

HIGHLIGHTS

Placement Stability Measure and Diverse Out-of-Home Care Populations

Placement stability is important for children in foster care. As such, a federal outcome measure and a National Standard used as part of the Child & Family Services Review Process focus on the number of placements that children experience while in care. The challenge, though, is that data comparability issues emerge when viewing placement stability on a national level. State child welfare agencies are reporting on diverse out-of-home care populations and recording placement changes in various ways in their submissions to the federal Adoption and Foster Care Analysis and Reporting System (AFCARS).

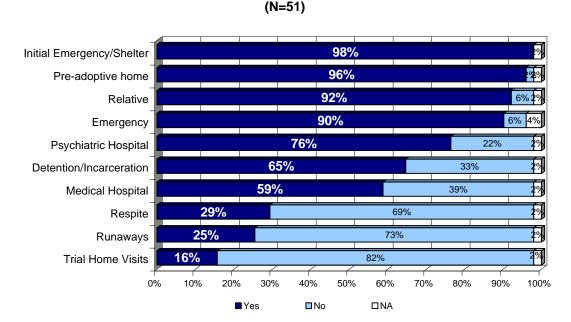
In order to address concerns about data comparability, a survey was conducted by the National Working Group to Improve Child Welfare Data (NWG), composed of state child welfare agencies and facilitated by the Child Welfare League of America (CWLA). All 50 states and the District of Columbia responded to the *Survey On How Placement Changes Are Calculated For AFCARS Submissions*. The survey attempted to discover how the

majority of states calculated placement changes during the submission period 4/1/00 to 9/30/00 and the populations that were reflected in their out-of-home care data. Results from the survey are summarized in this document. These results will inform a dialogue about improving the placement stability measure and ultimately improving outcomes for children.

Calculating Placement Changes

State child welfare agencies have made decisions to include or exclude certain types of short term living arrangements when counting placement changes for AFCARS Foster Care Element #24, "Number of Previous Placement Settings During This Removal Episode." This element is defined by the federal government as "The number of places the child has lived, including the current setting, during the current removal episode." As seen in Figure 1, results from the survey indicated that there were clearly areas of similarity in what states included and excluded, as well as areas with significant variation.

Figure 1:
When calculating placement changes do states count these types of placements?
For AFCARS submission period 4/1/00 to 9/30/00



Types of Placements Counted

Most placement types explored in the survey were counted by a clear majority of states. Ninety percent or more of the states counted initial emergency or shelter placements, other emergency placements, pre-adoptive placements, and relative placements that are counted separate from non-relatives. In addition, consistent with federal guidance, more than two-thirds (69%) excluded respite placements, 82% excluded trial home visits, and 73% excluded runaways.

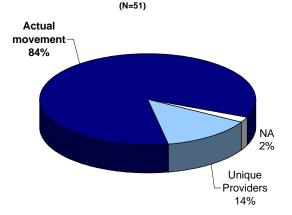
Considerable variation emerged, however, in how states counted detention, medical hospital stays, and psychiatric hospital stays. Between 59% and 76% of states counted these placement types, and the comments revealed significant differences in circumstances and timeframes in which they were counted. Detailed summaries for each placement type are provided in "Further Notes" beginning on Page 6.

Unique Provider vs. Actual Placement

Another factor that affected how placement changes were calculated was whether the agency counted each placement made (termed "actual movement" for this

Figure 2:

When Calculating Placement Changes, Do You Count Unique Provider
Or Actual Movement?
For AFCARS submission period 4/1/00 to 9/30/00



survey) or each provider that served the child (termed "unique provider" for this survey). For instance, if a child moves from the Smith home to the Jones home, back to the Smith home, then back to the Jones home, how many placements is this? This would be four placements when counting actual movement, or two placements when considering unique providers.

Forty-three states (84%) counted actual movement when calculating placement changes (see Figure 2). This clear majority, however, is changing. Since the reporting period designated for this survey, two states began submitting unique provider data and five states

AFCARS Foster Care Element #24: Number of Previous Placement Settings During This Removal Episode: The number of places the child has lived, including the current setting, during the current removal episode.

indicated that they plan to make this change. Both counts are informative for state child welfare agencies making internal assessments, but there is confusion about which number should be reported in the AFCARS submissions that ultimately get used in the National Standard. States hope to get written federal guidance on this matter in the near future.

The data point to similarities and differences in counting placement changes and the need for more standardization. Unfortunately the data do not indicate the percentage of the states' foster children that experience the different types of placements, so the overall effect on the average number of placement changes cannot be determined. For example, there may be two states that counted all psychiatric hospital and detention placements, but in one state a very small percentage of the children actually experienced these settings, while a larger percentage of children experienced these placement settings in the other state. Likewise, of the states that counted respite placements there may have been some that provided weekly respite care for some children and other states that rarely used respite care. This question warrants further study.

In the next section, the complexity of the out-of-home care population reported in AFCARS is explored.

Federal Resources for AFCARS Submissions

- **AFCARS Web Site** (Particularly *Federal Guidance* and *Technical Bulletins*) www.acf.dhhs.gov/programs/cb/dis/afcars
- AFCARS Regulation http://frwebgate.access.gpo.gov/cgi-bin/get-cfr.cgi?TITLE=45&PART=1355&SECTION=57&TYPE=TEXT
- Child Welfare Policy Manual http://cb1.acf.dhhs.gov/programs/cb/cwpm/policy.cfm
- National Resource Center for Information
 Technology In Child Welfare (Technical Assistance)
 http://www.nrcitcw.org

Please contact the Children's Bureau for clarification and assistance with state AFCARS submissions.

Diverse Out-Of-Home Care Populations

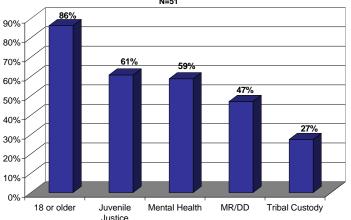
Child welfare agencies are serving diverse populations with a wide range of needs, which also may impact placement changes. This section helps outline some of the variations seen in the out-of-home care populations reported in the AFCARS submissions.

Youth 18 or Older

Most states (86%) submitted data on youth 18 or older who remained in care in their AFCARS submissions (see Figure 3). States may allow youth to stay in care voluntarily to receive independent living, education, and job related services. Some states reported that they keep youth in care until age 19, while others extend services to age 21, and in at least one state up to age 23.

Figure 3:

Populations Included In AFCARS Foster Care Submissions
For AFCARS submission period 4/1/00 to 9/30/00



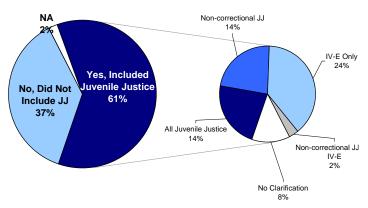
Juvenile Justice

More than half of the state child welfare agencies (31 states) included some juvenile justice (JJ) youth in their AFCARS submissions, although the circumstances vary widely among states. Twelve of these submitted data only on IV-E children, while seven states submitted data on "all" juvenile justice children and seven did so for non-correctional juvenile justice children (see Figure 4). The notes revealed more complexities. In several states the child welfare agency has responsibility for the juvenile justice population and reported all these youth. Many states only counted JJ children in the custody of the child welfare agency, or in joint custody with the juvenile justice agency. Other states had juvenile justice youth in residential placements, or had custody of children with delinquency or other issues because the court ordered it. Still other states included JJ cases not because they served these youth, but because they had a financial arrangement with the JJ agency to allow IV-E funding

Figure 4:

Did your state's overall out-of-home care population as reported in AFCARS include Juvenile Justice?

For AFCARS submission period 4/1/00 to 9/30/00
(N=51)



and therefore must abide by IV-E protections and report all IV-E children. Several states noted that they did not include juvenile justice youth who are incarcerated or in locked facilities.

Mental Health

More than half of the state child welfare agencies (59%) submitted data on children with mental health issues but no child abuse or neglect issues. This may occur when families cannot afford needed treatment for the child, the child is endangering himself or others, or otherwise is not receiving needed mental health services.

States may have voluntary agreements with parents or guardians or the court may order the child into state custody in order to provide the child with needed mental health services. In some states a child must be court ordered into agency custody as a dependent or for neglect in order to receive mental health services. In one state the court usually orders these children into custody, although the state then files an appeal attempting to serve the children without taking custody. Another state offers a voluntary program where parents retain guardianship while children receive in-home or out-of-home mental health services. Provisions to bring children into care for mental health services may appear in statute, or it may simply happen in practice.

A few states noted that the same agency is responsible for child welfare and children's mental health, and they generally report these children. In one of these states children typically do not come into custody because the state has universal health coverage for children. In another state where there is a separate mental health agency, the child welfare agency will count these children only if they are court-ordered into custody.

April 2002 3

Several states responded "No" to the question on mental health services, but clarified that this circumstance may happen on rare occasion under the child abuse and neglect laws. One state indicated that policy dictates that they may <u>not</u> place a child only for mental health issues. In another state some children were served by child welfare with only mental health issues during the reporting period, but they were not part of AFCARS.

Mentally Retarded/Developmental Disabilities

Twenty-four states included children with Mental Retardation or Developmental Disabilities (MR/DD) when there were no abuse or neglect concerns. Eleven states clarified that they included these children if the child welfare agency had placement and custody responsibility. In some cases the child must be adjudicated dependent, but five states indicated that children with MR/DD issues may be placed voluntarily in order to receive services. One state clarified that while this may occur, it happens within the laws, allegations, and wording of child abuse and neglect. In another state the child welfare agency may remove a child from the home for MR/DD concerns. One state child welfare agency reported that it shares responsibility with their mental health agency, and an interagency working group monitors the placement of these children. Another state served some of these children because the MR/DD agency has a waiting list and does not take custody of the child.

Four of the states responding "No" indicated that children with MR/DD issues would not be reported in AFCARS unless there were child abuse or neglect issues. One has a policy that prevents the agency from placing a child that does not have child abuse or neglect issues. A fourth state noted that this could happen occasionally, but would affect very few children. Finally, a county-administered state clarified that most, but not all, counties did not count MR/DD children.

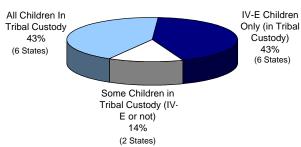
Tribal Custody

Although American Indian / Alaska Native children are reported in AFCARS, many states reported only those children who were in the custody of the state child welfare agency. Fourteen states, however, included children in tribal custody in their AFCARS submissions for the specified reporting period (see Figure 5). This number is not surprising given that about the same number of states had IV-E agreements with tribes in their states at the time. Of the fourteen states reporting children in tribal custody, six reported only IV-E children and six reported all children in tribal custody. In another state it varied by tribe; if the county received data on children in tribal custody they were reported in

Figure 5:

In the 14 States Whose AFCARS Submissions Include Tribal Custody, these include:

For AFCARS submission period 4/1/00 to 9/30/00



AFCARS without regard to IV-E eligibility. The remaining state reported only those children in tribal court with abuse or neglect or other issues that may have warranted child welfare agency involvement.

Of the states responding "No," one state did report on children in joint custody between the child welfare agency and the tribe and another state indicated that most tribal children were under the jurisdiction of the Circuit Court (not Indian Tribal Court). Several states commented that there are no recognized tribes in their states or no tribal agencies.

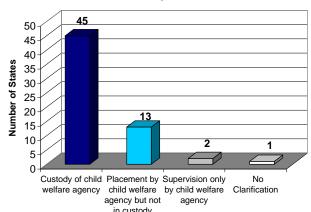
Children Not Receiving FC Maintenance Payment

Forty-seven states included children who were not receiving foster care maintenance payments in their AFCARS submissions (see Figure 6). Most of these states included children in the custody of the child welfare agency, some included children in placement but not in custody, and two included children only under supervision of the child welfare agency. States provided examples of children not receiving foster care maintenance payments, including children in:

Figure 6:

Children in care NOT receiving any foster care maintenance payments are included in 47 states' AFCARS submissions. In these states, such cases include:

For AFCARS submission period 4/1/00 to 9/30/00



- Kinship care/relative homes (approved or licensed and opt not to receive services, or licensure process not yet complete),
- Runaway status without an open placement,
- Supervised home placement,
- Pre-sub adoptive custody (Child still in foster care, but payments are made thru Adoptive Subsidy),
- Hospitals,
- Voluntary mental health placement,
- Contract services (e.g. Safe Homes),
- Psychiatric Medical Institutions for Children (PMIC's),
- "Alternate caretakers" both corporate and individual, and/or
- Any placement where state has custody or voluntary agreement, even if unpaid.

Voluntary Placement and Custody

Seventy-eight percent (78%) of states included children in voluntary custody and 49% included children in voluntary placements (when the child was not in child welfare custody). In most of these states the voluntary custody or placement involved both cases with and without child abuse or neglect issues (Figure 7).

Most states allow parents, relatives, or guardians to place children in state care voluntarily. However, states reported considerable differences in the use of such agreements. Voluntary agreements may provide the state with custody of the child in some states, while others may simply allow for a temporary placement without taking custody. Some states allow for both

voluntary custody and voluntary placements (without custody).

When no child abuse or neglect issue is evident, voluntary agreements may be made for reasons such as:

- Mental health placements. Some states enable parents to voluntarily place their child to receive mental health services without relinquishing custody, while other states take custody of the child in order to provide the services.
- Parental hospitalization and no other child care arrangements are possible.
- Temporary shelter due to loss of home or living arrangements.
- Adoption plan being arranged.

Several states indicated that they allowed voluntary agreements for abuse or neglect cases, while others specifically stated that voluntary agreements may not be used to avoid court involvement. One state reported that when there is an abuse or neglect issue they may make voluntary placements with relatives.

Other

Some states included other populations in their submissions to AFCARS. For example, states included medically fragile children, babies or children voluntarily relinquished for adoption, some private adoptions where there was no abuse or neglect issue, and a general category of children in need of services when the child welfare agency had custody.

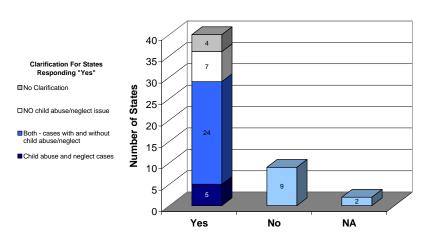
Figure 7:

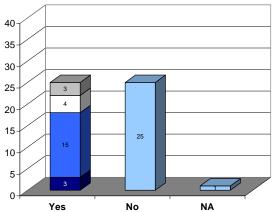
Did States' AFCARS Submissions Include:

(for AFCARS submission period 4/1/00 to 9/30/00) N=51

Voluntary Custody

Voluntary Placements - No Custody





April 2002 5

Conclusions

The results from the placement changes survey point to two general conclusions. First, states show enough variation in the way that they count a child's movement among different placement settings to warrant further discussion among key stakeholders. Second, child welfare agency efforts are now focused on a broader population of children, including juvenile justice and mental health youth, raising the question as to whether placement changes are a suitable measure of placement stability. Both conclusions need to be considered when assessing the reliability of the National Standard on Placement Stability.

Variation in Counting

The data and comments show that although there is much agreement in the way that states count placement changes, there are still major questions about those placements associated with detained or incarcerated youth, as well as hospital placements for children with medical or psychiatric needs. There seems to be considerable variation in the latter categories. Equally troublesome is the fact that there seems to be confusion about whether a placement to a former (unique) provider should be counted again in reporting to the federal government. This does not imply that either unique counts or actual counts are preferable – they both may be important for states to record – but rather that federal guidance on AFCARS reporting may be needed in this area.

Diverse Child Welfare Populations

There is no question that the current child welfare population embraces a broad spectrum of children with multiple service needs. The data and clarifying information indicate that many children in placement may be involved with multiple service systems. There is growing evidence that older children are a substantial part of the reported population. These combined factors should prompt an examination of the circumstances under which a placement change might indeed be a signal of a beneficial outcome.

The states' responses have raised many questions. For one, more needs to be known about the proportion of the AFCARS population that falls into the juvenile justice or mental health groups. This can help determine the impact that these youth have on a state's outcomes for placement stability. Further, clarification about the ways that juvenile justice youth are represented in AFCARS is essential, given that states are reporting them differently. The connection with, and impact of, IV-E needs to be acknowledged, especially when some child welfare agencies may have limited control over the outcomes for this population if they are reporting youth being served by another agency.

The placement changes survey results raise specific issues that the state and federal partners should address in order to resolve some of the data inconsistencies. Federal guidance is needed to clarify whether unique provider or actual movement should be reported. Technical assistance needs of the states in some of these areas are also evident and may be better addressed at this juncture. The challenge ahead is for states and the federal government to work together to make the foster care data more comparable, yet reflect how states do business in light of their particular statutes, policies, and practice.

Further Notes

State comments about each placement type and other factors affecting placement data are summarized below. The placement type data are provided in the order in which they appear on the graph on page 1.

Placement Types

Initial Emergency or Shelter Placements. All 50 states responding to this question counted the initial emergency or shelter placement when the child first came into the system. Some states clarified that timeframe, custody or other circumstances were a factor. States counted the placements if:

- Child was placed for more than 48 hours (1 state).
- Child was placed for 1 to 30 days, depending on the county (2 states).
- If the agency had custody (2 states).

- Child was placed in licensed foster homes (not those in shelter care as non-IV-E reimbursable placement or non-licensed relative placement) (1 state).
- Children were referred for ongoing services. Children placed in emergency placements that were not referred for ongoing services will also be counted in the future (1 state).

One state emphasized that the initial placement was counted even though it is an assessment placement from which a recommendation for the real first placement comes.

Pre-adoptive Placements. As may be expected, almost all states (49) counted pre-adoptive placements, although not all states can easily identify them in their data system. Six states clarified that a placement change was only counted when the child's setting actually changes (not if the child's foster home becomes the pre-adopt placement); presumably most other

states do the same. Another state clarified that it counted placements with licensed foster homes.

Relative Homes NOT counted as "Family Foster Home (non-relative)". All states have some form of relative placement. Only three states did not count any relative placements separately from non-relative family foster homes; relatives were licensed and counted the same as non-relatives. Forty-seven states did count some or all relative homes separate from the "Family Foster Home (non-relative)" category, and some of these states also counted some licensed relatives in the non-relative category.

Twenty-seven states provided notes clarifying whether they counted licensed, approved, or unlicensed homes. Thirteen states counted licensed relative placements as placement changes, and two others counted them when approved by the same standards as other foster homes (these states do not license foster homes, but approve them). Eight states counted relative homes approved by a separate process, and eleven states counted unlicensed relative homes. As the numbers indicate, some states have multiple categories that may apply to relatives counted in AFCARS. For example, seven states counted both licensed and unlicensed or otherwise approved relatives. Several states that counted licensed placements indicated that they allow placement temporarily while the relatives are still going through the approval process. At least one state with both licensed and unlicensed relative placements only counted those that were licensed.

Several states indicated that the child must be in custody to count a relative home. Payment was also a factor in whether states counted relative placements; several states noted that they count relatives whether paid by IV-E, paid by TANF, or unpaid.

Emergency Placements. Emergency placements <u>not</u> made right after removal (e.g. child is placed in an emergency home for a few days in between foster homes) were counted by 90% of states, but under different circumstances. Some states counted all emergency placements, while others only counted the emergency placement if the child would be moving on to a new home rather than returning to the same foster home. When states did count emergency placements, most counted them from the start¹, one state counted emergency placements that last two weeks or more, and two states varied from 1 to 30 days depending on the county.

Psychiatric Hospital Stays. Although 76% of states did count psychiatric hospital stays, many were counted only under certain conditions. While most states counted these stays right away¹, six states indicated other timeframes: 7 days or more, 10 days or more, 2 weeks or more (2 states), 30 days or more, or depending on the county, more than 24 hours to more than 3 days. Two additional states said that in the future hospital stays will only be counted when they last more than 20 days. Five states indicated that psychiatric hospital stays were only counted if the child would move to a different placement after the hospital stay, and one state added that the child must also

Medical Hospital Stays. Fifty-nine percent of states counted medical hospital stays, but many were counted only under certain circumstances. For the most part, states provided the same clarifying notes for medical hospital stays as were provided for psychiatric hospital stays. Nine of the states that counted psychiatric hospital stays did not count medical hospital stays. One of these states clarified that it did not count medical hospital stays if the stay was a short duration. Finally, one state that did not count most medical hospital stays commented that the policy is being re-visited.

Respite Placements. Most states (69%) did <u>not</u> count respite placements. Four states clarified that respite care is not a placement activity, it is considered a service, and in one case it is an arrangement between foster parents. A fifth state clarified that the majority of its counties did not report respite in placement counts, but of the several that did, the timeframe ranged from immediately to more than three days to more than one week. Another state indicated that while respite placements were usually not counted, they were counted if the child moved to a different child welfare placement following the respite stay or if the stay lasted longer than 14 days.

Of the 15 states that did count respite placements, two indicated that they would only be counted if the stay lasted two weeks or more and a third state noted it would be counted only if the placement was extended beyond their policy limits for respite. One state only counted the respite site when it had a facility ID in the system. Another state counted respite if the state had custody of the child. Finally, one state has since changed the system so that it no longer counts respite placements.

Detention or Incarceration Placements. Sixty-five percent of states counted detention or incarceration placements. Among states responding "Yes" the notes revealed quite a bit of variation. In regard to timeframe, the child must be in the placement for 10 days or more to be counted in one state, more than 30 days in another state, and it varies by county in a third state. Several other states noted that they would not count the placement if it was short-term and the child would be returning to the same placement, and that workers have discretion in how or when to record these placements. One state noted that documentation of detention placements was inconsistent and incarcerated youth were not likely to be included in placement histories. Another state noted that the Department of Youth

April 2002 7

move all their belongings to be counted. Three states commented that the worker can code the hospital stay either as a temporary placement (not counted) or as a placement (counted). Three other states noted that they would count such a placement, but it is coded more generally as a "hospital." In several states it depends on the actual facility (freestanding psychiatric facility, not part of a regular hospital), and in one state it can only be counted when the hospital has a facility ID in the system. One state clarified that psychiatric hospital stays were only counted if the state placed the child after custody was taken. Finally, another state responded "No" and explained that these are considered temporary absences and are not generally counted; however, they may be counted when lasting 7 to 30 days, depending on county bed-hold policy.

¹ Timeframe responses included: all placements, immediately, one or more days or no timeframe.

Services made these placements and paid for them, so it is possible that not all detention or incarceration placement changes were recorded.

Several states clarified that they would count the detention placement as long as the child welfare agency retained custody. However, if the child would not be returning to the agency's care or if the child was discharged to the custody of the juvenile justice agency, they were exited from the child welfare system. Finally, one state with responsibility for both child welfare and juvenile justice children noted that if the child had a minimum one day placement in a foster care setting (during the six month AFCARS period) then the child was reported to AFCARS and all placements (including detention/incarceration) were counted.

Trial Home Visits. The majority of states (82%) did <u>not</u> count trial home visits as placement changes. This matches federal guidance, which indicates that states should exclude these when calculating the number of placements for Element #24. [Trial home visits is, however, a valid category for "Placement Setting (Current)", AFCARS Foster Care Element #41].

Some definitional issues and questions emerged regarding trial home visits. Two states, after responding "No," commented that visits were not considered placements, but when the child was returned home it was counted as a placement. One state indicated that it did not count trial home visits as placements then, but has re-coded it for future submissions. Several other states indicated that they may track trial home visits in the future. Another state indicated that it generally did not count trial home visits, but would count a stay of 10 or more days. Finally, a county-administered state clarified that the majority of its counties did not count trial home visits, and those that did only counted them if they retained custody.

These comments raise the question about how states interpreted "trial home visits" when responding to this item on the survey. Several notes indicated some confusion between counting trial home visits as a placement change as opposed to a "Placement Setting (Current)." In addition, it seems there are two major interpretations of trial home visit: the short-term visits before the child is reunified, and the first several months after the child is reunified, on "trial discharge," if the state still has custody. There is also concern about how the second interpretation, when the child is reunified, may effect re-entry rates.

Runaways. Seventy-three percent of the states did <u>not</u> count runaways when calculating placement changes. As with trial home visits, federal guidance indicates that runaways should not be calculated as placement changes. Three states clarified that although the runaway period itself was not counted, if the child returned to a different home that new placement was counted; this is likely the case with other states as well. A county-administered state noted that the majority of their counties did not count runaways, but a few did. Another state commented that runaway periods are generally not counted

because they are considered short-term temporary absences, and that a child would be discharged if the child did not return within six months.

Thirteen states did count runaways when calculating placement changes. One state clarified that it changed the placement type and counted the placement move if the child's whereabouts were completely unknown and they would not be placing the child back into the home from which they ran. On the other hand, if the child's location was known and they planned to return the child to the original placement, the state did not change the placement type or count a move. A county-administered state noted that counties determine the length of time to keep the placement open during the runaway period. For the given reporting period, another state counted runaway periods that lasted less than 15 days, but if the child stayed on the run longer they would begin a new foster care episode. Finally, one state indicated that while previous coding did include runaways, the new coding will not.

Other Factors Affecting Placement Calculations

Unique Provider vs. Actual Movement. In addition to the issues raised on Page 2 of this report, two other issues arose in the comments provided by states that counted actual movement. One state noted that it was not always able to track movement within a private agency's foster homes unless there was a change in payment. Another state commented that actual movement among licensed placement providers was counted, but movement to an unlicensed placement provider, shelter care, hospitalization/institutionalization, or correctional facility would end the placement episode; entry into licensed out-of-home care following these types of interventions would then be recorded as a re-entry via their current data system, until SACWIS is implemented statewide.

Retained Prior Placement Information. Thirty out of 38 states with SACWIS systems retained prior placement information when converting from their legacy systems, although there were some issues with data quality and completeness. Several states clarified that they converted placement history for those cases open at the time of the conversion. Six states mentioned problems with data quality or completeness. Several of these states relied on workers to enter the historical data or convert it from a text field into the placement change field, and this happened on a case by case basis. Two other states were limited by timeframes, with one converting placement history back to 1993 and another including only partial data before April 1995. Eight states with SACWIS systems did not retain prior placement history.

Paid Placements. When calculating placement changes, a clear majority (45 states) counted placements whether or not they were paid. For example, several states noted that they included placements with relatives who did not receive payment from the child welfare agency. Five states counted only paid placements when calculating placement changes. Two of these states noted they were making modifications to their system to include non-paid placements.

National Working Group HIGHLIGHTS is a project of the National Data Analysis System brought to you by CWLA and sponsoring state child welfare agencies. For more information please visit our web site at http://ndas.cwla.org.