



**ACS FOSTER CARE
STRATEGIC BLUEPRINT
FY 2019-FY 2023 &
FINDINGS FROM THE RAPID
PERMANENCY REVIEWS**



NYCTM

**Administration for
Children's Services**



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This report presents the new five-year ACS Foster Care Strategic Blueprint for FY 2019-FY 2023 and the findings from a review of the cases of children in foster care for more than two years. The five-year Strategic Blueprint builds on the priorities established in the ACS FY 2016-FY 2018 Blueprint and is informed by the case review, the recommendations of the Interagency Foster Care Task Force, the results of a survey of youth in foster care, intensive analysis of foster care performance data and input from a range of stakeholders including youth, parents, providers, advocates and others.

ACS is pleased to acknowledge the many individuals and organizations that contributed to this important work and informed the development of the five-year Strategic Blueprint.

We thank New York City Council Member and Chair of the General Welfare Committee Stephen Levin, who introduced the legislation that led to the creation of this report, and who also introduced legislation establishing the Interagency Foster Care Task Force. We thank Council Member Donovan Richards, who introduced legislation to create a survey of youth in foster care.

We thank Casey Family Programs for partnering with ACS to design and conduct a review of the cases of more than 2,200 children in foster care using an approach called Rapid Permanency Reviews (RPRs). A very special thank you to Melissa Baker, Senior Director for Strategic Consulting at Casey. In her role overseeing all of Casey Family Programs' support to New York City, Melissa's commitment is unparalleled and her partnership is invaluable. Many thanks to Casey Managing Director Zeinab Chahine for her support and strategic guidance. Thank you to the Casey Technical Assistance team that worked with ACS to design the RPRs for NYC including Erwin McEwen, Russell Woods, and Justin Lee. Thank you to all of the reviewers from Casey Family Programs, including:

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Finally, thank you to Mayor Bill de Blasio for his unparalleled commitment to child welfare and the investments that his administration has made to strengthen NYC's families and improve outcomes for children. While we have made significant progress, much work remains to ensure that every child has the opportunity to thrive. The ACS Foster Care Strategic Blueprint for FY 2019-FY 2023 sets important goals for the City's work to continue to improve outcomes for children and families in the foster care system. We look forward to working with the City Council and all of our City agency and community partners to move this work forward.

David A. Hansell, Commissioner, NYC Administration for Children's Services

I. Executive Summary

Local Law 143 of 2016 was signed by Mayor Bill de Blasio on November 16, 2016. The law, which was introduced by City Council Member and Chair of the General Welfare Committee Stephen Levin, charged ACS with creating a five-year plan to address barriers to permanency for youth in foster care. To inform the development of the five-year plan, the legislation also requires ACS to conduct a case review of children in care two years or longer.

Five Year Plan - ACS Foster Care Strategic Blueprint FY 2019-FY 2023

ACS developed and issued the ACS Foster Care Strategic Blueprint FY 2016-FY 2018 in January 2016. The Blueprint identified key priorities and strategies for improving case practice and results across the foster care continuum—from family reunification to kinship placement to adoption to supporting older youth in care. This focus, combined with the unprecedented investments made by the de Blasio administration to strengthen child welfare, has yielded promising results. While much work remains, New York City's foster care population is at a historic low of under 9,000 children in care, exits to kinship guardianship have been steadily increasing and fewer children are returning to foster care. Section III of this report describes progress made from 2016-2018.

The five-year plan presented here is the ACS Foster Care Strategic Blueprint for FY 2019-FY 2023. It builds on the 2016-2018 Blueprint and is also informed by the work of the **Foster Care Interagency Task Force**.¹ Chaired by ACS Commissioner David Hansell, the Task Force report released on March 22, 2018 includes sixteen recommendations focused on three priority areas: 1) improving permanency outcomes; 2) improving health, mental health, and educational services for children in foster care, and 3) improving the prospects of young adults leaving foster care. These recommendations informed the development of the five-year plan.

The ACS Foster Care Blueprint FY 2019-FY 2023 is also informed by the first annual Youth Experience Survey. This survey was implemented following the enactment of Local Law 146 of 2016 signed by Mayor Bill de Blasio on November 16, 2016. The legislation, which was introduced by City Council Member Donovan J. Richards, requires ACS to implement a survey of all youth in foster care ages 13 and older. Detailed findings from this survey are available on the ACS website.

The plan is also informed by intensive analysis of foster care performance data and input from a range of stakeholders including youth, parents, providers, advocates and others. Finally, it is important to note that, as we move forward with the implementation of the Blueprint, ACS is closely monitoring changes at the federal level, including opportunities to continue the work we have launched under the Title IV-E waiver and the impact of the Family First Act, which was passed as part of the federal budget approved by Congress on February 9, 2018.

1. The Task Force was created following the enactment of Local Law 144 of 2016, signed by Mayor Bill de Blasio on November 16, 2016. The legislation, which was introduced by City Council Member and Chair of the General Welfare Committee Stephen Levin, charged the Task Force with issuing recommendations to improve services and outcomes for youth in and aging out of foster care.

The ACS Foster Care Blueprint FY 2019-FY 2023 is organized by five major priorities:

1. Improving Permanency Outcomes

During the last two years, ACS implemented a range of targeted strategies through our No Time to Wait initiative designed to reduce children's length of stay in care and improve reunification, adoption and kinship guardianship outcomes. This five-year plan builds upon and expands this critical permanency work.

2. Improving Foster Care Placements to Enhance the Well-Being of Children

ACS' Home Away from Home (HAFH) initiative is focused on increasing placement with kin and redesigning the way foster parents are recruited and supported. This work will continue and expand under the five-year plan. Additionally, ACS will continue significant work already underway to enhance programming at the ACS Children's Center.

3. Improving Health, Mental Health and Education Services for Children in Foster Care

Ensuring the well-being of children in foster care is a critical element of the permanency process. Through the five-year plan, ACS will work with our sister City agencies DOE, DYCD, DOHMH and other key partners to implement strategies to support better health, mental health and educational outcomes for children in foster care.

4. Improving Outcomes for Older Youth

ACS is working to improve permanency outcomes and reduce the numbers of youth that age out of care. Nationally, we know that youth aging out of foster care have poorer educational outcomes and college attendance, persistence and graduation rates than their peers, and face high rates of unemployment as adults. ACS has significant education, internship, college and career initiatives underway designed to improve outcomes for older youth in foster care. The five-year plan builds on these initiatives to help youth transition successfully to adulthood.

5. Building Systemic Capacity

ACS has made significant investments to provide cutting-edge training, technical assistance and case consultation functions to support our foster care providers. Major investments have also been made to maintain low caseloads and implement trauma screening and trauma informed services. Through this five-year plan, ACS will provide additional tools that support the work of our foster care providers. Significantly, ACS will be undertaking a comprehensive assessment of community needs, the current service array and best practices to inform the re-procurement of all foster care services (including family foster care and residential services).

The ACS Foster Care Blueprint FY 2019-FY 2023 identifies specific strategies and objectives within each of these five areas (see Section IV of this report).

Case Review of Children in Foster Care for Two Years or Longer

ACS partnered with Casey Family Programs to review the cases of more than 2,200 children² who had been in foster care for more than two years. The case review was conducted using a particular approach developed by Casey Family Programs and refined for use in New York City called Rapid Permanency Reviews (RPRs). Casey Family Programs had conducted RPRs on a smaller scale with success in Philadelphia, Houston and Sacramento. Through the RPRs, ACS identified both barriers to permanency and bright spots in permanency practice. Detailed findings from the RPRs are presented in Section V of this report. ACS also conducted a separate analysis of older youth permanency; detailed findings from this review are presented in Section VI of this report.

The following is a brief summary of the bright spots and challenges (barriers to permanency) identified through the RPRs and the examination of older youth permanency, as well as an overview of initiatives underway to address these challenges. The five-year plan is designed to continue and deepen this work.



² The sample size of 2,200 children far exceeded the requirement of the legislation for a statistically representative sample that would be no less than 5% of foster care population of children in care two years or more. As of September 2016, there were 5,067 children in foster care two years or more; as such, a 5% sample would have been only 254 children.

RPR Reunification Highlights

Bright Spots:

- Frequent, high-quality family time (a.k.a. visiting) supports timely progress to reunification.
- Building positive relationships between parents and foster parents supports permanency.
- RPRs showed that many families are prepared for children to safely return home.
- Most parents are engaged in some level of services.
- Permanency reviews conducted when a child reaches eight to ten months in care provide a key opportunity to assess progress and clarify what is needed for the family to reunify.

Challenges:

- The most common barriers to reunification included lack of participation in services,³ mental health challenges, and substance misuse affecting children's safety.
- In nearly half of the cases where the goal was reunification and the child(ren) was not on trial discharge, staff reported that the reunification permanency goal was "in question" or likely to change given the family circumstances and lack of progress on safety and risk issues. These are among the most complex and clinically challenging cases, in which foster care agencies, legal advocates and the Family Court wrestle with critical decisions when reunification still has not been achieved after children have spent months or years in foster care.

Steps Taken toward System Improvement:

- In 2017, ACS approved new funding for all foster care agencies to intensify services and supports for families preparing for trial and final discharge.
- ACS has embarked on a Family Time initiative involving citywide training, collaborations with parent advocacy organizations Rise and the Osborne Association, and new assessment tools to improve agency visiting spaces and help staff assess the least restrictive level of supervision.
- ACS Commissioner David Hansell chaired the Interagency Foster Care Task Force, a collaboration among youth, parents, advocates, foster care providers and government agencies to improve outcomes for foster children and their families. The Task Force recommendations include continuing efforts to increase the frequency and quality of family time, advocating for an increase in the State-set housing subsidy available to reunifying families, and enhancing the information that parents receive about the child welfare system and their rights from the beginning of ACS involvement.
- Since the time of the RPRs, ACS has substantially decreased wait time for families to receive preventive services.

³ Services could include preventive services, substance abuse treatment, individual mental health services, family therapy, parenting classes, anger management, and/or domestic violence counseling, among others.

RPR Adoption Highlights

Bright Spots:

- In one out of every five cases where the goal was adoption, staff reported that there were no barriers and that the cases were moving toward permanency.
- The vast majority of long-stayers with an adoption goal have stable placements with foster parents willing to adopt.
- Permanency reviews once a child reaches eight to ten months in care provide a key opportunity to support long-term permanency planning.
- The best practices reported during RPRs involved a proactive approach to adoption administrative processes.
- Excellent adoption practice involves strong parent engagement throughout the life of a case and helping families fully understand all their permanency options.

Challenges:

- Delays in the TPR process impede timely adoptions.
- Adjournments, court concerns or judicial requests occurred in one out of three RPR adoption cases with TPR petitions filed.
- When parents are not fully engaged throughout the life of a case, adoptions are delayed.
- For legally freed children, administrative processes are the main challenge delaying adoptions. These processes include completing home studies, receiving vital records, and maintaining consistent communication with adoption attorneys, among others.

Steps Taken toward System Improvement:

- ACS streamlined the adoption subsidy process, reducing the amount of paperwork required and resulting in much faster subsidy approvals. Previously, only 5% of subsidies were approved within 30 days; ACS increased this to 70%.
- ACS centralized and streamlined the process for providers to request birth certificates for children in foster care. The ACS Vital Records Unit processed more than 4,600 birth certificate requests from January 2017 to January 2018.
- ACS maintains a list of children legally freed for adoption and holds each agency accountable for achieving timely adoptions for the children in their care. ACS shares monthly data with foster care agencies, including overall progress to date as well as child-specific data, to help agencies meet their targets.
- ACS offers technical assistance to foster care agencies on specific cases as well as program-level strategies such as business process improvement and data-based performance management.
- ACS Senior Practice Consultants work onsite at a select group of agencies to help program staff strengthen permanency practice and troubleshoot challenges.
- ACS meets regularly with Family Court leadership to share data, discuss trends, and collaborate on our shared priority to achieve timely permanency for NYC children.
- In 2017, ACS announced an \$11 million initiative in partnership with the Dave Thomas Foundation to expand the Wendy's Wonderful Kids model, designed to increase recruitment of adoptive parents for children with special needs and older youth.
- To help agencies engage more parents and improve the time to TPR resolution, ACS provided expert training on open adoption to all foster care agencies.

RPR KinGAP Highlights

Bright Spots:

- For children who cannot safely return home, KinGAP can be the fastest route to permanency.
- RPRs reflected foster care providers' increasing capacity to help families understand and utilize this permanency option.

Challenges:

- Administrative processes delay KinGAP cases and should begin sooner in the timeline of a case.
- Children and their kinship caregivers need services.
- Relationships between parents and kin caregivers are crucial, and complicated.

Steps Taken toward System Improvement:

- Effective March 12, 2018, the expansion of the New York State KinGAP legislation allows "fictive kin," such as family friends, teachers, or neighbors, to become eligible for KinGAP. Additionally, the new legislation extends eligibility for KinGAP subsidy payments until youth reach age 21, regardless of the age at which kinship guardianship was legally granted.
- ACS maintains a list of KinGAP-eligible children and holds each agency accountable for achieving timely permanency for the children in their care. ACS shares monthly data on progress with foster care agencies and offers case-specific and program-level technical assistance related to KinGAP.
- ACS has launched an initiative to increase placement with kin. Based on the understanding that children fare better when placed with kin, this initiative includes adding staff exclusively dedicated to searching for kin when children first enter foster care, bringing in national kinship care experts to train staff in best practices, increasing staff awareness through a "Find Family and Friends First" campaign, setting aggressive kin placement goals, monitoring placement data, and providing intensive technical assistance to help foster care agencies locate kin caregivers for children who initially enter care in non-kin foster homes. The proportion of children placed with kin when they first enter care has increased from 27% in FY 2016 to 30% in FY 2017 to 32% in the first four months of FY 2018.

An Examination of Older Youth Permanency

Bright Spots:

- The majority of youth ages 13-17 years are placed with a foster parent in a family-based setting.
- The entry of youth ages 13-17 years into foster care has decreased 9% in FY 2017 in comparison to FY 2015.
- ACS has leveraged partnerships with foundations, nonprofits, universities, and other City agencies to increase its education and workforce development supports and resources for youth.

Challenges:

- Youth who do not return home within the first year of foster care are less likely to return home.
- Youth with a history of foster care entries who do not reunify within the first year are more likely to age out of foster care.
- There are youth in foster care for more than two years who have a goal of reunification that appears unlikely to be achieved.
- There are youth ages 13-17 years who have been in care for two years and longer with a goal of adoption but are not legally free.

Steps Taken toward System Improvement:

- ACS has launched Home Away from Home, a major initiative underway specifically focused on the recruitment and retention of foster homes.
- ACS is providing case-level consultation to the provider agencies to address any barriers that are preventing these youth from being adopted.
- ACS has expanded its partnership with the Dave Thomas Foundation to implement the Wendy's Wonderful Kids (WWK) program city-wide.
- ACS has partnered with Fostering Change for Children (FCFC) to provide training to provider agency and ACS staff on open adoption.
- In 2017, ACS launched an initiative to increase placement with kin because the research shows that children and youth placed with kin have better outcomes. Increasing the number of children placed with kin has a twofold goal: kin may act as a supportive resource for parents and youth, and if reunification cannot occur, kin may serve a permanent resource for the youth.
- ACS has partnered with the provider agencies to identify youth who have been in care over two years, have a goal of reunification, and are currently living with kin to explore whether KinGAP is a viable permanency option for the youth and family.
- ACS has focused its efforts to improve the experiences of youth in foster care by developing education and employment programs. ACS established a new Office of Employment and Workforce Development Initiatives (OEWDI) in 2016. OEWDI has collaborated with a variety of partners to develop programs and strengthen the capacity of foster care agencies to support youth with educational and career planning.

II. Introduction

Local Law 143 of 2016 was signed by Mayor Bill de Blasio on November 16, 2016. The law, which was introduced by City Council Member and Chair of the General Welfare Committee Stephen Levin, charged ACS with creating a five-year plan to address barriers to permanency for youth in foster care. To inform the development of the five-year plan, the legislation also requires ACS to conduct a case review of children in care two years or longer. Specifically, the law requires a case study of a statistically significant sample of children who have spent at least two years in foster care, but no less than 5% of the total foster care population, including but not limited to the following aggregated information:

- (a) Age, gender, race/ethnicity, and, if available, sexual orientation;
- (b) Permanency plan, including reunification, adoption, KinGAP, APPLA, or other;
- (c) The number of months in care; and
- (d) Barriers to permanency, including but not limited to parental homelessness, parental relapse, parental childcare needs, education issues, family court delays, lack of permanency resources, juvenile incarceration, college enrollment, and any other barrier as determined by ACS.

The law requires ACS to review the five-year plan on an annual basis, submit updates to the City Council and, in the fifth year of the plan, submit a new five-year plan. (See Appendix A for a copy of the law.)

This report presents a brief overview of the current context of NYC foster care system, the findings of the case review and the five-year plan.

Five Year Plan - ACS Foster Care Strategic Blueprint FY 2019-FY 2023

ACS developed and issued the ACS Foster Care Strategic Blueprint FY 2016-FY 2018 in January 2016. The Blueprint identified key priorities and strategies for improving case practice and results across the foster care continuum—from family reunification to kinship placement to adoption to supporting older youth in care. This focus, combined with the unprecedented investments made by the de Blasio administration to strengthen child welfare, has yielded promising results. While much work remains, New York City's foster care population is at a historic low of under 9,000 children in care, exits to kinship guardianship have been steadily increasing and fewer children are returning to foster care. Section III of this report describes progress made from 2016-2018.

The five-year plan presented here is the ACS Foster Care Strategic Blueprint for FY 2019-FY 2023. It builds on the 2016-2018 Blueprint and is also informed by the work of the **Foster Care Interagency Task Force**, which was created following the enactment of Local Law 144 of 2016, signed by Mayor Bill de Blasio on November 16, 2016. The legislation, which was introduced by City Council Member and Chair of the General Welfare Committee Stephen Levin, charged the Task Force with issuing recommendations to improve services

and outcomes for youth in and aging out of foster care. The Task Force is chaired by ACS Commissioner David Hansell. On March 22, 2018, Commissioner Hansell released the report which includes sixteen recommendations covering three priority areas: 1) improving permanency outcomes; 2) improving health, mental health, and educational services for children in foster care, and 3) improving the prospects of young adults leaving foster care. These recommendations informed the development of the five-year plan.

The ACS Foster Care Blueprint FY 2019-FY 2023 is also informed by the first annual **Youth Experience Survey**. This survey was implemented following the enactment of Local Law 146 of 2016 signed by Mayor Bill de Blasio on November 16, 2016. The legislation, which was introduced by City Council Member Donovan J. Richards, requires ACS to implement a survey of all youth in foster care ages 13 and older about their experiences in foster care. Detailed findings from this survey are available on the ACS website. Finally, the plan is also informed by intensive analysis of foster care performance data and input from a range of stakeholders including youth, parents, providers, advocates and others.

Case Review of Children in Foster Care for Two Years or Longer

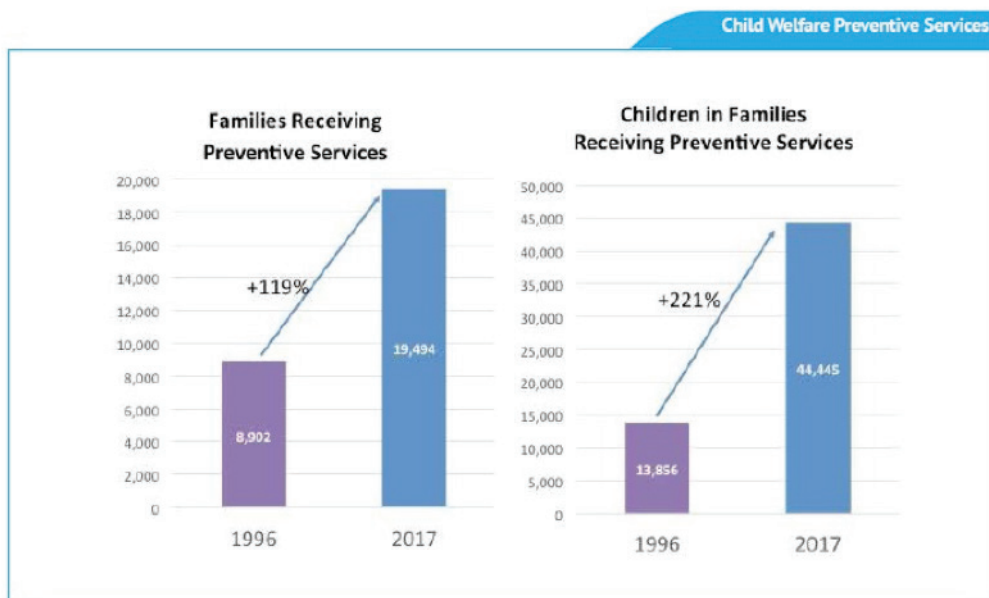
ACS partnered with Casey Family Programs to review the cases of more than 2,200 children⁴ who had been in foster care for more than two years. The case review was conducted using a particular approach developed by Casey Family Programs and refined for use in New York City called Rapid Permanency Reviews (RPRs). Casey Family Programs had conducted RPRs on a smaller scale with success in Philadelphia, Houston and Sacramento. The findings of the RPRs are presented in Section V of this report. An additional analysis of older youth permanency is presented in Section VI.

⁴ The RPR sample size of 2,200 children far exceeded the requirement of the legislation for a statistically representative sample that would be no less than 5% of foster care population of children in care 2 years or more. As of September 2016, there were 5,067 children in foster care two years or more; as such, a 5% sample would have been 254 children.

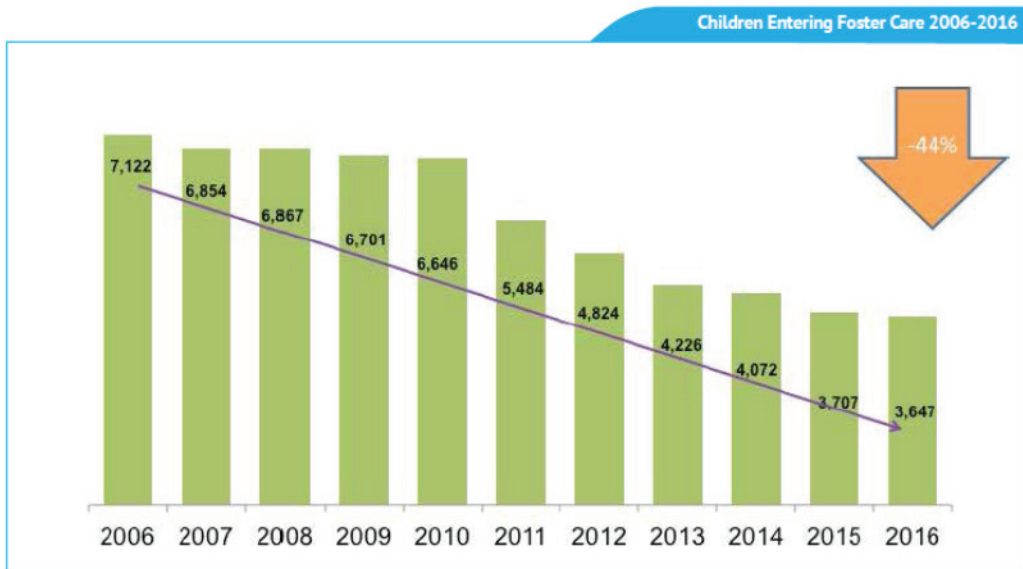
III. Current Context of New York City Foster Care System

The number of New York City children in foster care at the end of FY 2017 reached a historic low of fewer than 9,000, less than one-fifth of the number of children in care 25 years ago. ACS has invested extensively in preventive services to avoid foster care entry, and in efforts to achieve permanency for those in care. This investment in preventive services has resulted in one of the widest arrays of evidence-based models available anywhere in the country.

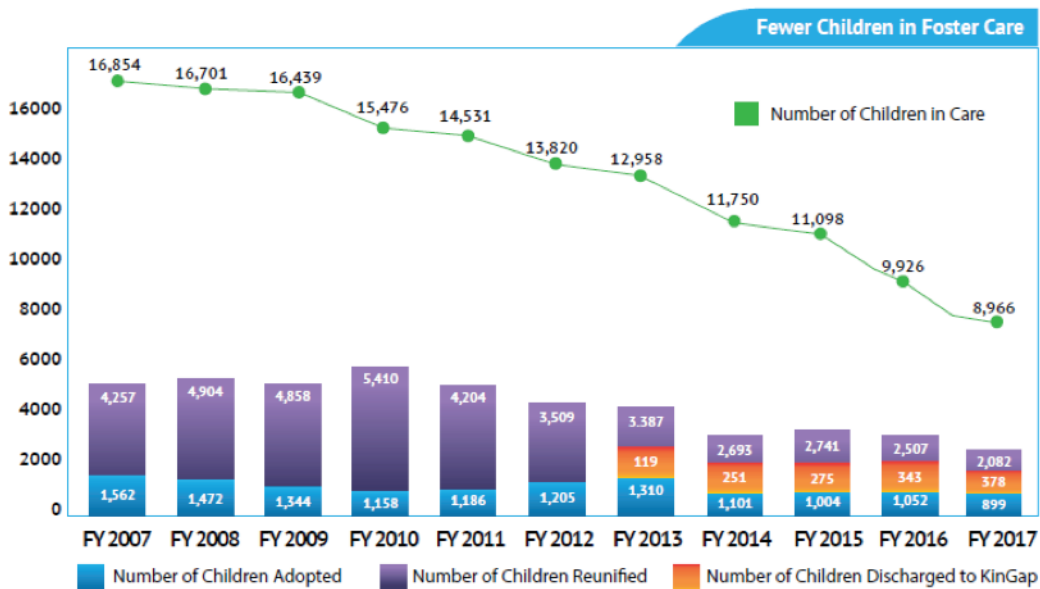
The charts below illustrate the vast increases in the number of children and families receiving preventive services over the past decade. In 1996, nearly 9,000 families—and 13,856 children within those families—received preventive services in NYC. In 2017, the number of families receiving preventive services had more than doubled, and the number of children had more than tripled.



ACS's investment in prevention has paralleled a dramatic decline in the number of NYC children in foster care, suggesting that these up-front interventions are succeeding in keeping children safe while reducing the trauma associated with family separations. While the ACS Division of Child Protection completes more than 50,000 abuse and neglect investigations each year, the number of children entering foster care has significantly dropped. The following chart demonstrates a 44% decrease in foster care entries from 2006 to 2016.



For children who are in foster care, ACS strives to help families reunify, and if that is not possible, to connect children with permanent families through adoption or kinship guardianship. As shown in the chart below, ACS has made significant progress, dramatically reducing the number of children in foster care and narrowing the gap between the number of children in care and the number exiting to permanency.



New York State and New York City are among the jurisdictions nationwide that have longer lengths of stay for children in foster care. While this may in part be the result of a far smaller number of children coming into care, it also reflects case practice and administrative process challenges that ACS is addressing through targeted strategies. **The numbers are improving: From 2013 to 2017, there were 2,400 fewer New York City children in foster care for more than two years.**

While much work remains to reduce foster care length of stay and improve outcomes for children in care, these targeted strategies, combined with the unprecedented investments made by the de Blasio administration to strengthen child welfare and coordinated efforts by foster care agencies throughout New York City, are yielding promising results. ACS has issued two annual reports tracking progress against the 2016-2018 Foster Care Strategic Blueprint.

ACS FOSTER CARE STRATEGIC BLUEPRINT: IMPLEMENTATION PROGRESS HIGHLIGHTS – 2016-2018

- **Fewer children in foster care:** In FY 2017, there were fewer than 9,000 children in foster care.
- **Increases in Adoption and Kinship Guardianship:** From FY 2015 to FY 2016, ACS increased the number of children achieving permanency through kinship guardianship (KinGAP) by 25% and adoption by 5%, even as the overall numbers of children in foster care continued to decline. The numbers of children exiting foster care to KinGAP has steadily increased from 119 in FY 2013 to 275 in FY 2015 to 378 in FY 2017.
- **Fewer children returning to foster care:** The proportion of children re-entering foster care following reunification or KinGAP declined from 9.1 percent in FY 2015 to 7.8 percent in FY2016 and 6.3 percent in FY 2017.
- **More children placed with kin:** Research shows that children placed with kin have increased placement stability and higher rates of behavioral and emotional well-being than children placed with non-kin caregivers.⁵ Children placed with kin are also more likely than those in non-kin foster care to reach permanency overall through reunification, adoption or guardianship.⁶ The proportion of children placed with kin when they first enter care has increased from 27% in FY 2016 to 30% in FY 2017 to 32% in the first four months of FY 2018.
- **More foster homes recruited:** In the first eight months of FY 2018, there were 21% more new foster homes certified, compared to the same time period last year.
- **Increased resources to improve education and employment outcomes for youth.** ACS launched the Fostering College Success dorm project initiative in partnership with CUNY and the New York Foundling; as of FY 2017, 355 foster youth were in college, including almost 100 in the dorm program. In partnership with the College of Staten Island, ACS launched the First Star program, which provides academic and

⁵ Winokur et al. Kinship Care for the Safety, Permanency, and Well-Being of Children Removed from the Home for Maltreatment (2014).

⁶ Sakai et al. Health Outcomes & Family Services in Kinship Analysis of a National Sample of Children in the Child Welfare System (2011).

social-emotional support to help ninth grade foster youth stay on track for high school graduation and prepare for higher education. ACS established a new Office of Employment and Workforce Development Initiatives (OEWDI) dedicated to improving employment outcomes for youth in the foster care and justice systems. OEWDI has launched multiple new programs in partnership with DYCD and The Workplace Center at Columbia University, as well as a Driver's Education program and mentored internship program in partnership with the Pinkerton Foundation.

- **Historically Low Caseloads:** Foster care caseworker caseloads average 10-12 children per worker.
- **Scaling of Evidence-Based Services:** Foster care agencies are using a nationally recognized screening tool to assess trauma, and proven interventions are being delivered to help children, parents, and families cope with trauma.
- **Cutting Edge Training:** The ACS Workforce Institute has trained more than 5,000 ACS and provider agency staff.
- **Data Driven Decision Making:** In consultation with national child welfare experts, ACS is utilizing data analytics and structured business process improvement approaches to streamline and improve services to children and families.

IV. Five Year Plan - ACS Foster Care Strategic Blueprint FY 2019-FY 2023

ACS has been a pioneer in the implementation of preventive services to safely avoid foster care entry. While ACS has also made significant gains in addressing the needs of children in foster care over the last several years, important opportunities remain to make a positive difference in the lives of children and families. The next phase of this work is outlined in the five-year ACS Foster Care Strategic Blueprint for FY 2019-FY 2023. The five-year plan builds upon the progress made under the 2016-2018 Blueprint, and is informed by the recommendations of the Interagency Foster Care Task Force, the findings from the Rapid Permanency Reviews, the Youth Experience Survey, our examination of older youth permanency, intensive analysis of foster care performance data and input from key stakeholders.

The ACS Foster Care Blueprint FY 2019-FY 2023 is organized by five major priorities:

1. Improving Permanency Outcomes

During the last two years, ACS implemented a range of targeted strategies through our *No Time to Wait* initiative designed to reduce children's length of stay in care and improve reunification, adoption and kinship guardianship outcomes. This five-year plan builds upon and expands this critical permanency work.

2. Improving Foster Care Placements to Enhance the Well-Being of Children

ACS' *Home Away from Home* (HAFH) initiative is focused on increasing placement with kin and redesigning the way foster parents are recruited and supported. This work will continue and expand under the five-year plan. Additionally, ACS will continue significant work already underway to enhance programming at the ACS Children's Center.

3. Improving Health, Mental Health and Education Services for Children in Foster Care

Ensuring the well-being of children in foster care is a critical element of the permanency process. Through the five-year plan, ACS will work with our sister City agencies DOE, DYCD, DOHMH and other key partners to implement strategies to support better health, mental health and educational outcomes for children in foster care.

4. Improving Outcomes for Older Youth

ACS is working to improve permanency outcomes and reduce the numbers of youth that age out of care. Nationally, we know that youth aging out of foster care have poorer educational outcomes and college attendance, persistence and graduation rates than their peers, and face high rates of unemployment as adults. ACS has significant education, internship, college and career initiatives underway designed to improve outcomes for older youth in foster care. The five-year plan builds on these initiatives to help youth transition successfully to adulthood.

5. Building Systemic Capacity

ACS has made significant investments to provide cutting-edge training, technical assistance and case consultation functions to support our foster care providers. Major investments have also been made to maintain low caseloads and implement trauma screening and trauma-informed services. Through this five-year plan, ACS will provide additional tools that support the work of our foster care providers. Significantly, ACS will also be undertaking a comprehensive assessment of community needs, the current service array and best practices to inform the re-procurement of all foster care services (including family foster care and residential services).

Priority	Strategy	
Improving Permanency Outcomes – No Time to Wait		
Reunification	1	Increase and improve the quality of Family Time (aka family visiting).
	2	Enhance materials for parents about the child welfare system and their rights.
	3	Improve assessment process for determining when families are ready to reunify.
	4	Expand partnership with parent advocacy organizations to increase parent voice and engagement.
KinGap	5	Increase placement of children in foster care with kin.
	6	Continue to increase use of KinGAP as permanency option.
Adoption	7	Continue to streamline adoption administrative processes.
	8	Continue to provide training and technical assistance on open adoption to provider agencies.
	9	Fully implement the Wendy's Wonderful Kids (WWK) model, an \$11 million partnership with the Dave Thomas Foundation to increase adoption and kinship guardianship for older youth, sibling groups and children with special needs.
Improving Foster Care Placements to Enhance the Well-Being of Children – Home Away from Home		
	10	Increase placement of children in foster care with kin.
	11	Continue the redesign of foster parent recruitment and support, and implement strategies to support the important role of foster parents in achieving permanency (reunification, KinGAP or adoption) for children in foster care.
	12	Continue to expand and enhance programming at the ACS Children's Center.
Improving Health, Mental Health and Education Services for Children in Foster Care		
Education	13	Partner with DOE and DYCD to expand academic enrichment and supports for children and youth in foster care.
Health & Mental Health	14	Partner with DOHMH, OMH and other stakeholders to expand access to mental health and supportive services for children and families.
	15	Partner with DOHMH to facilitate access to home visiting services for pregnant and parenting youth in foster care.
	16	Work with foster care providers to prepare for transition to Medicaid managed care.

Priority	Strategy	
Improving Outcomes for Older Youth		
Youth Voice	17	Increase youth involvement in permanency planning.
	18	Re-launch Youth Advisory Council.
	19	Continue to disseminate the Annual Youth Experience Survey to gather input directly from older youth to inform practice.
Housing	20	Leverage new supportive housing slots to increase access to housing for youth and families.
	21	Provide integrated, accessible information on housing resources for youth and families.
Employment & Post-Secondary Education	22	Continue to scale college bound and college support programs for youth in foster care.
	23	Continue to develop initiatives to enhance youth readiness for the world of work.
Building Systemic Capacity		
	24	Assess community needs, current service array and best practices to inform future procurements of foster care services (including family foster care and residential services).
	25	Continue to support foster care agencies with targeted technical assistance and case consultation.
	26	Continue to improve fundamental case practice and expand state-of-the art training and professional development provided to foster care agencies through the Workforce Institute.
	27	Continue to implement universal trauma screenings for children in foster care and scale evidence-based models.
	28	Implement the SafeMeasures data dashboard to help managers and frontline staff plan, track and monitor their work and improve outcomes.
	29	Implement strategies to improve case transitions between ACS' Division of Child Protection (DCP) and foster care agencies.
	30	Leverage Family Team Conferences (FTC) to support Permanency Planning.
	31	Continue collaboration with Family Court and legal advocates to identify and address barriers to permanency.

V. Case Review of Children in Foster Care for Two Years or Longer—Rapid Permanency Reviews Conducted in Partnership with Casey Family Programs

Introduction

New York City has made great strides in reducing the foster care census from nearly 17,000 children in 2007 to fewer than 9,000 children in 2017. However, many NYC children in foster care are still waiting too long for permanency. The purpose of foster care is to temporarily keep children safe while addressing concerns so that families can permanently reunify and meet their children’s needs. When safe reunification is not possible, the foster care system is designed to connect children with permanent families through adoption or kinship guardianship. The federal Adoption and Safe Families Act (ASFA) sets timeframes for permanency planning, and NYC has historically struggled to meet these timeframes.

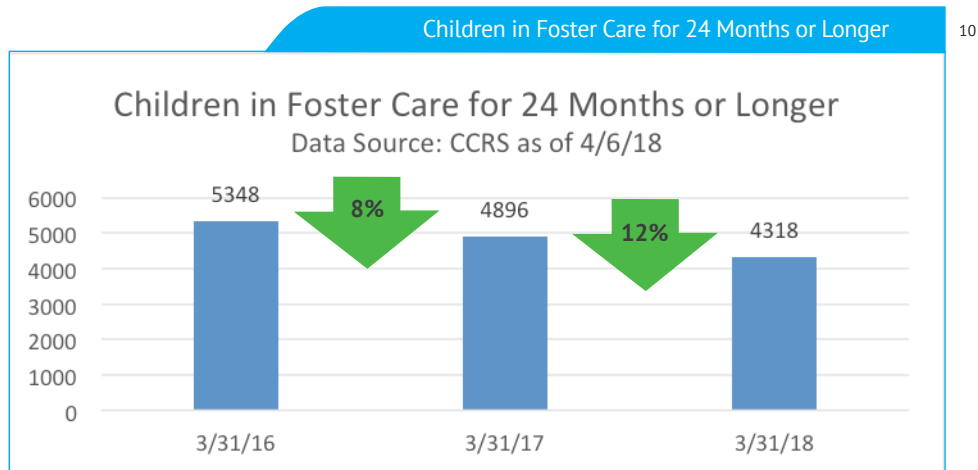
In particular, New York City is working to improve permanency performance for “long-stayers,” defined as children who have been in foster care for two years or more. The federal Child and Family Services Review (CFSR) provides data on each state’s permanency performance. According to CFSR data, New York State ranks 48th out of 50 states on achieving permanency for long-stayers.⁷ NYC contributes significantly to the State’s performance in this area as NYC comprises approximately 68% of the State’s total foster care population in care over 24 months.⁸ While we have made significant strides in recent years, approximately 4,300 NYC children—about half of the total NYC foster care population—are long-stayers in 24-hour foster care.⁹ ACS has implemented a range of targeted strategies, summarized in the [Foster Care Strategic Blueprint](#), to help children return to their families or find permanency through adoption or kinship guardianship (KinGAP) more quickly. Please see Section VI for a discussion of older youth permanency.

ACS had made progress in reducing the number of long-stayers over the past three years. As demonstrated in the chart below, the number of children in care 24 months or longer decreased by 8% from March 2016 to March 2017 and another 12% from March 2017 to March 2018.

⁷ Child and Family Services Review, October 2014 baseline data.

⁸ New York State Office of Children and Family Services, “CFSR Round 3 Wave 4 Outcomes by County.” Data as of 4/1/16.

⁹ Number of long-stayers: 4,318, data source: CCRS as of 4/6/18. Data includes all children in 24-hour foster care with a length of stay of 24 months or more; data does not include children on trial discharge or absent status.



Still, the City has much more work to do. To inform improvement efforts, ACS analyzed qualitative and quantitative data regarding long-stayers and conducted more than 2,200 Rapid Permanency Reviews to gather information about what is needed to help expedite children’s return home or to finalize adoptions or KinGAP arrangements.

The following are lessons learned about how to support permanency for NYC’s children and youth.

Rapid Permanency Reviews: Overview of the Process and Demographics

The Rapid Permanency Review (RPR) model is a case assessment protocol developed by Casey Family Programs to identify critical junctures in a case, align permanency activities and outcomes, and collect data to determine trends in foster care practices and processes. Casey Family Programs is the nation’s largest foundation focused on reducing the need for foster care in America. Based on the successful results of RPRs in other metropolitan jurisdictions, including Houston, TX and Philadelphia, PA, ACS partnered with Casey Family Programs to conduct a citywide case review of the cases of more than 2,200 children, involving all 27 foster care provider agencies and dozens of program sites.

RPRs are one tool designed to assist child welfare systems move more quickly to achieve timely permanency for children in out-of-home placement. The RPR model is designed to review cases of children who have been in a stable family-based placement for the past year, yet linger in foster care, perhaps due to systemic barriers or administrative delays. The purpose of the RPRs is to identify and mitigate case-level and system-level bottlenecks and barriers. (Other types of assessments are more suited to children who have moved placements and/or who do not have an identified permanency resource. Please see Section VI, An Examination of Older Youth Permanency, for further discussion.)

10 Chart includes children in 24-hour foster care; does not include children who are absent or on trial discharge status.

In the RPR model, reviewers use case and court record information and identify the status of cases along the path of critical junctures from permanency goal assignment to finalization of reunification, adoption or guardianship. The purpose in reviewing these key steps in permanency planning is to ensure case activities are aligned with permanency outcomes and on track to help children achieve permanency.

ACS and Casey Family Programs each allocated approximately 20 staff members to serve as reviewers on a rotating basis. The RPR review teams included members with deep experience and expertise in family engagement, child well-being, permanency planning, child and family law, and systems improvement, among other topics. Each review team included two reviewers – an ACS representative and a Casey Family Programs representative, bringing deep knowledge of NYC practice and national best practice expertise.

The Review Teams reviewed case information and conducted a case review meeting with the assigned case planner, supervisor, and/or program director for each case in the sample. The review process was purposefully designed with a sense of urgency, to examine each case through the child’s eyes and sense of time. The team discussed the case with the foster care agency staff, identified barriers and bright spots, and developed a course of action designed to help move the case forward. The review teams captured barriers, bright spots and next steps in a tool.

Caseworkers and supervisors whose cases were reviewed left the review sessions with case-specific action steps to be taken. Meanwhile, ACS and foster care agency executive leadership were responsible for “busting barriers” and implementing a “cadence of accountability” (described in further detail below). The information captured in the tools was aggregated and analyzed so that systemic issues could be identified and addressed.

The RPR target populations (see below) were children deemed likely to be either close to achieving their permanency goal or reaching a turning point in permanency planning based on meeting certain basic criteria. Specifically, the ACS RPRs focused on long-stayers who have lived with a stable caregiver for at least the past year and fit within one of six categories based on their permanency goal (PPG) and the status of their case:

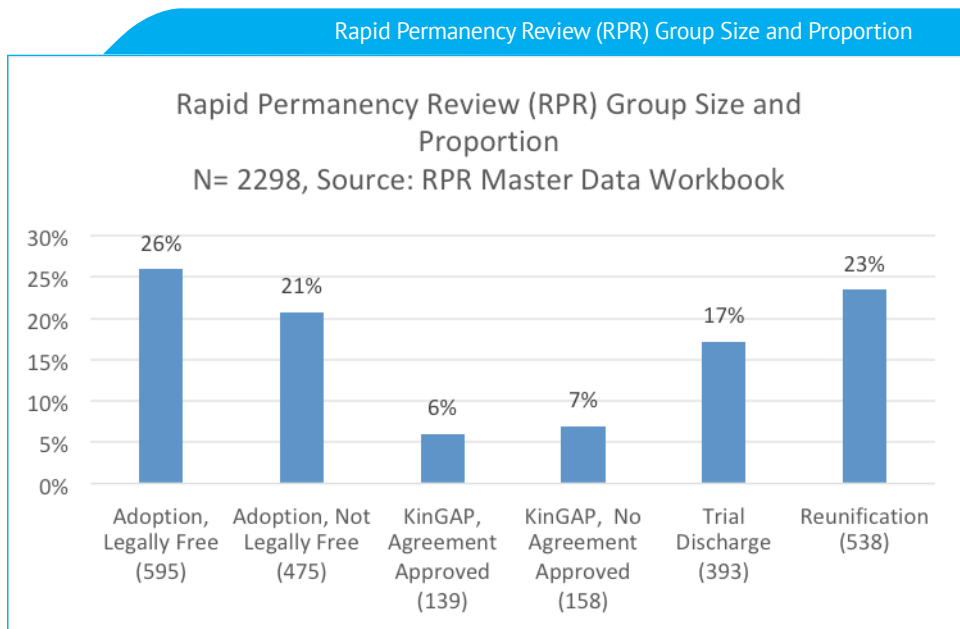
- reunification PPG, child living with a foster parent;
- reunification PPG, child actively on trial discharge for 3+ months;
- adoption PPG, child not legally free;
- adoption PPG, child legally free;
- KinGAP PPG, no agreement approved; KinGAP agreement approved.

The table below provides the specific criteria for each RPR category.

Category	Criteria
Reunification, child living with foster parent	<ul style="list-style-type: none"> • Goal of reunification • In care for 24 months and longer • With current caregiver for at least 12 months
Reunification, child on trial discharge	<ul style="list-style-type: none"> • Goal of reunification • On trial discharge with a family for 3 months and longer
Adoption, child not legally free	<ul style="list-style-type: none"> • Goal of adoption • TPR filed • Not legally free • In care for 24 months and longer • With current caregiver for at least 12 months
Adoption, child legally free	<ul style="list-style-type: none"> • Goal of adoption • Legally free • In care for 24 months and longer • Adoption petition filed and not filed • With current caregiver for at least 12 months
KinGAP, no agreement approved	<ul style="list-style-type: none"> • In care for 15 months and longer • Goal of KinGAP • No approved KinGAP agreement
KinGAP, agreement approved	<ul style="list-style-type: none"> • In care for 15 months and longer • Approved KinGAP agreement

RPRs included children of all ages. However, since the RPRs were designed to examine delays in permanency for children who are close to achieving their permanency goal with a permanent resource; these reviews did not include youth with a goal of Another Planned Permanency Living Arrangement (APPLA). In addition, older youth in foster care have a unique set of strengths and challenges that warrant specific focus. Section VI provides data from a separate analysis that ACS conducted of older youth in foster care in partnership with national child welfare experts Public Catalyst and Action Research.

ACS and Casey Family Programs partnered to design and implement the RPRs, launching a pilot with three foster care agencies in June and July 2016 and beginning full implementation in November 2016. The reviews were completed in May 2017. A total of 2,298 cases were reviewed, approximately two-thirds of all youth who fit the RPR criteria. The following chart presents the breakdown of reviews conducted by category. Since the populations of RPR-eligible children were largest in the adoption and reunification categories, the largest numbers of reviews were completed in those areas.



The “Cadence of Accountability” is a management technique introduced by *The 4 Disciplines of Execution*,¹¹ which is designed to be simple and focus on achieving goals through persistent attention to activities that can “move the dial.” ACS, with support from Casey Family Programs, conducted three levels of follow-up to the RPRs: Case-Level, Executive-Level, and System-Level. The Case-Level Cadence involved regular meetings between agency program directors and ACS to review action steps and progress toward permanency on individual cases reviewed in the RPRs. Action plans were amended as needed. The Executive-Level Cadence involved quarterly meetings between agency leadership and ACS leadership to discuss trends identified at each provider agency, including bright spots and barriers to permanency related to agency practice, ACS, the courts, and/or cross-system barriers. Bright spots are strategies that worked well in a specific case or program and can be shared for use in other cases or programs. In the System-Level Cadence, ACS leadership met monthly to review qualitative and quantitative data from across NYC to determine progress toward outcomes and to identify and strategize about program and systemic barriers to permanency. These monthly meetings are ongoing and focus on in-depth review of a range of agency and system performance data.

11 McChesney, Chris, Sean Covey and Jim Huling. (2012). *The 4 Disciplines of Execution*. New York, NY: Simon & Schuster.

ACS analyzed the demographic data of the RPR population. Among all children whose cases were reviewed, 49% were female and 51% were male.¹² The median age was seven years old. The median length of stay in foster care for RPR children was 39 months. The races and ethnicities of the RPR population were the following: 56% African American, 31% Hispanic, 6% Other/Unknown, 5% White and 2% Asian/Pacific Islander,¹³ closely matching the racial/ethnic breakdown of the entire NYC foster care population.¹⁴ Data are not currently available regarding the sexual orientations of NYC children and youth in foster care.

The RPR project was designed to review the majority of children in the foster care system meeting the aforementioned criteria, with the goal of identifying barriers; addressing those barriers; highlighting and sharing bright spots in practice; and identifying agency and system-wide strategies that could be used to mitigate barriers moving forward. The following sections describe the findings from the RPRs.

12 The New York State system of record for child welfare, known as Connections, does not currently include data entry options for genders other than male or female. Therefore, this data does not accurately reflect the gender identities of transgender or gender non-conforming youth.

13 Data availability on race and ethnicity of children in care is also limited by the data entry options in Connections.

14 Among all children in 24-hour foster care as of April 2018, 53% were African American, 32% Hispanic, 8% other/unknown, 5% White, and 2% Asian/Pacific Islander (source: ACS analysis of CCRS data as of 4/6/18 and Connections data as of 4/12/18).

A. RPR Findings: Reunification

Reunification Highlights

Bright Spots:

- Frequent, high-quality family time (a.k.a. visiting) supports timely progress to reunification.
- Building positive relationships between parents and foster parents supports permanency.
- RPRs showed that many families are prepared for children to safely return home.
- Most parents are engaged in some level of services.
- Permanency reviews conducted when a child reaches eight to ten months in care provide a key opportunity to assess progress and clarify what is needed for the family to reunify.

Challenges:

- The most common barriers to reunification included lack of participation in services,¹⁵ mental health challenges, and substance misuse affecting children's safety.
- In nearly half of the cases where the goal was reunification and the child(ren) was not on trial discharge, staff reported that the reunification permanency goal was "in question" or likely to change given the family circumstances and lack of progress on safety and risk issues. These are among the most complex and clinically challenging cases, in which foster care agencies, legal advocates and the Family Court wrestle with critical decisions when reunification still has not been achieved after children have spent months or years in foster care.

Steps Taken toward System Improvement:

- In 2017, ACS approved new funding for all foster care agencies to intensify services and supports for families preparing for trial and final discharge.
- ACS has embarked on a Family Time initiative involving citywide training, collaborations with parent advocacy organizations Rise and the Osborne Association, and new assessment tools to improve agency visiting spaces and help staff assess the least restrictive level of supervision.
- ACS Commissioner David Hansell chaired the Interagency Foster Care Task Force, a collaboration among youth, parents, advocates, foster care providers and government agencies to improve outcomes for foster children and their families. The Task Force recommendations include continuing efforts to increase the frequency and quality of family time, advocating for an increase in the State-set housing subsidy available to reunifying families, and enhancing the information that parents receive about the child welfare system and their rights from the beginning of ACS involvement.
- Since the time of the RPRs, ACS has substantially decreased wait time for families to receive preventive services.

¹⁵ Services could include preventive services, substance abuse treatment, individual mental health services, family therapy, parenting classes, anger management, and/or domestic violence counseling, among others.

Currently, 1,002 children who have been in foster care for at least two years have a permanency goal of reunification. These children represent 23% of all NYC’s long-stayers in 24-hour foster care.¹⁶ Additionally, more than 400 children who entered care over two years ago are home on trial discharge to reunification. Including both 24-hour foster care (i.e. child currently living with a foster parent) and trial discharge cases, more than 900 reunification cases were reviewed during the RPRs. This section will provide a brief overview of the reunification process and then describe the findings from those reviews.

The Reunification Process

Every family’s path to reunification looks different. The steps toward permanency depend on the particular safety issues that each family faces, and progression is not always linear. In most cases, the following steps occur after a child is removed and placed in foster care:

- 1) Families spend time together during scheduled parent-child visits. Based on the level of supervision needed to keep the child safe, families progress through a continuum from supervised visits, often held at the foster care agency, to unsupervised visits in the community, sometimes lasting several hours or overnight.
- 2) Parents participate in services to address the reasons their children were removed and placed in foster care. In order to reunify, families must be able to demonstrate to the family court that safety concerns have been sufficiently addressed.
- 3) Families progressing toward reunification typically engage in a trial discharge, meaning the child returns home on a trial basis and lives with the parent(s) but remains in the legal custody of ACS. Foster care agencies conduct home visits to assess safety and offer support during this transition time.
- 4) If the family demonstrates during the trial discharge that they are ready for full reunification and can safely meet the child’s needs, the foster care agency recommends a final discharge and the court approves it. Then, the child is final discharged and the foster care case is closed (often with preventive services in place).

The RPRs included two categories of children with reunification goals: those living with a foster parent and those on trial discharge. The following table illustrates the numbers of cases reviewed in each category.

Children with a permanency goal of reunification, living with a foster parent	Children with a permanency goal of reunification, on trial discharge
538 cases reviewed	393 cases reviewed

RPR eligibility for children with a foster parent was based on children having been in foster care for two years or longer and living with their current caregiver for at least the past 12 months. According to policy expectations regarding time to permanency, these families should be nearing trial discharge, or permanency goals should be changed to adoption or KinGAP.

¹⁶ Source: ACS analysis of data from CCRS as of 4/6/2018 and Connections as of 4/12/2018, including children with a length of stay of two years or longer, currently in 24-hour foster care.



RPR eligibility for trial discharge cases was based on the children having been on trial discharge for at least three months prior to the review. The three-month timeframe was chosen because it gives families time to make the initial transition after their children return home and to prepare for final discharge. The RPRs explored whether families were ready for final discharge, what helped families successfully exit the foster care system, and what barriers prevented others from doing so in a timely manner.

Reunification Bright Spots

Frequent, high-quality family time (a.k.a. visiting) supports timely progress to reunification.

Among reunification cases reviewed in the RPRs, whether families were nearing trial discharge or unlikely to reunify, the vast majority of families were spending time together on a regular basis. The frequency and quality of this time varied significantly and emphasized the importance of family time for successful reunification. Case planning staff identified families that were “on track” for reunification, those for whom this permanency goal was “in question,” and those likely to experience a change to another permanency goal. Of these three groups, the “on track” group had more frequent visits, higher quality, and less supervision during family time. This corroborates what national research has indicated: family time matters, both as a way to build relationships and skills and to gauge readiness for reunification.^{17,18,19}

Reviewers found many instances of excellent casework related to family time. Best practices included using family time to help families make progress toward reunification and to recognize improvement. Safely increasing the amount of time that parents and children spend together outside of agency supervision can help create a virtuous cycle: more flexibility can lead to more frequent, high-quality visits, which help families build sustainable relationships and motivate change. This, in turn, can lead to additional progress along the continuum toward trial discharge.

Building positive relationships between parents and foster parents supports permanency.

A positive working relationship between parents and foster parents can make an enormous difference in a child’s experience and outcomes. Foster care agencies nurture these relationships in many ways, from foster parent training to family team conferencing to support groups, among other strategies. During the RPRs, foster care agency staff described how they set expectations for collaboration between parents and foster parents. Foster parents sometimes serve as mentors, encouraging parents along the path to reunification. Experienced foster parents also mentor newer foster parents to further cultivate and support positive working relationships with parents, and some agencies pair them intentionally to ensure that this happens. In the event that reunification

17 Beyer, M. (1999). Parent-Child Visits as an Opportunity for Change. National Resource Center for Family Centered Practice, Prevention Report #1. <http://www.martybeyer.com/sites/default/files/visits.pdf>.

18 Hess, P., & Proch, K. (1993). Visiting: The heart of reunification. In B. Pine, R. Warsh, & A. Maluccio (eds.), *Together again: Family reunification in foster care*, pp. 119-139. Washington, DC: Child Welfare League of America.

19 Smariga, Margaret, (2007). *Visitation with Infants and Toddlers in Foster Care: What Judges and Attorneys Need to Know*. http://www.ct.gov/ccpa/lib/ccpa/birth_to_three_and_visitation_aba_child_law_center_doc.pdf.

is not possible, trusting relationships between parents and foster parents can also open doors to expedited permanency options such as KinGAP or open adoption, where parents may remain involved in their children’s lives after guardianship or adoption is finalized.

RPRs showed that many families are prepared for children to safely return home.

Foster care agency staff indicated to the reviewers that many families were ready or almost ready to reunify. The RPRs identified that 17% of families with a reunification goal had no barriers to permanency and were moving toward trial discharge. Among families already on trial discharge, 20% had no reported barriers to permanency and were preparing for final discharge.

Foster care agencies are tapping into ACS’s extensive array of preventive programs to help these families reunify. Some agencies offer both foster care and preventive services, meaning they can refer families in-house. Others refer out but conduct joint home visits with preventive staff and make other collaborative efforts to ensure a smooth transition to preventive services. A best practice is to include preventive staff in the trial discharge Family Team Conference so that they can be part of action planning and help support the children’s transition home.

Most parents are engaged in some level of services.

Two thirds of parents are at least partially engaged in services to support reunification. Rehabilitating from substance abuse and/or learning to manage mental health challenges can be a lengthy process. While federal mandates have been implemented to prevent children from languishing in care, parents who are actively participating in services may be granted additional time to address their challenges so that their children will return home and they may safely parent. Overall, this is a population working to overcome significant obstacles and stay connected to their children.

Permanency reviews once a child reaches eight to ten months in care provide a key opportunity to assess progress and clarify what is needed for the family to reunify. Many agencies conduct case reviews at key intervals as part of their overall management and quality assurance processes. Assessing the status of permanency plans at the eight to ten month mark in a case can help case planning staff clarify what progress has been made and what still needs to happen for the family to reunify. If reunification is not possible, these reviews also provide an opportunity for agencies to prepare for a goal change to adoption or KinGAP within the prescribed timeframes.

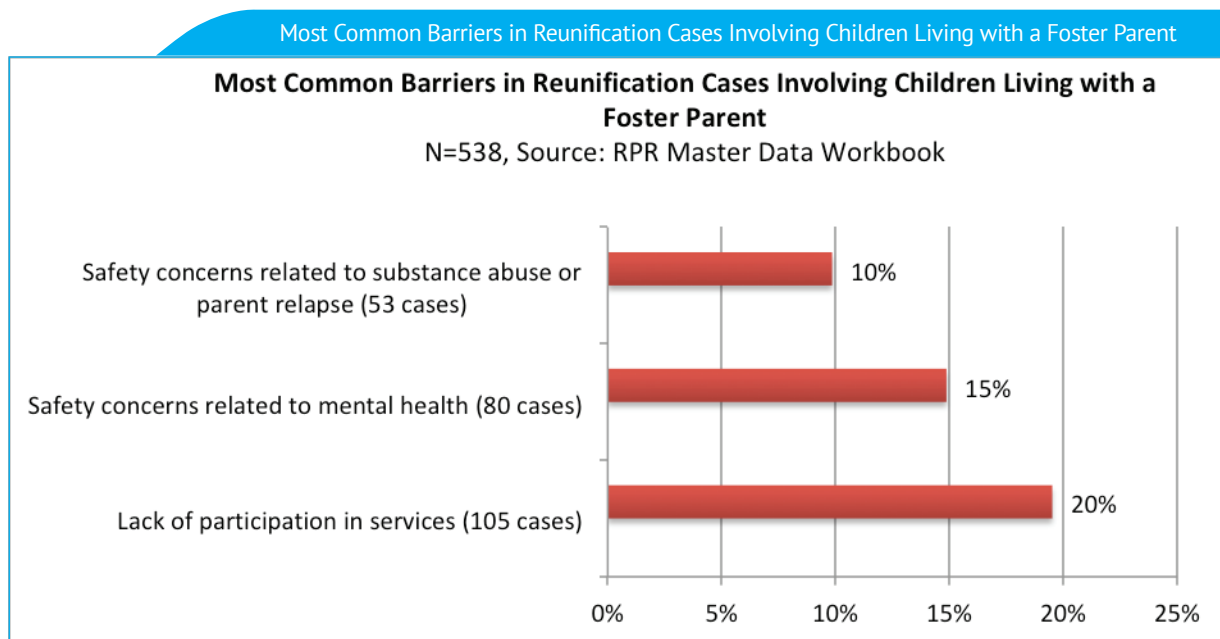
Reunification Challenges

RPRs explored what barriers were delaying permanency for children, and the responses varied widely. No single barrier affected more than one in five families with a reunification permanency goal. Still, some themes emerged.

The most common barriers to reunification included lack of participation in services,²⁰ mental health challenges, and substance misuse affecting children’s safety. The need for preventive services also delayed permanency.

²⁰ Services could include substance abuse treatment, individual mental health services, family therapy, parenting classes, anger management, and/or domestic violence counseling, among others.

For families with children who were living with foster parents and had a reunification PPG, the following barriers appeared most often, in order of frequency: parent not participating in services, safety concerns related to mental health, and safety concerns related to substance abuse or parent relapse. The chart below shows the prevalence of each barrier. Please note that, for all charts in this report showing the most common barriers to permanency, each case could have multiple barriers recorded by reviewers. The review tool also included other barriers that are not shown on the charts because they applied to a small number of cases.

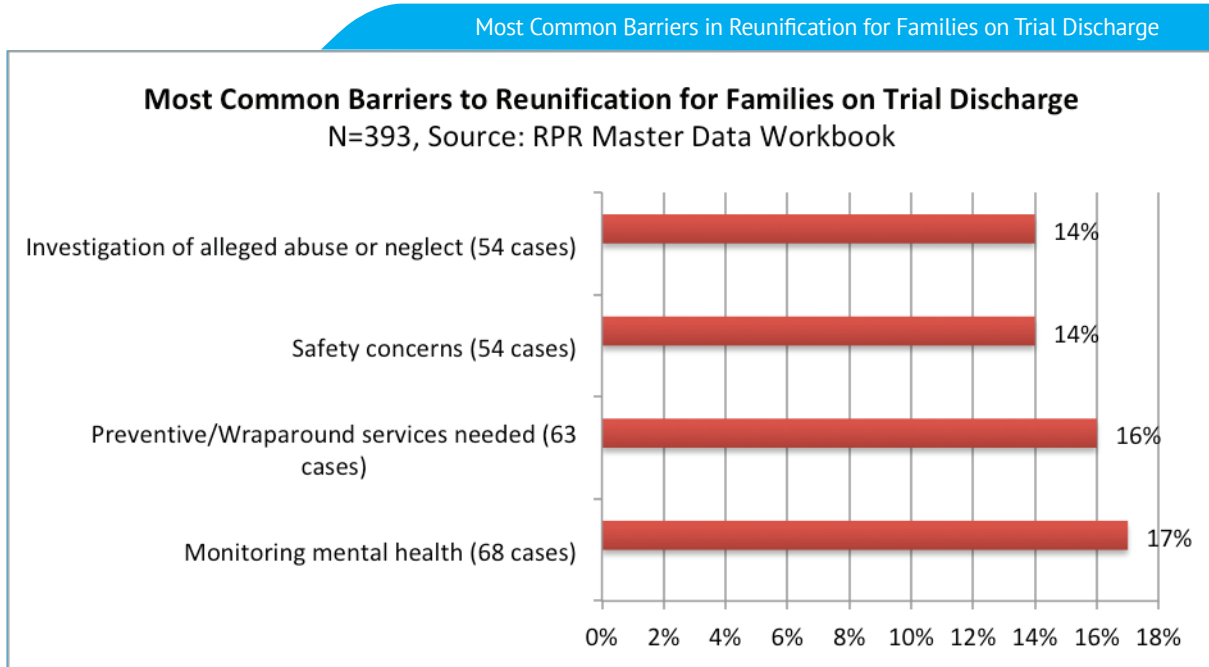


In one out of five reunification cases, a parent’s lack of participation in services presented a barrier to permanency. This includes a range of services for parents, including but not limited to substance abuse treatment, individual mental health services, family therapy, parenting classes, anger management and domestic violence counseling. Since the service plan is often court ordered, participation is both a way to address the reasons for removal and to show the judge that parents and agency staff are actively working toward reunification. It is worth noting that parents are not always in agreement with their service plans and many of these families faced other barriers that may have resulted in non-participation in services. For example, they may disagree with a particular diagnosis or treatment option. This underscores the importance of involving families in co-creating service plans and coming to consensus whenever possible.

Many families faced multiple, simultaneous challenges such as mental health concerns, substance abuse and housing instability. These challenges may be interconnected; for example, a parent may use drugs or alcohol to cope with an untreated mental illness, and this in turn can make it difficult to maintain stable housing.

While lack of safe and stable housing cannot be the sole reason for maintaining children in foster care, and NYC parents and children have a right to shelter services, challenges related to housing did emerge as a theme in reviews of reunification cases. These challenges ranged from overcrowding to homes needing repairs to parents waitlisted for NYCHA housing, among others.

In reviews of trial discharge cases, agencies reported the need to monitor mental health stability and the need for preventive/wraparound services as the most common barriers to final discharge. The next most common barriers were general safety concerns that did not rise to the level of removal from trial discharge, followed by cases where ACS was investigating an allegation of abuse or neglect against a member of the family on trial discharge. In several instances, the safety concern had led to an ACS investigation, so these two barriers were connected. The chart below illustrates the barriers to reunification most commonly reported for RPR trial discharge cases.

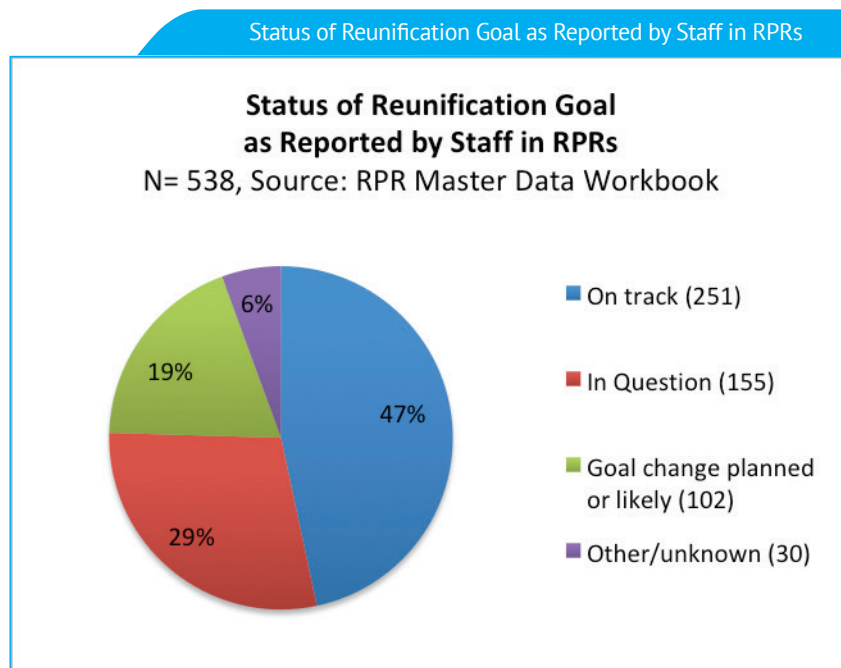


Preventive and/or wraparound services can help strengthen and stabilize families during and after trial discharge. In some instances, families had begun preventive services and needed to progress further in order to ensure a safe transition out of foster care. In other cases, families were declining to receive preventive services. In addition, during the time when RPRs were taking place, NYC was experiencing a backlog of preventive referrals. Consequently, some families on trial discharge were waiting to be connected to these services. ACS has since eliminated the backlog so that families no longer have to wait for preventive services (see additional details below).

In nearly half of RPR reunification cases where the child(ren) was not on trial discharge, staff reported that the reunification permanency goal was “in question” or likely to change.

By focusing on long-stayers, RPRs selected some of the City’s most complex and clinically challenging cases. Agencies have to wrestle with decisions about safety and risk for families that are seeking reunification but have not achieved it after many months. Helping families to safely reunify is ACS and provider agencies’ first priority. However, if reunification is not expected by the time a child is in care for 15 of the most recent 22 months, policy requires agencies to concurrently plan by filing to terminate parental rights and changing the permanency goal, unless they can demonstrate a compelling reason not to. Compelling reasons include a child age 14 or older not consenting to adoption even after counseling; child being cared for by a relative; child is the subject of a pending disposition on an abuse or neglect case; agency has not provided the parent(s) with necessary and legally required services; and parent has been incarcerated or in a residential substance abuse program and has maintained a meaningful role in the child’s life, among others.

Overall, children in RPR cases whose goal remains reunification after 24+ months in care, but for whom that goal is uncertain or unlikely to be met, face the likelihood of increased stays in foster care. The following chart indicates that this applies to almost half of the children whose cases were reviewed.



Among all reunification cases reviewed, staff stated that reunification was “on track” for 47% of children, “in question” for 29%, and goal changes were already planned or very likely for another 19%. Robust concurrent planning—making active efforts toward a secondary permanency plan while simultaneously working toward reunification—can help mitigate delays in cases that will ultimately require goal changes. ACS is working with foster care agencies to improve concurrent planning and timely goal changes.

Steps Taken toward System Improvement

ACS and its provider partners have already taken many steps to spread best practices and address the barriers to reunification discussed above.

- **Funding for Trial and Final Discharge Supports:** In 2017, ACS approved new funding for all 27 foster care agencies to intensify services and supports for families preparing for trial and final discharge. This funding is an opportunity for providers to better support families during this important transition, thereby helping families reunify more timely and avoid re-entry to foster care. Examples of enhanced services initiated by agencies include, but are not limited to: a reunification specialist/coach who works with families before and after discharge to connect them to services, peer mentors or advocates with firsthand experience of the child welfare system who can be a resource for families; an evidence-based program designed to improve the transition to reunification and support families' long-term stability and well-being; or blended foster care and preventive caseloads that allow for caseworker continuity and a more seamless transition between foster care and preventive services.
- **Family Time Initiative:** To encourage agencies to support increased family time to achieve more timely reunification, ACS has embarked on a Family Time initiative. ACS has delivered more than 100 trainings on Family Time to 2,000 staff across 27 foster care agencies and the ACS' Division of Child Protection. ACS collaborated with parent advocacy organizations Rise and the Osborne Association on projects to strengthen parental voice in visiting practice and heighten visibility of children in foster care with parents who are incarcerated. ACS also worked with national expert Public Catalyst to develop new assessment tools to improve agency visiting spaces and help staff assess when families are ready to transition from supervised to unsupervised visitation.
- **Foster Care Task Force Recommendations:** The Task Force publically released its report, including 16 recommendations for system improvement, in March 2018. One Task Force recommendation focuses on continuing efforts to increase the frequency and quality of Family Time while strengthening practices such as Parent to Parent meetings to build positive working relationships between parents and foster parents. Another Task Force recommendation involves advocating for an increase in the State-set housing subsidy available to families who are reunifying. Other Task Force recommendations indirectly support reunification by advocating for the increased use of appropriate kinship resources and enhancing the information that parents receive to help them navigate the child welfare system and know their rights from the beginning of ACS involvement.
- **Improving Access to Preventive Services:** Since the time of the RPRs, ACS substantially decreased wait time for families to receive preventive services. In 2017, ACS added 600 new preventive services program slots and also sharply increased access to family support services for families that reunified from foster care. In March 2017, ACS had a backlog of almost 500 families waiting months for preventive services that had been recommended for them after investigations. After an aggressive implementation of business process improvements, that backlog was eliminated by August 2017, and ACS now remains able to provide timely preventive service referrals to families.

B. RPR Findings: Adoption

Adoption Highlights

Bright Spots:

- In one out of every five cases where the goal was adoption, staff reported that there were no barriers and that the cases were moving toward permanency.
- The vast majority of long-stayers with an adoption goal have stable placements with foster parents willing to adopt.
- Permanency reviews once a child reaches eight to ten months in care provide a key opportunity to support long-term permanency planning.
- The best practices reported during RPRs involved a proactive approach to adoption administrative processes.
- Excellent adoption practice involves strong parent engagement throughout the life of a case and helping families fully understand all their permanency options.

Challenges:

- Delays in the TPR process impede timely adoptions.
- Adjournments, court concerns or judicial requests occurred in one out of three RPR adoption cases with TPR petitions filed.
- When parents are not fully engaged throughout the life of a case, adoptions are delayed.
- For legally freed children, administrative processes are the main challenge delaying adoptions. These processes include completing home studies, receiving vital records, and maintaining consistent communication with adoption attorneys, among others.

Steps Taken toward System Improvement:

- ACS streamlined the adoption subsidy process, reducing the amount of paperwork required and resulting in much faster subsidy approvals. Previously, only 5% of subsidies were approved within 30 days; ACS increased this to 70%.
- ACS centralized and streamlined the process for providers to request birth certificates for children in foster care. The ACS Vital Records Unit processed more than 4,600 birth certificate requests from January 2017 to January 2018.
- ACS maintains a list of children legally freed for adoption and holds each agency accountable for achieving timely adoptions for the children in their care. ACS shares monthly data with foster care agencies, including overall progress to date as well as child-specific data, to help agencies meet their targets.
- ACS offers technical assistance to foster care agencies on specific cases as well as program-level strategies such as business process improvement and data-based performance management.
- ACS Senior Practice Consultants work onsite at a select group of agencies to help program staff strengthen permanency practice and troubleshoot challenges.
- ACS meets regularly with Family Court leadership to share data, discuss trends, and collaborate on our shared priority to achieve timely permanency for NYC children.
- In 2017, ACS announced an \$11 million initiative in partnership with the Dave Thomas Foundation to expand the Wendy's Wonderful Kids model, designed to increase recruitment of adoptive parents for children with special needs and older youth.
- To help agencies engage more parents and improve the time to TPR resolution, ACS provided expert training on open adoption to all foster care agencies.

Children with a permanency goal of adoption represent 48% of all NYC’s long-stayers in foster care.²¹ ACS reviewed over a thousand adoption cases during the RPRs. This chapter will provide a brief overview of the adoption process and then describe the findings from those reviews.

The Adoption Process

The adoption process involves many steps. These steps can happen in slightly different sequences for different children, but all of the steps must occur before an adoption can be finalized. Steps to adoption include:

- 1) A caregiver is identified who is willing and able to adopt the child.
- 2) Either a petition for Termination of Parental Rights (TPR) is filed or the parents choose to legally surrender their parental rights in family court.
- 3) An adoption subsidy application is submitted and approved by New York City and State.
- 4) The foster care agency completes an adoption home study and collects the required paperwork from the adoptive family to accompany the home study (clearance forms, medical forms, etc.).
- 5) Via the TPR process or a surrender, the child is legally “freed” for adoption.
- 6) The foster care agency sends the adoption home study, subsidy approval, court order recognizing that the child is legally “free” and other required paperwork to an adoption attorney representing the foster parent.
- 7) The attorney for the foster parent drafts the adoption petition and files for adoption finalization in family court.
- 8) The court reviews the petition and schedules a hearing.
- 9) The court holds an adoption hearing to decide on the adoption.

Parents may contest the TPR, which affects the permanency timeline and completion of the steps above. A 2016 analysis showed that, in NYC, the majority of TPR petitions that resulted in the termination of parental rights occurred on inquest, meaning the parent did not appear for the trial.²² When parents do appear and are successful in contesting the TPR, the court may rule in favor of the parent or grant a “suspended judgment” (delaying the effect of a finding), and this may ultimately allow the parent and child to reunify. However, when the parent is not successful in contesting the TPR, adoptions generally do not occur as quickly.

The RPRs included two categories of children with adoption goals: those for whom a TPR petition had been filed but the children were not yet legally “freed,” and those who were legally “freed” for adoption. The following table illustrates the numbers of cases reviewed in each category. This section describes findings across both RPR adoption categories.

²¹ Source: ACS analysis of data from CCRS as of 4/6/2018 and Connections as of 4/12/2018, including children with a length of stay of two years or longer, currently in 24-hour foster care.

²² Action Research analysis of NYC Family Court analytic file dated April 1, 2016, generated from the Unified Court Management System.

Children with a permanency goal of adoption, TPR petition filed but not yet legally “freed”	Children with a permanency goal of adoption, legally “freed”
475 cases reviewed	595 cases reviewed

It should be noted that children with an adoption goal for whom no TPR had been filed, as well as children with a placement move in the past twelve months, were not included in the RPR sample. While the case reviews did not focus on these specific groups of children, ACS’s permanency strategies do address their needs. For example, ACS is working with provider agencies to improve the timeliness of TPR filings, and the Wendy’s Wonderful Kids initiative provides dedicated resources for providers to seek adoptive parents for children without existing adoptive resources. Please see the “Steps Taken toward System Improvement” section for more details.

Adoption Bright Spots

In one out of every five RPR adoption cases, staff reported that there were no barriers and that the cases were moving toward permanency. Below are some bright spots and best practices that have contributed to progress on adoption cases.

The majority of long-stayers with an adoption goal have stable placements with foster parents willing to adopt.

Among all long-stayers with a goal of adoption in NYC, 73% have been in the same foster care placement for at least the past 12 months. During the review of the RPR eligible adoption cases, reviewers asked whether the foster parent was willing to adopt the child, and 94% of the time, the answer was yes. This represents a major strength in NYC’s adoption practice: most children awaiting adoption live in stable homes with caregivers who are ready to make a lifelong commitment as adoptive parents.

Permanency reviews once a child reaches eight to ten months in care provide a key opportunity to support long-term permanency planning.

As mentioned in the reunification section above, in addition to required Family Team Conferences and Permanency Hearings, many foster care agencies have periodic case reviews built into their program management and/or quality assurance processes. Assessing the status of permanency plans at the eight to ten month mark in a case can help case planning staff clarify what needs to happen for the family to reunify. Permanency reviews also support concurrent planning. If reunification is in question or not possible, staff have the chance to bolster the concurrent plan and take concrete steps to prepare for a goal change to adoption or KinGAP within the prescribed timeframes.

The best practices reported during RPRs involved a proactive approach to adoption administrative processes.

Program staff interviewed about adoption cases said their agencies use the following practices to move cases forward quickly:

- **Collaborate with foster parents to gather important documents from the start of a pre-adoptive placement.** Agencies can avoid delays by proactively helping pre-adoptive parents learn what documents will be required of them and begin collecting those documents long before they are due to the adoption attorney. This includes vital records such as birth and marriage certificates that can take substantial time to retrieve. Agencies can work with pre-adoptive parents to gather adoption documents during the TPR process, so that, if and when the child becomes freed for adoption, the paperwork is ready to proceed.
- **Start early on home studies and adoption subsidy applications. Across NYC, practice ranges widely in terms of when agencies complete adoption home studies and submit subsidy applications to ACS.** For instance, children in one-third of RPR adoption cases followed best practice guidance and had home studies done before the children were legally freed. Agencies that start early on home studies and subsidy applications have a head start in the post-freing phase of the adoption process. ACS has also revamped the subsidy approval process to make it quicker.
- **Ensure that adoption packets are complete and correct.** The adoption process tends to move more quickly when agencies submit complete adoption packets to the adoption attorney at one time. The RPR team also heard that some agencies have an in-house expert review adoption materials to ensure all paperwork is present and correct before it goes to the attorney. Agencies that work with foster parents to gather documents in advance, and that get a head start with adoption home studies and subsidy applications, give themselves more time to review documents carefully and submit them all at once to the adoption attorney.
- **Communicate early and often with attorneys.** Because adoption attorneys do not work directly for foster care agencies, both parties need a shared system in order to maintain close communication. For example, some agencies have monthly meetings with adoption attorneys. Other agencies receive a list of outstanding documents from the attorneys on a regular basis.
- **Create clear and comprehensive tracking systems, and use the data to track progress and manage performance.** Agencies that perform best on adoption timeframes tend to use tracking systems that can alert staff proactively about upcoming tasks. The best trackers include data on when paperwork is due and also when it expires, so that staff can stay ahead of deadlines and management can help support staff to ensure deadlines are met. High-performing agencies also review adoption data regularly to assess progress toward annual targets, identify and address bottlenecks, and recognize great work.

Excellent adoption practice involves strong parent engagement throughout the life of a case and helping families fully understand all their permanency options. Strong family engagement is not just critical for reunification—it is also critical for when it becomes apparent that reunification is no longer an option. At its best, strong family engagement creates the opportunity to avoid the protracted TPR process in favor of an open adoption. Research

shows that open adoption generally benefits all members of the extended family of adoption.²³ In an open adoption, parents agree to support the adoption by conditionally surrendering their parental rights and remaining a part of a child's life to the degree that it is in the best interests of the child. For example, a parent might agree to give up their parental rights on the conditions that their child be adopted by a trusted foster parent and that they can continue to see their child on certain holidays after the adoption is finalized. Because a surrender is generally a much faster legal process than a TPR, open adoptions tend to happen more quickly than other adoptions. However, open adoption is not right for everyone; it is important for families to understand all of their permanency options, and for foster care agency staff to support them in deciding which option makes sense for them. Over the past few years, ACS has worked with experts on the open adoption process to provide support to foster care agency staff, family court judges and attorneys, and foster parents to help them understand the option of open adoption.

Lastly, working hard at family engagement is critical even when it is not successful. TPRs are subject to delay or failure if an agency cannot demonstrate that they made diligent efforts to engage the parents. Maintaining close communication with parents also means that agencies will be able to notify them about TPR proceedings, and without this notification, the TPR process can be delayed.

Adoption Challenges

Despite the “bright spots” identified above, too many NYC children are waiting too long to be adopted. RPRs illuminated some of the reasons why.

Delays in the TPR process impede timely adoptions. Many foster care agencies are filing for TPRs later than federal guidelines require (after 15 of the last 22 months in foster care). Among all NYC long-stayers with a TPR petition filed, the median time from foster care entry to TPR filing is 25 months, and the range amongst foster care agencies is wide.²⁴ A quarter of children with adoption goals had TPRs filed within 19 months of foster care entry, but the majority—three quarters—waited significantly longer than 15 of 22 months in care.

Once filed, the TPR process for NYC children can take a very long time; for legally freed children on ACS's citywide list of long-stayers, it took a median of 22 months.²⁵ Surrenders are rare: in December 2017, for example, only 5% of children freed for adoption were freed through a surrender; and 95% were freed through a TPR.²⁶ This means almost all children on the path to adoption go through the lengthy TPR process.

RPRs involved in-depth case reviews of 475 cases in the midst of this process, where children had an adoption goal and a TPR petition filed but were not yet legally freed. When reviewers inquired specifically about barriers to timely TPRs, case planning staff identified the following as the most common barriers in these cases.

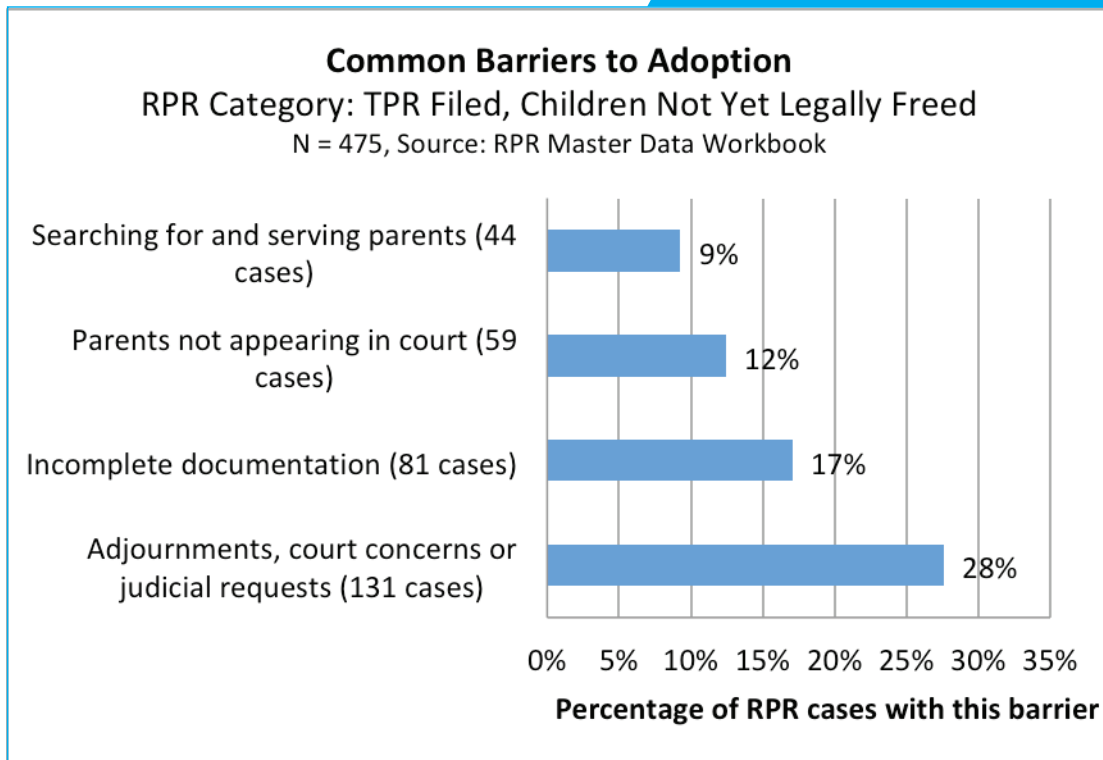
23 Child Welfare Information Gateway (2013). “Working with Birth and Adoptive Families to Support Open Adoption.” https://www.childwelfare.gov/pubPDFs/f_openadoptbulletin.pdf.

24 Source: ACS Integrated Permanency List September 2017.

25 Source: ACS Integrated Permanency List September 2017.

26 Source: February 2018 Agency Status Reports issued by ACS's Division of Policy, Planning and Measurement.

Common Barriers to Adoption



Adjudgments, court concerns or judicial requests occurred in 28% of RPR adoption cases with TPR petitions filed.

A variety of situations can arise during TPR proceedings that may warrant a continuance by a judge or request for adjournment by an attorney for the agency, birth parent, foster parent or child. This may occur when, for example, a particular person is not present for the hearing, or when one party is not prepared to proceed. A judge may also choose to postpone a hearing or TPR decision for other reasons—for example, to give parents another chance to participate in substance abuse treatment or more time to follow up on particular aspects of the service plan. (Note: In some cases, the Court’s delay of the TPR may successfully aid in achieving another permanency outcome that does not require termination of parental rights.) In addition, some TPR proceedings extend over many months because they involve many witnesses.

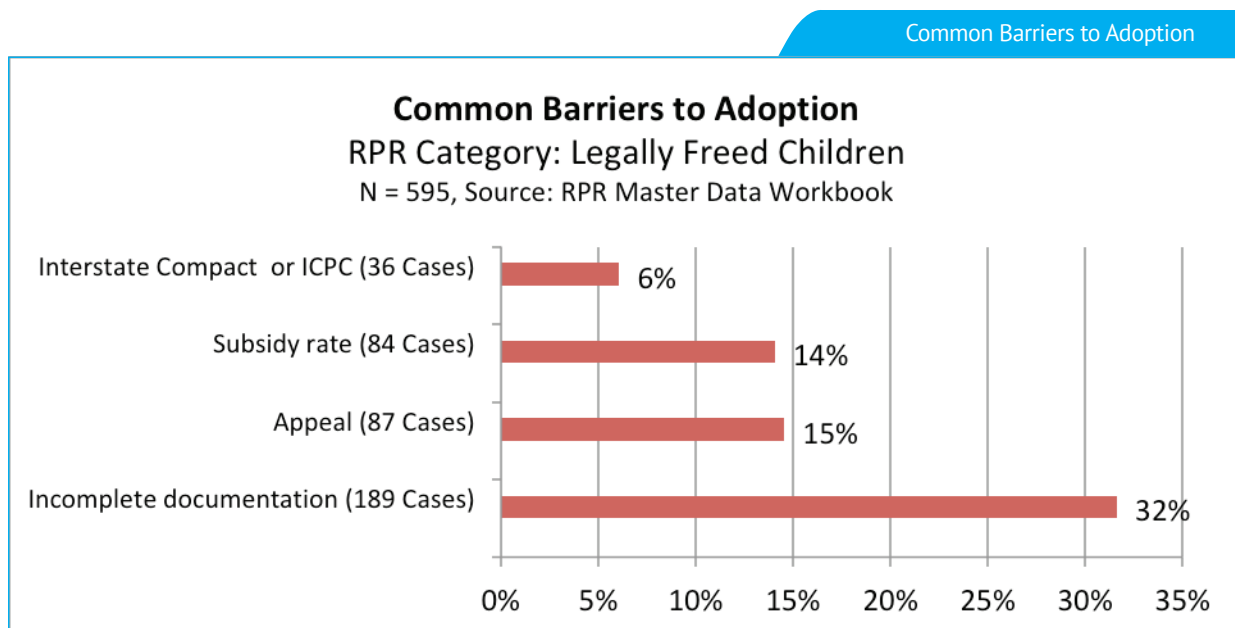
When parents are not fully engaged throughout the life of a case, adoptions are delayed. Among the barriers above, searching for and serving parents as well as parents not appearing in court both relate to parent engagement. Combined, these barriers appeared in 21% of cases with TPR petitions filed but children not yet legally freed. This is the flipside of the bright spot mentioned above—strong parent engagement is not occurring consistently across the City, and when it is missing, adoptions can be significantly delayed. A petition for termination of parental rights is a serious legal action, and the hearing process cannot begin until parents are notified of the petition and given a full opportunity to appear in court and defend themselves or the agency is

able to demonstrate diligent efforts to locate and serve the parents. Ideally, the agency staff or attorney notify the parents, the parents appear in court, and the TPR is resolved – either through negotiation (a surrender) or after a contested proceeding. However, the RPRs highlighted that agencies and agency attorneys struggle to engage parents in the TPR process.

If foster care agency staff are not in close contact with parents, or if parents' whereabouts are unknown, it is difficult to officially notify them (also known as legal "service"). When parents do not appear in court, agency staff report delays because the parent has not been served with notice; the agency attorney cannot prove that service was made; or if the parent is missing, the agency attorney has to satisfy the court that a "diligent search" was conducted to find and serve the parent. A TPR hearing can continue without the parent, but only once the court is assured that either the parent received notice or the attorney arranged for a "diligent search" for a parent who is missing. Agency staff can reduce this delay by working with attorneys to engage parents in the TPR process or, if parents cannot be engaged, share the critical contact information necessary to serve notice or provide the foundation for the diligent search.

In addition to the five most common barriers shown in the chart and discussed above, RPRs uncovered several other barriers that each applied to a small number of cases. The most frequent barrier after those shown above was agency staff turnover; however, this barrier appeared in fewer than 40 cases.

In RPR adoption cases in which children were already legally freed, a different set of barriers emerged. The following chart summarizes the most common barriers reported.



For legally freed children, administrative processes are the main challenge delaying adoptions. Once a child becomes freed for adoption, foster care agencies and pre-adoptive families work with attorneys to prepare and file an adoption petition in family court. RPRs showed that streamlining this business process is a critical area of opportunity for agencies to accelerate adoptions. The court requires many specific steps to be taken—for instance, the home study and adoption subsidy application completed, and a substantial number of documents gathered by agencies and foster families—and across NYC, there is a wide range in the amount of time this takes. Among all children on ACS’s list of long-stayers with an adoption petition filed, one quarter had their petitions filed within three months of their legal freeing date. These are the children benefiting from the proactive administrative processes mentioned in the “bright spots” section above. However, these best practices are not consistently implemented in all NYC foster care programs. As a result, the median wait time from freed date to adoption petition filing date is six months, and for some children, it is over a year.²⁷

RPRs illustrated that incomplete documentation was the barrier for one in three legally freed children awaiting adoption. This reflected a wide variety of challenges related to the completion of the adoption packet, including but not limited to: changes in the household composition of the adoptive home, a need for updated medical forms or clearances, adoption forms requiring corrections or updates, incomplete home studies, or challenges obtaining vital records (i.e. birth, death, marriage or divorce certificates, especially those from outside of New York). It also included instances where foster care agencies were waiting to receive written freeing orders or dispositions from the court. Interestingly, a small number of attorneys handle the vast majority of adoptions in NYC. ACS convened meetings with the five adoption attorneys who finalized over 70% of the adoptions in CY 2016. The attorneys corroborated the RPR findings, reporting that incomplete documentation is the primary barrier to finalizing adoptions. ACS is working with foster care agencies to increase the best practices of submitting complete adoption packets (rather than submitting documents as they become available) and establishing a process for regular communication with adoption attorneys.

A second common barrier, also related to administrative processes, was the adoption subsidy rate. If a child has special needs, an adoptive parent can receive an increased subsidy rate reflecting this level of need. However, to receive the increased adoption subsidy rate, the foster board rate must first be increased, which involves a separate application and approval process. The applications in turn require evidence of the level of need, which often means that the agency must arrange for the child to undergo one or more evaluations. Thus, if the need for a rate increase is discovered when a child is otherwise ready to be adopted, the steps to establish the rate increase can cause significant delays. ACS encourages agencies to assess and identify the need for an enhanced rate early in a case in order to avoid future delays; this, too, was mentioned in the “bright spots” section above and already occurs at several NYC agencies.

²⁷ ACS Integrated Permanency List, September 2017.

Appeals affect a small but significant number of children. ACS recognizes and respects a parent’s due process right to appeal a TPR decision. However, when appeals occur, they significantly delay filing of the adoption petition. Appeals of the TPR ruling were a barrier in 15% of RPR cases in the adoption/legally freed category. Adoption petitions cannot be filed while an appeal is pending, and it can take many months to resolve the appeal. Occasionally, a parent’s attorney submits a notice of appeal but does not actually “perfect” the appeal, so one way that foster care agencies can avoid delays is to communicate proactively with their attorneys regarding the status of any potential appeals.

Adoptions across state lines tend to take longer than those within NY State. RPRs showed that 6% of adoptions for legally freed children were delayed because of challenges with interstate compacts (formally known as Interstate Compact on the Placement of Children or “ICPC” cases). Working across states and systems can make it difficult to gather information and documents in a timely manner.

While the four key barriers discussed above collectively account for the majority of adoption/legally freed cases, RPRs revealed several other barriers that applied to a small number of cases (fewer than 30 cases each). Examples include ACS investigations of pre-adoptive homes, agencies awaiting written freeing orders from the court, agency staff turnover, foster parents no longer willing to adopt, children’s mental health needs, and a variety of court concerns.

Steps Taken toward System Improvement

ACS and its provider partners have already taken many steps to address the barriers above and to strengthen adoption practice across the City.

- In 2016, ACS streamlined the adoption subsidy process by redesigning forms and reducing the amount of paperwork required. Following implementation of these changes, the percentage of subsidies approved within 30 days increased from 5% to 70% over a six-month period.
- ACS centralized and streamlined the process for providers to request birth certificates for children in foster care. The ACS Vital Records Unit processed over 4,600 birth certificate requests from January 2017 to January 2018. ACS has worked successfully with the provider agencies to decrease the number of requests returned by the NYC Department of Health and Mental Hygiene due to inaccurate information included in the request form. ACS continues to train provider agency staff on the request process to ensure that birth certificates requests are submitted timely to assist with permanency practices.
- ACS maintains a list of children legally freed for adoption and holds each agency accountable for achieving timely adoptions for the children in their care. ACS support agencies in this effort by sharing monthly data, including overall progress to date as well as child-specific data. ACS adoption experts meet with foster care agencies frequently to provide technical assistance and help agencies improve their adoption performance.

- In 2016, ACS created the Office of Strategic Program Support, and within it the Technical Assistance and Support Unit, to provide targeted technical assistance to improve case practice, business process and performance management. This includes coordinating the No Time to Wait initiative to help families move more quickly to reunification, adoption and KinGAP.
- ACS provides a quarterly Integrated Permanency List (IPL) to each foster care agency. The list includes all children in care for 15 months or longer and shows the permanency goal as well as dates of important milestones in the permanency process. ACS coaches foster care program leaders to use this data to track and improve permanency performance, including identifying and addressing bottlenecks in their adoption process.
- ACS also created new ACS Senior Practice Consultant positions in 2016 to work onsite at a select group of provider agencies in order to strengthen daily permanency practice and troubleshoot case planning challenges as they arise.
- ACS meets regularly with Family Court leadership to share data, discuss trends, and collaborate on our shared priority to achieve timely permanency for NYC children. These meetings have focused largely on improving time to adoption for legally freed children.
- In 2017, ACS announced an \$11 million initiative in partnership with the Dave Thomas Foundation to expand the Wendy's Wonderful Kids model, designed to increase recruitment of adoptive parents for children with special needs and older youth.
- To help agencies engage more parents and improve the time to TPR resolution, ACS made available expert training on the open adoption process to all foster care agencies and provided learning sessions for other child welfare stakeholders.
- ACS offers individual case consultation services; any NYC program can refer a case for consultation.

C. RPR Findings: KinGAP

KinGAP Highlights

Bright Spots:

- For children who cannot safely return home, KinGAP can be the fastest route to permanency.
- RPRs reflected foster care providers' increasing capacity to help families understand and utilize this permanency option.

Challenges:

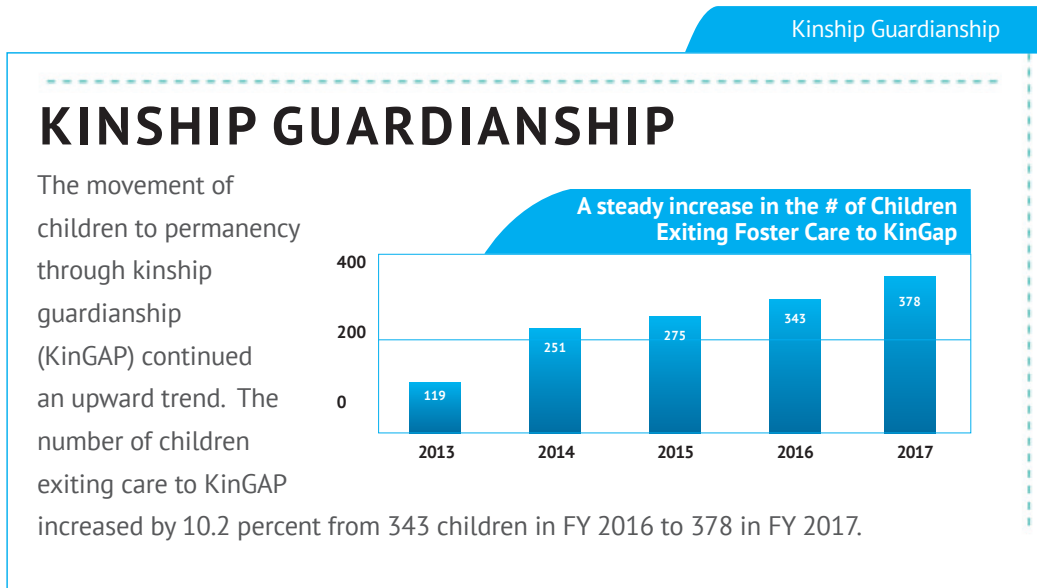
- Administrative processes delay KinGAP cases and should begin sooner in the timeline of a case.
- Children and their kinship caregivers need services.
- Relationships between parents and kin caregivers are crucial, and complicated.

Steps Taken toward System Improvement:

- Effective March 12, 2018, the expansion of the New York State KinGAP legislation allows “fictive kin,” such as family friends, teachers, or neighbors, to become eligible for KinGAP. Additionally, the new legislation extends eligibility for KinGAP subsidy payments until youth reach age 21, regardless of the age at which kinship guardianship was legally granted.
- ACS maintains a list of KinGAP-eligible children and holds each agency accountable for achieving timely permanency for the children in their care. ACS shares monthly data on progress with foster care agencies and offers case-specific and program-level technical assistance related to KinGAP.
- ACS has launched an initiative to increase placement with kin. Based on the understanding that children fare better when placed with kin, this initiative includes adding staff exclusively dedicated to searching for kin when children first enter foster care, bringing in national kinship care experts to train staff in best practices, increasing staff awareness through a “Find Family and Friends First” campaign, setting aggressive kin placement goals, monitoring placement data, and providing intensive technical assistance to help foster care agencies locate kin caregivers for children who initially enter care in non-kin foster homes. The proportion of children placed with kin when they first enter care has increased from 27% in FY 2016 to 30% in FY 2017 to 32% in the first four months of FY 2018.

The RPRs also included cases with a permanency goal of kinship guardianship. The Kinship Guardianship Assistance Program (KinGAP), which became available to families in New York State beginning in 2011, is designed for a child to achieve a permanent placement with a relative or close family friend. This program provides financial support and in most cases medical coverage for the child, beginning with the child's discharge from foster care to KinGAP. The level of financial support is similar to the maintenance payments received while the child was in foster care.

The use of KinGAP has been growing steadily in NYC, with an increase in the number of children exiting foster care to KinGAP each year. The chart below illustrates this upward trend.



While many other jurisdictions use KinGAP especially for teens and older youth, NYC has so far tended to use it for younger children. The median age of RPR children with a goal of KinGAP was eight years old. As KinGAP continues to expand and agencies hone their business processes, ACS is focusing in particular on the opportunity to utilize this permanency option for older youth.

NYC’s long-stayer population (defined as 2+ years in care) includes 227 children with a goal of KinGAP.²⁸ In order to expand the sample of KinGAP cases slightly, ACS RPRs included cases where children had been in foster care for 15 months or more and had a KinGAP goal and/or a KinGAP Agreement approved by ACS.²⁹ This applies to a total of 377 children, and ACS reviewed 297 of these cases. This chapter offers a brief description of the KinGAP process followed by the findings of KinGAP case reviews.

The KinGAP Process

The KinGAP process involves a few major steps in order to reach permanency. The steps include:

- 1) If reunification is ruled out and guardianship (rather than adoption) is in the child’s best interest, the foster care agency holds a conference with the family and changes the permanency goal to KinGAP.
- 2) To be eligible for KinGAP, the child must have lived with the kinship foster parent for at least six months, and the family court case must have completed a fact finding hearing.
- 3) Agency staff work with the kinship foster family to gather documents and complete the KinGAP Agreement and Application.

²⁸ Source: ACS analysis of Integrated Permanency List, January 2018.

²⁹ Source: ACS analysis of Integrated Permanency List, January 2018.

- 4) The Agreement and Application are submitted to the ACS KinGAP unit for review and approval.
- 5) The kinship foster parent identifies an attorney, and upon receipt of all approved paperwork, the attorney prepares and files the guardianship petition in family court.
- 6) The court reviews the petition and schedules a hearing.
- 7) The court holds a KinGAP hearing and finalizes the guardianship agreement.

The RPRs included two categories of children with KinGAP goals: those for whom a KinGAP Agreement was already approved by ACS, and those for whom an Agreement was either not yet submitted or submitted and pending approval. For both groups, the children must have been in foster care for at least 15 months. The table below shows the numbers of cases reviewed in each category.

Children with a permanency goal of KinGAP, without an approved agreement	Children with a permanency goal of KinGAP, with an approved agreement
158 cases reviewed	139 cases reviewed

This chapter describes findings across both KinGAP categories.

KinGAP Bright Spots

For children who cannot safely return home, KinGAP can be the fastest route to permanency.

The KinGAP process involves fewer steps than the adoption process, largely because a termination of parent rights is not required. This allows families to avoid a lengthy and often painful trial and move more quickly to a permanent living arrangement outside of foster care. The average time from foster care entry to discharge for children reaching permanency through KinGAP is 39 months; approximately two years shorter than the average time children spend in foster care before being adopted.³⁰ In 22% of all KinGAP cases reviewed, staff reported that there were no barriers to moving forward with the permanency plan.

RPRs reflected foster care providers' increasing capacity to help families understand and utilize this permanency option.

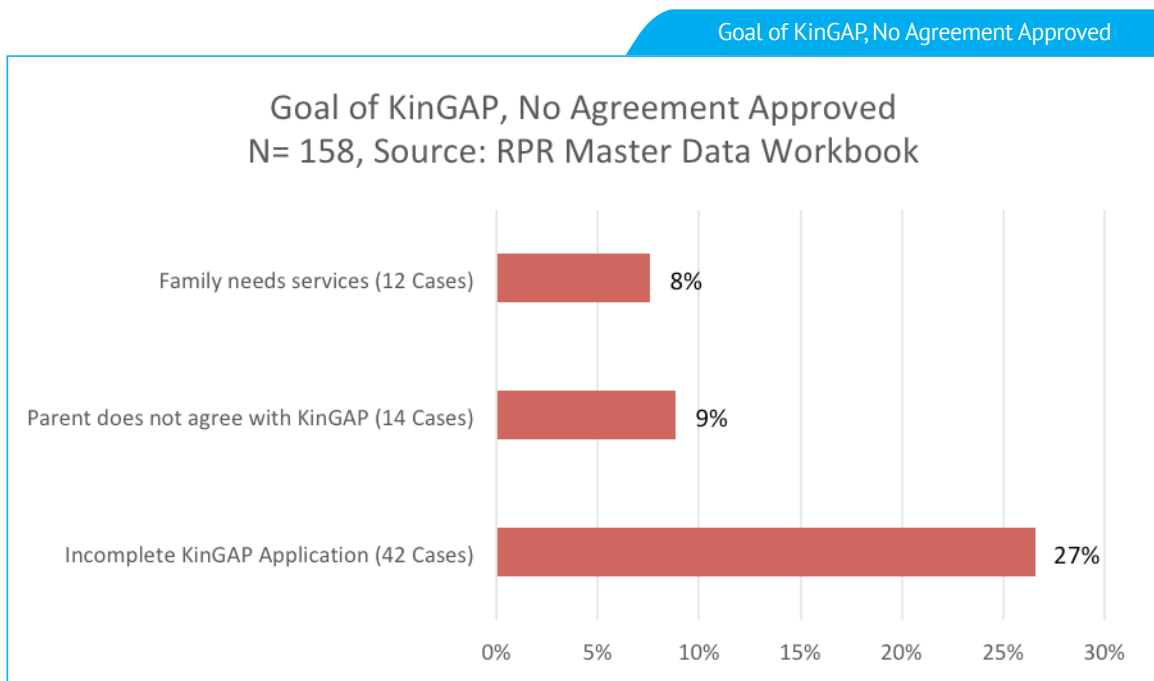
KinGAP is a relatively new permanency option in New York, and agencies have worked to build their capacity to use it effectively. RPR reviewers identified several best practices to help children successfully exit foster care to KinGAP. First, when caseworkers discussed KinGAP with families early in the course of their foster care case, this increased awareness and allowed families to begin thinking about their future permanency options. Many agencies reported having KinGAP champions and/or experienced staff help explain KinGAP, since families as

³⁰ Average time from foster care entry to discharge to adoption is 63 months. Source: ACS analysis of CCRS data for children discharged to adoption or KinGAP during CY 2017.

well as staff tend to be less familiar with this permanency plan as compared to reunification or adoption. Written materials also help convey both facts and factors to consider. Many agencies said they had an internal expert review KinGAP applications prior to submitting them to ACS in order to ensure accuracy and completeness. This helped streamline the approval process and avoid the need for corrections or resubmissions. Agencies also described other efforts to strengthen and streamline their business processes around KinGAP, from the start of a foster care case to the point of KinGAP finalization. These efforts included identifying potential kin caregivers for children initially placed in non-kin foster homes, inviting ACS to review KinGAP applications onsite where immediate corrections could be made, and communicating closely with the attorneys filing KinGAP petitions.

KinGAP Challenges

As in RPRs with other permanency goals, reviewers identified a wide range of barriers delaying KinGAP cases. No single barrier affected more than one-third of families with a KinGAP goal. The chart below shows the most common barriers in cases where a KinGAP agreement was not yet approved.

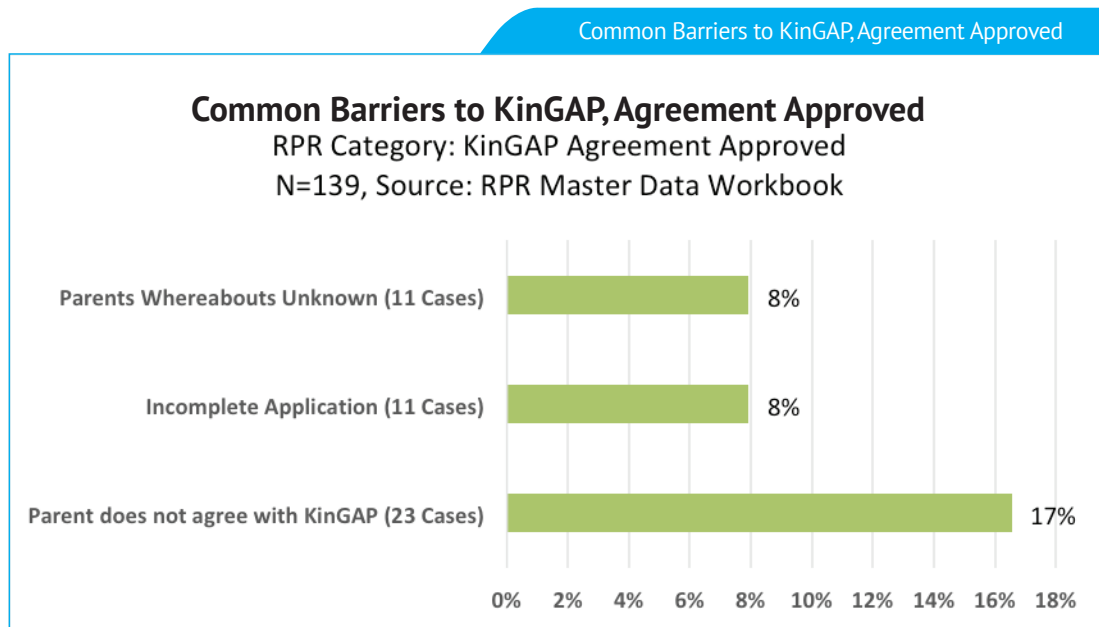


Administrative processes delay KinGAP cases and should begin sooner in the timeline of a case.

Across all RPR KinGAP cases, children had been in foster care for an average of over two years before their goals were changed to KinGAP, and then they waited another six months before KinGAP applications were submitted to ACS. Concurrent planning needs to be more robust so that agencies are ready to submit KinGAP applications shortly after a child’s goal changes. For RPR children awaiting an approved KinGAP agreement, incomplete applications were the primary barrier to permanency. This includes applications submitted with missing or inaccurate information as well as those not yet submitted.

Children and their kinship caregivers need services. The chart above also shows that a small but significant group of kin caregivers need services in order to make permanency possible. Removal from their homes and entry into foster care is traumatic for children, even if their foster parent is a friend or relative. Consequently, these children have a variety of needs. Meanwhile, most kin caregivers were not planning to become foster parents or permanent guardians; they have stepped up to this role to care for children they love. ACS and its provider partners must work together to make sure that children and their kin caregivers have sufficient support, including wraparound or other services as needed. Funds and other resources are available to help kinship foster families meet certification requirements and to strengthen kin placements. ACS is working with providers to increase the use of these resources.

Once KinGAP agreements are approved, the case progresses toward finalization. RPRs uncovered the following barriers keeping some cases from moving forward.



Relationships between parents and kin caregivers are crucial, and complicated.

For KinGAP cases with an approved agreement, the most common challenge reported in RPRs (though still only appearing in 17% of cases) was parents disagreeing with the permanency plan of kinship guardianship. Even if parents are supportive of their child being placed with kin, they may contest a KinGAP plan because they want the child to return home. Some kin caregivers are understandably cautious about finalizing guardianship arrangements with which their relatives do not agree. While a parent’s consent is not legally required for KinGAP to proceed, the permanency plan tends to be more successful if all family members agree, so sometimes finalizations are delayed while the parties work to build consensus.

As shown above, a small set of cases are delayed because parents' whereabouts are unknown. Parents must be served legal notice for a KinGAP to proceed, so agencies must conduct a diligent search to find these parents. In addition, KinGAP applications had to be redone in a small number of cases. This can occur because documents expire, due to a child moving to a new kinship placement, or because of a change in the household composition of the kinship foster home, among other reasons.

Steps Taken toward System Improvement

ACS advocated for **expansion of the New York State KinGAP legislation**, which passed in 2017, allowing children residing with "fictive kin" such as family friends, teachers, or neighbors to become eligible for KinGAP. Extending KinGAP eligibility to these families means that many children who were waiting long periods of time to be adopted by fictive kin can now have a shorter path to permanency. The new legislation also extends eligibility for KinGAP subsidy payments until youth reach age 21 (previously, youth were only eligible up to age 18, except in cases where they were already 16 or older when their guardianship agreements were signed).

ACS maintains a list of KinGAP-eligible children and holds each agency accountable for achieving timely permanency for the children in their care. Since FY 2016, ACS has shared **monthly data** on progress with foster care agencies, and offered **case-specific as well as program-level technical assistance** related to KinGAP.

In 2017, ACS launched an **initiative to increase placement with kin** because the research shows that children and youth placed with kin have better outcomes. Increasing the number of children placed with kin also expands the pool of children who are potentially eligible for KinGAP. ACS' kin initiative includes setting aggressive goals, monitoring placement data, adding staff exclusively dedicated to searching for kin when children first enter foster care, bringing in national kinship care experts to train staff in best practices, increasing staff awareness through a "Find Family and Friends First" campaign, and providing intensive technical assistance to help foster care agencies find kin caregivers for children who initially enter care in non-kin foster homes. The proportion of children placed with kin when they first enter care has increased from 27% in FY 2016 to 30% in FY 2017 to 32% in the first four months of FY 2018.

VI. An Examination of Older Youth Permanency

Introduction

Supporting youth to transition out of foster care, whether through reunification, adoption, kinship guardianship or independent living (a.k.a. Another Permanency Planned Living Arrangement - APPLA), is a complex and important charge. Like all youth at this critical time, youth in foster care are exploring their sense of self, seeking opportunities for independence, understanding the importance of asking for help, learning to self-advocate, and seeking experiences that will promote personal growth and change. While these age and developmentally appropriate milestones are being learned and mastered, youth need healthy, positive, and stable relationships with family, friends, the community, and other agents to serve as supports and to provide guidance. Research finds that the more exposure to positive connections youth have, the more likely they are to develop a greater sense of self; cope with trauma and adverse experiences; build and strengthen resilience; and, plan for the future.³¹

Youth in foster care have experienced and are coping with a myriad of trauma associated with maltreatment, abandonment, and/or other circumstances that resulted in out-of-home placement. This is also compounded by adolescence. The United Nations Children's Fund describes adolescence as a "pivotal time for us to build on [children's] development in the first decade of life, to help them navigate risks and vulnerabilities, and to set them on the path to fulfilling their potential."³² When youth in foster care are supported and connected to resources, they are less likely to enter into another public system, such as the homeless or criminal justice system; have better mental and physical health outcomes; are less likely to become a teen parent; and have better educational and employment outcomes.³³

The cases of older youth who met the criteria for the Rapid Permanency Reviews (RPRs) were reviewed (in care 2 years or more, in a stable placement, and with a goal of reunification, adoption or KinGAP) and are included in the Case Review section of this report. Simultaneously, ACS worked with national child welfare experts Public Catalyst and Action Research to conduct a separate analysis of our older youth population that is presented here. This review focused on analyzing permanency outcomes among youth ages 13-17 years in foster care.

Additionally, ACS completed the first annual Youth Experiences Survey of youth in foster care ages 13+. The results of the Youth Experiences Survey are available on the ACS website and have informed the ACS five-year plan.

31 Hanson Langford, B. and Badeau, S. (2013). "Connected by 25: A Plan for Investing in the Social, Emotional and Physical Well-Being of Older Youth in Foster Care." Foster Care Workgroup and Youth Transition Funders Group. http://www.ytfg.org/wp-content/uploads/2015/02/FCWG_Well-Being_Investment_Agenda.pdf

32 United Nations Children's Fund (2011). "The State of the World's Children 2011: Adolescence, an Age of Opportunity. https://www.unicef.org/adolescence/files/SOWC_2011_Main_Report_EN_02092011.pdf.

33 "Improving Outcomes for Older Youth in Foster Care" (2008). Casey Family Programs. <https://isc.idaho.gov/cp/docs/Improving%20Outcomes%20for%20Older%20Youth.pdf>

As of January 2018, there were 910 youth ages 13-17 in care two years and longer. These youth account for almost a quarter (21%) of NYC's long-stayer population. The average length of stay for these youth was four years and the median was three years. The majority (44%) have a goal of adoption, one third (33%) have a goal of reunification, and the remaining have a goal of APPLA (13%), KinGAP (6%), and other (4%).³⁴

Bright spots

The majority of youth ages 13-17 years are placed with a foster parent in a family-based setting. ACS' first priority when a youth cannot be safely maintained in their home of origin is to place them in a family setting with a foster parent in a foster home – in FY 2017, 54% of initial placements for youth were in a family-based setting. While residential care is appropriate for some youth in foster care, it is meant to be a temporary intervention to address the youth's treatment needs and not a permanent placement. Although one in three youth may be placed in residential care initially, the majority are ultimately moved to a family-based placement. As a result, residential care utilization in New York City is 9%, significantly lower than New York State (18%) and national (14%) rates.³⁵ Pivotal to maintaining the majority of youth in a family-based setting is supporting our foster parent caregivers who take on this important charge. ACS has collaborated with provider agencies to develop and strengthen supports for foster homes that understand the unique needs of these youth and are dedicated to assisting them in their transition through adolescence.

Foster parents are willing to provide homes for youth in foster care. A common myth is that foster parents are unwilling to serve as a placement resource for teenagers; however, data on caregivers reveals that more than half (52%) have provided a home to a youth. Additionally, one in five will accept a youth at first placement and, once caregivers serve as a resource for one youth, they are willing to serve as a placement resource for more than one teenager.

The entry of youth ages 13-17 years into foster care has decreased 9% in FY 2017 in comparison to FY 2015.

While the total number of children placed in foster care did not change significantly from FY 2015 to FY 2017, the total number of youth ages 13-17 years who were placed into foster care dropped from 1,062 in FY 2015 to 966 in FY 2017, a 9% decrease. Through increased investment in Preventive Services, ACS has developed programs that specifically support youth and their families, further mitigating the need for youth to enter into foster care.

³⁴ Source: NYC Integrated Permanency List, January 2018. The total numbers exclude youth on trial discharge and those absent from care. Family foster care (FFC) includes non-specialized FFC, therapeutic FFC, and special medical FFC.

³⁵ Kids Count Data Center. "Children in foster care by placement type." <https://datacenter.kidscount.org/data/tables/6247-children-in-foster-care-by-placement-type?loc=34&loct=2#detailed/2/34/false/573,869,36,868,867/2622,2621,2623,2620,2625,2624,2626/12994,12995>. "The AFCARS Report, Preliminary FY2015 Estimates as of June 2016." U.S. Department of Health and Human Services, Administration for Children and Families, Administration for Children, Youth and Families, Children's Bureau. <https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport23.pdf>

ACS has leveraged partnerships with foundations, nonprofits, universities, and other City agencies to increase its education and workforce development supports and resources for youth. Through the development of the ACS Office of Employment and Workforce Development, several programs have been created and expanded to provide educational and career planning via mentoring, work-based learning, and employment and career advancement.

Challenges

Youth who do not return home within the first year of foster care are less likely to return home. This analysis examined 13-17 year olds who entered into foster care in calendar year 2010. By honing in on these youth from the 2010 time period there was the ability to see permanency outcomes over a five year span. The findings revealed that for youth entering foster care for the first time at age 13-17 years, 1 out of 3 returned home within the first year of entering foster care. By year five, two out of three youth achieved permanency via reunification, adoption or KinGAP, and one out of three youth aged out of foster care. Recognizing the integral role of adult connections for youth, ACS has projects focused on strengthening reunification practices and identifying potential permanent resources for youth in foster care, as well as initiatives geared toward supporting youth who are transitioning out of foster care to live independently.

Youth with a history of foster care entries who do not reunify within the first year are more likely to age out of foster care. Similar to the youth who experienced foster care for the first time at ages 13-17 years, one out of three youth who had at least one previous foster care entry will return home within the first year of entry into foster care; however, the likelihood of achieving permanency does not increase over time for these youth. By year five, two out of three youth will age out of foster care. For youth with a history of entry into foster care, the charge to safely secure permanency is urgent and must occur within the first year of placement.

There are youth in foster care more than two years who have a goal of reunification that appears unlikely to be achieved. Many of these youth are not close to returning home and are not close to achieving permanency via KinGAP or adoption. Agency staff remain optimistic and focused on reunification for youth for extended periods of time. While federal mandates have been implemented to prevent children from languishing in care, parents who are actively participating in services may be granted additional time to address any challenges so that a youth may safely return home; however, as time passes and the child is getting older, it can become more difficult to achieve permanency through adoption or KinGAP if the reunification ultimately fails. To avoid this circumstance, agencies should be concurrently planning and advocating to the Family Court for an alternative permanency goal in the event the parent stops preparing for the youth's return home. Similarly, youth developmentally are wrestling through these years with their own sense of themselves and the litigation associated with an adoption – which can feel like a rejection of their biological family and roots – can feel alienating. Each youth must consent to an adoption or a guardianship and securing that consent is a delicate and expert process. For agency staff, facilitating adolescent permanency requires a different set of skills than those for working with younger children.

There are youth ages 13-17 years who have been in care for two years and longer with a goal of adoption but are not legally free. Almost half (402, 44%) of the youth who are long stayers have a goal of adoption; however, many (47%) are not freed for adoption. A termination of parental rights (TPR) has been filed for the majority of these youth (77%); however, more than half (60%) were filed in 2016 or earlier.³⁶ While a decision on the TPR may not be rendered for a variety of reasons (e.g., the youth does not have an adoptive resource), these youth remain in foster care with a permanency goal that may be difficult to attain before the youth becomes a legal adult.

Steps taken toward system improvement

ACS has launched **Home Away from Home**, a major initiative underway specifically focused on the recruitment and retention of foster homes. Understanding the importance of espousing caregivers so that they remain engaged and committed to meeting the needs of young people, through this initiative ACS has collaborated with foster care provider agencies to implement strategies that strengthen the supports and resources available to caregivers.

As of January 2018, there were **138 long stayers age 13-17 years, who are legally free and in an adoptive placement.**³⁷ ACS is providing case-level consultation to the provider agencies to address any barriers that are preventing these youth from being adopted.

ACS has expanded its partnership with the Dave Thomas Foundation to implement the **Wendy's Wonderful Kids (WWK) program city-wide.** WWK is an evidence-based, child-focused recruitment model in which skilled professionals have the sole mission of finding permanent, loving families for youth in foster care. Over three years, 40 additional adoption recruiters – bringing the total to 42 recruiters in NYC – will be hired and based at the provider agencies. The goal of the recruiters is to identify permanent resources for children and youth who are more likely to age out of foster care.

ACS has partnered with Fostering Change for Children (FCFC) to provide training to provider agency and ACS staff on **open adoption.** While open adoption may not be suitable for all families, it is a viable option for families for which reunification is no longer an option, but do not want to proceed with the lengthy, and often traumatic, termination of parental rights process. Open adoption may be especially appealing to youth, as it allows for them to remain connected to their parents and reduces the pressure a youth may feel to “choose” between his/her biological family and adoptive family. ACS has also collaborated with FCFC to provide direct consultation to foster care agencies on cases involving youth and families who may benefit from an open adoption.

In 2017, ACS launched an **initiative to increase placement with kin** because the research shows that children and youth placed with kin have better outcomes. Increasing the number of children placed with kin is twofold – kin may act as a supportive resource for parents and youth, and if reunification cannot occur, kin may serve a

³⁶ Source: ACS Integrated Permanency List, January 2018.

³⁷ Source: ACS Integrated Permanency List, January 2018.

permanent resource for the youth. ACS' kin initiative includes setting aggressive goals, monitoring placement data, adding staff exclusively dedicated to searching for kin when children first enter foster care, bringing in national kinship care experts to train staff in best practices, increasing staff awareness through a "Find Family and Friends First" campaign, and providing intensive technical assistance to help foster care agencies find kin caregivers for children who initially enter care in non-kin foster homes. Since the launch of this effort, the proportion of children placed with kin when they first enter care has increased from 27% in FY 2016 to 30% in FY 2017 to 32% in the first four months of FY 2018.

ACS has partnered with the provider agencies to identify youth who have been in care over two years, have a goal of reunification, and are currently living with kin to **explore whether KinGAP is a viable permanency option for the youth and family.**

ACS has focused its efforts to improve the experiences of youth in foster care by developing education and employment programs. ACS established a new Office of Employment and Workforce Development Initiatives (OEWDI) in 2016. OEWDI has collaborated with a variety of partners to develop programs and strengthen the capacity of foster care agencies to support youth with educational and career planning. OEWDI initiatives include the following:

- ACS has partnered with the Department of Youth and Community Development (DYCD) to offer the **Vulnerable Youth Summer Youth Employment Program (VY SYEP)** and the **Young Adult Internship Program (YAIP+)**. VY SYEP is an eight-week paid summer internship program for youth ages 14-24 years. YAIP+ is a 14-week paid internship program for foster care and juvenile justice involved youth ages 16-24 years. Through YAIP+, youth are also connected to nine months of support services to advance their career and educational goals.
- ACS has collaborated with the Department of Citywide Administrative Services (DCAS) to administer the **College Aide Internship Program (CIP)**. This 13-week program targets college students in foster care and/or juvenile justice. Through the internship, youth are engaged in career-oriented work projects based on their interests. The program utilizes a model that combines service learning projects with onsite work skills-building.
- The **CUNY/ACS Fostering College Success Initiative (FCSI)** ensures that youth receive comprehensive and individualized educational services, including tutoring, mentoring and academic advising. ACS partners with New York Foundling to provide the college-based wrap-around services.
- ACS has collaborated with First Star, Inc. to implement the **First Star College of Staten Island (CSI) Academy**. This program offers students dorms in the College's residence halls throughout the summer. As part of this program, students visit the CSI campus one Saturday per month during the academic year to participate in academic and life-skills programs.

- ACS has partnered with the Workplace Center at Columbia University to provide the **Young Adult Work Opportunities for Rewarding Careers (YA WORC)** to five foster care agencies. This evidence-based curriculum delivers instruction and guidance to foster care agency staff so that they can prepare youth for meaningful careers through a career club model. The YA WORC collaborates with iFoster to provide job placement and supportive services after youth complete the career club.
- With funding from the Pinkerton Foundation, the **Workforce Professional Training Institute (WPTI)** and ACS host a series of roundtable discussions with workforce development programs and foster care provider agencies to help them build capacity for an on-site, mentored internship program.
- ACS has contracted with driving schools in the Bronx and Brooklyn to provide a **driver's education program** that supports youth in foster care in obtaining their driver's license. The license will provide youth with the opportunity to access careers that require the ability to drive. ACS works with foster care agency staff to coordinate a referral process for classroom instruction and on-the-road driving lessons.
- The **Civil Service Pathways for Youth Program (CSPYP)** builds capacity to support the work readiness of young people to secure civil service positions. Through a curriculum prepared in partnership by Community Change Inc. (CCI), foster care agency staff facilitate the learning process to assist youth to pass the civil service exam.
- ACS has collaborated with **iFoster**, a national non-profit that offers supportive and employment-based services to youth in foster care. iFoster works with corporations, employers, government agencies and foundations to provide services through an inclusive online platform that connects youth with the resources and opportunities to become successful. iFoster's services are customized to each youth and utilizes a trauma-informed curriculum.

Finally, ACS is working with its partners to advance the recommendations of the NYC Interagency Foster Care Task Force specific to older youth in foster care:

1. Advocate to NYS DOH to change policy so that youth exiting foster care are eligible for home and community based waiver services (HCBS).
2. Facilitate access to home visiting programs for pregnant and parenting youth in foster care.
3. Ensure that eligible foster youth aging out of foster care receive the NYCHA N-Zero priority, if they are legally in the care and custody of ACS, regardless of the location of their foster placement.
4. Advocate to increase state-set housing rental assistance for youth and families.
5. Explore the expansion of transitional housing for youth leaving foster care.
6. Provide integrated, accessible information on housing resources for youth leaving foster care.
7. Explore strategies to provide expert support services to youth ages 16-25 – both during and after foster care – to achieve career, educational and housing goals.

VII. Conclusion

ACS has made significant gains in addressing the needs of children in foster care over the last several years and yet, important opportunities remain to make a positive difference for children who come to the attention of NYC's child welfare agency and its partners. The ACS Foster Care Strategic Blueprint FY 2019-FY 2023 is designed to focus on these opportunities and continue the progress that has been made. As required by Local Law 143 of 2016, ACS will review and update the five-year plan on annual basis. ACS looks forward to sharing the continued progress over the next five years.

VIII. Appendices

Appendix A: Local Law 143 of 2016

**LOCAL LAWS
OF
THE CITY OF NEW YORK
FOR THE YEAR 2016**

No. 143

Introduced by Council Members Levin, Grodenchik, Dromm, Salamanca, Eugene, Richards, Chin, Miller, Johnson, Cohen, Menchaca, Lander, Van Bramer, Rosenthal and Kallos.

A LOCAL LAW

To amend the administrative code of the city of New York, in relation to a five-year plan to address barriers to permanency

Be it enacted by the Council as follows:

Section 1. Chapter 9 of title 21 of the administrative code of the city of New York is amended by adding a new section 21-909 to read as follows:

§ 21-909 Five-year plan to address barriers to permanency. a. Definitions. For the purposes of this section, the following terms shall have the following meanings:

Another planned permanent living arrangement (APPLA). The term “another planned permanent living arrangement (APPLA)” means a permanency planning goal to assist foster care youth in their transition to self-sufficiency by connecting the youth to an adult permanency resource, equipping the youth with life skills and, upon discharge, connecting the youth with any needed community and/or specialized services.

Kinship guardianship assistance program (KinGAP). The term “kinship guardianship assistance program (KinGAP)” means the permanency and discharge outcome for children for whom a relative has become the legal guardian via court order and whereby the relative and ACS has entered into a final KinGAP agreement for a subsidy pursuant to the Kingship Guardianship

Assistance Program.

b. By December 31, 2017, ACS shall submit to the speaker of the council and post on its website a five-year plan to address barriers to permanency for youth in foster care. Such plan shall include, but not be limited to, the following information:

1. A case study of a statistically significant sample of children who have spent at least two years in foster care, but no less than 5% of the total foster care population, including but not limited to the following aggregated information:

(a) Age, gender, race/ethnicity, and, if available, sexual orientation;

(b) Permanency plan, including reunification, adoption, KinGAP, APPLA, or other.

(c) The number of months in care; and

(d) Barriers to permanency, including but not limited to parental homelessness, parental relapse, parental childcare needs, education issues, family court delays, lack of permanency resources, juvenile incarceration, college enrollment, and any other barrier as determined by ACS.

2. An analysis of how ACS plans to address the systemic barriers to permanency identified during the case study required pursuant to paragraph 1.

c. The five-year plan shall be reviewed and updated by ACS annually and the updated version shall be submitted to the speaker of the council and posted online one year following the submission of the initial five-year report and annually on such date thereafter.

d. In the fifth year covered by each such five-year plan, ACS shall submit to the speaker of

the council and post on its website a new five-year plan to address barriers to permanency for the next succeeding five-year period not later than six months prior to the last day of such fifth year. The previous five-year report shall remain on ACS' website when the new report is added.

e. No information that is otherwise required to be reported pursuant to this section shall be reported in a manner that would violate any applicable provision of federal, state or local law relating to the privacy of information respecting youth in foster care or that would interfere with law enforcement investigations or otherwise conflict with the interests of law enforcement. If any category requested contains between 1 and 5 youth in foster care, or allows another category to be narrowed to between 1 and 5 youth in foster care, the number shall be replaced with a symbol.

§ 2. This local law takes effect immediately and is deemed repealed 15 years after it becomes law.

THE CITY OF NEW YORK, OFFICE OF THE CITY CLERK, s.s.:

I hereby certify that the foregoing is a true copy of a local law of The City of New York, passed by the Council on October 27, 2016 and approved by the Mayor on November 16, 2016.

MICHAEL M. McSWEENEY, City Clerk, Clerk of the Council.

CERTIFICATION OF CORPORATION COUNSEL

I hereby certify that the form of the enclosed local law (Local Law No. 143 of 2016, Council Int. No. 1191-A of 2016) to be filed with the Secretary of State contains the correct text of the local law passed by the New York City Council and approved by the Mayor.

STEPHEN LOUIS, Acting Corporation Counsel