

CAF Child Welfare

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Through the Eyes of a Child, XII*

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Child Welfare: Keeping vulnerable children safe

Themes

- Adequate supports for child and family services, such as TANF and addiction and mental health treatment, prevent the need for Child Welfare services
- Child Welfare provides critical in- and out-of-home services to protect our most vulnerable children who have been abused and neglected
- Limited capacity of in-home services and addiction treatment for parents impacts ability to keep children safely at home with their parents
- Capacity of system, staff (field and program) and key partners (courts, caregivers, providers, attorneys and CASAs) is stretched thin
- Frequent policy and program changes impact ability to sustain strategic improvement efforts

Child Welfare: Programs

- Child Protective Services – In 2008 DHS responded to 65,460 reports of abuse and neglect; 10,421 children were confirmed victims.
- In-home services – In 2008 DHS served 8,367 children at home, with 2,649 (31.7 percent) of those children or other family members receiving Family Based Services (FBS).
- Out-of-home care – In 2008, 13,965 children experienced foster care; 8,775 on an average daily basis. Thirty percent of children in foster care were in the home of a relative. On any given day, about 500 children in foster care needed intensive residential treatment or Behavioral Rehabilitation Services (BRS).
- Children of Color – In 2008, children of color continued to be disproportionately represented in foster care as compared to their numbers in the state's population, especially African American and Native American children. 7.9 % of children in FC were African American (2.3% of Oregon's population); 10.6% were Native American (1.3% of Oregon's population).
- Adoption and guardianship – In 2008, 1,053 children leaving foster care were adopted; 316 went in to permanent guardianship arrangements.

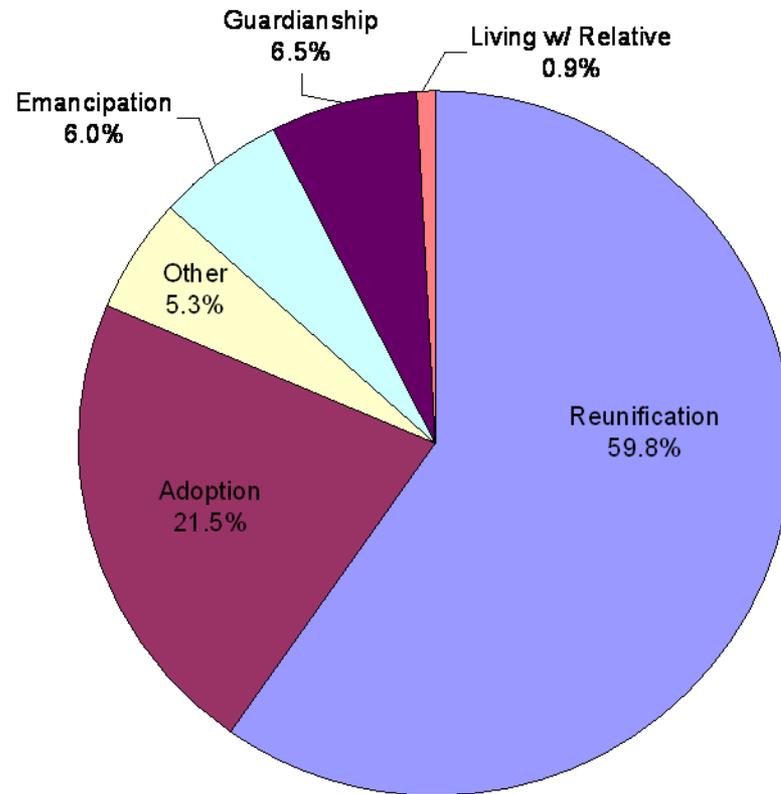
Child Welfare: Why children come into care

- Multiple reasons for removal are captured.
- Top reasons for removal are physical abuse, alcohol and drug abuse, neglect, and the child's behavior.

Removal Reason	FFY 2008	
	Number	% of Entrants
Physical Abuse	3,038	66.7%
Parent Drug Abuse	2,606	57.2%
Parent Alcohol Abuse	2,590	56.8%
Neglect Abuse	2,160	47.4%
Child's Behavior	2,157	47.3%
Inability To Cope	1,534	33.7%
Inadequate Housing	1,104	24.2%
Sexual Abuse	342	7.5%
Child's Disability	326	7.2%
Child Drug Abuse	54	1.2%
Child Alcohol Abuse	49	1.1%
Incarceration Of Parent	40	0.9%
Abandonment	32	0.7%
Death Of Parent	2	0.0%
Total Number of Foster Care Entrants	4,557	

Child Welfare: Where children go when leaving care

Most children leaving foster care are reunified with their parents.



Child Welfare: Strategic efforts to reduce the number of children in foster care

Goal: Safe reduction of children in foster care by 20 percent by 2011

- Increase relative placements by 50 percent
- Reduce the number of children entering care by 10 percent
- Increase foster care exits by 20 percent
- Reduce disparities for all children of color and reduce the over-representation of African American and Native American children in foster care
- Maintain or improve the re-abuse rate

Child Welfare: Strategic efforts to reduce the number of children in foster care

2008 Results (as compared to 2007):

- Children in Foster Care reduced by 10%
- Initial placements with Relatives up by 22%
- Adoptions up 17%; Adoptions of Children of Color increased by 16.4%
- Re-abuse rate went down (from 7.5% to 6.3%)
- Oregon in the First Quarter of its Program Improvement Plan met three of its PIP Goals: Permanency Composite 1 and Timeliness of Reunification and Permanency 2 (translation: kids returning more quickly without re-entering FC) and Timeliness of Adoptions (translation: moving kids more quickly through entire adoption process)

Child Welfare: Strategic efforts to improve the safety and well-being of children in foster care

Goal: Children in foster care are safe and healthy

- Increase supports for out-of-home caregivers
- Reduce abuse in foster care
- Enhance services and supports for children with behavioral health needs
- Support strong relationships with parents, siblings and relatives

Child Welfare: Strategic efforts to improve the safety and well-being of children in foster care

2008/2009 Results:

- Foster Care Base Rate of Reimbursement increasing for 85-90% of out-of-home caregivers
- Abuse in family foster care down, but overall Oregon still 2X national standard
- Children in Foster Care referred to mental health assessment within 21 days – from 40 to 58%; received within 60 days - from 25 to 38%
- Passage of 2 significant MH pieces of Legislation (HB 3114 – psychotropic med monitoring; HB 2114 – Statewide Wraparound Initiative)
- 57.2 % of Children in Foster care had 2 or fewer placements (up from 55.7%)
- 80% of Children were placed in the same family as one or more of their siblings (about same as 2007)

Looking Ahead: Opportunities

Opportunities:

- 2009 Legislature continued investment in prioritized addiction treatment for parents involved in child welfare, known as Intensive Treatment and Recovery Services (ITRS); early data from AMH-CAF on first 50 ITRS clients to complete treatment shows 95 percent of cases able to “remove the addiction treatment barrier toward reunification by completing treatment”
- 2009 Legislature invested in 130 additional staff for child welfare (bringing child welfare staffing to 85% of workload model); CW Goals are to improve face-to-face contacts and timeliness of CPS response
- 2009 Legislature invested in Foster Care Rate Redesign
- 2009 Legislature enacted the Oregon Healthy Kids Program (HB 2116)
- 2009 Legislature codified efforts around Child Welfare Equity (SB 630)
- 2009 Legislature extended intervener/current caretaker timeline to 12 months

Looking Ahead: Opportunities

Opportunities:

- Child Welfare Strategic Action Plan: 5-year strategic program plan + 12-month work plan laying out next steps to implementing program goals
- Casey Family Programs: Strategic partnership between Casey Family Programs, Oregon Commission on Children and Families, and DHS Child Welfare. Includes a beginning 3-year financial commitment & technical assistance around Safe Reduction Goals; starting in 8 pilot counties
- Child Welfare Equity Taskforce: Charged to make research-based policy, practice and workforce recommendations to the 2011 Legislature; working with PSU on Decision-Point Analysis (to be completed early Fall 2009)

Looking Ahead: Opportunities

Challenges:

- The Economy: Factors outside child welfare's control impact the safety of children in our communities and their families
- The Budget: Already inadequate budget was reduced in 2009/11
- ✓ Reduced funding for child abuse-prevention services, like Temporary Assistance to Needy Families, Healthy Start, and other In-Home Supports
- ✓ Child Welfare program and partners experienced funding reductions (courts, indigent defense, district attorneys, services to parents and children in child welfare, providers of services to parents and children, etc.)
- Individual and Community Support: More to be done to generate support for children & parents, for the child welfare system generally, for the idea of relative placements, the issue of disparities/equity for children of color, etc.

Partnerships with Courts, Community Partners

Children cannot be safe and well - within or outside the Child Welfare System - without the support of the courts & other community partners.

- ✓ Continue to hold us accountable.
- ✓ Support your local Child Welfare Program and its Partners, including active engagement in dialogue and problem-solving about the work.
- ✓ Advocate locally and statewide for children, parents and “the system” – including judges, attorneys, advocates, workers, CRB volunteers, CASA and other advocates, foster parents, services, providers of those services, etc. “Honest, but Hopeful” about the good work that goes on in the system, as well as the system’s challenges and what is needed to resolve them.

Thank you.

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