
Collaboration Statement

The Citizen Review Panels’ Annual Report was produced in collaboration with individual citizen review panels, the Department of Human Services’ Office of Children, Youth, and Families, the Pennsylvania Child Welfare Resource Center, and the Pennsylvania Children and Youth Administrators, Inc.

The Mission and Vision of the Citizen Review Panels

**Mission:** To facilitate citizen participation and provide opportunities for citizens to evaluate state and local child protection systems to ensure that these systems: provide the best possible services; prevent and protect children from abuse and neglect; and meet the permanency needs of children.

**Vision:** Children will be safe; placed timely in stable, permanent living arrangements; have the opportunity for continuity of relationships; and have the opportunity to develop to their full potential.
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Dear Citizens,

Thank you for taking a moment to read the Pennsylvania (PA) Citizen Review Panels’ 2019 Annual Report. The Citizen Review Panels (CRPs) are represented by a wide array of citizen volunteers, including those with lived experience in the child welfare system, who join together to partner with local child protection agencies to ensure that the needed support systems provide the best possible services, prevent and protect children from abuse and neglect, and meet the permanency needs of children. Furthermore, the CRPs play an important role in efforts to promote positive child welfare outcomes for children and families.

The PA Child Welfare Practice Model outlines that children, youth, families, child welfare representatives, and other child and family service partners need to work together as team members with a shared community responsibility to achieve positive outcomes with children and families. These outcomes can be achieved by consistently modeling values and principles at every level of child welfare practice, across all partnerships, and by demonstrating the specific and essential skills to be utilized across the child welfare system. More information about PA’s Child Welfare Practice Model is available online.

The CRPs embody the PA Child Welfare Practice Model’s values and principles of organizational excellence. The CRPs help to ensure quality practice by monitoring system performance, making recommendations for improvement, and holding the Department of Human Services (DHS), Office of Children, Youth, and Families (OCYF) accountable for implementing best practices statewide to ensure quality services for children, youth, and families. The CRPs engage youth and families with lived child welfare experience as involved members of their teams, confronting difficult issues in order to bring about positive system improvement. Moreover, the CRPs tirelessly advocate for and empower children, youth, and families. This commitment and collaboration helps PA’s services for children and families grow stronger.

The 2019 CRP Annual Report contains an update on the CRPs’ work throughout 2019 and their recommendations for enhancements to policy, procedure, and practice within the Commonwealth’s child protection system. The CRPs’ recommendations and the Department’s responses to these recommendations are contained in this report. Within the CRPs’ recommendations and rationale, I hope you will see their deep commitment to this work.

Release of this report was delayed as a result of the COVID-19 pandemic. I would like to bring your attention to efforts referred to in the report that have been postponed and others that have been accomplished since the authoring of this document in late 2019 and early 2020.
Postponements

- In May of 2020, the United States Department of Health & Human Services’ Administration for Children and Families’ approved PA’s request to delay opting into full implementation of the Family First Prevention Services Act until July 1, 2021. This delay gives PA the time to implement the Family First Prevention Services Act in a way that is mindful of children, families, and to DHS’ providers and workforce.

- The Child Welfare Resource Center continues to revise and redesign the Supervisor Training Series. The new series, Foundations of Supervision, which is facilitated in Team Based Learning™ and simulation-based learning formats was originally set to be piloted in March 2020, however, due to the COVID-19 pandemic, the pilot training was postponed. The pilot will now be conducted remotely beginning in September 2020.

Accomplishments

- In July of 2020, the Office of Advocacy and Reform (OAR) released the “Trauma-Informed PA” plan to establish a mission, vision, and values for embedding trauma-informed care across government, health care, social services, education, and corrections systems in PA. This plan guides the commonwealth and service providers statewide on what it means to be trauma-informed and healing-centered in PA. The Trauma-Informed PA plan includes definitions to be utilized state-wide and includes a continuum complete with processes, and indicators for agencies to utilize in order to progress towards becoming Trauma-Aware, Trauma-Sensitive, Trauma-Informed, and ultimately Healing Centered.

- In July of 2020, OCYF formed the Trauma-Informed Sponsor Team. The team is tasked with ensuring the implementation of trauma-informed practice, as guided by the Trauma-Informed PA Plan, throughout OCYF, county children and youth agencies, and all OCYF licensees over the next several years.

- As of July 1, 2020, older youth exiting the foster-care system in PA are eligible for aftercare services until age 23. This policy change will offer myriad supportive services to a particularly vulnerable population of youth as they transition to adulthood. Previously, youth became ineligible for aftercare services on their 21st birthday. The extension of aftercare services to age 23 ensures that former foster youth, including those who remain in foster care to age 21, have access to aftercare services to help them safely and successfully transition to independence and adulthood after they’ve exited the formal foster-care system.

- In addition, DHS extended eligibility for the Chafee Education and Training Voucher program, known as Education and Training Grants (ETG) in PA, to foster and former foster youth up until their 26th birthday. This program provides eligible youth financial support to attend post-secondary education and training classes for up to five years (consecutive or non-consecutive). The previous cutoff age was 23.
The Juvenile Law Center has issued an updated Know Your Rights Guide. This guide provides information about legal rights, services and benefits for youth in foster care as well as advice on navigating the child welfare system and advocating for oneself. The new Know Your Rights Guide has been posted on the Youth Advisory Board website and can be accessed using this link: http://www.payab.pitt.edu/files/Know%20Your%20Rights%20Guide_Full%20Guide.pdf. Training for utilizing the new guide will be available through the Child Welfare Resource Center upon request.

Thank you to the members of the PA CRPs for their diligent work and dedication to system improvement. We look forward to ongoing collaboration as we tackle the very important issues of child safety, permanency, and child and family well-being.

Sincerely,

Jonathan Rubin
Deputy Secretary
Pennsylvania Introduction

Commonwealth of Pennsylvania

Pennsylvania consists of 67 counties covering 44,817 square miles and is home to approximately 12.7 million residents. The city of Philadelphia is the largest metropolitan area within the six-county Southeast region which includes Philadelphia, Berks, Bucks, Chester, Delaware, and Montgomery counties and encompasses approximately 35 percent of the total statewide population. Allegheny County is the second largest metropolitan area and includes the city of Pittsburgh and its surrounding suburbs. The diversity across Pennsylvania’s urban, suburban, and rural areas creates the need for both flexibility and consideration of regional, county, cultural, and other differences in the child welfare and juvenile justice systems.

Structure of Child Welfare

Pennsylvania is one of 12 states that operates a state-supervised, county-administered child welfare system. The county-administered system means that child welfare and juvenile justice services are organized, managed, and delivered by 67 County Children and Youth Agencies (CCYA), with staff in these agencies hired as county employees. Each county elects its county commissioners or executives who act as the governing authority. Pennsylvania has a rich tradition of hundreds of private agencies delivering the direct services and supports needed by at-risk children, youth, and their families through contracts with CCYAs. The array of services delivered by private providers includes prevention, in-home, foster family, kinship care, permanency, and congregate care. A variety of related behavioral health and education programs are also provided.

The Department of Human Services’ (DHS) Office of Children, Youth, and Families (OCYF) is the state agency that supports the provision of quality services and best practices designed to ensure the safety, permanency, and well-being of Pennsylvania’s children, youth, and families. There are some intrinsic differences in operating a state-supervised, county-administered system, which impacts statewide outcomes for children and families. Within this structure, Pennsylvania provides the statutory and policy framework for delivery of child welfare services and monitors local implementation. Given the diversity that exists among the 67 counties, this structure allows for the development of county-specific solutions to address the strengths and needs of families and communities. Each county, through planning efforts, must develop strategies to improve outcomes.

This structure also presents challenges in ensuring consistent application of policy, regulation, and program initiatives and has impacted Pennsylvania’s performance on federal outcome measures. These federal measures require county-specific analysis to determine the factors that influence statewide data. Because of the variance in county practice, it is challenging to identify statewide solutions that would have the most impact on improving county outcomes.

In November of 2016, DHS held the first official convening of the Pennsylvania Child Welfare Council (the Council). The Council was formed to provide shared leadership and guidance to support collaborative, strategic visioning for Pennsylvania’s child welfare system. The Council is comprised of multidisciplinary members who are broadly representative of the child welfare system and reflect the Commonwealth in geographic, racial, ethnic, and cultural diversity. Efforts of the Council are aligned with OCYF’s mission, vision, values, and Pennsylvania’s Child Welfare Practice Model. The Council
utilizes quantitative and qualitative data to guide the establishment of priorities related to federal, state, and locally driven improvement efforts through the use of a Continuous Quality Improvement (CQI) process/framework. CQI serves as the vehicle to guide the achievement of Pennsylvania’s child welfare goals. The Council exists to:

- Help build a sustainable structure to support collaborative strategic visioning for Pennsylvania’s child welfare system;
- Foster a unity of effort to achieve common and shared goals by sharing ideas/expertise in guiding priorities for the child welfare system, sharing data to identify priorities/monitor achievement of goals, and considering how best to ensure the system has the capacity/resources to support achievement of common goals;
- Enhance communication based on shared values of respect and honesty by reinforcing clear and transparent communications regarding the strengths/challenges of the system;
- Increase proactive responses to address systemic issues and concerns; and
- Enhance capacity to use data to drive decision-making.

The Council identified that purposeful, active, and effective implementation work should be carried out by individual subcommittees. Each subcommittee focuses on one of four distinct areas of child welfare practice, which are: Safety, Permanency, Well-Being, and Resources/Cross-Categorical work. While the subcommittees are accountable for implementation, the Council is charged with establishing priorities and expectations, providing necessary support, and helping identify and secure resources to support strategies for improvement.

The Council provides the means for key stakeholders to come together to provide shared leadership, purpose, and accountability to enhance our ability to work collaboratively to improve outcomes for children, youth, and families. By gathering feedback from the subcommittees and others, the Council takes steps to be more proactive in response to system needs, is more responsible in the use of resources, and enhances and supports the system’s ability to function more efficiently. This leads to more strategic and effective efforts to achieve the goals and objectives outlined in the strategic plan focused on improving outcomes for the children, youth, and families served by the system. The Council and the subcommittees were instrumental in the development of Pennsylvania’s federal Child and Family Services Review (CFSR) Program Improvement Plan (PIP) and serve as the primary stakeholder forum for development and ongoing monitoring of Pennsylvania’s federal Child and Family Services Plan.

Because the Citizen Review Panels are so closely tied to the work of ensuring the safety, permanency, and well-being of children in Pennsylvania, DHS invites all panel members to participate in the subcommittees and requests that, at minimum, the CRPs be represented in each subcommittee by at least one panel member. This ensures that information and resources are shared between the two groups. By having direct involvement with the Council, panel members have greater access to information at the state level including data and current priorities within the child welfare system.
Pennsylvania and the Child Abuse Prevention and Treatment Act: A Brief History

The key federal legislation addressing child abuse and neglect is the Child Abuse Prevention and Treatment Act (CAPTA) (Public Law (P.L.) 93-247), originally enacted in 1974. This Act has been amended several times and was most recently amended on January 7, 2019, when the Victims of Child Abuse Act Reauthorization Act of 2018 (P.L. 115-424) went into effect. This act amended section 106(b)(2)(B)(vii) of CAPTA to provide immunity from civil and criminal liability (it previously provided immunity from only prosecution) for people who make good-faith child abuse or neglect reports. P.L. 115-424 also provides immunity from prosecution for individuals who give information or assistance, including medical evaluations or consultations, in connection with a report, investigation, or legal intervention pursuant to a good-faith report of child abuse or neglect.

CAPTA provides federal funding to states in support of prevention, assessment, investigation, prosecution, and treatment activities. CAPTA also provides grants to public agencies and non-profit agencies for demonstration programs and projects as a means of promoting innovation and disseminating best practices. Additionally, CAPTA identifies the federal role in supporting research, evaluation, technical assistance, and data collection activities; establishes the Office on Child Abuse and Neglect; and mandates the National Clearinghouse on Child Abuse and Neglect Information. CAPTA sets forth a minimum definition of child abuse and neglect.

Some of the changes Pennsylvania adopted to become compliant with CAPTA required amendments to the Child Protective Services Law (CPSL) and the Adoption Act. Other changes only required administrative implementation for which no legislation was needed. Pennsylvania became CAPTA compliant in 2006. The following are changes regarding CAPTA compliance:

Legislative Changes

Amendments were made in the following areas:

- Confidentiality - Allowing federal agencies access to confidential information;
- Establishment of Citizen Review Panels;
- Public disclosure of fatalities and near fatalities;
- Infant prenatal substance exposure - Requiring health care professionals, including those involved in the delivery or care of an affected infant or encountering an infant up to age one outside a hospital setting, to notify Pennsylvania DHS so that a plan of safe care can be developed;
- Termination of parental rights (TPR) - Added a ninth ground for involuntary TPR when the parent has been convicted of specific crimes in which the victim was a child of the parent;
- Reunification – Not requiring reunification of a surviving sibling with a parent who has been found by a court of competent jurisdiction:
  - To have committed sexual abuse against the surviving child or another child of the same parent; or
  - To be required to register with a sexual offender registry or to register with a sexual offender registry in another jurisdiction or foreign country.
- Aggravated circumstances – Added a sixth ground for aggravated circumstances that includes when the parent of a child is required to register as a sexual offender or to register with a sexual offender registry in another jurisdiction or foreign country;
- Expanded the definition of a perpetrator of child abuse to include an individual 18 years of age or older who engages a child in severe forms of trafficking in persons or sex trafficking, as
those terms are defined under section 103 of the Trafficking Victims Protection Act of 2000 (114 Stat. 1466, 22 U.S.C. § 7102); and

- Expanded the definition of child abuse to include intentionally, knowingly or recklessly engaging a child in a severe form of trafficking in persons or sex trafficking, as those terms are defined under section 103 of the Trafficking Victims Protection Act of 2000.

**Administrative Changes**

Administrative changes were made in the following areas:

- Training for Guardians Ad Litem;
- Referrals under Individual with Disabilities Education Act (IDEA) - Requires children under age three who are substantiated victims of child abuse/neglect to receive developmental screening and referral for appropriate services. Pennsylvania chose to use Ages and Stages Questionnaires® (ASQ™) and Ages and Stages Questionnaires®: Social/Emotional (ASQ:SE™) as the statewide screening tool; and
- Coordination and consultation within healthcare facilities - Required coordination between health care facilities and local children and youth agencies for situations involving the withholding of medically indicated treatment.
Pennsylvania Legislation Related to CRPs

To support compliance with CAPTA in Pennsylvania, House Bill 2670, Printer’s Number 4849 was signed into law as Act 146 on Nov. 9, 2006 by then Governor Edward G. Rendell. Act 146 amended Pennsylvania’s CPSL (23 Pa.C.S. Chapter 63) to address the establishment, function, membership, meetings, and reports as they relate to CRPs in Pennsylvania. Act 146 required that DHS establish a minimum of three CRPs and that each panel examine the following:

1. Policies, procedures, and practices of state and local agencies and, where appropriate, specific cases to evaluate the extent to which state and local child protective system agencies are effectively discharging their child protection responsibilities under Section 5106 (a) of CAPTA.

2. Other criteria the panel considers important to ensure the protection of children, include:
   i. A review of the extent to which the state and local child protective services system is coordinated with the foster care and adoption programs established under part E of Title IV of the Social Security Act (49 Stat. 620, 42 U.S.C. § 670 et seq.); and
   ii. A review of child fatalities and near fatalities.

3. Membership – The panel shall be composed of volunteer members who represent the community, including members who have expertise in the prevention and treatment of child abuse and neglect.

4. Meetings – Each Citizen Review Panel shall meet not less than once every three months.

5. Reports – DHS shall issue an annual report summarizing the activities and recommendations of the panels and summarizing DHS’s response to the recommendations.
Citizen Review Panel Recruitment

Regional CRP recruitment is held every year from April 1st to June 15th. After receiving 41 applications for membership this year, DHS was excited to welcome 15 new members to the regional CRPs in August 2019. New members participated in a one-day orientation, where they had the opportunity to meet one another, discuss their interests, learn about their responsibilities as volunteer members, and hear from DHS on departmental priorities as well as ways DHS supports the CRPs. New members were able to join the existing panels for the Fall All-Panel Meeting in September.

In August of 2018, DHS instituted a fourth, statewide, Citizen Review Panel: the Pennsylvania Statewide Youth Advisory Board (YAB). The YAB is a long-established group comprised of youth, ages 16 to 21 from throughout the Commonwealth, that currently or previously lived in out of home care. Youth leaders on the YAB educate, advocate, and form partnerships to create positive change in the substitute care system. By incorporating the YAB into the CRP structure in Pennsylvania, DHS believes youth throughout the state will gain an influential platform to communicate their experiences, needs, and recommendations.
2019 Citizen Review Panel Annual Report: Executive Summary

The individual reports of Pennsylvania's Citizen Review Panels, which start on page 10 were written by panel members. Although three of the four panels are regionally located, the recommendations address statewide issues and therefore benefit the entire Commonwealth. For more information about the individual panels, please contact the Pennsylvania Child Welfare Resource Center at (717) 795-9048 or by emailing the CAPTA Program Development Specialist at pacrp@pitt.edu.

The recommendations provided at the end of each panel’s report are the result of research, discussions with stakeholders, and feedback from those in the field of child welfare. Information presented in the report along with recommendations are, therefore, well informed and relevant to the panels’ work completed over the course of the year. In 2019, the panels continued to collaborate with DHS in the following ways:

- Participation by CRP members in two DHS-sponsored All Panel Meetings and presentations. Topics discussed in these meetings included:
  - Updates on Pennsylvania’s Child and Family Services Review process and Program Improvement Plan;
  - Updates on the status of the panels’ previous recommendations;
  - Review of available data sources;
  - Review of Foundations of Pennsylvania Child Welfare Practice: Building Competence, Confidence, and Compassion (Foundations) training for all new caseworkers; and
  - Updates on recruitment and the plan for onboarding new members.

- Participation by CRP members in statewide and national events related to their focus areas and/or training opportunities to support them in fulfilling their roles as CRP members. Events that panel members attended included:
  - The 2019 National Citizen Review Panel Conference; and
  - Pennsylvania’s Quality Service Reviews.

The next sections contain individual reports written by the Northeast, South Central, Southwest, and Statewide YAB CRPs. While each report has a different focus area, they all have three primary components:

- Background information regarding the current topic area(s);
- Summary of the work done throughout the year related to the topic area; and
- Formal recommendations and responses from DHS.

Pennsylvania’s CRPs hope that you find these reports informative and encourage you to contact them if you have questions about the content of the report or if you have an interest in becoming a member. To learn more about Pennsylvania’s CRPs, visit the website at [www.pacwrc.pitt.edu/CRP](http://www.pacwrc.pitt.edu/CRP). Additional information is available by calling the Pennsylvania Child Welfare Resource Center at (717) 795-9048 or by emailing the CAPTA Program Development Specialist at pacrp@pitt.edu.
Introduction:

The mission of the Pennsylvania CRPs is to facilitate citizen participation and provide opportunities for citizens to evaluate state and local child protection systems to ensure that these systems:

- Provide the best possible services;
- Prevent and protect children from abuse and neglect; and
- Meet the permanency needs of children.

The Northeast (NE) CRP serves 11 of Pennsylvania's 67 counties. The panel membership increased to 13 members as a result of the 2019 recruitment period. The NE CRP is dedicated to ensuring that the needs of Pennsylvania’s children are being met within the current system. If you are interested in joining our effort, e-mail the CAPTA Program Development Specialist at pacrp@pitt.edu.

Overview of the Focus Area:

The NE CRP chose to research the topic of resource parent approval and training requirements because the Pennsylvania Foster Family Care Agency (FFCA) Regulations (55 Pa. Code Chapter 3700) have remained largely unchanged since they were implemented in 1982. Currently, resource parents are only required to participate in six hours of training prior to their approval, with six hours of training required every year hereafter. Further, since Pennsylvania is a “state-supervised, county-administered” state, each CCYA, and its provider agencies, are permitted to develop and administer its own trainings resulting in a wide range of training time requirements from the minimum of six hours to far above base-line requirements.

Research is evident that children who are removed from their homes experience significant trauma as they endure separation from parents and siblings, changes in their school and community, and often
face multiple foster care placements. However, there is no requirement that resource parents receive training in trauma-informed care. Therefore, the NE CRP felt it was important to specify not only this topic but also additional topics to be addressed within the required training time. The primary goal of the CRP is to promote training consistency for resource parents across the Commonwealth so that children in foster care can be safe and have their needs met during this most difficult period in their young lives.

For the purposes of this report, resource parents shall be defined as approved non-relative foster parents and approved kinship (or relative) foster parents.

**Summary of Work Completed:**

Over the course of 2019, the NE CRP was able to review many documents pertaining to resource family approval and training requirements, leading to their targeted recommendations. First, the panel requested copies of the “State of the Child” report and recommendations, completed by the Auditor General’s office in 2017 and 2018, which highlighted deficits within Pennsylvania’s child welfare system and provided recommendations for improvement. The panel was especially interested in the 2018 recommendations for private providers which emphasized the need to adapt programs to face the rising complexity of child and family needs. To read the Auditor General’s reports go to: [https://www.paauditor.gov/Media/Default/Reports/RPT_CYS_091417_FINAL.pdf](https://www.paauditor.gov/Media/Default/Reports/RPT_CYS_091417_FINAL.pdf) and [https://www.paauditor.gov/Media/Default/Reports/RPT_StateofChild_Action_Plan_051618_FINAL.pdf](https://www.paauditor.gov/Media/Default/Reports/RPT_StateofChild_Action_Plan_051618_FINAL.pdf)

The panel also reviewed the 2018 Child Protective Services Annual Report, which listed the number of child abuse investigations conducted within the northeast region, as well as the state, involving out-of-home placement settings. Of the 262 total reports made in the northeast region, 12 were substantiated and six of those were in a resource home. This finding led the panel to look more closely at the Pennsylvania FFCA Regulations to determine what it takes for a family to be approved as a resource family. To read the 2018 Child Protective Services Annual Report go to: [http://www.keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c_289620.pdf](http://www.keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c_289620.pdf)

As stated above, the Pennsylvania FFCA Regulations, which include resource home approval and training requirements, have largely remained unchanged since 1982. The current regulations outline basic requirements regarding the foster family (55 Pa. Code § 3700.62), guidelines for how to assess the ability of applicants for approval as foster parents (55 Pa. Code § 3700.64), training requirements (55 Pa. Code § 3700.65), foster family residential requirements (55 Pa. Code § 3700.66), and safety requirements (55 Pa. Code § 3700.67). After reviewing this information, the panel was concerned about the inability for applicants to be approved due to communicable diseases, the lack of guidance for when an applicant should participate in a psychological assessment, and the insufficient number of training hours and/or lack of specific training topic requirements.

The Family First Prevention Services Act (Family First) (H.R. 1892) focuses on strengthening families and communities by putting an emphasis on working with children and families to prevent maltreatment and unnecessary foster care placements. Family First also seeks to limit the use of congregate or group care for children, when placement is necessary, favoring the utilization of family foster homes. With this change there is an even greater need for well-trained and well-supported resource families to care for children who are not able to remain in their home of origin. Family First required that the federal Health and Human Services Secretary identify National Model Foster Family Home Licensing Standards (National Model Licensing Standards) and required states to review
practice related to those standards. DHS conducted a crosswalk, listing current regulations and practice undergirded by state law and policy and compared those to the model standards. The NE CRP was able to review the National Model Licensing Standards along with the DHS crosswalk. To read the National Model Licensing Standards go to https://www.acf.hhs.gov/sites/default/files/cb/im1901.pdf

The NE CRP also reviewed the SWAN Family Profile Benchmarks, which include a listing of training requirements for prospective adoptive families, as well as the foster care approval and training requirements from New York (a county-administered system), New Jersey (a state-administered system), and Ohio (a county-administered system). Each of these documents allowed the panel to review different methods for training and approving resource parents; specifically, the training requirements of each state, which included the number of training hours, and required training topics. It was also noted that some states have developed and utilize a statewide, standardized training protocol, which allows every resource parent across the state to receive the same pre-service training. To read the SWAN Family Profile Benchmarks go to: https://www.diakon-swan.org/swan/documents/item/86/

Key activities in 2019
In addition to the panel's work around resource parent approval and training requirements, members of the NE CRP attended and participated in the following:

- Trauma 101 training;
- Teaching Life Skills to Foster Youth training;
- Project Child 2019 Regional Conference;
- “Grandparents Raising Grandchildren” presentation;
- CRP National Conference in Albuquerque, New Mexico; and
- Spring and Fall All Panel Meetings, engaging in strategic planning for their focus areas with DHS.

Northeast Citizen Review Panel Recommendations for 2019

Recommendation 1
DHS should adopt the National Model Licensing Standards for resource parents.

OCYF’s Response to Recommendation 1
55 Pa. Code Chapter 3700 Foster Family Care Regulations were effective on October 1st, 1982 to achieve compliance with federal requirements contained in the Adoption Assistance and Child Welfare Act of 1980 (AACWA) and to update and replace previous regulations issued in 1980, titled Foster Family Care Services for Children. The regulations were intended to further protect the health, safety, and human rights of children who receive care. They were also meant to directly define levels of accountability for children being served by foster care agencies.

Chapter 3700 includes regulations that protect the health, safety, and human rights of children such as:

- Clearly prohibiting corporal punishment of foster children;
- Mandating at least six hours of training per year for foster families (with specific content);
- Requiring children have regular and appropriate medical and dental care; and
- Requiring a safe healthy foster family home environment including the testing of water potability and the use of infant car seats, smoke detectors, and fire extinguishers.
The Chapter 3700 Regulations were updated in 1987 to address issues that regional field staff identified during the implementation of the regulations. Requirements that were administrative in nature were removed and included in Chapters 3130 and 3680. Changes to the Chapter 3700 Regulations included:

- Providing for waiver of regulatory requirements;
- Modifying medical and dental care requirements to include language about initial visits and ongoing dental care dependent upon the age of the child;
- Requiring that the agency maintain and transfer the child’s medical records; and
- Removing specific training content for foster families (while still mandating six hours of training annually).

In October 2008, the Chapter 3700 section on foster family approval appeals (§3700.72) was amended to include procedures for the FFCA applicant decision appeal process. This was the last time that Chapter 3700 was amended.

Section 50731 of Family First required the federal Health and Human Services Secretary to identify a model licensing standard for foster family homes, and among other requirements, mandated that state plans include an analysis of whether current state licensing standards for foster family homes are in accord with the identified model standards and, if not aligned, reasons for the deviation.

The National Model Licensing Standards created by the U.S. Department of Health and Human Services, Administration of Children, Youth, and Families (ACF) were issued on February 4, 2019. The standards are broken into eight categories to cover the essential components of licensing a foster family home to ensure that: 1) the applicant has the capacity to care for a child in foster care; and 2) the physical home of the family is appropriate and safe for a child in foster care. These standards are similar to the National Association for Regulatory Administration Model Family Foster Home Licensing Standards.

DHS provided ACF with a state plan that included a comparison on the National Model Licensing Standards to current state law, regulations, policy, and practice. The ACF has accepted the plan. The Permanency Subcommittee of the Council has examined the possibility of adopting the National Model Licensing Standards and presented its recommendations to the Council. The Council has submitted those recommendations to OCYF.

DHS agrees that the FFCA regulations need to be updated and is the process of reviewing the National Model Licensing Standards along with the recommendations submitted by the Permanency Subcommittee for future inclusion in Pennsylvania's foster care regulations. OCYF will develop a workgroup comprised of community stakeholders to inform the revision of the Chapter 3700 Regulations and will provide the Council and CRP recommendations to the workgroup once established. Chapter 3700 regulation updates are projected to be completed by 2024.

**Recommendation 2**

DHS should update 55 Pa. Code §3700.62(b), as it relates to communicable diseases. Section 3700.62(b) currently states, “foster parents shall pass an initial medical appraisal by a licensed physician prior to being approved. The appraisal must establish that the foster parents are physically able to care for children and are free from communicable disease”.
Due to the advancement in medical treatments since 1982, the panel recommends that applicants with communicable diseases should have the opportunity to be approved, without going through a waiver process, after obtaining verification from a medical physician that their disease is being appropriately treated.

OCYF Response to Recommendation 2
Signed into law as part of the Bipartisan Budget Act of 2018, Family First includes reforms to help keep children safely with their families, to prevent foster care entry. Family First also restricts funding for many congregate care placements and emphasizes that when children do enter foster care, that they are placed in the least restrictive, most family-like setting appropriate to their needs. Implementation of Family First, consequently, is expected to increase the need for foster family homes. This need for foster family homes must be balanced with OCYF’s primary goal to ensure the safety of children. This includes utilizing health precautions when approving foster family homes and placing children.

Although a Chapter 3700 regulation (§3700.62(b)) states that foster parents must be free from communicable diseases, OCYF does not bar otherwise appropriate foster family candidates from approval if the candidates can prove that children will remain safe and healthy within their care. OCYF currently utilizes a waiver process for prospective foster parents with communicable diseases such as HIV and Hepatitis. Prospective foster families that do not meet the requirement to be free of communicable disease are welcome to submit an application for the requirement to be waived. In order for a waiver application to be approved it must include documentation from a medical professional that verifies ongoing treatment of the disease by a doctor and that the disease will not impair the ability to care for a child or children. The prospective caregiver must also take part in universal precautions safety training.

OCYF plans to continue to focus first and foremost on the health and safety of Pennsylvania’s children as it evaluates this current practice and explores possible updates to the FFCA regulations.

Recommendation 3
DHS should update 55 Pa. Code §3700.64(a)(2) as it relates to obtaining psychological evaluations for resource parent applicants. Section 3700.64(a)(2) currently states “The [FFCA] shall consider the following when assessing the ability of applicants for approval as foster parents… A demonstrated stable mental and emotional adjustment. If there is a question regarding the mental or emotional stability of a family member which might have a negative effect on a foster child, the [FFCA] shall require a psychological evaluation of that person before approving the foster family home”.

The panel is concerned that this wording leaves too many questions regarding when a psychological evaluation should be required and how it should be used. It is recommended that more guidance be provided to FFCAs and provider agencies regarding when a psychological evaluation should be required and how that evaluation should be used in approval or denial of an applicant.

OCYF Response to Recommendation 3
Under the current regulation (§3700.64(a)(2)), the FFCA must consider the mental and emotional stability of prospective foster family members. To ensure the appropriateness of placement, the FFCA must require a psychological evaluation if there is a question whether a prospective foster family member’s mental or emotional stability may negatively affect a child or children placed in their care.
The federal Administration for Children and Families summarizes the National Model Foster Family Home Licensing Standards, Physical and Mental Health Standards as follows: The standards “ensure each applicant is physically, mentally, and emotionally capable of caring for an additional child or children through a required physical exam from a licensed health care professional conducted within the prior 12 months. Household members must provide a health history, including any history of drug or alcohol abuse and treatment, and must disclose any current mental health or substance abuse issues. The model also includes language clarifying that the Title IV-E agency may require additional documentation or evaluation in this area to determine whether the home is suitable (as may be necessary to fully understand whether the mental or physical health of an applicant or household member would be relevant to licensing).”

The approval of foster family homes should be considered on a case specific basis. DHS values judgement at the local level by trained mental health and child welfare professionals and affords some flexibility in interpreting the current regulation accordingly.

OCYF will develop a workgroup comprised of internal and external stakeholders to inform the revision of the Chapter 3700 Regulations and will provide the Council and CRP recommendations, including this specific recommendation, to the workgroup once established. OCYF is also considering the inclusion of further interpretation and implementation instructions on foster family member mental health and a number of topics in a survey and evaluation guide. The guide will accompany updated regulations and will be disseminated to CCYAs and private providers upon regulation promulgation.

Recommendation 4
In addition to adopting the National Model Licensing Standards, the following enhancements should be made to the training requirements:

- All Pennsylvania resource parents shall participate in a minimum of 27 hours of pre-service training to include the following topics:
  - Orientation;
  - Mandated Reporter Training;
  - Pennsylvania’s Reasonable and Prudent Parent Standards;
  - First Aid/CPR;
  - Trauma 101;
  - Impact of Trauma (problems that lead to family breakdown, reactions of children upon separation), Drug and Alcohol, and Mental Health;
  - Managing Behaviors & Discipline;
  - Attachment & Development; and
  - Planning for Change, Community Resources, and Natural Supports.

- All Pennsylvania resource parents shall participate in 12 hours of training annually.

OCYF Response to Recommendation 4
The National Model Licensing Standards includes mandated training with a list of required topics for prospective foster parents. Applicants must complete pre-licensing training on the following topics: rights, roles, responsibilities and expectations of foster parents; agency structure, purpose, policies, and services; laws and regulations; the impact of childhood trauma; managing child behaviors; first aid (including cardiopulmonary resuscitation (CPR) training), medication administration; and the
importance of maintaining meaningful connections between the child and parents, including regular visitation.

The National Model Licensing Standards also includes a requirement for ongoing training. Foster parents must participate in ongoing training to receive instruction to support their parental roles and ensure the parent is up to date with agency requirements. This training may also include child-specific training and/or may address issues relevant to the general population of children in foster care.

DHS agrees that initial training for prospective foster families should be standardized with yearly or ongoing training provided to best meet the specific needs of foster parents and children within their care. DHS plans to further assess the needs for specific training topic areas and will consider the National Model Licensing Standards, CRP and Council recommendations as it updates regulations and develops new requirements for foster parent training.

DHS recommends that agencies interested in supporting permanency efforts for older youth utilize CORE Teen training. CORE Teen is a curriculum for prospective and current parents who are or will be raising older children in foster care who have moderate to severe emotional and behavioral challenges. Spaulding for Children in partnership with the ChildTrauma Academy (CTA), The Center for Adoption Support and Education (C.A.S.E.), the North American Council on Adoptable Children (NACAC), National Council For Adoption (NCFA), and University of Washington (UW) was awarded a three-year grant from ACF’s Children’s Bureau to create this curriculum. The curriculum was piloted in four sites including Pennsylvania. CORE Teen has shown statistically significant growth in parent knowledge, especially around trauma and trauma related behaviors, and parenting confidence, for those families that participated in the pilot. This training has now been launched nationwide and is free of charge. As of December 2019, 66 agencies in Pennsylvania have downloaded this curriculum. For more information on the project go to: https://spaulding.org/professionals/spaulding-institute/core-critical-on-going-resource-family-education/

The CORE Teen curriculum includes three components. The self-assessment is a research-supported survey helping parents determine their strengths and areas for growth when considering the competencies and characteristics necessary for successful parenting of teens. The second component is a 14-hour classroom curriculum with seven intermediate to advanced sessions. The interactive and engaging content includes lecture, videos, activities, and discussion. The third component is the right time training which consists of individual modules that parents can access whenever they need them—at home, in support groups, or with a worker. There are eight themes addressed, including two themes around trauma-informed parenting. Each right time training includes a 20- to 25-minute video reflecting stories from youth, resource families and content experts, and an accompanying discussion guide. For access to the CORE Teen curriculum go to: https://spaulding.org/professionals/spaulding-institute/core-teen-curriculum/

In October 2017, Spaulding for Children, in partnership with Dr. Bruce Perry and the CTA, C.A.S.E., NACAC, NCFA, and UW, was awarded a 5-year cooperative agreement from ACF’s, Children’s Bureau. This grant is being used to develop and then evaluate a training program, known as the National Training and Development Curriculum (NTDC), to prepare foster and adoptive parents to effectively parent children exposed to trauma and to provide these families with ongoing skill development needed to understand and promote healthy child development. Similar to the CORE Teen trainings, the curriculum will include assessment, classroom training, and right time video
components. This project is currently being piloted in 6 to 8 sites throughout the United States. In 2020 the final curriculum will be disseminated nationwide at no cost to participating states and agencies through a cooperative agreement between the Children’s Bureau and the C.A.S.E.

DHS looks forward to reviewing results of the NTDC pilots and the final curriculum and will consider implementation of this training in Pennsylvania upon project completion. For more information on the NTDC training go to: https://spaulding.org/wp-content/uploads/2018/06/NTDC-Overview-Document-v02b-final.pdf

Northeast Panel Proposed Focus Area/Activities for 2020:

A former foster child was killed. Multiple referrals were made alleging abuse. Prior to the child’s death, the child’s family moved from county to county. There were multiple allegations and investigations involving the family throughout the years. These investigations were conducted by various county child welfare agencies and the OCYF Northeast Regional Office staff. It was difficult to assess the appropriateness of the outcomes of these investigations as material was expunged. Minimal information regarding the many allegations/investigations was found in case records due to expungement requirements.

During 2019, the NE CRP also began researching the possibility of additional status determinations for child abuse cases as a way to ensure that the above mentioned situation does not occur in the future. This work has only just begun, and the NE CRP is not able to make any recommendations at this time.

In 2020, the NE CRP will continue to work on the topic of status determinations, as they relate to allowing more open communication between counties regarding investigations of child abuse.

Northeast Citizen Review Panel Current Members

John Aciukewicz - Luzerne
Megan Boettcher - Lackawanna
Laura DeCosmo - Luzerne
Kathleen Donson - Pike
Laura Giannetti – Northampton
Steven R. Guccini - Pike
Marilyn Johnson - Monroe
Susan Lucrezi - Northampton
Kelly Langan – Pike
Jason Raines - Lehigh
Mary Lou Scarf - Lehigh
Pamela Wallace - Northampton
Lorrie Whitfield - Monroe

Biographies for each member can be found on the CRP website at the following link: http://www.pacwrc.pitt.edu/CRP/NorthEast.htm. Information regarding the panel’s current focus area and meetings can also be found by following the same link.
Introduction:

The mission of the Pennsylvania CRPs is to facilitate citizen participation and provide opportunities for citizens to evaluate state and local child protection systems to ensure that these systems:

• Provide the best possible services;
• Prevent and protect children from abuse and neglect; and
• Meet the permanency needs of children.

The South Central (SC) CRP serves 13 of Pennsylvania’s 67 counties.

In the past, membership on the panel has fluctuated; however, in 2019, membership doubled with the addition of six new members yielding 11 total panel members. The SC CRP is dedicated to ensuring that the needs of Pennsylvania’s children are being met within the current system. If you are interested in joining our effort, e-mail the CAPTA Program Development Specialist at pacrp@pitt.edu.

Overview of the Focus Area:

In the 2018 Fall All Panel Meeting, the SC CRP decided to continue the discussion of trauma and its impact on the children, families, and child welfare professionals. There were three areas that were discussed from the previous year:

• County staff access to information pertaining to mental health diagnoses and drug and alcohol issues;
• Caseworker retention and recruitment, specifically addressing case load size; and
• Vicarious trauma experienced by casework staff, specifically as it relates to the use of Adverse Childhood Experiences (ACE) in the exploration of trauma.

Additionally, there was discussion about childhood medical neglect and ongoing caseworker assessments. As the panel began its work in 2019, the SC CRP focused on pursuing information relating to trauma and resiliency. The specific focus included how counties address training, support, and resource utilization. This topic built upon the previous discussions by the panel with a refined
interest in trauma assessments. Panel members recognized that county staff and providers serve as crucial links to supports for children and families who have experienced trauma. The panel moved forward with this discussion by contacting and surveying the counties engaged in the Family Engagement Initiative (FEI), which began in 2017. These counties were chosen because of the trauma component which comprises the initiative. The panel was interested in work that has been accomplished in Pennsylvania to date. The counties contacted helped to refine the panel’s current recommendations to advance their focus on trauma-informed care (TIC) by child welfare professionals throughout the state.

Summary of Work Completed:

In 2019, the SC CRP continued the work started in 2018 as it related to supporting the development and implementation of TIC when working with children and families in Pennsylvania’s child welfare system.

The panel was provided feedback from OCYF that the Foundations of Pennsylvania Child Welfare Practice: Building Competence, Confidence, and Compassion (Foundations) training for all new caseworkers includes instruction and practice around the subjects such as traumatic stress, TIC, ACEs, and resiliency. The panel agreed that no other information needed to be gathered regarding caseworker training.

The Panel requested the following information from OCYF:
- Which counties are using ACEs/trauma-informed approaches;
- In what capacity are the counties using ACEs; and
- What data is being tracked related to ACEs.

OCYF compiled a list of all counties and their various approaches to TIC. The panel was presented with a map of Pennsylvania and the counties that use ACEs through the FEI. The counties that are involved in Phase I (2017) and Phase II (2018) of the initiative and indicated using the ACEs tool in some capacity include: Adams, Blair, Clinton, Lackawanna, Northampton, Union, Beaver, Butler, Fayette, Snyder, Tioga and Venango.

The panel was also presented with several academic articles (Finklehor and Cronholm et al.) regarding various ACE tools and the use of ACEs. The articles discussed the use of the Conventional ACE tool and some cautions to be aware of. The panel learned that in addition to looking at the ACE score, it was equally important to bridge the interventions and responses with trauma-informed services to support the care of the individuals. Also, the use of an Expanded ACE tool that captures community level indicators might be more effective in measuring adversity within urban populations.

After review of the above, a questionnaire was developed by the panel which was followed by phone interviews with Phase I and Phase II FEI counties to clarify their steps and process (See Appendix A). Eight of the twelve counties participated in the survey.

The panel met and reviewed the survey data collected. The panel developed recommendations for OCYF to enhance the focus on TIC by child welfare professionals throughout the state.
During 2019, the panel also had a focus area around medical neglect investigations. The panel inquired of OCYF regarding county policies/procedures. Due to the complexity of this topic area, the panel determined the data received was insufficient to address the concerns at this time. Future work could include recommendations related to the use of a biopsychosocial assessment as it relates to medical neglect.

Key activities in 2019
SC CRP attended and participated in the following:

- Quality Service Reviews with Dauphin and Lancaster County;
- CRP National Conference in Albuquerque, New Mexico;
- Pennsylvania Child Welfare Council and the Statewide Fatality/Near Fatality Trend Analysis Team;
- Toxic Stress and ACEs webinars; and
- Spring and Fall All Panel Meetings, engaging in strategic planning for their focus areas with DHS.

South Central Citizen Review Panel Recommendations for 2019

Recommendation 1
The SC CRP recommends that OCYF and CCYAs should define and adopt consistent language regarding trauma-informed approach and practice. Terms to address should include “trauma”, “trauma-informed care”, and “trauma-informed practice” based on best practices in the field.

OCYF Response to Recommendation 1
The Governor’s Executive Order 2019-05, entitled “Protection of Vulnerable Populations”, issued on July 31, 2019, was written with the intent to ensure that vulnerable Pennsylvanian’s are safe from harm, mistreatment, and abuse. The executive order established a new Office of Advocacy and Reform and established a position of executive director. The executive director’s duties as outlined in the executive order include “work[ing] with state agencies to establish coordinated and consistent trauma-informed training and practices in state-operated and state-funded programs to make the Commonwealth a trauma-informed state”. Protection of Vulnerable Populations also established a Council on Reform with the purpose of identifying best practices and making recommendations to improve the support and protection of vulnerable populations. These recommendations, which were published in November of 2019, include several recommendations related to TIC.

DHS is committed to making sure our policy and practice focus on preventing trauma and providing the right supports for children to heal from trauma when it has not been prevented. The governor’s executive order and the resulting recommendations elevate providing trauma-informed care within trauma-informed systems among DHS’s highest priorities. DHS will work with the Governor’s Office, the new Office of Advocacy and Reform, as well as our system partners to make the order a reality. To read the Governor’s Executive Order 2019-05 go to: https://www.governor.pa.gov/newsroom/executive-order-2019-05-protections-of-vulnerable-populations/. To read the Council on Reform Recommendations go to: https://www.governor.pa.gov/wp-content/uploads/2019/11/20191101-Recommendations-to-Protect-Vulnerable-Populations.pdf.
DHS is continuing efforts to foster TIC in child residential treatment facilities and day treatment centers. The Office of Mental Health and Substance Abuse Services (OMHSAS) and OCYF engaged Mercer Government Human Services Consulting to survey and assess to what degree, Pennsylvania’s child residential treatment facilities (RTFs) are implementing TIC; complete a review of the national and Commonwealth-level landscape for TIC culture and practices within child serving systems such as child welfare, mental health, Medicaid and in particular within children’s RTFs; and provide recommendations based on the findings which then may be used to embed TIC in all residential facilities licensed by Pennsylvania OCYF under 55 Pa. Code, Chapter 3800 (Chapter 3800 regulations). This applies to child residential facilities and child day treatment centers with the exemption of facilities operated directly by DHS and several other facility types. The report was issued on November 15th, 2019. DHS has utilized these findings to inform a new Specialized Settings bulletin (for more information read below) and will continue to utilize this guidance through TIC implementation and as it revises Chapter 3800 regulations.

Family First was signed into law on February 9, 2018. Family First reforms federal child welfare financing to help keep children safely with their families. Specifically, Title IV-E and Title IV-B of the Social Security Act were amended to expand funding and availability of enhanced supports to families and children to prevent foster care placements through the provision of mental health and substance abuse prevention and treatment services, in-home parent skill-based programs, and kinship navigator services (prevention services). The law limits Title IV-E foster care maintenance payments for eligible children and youth for placements that are not foster family homes; however, there are some exceptions. Title IV-E foster care maintenance payments are not limited as long as the child residential facility meets the requirements specific in federal statute and policy as described below:

- A setting specializing in providing prenatal, post-partum or parenting supports for youths.
- In the case of a youth who has attained 18 years of age, a supervised setting in which the youth is living independently.
- A setting providing high-quality residential care and supportive services to children and youth who have been found to be or are at risk of becoming, sex trafficking victims.

In efforts to enhance and elevate practice and standards of care in RTFs and Supervised Independent Living (IL) programs, OCYF outlines Family First aligned requirements for specialized settings and has defined TIC in the “Certification as a Specialized Setting for Children and Youth Bulletin” (Specialized Settings Bulletin), 3680-20-02/3800-20-03 issued on February 14, 2020. TIC is defined as “a strength-based approach to service delivery that realizes the widespread impact of trauma and understands potential paths to recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization”. “At its core, it values the following six principles: organizational safety, trustworthiness and transparency, peer support, collaboration and reciprocal relationships, empowerment among and between staff and participants, and cultural sensitivity.” DHS continues to strive to create a department wide vision for and to implement trauma-informed service delivery.

Beyond defining TIC, the Specialized Settings Bulletin requires that all specialized settings must operate as a trauma-informed organization and support trauma-informed treatment. If a trauma-informed model is operational or being implemented, the agency must address how fidelity to the model will be monitored and maintained. Identification of the staff trauma training model and curriculum, including the agency defined qualifications of those providing the training, must be included in the agency’s program description with dates and documentation of training completion.
Family First requires states that elect to provide prevention services to create a state plan which includes a description of “the steps the State is taking to support and enhance a competent skilled, and professional child welfare workforce to deliver trauma-informed and evidence based services” as well as “a description of how the state will provide training and support for caseworkers in assessing what children and their families need… knowing how to access and deliver the needed trauma-informed and evidence based services, and overseeing and evaluating the continuing appropriateness of the services”. Pennsylvania has elected to participate in the prevention program and proposes to begin implementation by October 1, 2020, as required by ACF. Once the plan is approved by ACF this information will be made available to the CRP.

**Recommendation 2**
The SC CRP recommends that all CCYAs adopt and implement a county-specific initiative using a holistic trauma-informed approach and practice. The initiative should include staff training on trauma and resiliency. The initiative should also identify a specific trauma screening tool.

**OCYF Response to Recommendation 2**
DHS is continuing efforts to best assess the strengths and needs of the children and families it serves, including trauma and resiliency, while optimizing caseworker time and reducing paperwork. The Council’s Safety Subcommittee has been conducting research on functional assessment and screening tools, including the Child and Adolescent Needs and Strengths (CANS), Family Advocacy and Support Tool (FAST), Ages and Stages Questionnaire (ASQ), among others, and has provided recommendations to OCYF. OCYF is considering the use of FAST assessments to meet these objectives.

FAST is a family-oriented assessment tool designed to maximize communication about the needs and strengths of families. It helps establish a comprehensive and holistic view of a family’s needs and strengths through conversation with a caseworker. Information gathered through the FAST is used to develop and evaluate the family’s plan. The FAST includes ratings for three domains: the family together, each caregiver, and all children and youth. Child and caregiver trauma experiences are assessed while maintaining a strengths-based focus. The ratings are used to assess whether, what, and what level of further assessments or interventions are necessary. Interventions can be directed to serve the entire family or to address the individual needs of family members or dyadic relationships within the family.

FAST is a free to use, open domain tool that has been adapted and utilized by trained child welfare staff in Allegheny, Dauphin, Lackawanna, Philadelphia, and Venango counties. For more information about FAST go to: [https://praedfoundation.org/tools/the-family-advocacy-and-support-tool-fast/](https://praedfoundation.org/tools/the-family-advocacy-and-support-tool-fast/).

**Recommendation 3**
The SC CRP recommends that results from the county-specific screening tool should be used to refer for assessment and provision of services for the child, family, and caregiver. When referring for services, the panel is recommending that all CCYAs should select providers based on their ability to provide a trauma-informed approach.
OCYF Response to Recommendation 3
DHS agrees that trauma-informed services should be provided whenever necessary and available. The child welfare system in Pennsylvania is state-supervised, county-administered and absent legislative and regulated authority. OCYF can only recommend that CCYAs obtain services from trauma-informed private providers. The utilization of trauma-informed services, especially those that are evidence based, is considered a best practice and within the best interest of the CCYAs and the children and families they serve.

Recommendation 4
The SC CRP recommends that county-contracted providers should be trained in a trauma-informed approach and practice.

OCYF Response to Recommendation 4
DHS welcomes the use of trained trauma-informed providers, especially those that utilize evidence-based practices, and encourages CCYAs to create contracts with providers that are best able to meet the needs of clients, a majority of whom have experienced trauma. Currently, OCYF utilizes incentivized funding through the special grants program to encourage counties to select evidence-based programming supported on the California Evidence-Based Clearinghouse for Child Welfare, and other clearinghouses, some of which are trauma informed programs. CCYAs have the opportunity on an annual basis through the Needs-Based Plan and Budget (NBPB) process to request funding to support services provided to children and families. Generally, CCYAs may request partial funding from OCYF. Through the special grants program, as part of the NBPB process, CCYAs may request funding at a higher percentage to support evidence-based activities, including evidence-based trauma informed programs, such as Trauma Focused Cognitive Behavioral Therapy.

Proposed Focus Area/Activities for 2020:

Possible topics for review in 2020 included:
- Investigation and assessment of the physical health needs of children;
- How casework staff respond to the unique needs of families through the impact of lived trauma on practice; and
- Impact of secondary trauma on CCYA staff quality of life and longevity in the field.

South Central Citizen Review Panel Members

Whitney Barbusca – Lancaster
Lynn Carson – Dauphin
D’Arcy Crocker – Lancaster
Teri Darden – Dauphin
Clare Flynn – Mifflin
Wendy Hoverter – York
Lisa Kennedy – York
Kurt Miller – Lancaster
Robin Nickel – Dauphin/Cumberland
Caroline Tyrrell – York
Sabrina Valente – York
Biographies for each member can be found on the CRP website at the following link: http://www.pacwrc.pitt.edu/CRP/SouthCentral.htm. Information regarding the panel's current focus area and meetings can also be found by following the same link.
Introduction:

The mission of the Pennsylvania CRPs is to facilitate citizen participation and provide opportunities for citizens to evaluate state and local child protection systems to ensure that these systems:

- Provide the best possible services;
- Prevent and protect children from abuse and neglect; and
- Meet the permanency needs of children.

The Southwest (SW) CRP serves 16 of Pennsylvania’s 67 counties. Members represent 10 of those 16 counties.

Overview of the Focus Area:

The SW CRP was formed in August of 2018 following a vigorous recruitment period. The panel spent a lot of time and energy discussing an extensive number of topics, including building a community for trauma, youth aging out of the system, Childline policies and procedures, and truancy. After much discussion, the panel decided to focus on building a community for trauma with a focus on a three-pronged approach to work with the caseworkers, supervisors, and administrators, as well as the contracted provider agencies. The panel chose this approach based on conversations held with...
CCYA administrators while attending a Western Region Pennsylvania Children and Youth Administrators meeting, as well as research, data, and articles reviewed.

Summary of Work Completed:

In order to begin looking at building a community for trauma, the panel reviewed training curriculum for administrators, supervisors, and caseworkers, as well as syllabi from the Child Welfare Education for Leadership (CWEL) program, to determine what training the child welfare workforce receives specific to TIC. While the new caseworker training is comprehensive and covers a variety of topics, to achieve our goal in building a community of TIC, additional trainings to strengthen the curriculum about TIC are needed.

With the continued focus on building a community of TIC, the SW CRP reviewed the Childline policies and procedures because of their interprofessional collaboration with local CCYAs. Childline caseworkers and supervisors could also be victim to vicarious trauma based on the information they receive every time they take a call detailing the abuse and neglect of a child.

The panel continued reviewing documents which included a literary article about the Adverse Childhood Experiences (ACE) assessment, Governor Wolf’s Executive Order 2019-05 entitled “Protection of Vulnerable Populations”, as well as the Family First Prevention Services Act as the foundation for our recommendations on building a community of TIC.

Review of these documents led the panel to develop a three-pronged approach to addressing TIC. The SW CRP believes there needs to be more focus on the trauma training needs of caseworkers, agency administration, and contracted providers.

Key activities in 2019
The SW CRP attended and participated in the following:

- A curriculum review of all trainings offered by CWRC that address trauma topics;
- Western Regional Pennsylvania Children and Youth Administrators (PCYA) meeting; and
- Spring and Fall All Panel Meetings, engaging in strategic planning for their focus areas with DHS.

Southwest Citizen Review Panel Recommendations for 2019

Recommendation 1
The SW CRP recommends that DHS establish a standard definition for “trauma-informed care” to be used across all departments throughout the Commonwealth, while also providing consistency amongst CCYAs and their providers.

The SW CRP would offer the following definition for TIC:

- “TIC is a strength-based framework that is grounded in an understanding and responsiveness of impact of trauma that emphasizes physical, psychological, and emotional safety for both providers and survivors that creates opportunities for survivors to rebuild a sense of control and empowerment” (Hopper, Bassuk, & Olivet, 2010).
OCYF Response to Recommendation 1
DHS appreciates the SW CRP’s efforts in researching and proposing a definition for TIC. An OCYF wide definition of TIC was recently established in the Specialized Settings Bulletin. For more information on the Specialized Settings Bulletin, please see the DHS response to SC CRP Recommendation 1. OCYF promotes the use of this definition amongst OCYF, CCYAs, and their providers. As part of implementing the Governor’s Executive Order for the Protection of Vulnerable Populations, DHS will continue to collaborate with the Commonwealth’s departments, agencies, provider agencies, and other stakeholders to execute trauma informed practice statewide. This may include the development and utilization of department wide or statewide definitions. OCYF will update the CRP as these plans develop.

Recommendation 2
Caseworkers need more advanced training in the area of ACEs and childhood trauma assessments to assist with determining appropriate placements for children removed from their homes.

OCYF Response to Recommendation 2
DHS is considering utilization of the FAST tool, a strengths-based comprehensive family functional assessment tool that includes trauma assessment. If this tool is adopted, training will be provided to assist caseworkers in determining appropriate interventions, including appropriate placement. For more information on FAST please see the DHS response to SC CRP Recommendation 2.

It is an OCYF priority to have a well-trained and supported child welfare workforce. CCYAs are encouraged to request funds for needed training through the annual NBPB process. CCYAs are also encouraged to request support from the Child Welfare Resource Center’s Practice Improvement Specialists who conduct visits with CCYAs, OCYF regional offices, and other stakeholders to identify strengths and challenges in county practice. CWRC Practice Improvement Specialists, as well as OCYF regional staff, are available to provide necessary technical assistance, training, support, and resources identified by CCYAs, including assistance with trauma assessments.

DHS is working to make trauma focused web-based trainings accessible to child welfare and mental health professionals. The National Adoption Competency Mental Health Training Initiative (NTI) has developed two standardized web-based trainings to build the capacity of child welfare and mental health professionals to better address the mental health needs of children, youth, and families moving toward or having achieved permanency through fostering, adoption, or guardianship.

The trainings provide the skills, strategies, and tools for professionals to support children to heal from trauma and loss, provide parents with skills to parent more effectively, collaborate effectively with child welfare and mental health professionals, improve outcomes for permanency, child well-being, and family well-being, and stability. Each module includes a short additional lesson for supervisors that identifies key skills. The curriculum also includes a downloadable supervisor coaching and activity guide that provides a variety of activities designed to help build appropriate skill areas for child welfare and mental health professionals. OCYF is currently collaborating with OMHSAS to plan implementation of these trainings in Pennsylvania. For more information on these trainings go to: https://adoptionsupport.org/nti/

Recommendation 3
CCYA Supervisors and Administrators need to have the “buy-in” and training to support caseworkers and all county agency staff in addressing secondary and vicarious trauma.
OCYF Response to Recommendation 3
OCYF looks forward to collaborating with CCYA administrators, staff, and other stakeholders to align with the Governor’s Executive Order for the Protection of Vulnerable Populations goal to transform Pennsylvania to a trauma-informed state. Plans and guidance for implementation from the Office of Advocacy and Reform are under way. In the meantime, DHS encourages CCYA administrators and supervisors to be mindful of the effects of vicarious trauma and work to retain staff and promote wellness by fostering a trauma-informed approach within agencies.

Trainings on trauma and managing traumatic stress in a trauma-informed workplace are available. Please see the 2018 CRP Annual Report, pages 27-29, for the OCYF response to SC CRP recommendation 3. The response provides a list of face-to-face offerings available to agency child welfare professionals through CWRC that feature this subject matter. To read the 2018 CRP Annual Report go to: https://www.dhs.pa.gov/docs/OCYF/Documents/2018%20Citizen%20Review%20Panels%20Annual%20Report.pdf

New trainings are also in development. CWRC is currently creating curricula for a new supervisor certification training series called Foundations of Supervision (FOS), which will replace the Supervisor Training Series. The FOS was developed through a curriculum needs assessment which included an examination of several supervisor curricula models nationwide and an analysis of these models using the National Implementation Research Network framework. In consultation with OCYF and county stakeholders, CWRC considered the clarity of the curricula; their alignment with Pennsylvania’s Child Welfare Practice Model and Competencies; the availability of resources, capacity, and supports to develop and deliver the curricula within our system; and the extent to which each curriculum was research-based and to which each curriculum has demonstrated positive outcomes. The National Child Welfare Workforce Institute (NCWWI) Leadership Academy for Supervisors (LAS) curriculum was determined to be aligned with Pennsylvania’s practice model and competencies and have the strongest clarity, fit, usability, and evidentiary support. In addition, NCWWI, University of Pittsburgh School of Social Work, and Allegheny County are engaged in an existing collaboration which will enhance the development of the FOS.

The curriculum needs assessment also included discussions with focus groups consisting of 63 county volunteers from 23 counties who served as subject matter experts. OCYF staff and members of the Caseworker Retention Workgroup of the Pennsylvania State Roundtable were also engaged to serve as subject matter experts for the FOS. Throughout, the FOS curriculum will reflect an awareness of trauma, including vicarious trauma, the use of a trauma-informed approach, self-care and the promotion of safety, permanence, and well-being of self and others, as well as creating a positive work culture.

The FOS is designed using unique and powerful delivery methods that have been incorporated in the direct service worker certification series, Foundations of Pennsylvania Child Welfare Practice. These methods include Team-based Learning™ which consists of online preparation modules that provide the participants key concepts and foundational knowledge to support their ability to practice skills and knowledge in the in-person training sessions. When the participants enter the classroom they are divided into diverse teams according to their knowledge and experience to engage in a series of team activities that provide opportunities to collaborate in solving significant, real world problems; develop critical thinking skills; give and receive strengths-based feedback; and experience effective teaming.
Participants will also experience simulation-based training sessions that will provide them the opportunity to practice setting and maintaining professional boundaries and having crucial conversations related to performance issues with an actor who will portray a caseworker. These actors are trained to respond authentically and provide meaningful support and feedback based on the behaviors the participant exhibited in the simulation. Field experiences, which will be woven throughout the series, will connect the dots between online and classroom learning and experiences through interviews and collaboration with colleagues and managers.

A pilot of the FOS series will begin during the spring of 2020. Upon pilot completion all new CCYA supervisors will be required to participate in the FOS series. This training will be made available through CWRC in several locations across the state.

**Recommendation 4**

All contracted CCYA provider agencies should be required to provide their employees with the following trauma training:

- An initial 15 hours of training which would include topics of:
  - Overview of Trauma;
  - Foundations of Neuroscience (neurobiology);
  - Usage of ACEs or a similar trauma assessment;
  - Resiliency;
  - Psychological First Aid;
  - Attachment and Trauma;
  - Attachment and Self-Regulation; and
  - Stress Inoculation.

- Annual renewal of 6 hours of ongoing trauma training.

CCYAs need to be held accountable to this requirement by showing how they ensure providers are being trained.

**OCYF Response to Recommendation 4**

DHS agrees that trauma-informed services should be provided when available. If private providers require their staff to be trauma trained, TIC services would be more readily accessible. The child welfare system in Pennsylvania is state-supervised, county-administered, and absent legislative and regulated authority, OCYF can only recommend that CCYAs obtain services from trauma trained private providers, or to require trauma training within provider contracts. The utilization of trauma-informed services, especially those that are evidence-based, is considered a best practice. It may be within the best interest of private providers to build a trauma trained workforce to best meet the needs of CCYAs and the children and families being served. This is also within the best interests of the CCYAs and the children and families they serve.
Proposed Focus Area/Activities for 2020:

The SW CRP is considering several topics to review in 2020, including caseworker retention with a focus on secondary and vicarious trauma, improving the Multi-Disciplinary Teaming process with a focus on case planning and improving communication between agencies, and human trafficking.

Southwest Citizen Review Panel Members

Bob Brinker – Westmoreland
Jessica Clark – Indiana
Paula Eppley-Newman – Somerset
Cheryl Hilliard - Indiana
Suella Himes – Jefferson
Phillip Huggins - Beaver
Jo Ann Jankoski – Fayette
Jennifer Kalie – Westmoreland
Kimberly Patterson – Allegheny
Emily Snow - Butler
Richard Wynn - Allegheny
Ronalynn Tebay - Lawrence

Biographies for each member can be found on the CRP website at the following link: http://www.pacwrc.pitt.edu/CRP/SouthWest.htm. Information regarding the panel’s current focus area and meetings can also be found by following the same link.
Introduction:

The mission of the Pennsylvania YAB is to educate, advocate, and form partnerships to create positive change in the child welfare system. The YAB is funded by the Pennsylvania DHS, OCYF and is supported by the CWRC. The YAB is comprised of youth and alumni of the child welfare system ages 16 to 21. There are also local and six regional boards that funnel into the Statewide YAB. Regional YABs and the Statewide YAB meet every other month. The meeting schedule for the Statewide YAB is listed under the “Events” section of the YAB website http://www.payab.pitt.edu/Statewide.htm.

YAB members, given their experience with the child welfare system, specifically foster care, are viewed as experts in this area. All YAB meetings are youth-developed and led, with the support of CWRC staff as well as county and provider staff. Staff members are appointed to each Regional YAB to help support youth as they find their voices and to teach them about meeting facilitation, action planning, and other necessary skills. Youth and alumni involved with the YAB create positive change in the child welfare system by:

- Training caseworkers, administrators, foster parents, supervisors, judges, and guardians ad litem on issues of importance to older youth and alumni;
- Developing recommendations related to policies and procedures affecting youth in care;
- Organizing community service events;
- Participating in peer-to-peer mentoring for other youth in the child welfare system;
- Presenting individually or in panel presentations to share their experiences with other youth, stakeholders working with older youth, and professionals at child welfare agencies. Examples of these panels include:
  - In June current YAB members and alumni presented at the Older Youth Summit on topics related to youth who have since aged out or are approaching aging out of the system. The youth spoke on their experiences in child welfare and explained how some of the skills they gathered through independent living have supported them in navigating jobs, school, obtaining housing on their own, cooking, and other topics. The presenters also fielded questions from youth currently in care related to the topics of discussion.
  - In June YAB participated in the SWAN Summer Statewide event where they delivered a presentation focused on Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) issues related to youth in care. Youth discussed both strengths of and concerns about caseworkers they have encountered. The alumni were also asked how the State can better support older youth, what the ideal role of a caseworker would be, and what considerations need to be made when working with youth whom identify as LGBTQ.
Overview of the Focus Area:

In 2019, the YAB focused on creating a youth questionnaire. The Youth Questionnaire is an online resource that provides a platform for youth to introduce themselves to potential resource families in their own words. It also provides an avenue for youth to begin a dialogue with resource families about some of the challenges they face as they transition to adulthood and ways in which the resource family can support them in that transition. In addition to the Youth Questionnaire, the YAB developed a resource parent brochure outlining tips for supporting older youth in transition. The goal is for the brochure to be incorporated into existing training for resource parents.

Highlights and key activities in 2019:

The YAB held four statewide meetings in September, January, March, and May. In September 2018, a new group of youth leaders were elected by their peers to form the YAB Core. YAB Core members are representatives of local and regional boards across the state and are responsible for planning and facilitating the YAB Statewide meetings. This role within the Statewide YAB helps youth develop leadership and facilitation skills and provides them with opportunities for professional development.

The YAB spent much of the year developing a plan to support older youth with establishing permanency, which included creating the Youth Questionnaire. In addition to the Youth Questionnaire, the YAB developed a resource parent brochure entitled “Tips and Tools for Fostering Older Youth” to outline tips for supporting older youth in transition.

As the YAB began developing a plan to support older youth to establish permanency, it was clear that many of the youth participating would benefit from learning about the array and purpose of permanency goals. The youth expressed that they often feel misinformed due to a lack of communication and/or limited explanation from workers regarding permanency goals and their hierarchy. The youth also felt that many of their peers did not have a clear understanding of permanency goals as well. To address this concern, the YAB planned to utilize a resource called the Permanency Game, which was formerly used as a teaching tool for new caseworkers, to help educate youth about permanency goals.

The YAB specifically redesigned the Permanency Game to help stakeholders educate youth about permanency goals in a youth-friendly and engaging manner. While playing the game, youth work as a team of siblings to navigate around the board, experiencing challenges and benefits of time in care. The goal is to make it home to achieve lasting safe and legal permanency.

In June 2019, the YAB held its annual YAB Leadership Summit. There were 30 youth in attendance representing each of the six regions across the state. The two-day event provided professional development opportunities and workshops co-facilitated by youth and staff. The Leadership Summit is also a chance for youth to connect with peers about the work and projects occurring in their respective regions. The Leadership Summit included an Older Youth in Transition Panel, where alumni youth had the opportunity to speak to current youth in care on several topics, including the challenges of exiting care, transition to young adulthood, resources, permanent connections,
There was also a resource parent panel facilitated by the YAB Consultant where resource parents had the opportunity to talk about some of the benefits and challenges of fostering older youth in a strengths-based approach.

The YAB Youth Ambassador participated as a voting member for the Governors’ Council on Reform’s Justice and Support Committee. The Governor’s Council on Reform was established upon the signing of Governor Wolf’s Executive Order 2019-05 entitled Protection of Vulnerable Populations with the purpose of identifying best practices and making recommendations to improve the support and protection of vulnerable populations. The Youth Ambassador worked with other individuals on the committee to help create recommendations that were issued to the Governor’s office in November of 2019. The recommendations can be found here: https://www.governor.pa.gov/wp-content/uploads/2019/11/20191101-Recommendations-to-Protect-Vulnerable-Populations.pdf.

Lastly, in 2019, members of the Pennsylvania YAB trained over 500 youth, staff, and stakeholders. They have participated in multiple community service projects and held seats at the table with the Pennsylvania Child Welfare Council and its subcommittees, CWRC Diversity Task Force, and the Governor’s Council on Reform, representing the youth voice to impact change for older youth.

Youth Advisory Board Recommendations for 2019

Recommendation 1
The YAB recommends that all youth have access and support completing the Youth Questionnaire as a resource to foster conversations and connections with potential resource families on their journey toward finding permanency and permanent relationships.

OCYF Response to Recommendation 1
DHS agrees that the Youth Introductory Questionnaire should be made available to all youth as an online resource to provide a platform for youth to introduce themselves to potential resource families in their own words. DHS and CWRC Practice Improvement Specialists will work with CCYA IL Coordinators, who work directly with older youth to provide services to assist in the transition to adulthood, to provide supports and training to ensure IL service implementation within county and private provider agencies. To date, CWRC has distributed the Youth Questionnaire to all IL Coordinators and private agencies via email listservs. In addition to the listserv distribution, all IL Practice Improvement Specialists have been promoting the use of the survey through IL site visits and other forums.

Recommendation 2
The Youth Advisory Board recommends that all CCYA staff members, as well as private providers working with older youth in care, should have access to resource parent training, such as the YAB’s Fostering Older Youth: A Teenage Experience training. In the Fostering Older Youth training, participants learn why older foster youth need resource parents who are willing to be lifelong resources and supports for them. Participants also learn the skills necessary to assist youth transitioning into a resource home and to support and foster older youth. Furthermore, participants gain a better understanding of IL services and transition planning activities for older youth and obtain tools to help support these efforts. It is recommended that child welfare professionals receive this training as an initial onboarding and on-going resource regarding working with youth to establish permanency.
It is also recommended that CCYAs and private providers utilize the Resource Parent brochure in resource parent trainings and in settings where potential resource parents may be present such as:

- Agency locations
- Trainings
- Presentations
- Matching events
- Conferences

OCYF Response to Recommendation 2
Working to establish permanency is a vital role of child welfare professionals. DHS agrees that child welfare professionals, especially those that work with older youth, may benefit from further training related to establishing permanency and life-long supports for this population. OCYF encourages participation in this training or others that focus on supporting the needs of older youth in care.

DHS agrees that the “Tools and Tips for Fostering Older Youth” brochure is an excellent tool and should be available for to all CCYAs and private provider agencies to incorporate into their current trainings for resource families. CWRC has distributed the brochure to IL Coordinators. The brochure has been made available on the YAB website at [http://payab.pitt.edu/](http://payab.pitt.edu/) for print and distribution by CCYAs and private provider agencies. OCYF will continue to work with system partners to provide this information and encourage agencies to incorporate its contents in resource parent trainings.

Recommendation 3
Furthermore, the YAB recommends that IL aftercare services are extended to age 23, and the Chafee Education and Training Grant (ETG) is extended to age 26. The YAB believes these changes will help youth have access to more resources and opportunities to explore and complete post-secondary education that can help them successfully transition into adulthood.

OCYF Response to Recommendation 3
Pennsylvania’s implementation of John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee) currently provides for IL aftercare services such as financial, housing, counseling, employment, education and other appropriate supports and services to eligible youth up to age 21. ETG vouchers, which are worth up to $5,000 each year or the cost of attendance (whichever is less) for Chafee-eligible youth to attend an institution of higher education, are currently available for first time applicants up to age 21 and returning applicants up to age 23. The funds may be used to cover costs for tuition, fees, books, supplies, and allowances for transportation, among other expenses.

Family First, under Chafee offered states the option to extend IL aftercare services to age 23 and ETG eligibility to age 26. Family First also clarified that youth are eligible to receive ETGs for as many as five years (up to age 26), as long as they are making satisfactory progress toward completion of their education program, and regardless of whether they attend in consecutive years.

DHS agrees with the YAB recommendations to extend IL aftercare services to age 23 and to extend eligibility for ETGs up to age 26. DHS will implement both provisions offered by Family First in state fiscal year 2020-2021 once approval has been granted by ACF.

Recommendation 4
Lastly, the YAB recommends that all youth have access to the new and revised Juvenile Law Center Know Your Rights Training.
OCYF Response to Recommendation 4
DHS concurs that all youth in foster care (as well as all individuals served by the child welfare system) should be afforded access and be educated about their rights in order to have the ability to advocate for themselves. The Juvenile Law Center (JLC) is currently revising their Know Your Rights training curriculum and is working with CWRC and YAB to update their own curriculum.

Until the new curriculum is available, CWRC’s IL Project, which monitors IL services implementation in Pennsylvania, will continue to use JLC’s curriculum to train youth and staff across the state. The new Know Your Rights Training will be in an online format. Once JLC and YAB have completed the curriculum revisions, the new Know Your Rights training will be posted to the YAB website at http://payab.pitt.edu/ where all youth can easily access the training.

The legal rights of children are outlined in the DHS, OCYF Bulletin 3130-12-02, entitled Children in Foster Care Act. To read OCYF Bulletin 3130-12-02 please visit https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20OCYF/OCYF%203130-12-02%203700-12-01%203680-12-01%203800-12-01.pdf. The bulletin which was created upon the passage of Act 119 of 2010, known as the Children in Foster Care Act, outlines the protections for children in foster care; the responsibility of a county or private provider to explain these protections to the child; and the responsibility of the agency to provide a copy of these protections to the child, their birth parents, and resource family. Act 119 emphasizes the importance of the current regulatory requirements that mandate agencies to have a grievance policy which is then provided and explained to the children in their care.

The legal rights and responsibilities of children are also outlined in the DHS, OCYF Bulletin 3130-18-02, entitled Concurrent Planning Policy and Implementation. To read OCYF Bulletin 3130-18-02 please visit https://www.dhs.pa.gov/docs/Documents/OCYF/3130-18-02.pdf. One of the eight core components of concurrent planning is full disclosure. Full disclosure is a respectful and candid discussion that begins when a child/youth is placed in out-of-home care and continues through the life of the case. The discussion is offered to the parents, the child/youth, and resource families, as well as other team members and stakeholders involved in the case planning process. Issues to be discussed with parents, the child/youth, and resource families are outlined in the bulletin, and include the Know Your Rights Guide and the legal rights and responsibilities of children and youth in out of home care as outlined in Act 119. It is a requirement of CCYAs to inform youth about their legal rights and it must be embedded in casework practice.

Upon completion of the new Know Your Rights Training, DHS will work with CCYAs, IL Coordinators, and CWRC Practice Improvement Specialists to ensure that sharing the training is a part of casework practice in each county. DHS will also work with system partners to provide this information at youth-focused events, including the Older Youth Retreat and YAB Summit meetings.

Youth Advisory Board Proposed Focus Area and Activities for 2020

The YAB’s focus areas for the upcoming year will include:

- Developing an app (application) to house resources that youth can have on the go that is easily accessible;
- Developing a tool or resource to help educate youth about the importance of permanency, permanency goals, and options for permanency;
• Support the revisions of the Know Your Rights Training; and
• Continue developing resources that support older youth's successful transition to adulthood.
Appendix A

South Central Panel ACEs Questionnaire for FEI Counties

Phone Conversation Script:
Thank you for taking the time to speak with me today. The reason your county has been selected is that we were notified that your agency is engaged with the use of the ACEs tool. Our panel is attempting to gather information about the use of a trauma-informed approach, specifically relating to the use of the ACEs tool. We will be gathering this anonymous information in order to improve child welfare practice in Pennsylvania. Do you have any questions for me before I ask the questions that our panel developed?

1. What versions of the Adverse Childhood Experiences (ACE’s) tool are you using?
2. How long have you been using the ACEs tool?
3. Who is administering the ACEs tool?
4. At what point in the CYS process is the tool being administered? (i.e. Intake, Ongoing: In-Home, Ongoing: Out-of-Home)
5. What population is this tool being administered to? (i.e children being investigated or assessed, in-home protective services, foster/adoptive children, aging out youth, etc.)
6. Once the tool is used, what happens with the results?
7. What training is being provided to those administering the tool?
   a. If you provide training, are you including resiliency factors?
8. If the tool indicates concerns, is that child referred for trauma-informed services?
9. Are you currently **contracting** with service providers who report the use of a trauma-informed approach?
10. In your use of ACEs are you seeing any changes in service provision that impacts your outcomes for children and your Agency?
    a. If no, what alternatives would you like in using a trauma-informed approach in your practice?
    b. If yes, what are those changes?
11. Do you have any other questions or information that you would like to share with me relating to trauma-informed care and ACEs?