re-investment dollars earned by PBC agencies or any financial repayment of funds incurred on the part of these providers.

This financial information consists of each

individual agency's outcomes translated through calculations from DCS' Office of Finance and Program Support into actual dollar figures. If a provider's performance throughout the fiscal year saved the state funding, that provider will share in that savings in the form of re-investment dollars. These are actual funds paid to that provider for improved performance. The converse is also true; if a provider has cost the state more than their expected allocation, they must refund a portion of that overage to the state.

Phase-Specific PBC Update for the 2008-09 Fiscal Year

Phase I: Centerstone, Frontier Health, Helen Ross McNabb, Omni Visions and Youth Villages

During the October 2009 review of Phase I PBC performance relative to the 2008-09 fiscal year, it was determined that each of the five Phase I providers earned re-investment dollars during the year under review. Collectively, this represents a savings in excess of \$5,000,000 in state allocated funding.

Phase II: Florence Crittenton Agency, Free Will Family Ministries, Holston United Methodist Home for Children, Partnership for Children, Families and Adults, Porter Leath and Smoky Mountain Children's Home

During the October 2009 review of Phase II PBC performance relative to the 2008-09 fiscal year, it was determined that of the six Phase II providers, four earned re-investment dollars in the fiscal year in question. Collectively, Phase II providers realized savings in excess of \$1,000,000 in state allocated funding during the fiscal year in question.

Two of the six Phase II providers were unable to improve on their baseline outcomes used to calculate re-investment or repayment of funds to the state. This caused the state to overpay these providers relative to what DCS would normally expect to spend. As a result these providers will be required to re-

pay all, or in some instances a portion of, these funds. The total repayment to the state for these two providers came to over \$200,000.

Phase III: Meritan, Camelot, Upper Cumberland Human Resources Agency, Memphis Recovery Center, CRC Health-New Life Lodge, Middle Tennessee Collaborative, Tennessee Children's Home and Phoenix Homes

During the October 2009 review of Phase III PBC performance relative to the 2008-09 fiscal year, it was determined that of the eight Phase III providers, four earned re-investment dollars in the fiscal year in question. This represents a savings in excess of \$700,000 in state allocated funding.

This review also revealed that of the eight Phase II providers, four of those displayed an inability to improve on their baseline outcomes used to calculate re-investment or repayment of funds to the state. This caused the state to overpay these providers relative to what DCS would normally expect to spend. This overpayment for all four of those Phase III providers who found themselves in this situation came to over \$350,000.

Fiscal year 2008-09 was the first year of participation for these four Phase III providers and, as such, they are the beneficiary of the initial hold-harmless year and will not be required to actually repay funds.

Phase IV: Alternative Youth Services-Magnolia, Catholic Charities, Children's Home-Chambliss Shelter, Child and Family, Childhelp USA, Counseling and Consultation, Goodwill Homes, Highland Youth Center, Keys Group Holdings, King's Daughters School, Natchez Group Home, New Vision Fellowship, Parkridge-Valley Hospital, Turn Around Center, Wayne Halfway House and Youthtown

In July of 2009, 16 new PBC providers were added through Phase IV of the initiative. In-

dividual meetings and visits were initiated to all of the Phase IV providers prior to and around their start date of July 1, 2009. The purpose of the meetings and visits was to orient these new PBC providers to the model and review their baseline Chapin Hall PBC data. Other intermittent contacts were made with these providers to gauge progress toward outcome measures and to offer technical assistance and support. In mid-March of 2010, further meetings will be facilitated with these providers in order to evaluate the 16 Phase IV agencies' first six months of participation in the network.

Community Partnerships and Support Services Division
Servella Terry, Director

The Division of Community Partnerships and Support Services is responsible for developing partnerships and collaborations with consumers, stakeholders, and private providers in an effort to deliver high quality services. This division is tasked to develop and implement a standardized approach for building community partnerships. In addition, this division is responsible for providing high quality technical assistance, consultation, and support to the regions in the areas of team building, cultural competency, neighborhood-based partnerships, faith-based engagement, the retention of resource families, and other community efforts. Its mission is to ensure that community work is done efficiently, respectfully and with maximum benefit for the children and families DCS serves. Each region has engaged community stakeholders to plan and problem-solve as well as develop local partnerships.

In Shelby County, Cathedral of Faith, a local faith based collaborative, is providing resources and services for families within local zip codes. This collaborative has a partnership with the department and is actively recruiting resource homes as well as serving

on cross functional and CQI teams. Due to the high volume of requests for furniture, Cathedral of Faith has established a furniture warehouse to serve families in the neighborhoods. Cathedral of Faith took the lead on providing technical assistance to Mid-Cumberland on how to recruit and train community representatives. These representatives play a vital role in Child and Family Team Meetings (CFTMs). South Memphis Alliance, another community collaborative in Shelby, partners with DCS to serve youth and families with substance abuse issues. CFTMs are also held at the agency.

Faith-based efforts have increased since the last report. Attention has been focused on the rural communities in an effort to partner with faith leaders to assist with recruitment of resource parents and relative caregivers. Friendship Baptist Church of Cross Plains, Tennessee, in rural Robertson County, has taken the lead in providing technical assistance to other faith communities upon request. There are two regions currently planning Faith-Based Roundtables as a result of the Permanency Convenings held in the spring. Several community informational forums were conducted in the Southwest Region for the purpose of addressing critical community barriers and challenges. These forums were attended by local residents, judges and court staff, mayors, school superintendents, etc.

The Division of Community Partnerships and Support Services provided a document titled "How to Partner with the Department". In the early part of 2009, the Division of Community Partnerships and Support Services, in collaboration with Child Safety, planned and implemented three Community Summits. These summits were held in Jackson, Chattanooga, and Murfreesboro. Two national consultants, representing community engagement, facilitated the meetings in Jackson and Murfreesboro. The regions were tasked to identify strategic action steps and

provide necessary outcomes showing that children are being diverted from the system. Regions were also encouraged to increase their activities of engaging local community participants.

Foster Care and Adoptions Division **John Johnson, *Director***

The Foster Care and Adoptions Division develops policy and oversees services aimed at providing training and ongoing support for resource parents and custodial caregivers to assist them in meeting the unique needs of children and youth in state custody. This division assures that the Department of Children's Services uses a model of resource parenting consistent with the DCS Practice Model. This DCS practice model encourages resource parents to support birth families and encourage reunification. Resource parents are also encouraged to provide a nurturing and stable placement for children in state custody, and offer or assist in finding a permanent family relationship for children who are not able to return to their own parents. This division also oversees the development of effective and child-focused placement practices and performs centralized operations necessary to the regions in order to support and maintain resource homes for children. The Foster Care and Adoptions Division strives to support the efforts of resource families caring for children in the state's custody while working to achieve permanency for each child in care.

Adoption Services offers child-focused services based on the philosophy that every child has the right to a loving, nurturing and safe family. Some of the children served have significant physical, emotional or educational challenges. Most children/youth range from early school-age to teenage years. Some have one or more siblings.

The Division of Foster Care and Adoptions is

also responsible for the recruitment of resource homes and to ensure all children in state custody have the option to be placed in family-like settings. This division develops statewide pools of resource parents who reflect the type of children in care through engaging diverse communities in a respectful partnership, including the communities from which these children come. Also within this division is the Subsidized Permanent Guardianship Program (SPG). The Department of Children's Services has been involved in the IV-E Waiver Demonstration project since December 2006. Due to the recent legislation called "Fostering Connections to Success and Increasing Adoptions Act of 2008" the IV-E Waiver Demonstration was ended on March 31, 2009. Since April 1, 2009 DCS has participated fully in the Federal SPG program. In order to provide DCS staff, Court Staff, Attorneys and Judicial staff with some information on the changes we are providing the below bulleted points. They are:

- As of March 31, 2009 Tennessee's IV-E waiver (SPG) project ended.
- The Federal SPG program began on April 1, 2009.

Criteria for the Federal program:

- Child/youth must be in DCS custody.
- Child/youth will qualify for a subsidy if they are placed in the fully approved relative/kin home for six (6) months.
- The definition of "relative" that has been approved by the Federal government is: All children and youth in Tennessee who have been living for a consecutive six (6) months in an approved home of a person with whom he or she is related to by blood, marriage or adoption or with whom the child had a significant relationship that pre-existed DCS placement such as godparent, friend, neighbor, church member,

minister or teacher.

- This definition does not include Resource Parents unless the Resource Parent had a pre-existing significant relationship with the child/youth. (Expedited Resource Homes)
- The State must determine that reunification and adoption are not appropriate options for the children. These efforts must be documented within CFTM notes and case recordings.
- The subsidy will be available up until the age of 18.
- Youth over the age of 14 must be consulted about guardianship arrangements.
- The state must make reasonable efforts to place siblings in the same foster care, kinship or adoptive home or to maintain connections among siblings.
- Youth who leave custody after age 16 for relative/kin guardianship will be eligible for education and training vouchers for higher education or other vocational training. These children are also able to access Independent Living Services.

Permanency Planning Division **Diane Irwin, *Director***

The mission of the Permanency Planning Division is to model, coach and employ collaborative decision-making in all aspects of child welfare practice. This division has the primary responsibility for supporting the implementation of the Child and Family Team Meeting (CFTM) process as well as a high quality permanency planning process. The CFTM is to be the primary tool for making all placement-related and planning decisions for and with children and their families. This division is also responsible for supporting timely permanence for children in the custody of the state and those at risk of state custody.



Office of Child Safety

Carla Aaron, *Executive Director*

The Office of Child Safety has the following programs: Central Intake, Investigations, Assessments, Resource Linkage, Relative Caregiver Support, Service Integration, Children's Trust Fund and the Special Investigations Unit. These divisions are responsible for the protection of children from abuse and neglect by responding to reports of abuse and neglect, identifying risk factors and working with families to resolve issues that may threaten the safety or well-being of children. The Multiple Response System (MRS) has been implemented in Tennessee that allows for more than one approach to responding to child abuse and neglect reports. The multiple response approach embraces the engagement of parents, involves families in protecting their children, and encourages community involvement in addressing the needs of children and families. There are three tracks to this approach which include investigation, assessment, and resource linkage.

Central Intake

Joseph Saladino, *Director*

Central Intake (CI), reporting to the Office of Child Safety, is the department's child abuse and neglect 24-hour reporting hotline. Central Intake (CI) receives reports of child abuse/neglect from all 95 counties in Tennessee as well as from other states and countries. Central Intake receives reports of abuse and neglect in a variety of formats—telephone, fax, letter, email, and via web-based reporting. Central Intake provides a consistent and uniform means for receiving, screening, prioritizing and dispatching reports alleging child abuse and neglect for investigation. Central Intake has deployed a revised Structured Decision Making (SDM) tool as part of the overall multiple response approach in October 2008, to further enhance screening, investigation, assessment and resource linkage track assignment.

Central Intake continues to use the telephone-computer interface system "Interaction Client", installed in April 2006, which is also referred to as "I-3". Interaction Client is a powerful desktop interaction and communication manager. It offers more functionality than a regular office telephone and is currently used to manage Central Intake electronic communications including telephone calls, voice mail, speed dial directories, and conference interactions.

Several types of reports can be produced to track call production and efficiency, such as an analysis of number of calls received by period, graphs showing call volume increase and decrease with specified parameters, number of abandoned calls and average wait time. Reports can also be run to analyze personnel and call interactions, user performance, queue data, and monitor phone lines. Some of the statistics derived from I-3 Interaction Client and TNKids for accountability, production and agent performance measures are as follows:

- Calendar Year 2006
 - ◇ 111,234 calls were made to Central Intake
 - 100,335 calls were answered
 - 10,899 calls were dropped/abandoned
 - ◇ 67,532 were assigned for investigation
 - 11,394 were assigned as response Priority 1
 - 25,703 assigned as response Priority 2
 - 30,435 assigned as response Priority 3
 - ◇ 27,626 referrals were screened out
 - ◇ 5,177 other (i.e., Tel-Alert page-out, information, business calls)

- Calendar Year 2007
 - ◇ 164,771 calls were made to Central Intake
 - 155,551 calls were answered
 - 9,220 calls were dropped/abandoned
 - ◇ 68,160 were assigned for investigation
 - 11,048 were assigned as response Priority 1
 - 23,914 assigned as response Priority 2
 - 33,198 assigned as response Priority 3
 - ◇ 32,109 referrals were screened out
 - ◇ 55,282 other (i.e., Tel-Alert page-out, information, business calls)
- Calendar Year 2008
 - ◇ 164,946 calls were made to Central Intake
 - 146,682 calls were answered
 - 18,264 calls were dropped/abandoned
 - ◇ 30,406 were assigned for investigation
 - 9,822 were assigned as response Priority 1
 - 20,748 assigned as response Priority 2
 - 29,499 assigned as response Priority 3
 - ◇ 26,183 were assigned for assessment
 - ◇ 36,317 referrals were screened out

During FY 2006, CPS agencies screened in 61.7 percent of referrals and screened out 38.3 percent. These results were similar to FY 2005 data, which indicated 62.1 percent were screened in and 37.9 percent were screened out.

Central Intake maintains national average screening statistics to within + or - 1.5 percent, tracked on a weekly/monthly frequency via a screening report.

Comparison of Calendar Years (CY) above shows an increase of approximately 48.1% in the number of calls to Central Intake and a decrease in the number of abandoned/dropped calls despite staffing levels remaining the same or decreasing. Performance can be attributed to formulaic call forecasting and synchronized scheduling. In addition, Central Intake has undergone several production environment process changes to minimize production issues as well as enhance end-user outcomes:

- Scheduling staff with a view to call center 'busy hour' per shift.
- Revised cue questions to minimize agent phone time although still allowing for condensed, accurate processing of information to report.
- Revised protocol manual, with multiple work aids, to allow for expedited process handling of a variety of situations.
- Increased training to appropriate and timely process of Serious Incident Reports, Psychiatric Acute Care Coordination intakes, TNKids history template and web based reports.

Central Intake has worked on several initiatives to further improve the program:

- Training
 - ◇ Central Intake continues to address training needs with the assistance of a Training Coordinator who conducts or coordinates training as training needs are identified by senior management.
 - ◇ New Hire employees now regularly attend DCS Pre-Service as designed for Central Intake by the Tennessee Center for Child Welfare.
 - ◇ Central Intake employees have the opportunity to attend the Job Exchange Training (JET) program, where employees who do not have previous CPS field experience take a call/report and then 'follow' the call to the field

and shadow a CPS investigator. CPS employees in the field also have the opportunity to shadow Central Intake Case Managers.

- ◇ Staff now has limited opportunities to attend external training, seminars, conferences and workshops as scheduling permits.
- ◇ There has been an increase in Computer-Based Training (CBT) made available to DCS staff to include Central Intake staff.
- ◇ Central Intake continues to be very active in providing training and presentations to community partners to further educate and raise awareness of procedures for reporting abuse and neglect.
- Quality Assurance
 - ◇ Central Intake has a Quality Assurance Coordinator who continues to monitor I-3 Interaction Client telecommunications system, TNKids database system and Tel-Alert paging system for field response of assigned reports.
 - ◇ Central Intake has fully implemented the Continuous Quality Improvement (CQI) process at the team and center level. One of the most recent activities of the CI CQI team has been the development of a survey to assess community relations, identify additional staff training needs, identify public education and awareness needs, and improve overall program efficiency. Survey distribution is scheduled for September 2008.
 - ◇ Central Intake has a designated Council on Accreditation (COA) representative who maintains training, education and compliance measures with regard to accreditation activities.
 - ◇ Staff members receive monthly Quality Audits, Successful Partnering and Monthly Performance Briefings with a

view to coaching and providing corrective action for maximum agent performance.

- ◇ TNKids enhancements and builds as necessary for improved data entry needs.
- ◇ Revision and implementation of DCS Policy and Procedures Chapter 14.1 and 14.3.
- Other Activities
 - ◇ Increasing retention, improving morale and developing job satisfaction are always challenges to any program. To that end, an internal program newsletter has been developed to inform staff of new information, new policies, program revisions and personnel activities and training in a fun yet informative and professional manner.
 - ◇ Central Intake maintains an active Fire/Safety program to provide for the safety, security and comfort of all employees in accordance with COA and OSHA guidelines.
 - ◇ Central Intake has evolved into conducting monthly Management and Leadership meetings as required by DCS Policy and Procedure.
 - ◇ Personnel hiring procedures, to include fingerprinting and background checks are now aligned with DCS Human Resources standards.
 - ◇ Central Intake has committed one (1) Case Manager/Subject Matter Expert for SACWIS design and development.

Central Intake continues to work with the Office of Child Safety as a front-line community partner in the prevention, assessment, investigation and link to resources concerning child abuse and neglect. Central Intake proudly serves the Department of Children's Services and the community in the mission to provide safety, permanency and well-being for the children of Tennessee.

Child Protective Services Assessment Multiple Response Point Marjahna Hart, *Director*

The implementation of a Multiple Response System (MRS) allows for intervention with families from a less adversarial approach than the traditional Child Protective Investigation. MRS moves away from solely investigating in the traditional incident-based manner to a more strengths-based, family-focused approach to protect the child and increase supportive resources. It encourages families and communities to see local departments of social services as a source of support and help at the earliest opportunity to prevent abuse/neglect or unruly behaviors and therefore minimize future commitments of children to state custody. Combined with the assessment track and the resource linkage track, investigations will move from a “one style” way of investigating allegations of abuse/neglect to a form of practice that allows for more than one approach in response to abuse/neglect reports.

The Assessment Track Approach is used to respond to lower risk CPS referrals. This style generally leads to gathering more information up front and more cooperation later on. The CPS Assessor has a greater opportunity to work in coordination with community agencies to develop consistent and focused service plans for families. Many families can be helped to work out their problems in minimally intrusive ways that strengthen family-functioning, increase supportive resources, and reduce the likelihood of out-of-home placement without endangering the lives of children. Families and CPS staff have reported improved partnerships due to the family involvement through family service team meetings. The family is involved with the plan of action that will impact the child and family.

The Resource Linkage Track partners with community stakeholders to develop and

connect available resources to assist children and families in need of services without intervention of the formal child welfare system. Resource Linkage is a track that links families with existing resources in their community in order to keep their children safe. The goal of Resource Linkage is to improve the quality of life for the family and the community. Through the Resource Linkage Track, community advisory boards are developed to identify both formal and informal resources that exist within the community. The function of these boards is to communicate issues, concerns, gaps of services and needs within the community to the State Advisory Board.

Since the implementation of Multiple Response System (MRS) in the pilot regions of Northwest, Southeast, and Upper Cumberland, MRS has been implemented statewide in Tennessee. The completion of an Internal Readiness Assessment Tool provided regions with a means of measuring levels of preparation before implementing MRS. The tool has proven to be critical in helping regions to determine training needs and communication gaps, as well as identifying the needs to coordinate with internal and external stakeholders and community partners.

DCS is continuing efforts to finalize the State Advisory Board for MRS. Several meetings have occurred to establish goals and ways to enhance their network to improve the quality of lives for children and their families.

DCS has partnered with the Tennessee Center for Child Welfare (TCCW) and the MRS evaluation was completed in Fall 2008. TCCW is also assisting DCS with training field staff on advanced engagement and investigative skills. The Office of Child Safety staff is planning to enhance MRS, and is eliciting assistance from local, state, and national experts.

Child Protective Services Investigations

Irma Buchanan, *Director*

This division strives to ensure that children under the age of 18 are safe and protected from child abuse. The CPS program receives, investigates, and assesses reports of child abuse and neglect by parents, family, or household members. CPS offers services after investigations if:

- children are not immediately safe from abuse or neglect; or,
- a reasonable likelihood exists that children will be abused or neglected in the foreseeable future, and families demonstrate that they cannot control factors placing children at risk of abuse or neglect.

If needed, services are offered to parents to help them solve problems and learn how to care for and discipline their children in ways that do not place them at risk of abuse or neglect. Services can include counseling, daycare, homemaker, evaluation and treatment, and parenting training.

Child Protective Services protocol has changed to reflect legislation allowing for a Multiple Response System. This implementation has helped investigations to be concluded within 60 days, unless there are extenuating circumstances. In this process, CPS continues to utilize the Structured Decision Making Safety Assessments, as well as exploring possible integration of key tools and work aids that can be linked and associated to the Family Functional Assessment and the Family Advocacy Support Tool.

A child fatality review team has been formed. The team conducts comprehensive and multi-disciplinary reviews of child fatalities that meet its criteria for review. CPS strives to improve its service to children and families through internal monitoring and when necessary, practice modifications. The findings

from these reviews are used to improve the health and safety of our children and youth, and to take action that may prevent other deaths in the future.

CPS also has a Continuous Quality Improvement team that includes representatives from across the state (thirteen regions). The team's purpose is to address quality investigative work, preventing occurrence and reoccurrence in abuse and neglect cases, and preserving familial connections in collaboration with Central Office of Child Safety staff. The mission of the team is to look at best practice as well as policies and procedures to model and coach for a stronger Child Protective Service system.

Child Protective Services works closely with staff to develop and build case and family plans. The division strives for these plans to help families identify clear action steps and set goals to build on their safety factors and further reduce risk in the home.

Relative Caregiver Program

Robert Matthews, *Director*

The goal of the Relative Caregiver Program (RCP) is to support children who are in the care of relatives outside the formal child welfare system when appropriate and to support efforts to prevent entry and re-entry into foster care. During Fiscal Year 2008/2009 the Relative Caregiver Program began accepting Kinship referrals from DCS. This provision is acceptable only with written approval from DCS Central Office to the local RCP, through a direct referral from DCS. RCP can offer all services to Kinship Families, however once they are in receipt of the Foster Care Board Payment, they will not be eligible for financial assistance, but can still receive other services.

Eligible persons include relatives by blood, marriage, or adoption who are caring for children (ages 0-18) informally.

Support Services are available through the Relative Caregiver Program by private agency staff (i.e. support groups, short term case management, respite/enrichment services, information and referral, educational workshops, children/teen groups, emergency one-time financial/start-up assistance, material assistance, whole family enrichment and community service learning [youth and teens]).

Families First Kinship Care (FFKC)

The goal of the program is to encourage placements with relatives for children who are at risk of removal from their home and placement in state custody. The FFKC pilot program allows DCS to prevent children from entering or re-entering state custody by offering eligible relative families an additional payment to supplement the Families First Child-Only grant offered by the Department of Human Services (DHS). The program is currently available in the following four regions: Davidson, Shelby, East and Upper Cumberland.

Service Integration

Thomas Jones, *Director*

This division works with integrating various assessment tools used by the department to create a continuum of assessment information that is used throughout the life of the case. Children and their families are assessed around issues such as safety, well-being, permanency and resource availability. The strengths and needs of families are continually assessed until the family has achieved permanency and is no longer involved with the department.

The Service Integration Division works on the development, implementation, and continued development of assessment tools that the department uses. These assessments include, the Family Functional Assessment (FFA), Child and Adolescent Needs and

Strengths (CANS), Family Advocacy and Support Tool (FAST), and Structured Decision Making (SDM) Tools. This division helps staff understand the importance of a comprehensive assessment and how this assessment information informs planning. Additionally, this division helps staff understand how information crosses programmatic lines and custodial distinctions.

Recently this division was awarded a Grant from the Atlantic Coast Child Welfare Implementation Center (ACCWIC). This grant will focus on proper assessments of in-home families (non-custodial), service provision following assessment, and the quality of services provided to the family. Additionally, as a part of this grant, ACCWIC will work with the Assessment Integration Division to help evaluate the quality of services being provided by private providers and help enhance local service array in each region. This is a 27 month project and we are roughly four months into the project. Pilot sites have recently been chosen and initial work with them is beginning.

Special Investigations Unit (SIU)

Jennifer Hamilton, *Director*

The Special Investigations Unit currently operates under the Office of Child Safety to ensure the safety of custodial children, and to ensure consistency within the Child Protective Services program.

SIU staff work closely with regional staff as well as Foster Care staff to ensure children in state custody receive quality care and all allegations of child abuse or neglect are investigated according to policy and procedure. The Special Investigations Unit conducts investigations on reported allegations of child abuse and neglect regarding custodial children. Referrals are received, screened and referred through the Child Protective Services Central Intake Division. SIU conducts third party investigations that

involve a person's employment or volunteer status, such as teachers, daycare worker, coaches, ministers, etc.

SIU also conducts investigations of DCS employees when there are allegations of abuse or neglect against the employee regarding their children.

SIU has four teams strategically placed across the state to provide statewide coverage:

- Davidson County
- Knox County
- Hamilton County
- Shelby County.

SIU has 24 family service workers, four team leaders, three team coordinators and a director in Nashville. One of the team coordinators is responsible for conducting the case file reviews and due process reviews for SIU cases.

SIU developed a workgroup in June 2007 consisting of Central Office staff, SIU staff and regional staff to work on improving the quality of SIU investigations and improving communications with all parties involved.

A Placement Quality Team (PQT) SIU/ Resource Home Review has been developed to discuss all SIU cases that involve resource homes. The resources homes are frozen at the initiation of a SIU investigation. The team meets weekly to discuss all of the indicated or concerning Resource Home SIU cases from the previous week. The PQT works with CPPP, Evaluation and Monitoring, Foster Care and Adoptions as well as SIU and the regions to make recommendations on keeping DCS and contract resource homes open or to close the homes due to indications or serious concerns.

SIU strives to provide quality investigations to ensure the safety and well-being of all children.

Child Advocacy Centers Frances Cowan

The department provides grant funds to 42 Child Advocacy Centers (CACs) across the state and to the Tennessee Chapter of Child Advocacy Centers. Child Advocacy Centers provide mental health services, forensic interviews, forensic medical exams on and off site, and multi-disciplinary team case reviews for child abuse victims and their family members. Services are provided in a child-friendly setting to help children feel safe. The CACs work with the department, local law enforcement and the district attorney's office to address the needs of the children in their communities. The funding to CACs also supports training opportunities for the multi-disciplinary Child Protection Investigation Team (CPIT) and the collection of data that is reported annually to the legislature. In addition, CACs provide victim advocacy services, plan public awareness events focused on child sex abuse, educate the public through prevention programs and partner with over 800 organizations to provide prevention programs in their communities. Where possible members of the multidisciplinary team are co-located at the CAC in order to enhance communication and effectiveness of team investigations of severe child abuse.

Strengthening Families/ Child Abuse Prevention Grants Jeanne Brooks

The marriage license tax created from the Family Violence Shelter and Shelter Services and Child Abuse Prevention Act of 1984 provides revenue generated from that tax to be used for Strengthening Families/Child Abuse Prevention grants. This money is blended with the money from sale of the Children's First License plate and the Federal Community Based Child Abuse Prevention grant to fund grants to outside agencies. These grants provide funding to programs that offer prevention services through education, counseling, and parenting skills training

to high-risk populations as well as to the community as a whole. Programs include early prevention services to first-time parents, teen parents, disabled parents, parents of disabled children, and parents who were abused as children.

Preventive education services are often geared toward children and may include life

skills classes, puppeteering, and stage productions. Education services may also include media campaigns. The more intensive prevention services are typically home-based and may include parent training, parent support groups, parent help hotlines, and counseling focused on empowering both parents and children.



Table 1: Indicated Victims by Age, Race and Gender - Fiscal Year July 1, 2008 – June 30, 2009

Race / Ethnicity	Gender	Age Category				Total
		0 - 1	2 - 4	5 - 12	13 - 18	
White Non-Hispanic	Male	226	289	591	1,264	2,370
	Female	182	281	564	819	1,846
Black Non-Hispanic	Male	73	115	182	946	1,316
	Female	66	107	174	404	751
Hispanic	Male	28	31	31	51	141
	Female	15	22	30	36	103
Multi-Race Non-Hispanic	Male	10	16	33	41	100
	Female	8	8	28	28	72
Asian	Male	0	0	1	5	6
	Female	0	0	2	2	4
American Indian/Alaska Native	Male	1	1	1	3	6
	Female	2	0	2	0	4
Native Hawaiian/Pacific Islander	Male	0	0	1	1	2
	Female	1	0	0	1	2
Unable to Determine	Male	20	17	28	64	129
	Female	18	26	28	46	118
Total		632	887	1,668	3,665	6,852

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Table 2: Investigations of Child Abuse/Neglect Completed in FY08 by Region and Status as of June 30, 2009

Region	Total CPS & MRS Cases Completed	Total CPS Investigations		Indicated		Unfounded		No Finding**	
Davidson	4,581	1,644	35.89%	505	30.72%	985	59.91%	154	9.37%
East Tennessee	3,556	1,649	46.37%	552	33.47%	992	60.16%	105	6.37%
Hamilton	2,813	850	30.22%	137	16.12%	595	70.00%	118	13.88%
Knox	3,832	1,390	36.27%	425	30.58%	897	64.53%	68	4.89%
Mid Cumberland	7,755	4,404	56.79%	907	20.59%	3,095	70.28%	402	9.13%
Northeast	5,019	1,565	31.18%	427	27.28%	1,061	67.80%	77	4.92%
Northwest	2,642	871	32.97%	207	23.77%	615	70.61%	49	5.63%
Shelby	6,040	5,687	94.16%	1,492	26.24%	3,708	65.20%	487	8.56%
Smoky Mountain	3,714	2,204	59.34%	653	29.63%	1,455	66.02%	96	4.36%
South Central	3,940	1,320	33.50%	469	35.53%	694	52.58%	157	11.89%
Southeast	3,106	1,178	37.93%	341	28.95%	775	65.79%	62	5.26%
Southwest	3,252	1,067	32.81%	356	33.36%	607	56.89%	104	9.75%
Upper Cumberland	3,579	984	27.49%	271	27.54%	663	67.38%	50	5.08%
SIU	2,111	2,091	99.05%	227	10.86%	1,806	86.37%	58	2.77%
Statewide	55,940	26,904	48.09%	6,969	25.90%	17,948	66.71%	1,987	7.39%

Due to rounding, percentages may not equal 100.

**No Finding (includes administrative closure, allegation indicated sexually reactive child, and anonymous abandonment)

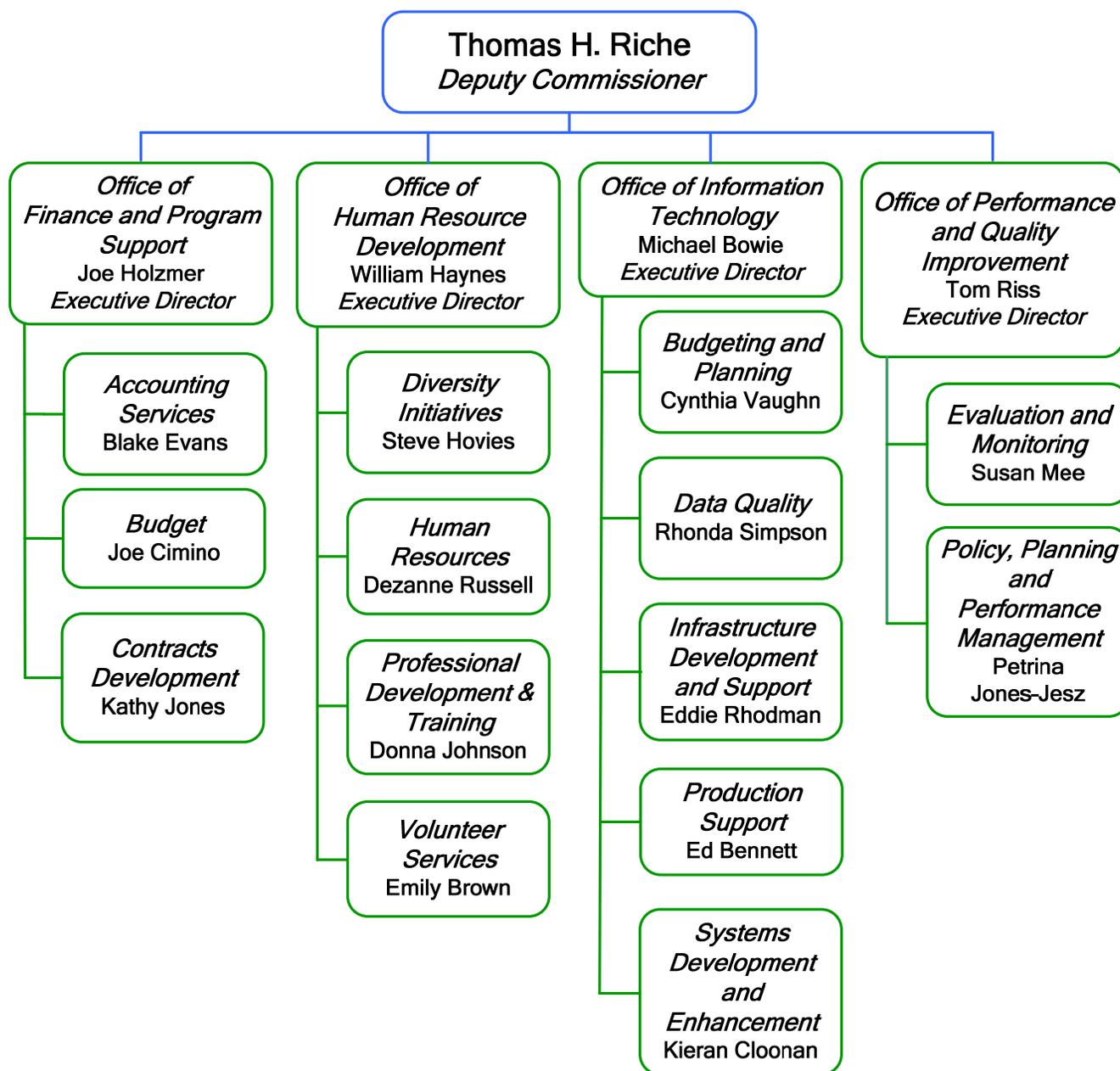


Office of Regional Support

Judy Cole and Mildred Lawhorn, *Executive Directors*

The Office of Regional Support provides programmatic support to all thirteen (13) regions of the state. It is the goal of Regional Support to assist regions with adhering to Best Practices and providing technical support for any requested regional initiative while also working with each region to improve their outcomes for children and families.

Administration and Training



The Division of Administration and Training serves all staff of the department by providing support services in the areas of human resource development, information and technology, and finance and program support. Administration and Training enhances the performance and professional development of all staff by making provisions for staff to have access to necessary resources and financial assistance to implement and provide services to children and families across the state.

This division then assesses the quality of service provision through its Office of Performance and Quality Improvement so that there are continuous strategies oriented to drive best practice. Overall, administration and training provides the fail-safe to assure that employees have the tools needed to deliver a high quality of services.



Office of Finance and Program Support

Joe Holzmer, *Executive Director*

Fiscal Services

Expenditures

The Office of Finance and Program Support (OFPS) provides a comprehensive set of fiscal services including general accounting, accounts payable, financial planning, budgeting, revenue maximization, trust accounting, eligibility services, regional fiscal services, procurement, and facility support services. Supported through OFPS are an array of Child Welfare and Juvenile Justice programs.

In FY 2009, the Department of Children's Services managed a total of \$686,621,700 in budgeted resources. Figure 1 summarizes these expenditures by category.

Resource Utilization

Administrative - \$57,235,800 (8.5%). Administrative expenditures cover DCS services provided by Central Office Administrative and Training, Protection and Prevention, and Juvenile Justice Divisions as well as administrative functions of the Offices for Communications, General Counsel, Performance and Quality Improvement, and a Blue Ribbon Team, all of which serve at the

pleasure of the Commissioner, Deputy Commissioners, and Executive Directors.

Family Support Services - \$41,422,100 (6.1%). Family Support Services include purchase of non-custodial intervention/prevention services, family preservation services, family resource centers, regional family support services networks, community intervention grants, child abuse and sexual abuse prevention and counseling services, and juvenile justice prevention and intervention services.

Custody Services - \$210,429,000 (31.2%). These expenditures cover residential contract services, individual resource home care and other custody support services, primarily to meet treatment needs and to enhance reunification efforts.

Needs Assessment - \$5,956,400 (0.9%). Needs Assessment expenditures represent payments for services directed to the Brian A. Class child in custody or in danger of coming into custody due to dependency, neglect, or abuse.

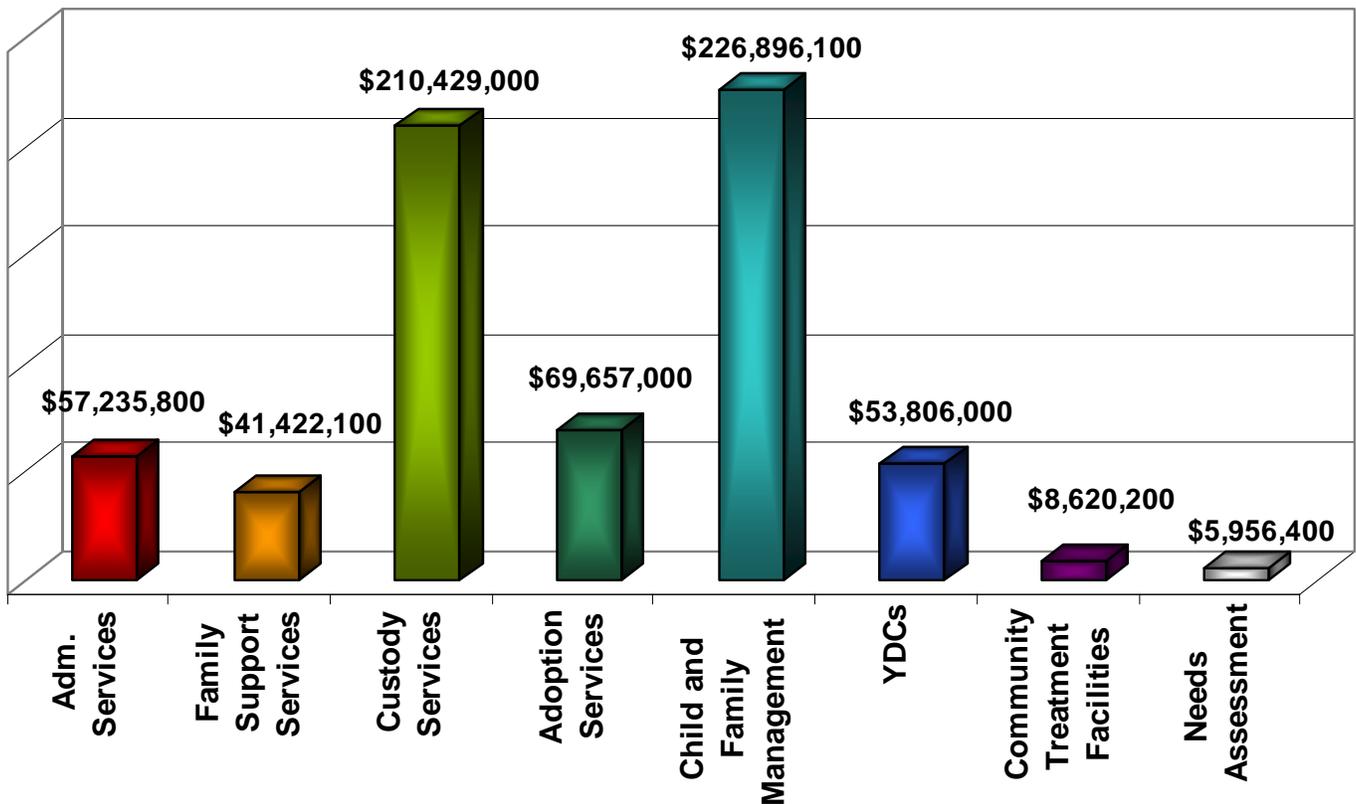
Adoption Services - \$69,657,000 (10.3%). Adoption Services expenditures represent payments for special needs adoption assistance, adoption recruitment and placement services, and pre- and post-adoption support services.

Youth Development Centers - \$53,806,000 (8.0%). These are expenditures for the operation of the department's five secure Youth Development Centers for delinquent youth (Mountain View, New Visions, Taft, Wilder, and Woodland Hills).

Child and Family Case Management - \$226,896,100 (33.7%). This category primarily represents expenditures for the 13 DCS regional offices and field staff providing case management services to custodial children, adoption services, non-custodial case management, and child protective services investigations.

Community Treatment Centers - \$8,620,200 (1.3%). Expenditures for Community Treatment Centers provide for the operation of the department's 10 group homes and a residential observation and assessment center for delinquent youth.

Figure 1: Expenditures for Fiscal Year July 1, 2008 – June 30, 2009.



Revenue

Figure 2 illustrates the sources of funding for the department in 2009. State appropriations of \$324,379,800 made up 48.1% of total funding. The major funding sources were Education (\$8,137,00 or 1.2%), Child Support (\$2,642,300 or 0.4%), Federal Title IV-B (\$10,081,500 or 1.5%), Federal Title IV-E (\$79,857,000 or 11.9%), and Federal Social Services Block Grants (\$15,950,700 or 2.4%). TennCare funds equaling \$217,848,300 represented 32.3% of all funding. The remaining \$15,125,100, which represented 2.2% of expenditures, came from other sources.

Educational funds represent a combination of formulary interdepartmental state and federal dollars.

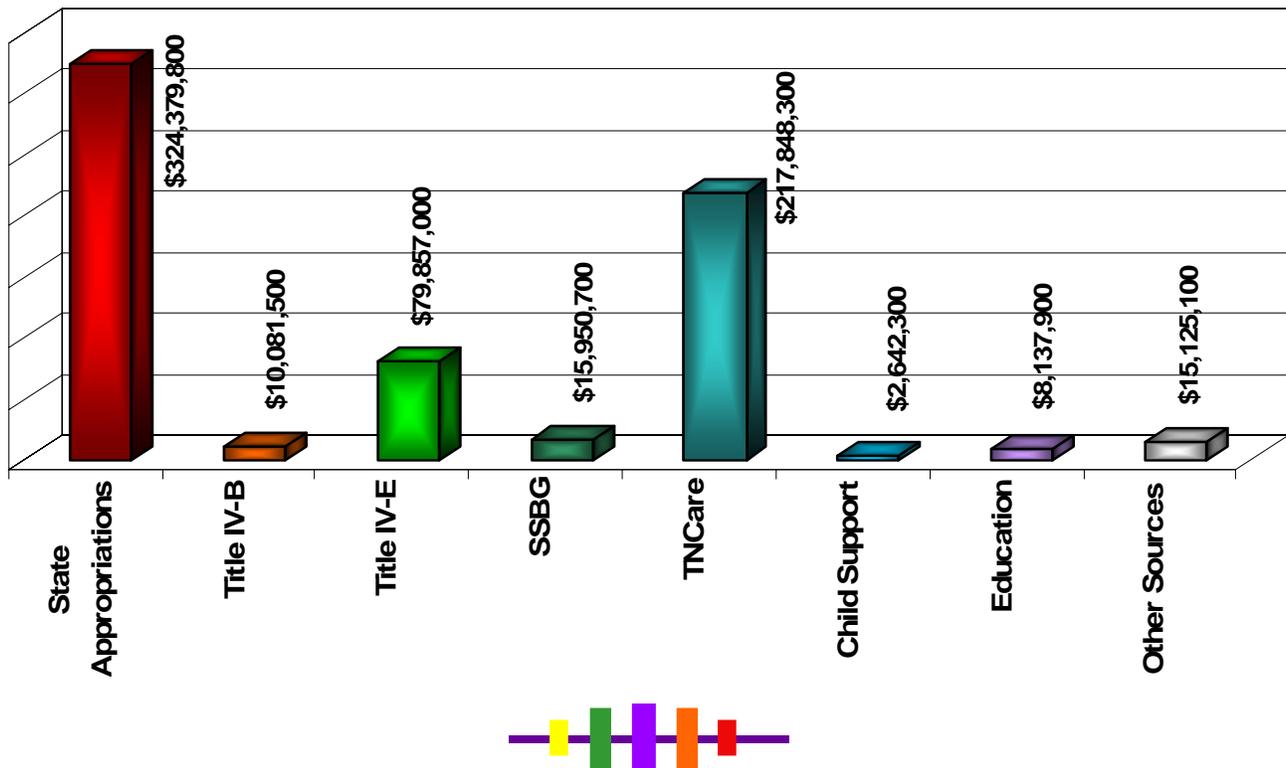
Title IV-E is a federal entitlement program.

Federal guidelines require that DCS earn reimbursement based upon eligibility criteria for each child served. TennCare is a managed care waiver through which Tennessee operates its Medicaid program.

TennCare functions as a capped health care entitlement program. Reimbursement earned by DCS is also based upon eligibility criteria for each child served. TennCare funds are used to reimburse treatment and administration, while Title IV-E funds reimburse maintenance and care of children in foster care and adoption assistance, training, and administration.

Title IV-B and the Social Services Block Grant are set dollar allocations based upon the state's percentage of the national allotment and are used, in part, to reimburse the State for child welfare services provided to children and families.

Figure 2: Revenue for Fiscal Year July 1, 2008 – June 30, 2009



Office of Human Resource Development

William Haynes, Executive Director

The Office of Human Resource Development (HRD) is responsible for the framework that allows the department to attract and sustain a qualified and diverse workforce. HRD ensures that the structure exists to recruit, hire, develop, and retain a staff that possesses the competencies necessary to respond appropriately to the challenges to DCS. The work of HRD is focused by a set of strategies and goals centered in three domains:

- Human Resource Structure and Process,
- Recruiting a Qualified Workforce, and,
- Creating an Environment that Sustains the Workforce.

Human Resource Development includes the divisions of Diversity Initiatives, Human Resources, Training and Professional Development, and Volunteer Services. HRD also provides leadership for DCS in the area of cultural competency.

DCS has undertaken a major initiative to increase the number of human services degrees within the department. This education initiative is led by HRD. On the undergraduate level DCS has established the Tennessee Child Welfare Certification Program (TCWCP), in collaboration with the Tennessee Center for Child Welfare (TCCW) at Middle Tennessee State University. Through the TCWCP students receive up to four semesters of tuition payments and stipends to complete the Bachelor of Social Work (BSW) degree. In exchange, the students agree to work for the department at least two years after graduation. Through August 2009 there have been 226 program participants, with 177 currently employed by DCS. DCS has also provided assistance for over 100 employees to complete work on the Master of Social Work (MSW) degree, also in exchange for a two year employment commitment.

Diversity Initiatives

Steve Hovies, Director

Diversity Initiatives, a division of the Office of Human Resources Development, is responsible for agency activities related to EEO, Affirmative Action, and compliance with Titles VI, VII and IX of the Civil Rights Act of 1964 in addition to implementing the ADA Accommodation and Compliance Program. The division is responsible for developing the annual Title VI Implementation Plan and assisting the Division of Education in developing the annual Title IX Implementation Plan. Also the division is responsible for Contract Compliance, Recruitment (Career/Job Fairs), Community Outreach, training in EEO/Diversity and support for the Cultural Competency Committee on Multi-cultural Affairs. Diversity Initiatives investigates

employee EEO complaints, often in cooperation with other units within the department such as the Legislative and Constituent Services Division, Internal Affairs, Education or the Office of General Counsel.

Human Resources Division

Dezanne Russell, Director

Human Resources (HR) is responsible for managing all departmental personnel transactions, classification and compensation issues, recruitment and placement, benefits (including insurance), and employee relations. The specific areas administered by HR are listed below:

- Disciplinary Actions – Reviews and processes all disciplinary action across the state including: oral, written, sus-

pension, disciplinary demotions and/or terminations;

- Benefits – Administers all medical, dental, life, and vision insurance, deferred compensation, 401K, 457K, etc. for all employees statewide;
- Transactions – Handles all transactions related to hiring, separating, promoting, transferring or demoting of employees statewide;
- Attendance and Leave – Handles all issues related to attendance and leave including sick, annual and compensatory leave accrual and use. Also deals with issues related to Family Medical Leave Act, Worker's Compensation, Assault Injury, etc.;
- Classification/Compensation – Processes all lateral, downward and upward re-classifications of positions, position establishments and abolishments, equity increases, working out-of-class issues, pay differentials and position number changes statewide;
- Reporting – Creates reports for various key issues such as turnover, separations, appointments, job postings, vacancy report, etc. for the department statewide; and,
- Personnel files – Drafts and administers procedures/protocols regarding the maintenance of personnel files and processes all requests for personnel file information in accordance with Tennessee state law and rules.

The Central Office Human Resources Office functions as the Human Resource office for the approximately 900 Central Office employees, as well as directing the HR work of the multiple local HR offices (13 regional and five YDCs) across the state. Central Office HR is also responsible for all direct interaction and communication with the Tennessee Department of Human Resources, the Division of Benefits Administration, and Project Edison.

Professional Development and Training

Donna Johnson, Director

The Division of Professional Development and Training is responsible for ensuring that all DCS staff and resource parents are trained and have opportunities for professional development. The Division of Professional Development and Training works in collaboration with the fourteen-member Tennessee Social Work Education Consortium as well as the Tennessee Center for Child Welfare to provide training opportunities for all staff and resource parents. This division also works in collaboration with the Tennessee Department of Human Resources as well as the Tennessee Department of Correction's Training Academy to provide additional training opportunities to staff that are mandated statewide and/or are job specific.

This division is responsible for identifying training needs, developing appropriate curricula, coordinating enrollment, and tracking staff attendance at training courses. An additional responsibility is the coordination of training with private service providers who contract with the DCS to ensure that their staff training is comparable to that of DCS staff. Finally, the division recently began partnering with our DCS Human Resources division to enhance the performance management process within our agency in an effort to ultimately identify and develop more job specific professional development opportunities.

Volunteer Services

Emily Brown, Director

The State of Tennessee's Department of Children's Services is committed to strengthening and sustaining a viable and highly visible volunteer program to achieve better outcomes for children and their families. Community volunteers, in partnership with

DCS, play a crucial role in providing support to our children and their families as well as to agency staff. They are critical to the department's strategy of providing timely, appropriate and culturally responsive services to families in their neighborhood communities.

The Department of Children Services has developed a statewide community-based Volunteer support program with protocols and guidelines in each one of our thirteen Regions, five Youth Development Centers and eight Community Residential Programs.

The Volunteer Services program is pleased with the partnerships established with various

DCS divisions. Volunteer Coordinators, Juvenile Justice Residential Program Directors and staff as well as Resource Linkage Coordinators have worked with staff in other divisions to both develop and implement initiatives to better serve children and their families. We are also delighted with our progress and continuing efforts to build and strengthen our bonds and contacts with the Immigrant and Refugee communities.

The Volunteer Services program remains committed to the department's vision and mission statement through on-going efforts to enhance and strengthen our intra-agency, inter-agency and community partnerships.



Office of Information Systems

Michael Bowie, Executive Director

The department relies on technology to achieve its business goals. The Office of Information Systems (OIS) provides that technology, supporting more than 5,600 DCS computer users and sixty (60) applications. The primary application is the TNKids child welfare system, which helps the department attain safety, permanency and well-being for those children who are in state custody, or at risk of entering custody, and their families. Requests for new projects are reviewed by the department's Core Leadership Team to determine if the benefits justify the costs. Approved projects are forwarded to OIS, which is responsible for analysis, development or procurement, testing, implementation and ongoing support of all applications. The Data Quality Unit works with the regions to support conversion efforts and to ensure that key system data is timely and accurate.

OIS operates the DCS Help Desk, which provides telephone assistance to departmen-

tal computer users. OIS also has at least two employees in each region to provide technical and application support in the field. The Security Team controls access to the state network and DCS applications, while the Asset Management Team manages the distribution of computers and printers to DCS employees. OIS replaces the equipment approximately every three to four years. Additionally, OIS provides records management services and processes all orders for voice telecommunication products and services.

TFACTS Project

OIS is currently in development of a major application designated TFACTS. The purpose and goal of the Tennessee Family and Child Tracking System (TFACTS) is to create one electronic system that meets all the department's case management and child welfare needs. TFACTS will be driven by programmatic/case management needs

rather than simply case tracking or data collection. The TFACTS electronic file will become the “official” client file and all information related to the child will be contained in the child’s record. This will ultimately serve in the best interests of the children and families served by DCS, as records will no longer be scattered across agencies and regions.

The system is being designed to be federally SACWIS compliant and is expected to provide the following key benefits:

- Increased worker productivity;
- Efficient data capture and information retrieval;
- Better matching of scarce resources to exact level of need;
- Single, comprehensive view of the child and family;
- Improved relations / communications with community partners and providers;
- Improved child welfare program management and quality assurance;

- Improved reporting capabilities;
- Improved system support and performance;
- Automation and integration of financial management functions;
- Elimination of expenses related to the operation of multiple legacy systems;
- Increase worker productivity by decreasing time spent on paperwork;
- Reduce travel expenditures by leveraging mobile technology;
- Increase worker productivity via system access to service providers;
- Reduce overpayments due to eligibility errors;
- Increase child support (IV-D) collections and child support medical orders; and,
- reduce foster care and adoption assistance overpayments.

TFACTS is scheduled to be implemented in 2010.



Office of Performance and Quality Improvement

Thomas Riss, *Executive Director*

The Office of Performance and Quality Improvement’s (PQI) mission is to promote best practice and enhanced outcomes through continued learning and improvement. PQI will work to track, understand, and inform decision-making around initiatives and activities impacting the DCS community. As PQI conducts this work, which includes providing technical assistance and training, they will do so in a manner that supports the needs of the members of the DCS community, recognizing each member’s right to be treated with genuineness, empathy, and respect.

The structure of PQI provides a holistic approach to performance and quality improvement through the linking under one umbrella of activities related to performance management and improvement, quality improvement, and organizational learning. PQI consists of two divisions: Planning, Policy Development and Performance Management (PPPM), and Evaluation and Monitoring (E&M).

Evaluation and Monitoring

Susan Mee, *Director*

This division performs a wide array of evaluation, monitoring and review activities. E&M is comprised of the Quality & Compliance Monitoring unit, consisting of Program Accountability Review (PAR) and Licensing, and of an Evaluation unit that manages the Quality Services Review (QSR) process and conducts a variety of evaluation activities, including those related to federal child welfare evaluation. Through these activities and by synthesizing and analyzing quantitative and qualitative information from a variety of sources, Evaluation & Monitoring supports the department's capacity to improve services and outcomes for children and families.

Evaluation

- Develop and test performance management and evaluation tools;
- Provide technical assistance and support to strengthen self-assessment capacity and quality assurance oversight;
- Review, monitor and evaluate provider competence, as well as provider compliance with policy and contract requirements;
- Review, monitor, and evaluate administrative competence and DCS/provider service delivery practices;
- Since the last annual report, PQI has:
 - ◊ Established a cross-functional Provider Scorecard-Integrated Monitoring Team, which includes a satellite Provider Scorecard Workgroup focusing on Scorecard issues. These groups meet at least once/month, each to review scorecard measures, indicators, and data, as well as to further a comprehensive, integrated approach to provider monitoring and data utilization;
 - ◊ Identified performance indicators for the Provider Scorecard. Performance indicators will include quantitative and qualitative data sets. The scorecard is targeted for delivery by October 2010 for FY2009 to FY2010; and,
 - ◊ Developed an intradepartmental Integrated Monitoring Drive that houses a wide array of previously-disconnected pieces of data related to provider performance;
- Evaluate process, performance, and/or impact of various DCS pilot programs and other program initiatives;
- Provide program administrators and policymakers with information about promising practices observed in the programs under review;
- Disseminate program evaluation findings to policymakers, to practitioners in the field, to the public, and to program staff in order to assist with the continuous improvement of existing programs and the successful development and implementation of new programs;
- Conduct annual Quality Service Review (QSR) for each DCS region;
- Analyze QSR results and develop regional summaries and annual reports that compare results over time for dissemination to key decision makers and stakeholders;
- Provide training and technical assistance to strengthen regional QSR and integration of results of QSR into regional planning and practice improvements;
- Collaborate with TCCY and TCCW to manage state level QSR training, planning, logistics, and implementation;
- Coordinate and lead self assessment for federal CFSR;
- Coordinate and serve as state lead for CFSR onsite;
- Conduct detailed analysis of Incident Reports and Special Investigation Unit

investigations for the purpose of quality assurance;

- Perform specific monitoring activities as identified in the Brian A. settlement; and,
- Participate in development and monitoring of CFSR Program Improvement Plan (PIP).

Licensure

Mark Anderson, *Director*

The Licensing team is a regulatory authority governed by statute and promulgated rules and is responsible for the evaluation and licensing of all programs that fall within the purview of applicable state licensing regulations. These programs include: Family Boarding Homes, Group Care Homes, Child Placing Agencies, Residential Child Care Agencies, Juvenile Detention Centers, Temporary Holding Resources, Runaway Houses, Child Abuse Prevention Agencies and Maternity Homes.

- Monitors implementation of procedures in keeping with state licensing regulations and state and federal laws;
- Reviews legislation to determine impact on the operation of an agency or the state and gives recommendations regarding implementation of passed legislation;
- Coordinates the development, revision and promulgation of pertinent state licensing regulations;
- Compiles and publishes annual fee schedules for all domestic and international adoption agencies operating within the state of Tennessee;
- Participates in public hearings concerning agency issues, rules, regulations and/or compliance standards;
- Ensures compliance with applicable federal and/or state laws, regulations, and/or department rules, standards, and guidelines;

- Makes recommendations on compliance related issues and provides follow up on corrective action plans; and,
- Reviews, investigates, documents and processes grievances, complaints, and/or implements disciplinary actions.

The licensing office also coordinates the accreditation of all hardware secure programs operated by the department through the American Correctional Association's Council on Accreditation, conducts annual reviews and provides onsite technical assistance to these programs in the interpretation and application of all pertinent standards in developing local policy and procedure.

Program Accountability Review

Carter Overton, *Director*

This team conducts annual monitoring of DCS contract service providers through on-the-ground reviews for compliance with terms of contracts including the Private Provider Policy Manual and other referenced performance standards, with a focus on the appropriateness and quality of services.

- Performs annual program performance reviews and special targeted reviews on site, giving specific attention to program effectiveness, operational efficiency, and compliance with state and federal policies, rules, and regulations;
- Monitors agency contract services and performance;
- Aggregated reports of findings are shared with department management and policy and practice stakeholders. A final report on the findings is sent to the monitored contractor;
- Advises DCS and contractor senior management of review results and the department's recommendations for improvement through agency report and corrective action process;

- Works with PQTS and policy and practice stakeholders to review provider corrective action plan follow-up for target areas of review, as needed;
- Reports monitoring results as needed to the Core Leadership Team;
- Works as substantial contributor to the DCS Integrated Monitoring Process; and,
- Contributes to DCS's Balanced Scorecard in areas of client treatment and client protection from harm standards and practice.

Policy, Planning and Performance Management

Petrina Jones-Jesz, *Director*

Policy, Planning and Performance Measurement (PPPM) coordinates the work of three smaller teams within the division: Placement Quality Team System (PQTS) Facilitation, Continuous Quality Improvement (CQI), and the Accreditation team. PPPM is also responsible for various policy development and planning activities. This division develops and coordinates the creation and distribution of departmental policy, develops and monitors strategic plans and coordinates reports required by state and federal mandates.

- Develop the department's Strategic Plan and other plans required by state law;
- Develop the Title IV-B and Title IV-E Plans for submission to the federal government;
- Develop the department's Annual Report;
- Coordinate and monitor the submission of Emergency Response Plans to Central Office;
- Identify ongoing trends and patterns and emerging needs and issues and develop strategic plans to address;
- Recommend and implement improvements to the DCS policy and planning

process;

- Improve integration of planning and policy development into DCS's budget process;
- Identify and disseminate, through research, best practices and innovative approaches to service delivery;
- Design and administer surveys;
- Develop and distribute forms related to policy;
- Request and track National Child Welfare Resource Center Technical Assistance usage for the department; and,
- Leads the development and monitoring of CFSR Program Improvement Plan (PIP).

Accreditation

Brenda Bell, *Director*

The Accreditation Division promotes the establishment of standards of best practice that will result in the Department of Children's Services achieving accreditation through the Council on Accreditation (COA). The Accreditation Division facilitates: a thorough self assessment of policies, systems and practices; coordinates accreditation review processes; and provides oversight for the maintenance of accreditation standards of best practice.

- Facilitate and evaluate an agency-wide self-assessment review;
- Develop and submit a departmental self study reflecting relevant policies, procedures, and practices as it relates to COA standards of best practice;
- Serve as the liaison between COA and DCS offices for site visit scheduling, review responses and technical assistance needs for site visits to the Central Office, Northeast, Southeast, Upper Cumberland, Northwest, Southwest, Mid-Cumberland, South Central and Davidson regions;
- Communicate with members of the accreditation council, program volun-

teers and other accreditation program applicants;

- Develop, implement and maintain an effective accreditation process;
- Evaluate policies and procedures for implications related to COA standards and maintenance of accreditation.
- Prepare and submit required reports to COA; and,
- Provide guidance for all accreditation activities by serving as an effective advocate and liaison for accreditation across the state.

Continuous Quality Improvement **Michael Cash, Director**

Continuous Quality Improvement (CQI) is a philosophy based on the belief that people care about their work, learn from their experience, and when they feel empowered to do so create, innovate and improve. The concept is based on a Japanese principle, kaizen, which means progress through small continuous steps toward a goal. CQI is different from traditional quality assurance in that the focus is self-directed, self-determined change rather than change imposed by an external entity. CQI is a process model for employee empowerment, creativity and accountability.

CQI is a process by which all staff are invited to be involved in the evaluation of the efficiency and effectiveness of services provided to children and families. Evaluation involves:

- The examination of the department's internal systems, procedures and outcomes;
- The examination of input from participants, and the examination of relationships; and,
- Interaction between DCS and other stakeholders.

Placement Quality Team System (PQTS) **Larry Post, Director**

The PQTS consists of three levels of cross-functional teams, which include Central Office and regional staff, that meets on a regular basis to address issues of concern as they relate to the performance of private residential providers. The PQTS Facilitation team is responsible for gathering pertinent information related to private provider performance and synthesizing the information into a summary report that can be presented to the PQTS. This team is also responsible for setting the PQTS schedule, agenda, and facilitating the actual meetings.

In situations where sub-par performance indicates the need for intervention, the PQTS may consider several options including:

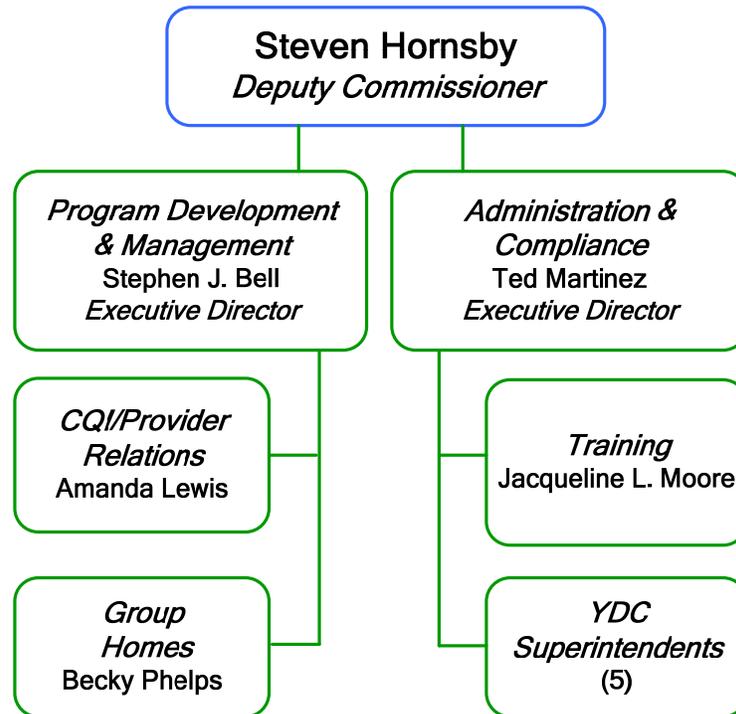
- Providing technical assistance to the provider;
- Placing an admission freeze on the facility;
- Requiring a written corrective action plan (CAP) from the provider; and,
- Amending or canceling the contractual relationship with the provider.

The CAPs from the Yellow Level Team are now reviewed by a Green Level Team established for reviewing CAPs.

Two additional Green Level PQTS teams, the SIU Resource Home Review team and the CAP Review Approval and Follow-up team, are under development by their members. New protocol for each team has been established that allows for additional involvement of the regions and subject experts in Central Office. The revisions provide additional ownership to members that should result in better communication internally and with contract residential providers.



Juvenile Justice



Division of Juvenile Justice Steven Hornsby, Executive Director

The Division of Juvenile Justice (DJJ) was created by an act of the legislature during the 2006 legislative session to coordinate statewide services to adjudicated delinquent youth and their families. The division's programs consist of probation and aftercare services, five (5) Youth Development Centers serving youth with more serious delinquent offenses, eight (8) community based group homes serving youth with less serious offenses, a residential treatment facility for developmentally challenged youth, and an observation and assessment center. The Division of Juvenile Justice, including staff in all thirteen (13) DCS regions and its residential facilities, serves approximately nine thousand (9,000) youth annually. Non-custodial services include probation and aftercare supervision and monitoring, family engagement and resource linkage.

Fiscal Year 2008 - 2009 has seen a number of new initiatives begin to take shape:

- Statewide implementation of the Youth Level of Service/Case Management Inventory (YLS-CMI), a comprehensive assessment instrument for delinquent youth, continues to be used and monitored. Case managers are trained and will be recertified on an annual basis. The YLS-CMI is a research-based instrument that will allow family service workers to very effectively assess the specific criminogenic factors in a child's life that contribute to delinquency. It also identifies protective factors that can be put in place to reduce the chance of reoffending. Use of the YLS/CMI will greatly improve case management practices, placement decisions and the child's progress through the system.
- Standardizing services and programs within residential facilities. Our youth in state facili-

ties deserve to receive the best in residential care regardless of where they may be placed. Basic programming, education and treatment should share a common philosophy and application. A uniform approach allows for program portability should a change in placement be necessary. This provides a measure of assurance that moving to a new facility will not delay the youth's progress. Specialized programs for special needs youth will remain as well.

- Nine regional juvenile justice coordinators were added to the Division of Juvenile Justice last fiscal year. They have served as subject matter experts to ensure that regional practices reflect current national models and DCS policy for work with delinquent youth. They have been involved in quality assurance activities, assisting the regions in preparation for the Council on Accreditation and assisting with the implementation of the Youth Level of Service/Case Management Inventory assessment tool in the regions.
- Restorative Justice (RJ) is a promising concept that promotes individual accountability, community responsibility and motivational change. DJJ is a collaborative partner with the Operation Safe Community Project in Memphis, Tennessee. The primary focus of this proposal uses restorative justice as a vehicle to link youth with services in four specific areas: continued education opportunities, vocational opportunities, mentoring and specialized services. We will be working with youth that are receiving services at Wilder Youth Development Center in West Tennessee.

Evidence-based Programming – Public Chapter 585, now codified as TCA 37-5-121, mandates by fiscal year 2012-2013, 100% of funds shall be spent on evidence-based programs. DCS has enlisted Dr. Mark Lipsey and Dr. Gabrielle Chapman of the Peabody Research Institute to assist with the technical aspects of determining the effectiveness of existing programs. Along with the consultants, and in conjunction with representatives of TCCY, the Administrative Office of the Courts, and provider agencies, DCS found that approximately 94% of all existing programs already use evidence-based strategies that have a positive effect on reducing recidivism. DCS submitted this information on current programs as required by law in a report to the Governor and General Assembly on December 31, 2008. Going forward, DJJ will be reviewing all contracted services (including grantees and in-house services). DJJ is working with a steering panel for this legislation and with other departments of state government affected by the law. We will be reviewing all programs on several areas, including (but not limited to): treatment modalities, “dosage” of treatment, and duration. We will also begin implementing treatment based on aggression replacement therapy techniques with all of our DCS facilities as part of compliance with the evidence-based practice law.



Office of Program Development and Management

J. Stephen Bell, *Executive Director*

Community Intervention Services (CIS)

Creating a system of improved graduated

sanctions in all Tennessee counties is an important DJJ goal. The CIS grants have allowed for the expansion of graduated sanctions in the counties where they exist. The CIS programs are community-based programs providing intensive probation services for delinquent youth and their families. The Division of Juvenile Justice

supervises seven service providers across the state providing intensive probation services in 30 counties. The CIS programs serve youth who would most likely otherwise enter state custody due to their delinquent behavior.

Community Residential Programs

The Division of Juvenile Justice operates 10 community residential programs located throughout the state. Each residential program has a capacity of eight youth. The facilities are designed as minimum security facilities and youth are carefully assessed and evaluated prior to placement. The community residential programs focus on providing a structured program of education, work experience, counseling, and community service. Each youth has an Individual Program Plan (IPP) intended to help guide the youth toward total re-integration into their home community and family.

Intensive Aftercare Programs

DJJ contracts with three private agencies to provide intensive aftercare supervision programs. Services have been expanded to include the Knox, East and Davidson regions, and Madison County of the Southwest region. The Exit Program serves the Knox and East regions and is administered by the Helen Ross McNabb Mental Health Center. The Reunion Program, administered by the Quinco Mental Health Center, is located in Jackson, Tennessee and serves Madison County. The Youth Villages Intercept Program provides intensive aftercare services in the Davidson region. All programs begin while a youth is incarcerated in a Youth Development Center. Services continue to support the youth upon their return home. Agency staff members act as liaisons with educational programs and employment programs, and facilitate the delivery of other services including mental health services. The primary goal of the intensive aftercare program is to decrease the number of youth re-entering the juvenile justice system.

Juvenile Court Grants

DJJ provides funding for 22 juvenile court based grant programs. Funding for these programs address youth that are at high risk of entering the juvenile justice system. Funding is in three major areas: custody prevention, truancy prevention, and the provision of child and family intervention services.



Office of Administration and Compliance

Ted Martinez, Executive Director

Residential Operations

Residential Operations consists of the five youth development centers (YDC) (592 Beds), and nine community residential programs (79 Beds) that primarily serve youth stepping down from the YDCs. Youth in all of these facilities receive individualized services within an evidence based framework of operations. All efforts promote community re-entry and permanency.

Community Residential Programs

The Division of Juvenile Justice operates nine community residential programs located throughout the state. Seven programs, three of which are for females, have a capacity of eight youth. One program (Peabody) serves a capacity of eight youth that are mentally retarded. The Johnson City Observation and Assessment Center (O&A) serves up to 15 pre-dispositional students in order for the courts to make more informed decisions of these juvenile cases. The community residential programs are designed as minimum security facilities and youth are carefully assessed and evaluated prior to placement. They provide a structured program of education, work experience, counseling, and community service. Each youth has an Individual Program Plan (IPP) intended to help guide the youth toward total re-

integration into their home community and family.

DCS Group Homes and Observation Centers

- Brighter Paths
255 Kacie Avenue
Cookeville, TN 38501
- Elizabethton Group Home (female)
150 Hatcher Lane
Elizabethton, TN 37643
- Henderson House
235 North Highland
Jackson, TN 38301
- Inman Group Home (female)
264 Hawkersmith Road
Tullahoma, TN 37388
- Johnson City Boys Group Home
208 Quarry Road
Johnson City, TN 37601
- Johnson City Observation and Assessment Center
210 Quarry Road
Johnson City, TN 37601
- Madisonville Group Home (female)
255 Wayman Road
Madisonville, TN 37354
- Nashville Transition Center
2412 Plum Street
Nashville, TN 37202
- Peabody Residential Treatment Center
3951 Covington Pike
Memphis, TN 38135

Youth Development Centers (YDCs)

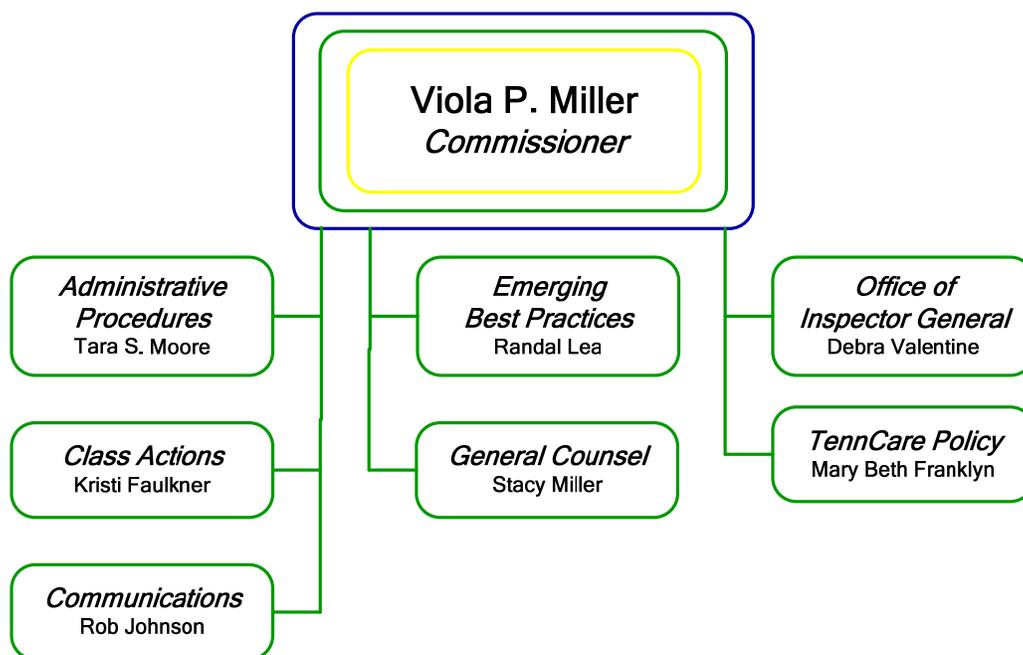
DJJ operates five YDCs. Each YDC is a hardware secure residential facility that provides treatment for delinquent youth ages 13 thru 18. Upon admission each youth receives a comprehensive assessment from which an individualized program plan is developed. Within the context of a behavioral management program, each YDC provides special and regular education, GED preparation, pre-vocational education, medical and dental services, recreational programs, and programs to help youth develop independent living skills. Specialty services include therapy for a broad range of needs, alcohol and drug treatment, and speech therapy.

The DJJ Youth Development Centers are:

- Mountain View Youth Development Center
809 Peal Lane
Dandridge, TN 37725
- New Visions Youth Development Center
3981 Stewarts Lane
Nashville, TN 37218
- Taft Youth Development Center
900 State Route 301
Pikeville, TN 37367
- Wilder Youth Development Center
13807 Highway 59
Post Office Box 639
Somerville, TN 38068
- Woodland Hills Youth Development Center
3965 Stewarts Lane
Nashville, TN 37243



Others Reporting Directly to the Commissioner



Administrative Procedures Tara S. Moore, *Administrative Judge*

The Administrative Procedures Division is made up of three attorneys who sit as Administrative Judges/Hearing Officers, an Administrative Services Assistant II and a Secretary. The Administrative Procedures Division is responsible for all hearings and appeals of the department's contested cases governed by the Uniform Administrative Procedures Act. The Administrative Procedures Division staff also sit as the Commissioner's Designees in employee grievance hearings governed by the Rules and Regulations of the Tennessee Department of Human Resources.

Tara S. Moore, Attorney IV, handles cases in the regions of Davidson, Mid Cumberland, Upper Cumberland and Hamilton. Carol Marcum, Attorney III, handles cases in the regions of Knoxville, East, Smoky Mountain, Northeast and Southeast. Brent Rose, Attorney III, handles cases in the regions of Shelby, Southwest, Northwest and South Central. Lisa Myers, Administrative Services Assistant II, and Carla Murrell, Secretary, provide support for all three attorneys.

This office provides the general public an opportunity to appeal and have a fair hearing on issues related to denial, reduction or termination of adoption assistance; the denial of access to closed adoption records; the removal of foster children from resource homes after more than 12 months of residency in a particular resource home; and due process proceedings for release of records regarding perpetrators of child abuse and neglect. The Administrative Procedures Division also conducts hearings to address employee disciplinary actions and grievances and conducts reviews of performance evaluations and written warnings as defined by state law and the Tennessee Department of Human Resources.

Class Actions

Kristi Faulkner—*Legal Counsel*

This specialized legal counsel role provides legal advice and counsel to the Commissioner, Core Leadership Team, and Program Directors regarding compliance with departmental consent decrees.

The duties include:

- responsibility for addressing the federal lawsuits that affect how DCS provides services for children;
- serving as the Central Office Privacy Officer for HIPAA;
- providing training for the attorneys on HIPAA, confidentiality, and informed consent;
- translating documents from English to Spanish;
- serving as the HR liaison between Central Office and Shelby County;
- handling all EEOC cases against the department; and,
- working with the Attorney General's office in responding to any federal cases that will be litigated or mediated on the department's behalf.



Communications

Rob Johnson—*Executive Director*

The Communications Office serves as the public face of the Department of Children's Services.

The Communications Office is the first place that the press, researchers, and the public turn to find information and answers.

The Communications Office serves as an internal clearinghouse working closely with the web developers in the Office of Information Systems.



Emerging Best Practices

Randal Lea—*Assistant Commissioner*

Working across divisions and disciplines, this unit places its focus on quality provision of services in the public and private sector, and incorporation into the private sector of any issue relating to permanency, safety, and well-being. Mr. Lea is actively working with the Juvenile Justice Division to assist with the inclusion of Evidence Based Practices to all Juvenile Justice programs provided or contracted by the state. He also is working with the Children's Mental Health Council created by public chapter 1062 to move Tennessee toward a system of care

based mental health for children. Mr. Lea represents the department on the Steering Panel for the Governor's Office of Children's Care Coordination, Tennessee Association of Mental Health Organizations, Child Welfare League of America, and serves on the advisory boards of OnCourse Education Collaborative and Tennessee Voices for Children.



General Counsel

Stacy Miller

This office provides legal advice and counsel to the Commissioner and the department's employees. There are 74 attorneys, 13 legal assistants and 28 support staff who staff the Office of General Counsel. The Office of the General Counsel has an office in Central Office and several field offices across the state. One attorney in each of the 13 DCS regions specializes in educational issues faced by children in state custody.



Office of Inspector General

Debra Valentine, Inspector General

In March 2004, the first Office of Inspector General (OIG) among Tennessee state government agencies was established at DCS. This Office supports departmental initiatives for child safety and quality service delivery to children and families in Tennessee by overseeing agency investigations, risk management planning and compliance audits.

The DCS Office of Inspector General is currently responsible for conducting agency audits for risk management and compliance with state and federal policy. It also conducts investigations of public complaints and allegations of employee misconduct by malfeasance, misfeasance, and fraud. Three division units perform these specialized functions in accordance with their areas of expertise. The units are: Internal Audit, the Internal Affairs, and Legislative and Constituent Services.

The OIG also maintains a direct connection with the National Crime Information Center for criminal background investigations surrounding the emergency placement of children. Additionally, an Absconder Recovery Program aids in the prevention, location and apprehension of custody children who runaway from placements.

Internal Audit

Mason Ball, Director

The Division of Internal Audit provides independent and objective audits and assessments of the department's activities, opera-

tions, financial systems, and internal controls to ensure that the resources entrusted to the department are used efficiently, effectively, and properly. All audits are performed to ensure compliance with departmental policies and procedures, accounting standards,

and state and federal laws and regulations. The Division of Internal Audit provides management with recommendations and suggestions to improve internal controls.

Internal Audit provides management with advice on whether the DCS Risk Management Plan is operating efficiently, effectively, and in accordance with law and regulations. The division receives, tracks, and summarizes reporting to the Department of Finance and Administration, external auditors, and the Council on Accreditation for risk assessment and planning.

Internal Audit is the liaison with the Comptroller's Office for reporting allegations of fraud, waste, and abuse. The division also coordinates requests to the department from external auditors.

Internal Affairs

David Shoemaker, Director

The Internal Affairs Division (IAD) is divided into three major areas of responsibility:

- Conducting fair, impartial, prompt and professional investigations of a confidential administrative nature dealing with misconduct within the Department of Children's Services. In addition, IAD serves as the primary liaison with local, state and federal law enforcement agencies.
- The Absconder Recovery Program that facilitates the apprehension of custody children who abscond from approved placements. This is accomplished through a close liaison with law enforcement and DCS agencies across the state.

- The processing of background information on employees, foster/adoptive parents, contract agency employees, and volunteers. This includes a connection with the Tennessee Information Enforcement System (TIES) to facilitate background information for the emergency placement of children.

Legislative and Constituent Services – (LCS)

Tammy Feldman, Director

The Legislative and Constituent Services Unit (LCS) listens to concerns, answers questions and addresses a variety of problems for the benefit of children each year. The LCS Unit also responds to executive and legislative inquiries as well as inquiries from both private and public sources. The LCS Unit conducts investigative research and serves as an internal/external liaison and agency representative. The LCS Unit works diligently with DCS regional and Central Office staff on these inquiries.

The purpose of the Legislative and Constituent Services Unit is to review and respond to concerns of and/or inquiries by clients, parents, foster and adoptive parents, advocates, legislators, and other concerned citizens regarding all areas within DCS, such as child protective services, foster care, adoption, agency programs, DCS policies and procedures, or service delivery.

The LCS Unit provides objective and neutral analysis of data, while maintaining confidentiality and working cooperatively with others. The LCS Unit is focused on providing timely, thorough, and accurate responses to inquires and complaints that come to the department.



TennCare Policy

Mary Beth Franklyn—Director

The DCS TennCare Services Director serves as the liaison with the Bureau of TennCare, coordinates with TennCare managed care companies assigned to provide services for DCS children, and provides support for all DCS program areas regarding TennCare matters.

TennCare funding supports DCS case management activities, and residential and continuum services. Virtually all of the children in state custody will qualify for TennCare, and obtain medical, behavioral, and dental health services through the managed care networks.

The DCS TennCare Services Director meets regularly with the managed care companies serving children in and at risk of custody to develop processes to enhance access to TennCare services for these children. The managed care companies serving children in custody have provided specific customer service phone numbers to assist DCS staff with the children served by DCS, as well as medical case management, special reports, transition specialists, and inpatient psychiatric care coordination.

Quarterly reports are provided to the Bureau of TennCare regarding DCS TennCare activities, which include eligibility, outreach, and percentages of EPSDT screening appointments met. In addition, the director coordinates the reporting required under the Grier and John B. class action lawsuits.

Technical assistance regarding TennCare is provided to the DCS regional Well-Being Units through telephone conferences, meetings, trainings, and educational materials. Information about accessing TennCare services is developed and provided to family service workers, foster parents, and DCS providers through meetings, newsletters, and the internet.



Map of Regions

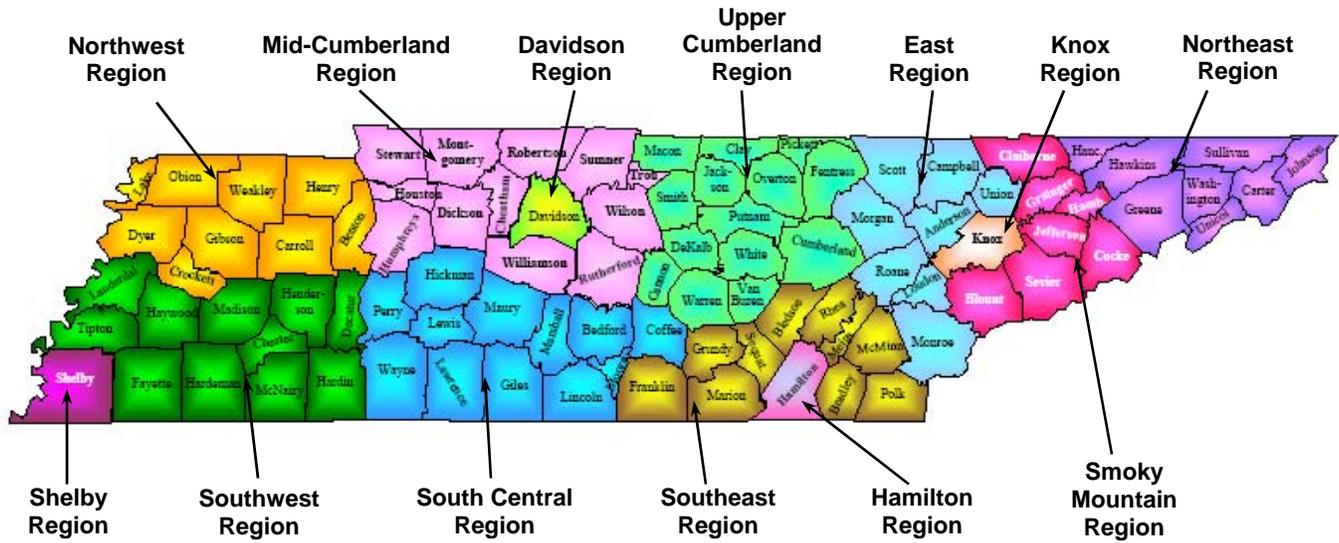
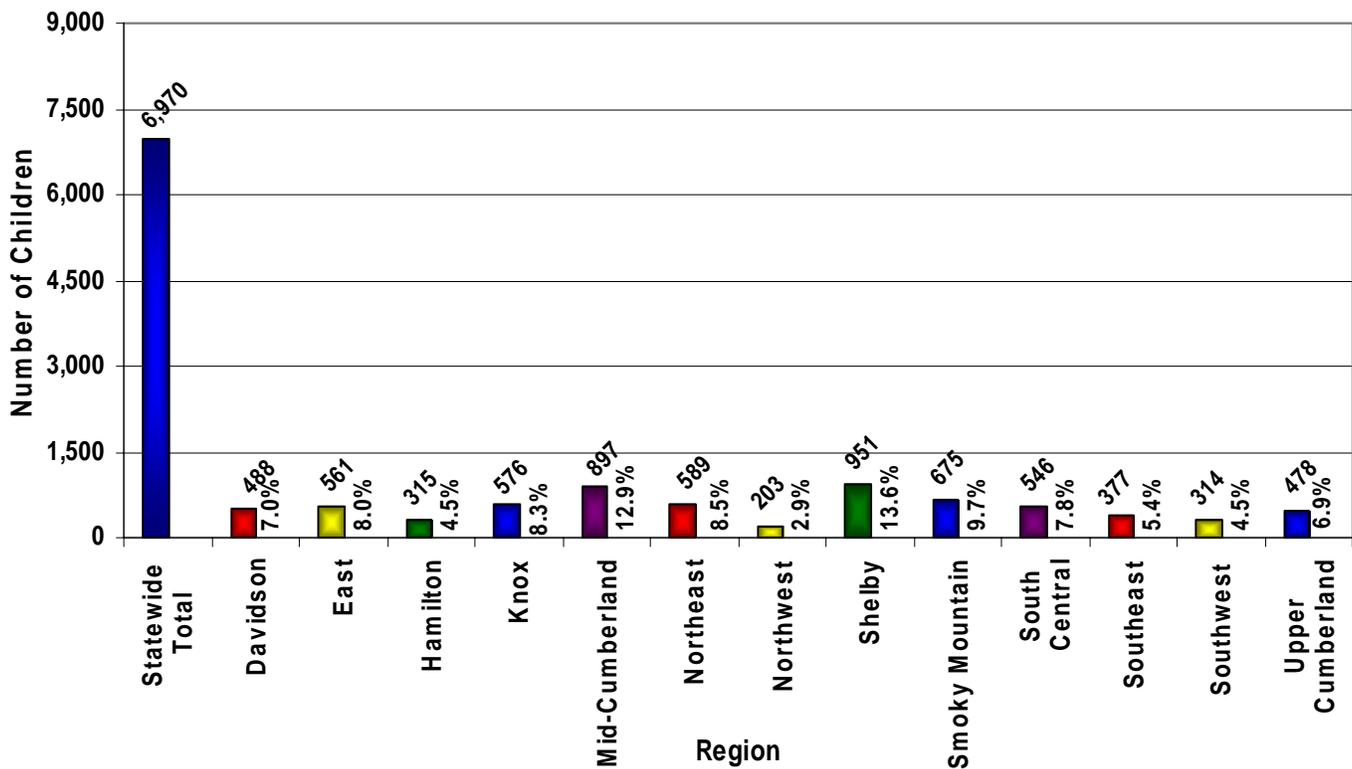


Figure 3: Number of Children in Custody by Region as of June 30, 2009.



Departmental Data

Table 3: Children Entering and Exiting Custody by County of Commitment FY09

County of Commitment	2009 Population Projections Age under 19 *	Commitment Rate (per 1,000 Age 0-19)	Entering by Adjudication			Total Number Entering	Total Number Exiting	Net Change (+/-)
			Delinquent	Dependent/Neglected	Unruly			
Anderson	18,041	10.5	25	159	5	189	345	(156)
Bedford	13,232	3.1	29	11	1	41	63	(22)
Benton	3,767	3.5	3	9	1	13	14	(1)
Bledsoe	3,203	1.9	1	4	1	6	12	(6)
Blount	29,724	4.4	16	115	0	131	125	6
Bradley	24,965	3.8	17	78	0	95	100	(5)
Campbell	9,982	3.9	6	31	2	39	58	(19)
Cannon	3,564	3.9	4	8	2	14	10	4
Carroll	7,243	1.9	2	12	0	14	12	2
Carter	13,519	3.2	11	32	0	43	57	(14)
Cheatham	11,163	3.1	24	9	2	35	28	7
Chester	4,566	2.2	2	8	0	10	7	3
Claiborne	7,781	6.0	3	44	0	47	46	1
Clay	1,909	1.6	3	0	0	3	8	(5)
Cocke	8,737	10.9	18	77	0	95	147	(52)
Coffee	14,076	5.1	18	48	6	72	92	(20)
Crockett	3,985	2.3	3	5	1	9	8	1
Cumberland	12,006	4.7	15	34	8	57	60	(3)
Davidson	152,748	3.3	118	385	4	507	672	(165)
Decatur	2,638	1.5	1	3	0	4	12	(8)
DeKalb	4,746	4.4	8	12	1	21	26	(5)
Dickson	13,470	6.1	31	51	0	82	100	(18)
Dyer	10,483	1.5	8	8	0	16	15	1
Fayette	9,798	1.7	12	5	0	17	13	4
Fentress	4,503	2.9	2	11	0	13	14	(1)
Franklin	10,570	7.1	29	46	0	75	86	(11)
Gibson	12,723	6.4	39	40	3	82	96	(14)
Giles	7,418	5.1	13	22	3	38	38	0
Grainger	5,664	3.9	1	21	0	22	38	(16)
Greene	16,148	6.1	28	66	5	99	118	(19)
Grundy	3,958	3.3	4	9	0	13	9	4

Table 3 Continued

County of Commitment	2009 Population Projections Age under 19 *	Commitment Rate (per 1,000 Age 0-19)	Entering by Adjudication			Total Number Entering	Total Number Exiting	Net Change (+/-)
			Delinquent	Dependent/Neglected	Unruly			
Hamblen	16,105	5.2	34	49	0	83	115	(32)
Hamilton	77,689	2.7	92	113	7	212	289	(77)
Hancock	1,631	3.7	2	1	3	6	8	(2)
Hardeman	7,240	6.9	30	20	0	50	42	8
Hardin	6,427	5.0	11	19	2	32	17	15
Hawkins	14,304	3.9	25	26	5	56	107	(51)
Haywood	5,710	2.6	10	3	2	15	31	(16)
Henderson	7,146	3.4	8	13	3	24	22	2
Henry	7,645	4.2	15	17	0	32	29	3
Hickman	6,460	4.0	2	23	1	26	33	(7)
Houston	2,211	2.3	2	1	2	5	7	(2)
Humphreys	4,758	6.5	11	13	7	31	36	(5)
Jackson	2,627	6.9	5	12	1	18	13	5
Jefferson	13,010	6.4	9	69	5	83	91	(8)
Johnson	3,732	4.6	6	11	0	17	24	(7)
Knox	105,727	3.5	44	319	2	365	427	(62)
Lake	1,531	3.9	1	4	1	6	7	(1)
Lauderdale	7,362	5.6	21	20	0	41	40	1
Lawrence	11,453	6.4	5	64	4	73	58	15
Lewis	3,244	4.3	13	1	0	14	11	3
Lincoln	8,513	4.0	16	17	1	34	55	(21)
Loudon	10,575	5.0	4	49	0	53	32	21
Macon	6,081	8.1	6	40	3	49	43	6
Madison	27,415	3.4	45	48	1	94	107	(13)
Marion	6,901	3.0	2	16	3	21	21	0
Marshall	7,960	4.1	15	18	0	33	34	(1)
Maury	21,840	3.4	23	47	5	75	82	(7)
McMinn	13,905	7.1	31	65	3	99	80	19
McNairy	6,839	3.5	8	16	0	24	17	7
Meigs	3,185	2.2	1	6	0	7	12	(5)
Monroe	12,177	3.9	11	35	1	47	67	(20)
Montgomery	46,725	3.6	48	121	1	170	201	(31)
Moore	1,489	5.4	7	1	0	8	5	3
Morgan	4,872	2.7	1	12	0	13	5	8

Table 3 Continued

County of Commitment	2009 Population Projections Age under 19 *	Commitment Rate (per 1,000 Age 0-19)	Entering by Adjudication			Total Number Entering	Total Number Exiting	Net Change (+/-)
			Delinquent	Dependent/Neglected	Unruly			
Obion	8,395	2.3	2	17	0	19	11	8
Overton	5,235	3.4	1	15	2	18	15	3
Perry	1,956	5.1	10	0	0	10	6	4
Pickett	1,119	0.0	0	0	0	0	3	(3)
Polk	4,039	3.0	6	6	0	12	6	6
Putnam	18,101	3.8	24	43	1	68	67	1
Rhea	7,879	3.9	3	26	2	31	24	7
Roane	12,717	5.7	6	67	0	73	81	(8)
Robertson	18,031	3.6	33	30	2	65	63	2
Rutherford	68,735	1.1	9	67	0	76	141	(65)
Scott	6,261	4.5	6	22	0	28	36	(8)
Sequatchie	3,548	4.5	10	6	0	16	10	6
Sevier	20,445	4.7	14	81	1	96	102	(6)
Shelby	278,723	3.7	358	684	0	1042	959	83
Smith	5,093	6.1	4	26	1	31	54	(23)
Stewart	3,452	2.9	2	8	0	10	9	1
Sullivan	35,492	4.6	88	75	1	164	217	(53)
Sumner	42,183	3.3	69	64	6	139	199	(60)
Tipton	17,154	1.6	10	17	0	27	40	(13)
Trousdale	2,056	3.9	6	2	0	8	8	0
Unicoi	3,952	9.6	25	11	2	38	38	0
Union	5,332	7.9	3	38	1	42	56	(14)
Van Buren	1,355	7.4	3	7	0	10	13	(3)
Warren	10,747	5.6	19	39	2	60	74	(14)
Washington	27,779	5.3	60	82	5	147	133	14
Wayne	3,770	5.6	5	16	0	21	8	13
Weakley	8,932	3.9	10	23	2	35	30	5
White	6,289	5.2	9	21	3	33	38	(5)
Williamson	48,633	1.4	22	40	5	67	75	(8)
Wilson	29,526	3.8	44	65	3	112	93	19
Total	1,637,748	3.9	1919	4250	147	6316	7206	(890)

*2009 Population Projections Age under 19 taken from Tennessee Department of Health Population Projections 2000-2010. TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Table 4: Children Remaining in Custody by County of Commitment on June 30, 2009

County of Commitment	Adjudication						Total
	Delinquent		Dependent/Neglected		Unruly		
	Number	Percent	Number	Percent	Number	Percent	
Anderson	31	13.6%	195	85.5%	2	0.9%	228
Bedford	27	64.3%	13	31.0%	2	4.8%	42
Benton	2	14.3%	11	78.6%	1	7.1%	14
Bledsoe	0	0.0%	11	100.0%	0	0.0%	11
Blount	16	8.7%	168	91.3%	0	0.0%	184
Bradley	21	19.1%	89	80.9%	0	0.0%	110
Campbell	7	13.5%	44	84.6%	1	1.9%	52
Cannon	2	15.4%	9	69.2%	2	15.4%	13
Carroll	2	14.3%	12	85.7%	0	0.0%	14
Carter	6	16.7%	30	83.3%	0	0.0%	36
Cheatham	20	57.1%	13	37.1%	2	5.7%	35
Chester	1	10.0%	9	90.0%	0	0.0%	10
Claiborne	5	8.6%	53	91.4%	0	0.0%	58
Clay	0	0.0%	3	100.0%	0	0.0%	3
Cocke	15	16.3%	77	83.7%	0	0.0%	92
Coffee	18	16.7%	85	78.7%	5	4.6%	108
Crockett	1	33.3%	2	66.7%	0	0.0%	3
Cumberland	15	22.1%	46	67.6%	7	10.3%	68
Davidson	155	32.5%	319	66.9%	3	0.6%	477
Decatur	0	0.0%	5	100.0%	0	0.0%	5
DeKalb	5	17.2%	23	79.3%	1	3.4%	29
Dickson	33	32.0%	69	67.0%	1	1.0%	103
Dyer	5	50.0%	5	50.0%	0	0.0%	10
Fayette	5	55.6%	4	44.4%	0	0.0%	9
Fentress	2	7.4%	23	85.2%	2	7.4%	27
Franklin	20	42.6%	27	57.4%	0	0.0%	47
Gibson	30	46.2%	34	52.3%	1	1.5%	65
Giles	12	37.5%	17	53.1%	3	9.4%	32
Grainger	1	4.3%	22	95.7%	0	0.0%	23
Greene	33	22.4%	106	72.1%	8	5.4%	147
Grundy	3	30.0%	7	70.0%	0	0.0%	10
Hamblen	34	29.6%	81	70.4%	0	0.0%	115
Hamilton	113	35.4%	203	63.6%	3	0.9%	319
Hancock	3	37.5%	2	25.0%	3	37.5%	8
Hardeman	28	47.5%	31	52.5%	0	0.0%	59
Hardin	9	33.3%	17	63.0%	1	3.7%	27
Hawkins	7	14.6%	37	77.1%	4	8.3%	48

Table 4 Continued

County of Commitment	Adjudication						Total
	Delinquent		Dependent/Neglected		Unruly		
	Number	Percent	Number	Percent	Number	Percent	
Haywood	8	53.3%	5	33.3%	2	13.3%	15
Henderson	8	38.1%	11	52.4%	2	9.5%	21
Henry	10	31.3%	22	68.8%	0	0.0%	32
Hickman	2	8.7%	21	91.3%	0	0.0%	23
Houston	1	20.0%	3	60.0%	1	20.0%	5
Humphreys	8	26.7%	15	50.0%	7	23.3%	30
Jackson	3	11.1%	23	85.2%	1	3.7%	27
Jefferson	10	11.0%	76	83.5%	5	5.5%	91
Johnson	3	23.1%	9	69.2%	1	7.7%	13
Knox	64	11.2%	504	88.6%	1	0.2%	569
Lake	1	33.3%	2	66.7%	0	0.0%	3
Lauderdale	11	32.4%	23	67.6%	0	0.0%	34
Lawrence	7	6.7%	94	89.5%	4	3.8%	105
Lewis	0	0.0%	9	100.0%	0	0.0%	9
Lincoln	15	53.6%	12	42.9%	1	3.6%	28
Loudon	6	11.8%	45	88.2%	0	0.0%	51
Macon	7	11.3%	50	80.6%	5	8.1%	62
Madison	38	40.9%	55	59.1%	0	0.0%	93
Marion	2	14.3%	10	71.4%	2	14.3%	14
Marshall	18	40.0%	25	55.6%	2	4.4%	45
Maury	19	18.6%	75	73.5%	8	7.8%	102
McMinn	30	29.4%	71	69.6%	1	1.0%	102
McNairy	3	20.0%	12	80.0%	0	0.0%	15
Meigs	0	0.0%	14	100.0%	0	0.0%	14
Monroe	13	19.1%	54	79.4%	1	1.5%	68
Montgomery	55	31.4%	117	66.9%	3	1.7%	175
Moore	5	83.3%	1	16.7%	0	0.0%	6
Morgan	2	9.5%	19	90.5%	0	0.0%	21
Obion	7	31.8%	15	68.2%	0	0.0%	22
Overton	1	3.6%	25	89.3%	2	7.1%	28
Perry	1	5.6%	17	94.4%	0	0.0%	18
Pickett	0	0.0%	4	100.0%	0	0.0%	4
Polk	5	41.7%	7	58.3%	0	0.0%	12
Putnam	15	16.7%	75	83.3%	0	0.0%	90
Rhea	3	9.4%	26	81.3%	3	9.4%	32
Roane	5	7.9%	58	92.1%	0	0.0%	63
Robertson	37	53.6%	30	43.5%	2	2.9%	69

Table 4 Continued

County of Commitment	Adjudication						Total
	Delinquent		Dependent/Neglected		Unruly		
	Number	Percent	Number	Percent	Number	Percent	
Rutherford	16	13.7%	101	86.3%	0	0.0%	117
Scott	5	12.8%	34	87.2%	0	0.0%	39
Sequatchie	8	40.0%	12	60.0%	0	0.0%	20
Sevier	18	15.1%	100	84.0%	1	0.8%	119
Shelby	279	29.4%	671	70.6%	0	0.0%	950
Smith	5	17.2%	22	75.9%	2	6.9%	29
Stewart	1	6.7%	14	93.3%	0	0.0%	15
Sullivan	59	32.6%	119	65.7%	3	1.7%	181
Sumner	63	33.3%	115	60.8%	11	5.8%	189
Tipton	9	37.5%	15	62.5%	0	0.0%	24
Trousdale	5	62.5%	3	37.5%	0	0.0%	8
Unicoi	14	53.8%	10	38.5%	2	7.7%	26
Union	1	2.4%	39	95.1%	1	2.4%	41
Van Buren	5	41.7%	7	58.3%	0	0.0%	12
Warren	14	28.6%	33	67.3%	2	4.1%	49
Washington	28	21.5%	100	76.9%	2	1.5%	130
Wayne	6	21.4%	22	78.6%	0	0.0%	28
Weakley	7	16.3%	33	76.7%	3	7.0%	43
White	8	22.9%	24	68.6%	3	8.6%	35
Williamson	20	33.3%	36	60.0%	4	6.7%	60
Wilson	43	41.7%	59	57.3%	1	1.0%	103
Total	1724	25%	5105	73%	141	2%	6970

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 4: Length of Time to Adoption Fiscal Year July 1, 2008 – June 30, 2009.

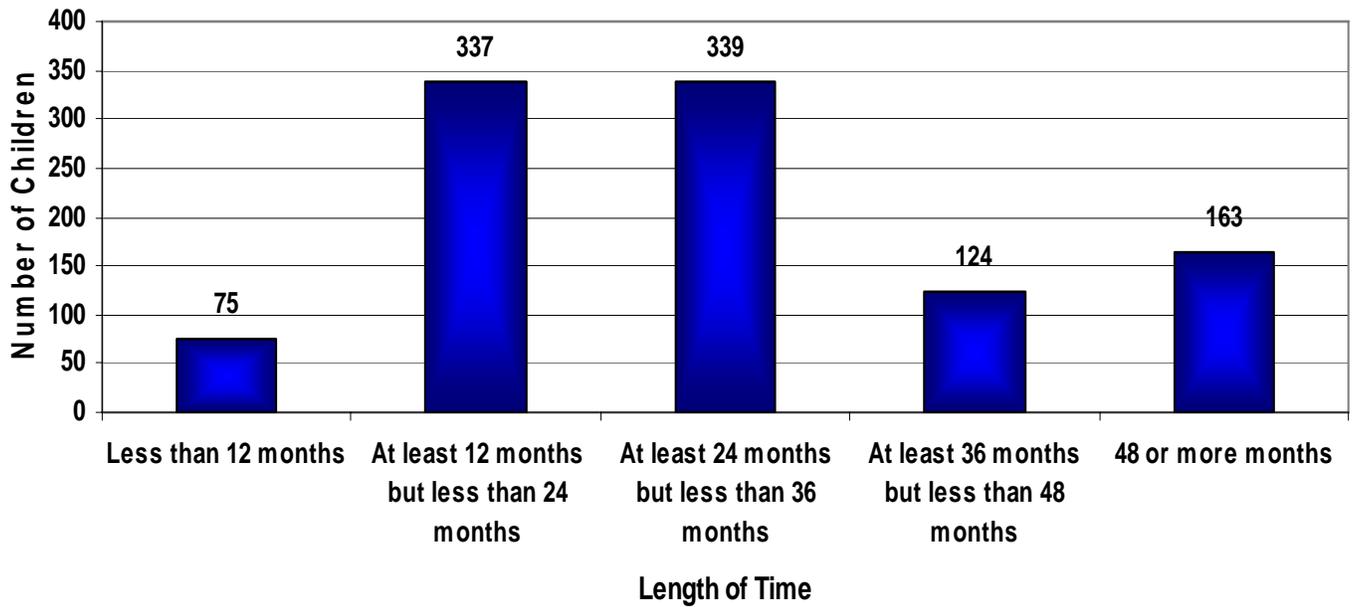


Figure 5: Length of Time to Reunification Fiscal Year July 1, 2008 – June 30, 2009.

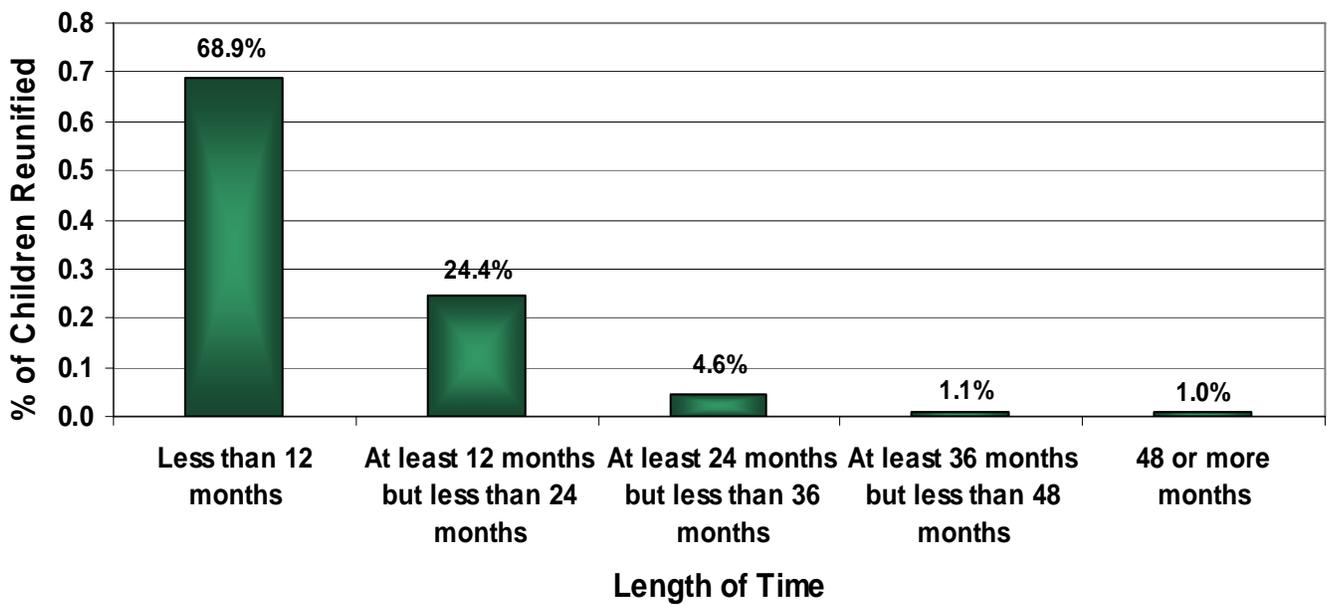


Figure 6: Of All Children Who Entered Care During the Year, What Percentage Reentered Within 12 Months of a Prior Foster Care Episode?

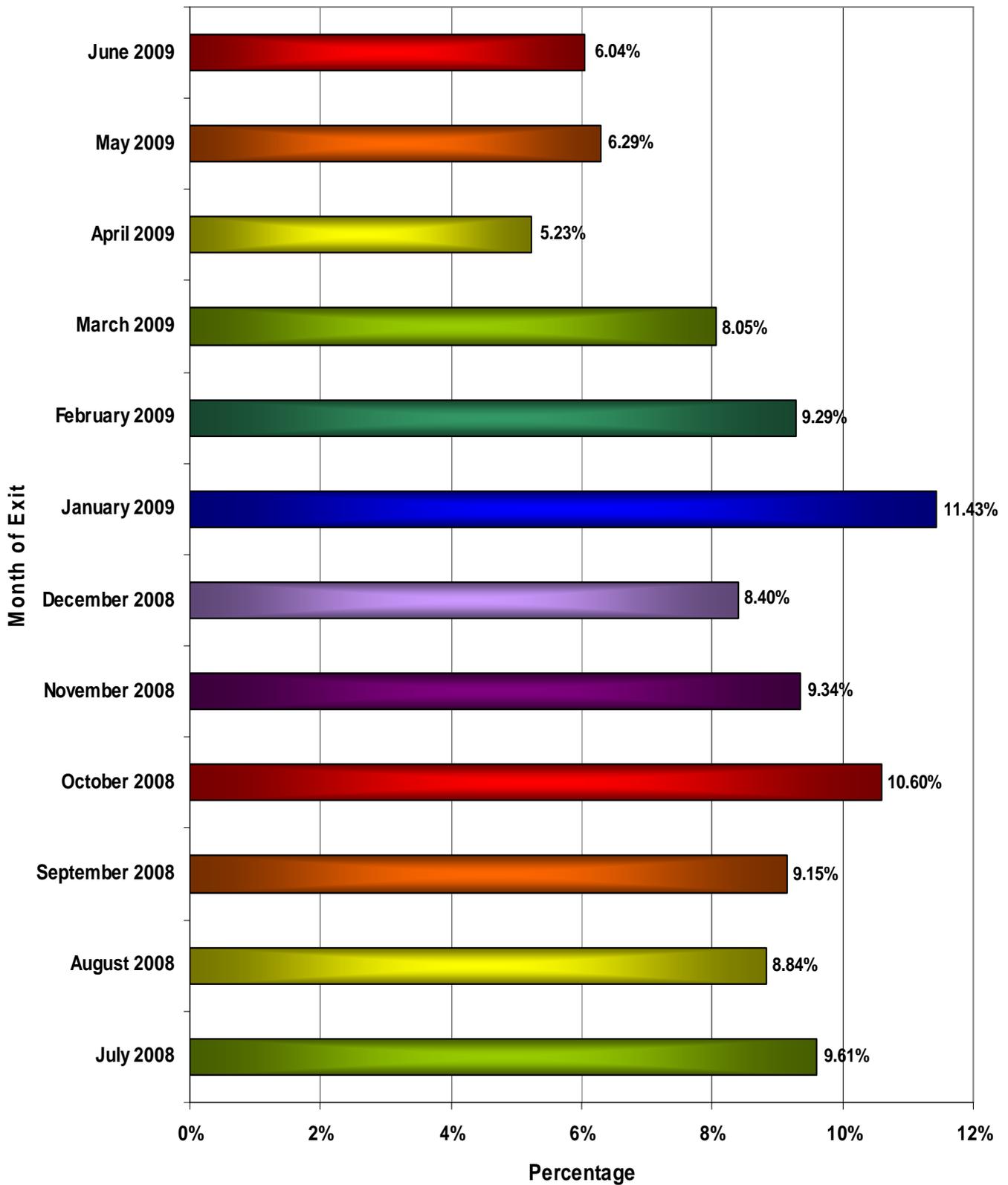


Table 5: Of the Children in Foster Care for Less Than 12 months, What Percentage Had No More Than 2 Placement Settings?

Movement Frequency *			Placement Frequency **		
Number of Movements	Number	Percent	Number of Placements	Number	Percent
One - Two	2,814	68.8%	One - Two	3,079	75.7%
Three - Five	933	22.8%	Three - Five	868	21.3%
Six - Eight	207	5.1%	Six - Eight	102	2.5%
Nine - Ten	63	1.5%	Nine - Ten	15	0.4%
More than Ten	72	1.8%	More than Ten	5	0.1%
Total	4,089	100.0%	Total	4,069	100.0%

*Temporary breaks in placement are counted here. This includes In-Home and Trial Home Visit placements as well as children on runaway status. Also, In-Patient Psychiatric Care and Medical/Surgical Hospital stays of less than 10 days.

**Temporary breaks in placement are excluded from these counts.

TN KIDS is a "live" database with on-going additions and updates being made to data in the system.

Due to this continual process, results may vary based on the time a report is generated.

Table 6: Children in Custody Statewide by Age, Gender and Race on June 30, 2009

Race / Ethnicity	0 - 1		2 - 4		5 - 12		13 - 18		Total
	Male	Female	Male	Female	Male	Female	Male	Female	
White Non-Hispanic	226	182	289	281	591	564	1,264	819	4,216
Black/African American Non-Hispanic	73	66	115	107	182	174	946	404	2,067
Hispanic	28	15	31	22	31	30	51	36	244
Multi-Race Non-Hispanic	10	8	16	8	33	28	41	28	172
Asian	0	0	0	0	1	2	5	2	10
American Indian/ Alaska Native	1	2	1	0	1	2	3	0	10
Native Hawaiian/ Pacific Islander	0	1	0	0	1	0	1	1	4
Unable to Determine	20	18	17	26	28	28	64	46	247
Total	358	292	469	444	868	828	2,375	1,336	6,970

TN KIDS is a "live" database with on-going additions and updates being made to data in the system.

Due to this continual process, results may vary based on the time a report is generated.

Figure 7: Children in Custody by Race/Ethnicity on June 30, 2009

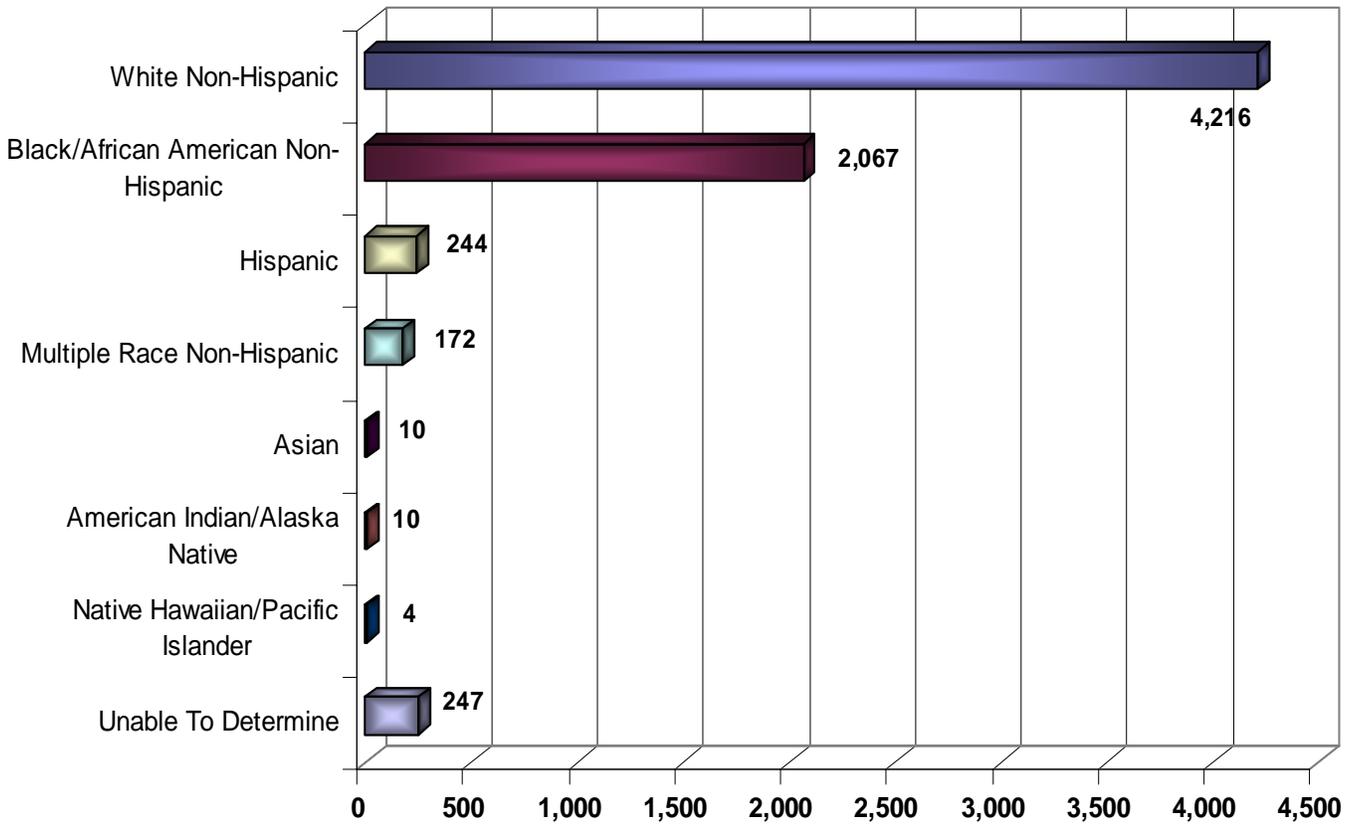


Figure 8: Children in Custody Statewide by Gender and Adjudication on June 30, 2009

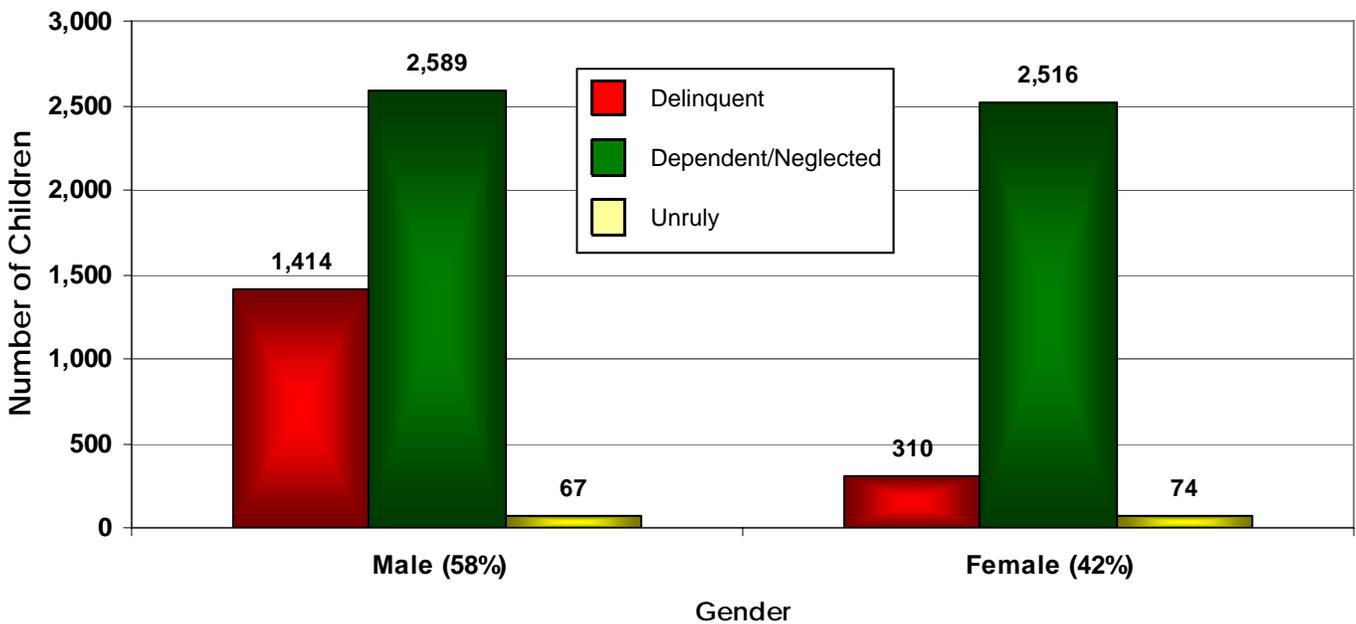


Figure 9: Sole and Concurrent Goals of Adoption on June 30, 2009 and the Number of Finalized Adoptions in FY08-09

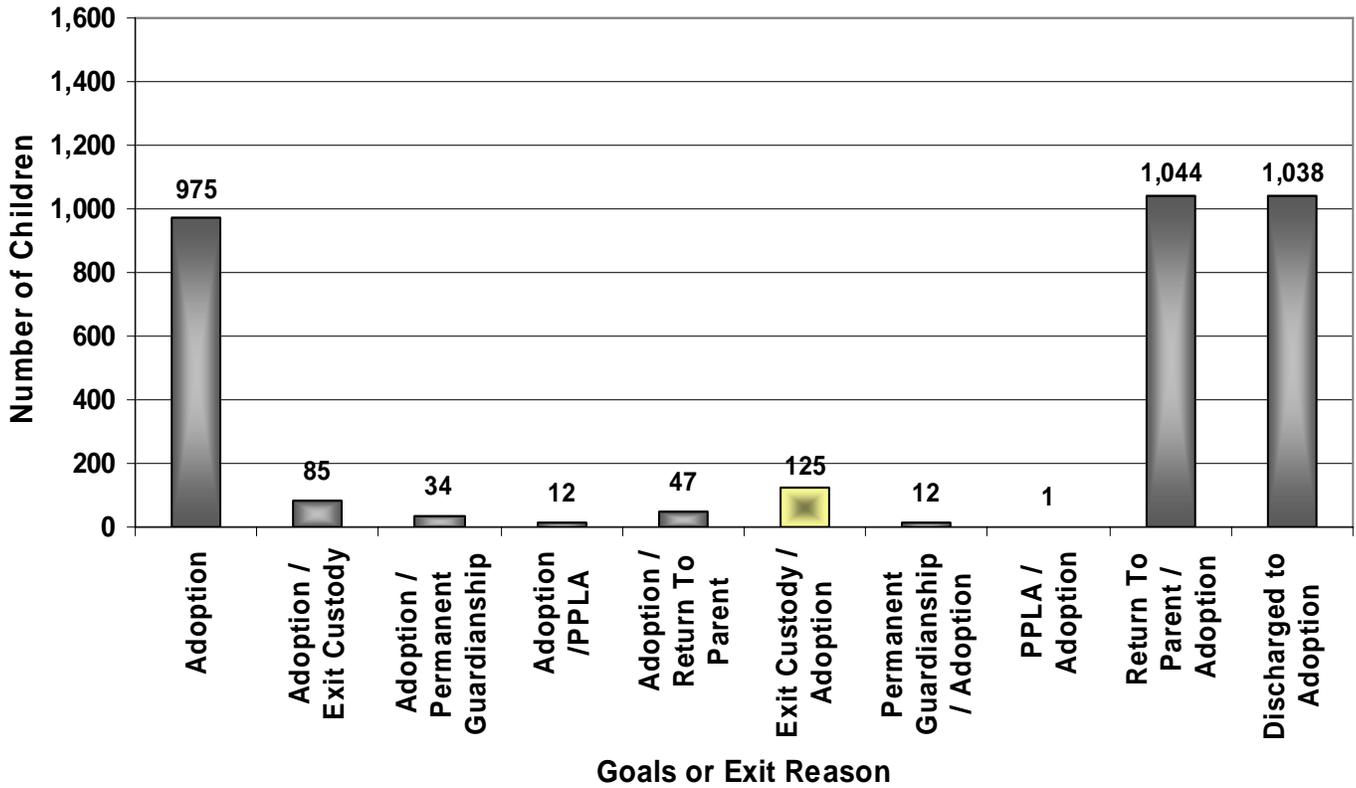


Table 7: Children (Either Dependent/Neglect or Unruly) in Custody Statewide on June 30, 2009 by Type of Permanency Goal Assigned*

Permanency Plan Goals	Number of	Percent
Adoption	975	19.9%
Adoption / Exit Custody Kin	29	0.6%
Adoption / Exit Custody Relative	56	1.1%
Adoption / Permanent Guardianship	34	0.7%
Adoption / Planned Permanent Living Arrangement Kin	11	0.2%
Adoption / Planned Permanent Living Arrangement Relative	1	0.0%
Adoption / Return To Parent	47	1.0%
Exit Custody Kin	35	0.7%
Exit Custody Kin / Adoption	30	0.6%
Exit Custody Kin / Exit Custody Relative	7	0.1%
Exit Custody Kin / Permanent Guardianship	2	0.0%
Exit Custody Kin / Return To Parent	7	0.1%
Exit Custody Relative	90	1.8%
Exit Custody Relative / Adoption	95	1.9%
Exit Custody Relative / Exit Custody Kin	12	0.2%
Exit Custody Relative / Permanent Guardianship	3	0.1%
Exit Custody Relative / Planned Permanent Living Arrangement Kin	1	0.0%
Exit Custody Relative / Return To Parent	67	1.4%
Permanent Guardianship	6	0.1%
Permanent Guardianship / Adoption	12	0.2%
Permanent Guardianship / Exit Custody Kin	3	0.1%
Permanent Guardianship / Exit Custody Relative	4	0.1%
Permanent Guardianship / Return To Parent	5	0.1%
Planned Permanent Living Arrangement Kin	18	0.4%
Planned Permanent Living Arrangement Kin / Adoption	1	0.0%
Planned Permanent Living Arrangement Kin / Exit Custody Kin	1	0.0%
Planned Permanent Living Arrangement Kin / Exit Custody Relative	3	0.1%
Planned Permanent Living Arrangement Relative	1	0.0%
Return To Parent	900	18.3%
Return To Parent / Adoption	1044	21.3%
Return To Parent / Exit Custody	1	0.0%
Return To Parent / Exit Custody Kin	224	4.6%
Return To Parent / Exit Custody Relative	1158	23.6%
Return To Parent / Permanent Guardianship	12	0.2%
Return To Parent / Planned Permanent Living Arrangement Kin	2	0.0%
Missing	14	0.3%
Total	4911	100.0%

Note: As of June 30, 2009, 14 records, or 0.3%, did not have permanency data recorded.

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 10: Children in Custody on the Last Day of Each Fiscal Year – Fiscal Years 1999 – 2009

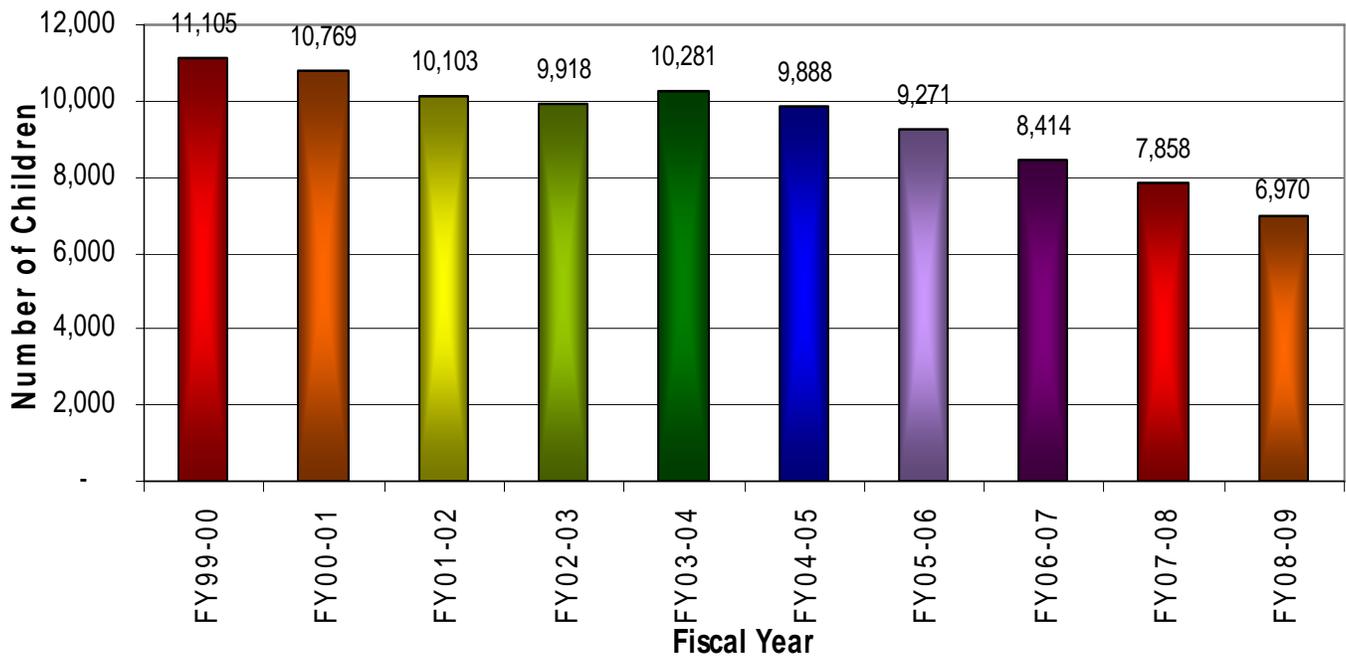


Figure 11: Length of Stay in Care by Adjudication Fiscal Year 2009

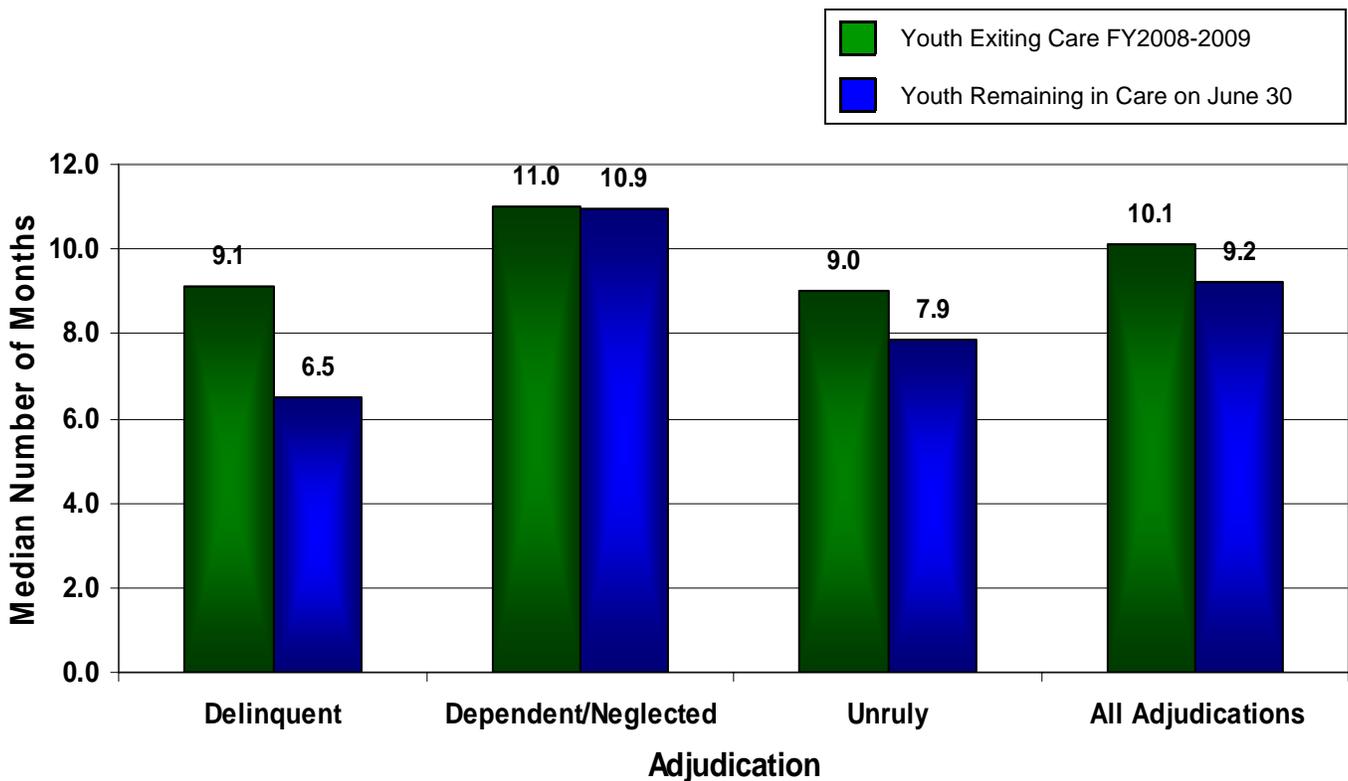


Figure 12: Children Entering and Exiting Custody by Month – Fiscal Year 2009

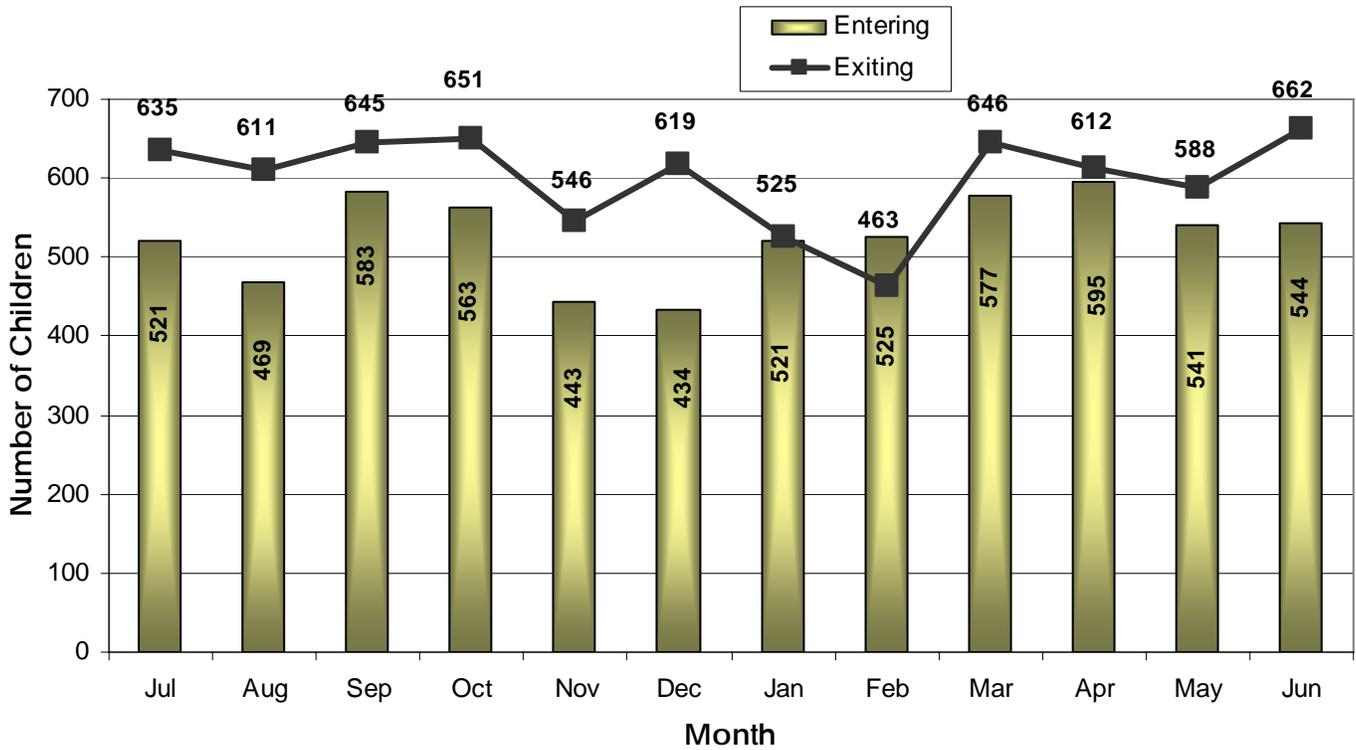


Figure 13: Children Exiting to Finalized Adoption – Fiscal Years 1999– 2009

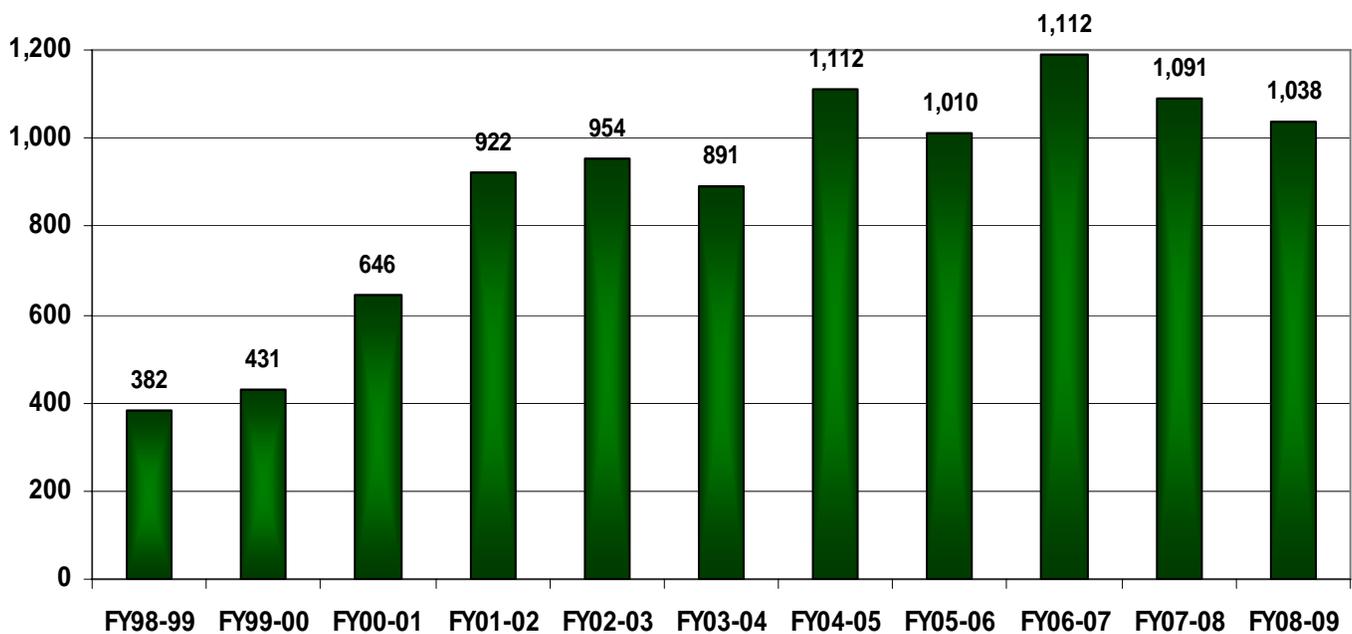


Table 8: Direct Service Staff Vacancies on June 30, 2009

	CS Family service worker 1* - \$30,965**		CS Family service worker 2 - \$34,480**	
	Total Vacant	Total Positions	Total Vacant	Total Positions
Davidson	0	0	12	189
East TN	0	0	4	133
Hamilton	0	0	4	88
Knox	0	0	7	102
Mid-Cumberland	0	0	26	265
Northeast	0	0	4	164
Northwest	0	0	3	81
Shelby	0	0	21	259
South Central	0	0	7	156
Smoky Mountain	0	0	7	140
Southeast	0	0	4	102
Southwest	0	0	5	140
Upper Cumberland	0	0	12	139
	CS Family service worker 3 - \$37,606**		CS Family service worker 4 - \$42,960**	
	Total Vacant	Total Positions	Total Vacant	Total Positions
Davidson	1	25	4	35
East TN	0	8	1	25
Hamilton	2	22	0	18
Knox	1	16	0	19
Mid-Cumberland	2	19	3	49
Northeast	2	24	0	31
Northwest	0	12	0	16
Shelby	4	29	4	51
South Central	2	11	1	27
Smoky Mountain	1	10	0	26
Southeast	4	18	0	21
Southwest	3	17	2	30
Upper Cumberland	0	18	1	30

*These positions are "flex" positions and are filled on an as needed basis. As such, there are not vacancies per se.

**These dollar amounts are average yearly salaries.

Figure 14: Children in Custody Statewide by Age and Adjudication on June 30, 2009

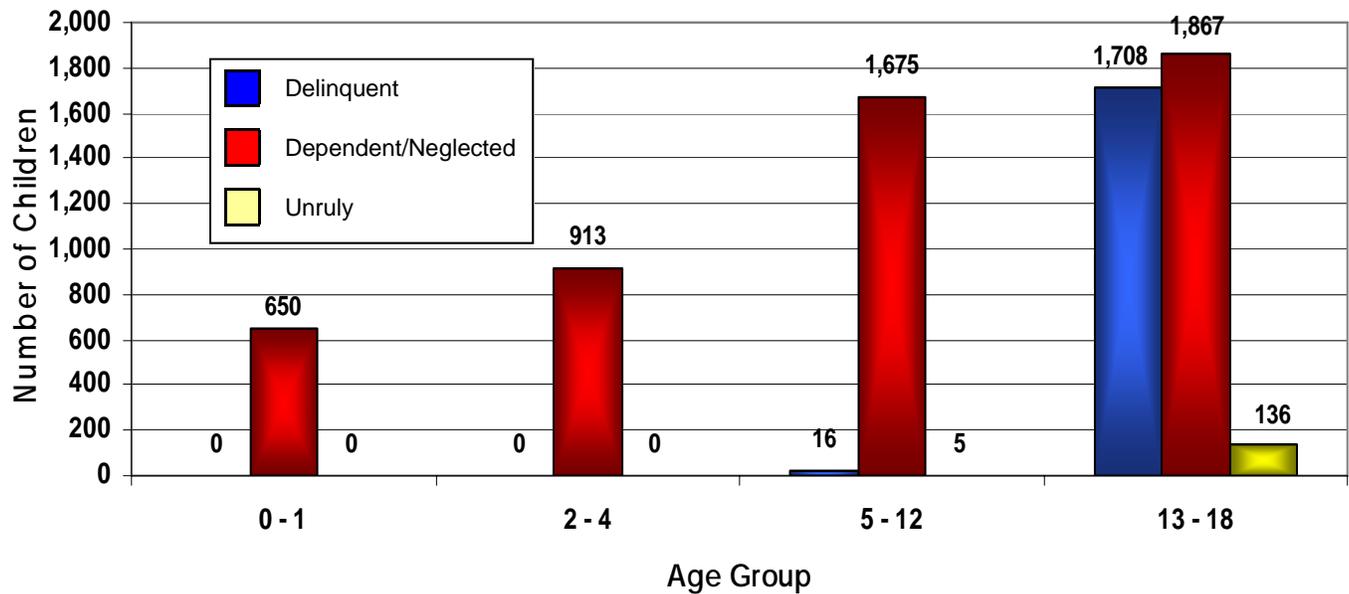


Table 9: Children in Custody Statewide by Placement Type on June 30, 2009

Placement Type/Level	Frequency	%
Acute	23	0.3%
Contract Foster Home	776	11.1%
DCS Foster Home (Authorized, Expedited)	2,462	35.3%
DCS Group Home	53	0.8%
DCS Youth Development Center	415	6.0%
Emergency Services	111	1.6%
Foster Care Medically Fragile	42	0.6%
In-Home	78	1.1%
Level 2	1,286	18.5%
Level 3	1,023	14.7%
Level 4	103	1.5%
Runaway	162	2.3%
Transitional/Independent Living	1	0.0%
Trial Home Visit 30/60/90	381	5.5%
Missing	54	0.8%
Total	6,970	100.0%

Table 10: Discharge Reasons for Children Exiting Custody – Fiscal Year 2008 through 2009

Discharge Reason	Number of Children	Percent
Reunification With Parents or Primary Caretakers	3,912	54.3%
Living With Other Relatives/Kin	1,332	18.5%
Adoption	1,038	14.4%
Emancipation	620	8.6%
Permanent Guardianship	147	2.0%
Transfer to Another Agency	89	1.2%
Runaway	54	0.7%
Death of Child	11	0.2%
Total	7,203	100.0%

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Table 11: Children in Custody by Region and Age on June 30, 2009

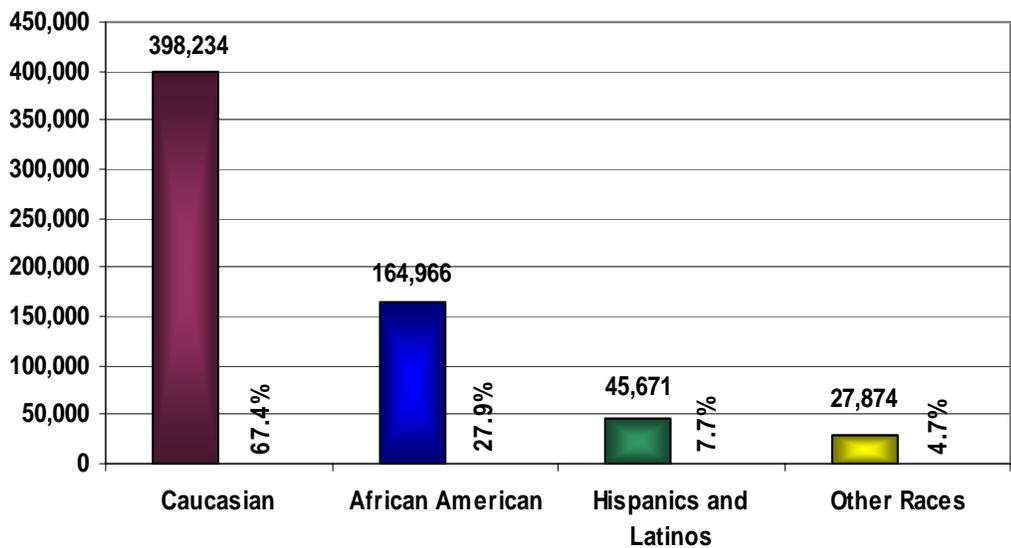
Region of Assignment	Age Group				Total
	0 - 1	2 - 4	5 - 12	13 - 18	
Davidson	32	60	82	314	488
East Tennessee	46	99	174	242	561
Hamilton	26	43	58	188	315
Knox	84	83	164	245	576
Mid Cumberland	85	111	196	505	897
Northeast	54	85	140	310	589
Northwest	14	16	42	131	203
Shelby	80	106	207	558	951
Smoky Mountain	69	92	203	311	675
South Central	35	67	156	288	546
Southeast	38	48	93	198	377
Southwest	29	41	50	194	314
Upper Cumberland	58	62	131	227	478
Total	650	913	1,696	3,711	6,970
Total Percent	9.3%	13.1%	24.3%	53.2%	100.0%

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Davidson Region



Total Population— 591,074*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 12: Placement Type for Children In Care In the Davidson Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	1	0.2%
Contract Foster Home	44	9.0%
DCS Foster Home	132	27.0%
DCS Group Home	3	0.6%
DCS Youth Development Center	64	13.1%
Emergency Services	14	2.9%
Foster Care Medically Fragile	1	0.2%
In-Home	3	0.6%
Level 2	76	15.6%
Level 3	90	18.4%
Level 4	9	1.8%
Runaway	18	3.7%
Trial Home Visit 30/60/90	33	6.8%
Total	488	100.0%

Population ages 19 and under as of June 30, 2009— 152,748

Number of children in care as of June 30, 2009—488

The Davidson Region is a single-county region located in Middle Tennessee. It includes the city of Nashville where the regional office is located. The region has a staff of 189 who assist in the provision of services to the children and families of Davidson County. Davidson County is the 8th largest region in the state based on the number of 488 children in custody.

(Data Source: TN KIDS)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care."

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 15: Children in Custody in the Davidson Region By Age Group Compared with Statewide Totals as of June 30, 2009

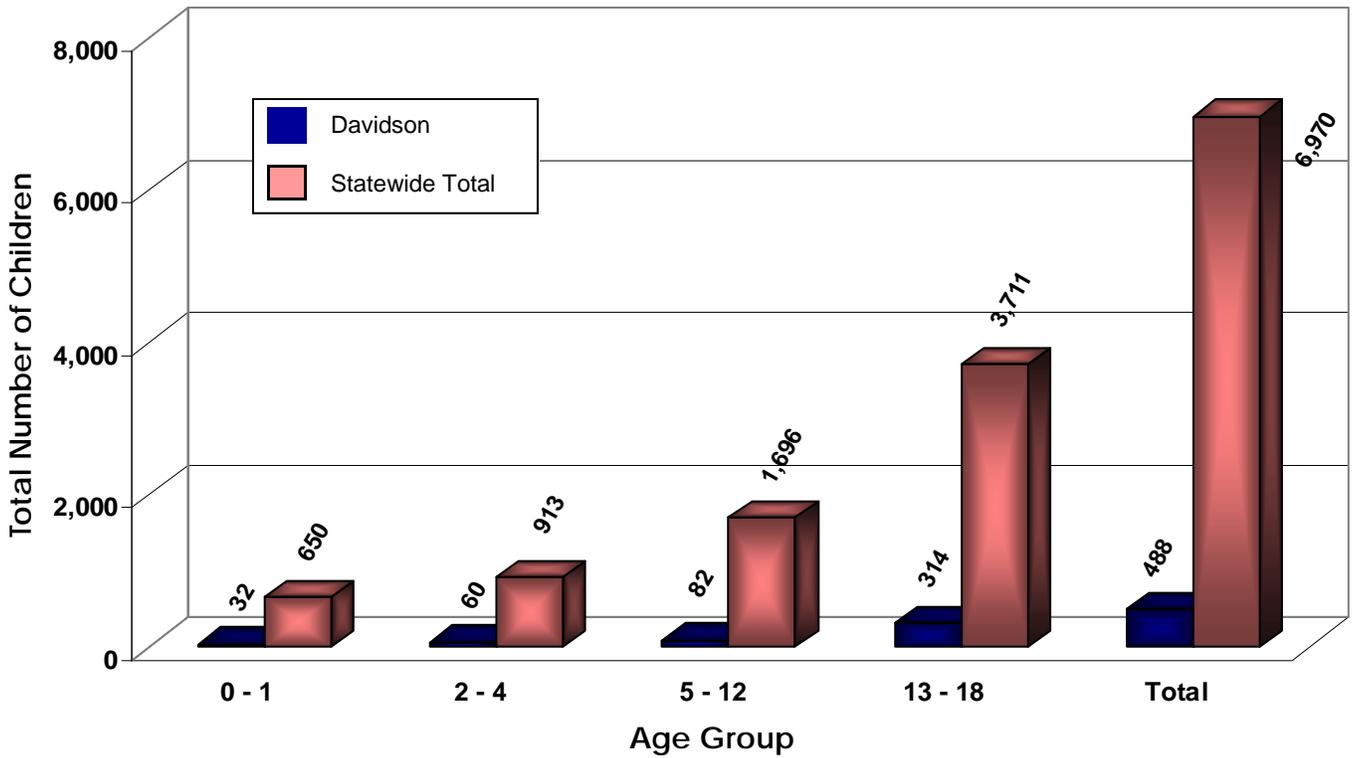


Figure 16: Children in Custody in the Davidson Region By Gender as of June 30, 2009

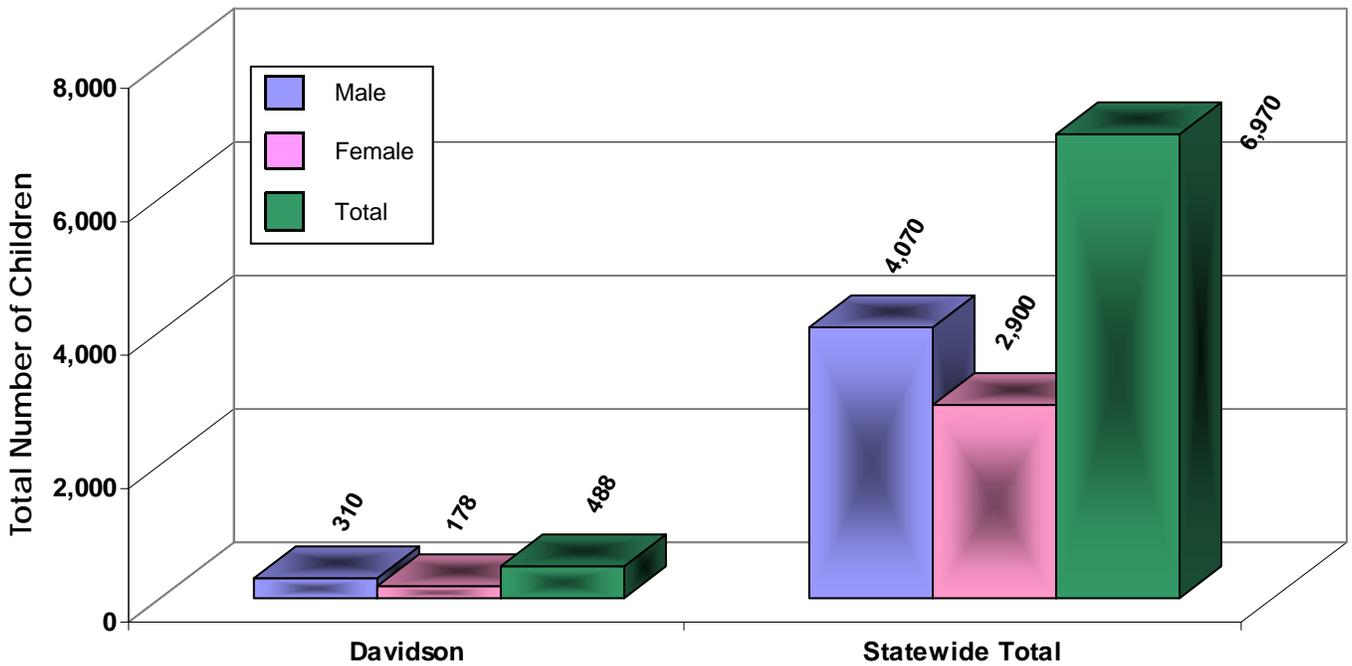


Figure 17: Children in Custody in the Davidson Region By Race/Ethnicity as of June 30, 2009

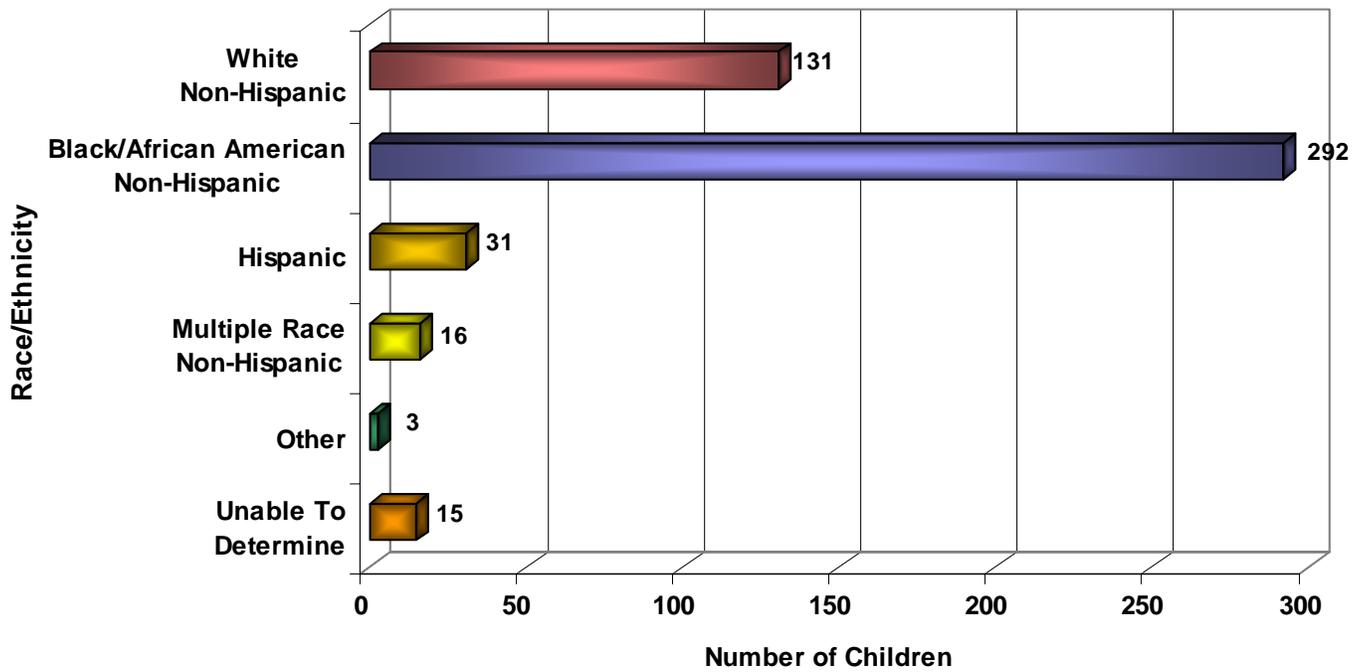
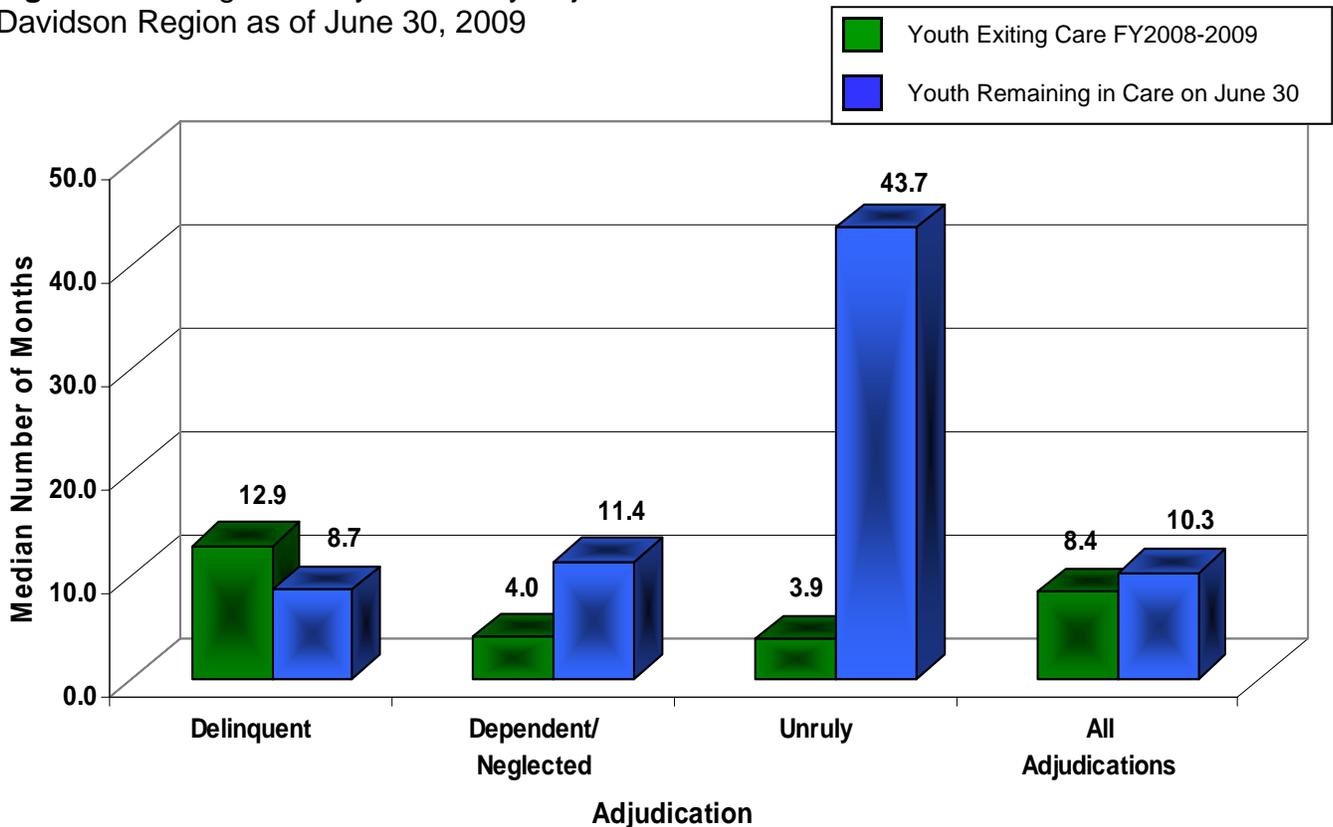


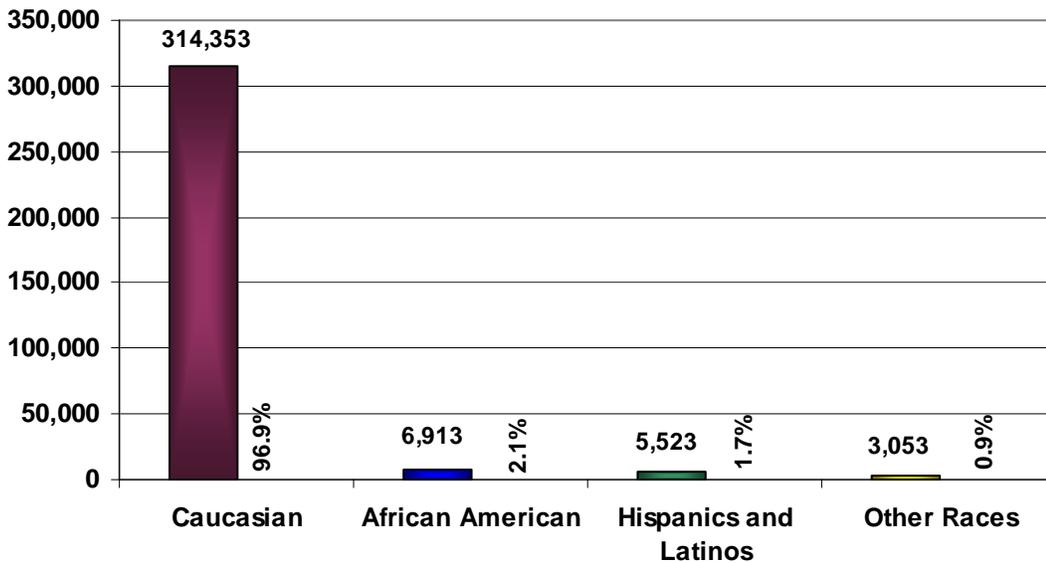
Figure 18: Length of Stay in Care by Adjudication in the Davidson Region as of June 30, 2009



East Region



Total Population—324,319*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 13: Placement Type for Children In Care In the East Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	1	0.4%
Contract Foster Home	41	7.3%
DCS Foster Home (Authorized, Expedited)	269	48.0%
DCS Group Home	1	0.2%
DCS Youth Development Center	17	3.0%
Emergency Services	10	1.8%
Foster Care Medically Fragile	6	1.1%
Level 2	104	18.5%
Level 3	58	10.3%
Level 4	5	0.9%
Runaway	17	3.0%
Trial Home Visit 30/60/90	26	4.6%
Missing	5	0.9%
Total	561	100.0%

Population ages 19 and under as of June 30, 2009—79,957

Number of children in care as of June 30, 2009—561

The East Region includes eight counties with the regional office located in Clinton. There are 133 staff members who support service delivery. The eight counties in the East Region are: Anderson, Campbell, Loudon, Monroe, Morgan, Roane, Scott and Union.

In Fiscal Year 2009, East was the 6th largest region based on 561 children in custody.

(Data Source: TN KIDS)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 19: Children in Custody in the East Region by Age Group Compared with Statewide Totals as of June 30, 2009

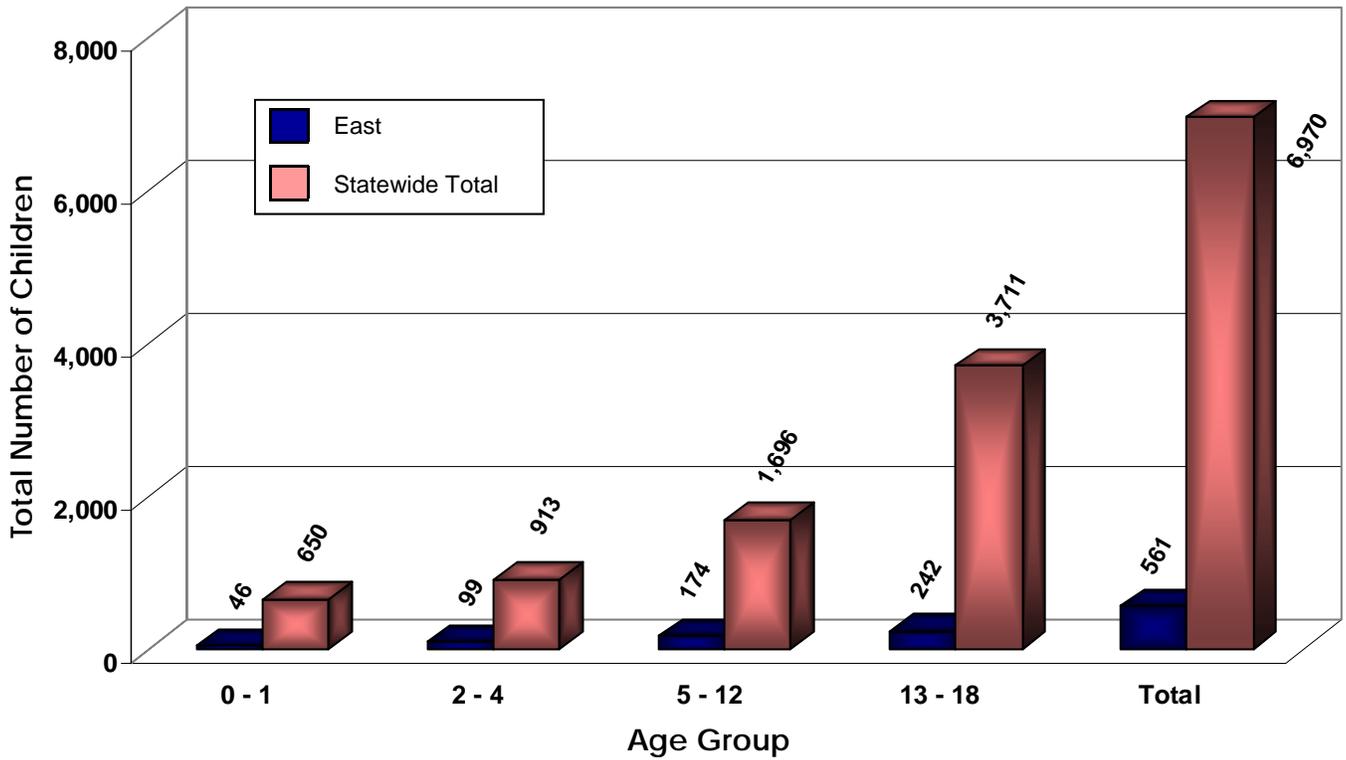


Figure 20: Children in Custody in the East Region by Gender as of June 30, 2009

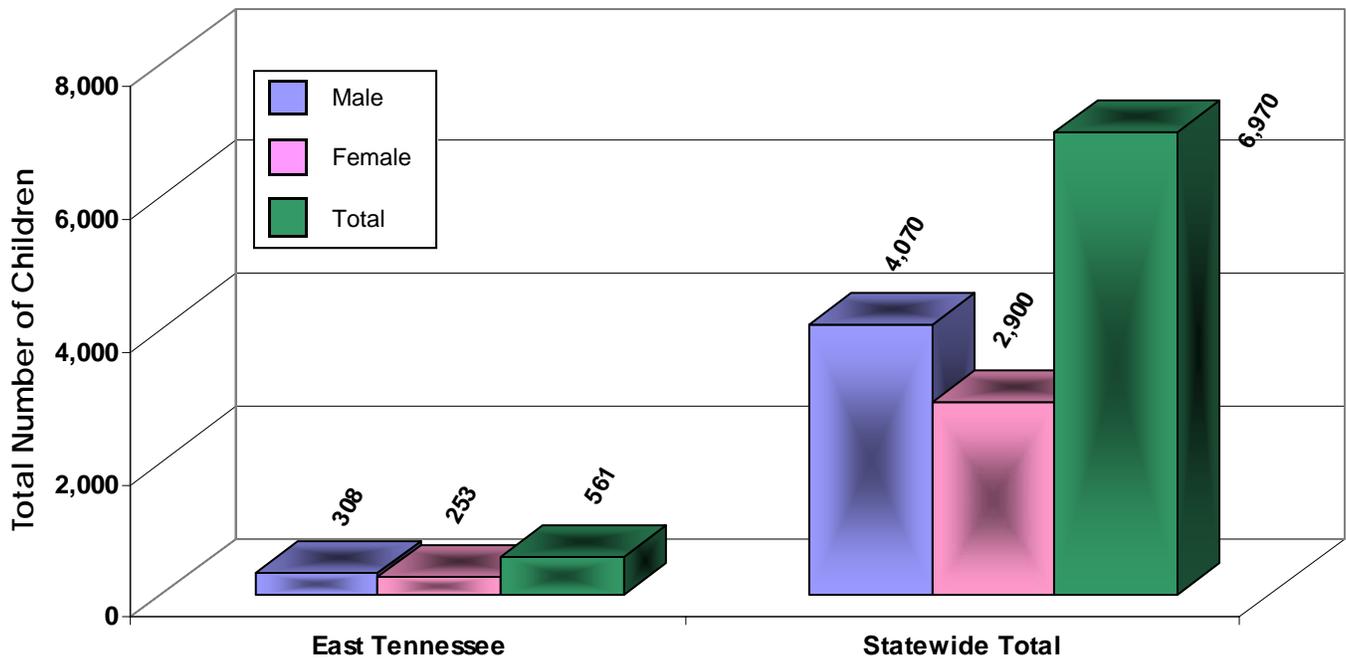


Figure 21: Children in Custody in the East Region by Race/Ethnicity as of June 30, 2009

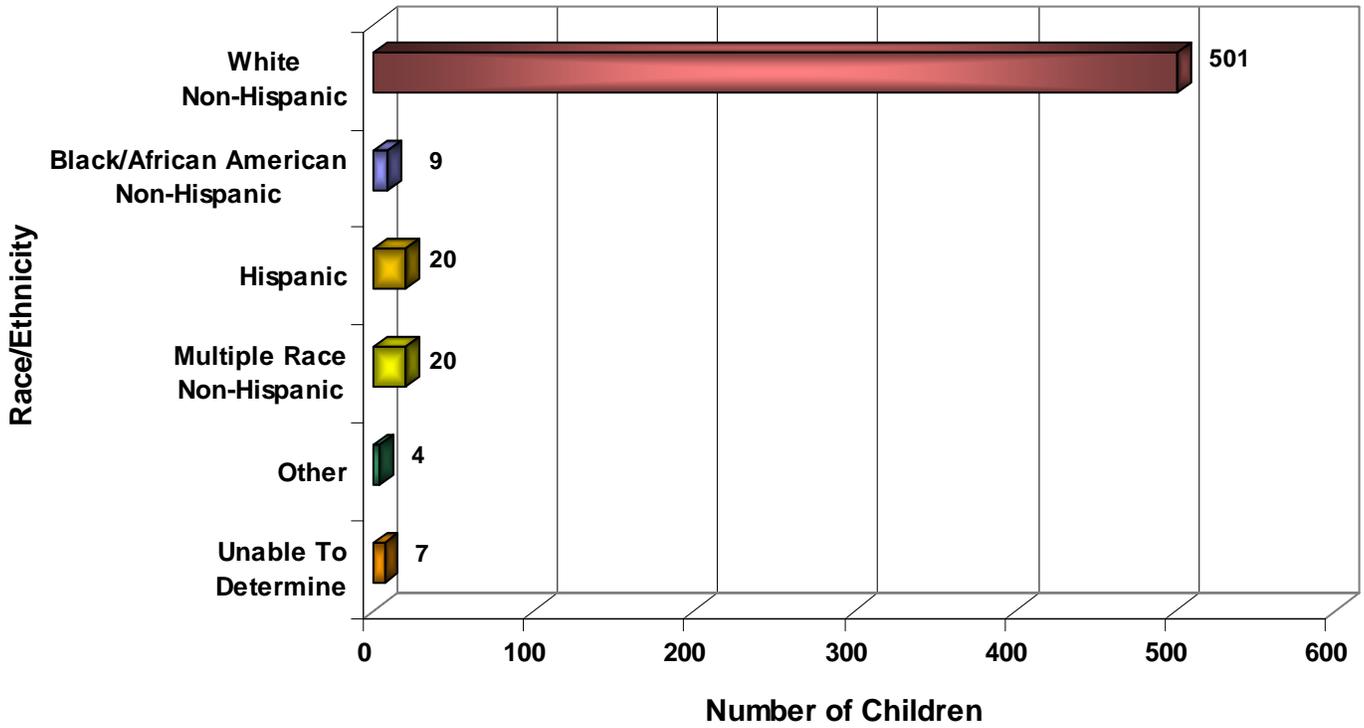
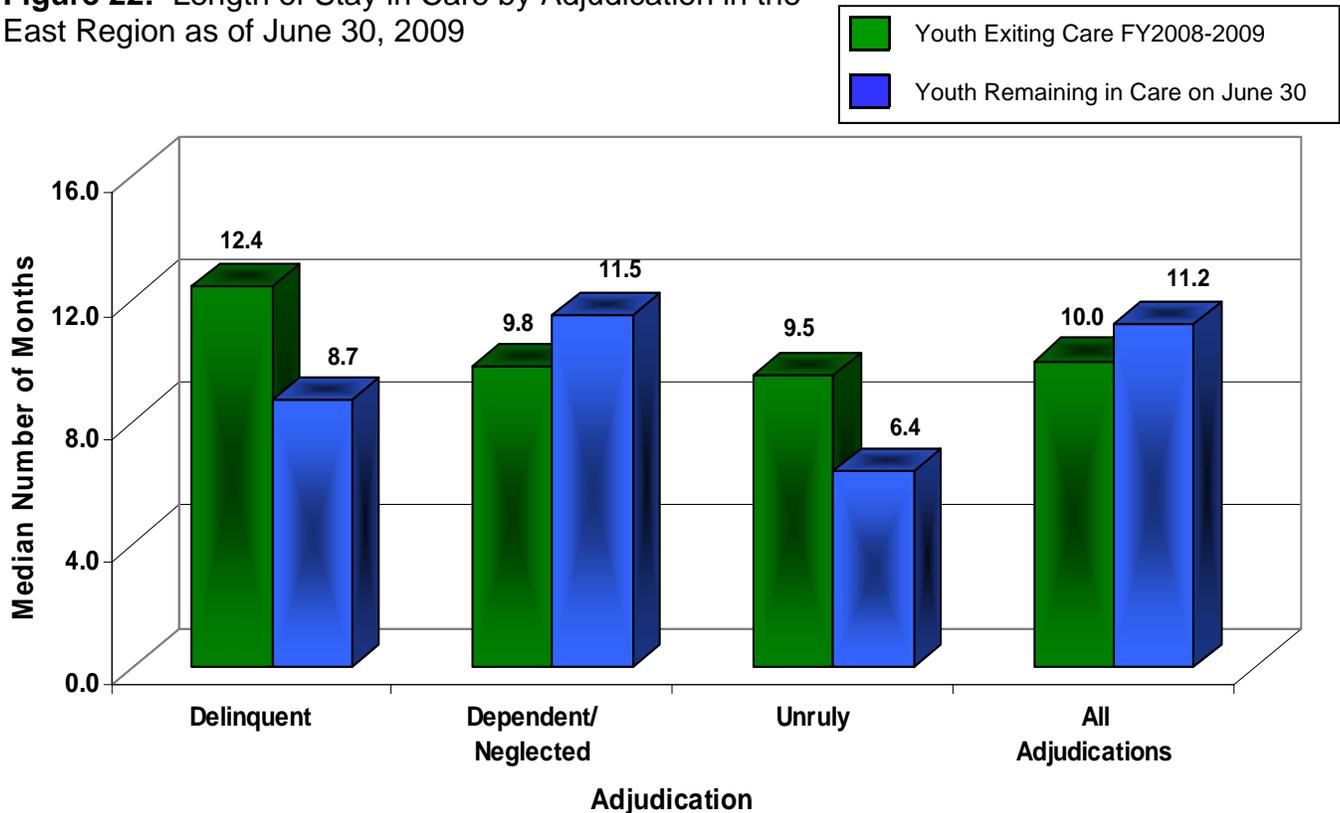


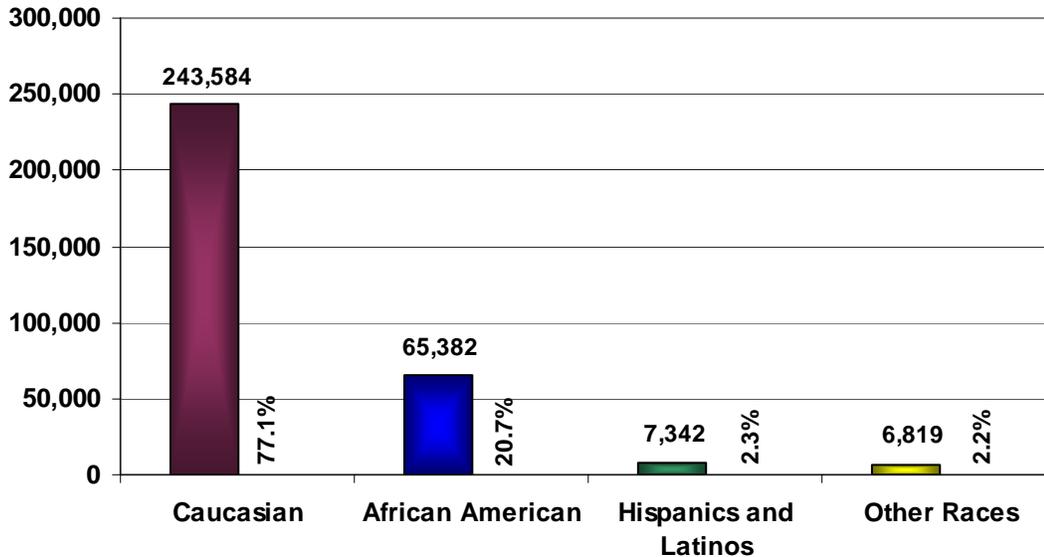
Figure 22: Length of Stay in Care by Adjudication in the East Region as of June 30, 2009



Hamilton Region



Total Population— 315,785



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 14: Placement Type for Children In Care In the Hamilton Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Contract Foster Home	17	5.4%
DCS Foster Home (Authorized, Expedited)	84	26.7%
DCS Group Home	4	1.3%
DCS Youth Development Center	40	12.7%
Emergency Services	6	1.9%
Foster Care Medically Fragile	3	1.0%
In-Home	15	4.8%
Level 2	73	23.2%
Level 3	39	12.4%
Level 4	11	3.5%
Runaway	7	2.2%
Trial Home Visit 30/60/90	16	5.1%
Total	315	100.0%

Population ages 19 and under as of June 30, 2008—77,689

Number of children in care as of June 30, 2009—315

Hamilton Region is a single-county region located in central Tennessee and is surrounded by the Southeast Region. It includes the county seat of Chattanooga as well as all other cities and municipalities within the county's geographic boundaries. The region employs 88 staff.

Based on the number of children in custody, Hamilton County ranks 11th among the thirteen regions with 315 children.

(Data Source: TN KIDS)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 23: Children in Custody in the Hamilton Region by Age Group Compared with Statewide Totals as of June 30, 2009

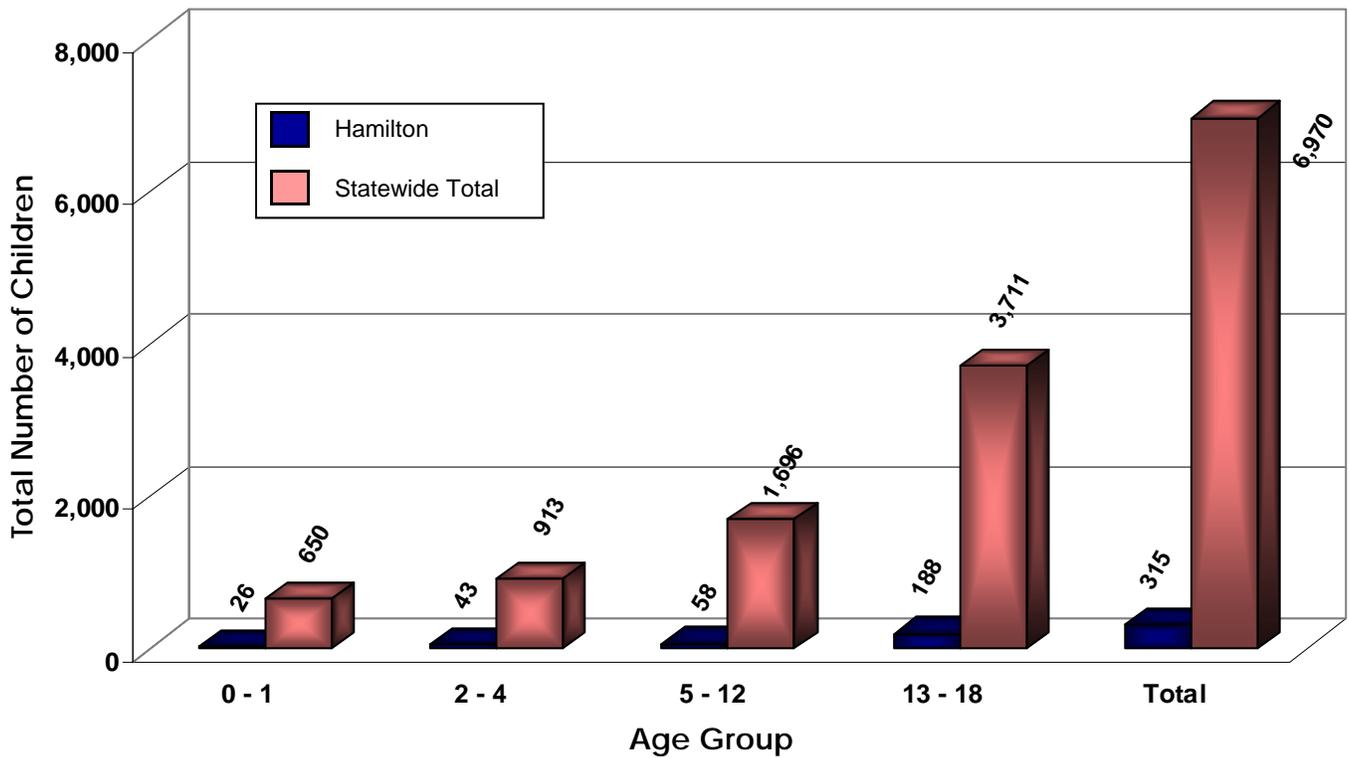


Figure 24: Children in Custody in the Hamilton Region by Gender as of June 30, 2009

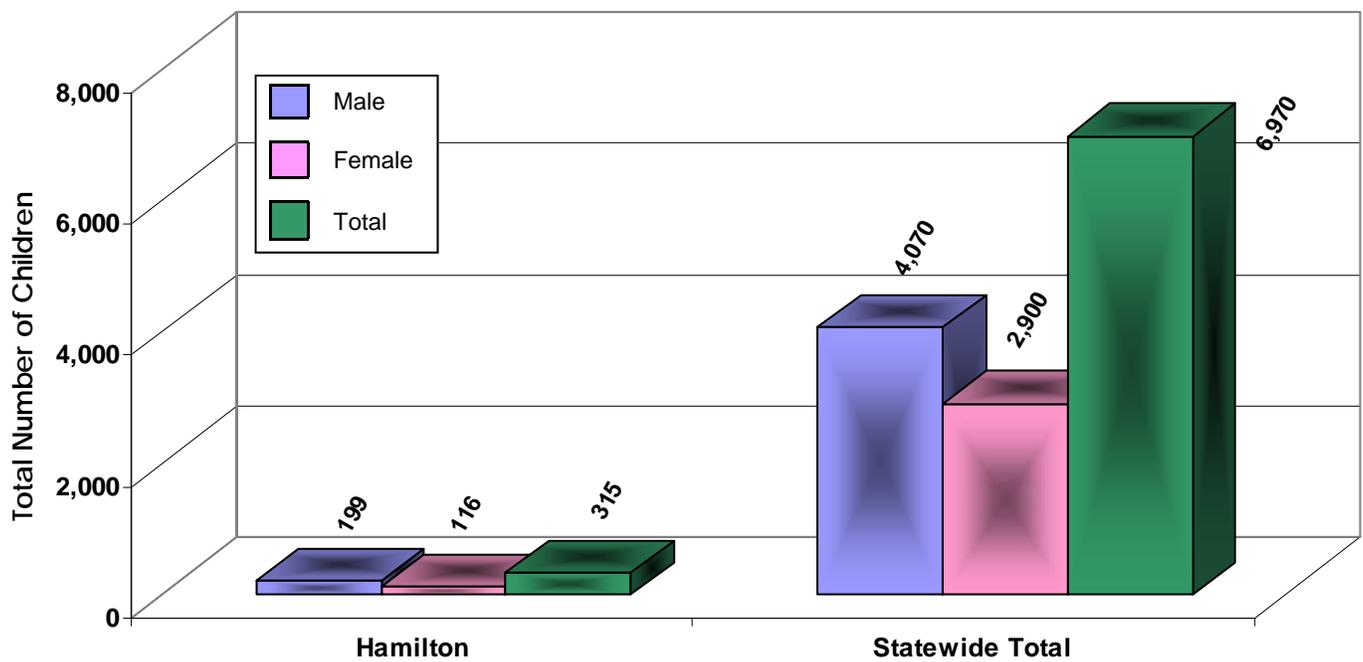


Figure 25: Children in Custody in the Hamilton Region by Race/Ethnicity as of June 30, 2009

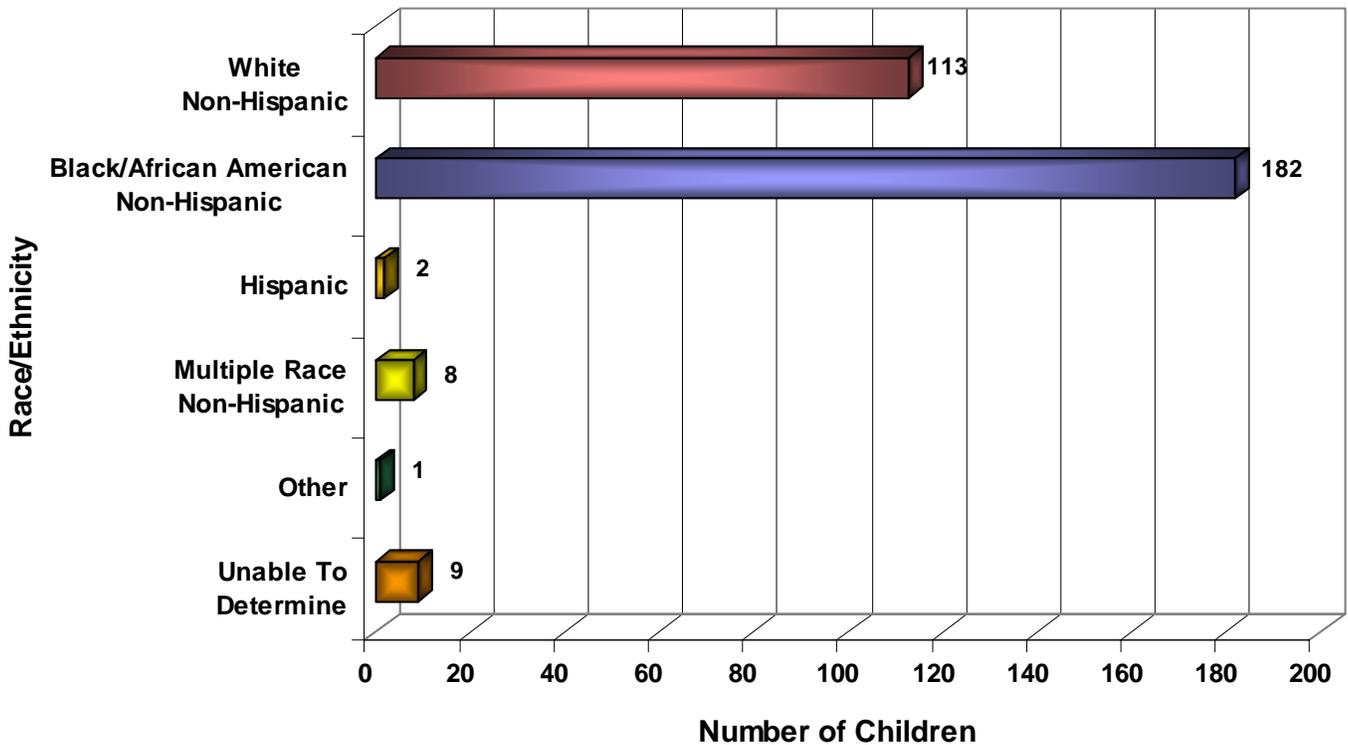
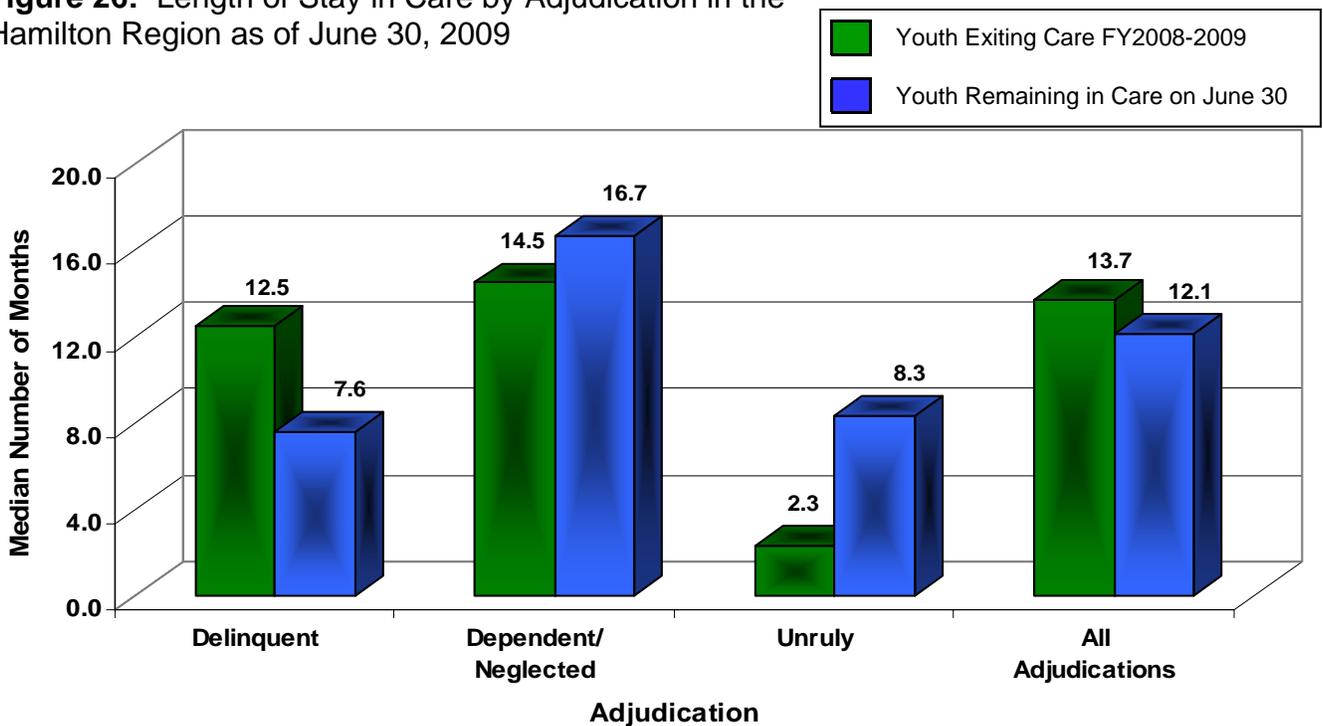


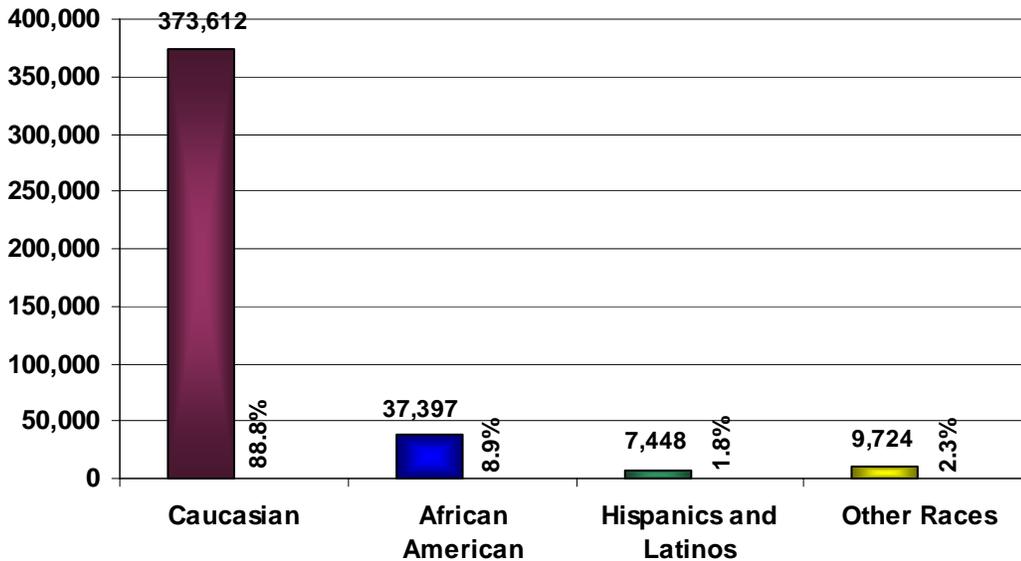
Figure 26: Length of Stay in Care by Adjudication in the Hamilton Region as of June 30, 2009



Knox Region



Total Population— 420,733*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 15: Placement Type for Children In Care In the Knox Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	1	0.2%
Contract Foster Home	90	15.6%
DCS Foster Home (Authorized, Expedited)	181	31.4%
DCS Group Home	29	5.0%
DCS Youth Development Center	4	0.7%
Emergency Services	4	0.7%
Foster Care Medically Fragile	4	0.7%
In-Home	6	1.0%
Level 2	116	20.1%
Level 3	55	9.5%
Level 4	9	1.6%
Runaway	12	2.1%
Trial Home Visit 30/60/90	60	10.4%
Missing	9	1.6%
Total	576	100.0%

Population ages 19 and under as of June 30, 2009—105,727

Number of children in care as of June 30, 2009—576

Knox Region, which includes the city of Knoxville, is the sixth largest metropolitan area in Tennessee. It is located in the Tennessee Valley of East Tennessee between the Cumberland Mountains and the Great Smoky Mountains National Park. The county is a mixture of suburban and rural areas. The regional office is located in Knoxville. There are 102 DCS staff located throughout the region.

Based on the number of children in care, Knox County is the 5th largest region in the state with 576 children in custody.

(Data Source: TN KIDS)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 27: Children in Custody in the Knox Region by Age Group Compared with Statewide Totals as of June 30, 2009

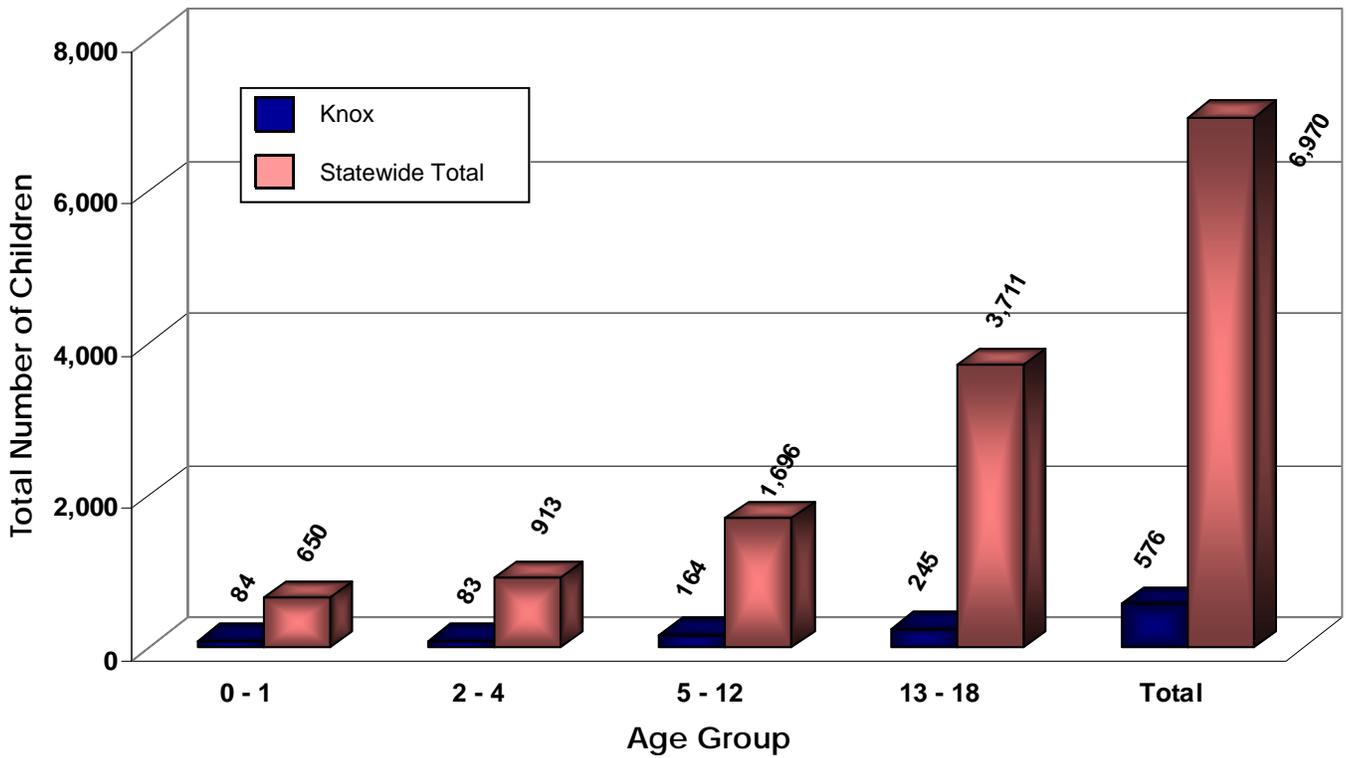


Figure 28: Children in Custody in the Knox Region by Gender as of June 30, 2009

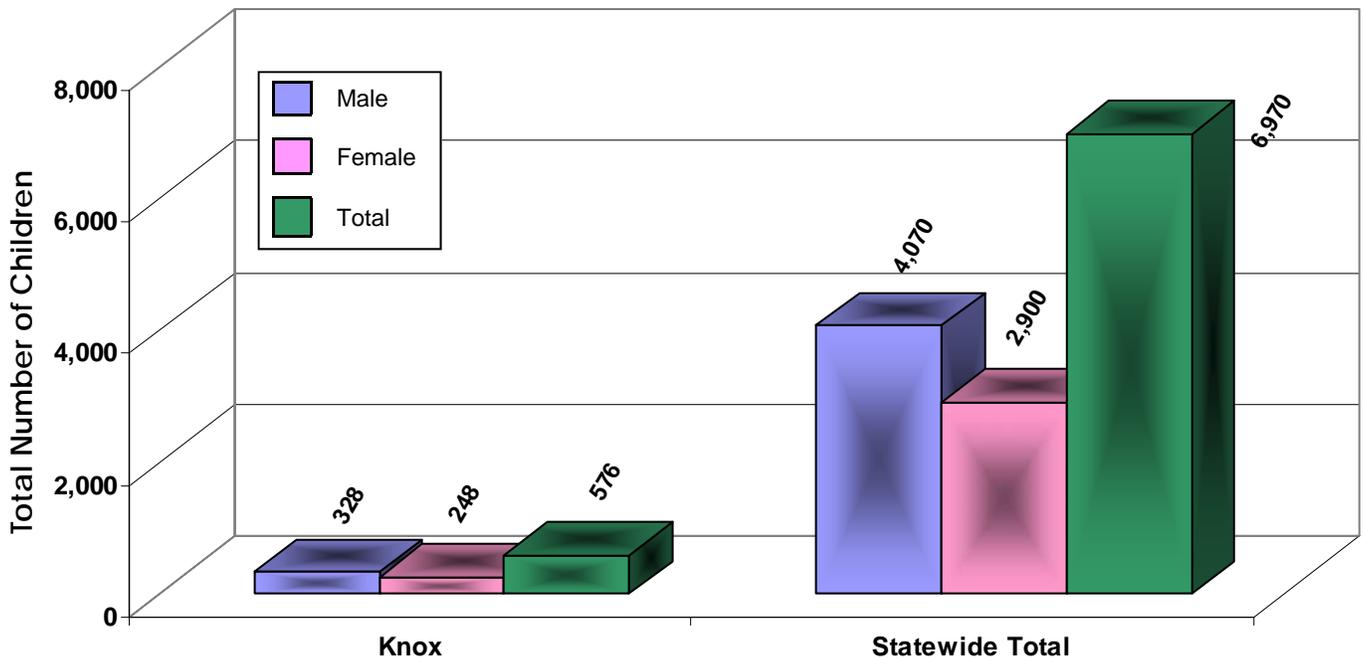


Figure 29: Children in Custody in the Knox Region By Race/Ethnicity as of June 30, 2009

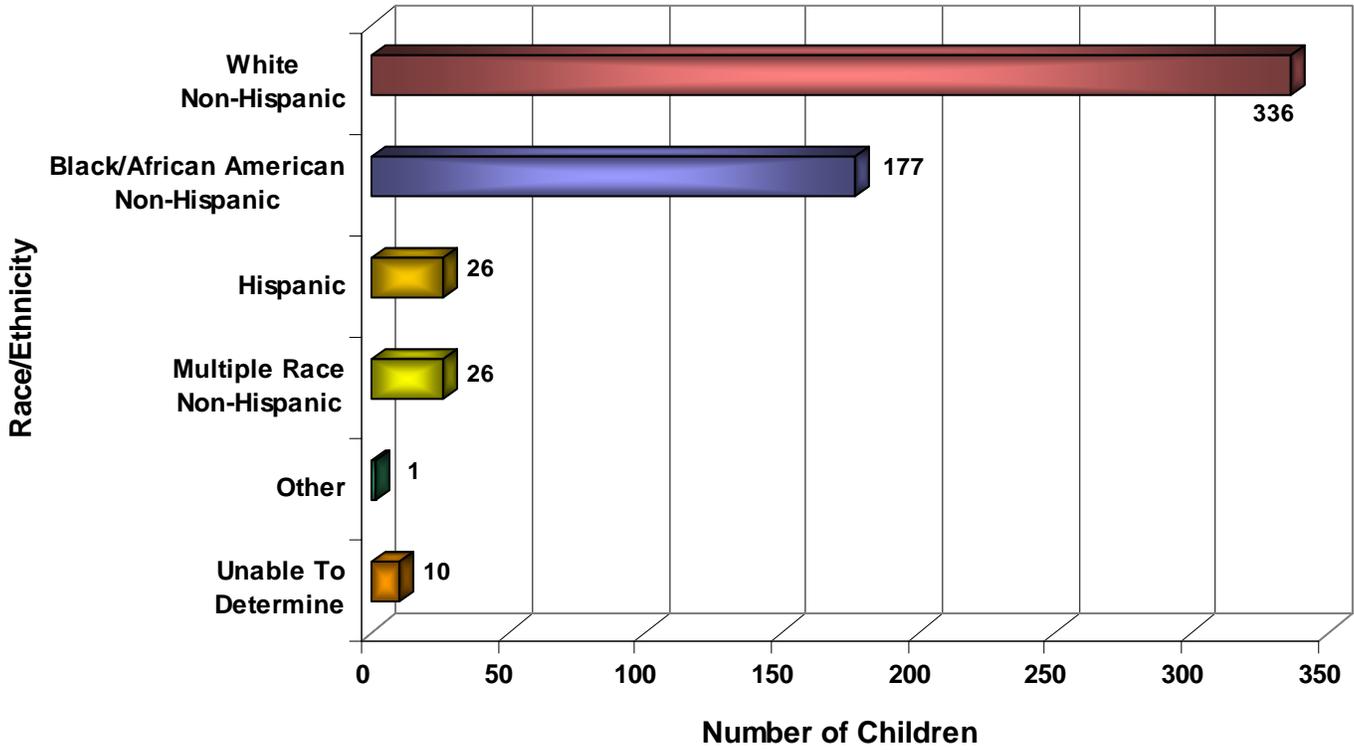
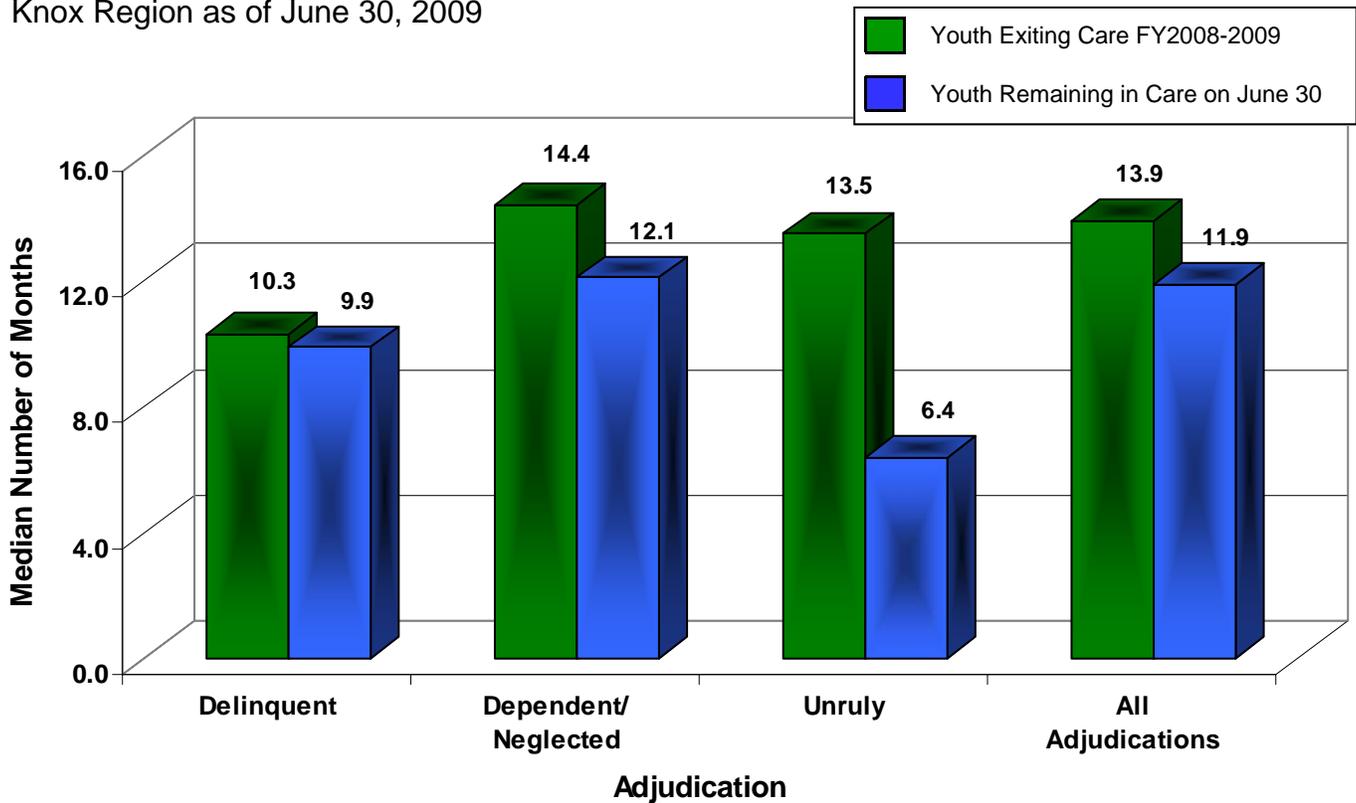


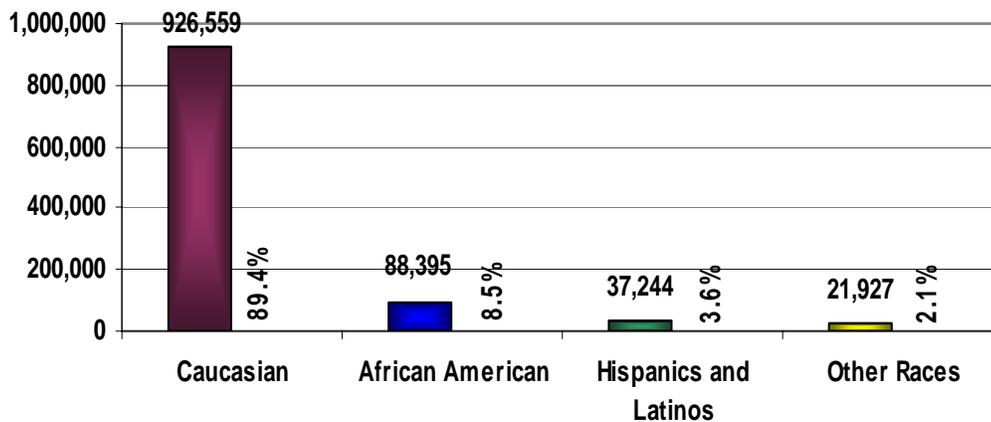
Figure 30: Length of Stay in Care by Adjudication in the Knox Region as of June 30, 2009



Mid-Cumberland Region



Total Population— 1,036,881*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 16: Placement Type for Children In Care In the Mid-Cumberland Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	3	0.3%
Contract Foster Home	116	12.9%
DCS Foster Home (Authorized, Expedited)	330	36.8%
DCS Group Home	4	0.4%
DCS Youth Development Center	40	4.5%
Emergency Services	11	1.2%
Foster Care Medically Fragile	2	0.2%
In-Home	10	1.1%
Level 2	158	17.6%
Level 3	141	15.7%
Level 4	9	1.0%
Runaway	21	2.3%
Trial Home Visit 30/60/90	50	5.6%
Missing	2	0.2%
Total	897	100.0%

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Population ages 19 and under as of June 30, 2009—290,943

Number of children in care as of June 30, 2009—897

The Mid-Cumberland Region makes up the largest geographic area in the state. It consists of the urban and rural counties surrounding Metro Nashville. The 12 counties are: Cheatham, Dickson, Houston, Humphreys, Montgomery, Robertson, Rutherford, Stewart, Sumner, Trousdale, Williamson and Wilson. The regional office is located in Murfreesboro. The U.S. military installation, Ft. Campbell, spans Montgomery and Stewart counties in Tennessee and Kentucky. Child Protective Services, Social Services and Juvenile Justice staff all deal with military families in this area. Their caseloads are unique because of military protocol. The region has 265 employees.

Based on the number of children in custody, Mid-Cumberland is the 2nd largest of the thirteen regions with 897 children.

(Data Source: TN KIDS)

Figure 31: Children in Custody in the Mid-Cumberland Region by Age Group Compared with Statewide Totals as of June 30, 2009

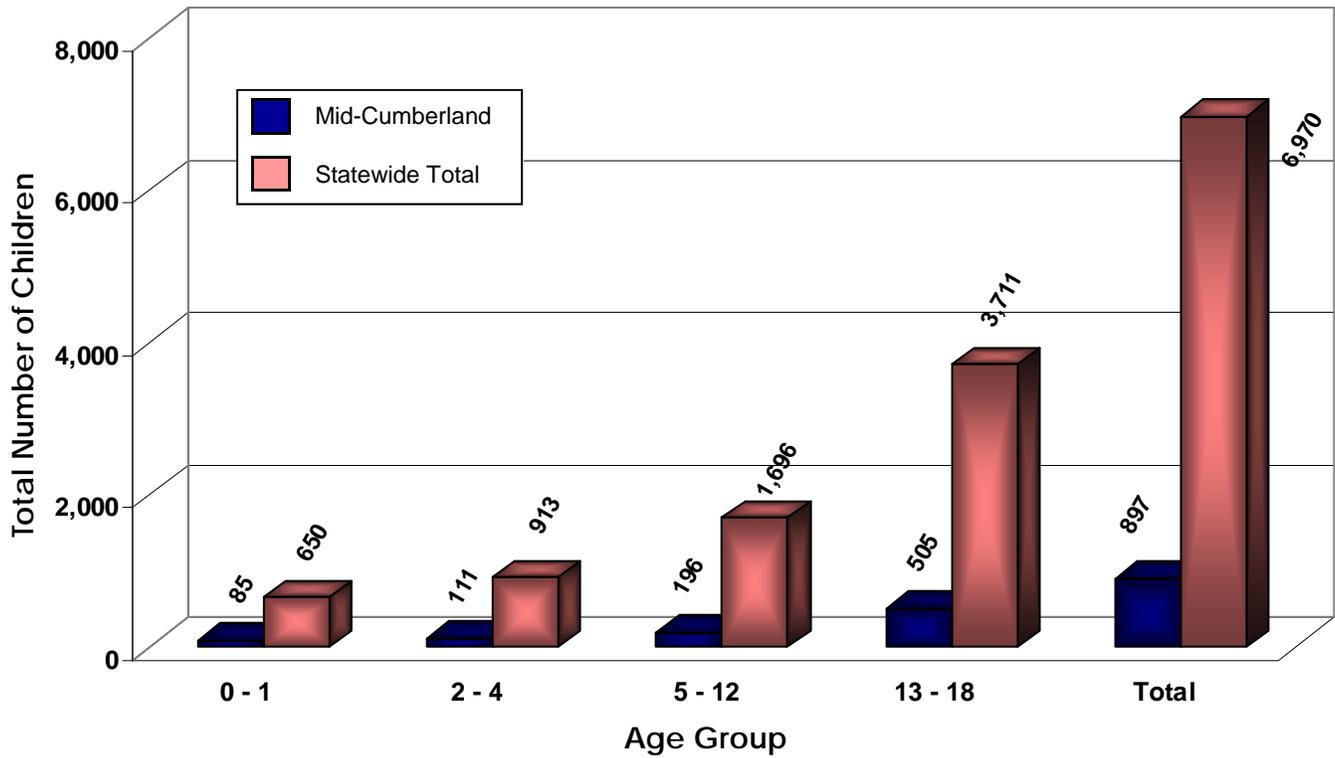


Figure 32: Children in Custody in the Mid-Cumberland Region by Gender as of June 30, 2009

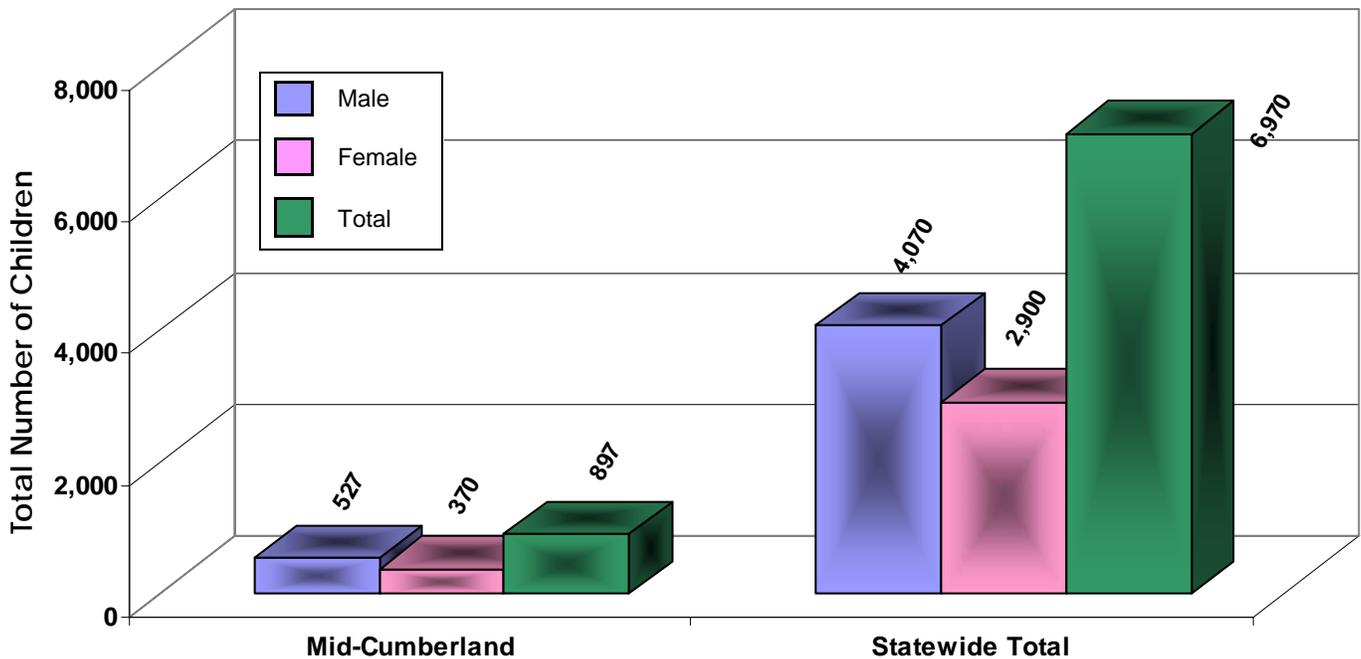


Figure 33: Children in Custody in the Mid-Cumberland Region by Race/Ethnicity as of June 30, 2009

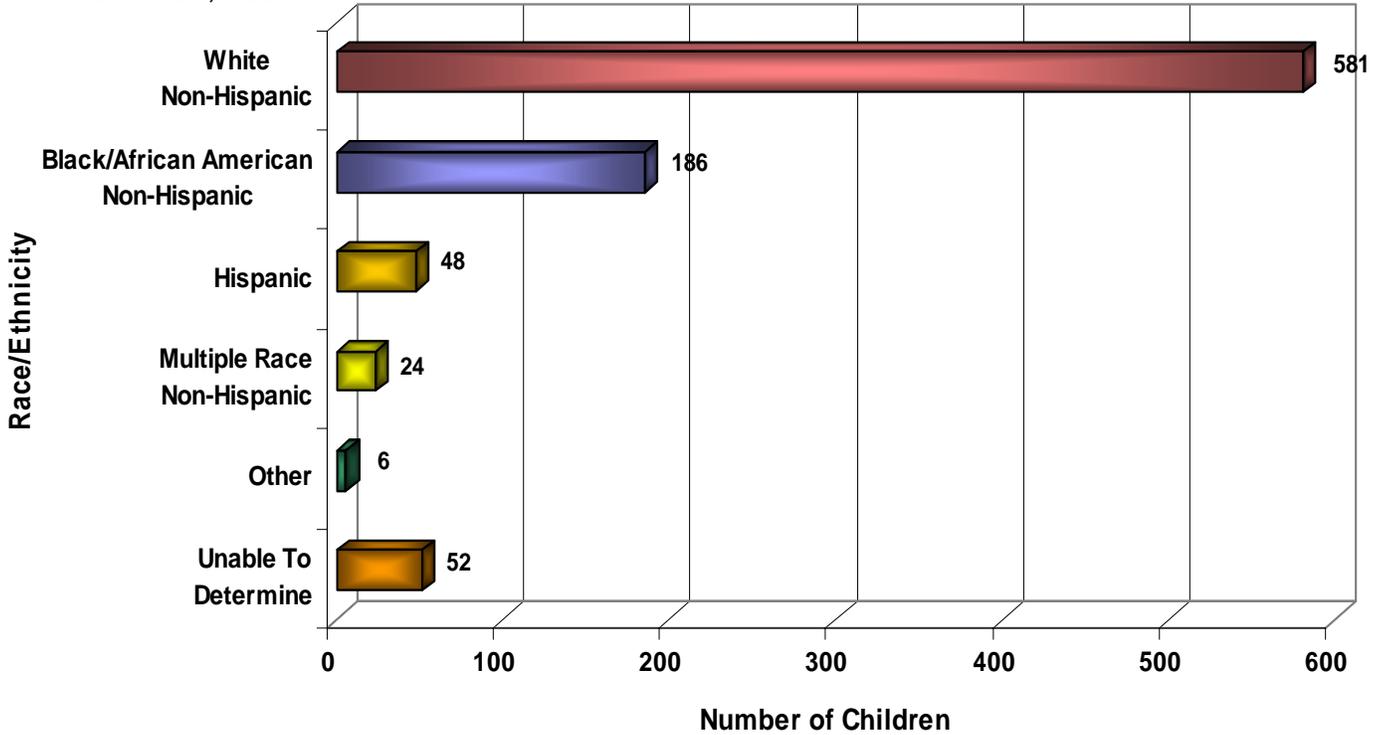
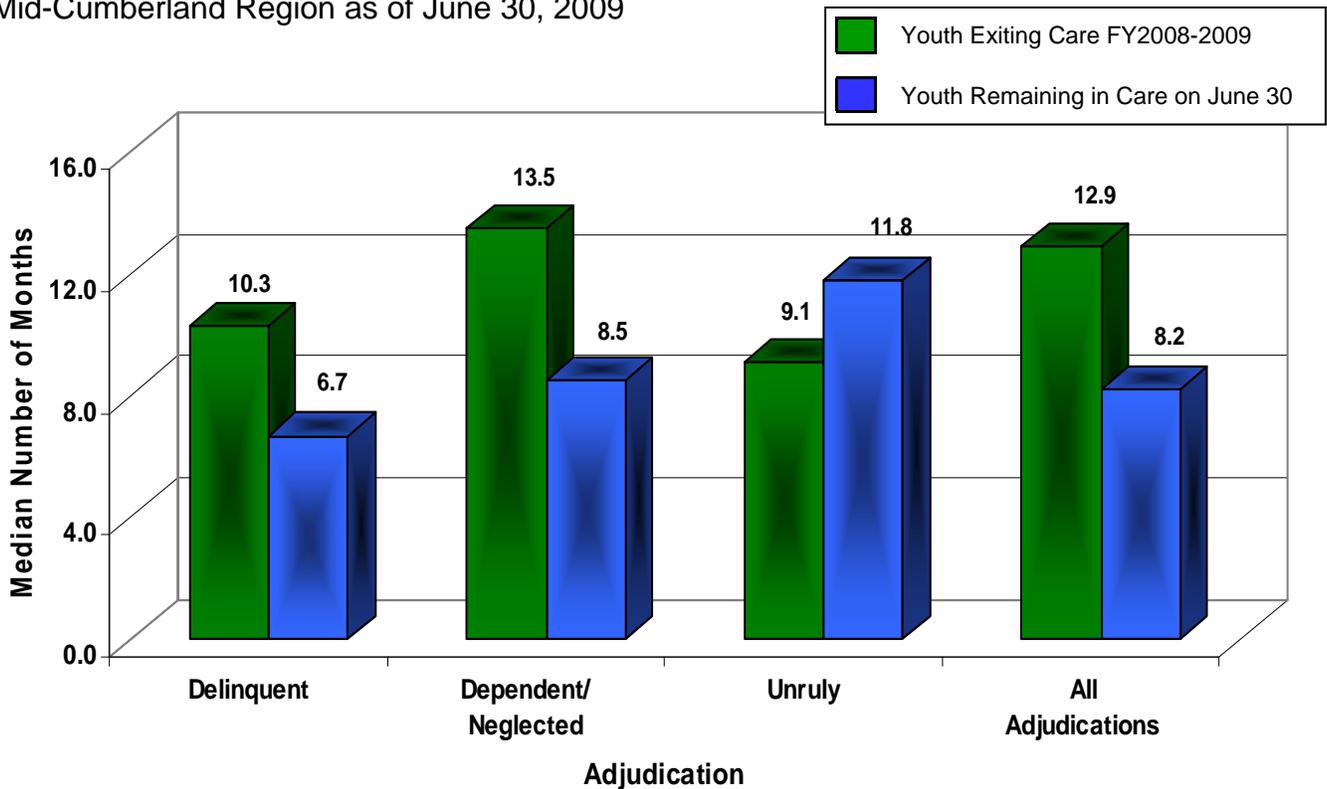


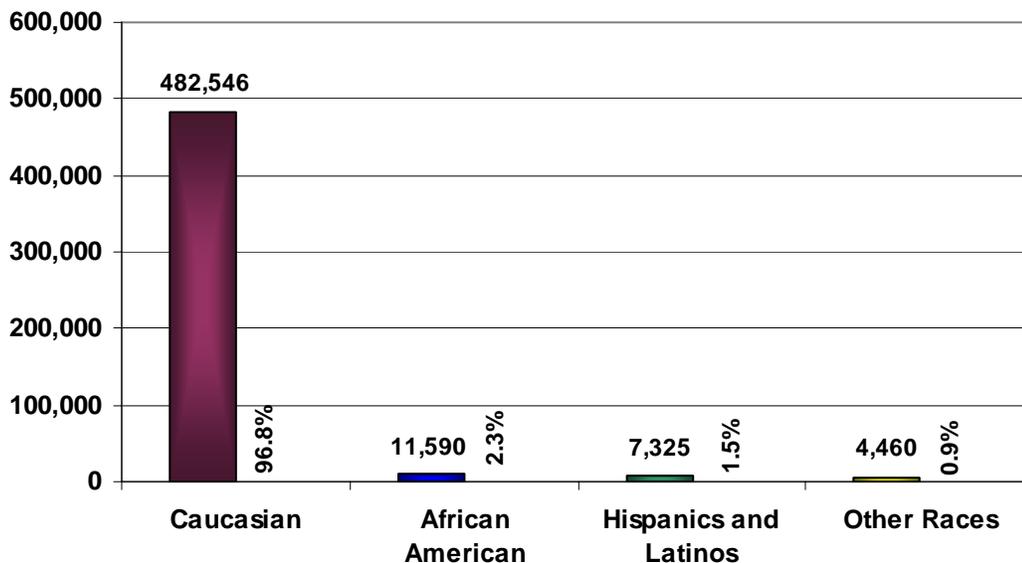
Figure 34: Length of Stay in Care by Adjudication in the Mid-Cumberland Region as of June 30, 2009



Northeast Region



Total Population— 498,596*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 17: Placement Type for Children In Care In the Northeast Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	4	0.7%
Contract Foster Home	26	4.4%
DCS Foster Home (Authorized, Expedited)	214	36.3%
DCS Group Home	9	1.5%
DCS Youth Development Center	31	5.3%
Emergency Services	9	1.5%
Foster Care Medically Fragile	4	0.7%
In-Home	3	0.5%
Level 2	129	21.9%
Level 3	93	15.8%
Level 4	13	2.2%
Runaway	9	1.5%
Trial Home Visit 30/60/90	37	6.3%
Missing	8	1.4%
Total	589	100.0%

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

Population ages 19 and under as of June 30, 2009—116,557

Number of children in care as of June 30, 2009—589

The Northeast Region is located in the extreme northeastern part of the state with the regional office in Johnson City. The region comprises eight counties and has 164 staff providing services. The eight counties are: Carter, Greene, Hancock, Hawkins, Johnson, Sullivan, Unicoi and Washington.

Based on the number of children in custody, the Northeast Region is the 4th largest with 589 children in custody.

(Data Source: TN KIDS)

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 35: Children in Custody in the Northeast Region by Age Group Compared with Statewide Totals as of June 30, 2009

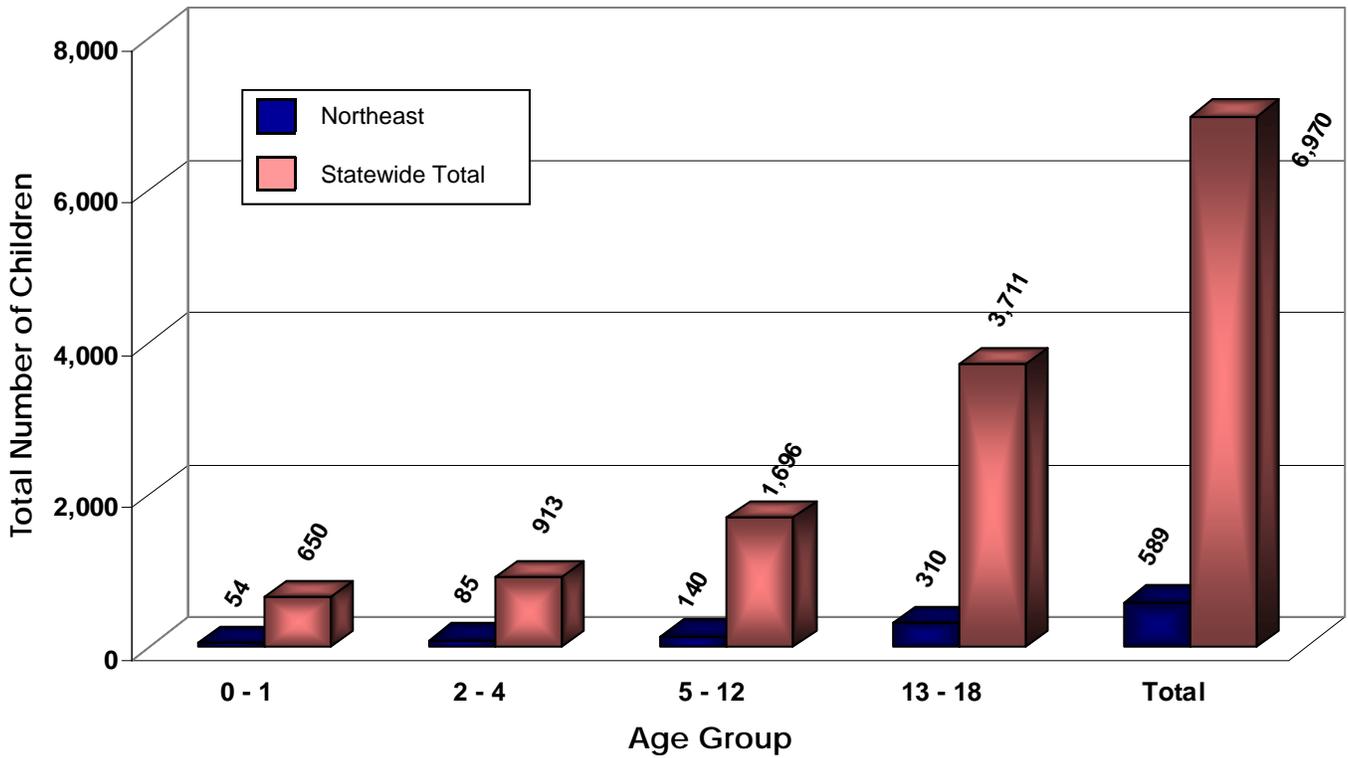


Figure 36: Children in Custody in the Northeast Region by Gender as of June 30, 2009

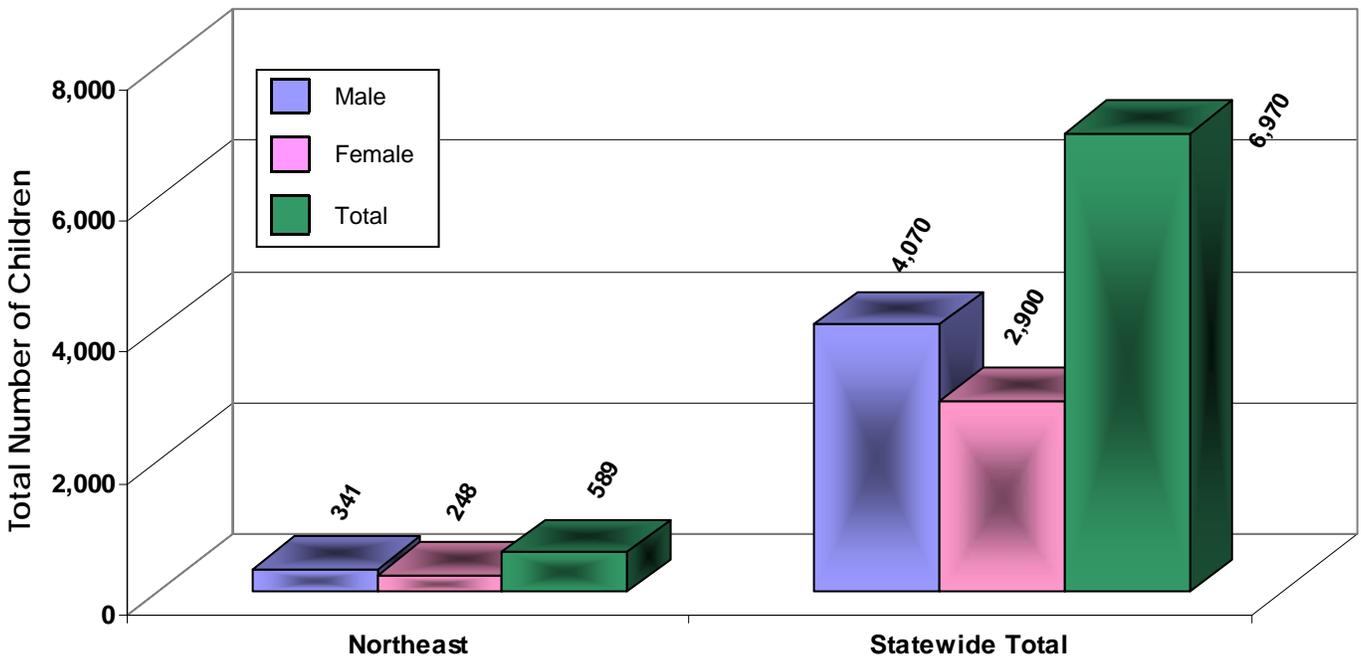


Figure 37: Children in Custody in the Northeast Region by Race/Ethnicity as of June 30, 2009

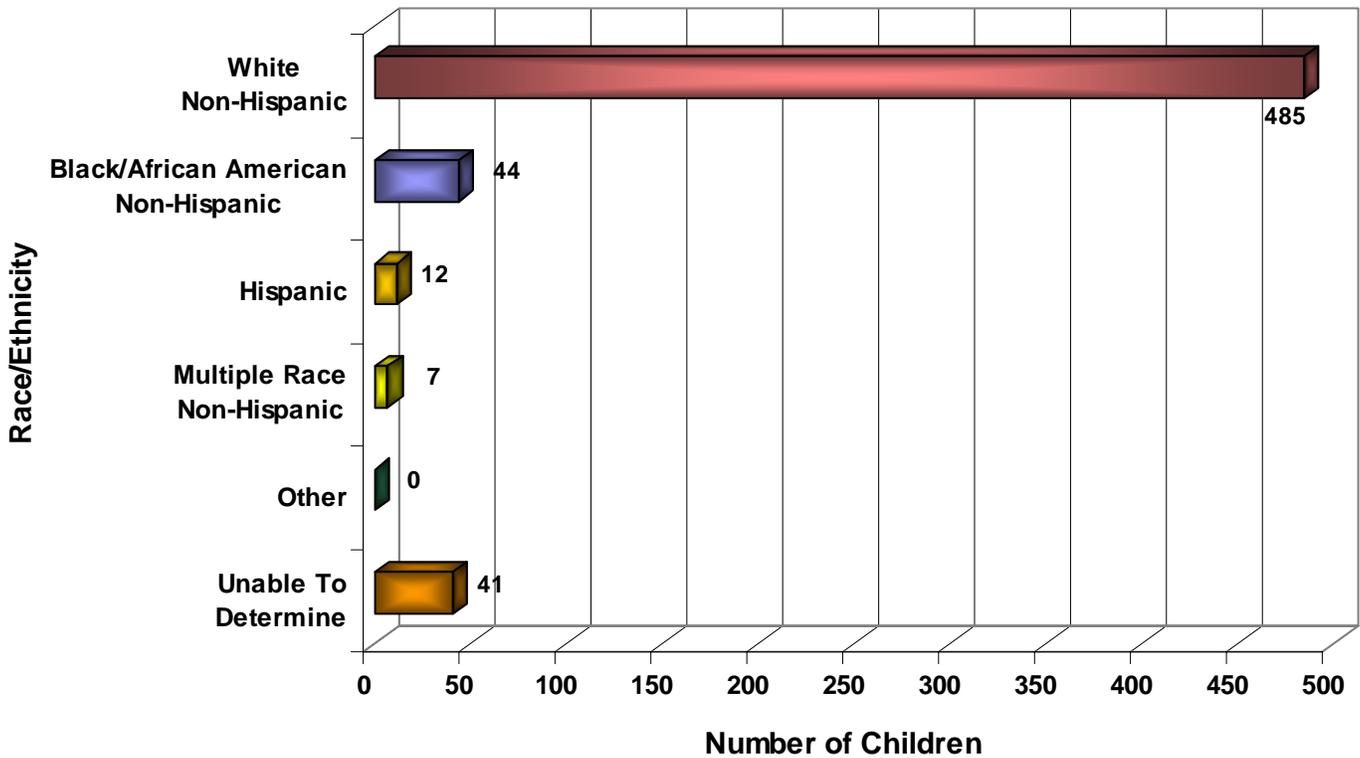
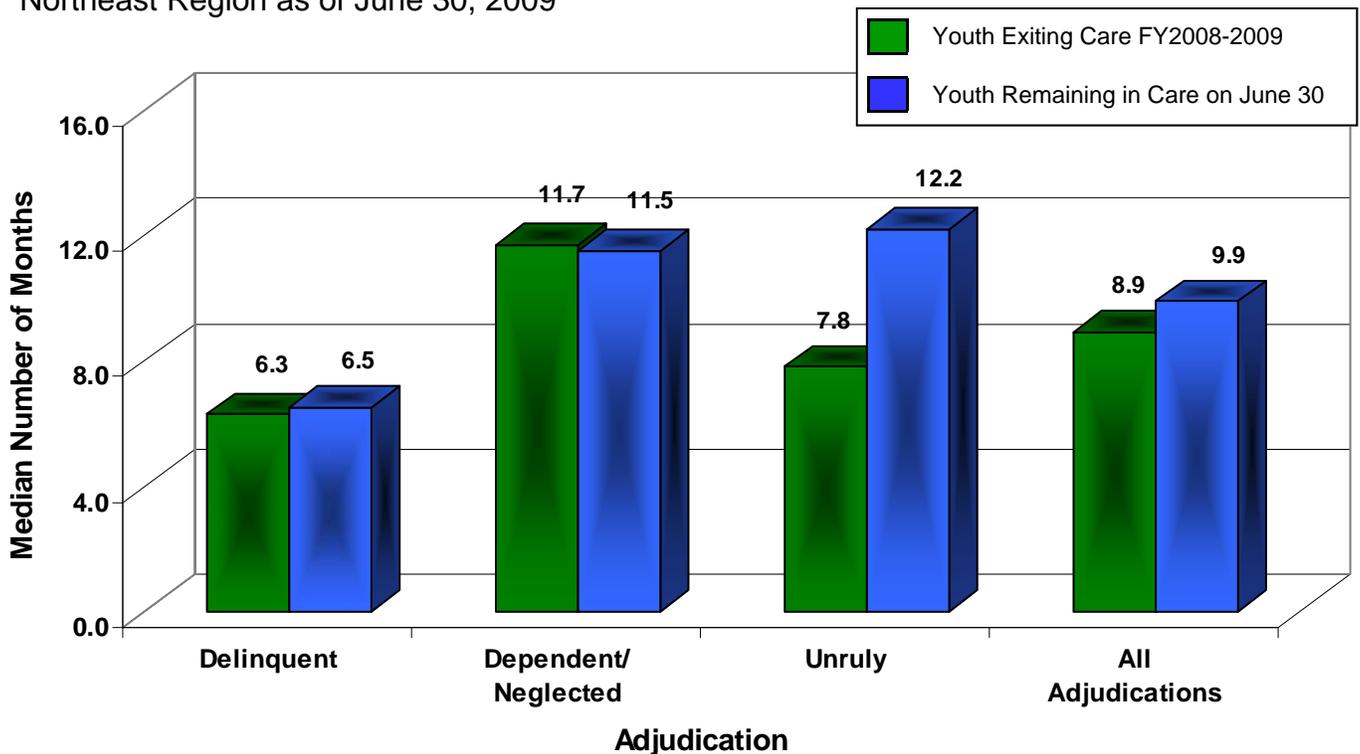


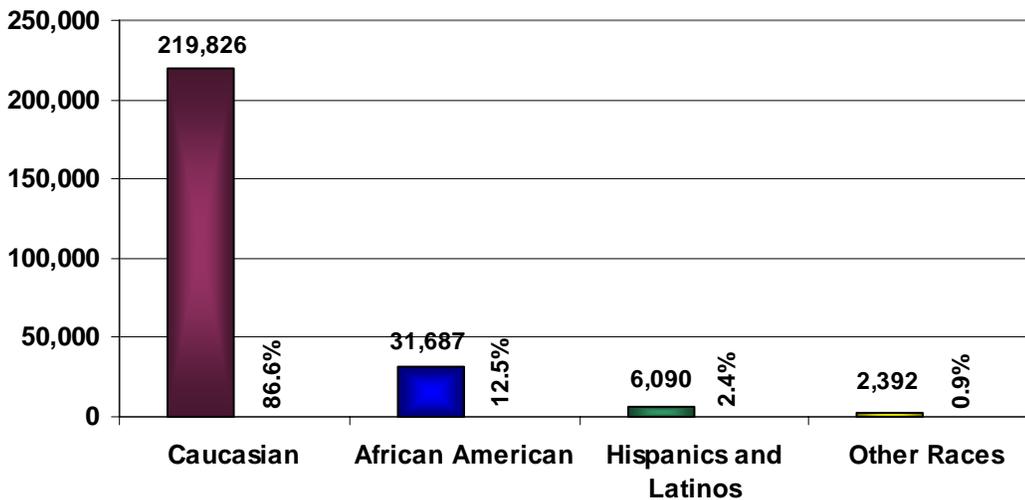
Figure 38: Length of Stay in Care by Adjudication in the Northeast Region as of June 30, 2009



Northwest Region



Total Population— 253,905*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 18: Placement Type for Children In Care In the Northwest Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	1	0.5%
Contract Foster Home	15	7.4%
DCS Foster Home (Authorized, Expedited)	71	35.0%
DCS Group Home	1	0.5%
DCS Youth Development Center	14	6.9%
Emergency Services	1	0.5%
Foster Care Medically Fragile	2	1.0%
In-Home	10	4.9%
Level 2	32	15.8%
Level 3	43	21.2%
Level 4	1	0.5%
Trial Home Visit 30/60/90	10	4.9%
Missing	2	1.0%
Total	203	100.0%

Population ages 19 and under as of June 30, 2009—64,704

Number of children in care as of June 30, 2009—203

The Northwest Region includes the nine counties of Northwest Tennessee. The nine counties are: Benton, Carroll, Crockett, Dyer, Gibson, Henry, Lake, Obion and Weakley. It is bounded on the west by the Mississippi River, on the north by the state of Kentucky, and on the east by the Tennessee River. It covers 4,222 square miles. The regional office is located in Trenton. Eighty-one (81) staff support service delivery in the region.

The Northwest Region ranks 13th among the 13 regions with 203 children in custody.

(Data Source: TNKids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 39: Children in Custody in the Northwest Region by Age Group Compared with Statewide Totals as of June 30, 2009

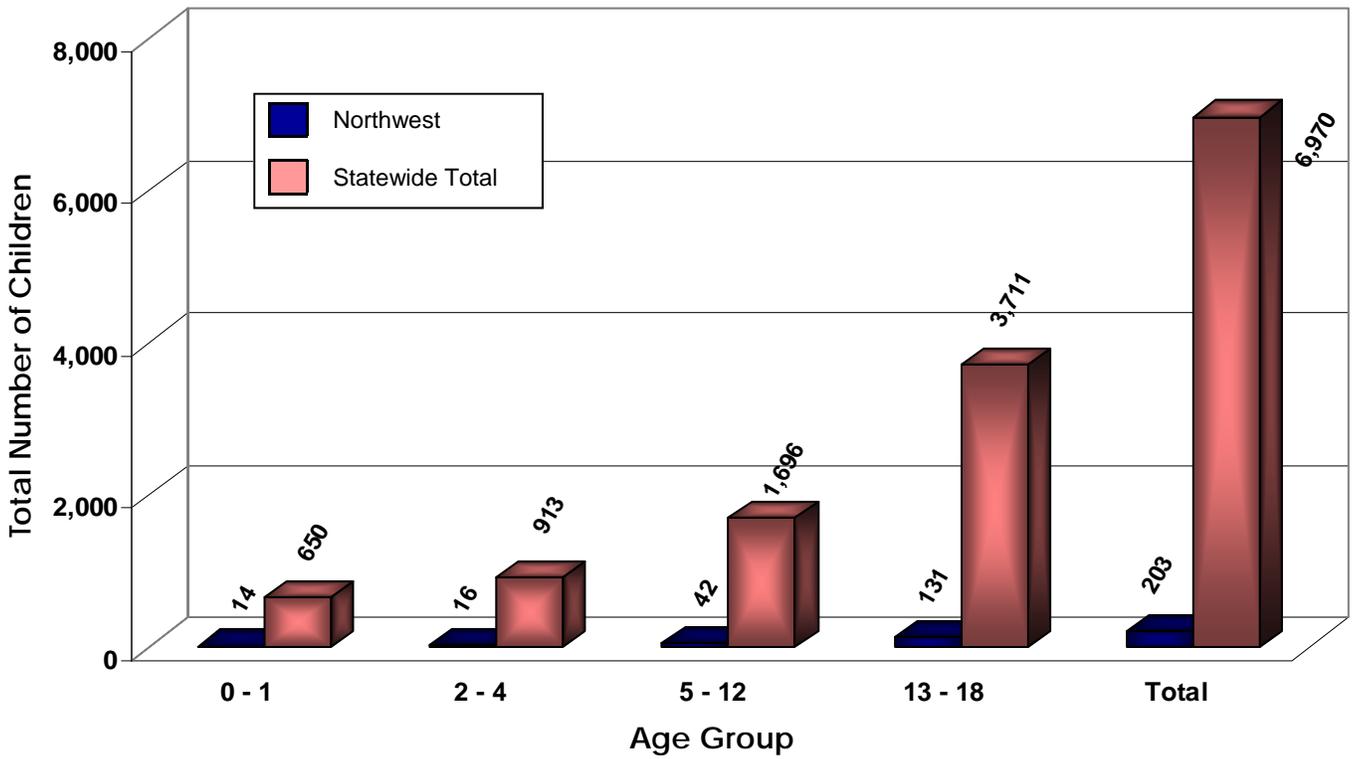


Figure 40: Children in Custody in the Northwest Region by Gender as of June 30, 2009

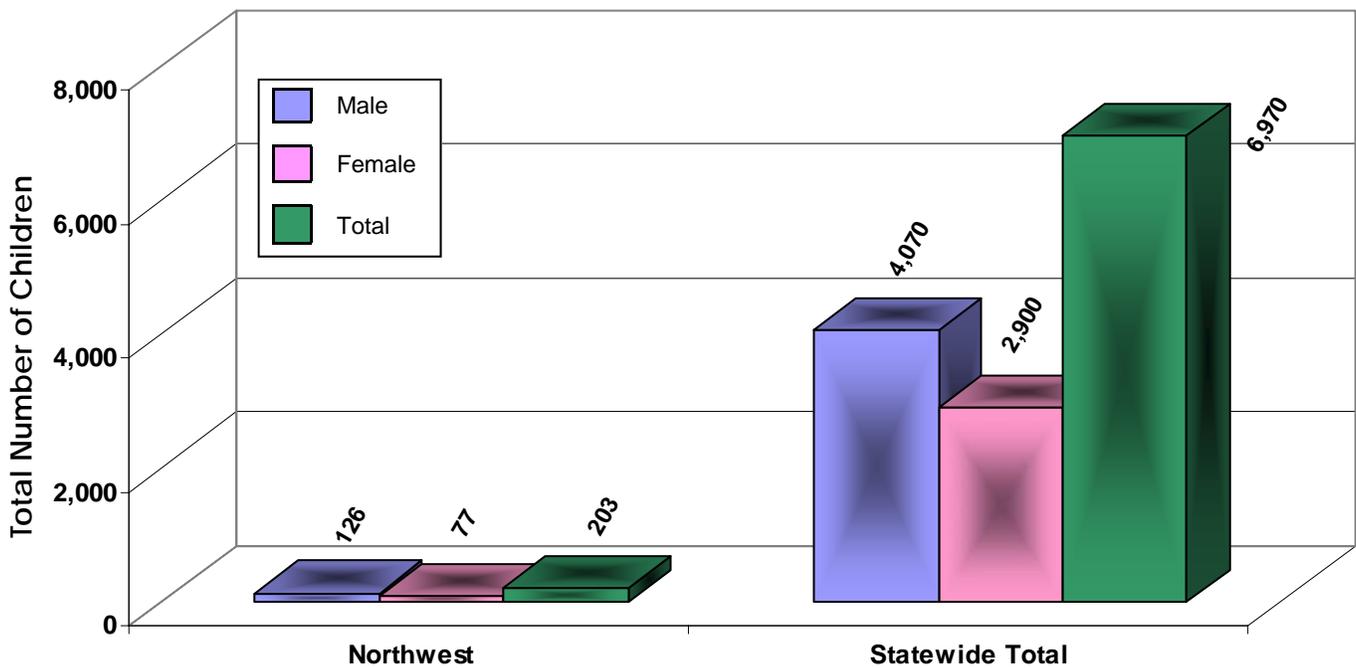


Figure 41: Children in Custody in the Northwest Region by Race/Ethnicity as of June 30, 2009

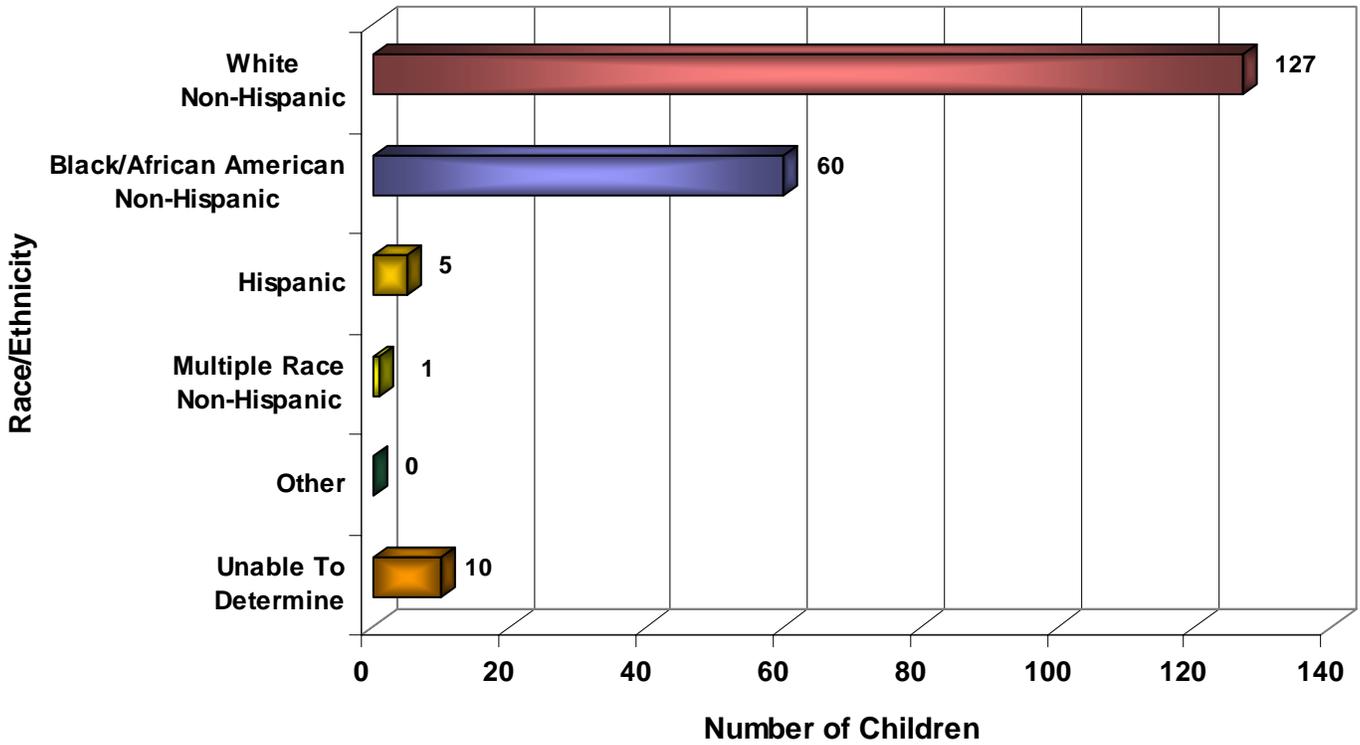
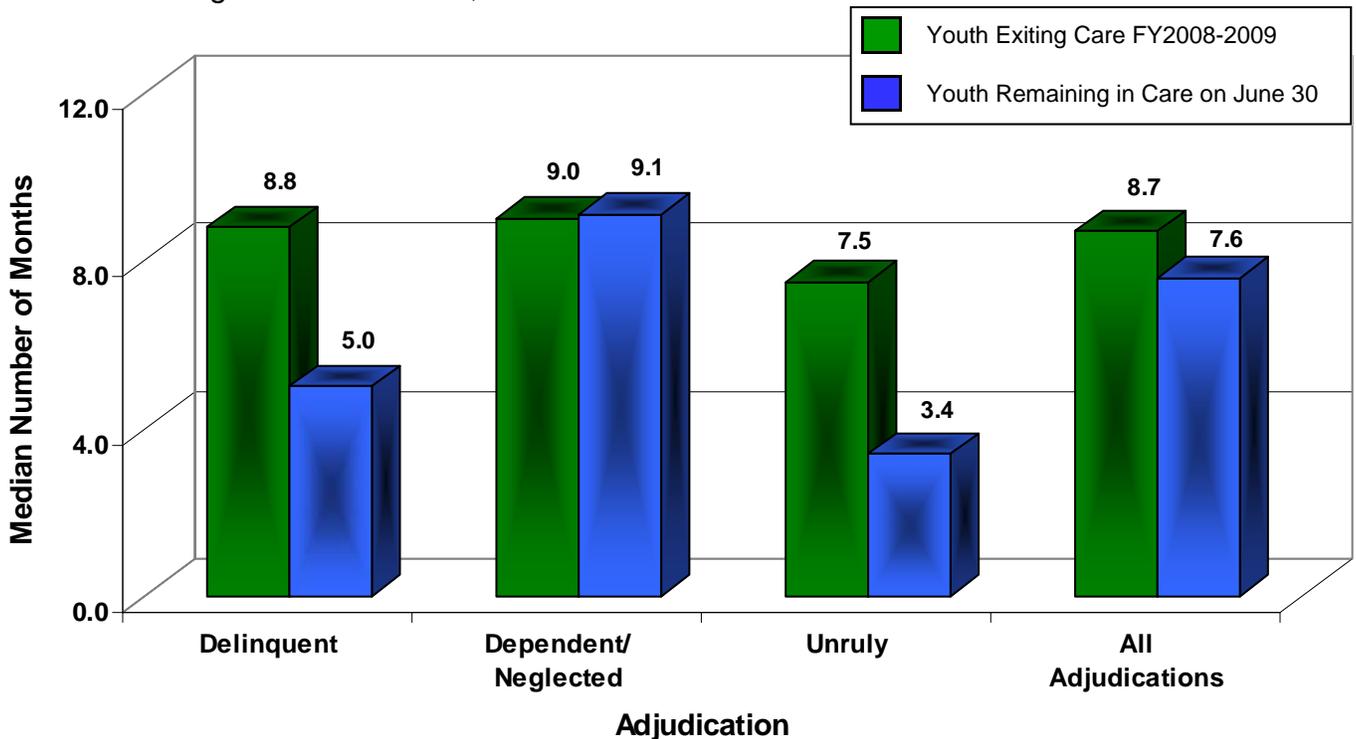


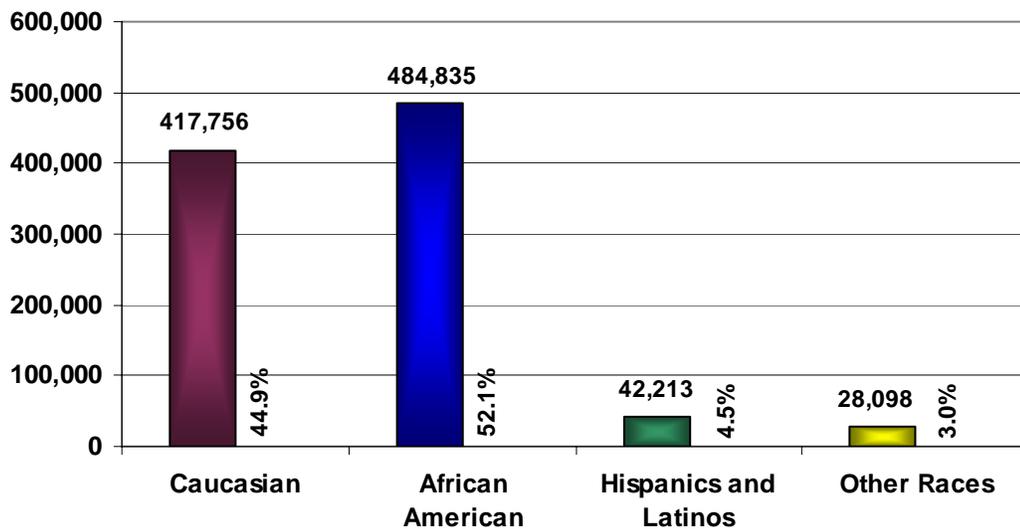
Figure 42: Length of Stay in Care by Adjudication in the Northwest Region as of June 30, 2009



Shelby Region



Total Population— 930,689*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 19: Placement Type for Children In Care In the Shelby Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	5	0.5%
Contract Foster Home	259	27.2%
DCS Foster Home (Authorized, Expedited)	138	14.5%
DCS Group Home	5	0.5%
DCS Youth Development Center	81	8.5%
Emergency Services	36	3.8%
Foster Care Medically Fragile	6	0.6%
In-Home	10	1.1%
Level 2	114	12.0%
Level 3	214	22.5%
Level 4	9	0.9%
Runaway	45	4.7%
Trial Home Visit 30/60/90	19	2.0%
Missing	10	1.1%
Total	951	100.0%

Population ages 19 and under as of June 30, 2009—278,723

Number of children in care as of June 30, 2009—951

Shelby Region is one of four single-county regions. It is the largest metropolitan area in the state and is located in the extreme southwestern part of Tennessee. The county shares a border with Arkansas and Mississippi. The regional office is located in Memphis. There are 259 staff members in the Shelby Region.

Shelby is the largest region based on the number of children in custody, 951.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 43: Children in Custody in the Shelby Region by Age Group Compared with Statewide Totals as of June 30, 2009

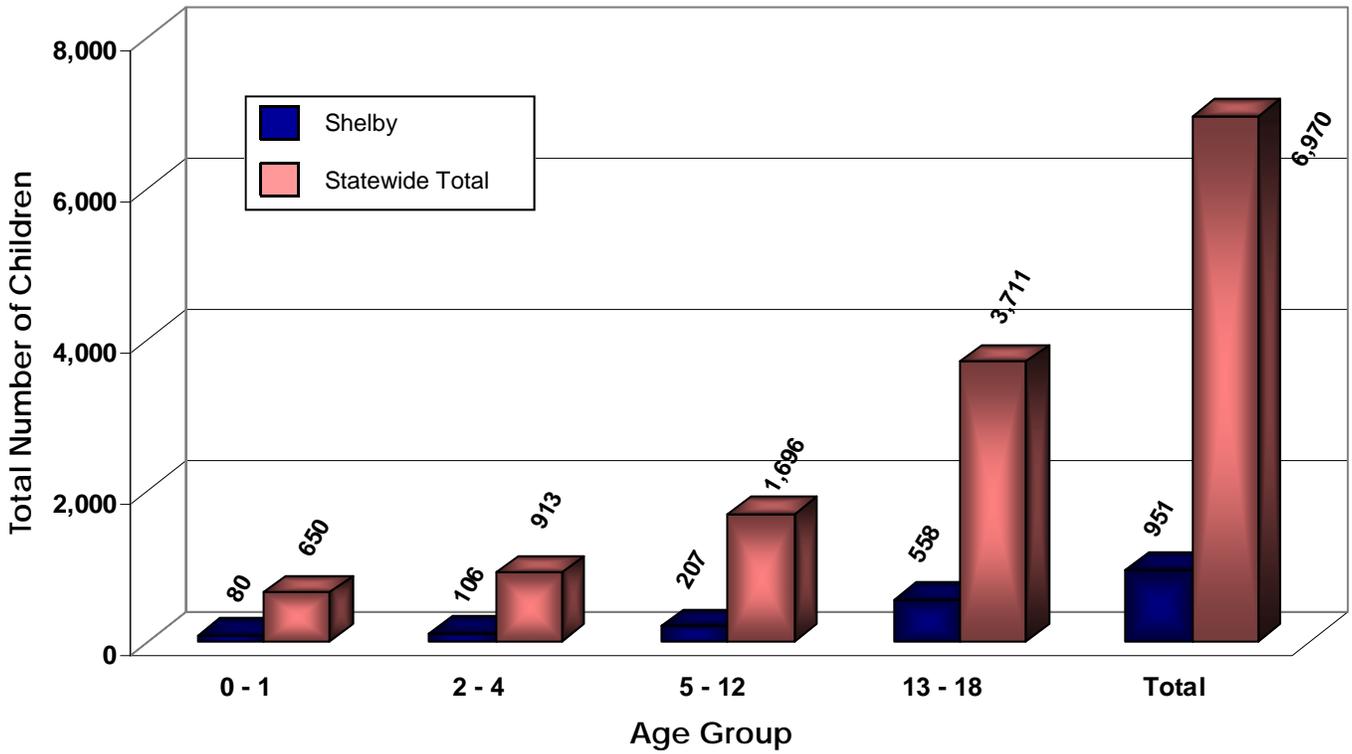


Figure 44: Children in Custody in the Shelby Region by Gender as of June 30, 2009

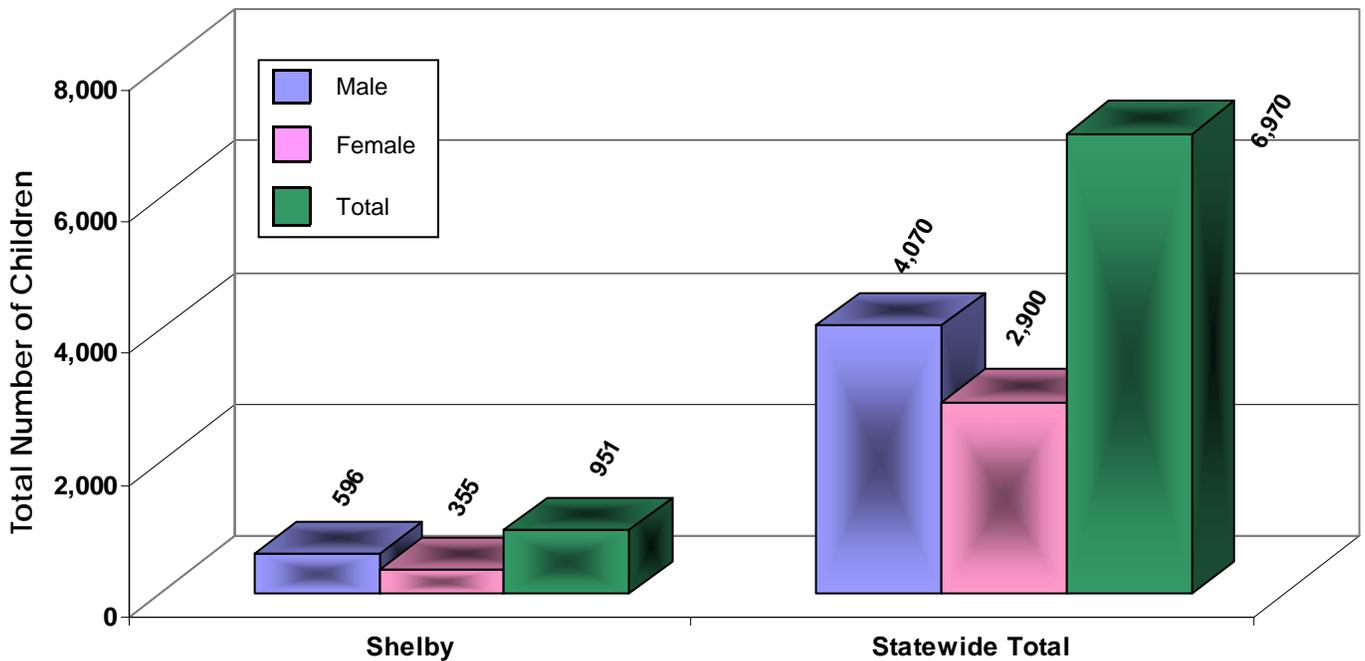


Figure 45: Children in Custody in the Shelby Region by Race/Ethnicity as of June 30, 2009

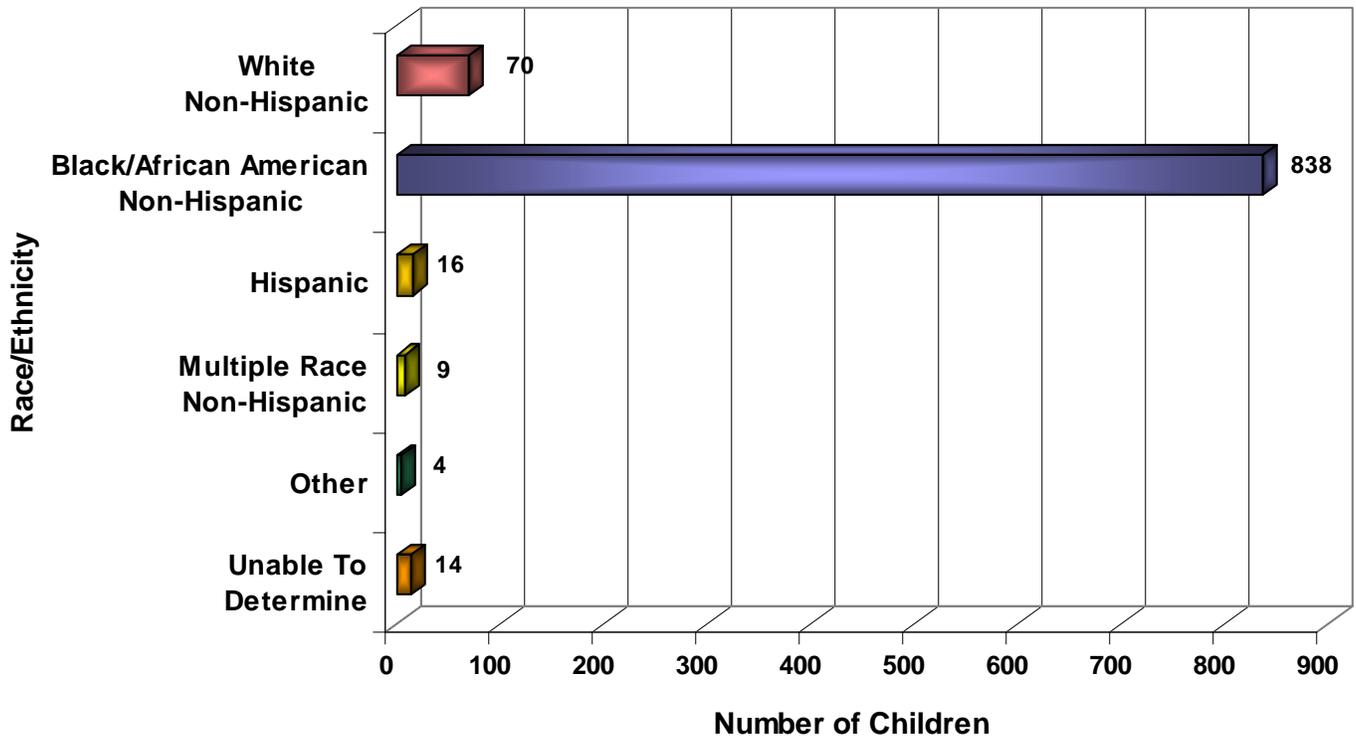
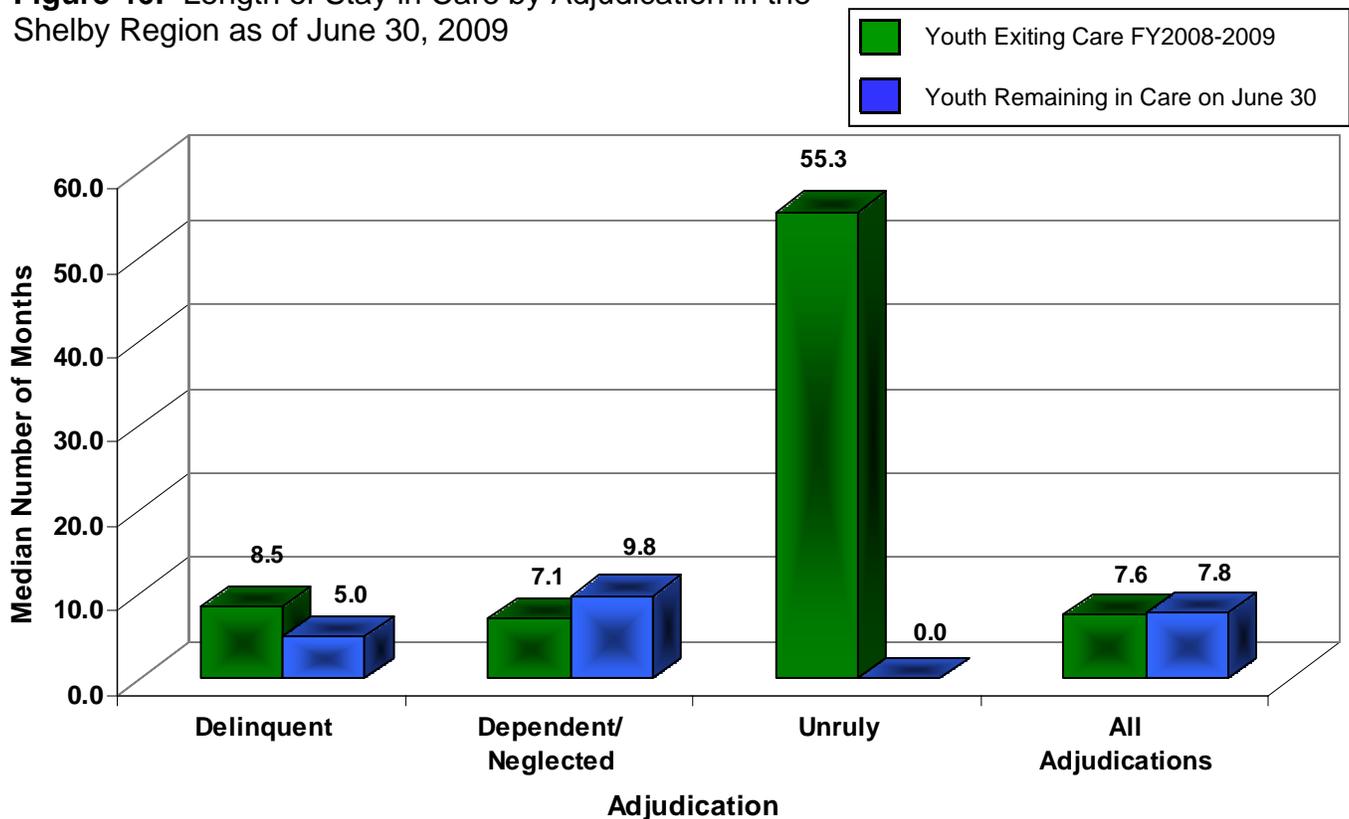


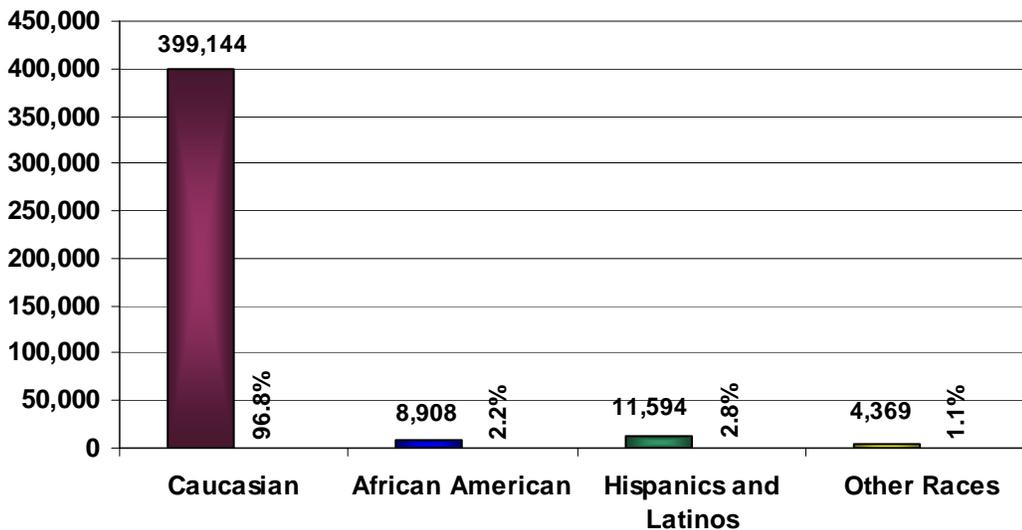
Figure 46: Length of Stay in Care by Adjudication in the Shelby Region as of June 30, 2009



Smoky Mountain Region



Total Population— 412,421*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 20: Placement Type for Children In Care In the Smoky Mountain Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	4	0.6%
Contract Foster Home	56	8.3%
DCS Foster Home (Authorized, Expedited)	253	37.5%
DCS Group Home	4	0.6%
DCS Youth Development Center	20	3.0%
Emergency Services	4	0.6%
Foster Care Medically Fragile	5	0.7%
In-Home	3	0.4%
Level 2	196	29.0%
Level 3	86	12.7%
Level 4	9	1.3%
Runaway	6	0.9%
Trial Home Visit 30/60/90	28	4.1%
Missing	1	0.1%
Total	675	100.0%

Population ages 19 and under as of June 30, 2009—101,466

Number of children in care as of June 30, 2009—675

The Smoky Mountain Region includes seven counties with the regional office located in New Market. There are 156 staff members who support service delivery. The seven counties in the Smoky Mountain Region are: Blount, Claiborne, Cocke, Grainger, Hamblen, Jefferson and Sevier.

In Fiscal Year 2009, Smoky Mountain was the 3rd largest region based on 675 children in custody.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 47: Children in Custody in the Smoky Mountain Region by Age Group Compared with Statewide Totals as of June 30, 2009

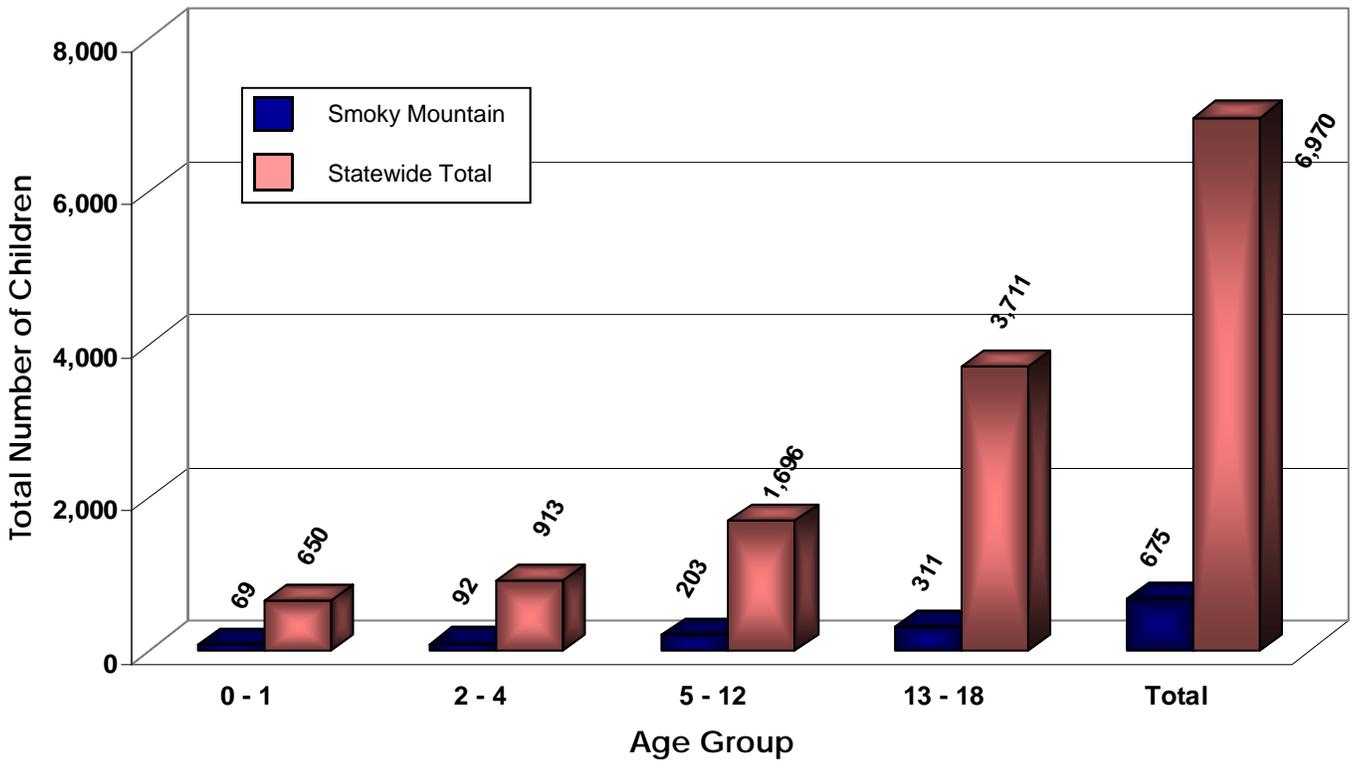


Figure 48: Children in Custody in the Smoky Mountain Region by Gender as of June 30, 2009

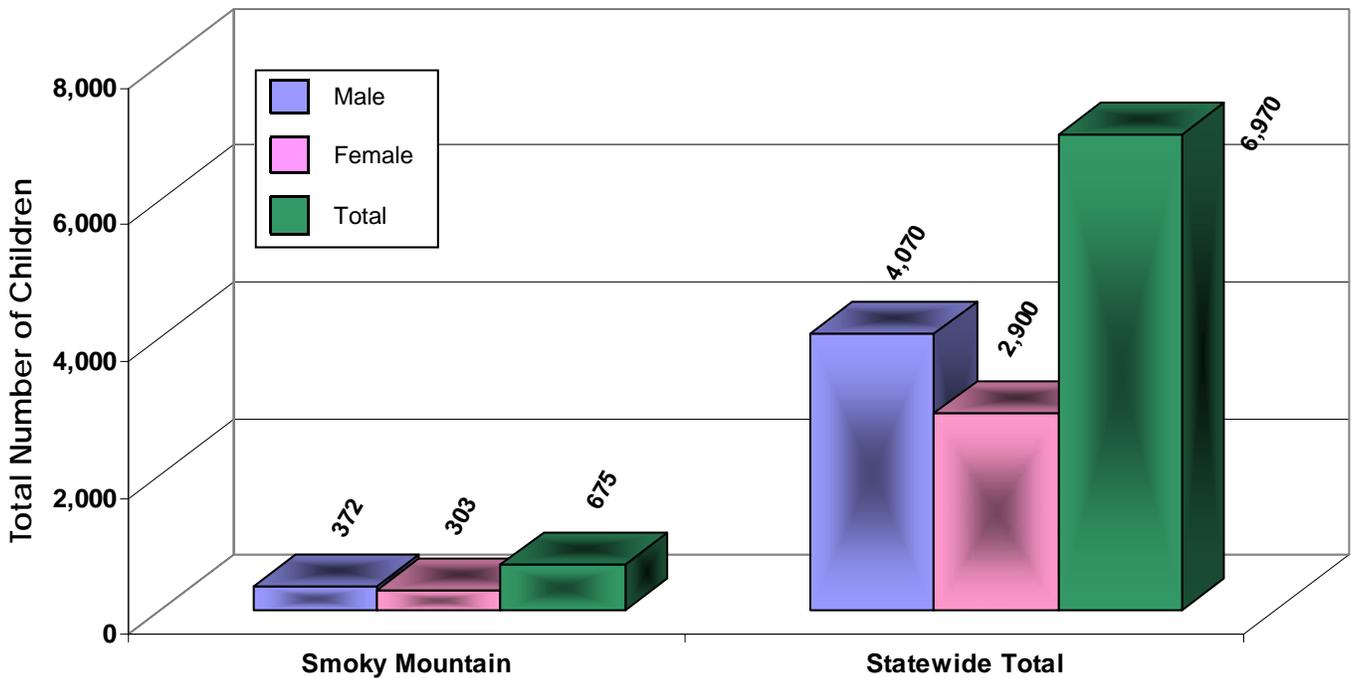


Figure 49: Children in Custody in the Smoky Mountain Region by Race/Ethnicity as of June 30, 2009

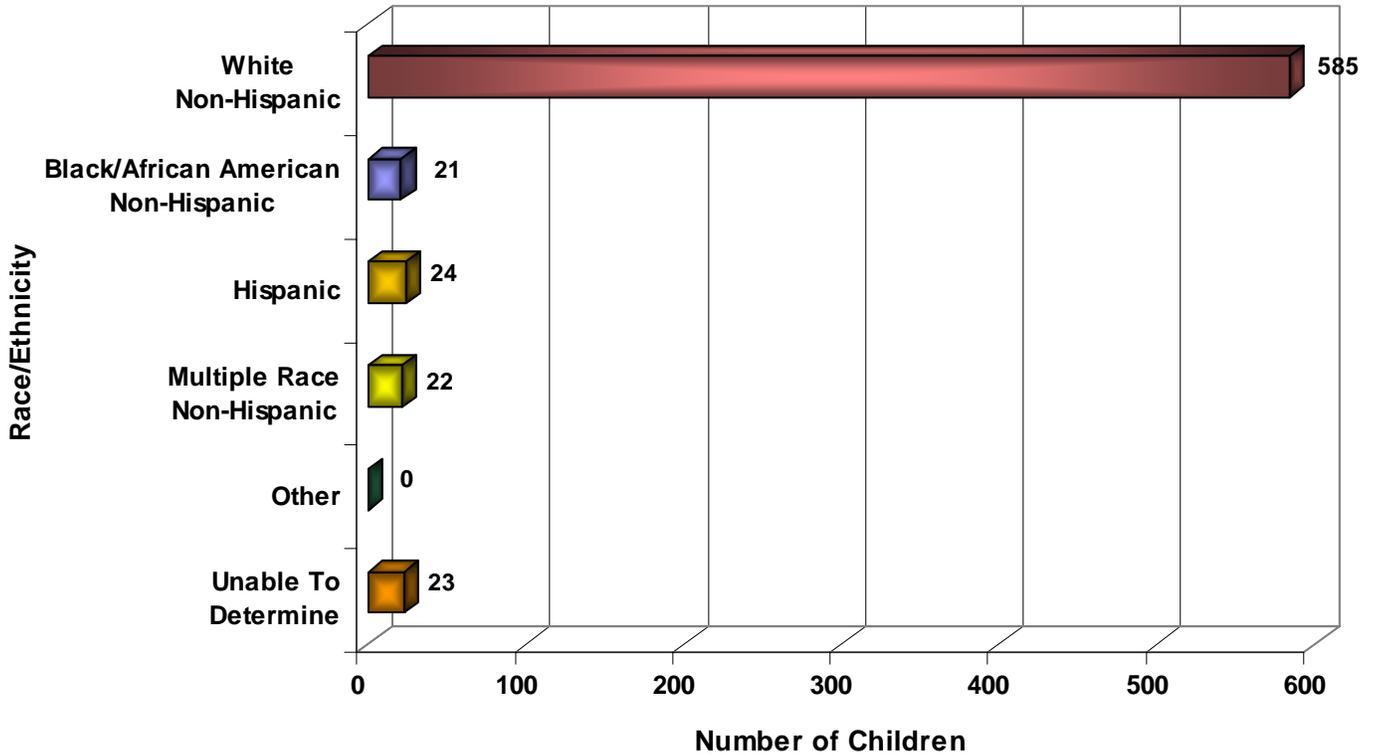
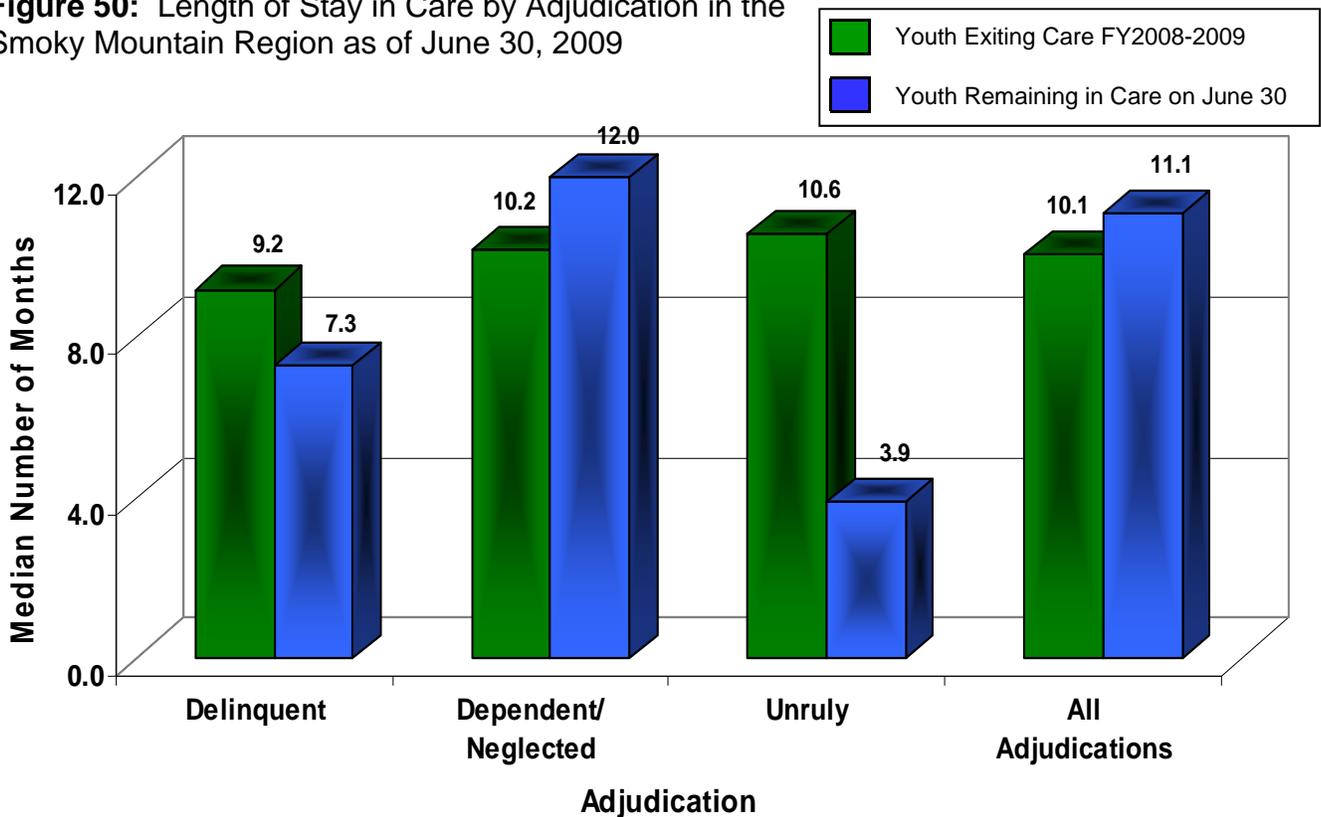


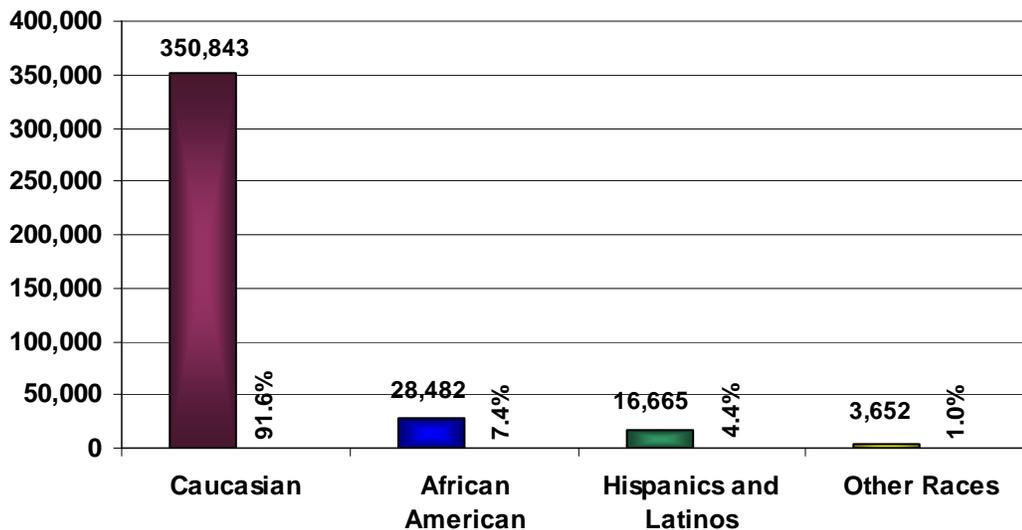
Figure 50: Length of Stay in Care by Adjudication in the Smoky Mountain Region as of June 30, 2009



South Central Region



Total Population— 382,977*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 21: Placement Type for Children In Care In the South Central Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Contract Foster Home	25	4.6%
DCS Foster Home (Authorized, Expedited)	248	45.4%
DCS Group Home	5	0.9%
DCS Youth Development Center	14	2.6%
Emergency Services	7	1.3%
Foster Care Medically Fragile	2	0.4%
In-Home	8	1.5%
Level 2	107	19.6%
Level 3	73	13.4%
Level 4	2	0.4%
Runaway	8	1.5%
Trial Home Visit 30/60/90	42	7.7%
Missing	5	0.9%
Total	546	100.0%

Population ages 19 and under as of June 30, 2009—101,411

Number of children in care as of June 30, 2009—546

The South Central Region provides services to 12 counties of central Tennessee. The 12 counties are: Bedford, Coffee, Giles, Hickman, Lawrence, Lewis, Lincoln, Marshall, Maury, Moore, Perry and Wayne. There are 140 staff in the region with a regional office in Columbia.

Based on the number of children in custody, the South Central Region ranks 7th with 546 children.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 51: Children in Custody in the South Central Region by Age Group Compared with Statewide Totals as of June 30, 2009

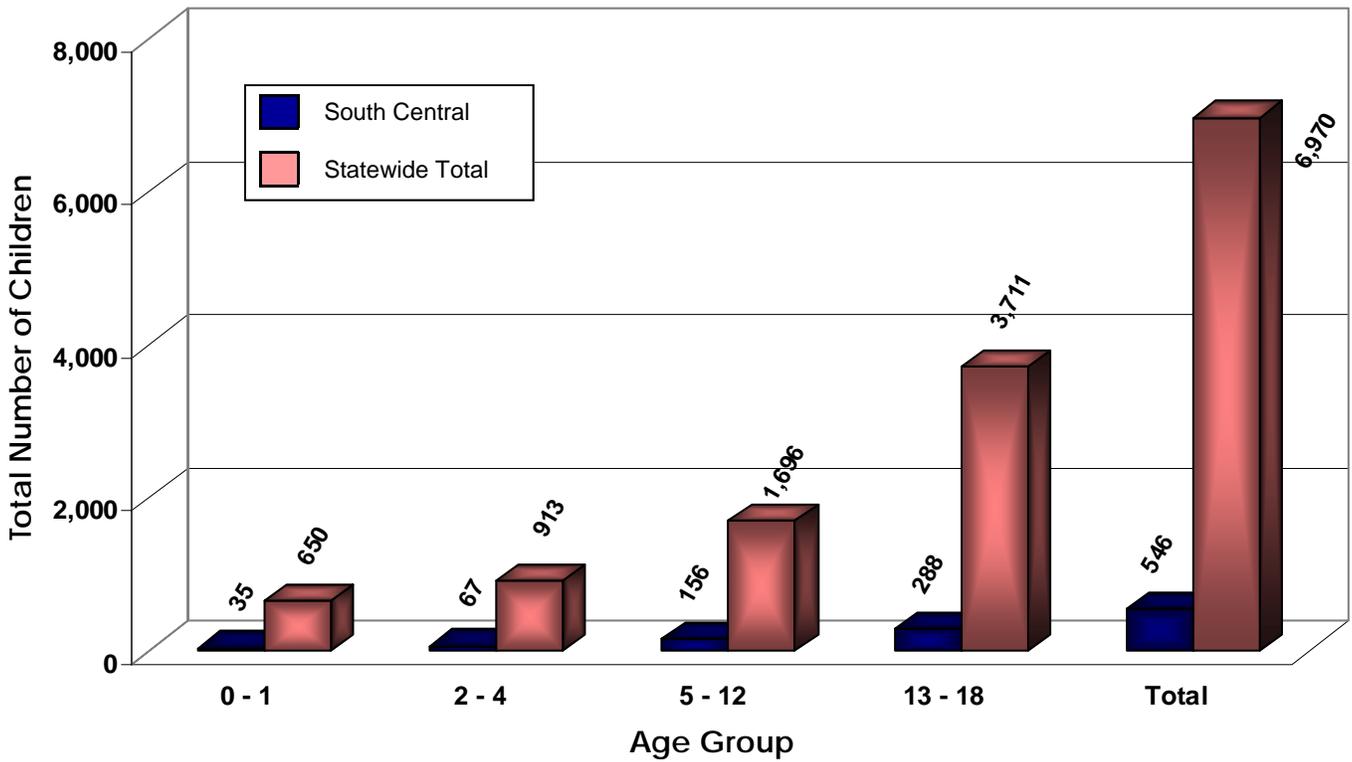


Figure 52: Children in Custody in the South Central Region by Gender as of June 30, 2009

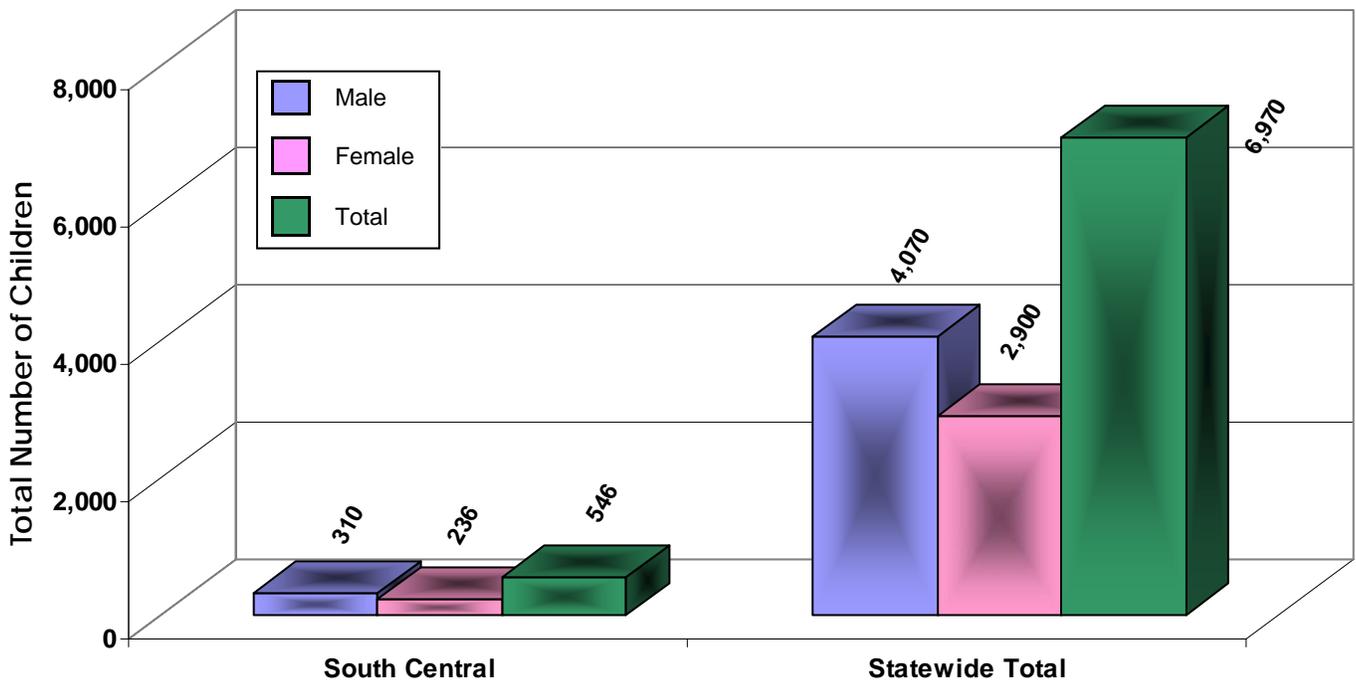


Figure 53: Children in Custody in the South Central Region by Race/Ethnicity as of June 30, 2009

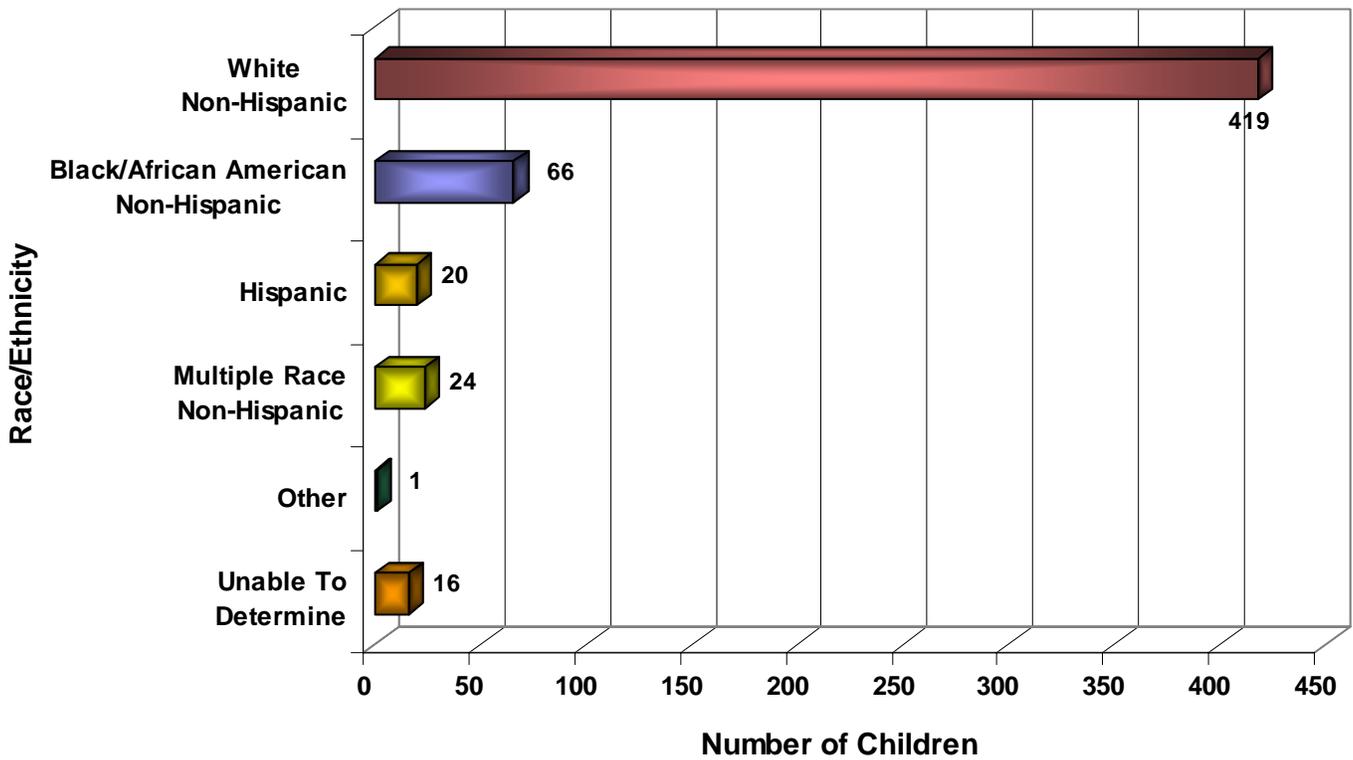
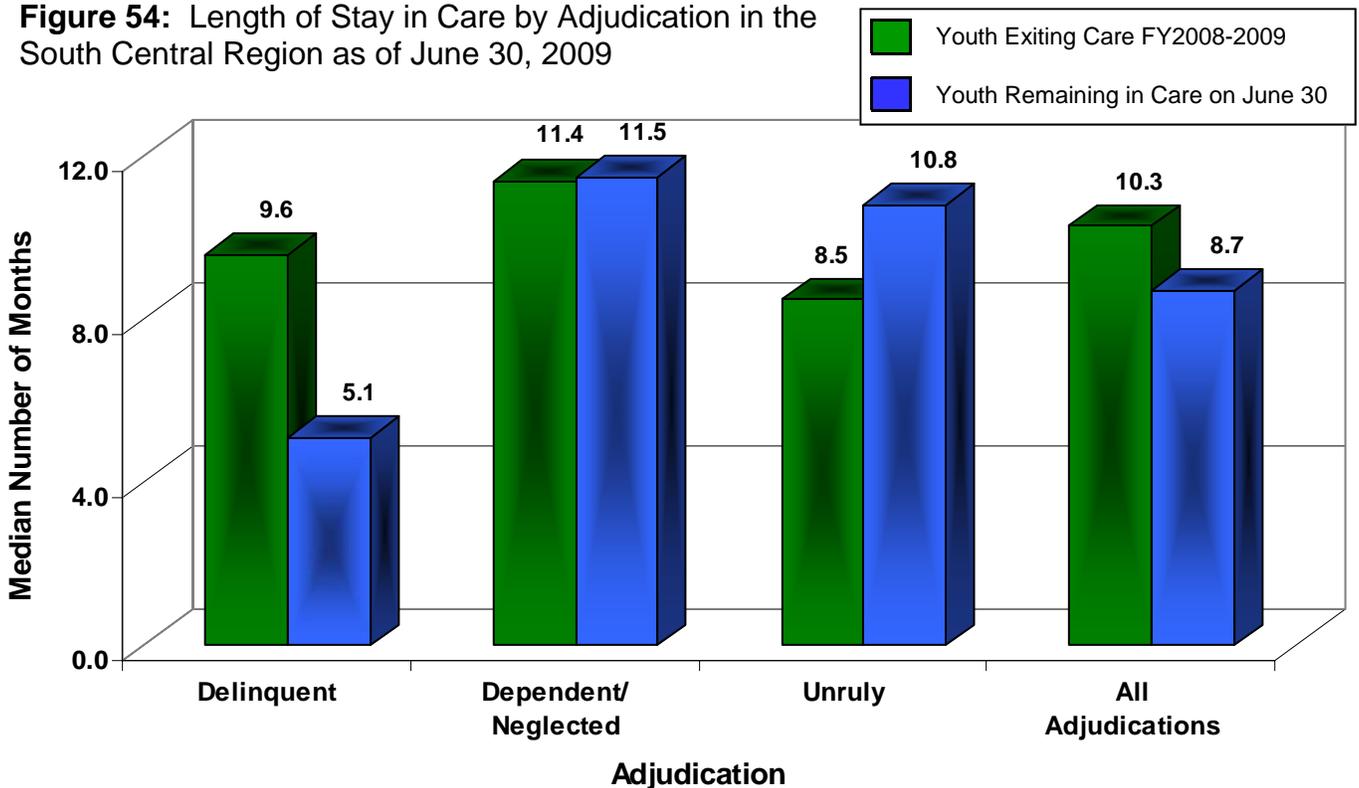


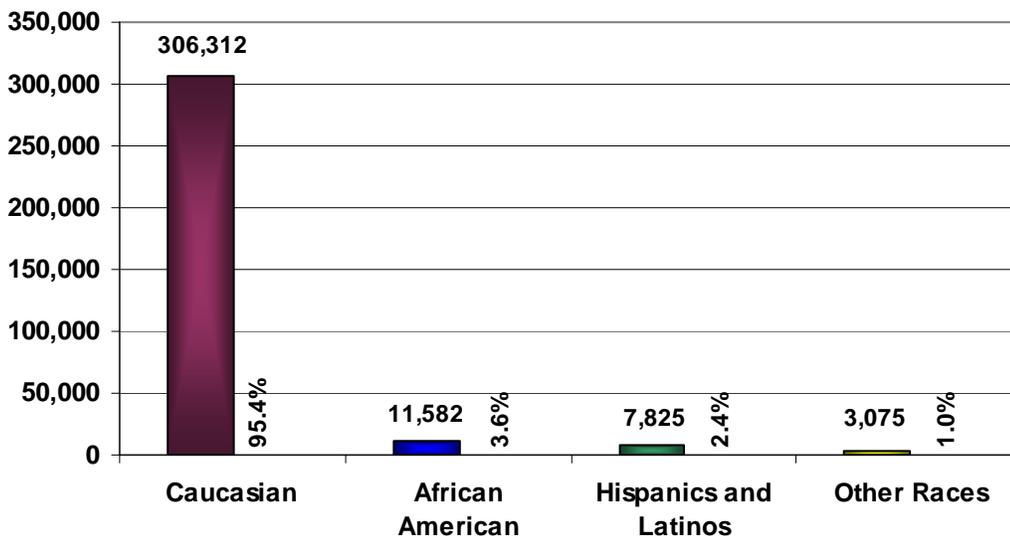
Figure 54: Length of Stay in Care by Adjudication in the South Central Region as of June 30, 2009



Southeast Region



Total Population— 320,969*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Population ages 19 and under as of June 30, 2009—82,153

Table 22: Placement Type for Children In Care In the Southeast Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Contract Foster Home	26	6.9%
DCS Foster Home (Authorized, Expedited)	176	46.7%
DCS Group Home	2	0.5%
DCS Youth Development Center	27	7.2%
Emergency Services	4	1.1%
Foster Care Medically Fragile	5	1.3%
In-Home	4	1.1%
Level 2	68	18.0%
Level 3	27	7.2%
Level 4	11	2.9%
Runaway	9	2.4%
Trial Home Visit 30/60/90	13	3.4%
Missing	5	1.3%
Total	377	100.0%

Number of children in care as of June 30, 2009—377

The Southeast Regional office is located in Chattanooga. The region is responsible for ten counties spanning two time zones. The ten counties are: Bledsoe, Bradley, Franklin, Grundy, Marion, McMinn, Meigs, Polk, Rhea and Sequatchie. It has 12 offices, which cover ten courts, and has 102 staff members.

The Southeast Region has 377 children in custody. It ranks 10th among the 13 regions based on the number of children in custody.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 55: Children in Custody in the Southeast Region by Age Group Compared with Statewide Totals as of June 30, 2009

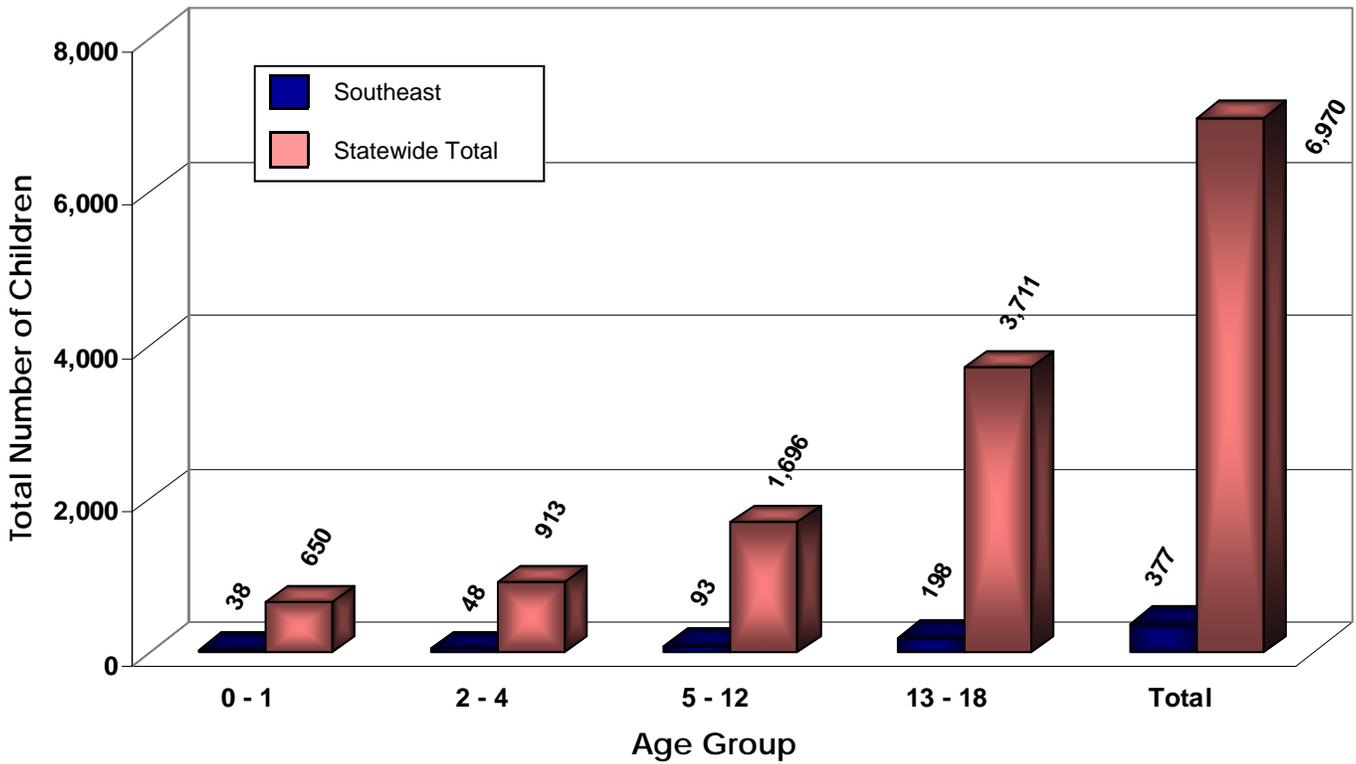


Figure 56: Children in Custody in the Southeast Region by Gender as of June 30, 2009

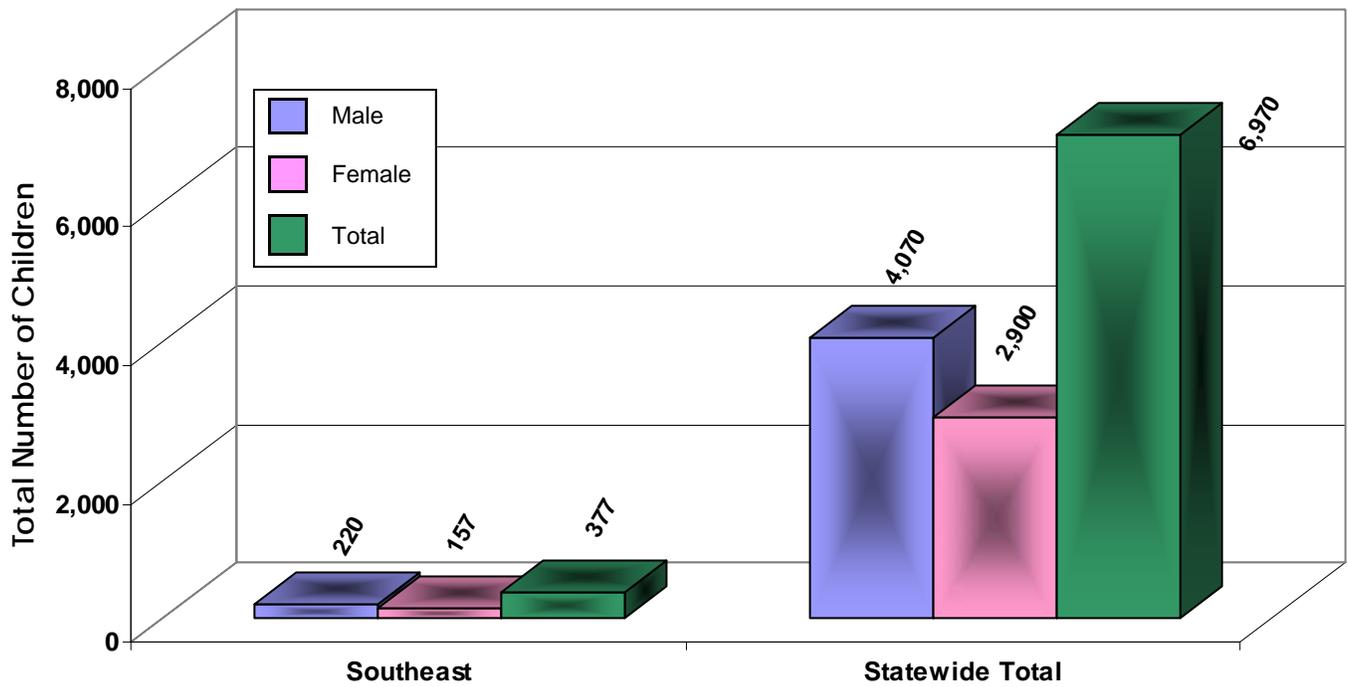


Figure 57: Children in Custody in the Southeast Region by Race/Ethnicity as of June 30, 2009

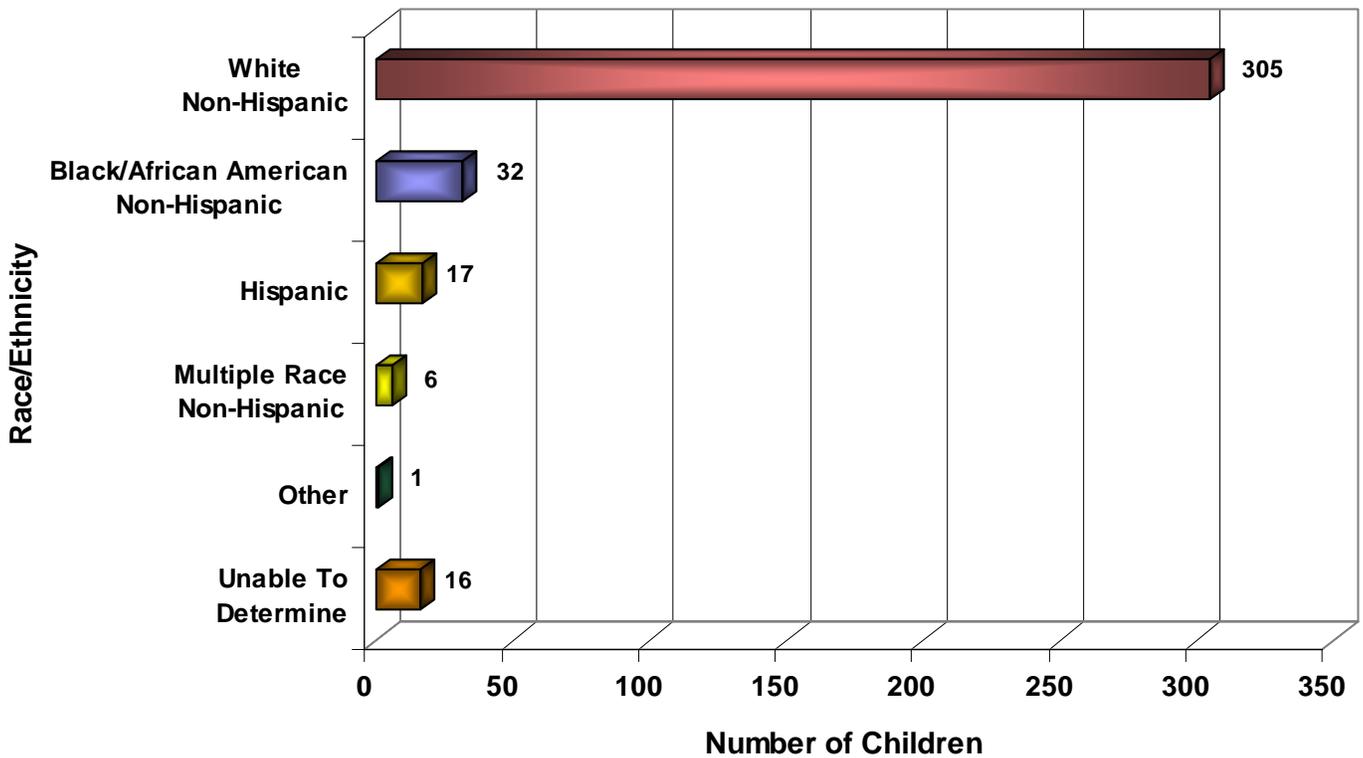
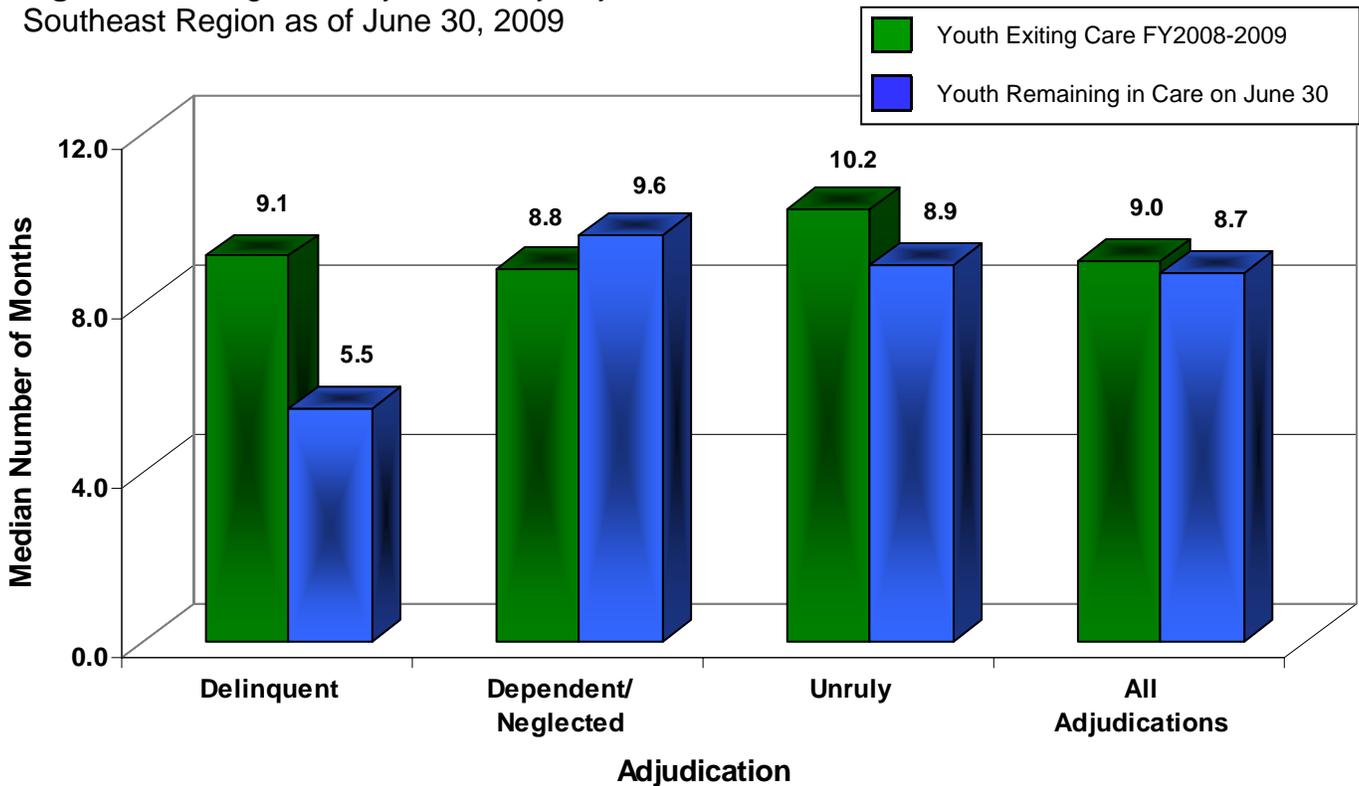


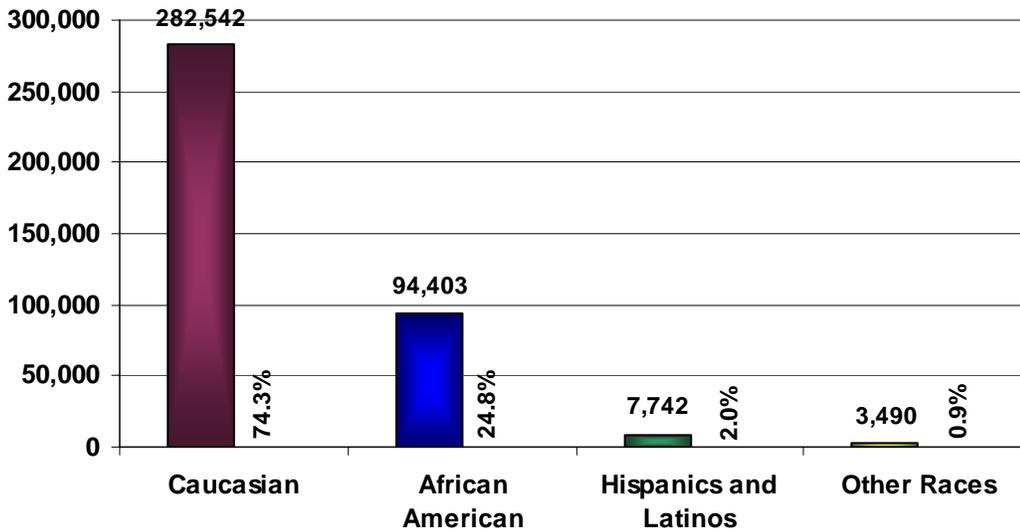
Figure 58: Length of Stay in Care by Adjudication in the Southeast Region as of June 30, 2009



Southwest Region



Total Population— 380,435*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 23: Placement Type for Children In Care In the Southwest Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Contract Foster Home	24	7.6%
DCS Foster Home (Authorized, Expedited)	127	40.4%
DCS Group Home	9	2.9%
DCS Youth Development Center	23	7.3%
Emergency Services	2	0.6%
Foster Care Medically Fragile	2	0.6%
In-Home	3	1.0%
Level 2	36	11.5%
Level 3	52	16.6%
Level 4	7	2.2%
Missing	4	1.3%
Runaway	6	1.9%
Transitional Interdependent Living	1	0.3%
Trial Home Visit 30/60/90	18	5.7%
Total	314	100.0%

Population ages 19 and under as of June 30, 2009—102,295

Number of Children in care as of June 30, 2009—314

The Southwest Region encompasses 11 counties with the regional office located in Jackson. The 11 counties are Chester, Decatur, Fayette, Hardeman, Hardin, Haywood, Henderson, Lauderdale, Madison, McNairy and Tipton. There are 140 staff that provide services to children and families in the region.

The Southwest Region has 314 children in custody and ranks 12th in the state.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 59: Children in Custody in the Southwest Region by Age Group Compared with Statewide Totals as of June 30, 2009

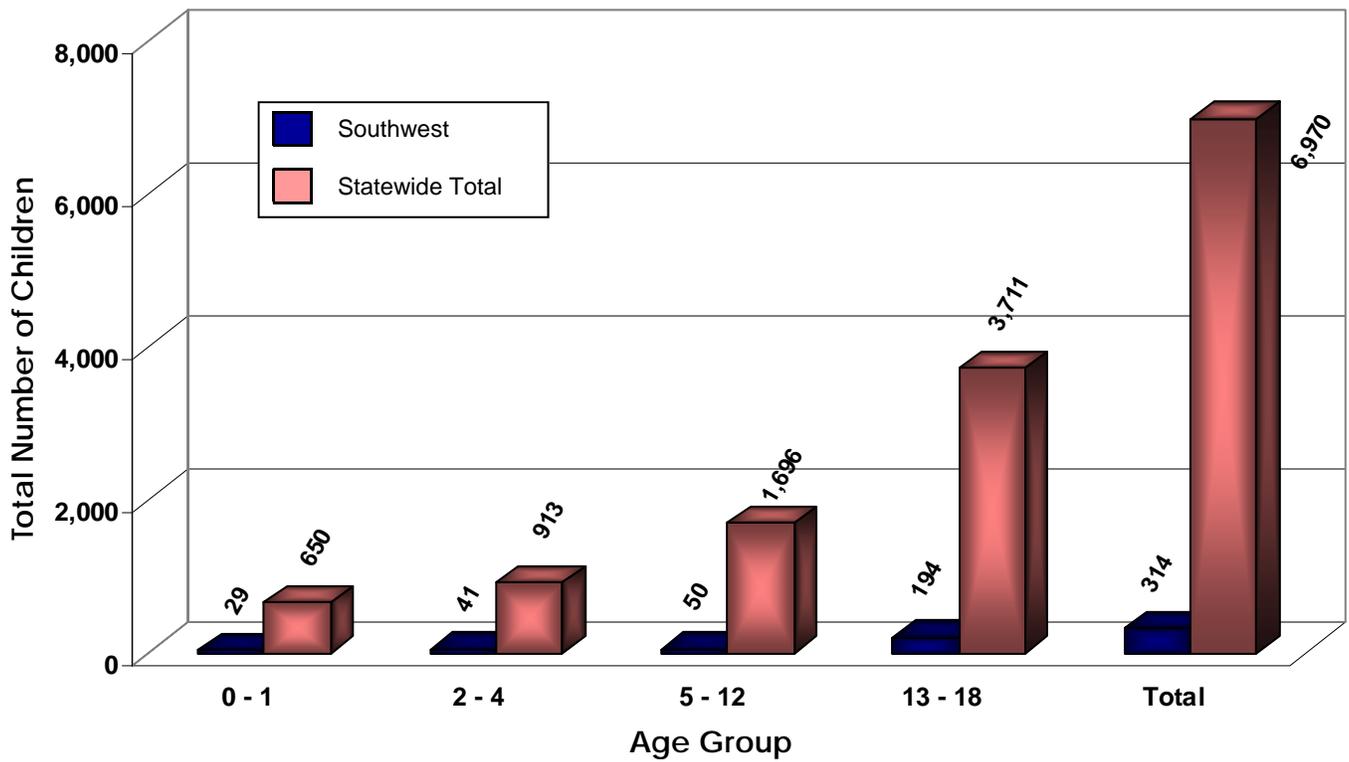


Figure 60: Children in Custody in the Southwest Region by Gender as of June 30, 2009

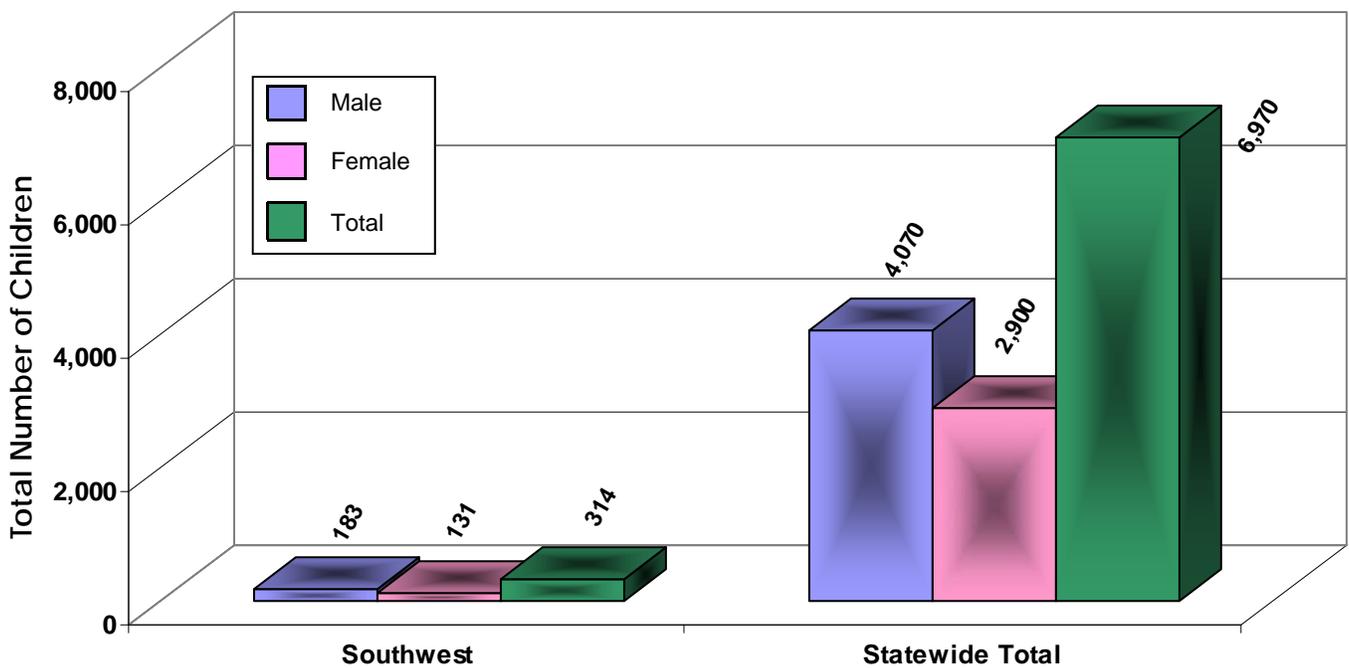


Figure 61: Children in Custody in the Southwest Region by Race/Ethnicity as of June 30, 2009

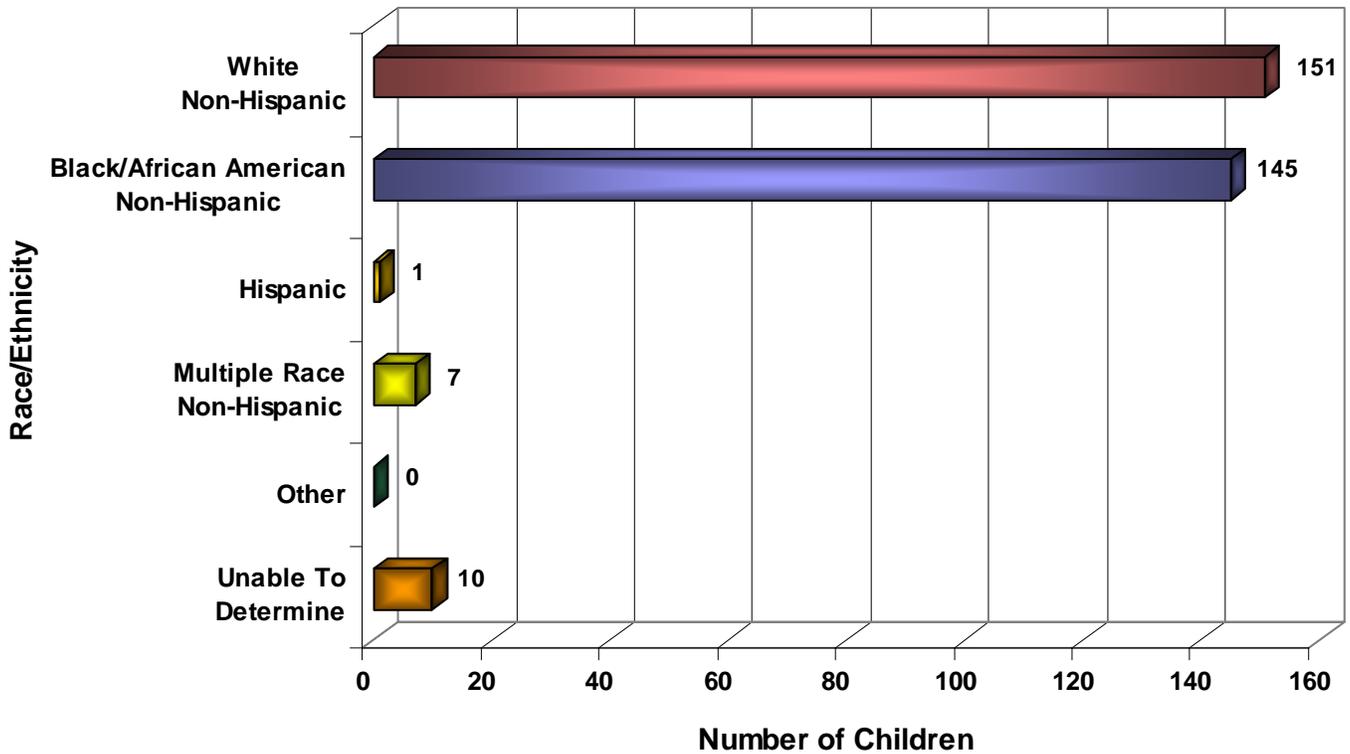
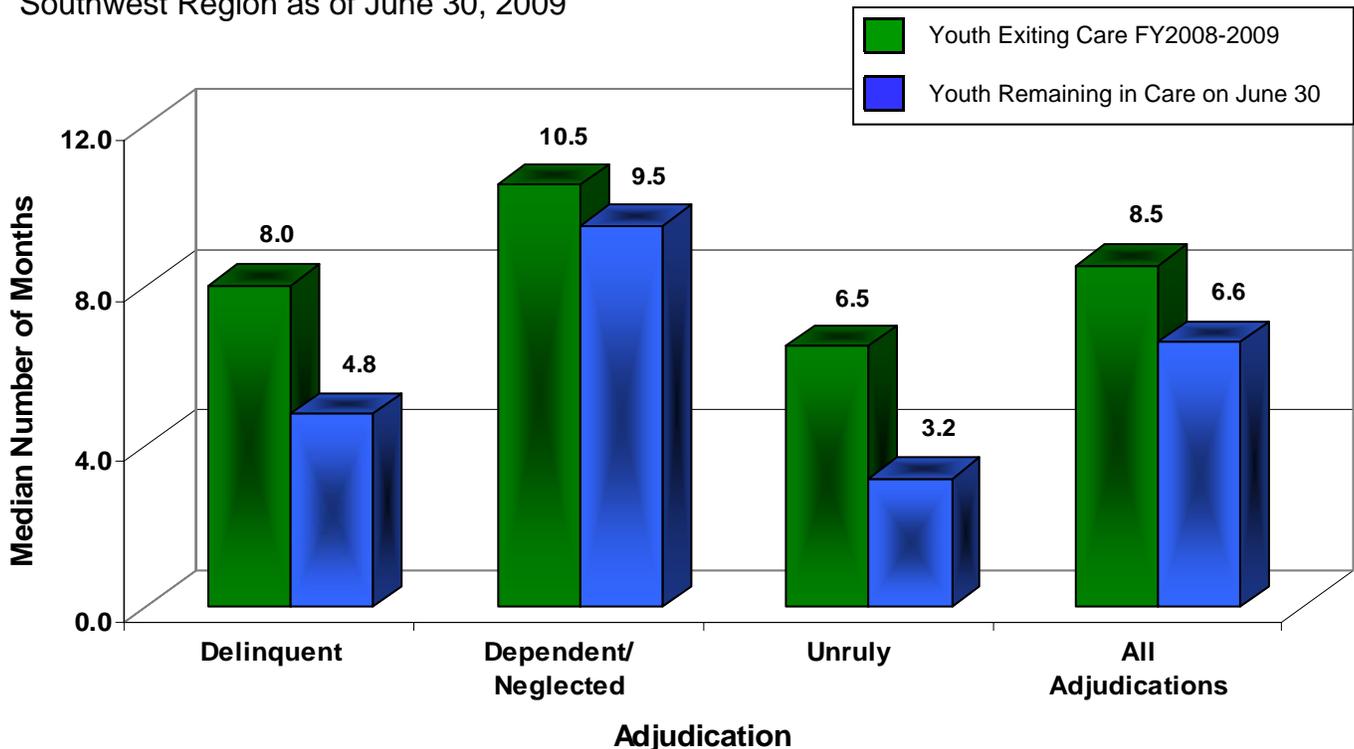


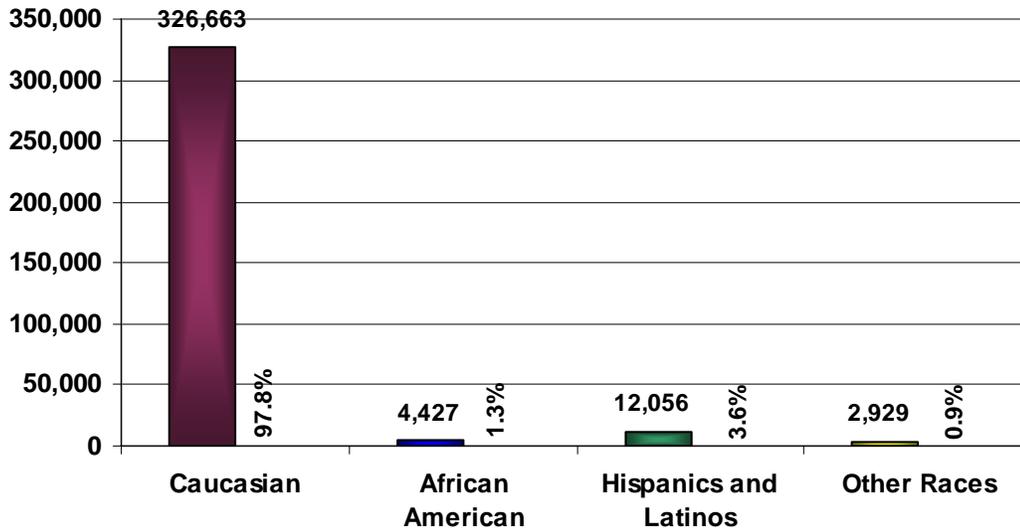
Figure 62: Length of Stay in Care by Adjudication in the Southwest Region as of June 30, 2009



Upper Cumberland Region



Total Population— 334,019*



*The population percentage may total more than 100, since some individuals are multi-racial.

(Data Source: Tennessee Health Department Projections based on 2000 US Census.)

Table 24: Placement Type for Children In Care In the Upper Cumberland Region as of June 30, 2009

Placement Type/Level**	Frequency	%
Acute	2	0.4
Contract Foster Home	37	7.7%
DCS Foster Home (Authorized, Expediated)	239	50.0%
DCS Group Home	6	1.3%
DCS Youth Development Center	15	3.1%
Emergency Services	3	0.6%
In-Home	3	0.6%
Level 2	77	16.1%
Level 3	52	10.9%
Level 4	8	1.7%
Missing	3	0.6%
Runaway	4	0.8%
Trial Home Visit 30/60/90	29	6.1%
Total	478	100.0%

Population ages 19 and under as of June 30, 2009—83,375

Number of children in care as of June 30, 2009—478

The Upper Cumberland Region covers 14 counties in Middle Tennessee. The 14 counties are: Cannon, Clay, Cumberland, DeKalb, Fentress, Jackson, Macon, Overton, Pickett, Putnam, Smith, Van Buren, Warren and White. The regional office is located in Cookeville. There are 139 DCS employees that serve the region.

Based on children in custody, the Upper Cumberland Region is the 9th largest with 478 children.

(Data Source: TN Kids)

**See glossary for complete definitions of terms used in this table under "Placement Levels of Care".

TN KIDS is a "live" database with on-going additions and updates being made to data in the system. Due to this continual process, results may vary based on the time a report is generated.

Figure 63: Children in Custody in the Upper Cumberland Region by Age Group Compared with Statewide Totals as of June 30, 2009

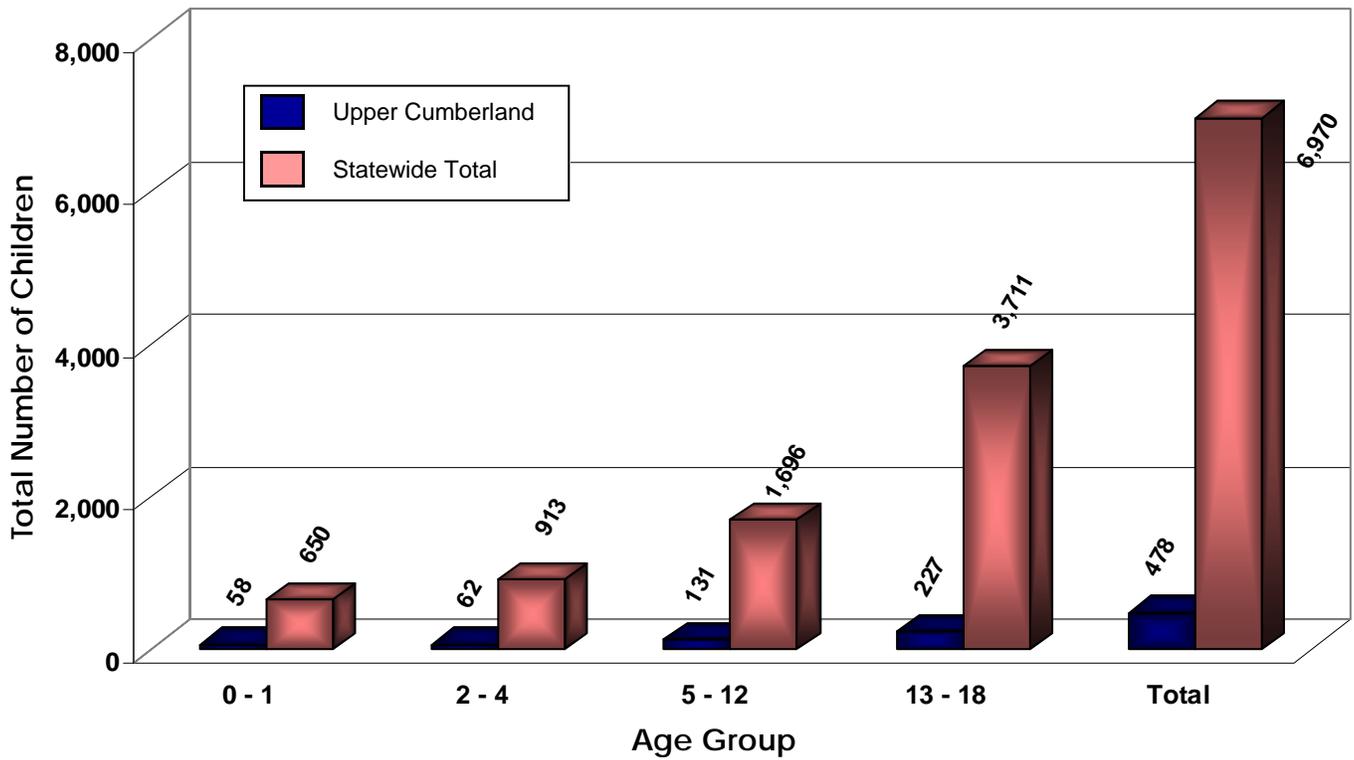


Figure 64: Children in Custody in the Upper Cumberland Region by Gender as of June 30, 2009

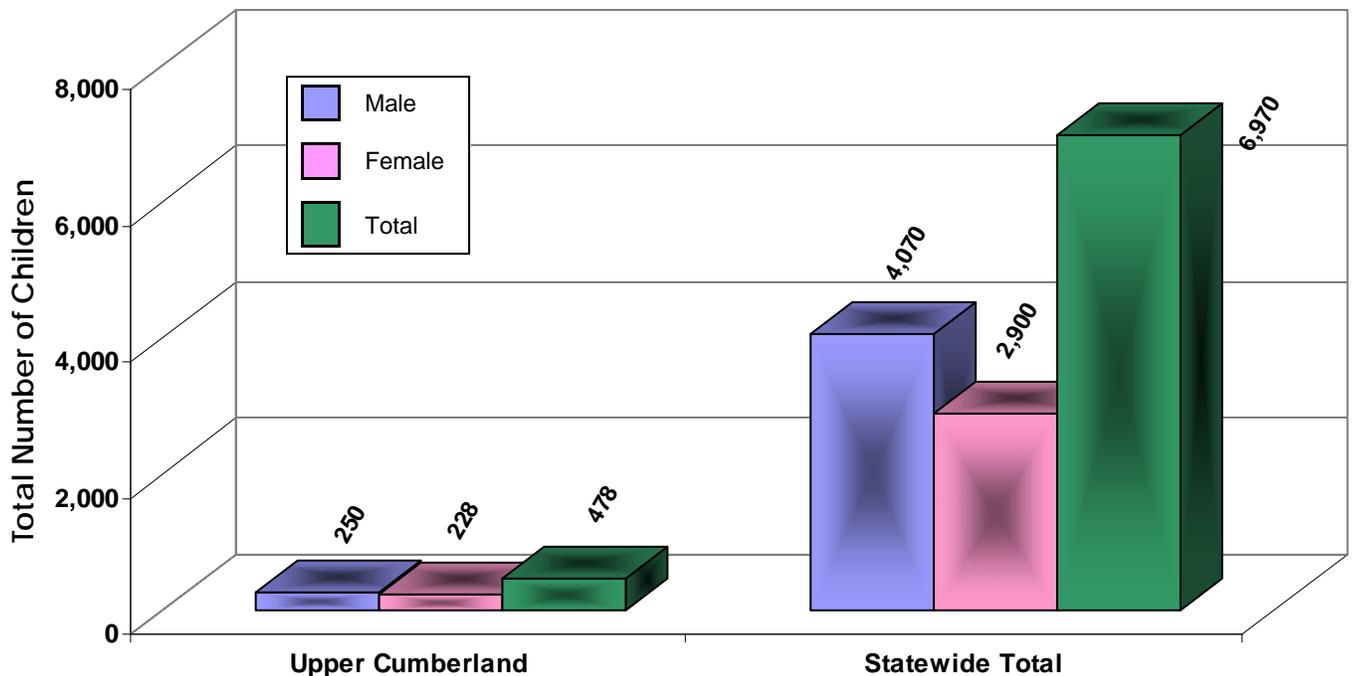


Figure 65: Children in Custody in the Upper Cumberland Region by Race/Ethnicity as of June 30, 2009

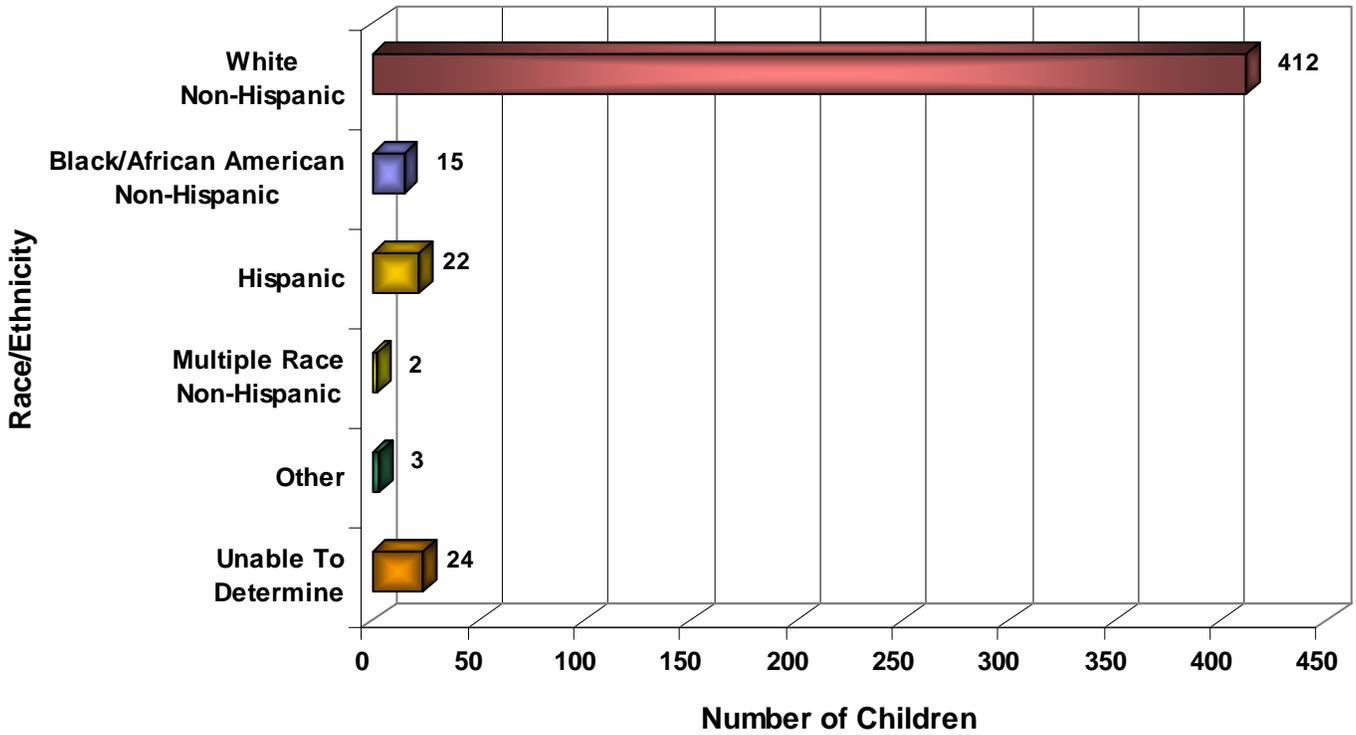
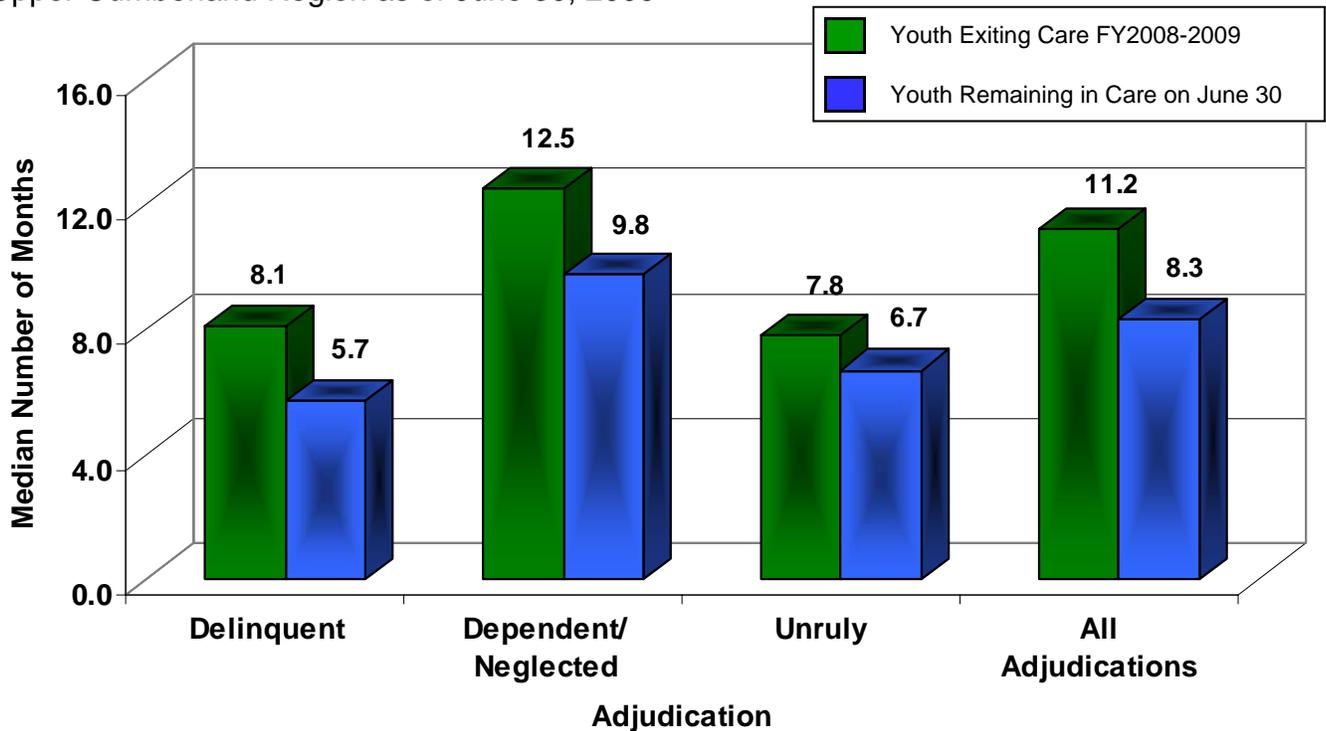


Figure 66: Length of Stay in Care by Adjudication in the Upper Cumberland Region as of June 30, 2009



Glossary

A

Absconder: A delinquent offender who hides, conceals, or absents him/herself from a non-secure setting with the intent to avoid custody or supervision by DCS. (For the purposes of DCS - A JJ child/youth that leaves a non-secure placement or a probation or aftercare case whose location is unknown.)

Adjudication: The outcome of the court's process to determine the validity of allegations made in a petition or complaint. The process consists of the presentation of witnesses and evidence by oral testimony or written statements, and arguments by counsel or the parties.

Adjudication of Delinquency: A juvenile court has found beyond a reasonable doubt that a child has committed a delinquent act. (TCA 37-5-103)

Adoption Assistance: The federal or state programs available to adoptive parent(s) adopting special needs children to enable them to meet the child's maintenance, medical, psychological, or other needs.

Allegation: A charge or claim of fact in a report of child abuse or neglect or in a petition. It must be proven if the report or petition is to be found true. The abuse report lists specific events, injuries, or threats (such as physical abuse, neglect, sexual abuse, or emotional abuse) as an introduction to the report's specific allegations.

Assessment: The ongoing process that is the foundation for all case management decisions made for families and children relative to the intensity of their level of care services and type of placement, if out of home placement is warranted.

B

Block Grant: A system of disbursing funds to meet health, education and social welfare needs while permitting the recipient organization(s) to determine how best to distribute the money.

Board Payments: Board payments financially support children in DCS custody or receiving services voluntarily past 18 years of age. There are 3 types of board payments: standard, special circumstances, and negotiated rates. Board payments are made to the foster parents caring for children.

C

Case File Review: A paper review of an indicated perpetrator's case file by DCS Commissioner (or designee) without the legal representation of either the department or the perpetrator.

Case Recordings: The ongoing chronological narrative written by a family service worker in a case file that serves to document each contact or to document any activity related to the case.

Child Advocacy Centers: Agencies or organizations that champion the rights of children to be free from abuse or exploitation, and to have opportunities to develop toward their full potential.

Child Protective Investigation Team

(CPIT): A legally mandated, multi-disciplinary team that conducts investigations of alleged sexual abuse or other severe child abuse. A CPIT includes one DCS family service worker, one District Attorney's office representative, one juvenile court officer or investigator, one properly trained law enforcement officer with county-wide jurisdiction, the Child Advocacy Center director/designee, and one mental health profession representative

(optional). (TCA 37-1-607)

Child Protective Services (CPS): A program division of DCS whose purpose is to investigate allegations of child abuse and neglect, and to provide and arrange preventive, supportive, and supplementary services.

Civil Service Register: The document or record containing the names of the highest-ranking eligible candidates available for a class of positions for consideration by an appointing authority in filling a vacancy.

Commitment: The legal placement of a child/youth in the care and custody of the Tennessee Department of Children's Services.

Community After-care: Supervision of a youth who has been released from custody and who is subject to conditions imposed by the courts and the Department of Children's Services.

Concurrent Planning: In child welfare services the casework approach that focuses on timely, appropriate implementation for achieving permanence for children, whether it is reunification, relative placement, or termination of parental rights.

Contract Providers: Individuals and organizations, which have entered into a legal agreement to perform services for the Department.

Custody: The control of actual physical care of the child, including the rights and responsibility to provide for the physical, mental and moral well being of the child.
[TCA 37-1-102 (b) (8)].

D

Delinquent Act: An act designated a crime under the law, including local ordinances of this state, or of another state if the act occurred in that state, or under federal law;

excluding traffic offenses other than those classified as a felony (i.e., failure to stop when involved in an accident, driving under the influence, vehicular homicide, etc.).
(TCA 37-1-102)

Dependent and Neglected Child: A child who is without a parent, guardian, or legal custodian or whose parent, guardian, or person with whom the child lives, is unable to properly care for the child, or neglects or refuses to protect the child.
[TCA 37-1-102(b)(12)].

Detention: The temporary confinement of a child, who has been adjudicated delinquent, in a secure area.

E

Early Periodic Screening, Diagnosis & Treatment (EPSDT): The preventive health care services provided under TennCare (Tennessee's Managed Care Medicaid program) to children under the age of 21.

Entitlement Grant: A transfer of funds from one organization or individual to a group of people who belong to a specified class.

F

Family Service Worker (FSW): A DCS employee responsible for providing case management services to children under the State's supervision, in State custody, or at risk of State custody and their families.

Flexible Funding: Monetary resources made available for the purpose of acquiring additional services or goods that can be used to prevent the need for state custody or to return a child home who is in state custody.

Foster Care Review Board: An advisory body appointed by a juvenile court judge(s), which reviews the status of each neglected and dependent, and unruly child's case in DCS custody at least once within the first 90 days of initial placement in DCS custody and

within every 6 months thereafter.

G

Guardianship: The legal status of a child when all parental rights to the child have been terminated by surrender, court order or clearing the Putative Father Registry and DCS has guardianship of the child with the right to consent to the child's adoption.

I

In-Home Services: The process of providing services to a child and his/her family within their home or place of residence, rather than in an outside service setting.

Independent Living: Consists of a series of developmental activities that provide service opportunities for young people to gain the skills required to live healthy, productive, and responsible lives as self-sufficient adults. The provision of Independent Living Services is required for any child in DCS custody age 16 years of age or older.

Intake (CPS): The process DCS family service workers follow in accepting oral or written complaints, reports or allegations of child abuse or neglect for investigation which includes gathering the information needed to determine if a Child Protective Services investigation is warranted, determining the urgency of the situation and then initiating the appropriate response.

Interstate Compact on Juveniles: An agreement between all fifty states, the District of Columbia, Guam and the Virgin Islands authorizing out-of-state supervision of delinquent juveniles who are eligible for aftercare (parole) or probation; provides for the return to their home state of absconders, escapees and non-delinquent runaways; and includes the cooperative institutionalization of delinquent juveniles.

Interstate Compact on the Placement of Children: A uniform law enacted by all fifty

states, the District of Columbia, and the Virgin Islands that establishes orderly procedures for the placement of children across state lines into other party states for the purpose of foster care or preliminary to an adoption and fixes responsibility for those involved in placing the child.

Investigation: A fact-finding and emergency service engagement process with the preliminary goal of protecting children from abuse or neglect.

L

Least Restrictive Placement: An out of home placement alternative that best preserves the family, or minimizes the impact of separation. Placement may involve brief stays with relatives, a shelter, or temporary foster care.

N

Neglect: Acts of commission or failure to provide for basic needs of a child including but not limited to food, medical care, and safe living conditions.

P

Parental Rights: The legally recognized rights and responsibilities to act as a parent, to care for, to name, and to claim custodial rights with respect to a child.

PATH (training): Training for foster care, kinship care, and adoption, entitled *Parents as Tender Healers*

Permanency Planning: The process of intervention and decisive case work on the part of the family service worker, focusing on choosing the least restrictive permanent outcome for the child, i.e., return to parent, relative placement, adoption, or independent living in a timely manner.

Placement Levels of Care:

Acute—Same as Level 4 but for children that are MR or low functioning.

Foster Care—Foster Care is a program for children, youth, and their families whose special needs can be met through services delivered primarily by foster parents trained, supervised, and supported by agency staff with the goal of permanency based on the best interest of the child.

Foster Care Medically Fragile—Foster Care Medically Fragile program provides recruitment, training, and support services to foster parents trained to meet the needs of youth who are appropriate for family-based care but require a higher level of medical support, intervention, and case coordination. Foster parents are specially trained to care for children with extreme medical needs, which cannot be provided in their family homes.

Foster Care Therapeutic—Therapeutic Foster Care Services include recruitment, training, and support services to foster parents trained to meet the needs of youth who are appropriate for family based care but require behavioral intervention, case coordination, and/or counseling services. Therapeutic Foster Care parents require more frequent respite and support services and training in behavioral intervention.

Level 1—Foster Care is a program for children, youth, and their families whose special needs can be met through services delivered primarily by foster parents trained, supervised, and supported by agency staff with the goal of permanency based on the best interest of the child.

Level 2—Level II Residential Treatment is designed to meet the needs of children who are unable to live at home or in a resource home and require temporary care in a group or residential setting. The residential treatment program provides structure, counseling, behavioral

intervention and other services identified in a child's permanency plan for children with moderate clinical needs. Children in this program type attend public school in the community.

Level 2 Continuum—Continuum of Care is a service model with a focus on achieving the outcome of successful permanency for children in a family setting. Continuums have flexibility to design services, in coordination with a Child and Family Team, which are individualized for children and families and the ability to customize the delivery of services to each child and family in the least restrictive manner. A Level II Continuum is an array of services for children with moderate mental health and behavioral issues and their families, which includes residential services, resource homes with wrap-around services, in-home services, and support and services to the child's family. The goal of all continuum services is timely permanency and well being for the children served.

Level 2 Special Needs—Level II Special Needs is a structured group home or residential treatment facility specializing in treatment of youth with both developmental delays and behavioral and/or emotional disorders. The program provides structure, counseling, behavioral intervention, and other needs identified in a child's permanency plan. Children and youth may, if appropriate, attend an on-site school approved by the Department of Education and the Department of Children's Services Educational Division.

Level 2 Special Population—Level II Special Population is a structured group home, residential treatment facility, or Wilderness program that provides structure, counseling, behavioral intervention, and other needs identified in a child's permanency plan for youth with moderate

clinical needs. The youth do not attend public school in the community for specified treatment reasons.

Level 3—LEVEL III Residential Treatment provides an interdisciplinary psychotherapeutic treatment program in a 24-hour a day facility for children and youth with serious emotional and/or psychological treatment needs and in need of intensive residential treatment facility. The agency provides intensive day treatment and an educational program. A Level III Continuum is an array of services for children with moderate mental health and behavioral issues and their families, which includes residential services, resource homes with wraparound services, in-home services, and support and services to the child's family.

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Level 3 Continuum Special Needs—A Level III Continuum Special Needs is an array of services for children with serious mental health and behavioral issues and their families, which includes residential services, resource homes with wrap-

around services, in-home services, and support and services to the child's family.

Level 4—Level IV programs provide psychiatric hospitalization, which is a physician-directed level of care focused on establishing the behavioral and emotional prerequisites for functioning in less restrictive, non-hospital environments. It is a transitional level of care that a child may enter as a step-down from an acute admission or as a temporary admission from a lower level of care for the purpose of emotional and/or behavioral stabilization. All admissions to Level IV programs meet the criteria for voluntary admission subject to the availability of suitable accommodations as defined by the hospital. The child's treatment team under the leadership of the physician makes decisions regarding which clinical issues are addressed on the plan of care, the sequence in which they are addressed and discharge recommendations. The use of seclusion or restraint in Level IV programs shall be directed by a physician (licensed independent practitioner) and must be in compliance with applicable statutory Department of Children's Services, licensure, CMS and JCAHO requirements. The regional psychologist must approve all admissions of children in custody to a Level IV program.

Placement Quality Team System (PQTS):

A multi-team system that includes cross functional teams comprised of both regional and central office staff from multiple divisions who meet to discuss provider performance issues, both systemic and provider specific, in order to improve overall provider performance. When issues of concern are presented to a PQTS team, they will assist the provider in improving their performance through corrective action. The Yellow Zone Team can consider specific interventions that include: technical assistance to the provider, issuance of a corrective action plan (CAP),

admission freeze, reduction of contract, or termination of contract.

Probation: Supervision of a youth who has been adjudicated delinquent by a court and who is subject to conditions imposed by the court and probation division.

R

Resource Parent: A person who has been trained and approved by the department or a licensed child-placing agency to provide full-time temporary out-of-home care in a private residence for children who, for various reasons, can no longer remain in their own homes.

S

Surrender of Parental Rights: The legal document whereby the birth parent(s) or guardian(s) of the child voluntarily relinquish his/her rights or rights of guardianship and responsibilities directly to DCS, a child-placing agency or directly to the prospective adoptive parent(s) for the purpose of adoption.

T

Targeted Case Management: The process of focusing on a particular aspect or aspects of a case in order to bring about specific change(s).

Temporary Custody: The legally ordered status of a child when an adult or an agency receives physical care, control, and supervision of a child for a limited time. Temporary custody is subject to the remaining rights and duties of the parent or guardian and to any limitations in the court's order.

TennCare: A managed healthcare program for Tennesseans who are either eligible for Medicaid, or are uninsured or uninsurable.

Title IV-E: A section of the Social Security Act that provides funding for the maintenance of children in foster care who meet certain Temporary Assistance for Needy Families (TANF) eligibility criteria and who meet certain legal requirements, e.g., best interests, reasonable efforts.

TN KIDS: A statewide database application developed by the TN Department of Children's Services to provide efficient access to information about children and families served by DCS.

U

Unruly Child/Youth: A child in need of treatment and rehabilitation who habitually and without justification is truant from school while subject to compulsory schools attendance under TCA 49-6-3007; or is habitually disobedient of the reasonable and lawful commands of parents/guardians or other legal custodians to the degree that such child's health and safety are endangered; or commits an offense which is applicable only to a child; or is a runaway.

W

Wraparound Funds: Funds used to provide appropriate support for living arrangements that will lead towards permanency for children and youth in DCS custody.

Acronyms

A

A&D – alcohol and drug
ACA – American Correctional Association
ACCWIC –Atlantic Coast Child Welfare Implementation Center
ADD – attention deficit disorder
ADHD – attention deficit disorder with hyperactivity
AFDC – Aid to Families with Dependent Children
AG – attorney general
ASFA – Adoption and Safe Families Act
AWOL – absent without leave

B

BHO – behavioral health organization
BIP – behavior intervention plan
BPR – Board of Professional Responsibility
BSW – Bachelors Social Work

C

CANS – Child and Adolescent Needs and Strengths
CAP – Corrective Action Plan
CAPTA – Child Abuse Prevention and Treatment Act
CART – child abuse review team
CASA – court appointed special advocate
CBT – computer-based training
CFSR – child and family service review
CFTM – child and family team meeting
CM – case manager
CIP – court improvement program
CIT – crisis intervention team
CLE – continuing legal education
CLT – Core Leadership Team
CO – Central Office
COA – Council on Accreditation
CPIT – child protective investigative team
CPPP – Child Placement and Private Provider
CPS – Child Protective Services
CQI – continuous quality improvement
CRI – Children’s Rights, Inc.
CRP – community residential program
CSA – Community Services Agency
CSLA – children in special living arrangements
CSO – Children’s Services Officer
CWB – child welfare benefits
CWLA – Child Welfare League of America
CY – calendar year

D

DA – district attorney
DCS – Department of Children’s Services
D&N – dependent and neglected
DEA – Drug Enforcement Agency
DHS – Department of Human Services
DJJ – Department of Juvenile Justice
DMHDD – Department of Mental Health
and Developmental Disabilities
DMRS – Division of Mental Retardation Services
DNR – do not resuscitate
DOC – Department of Correction
DOE – Department of Education
DPA – direct purchase authority

DMS-IV – Diagnostic and Statistical Manual for
Mental Disorders

E

ED – emotionally disturbed
EAP – Employee Assistance Program
EEOC – Equal Employer Opportunity Commissioner
EPSDT – early periodic screening, diagnosis and
treatment
E&M – Evaluation and Monitoring

F

F&A – Department of Finance and Administration
FAPE – free appropriate public education
FAQ – frequently asked questions
FBA – functional behavior assessment
FCIP – family crisis intervention program
FCRB – foster care review board
FF – flex funds
FHACP – Resource home and Child Placement
FLSA – Fair Labor Standards Act
FSA – field system administrator
FSS – family support services
FSW – Family Service Worker
FTT – failure to thrive
FY – fiscal year
FYI – for your information

G

GAF – Global Assessment of Functioning
GED – General Educational Development
GH – group home

H

HCCM – home county case manager
HIPAA – Health Insurance Portability and
Accountability Act of 1996
HR – Human Resources
HRD – Human Resources Department

I

IA – Internal Affairs
IAP – individualized accommodation plan
ICE – Immigration and Customs Enforcement
ICJ – Interstate Compact on Juveniles
ICPC – Interstate Compact on the Placement of
Children
ICWA – Indian Child Welfare Act
IDEA – Individuals with Disabilities Act
IEP – individualized education plan/program
IEPA – Inter-Ethnic Place Act
IPP – Individual Program Plan
IR – information resources
IS – information systems
ISM – information systems management
IV-B – section of federal Social Security Act
IV-D – section of federal Social Security Act
IV-E – section of federal Social Security Act

J

JJ – juvenile justice
JCCO – juvenile court commitment order
JJDPA – Juvenile Justice and Delinquency Prevention Act

L

LCS – Legislative Constituent Services
LDI – legally defensible interviewing
LEA – local education agency
LRE – least restrictive environment
LTPA – long-term placement agreement

M

MCO – managed care organization
MD – manifestation determination
MEPA – Multi-Ethnic Placement Act of 1994
MR – mentally retarded
MRS – Multiple Response System
MSW – Masters Social Work

N

NACC – National Association of Counsel for Children
NCAC – National Child Advocacy Centers

O

O&A – observation and assessment
OIG – Office of the Inspector General
OIR – Office of Information Resources
OIS – Office of Information Systems
OJJDP – Office of Juvenile Justice and Delinquency Prevention
OJT – on-the-job training
OT – occupational therapy

P

P2E – Path to Excellence
PAR – program accountability review
PATH – Parents as Tender Healers
PBC – Performance Based Contracting
PCP – primary care provider
PD – public defender
PER – placement exemption request
PIP – Program Improvement Plan
POA – power of attorney
PPLA – planned permanency living arrangement
PPPM – Policy Planning and Performance Management
PQI – Performance and Quality Improvement
PQT – Program Quality Team
PQTS – Placement Quality Team System
PT – physical therapy
PTSD – post-traumatic stress disorder

Q

QSR – Quality Service Review

R

RA – regional administrator
RAC – residential appeals committee

RAD – reactive attachment disorder
REACT – Resource Exchange for Adoptable Children in Tennessee
RFP – request for proposals
RGC – regional general counsel
R/O – rule out
ROCM – risk-oriented case management

S

SACWIS – State Automated Child Welfare Information System
SAT – services and appeals tracking
SDM – Structured Decision Making
SEA – State Education Agency
SED – seriously emotionally disturbed
SIR – serious incident report
SIU – Special Investigations Unit
SPMI – seriously and persistently mentally ill
SSA – Social Security Act
SSI – supplemental security income

T

TAC – Technical Assistance Committee
TANF – Temporary Assistance for Needy Families
TBI – Tennessee Bureau of Investigation
TC – team coordinator
TCA – Tennessee Code Annotated
TCCW – Tennessee Center for Child Welfare
TCCY – Tennessee Commission on Children and Youth
TCSSES – Tennessee Child Support Enforcement System
TEIS – Tennessee Early Intervention Services
TFACTS – Tennessee Family and Child Tracking System
THP – trial home placement
THV – trial home visit
TIPS – Tennessee Infant Parent Services
TL – team leader
TRCP – Tennessee Rules of Civil Procedure
TRJP – Tennessee Rules of Juvenile Procedure

U

UAPA – Uniform Administrative Procedures Act
UCCJEA – Uniform Child Custody Jurisdiction and Enforcement Act
UPP – Unified Placement Program

V

VAP – voluntary acknowledgement of paternity
VVCO – violation of a valid court order

Y

YDC – youth development center
YSO – youth services officer

Addendum I



STATE OF TENNESSEE
DEPARTMENT OF CHILDREN'S SERVICES
OFFICE OF EVALUATION AND MONITORING
Division of Licensing
1272 Foster Avenue, Nix 3
Nashville, TN 37243-1290
(615) 532-5598

Annual Licensing Report FY2009

The DCS Division of Licensing is a regulatory authority governed by statute and regulates all programs making application for licensure that fall within the purview of applicable state licensing statute and rules. The DCS Division of Licensing develops and promulgates applicable rules; issues conditional and annual licenses; reviews, investigates, documents and processes grievances and complaints, implements disciplinary actions; ensures compliance with applicable federal and/or state laws, regulations, and/or department rules, standards, and guidelines; reviews and makes recommendations on applicable legislation; coordinates annual adoption fees scheduling and compiles annual data on the activities of the entities it licenses.

The following information is based on annual self-reported data collected from all agencies licensed by the Tennessee Department of Children's Services (DCS) during the 2009 fiscal year. Please note that this information is compiled for all reporting licensed agencies and is therefore not limited to those DCS-licensed agencies contracting with the department for residential and/or foster care.

Self-Reporting Summary

Private and public agencies licensed or approved by the Department of Children's Services providing residential childcare served **10,570** children during the 2009 fiscal year (July 1, 2008 through June 30, 2009).

These agencies served a total of **10,350** children whose cases were subject to foster care review law. This included **7,588** cases subject to review through the Department of Children Services for those children residing in custodial foster care; and **2,762** children for whom the agencies themselves were responsible for foster care review.

The total number of children residing in programs licensed by the Tennessee Department of Children's

Services on June 30, 2009 was **3,451**.

The number of children placed for adoption by the licensed private agencies or approved public agencies totaled **794**. Of this total:

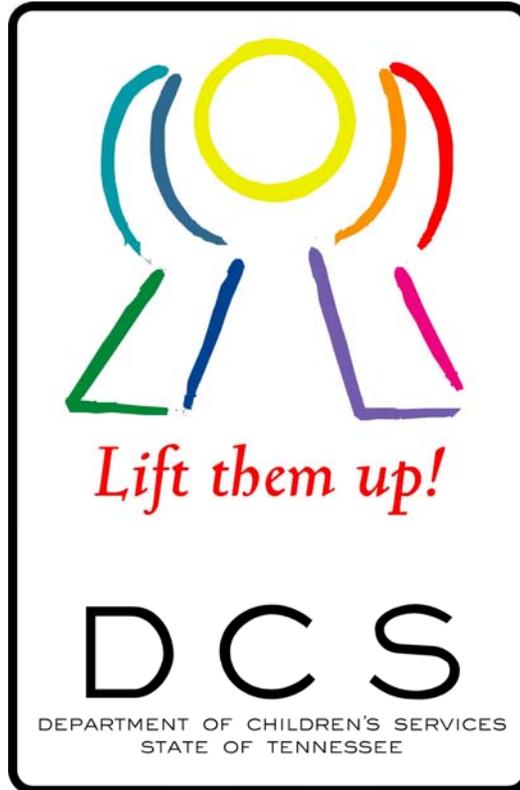
270 were in the age range of infant to two years;

167 were in the range of 2 through 6 years;

357 were aged 7 or older.

The number of youth served by licensed Juvenile Detention Centers totaled **20,995**.

The number of youth served by licensed Temporary Holding Resources totaled **794**.



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Phil Bredesen, Governor

Viola P. Miller, Commissioner



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