
DRAFT

FY2026

**Foster Care
Scorecard Methodology**

August 2025

NYC Administration for Children's Services

Table of Contents

1. Introduction and Overview	3
2. Scored Elements and Annual Continuous Quality Improvement Report	4
3. Scored Elements	5
Children in 24h Care Seen	5
Placement Stability	5
Combined Permanency	6
Placements to KIN	7
Placements to Non-KIN	8
4. Annual Continuous Quality Improvement Report	8
Safety and Stability	8
Frequency of Casework Contacts with Child	8
Frequency of Casework Contacts with Caretaker	8
Frequency of Casework Contacts with Parent/ Discharge Resource	8
Supervisory Assessment.....	8
Re-entry To Foster Care	8
Service Planning	8
Meet The Present Need.....	9
Home Recruitment.....	10
Focus On Family.....	10
Frequency of Parent and Child Visits	10
Frequency of Sibling Visits	10
Family Team Conferencing	10
Success and Well-Being	10
Educational Well-Being	10
Medical Review	10
Preparing Youth for Adulthood Checklist	11
Timeliness and Accountability	11
Timely Data Entry	11
5. Scoring and Ranking	12
 APPENDIX 1: FY2026 FOSTER CARE SCORECARD TEMPLATE	13
APPENDIX 2: FY2026 FOSTER CARE PAMS METHODOLOGY	15
APPENDIX 3: FY2026 FOSTER PARENT CERTIFICATION AUDIT	35

1. Introduction and Overview

The New York City Administration for Children's Services Foster Care Scorecard is an annual assessment of foster care program performance. Developed by ACS's Office of Research and Analytics (ORA) within the Division of Policy, Planning and Measurement (DPPM), the Scorecard and accompanying comprehensive quality improvement measures are derived from administrative data and qualitative case reviews conducted through the Provider Agency Measurement System (PAMS).

The Scorecard is a vital tool that offers ACS and its contracted provider agencies an expansive view into program practices, identifying strengths as well as areas needing improvement, monitoring compliance with key program standards, and supporting strong outcomes for children in care and their families. The findings from the Scorecard play a crucial role in informing our system's shared quality improvement initiatives, which are facilitated by the Office of Agency Program Assistance (APA) in close coordination with the ACS Division of Family Permanency Services (FPS).

What's New in FY26

Building on the redesign completed in FY24 and implemented in FY25, ACS has now fully transitioned to the new Foster Care Scorecard. The FY26 Scorecard continues the tiered accountability framework with Scored Elements and Continuous Quality Improvement (CQI) metrics.

Core Metrics – Scored Elements remain the primary accountability measures, with underlying data provided monthly through the Monthly Status Report (MSR).

CQI Metrics continue to guide quality improvement using PAMS, Medical Audit, and Preparing Youth for Adulthood (PYA) Checklist data on the same schedule as FY25.

Residential Programs – The Residential Scorecard will again include the same metrics as Section I (Scored Elements) and Section II (CQI metrics), but will not be scored. Work continues with providers to design a scoring framework.

Additional Changes:

In FY26, the Reunification Cohort bonus category will now also credit permanency discharges to adoption and KinGap, in addition to reunification discharges after 365 days during FY26.

3.1. Scored Element – Children Seen

Previously titled Children in 24-Hour Care Seen, this measure has been expanded. It now includes both children in 24-hour Family Foster Care and those on Trial Discharge. The measure evaluates whether these children are seen by the provider at least once per month.

The 4.2 "Meet the Present Need" category now focuses on Home Recruitment rather than the

timeliness of data entries. Data entry timeliness has been moved to a new category, 4.5 “Timeliness and Accountability,” to highlight the importance of accurate and prompt documentation.

2. Scored Elements and Annual Continuous Quality Improvement Report

Table 1. EFFC/SFFC Scored Elements

Metric Weight		Metric
25%		Children in 24h Care Seen (see 3.1)
25%		Placement Stability (see 3.2)
25%		Combined Permanency (see 3.3)
25%	12.5%	Placements to KIN (see 3.4)
	12.5%	Placements to Non-KIN (see 3.5)

Table 2. EFFC/SFFC Annual Continuous Quality Improvement Report

Domain	Metric
Safety and Stability	Frequency of Casework Contacts with Child (See 4.1.1)
	Frequency of Casework Contacts with Caretaker (See 4.1.2)
	Frequency of Casework Contacts with Parent/ Discharge Resource (See 4.1.3)
	Supervision (See 4.1.4)
	Re-entry To Foster Care (See 4.1.5)
	Service Planning (See 4.1.6)
Meet The Present Need	Foster Home Recruitment (See 4.2.1)
Focus On Family	Frequency of Parent and Child Visits (see 4.3.1)
	Frequency of Sibling Visits (see 4.3.2)
	Family Team Conferencing (see 4.3.3)
Success And Well Being	Educational Well-Being (see 4.4.1)
	Medical review (see 4.4.2)
	Preparing Youth for Adulthood Checklist (see 4.4.3)
Timeliness and Accountability	Timely Data Entry (see 4.5.1)

3. Scored Elements

3.1 Children Seen: This measure evaluates whether children in 24-hour Family Foster Care or on Trial Discharge are seen by the provider at least once a month.

Formula =
$$\frac{\text{\# Children in 24-hour care or on TD for the entire month w/ at least 1 face-to-face visit during the month}}{\text{\# of Children in 24-hour care or on TD for the entire month}}$$

The following children are excluded from the denominator:

- a. Children in absent status
- b. Children in residential facilities, pre-placement facilities, out-of-state placements, and special schools. Any facilities that are not foster homes (facility types 13, 14, 01, FA) are considered residential facilities

Data source: Connections, Billing Data (SSPS)

3.2 Placement Stability: This measure reflects the percentage of care days in which children did not experience a placement move during the fiscal year (FY). All children who spent at least one day with an agency or program are included in this measure's cohort.

Formula:

Step 1 – Calculate the rate of placement moves per 1,000 care days:

$$\text{Moves per 1,000 Care Days} = \left(\frac{\text{Total Placement Moves While at the Agency/Program}}{\text{Total Care Days While at the Agency/Program}} \right) \times 1000$$

Step 2 – Convert the move rate into placement stability:

$$\text{Placement Stability \%} = \left(1 - \frac{\text{Moves per 1,000 Care Days}}{1000} \right) \times 100$$

- A score of 100% means perfect stability (no moves).
- Lower percentages indicate more frequent moves.

Exclusions:

- a. Children in care for < 8 days
- b. Respite moves - moves to a facility for up to 21 days with a return to the original facility.
- c. Stepdown to a lower level of care (Res to SFFC/EFFC and SFFC to EFFC)
- d. Moves from/to CTH facilities

Data source: Connections, Billing Data (SSPS)

3.3 Combined Permanency: This measure represents the achievement of (1a) reunification within one year for the children who entered foster care during the prior fiscal year (Reunification cohort) + (1b) the achievement of reunification beyond 365 days and the

achievement of permanency through adoption or KinGap during the current FY for children who entered foster care during the prior fiscal year (Reunification cohort bonus) + (2) the achievement of permanency within one year for children who had been in foster care for 12 to 24 months on the first day of the FY (P2 cohort) + (3) the achievement of permanency within one year for children who had been in foster care for more than 24 months on the first day of the FY (P3 cohort).

Targets are set based on the number of children who entered foster care during the prior fiscal year.

- (1) a. Permanency for children who entered foster care during the prior fiscal year, Reunification Cohort: The permanency discharge target is 50% of prior FY entries to foster care. The reunification of any child within 365 days (≤ 365 days) of entry into foster care will count towards the numerator. The target is based on the federal standard used in the Child and Family Services Review for NYC to avoid a Performance Improvement Plan.
- (1) b. Permanency for children who entered foster care during the prior fiscal year, Reunification Cohort Bonus: No permanency discharge target. The reunification of any child after 365 days (> 365 days) of entry into foster care within the current FY will count towards the numerator.
 - M910s from the previous fiscal year to CTH facilities are excluded from the cohort used to calculate targets for the current assessment year.
 - Children discharged within 45 days of the placement (M910) date are excluded from the cohort used to calculate targets for the current assessment year.
 - Reunification credit applies to the agency the child was associated with at the time of discharge (M990 or M999 if there is no M990)
 - M990/M999 modifiers for Reunification are 570, 571, 572, 591
 - The Reunification Cohort bonus credit applies to reunification discharges that occur during the current assessment year and permanency discharges to adoption (573, 574) and KinGap (600) during the current assessment year.
 - For children with more than one foster care spell during the FY, the measure will only include the first spell.

Reunification Cohort Formula = $\frac{\text{\# of children who achieved permanency within 365 days} + \text{\# >365 days of placement during current FY}}{50\% \text{ of children who entered care during the prior FY}}$

- (2) Permanency for children in placement between >12 and 24 months, P2 Cohort: The permanency discharge target is 42% of children in care between 12 and 24 months on July 1 of the assessment year. The target is based on the federal standard used in the Child and Family Services Review for NYC to avoid a Performance Improvement Plan.
 - The measure will be applied to the agency and program where the child was placed on the first day of the fiscal year (regardless of whether the child was transferred to another program or agency during the fiscal year)

- Children on Trial Discharge (M970) are considered in placement. (Trial Discharge does not count as permanency.)
- The permanency date will be determined based on the M990/M999 date in CCRS
- M990/M999 modifiers used for this measure are 570, 571, 572, 573, 574, 591, 600
- Excludes CTH and preplacement facilities from both target calculation and credit

P2 Cohort Formula = # of children in care for 12 to 24m who achieved permanency during the FY

42% of children in care for 12 to 24m on the first day of the FY

(3) Permanency for children in placement greater than 24 months, P3 Cohort: The permanency discharge target is 36% of children in care more than 24 months on July 1 of the assessment year. The target is based on the federal standard used in the Child and Family Services Review for NYC to avoid a Performance Improvement Plan.

- The measure will apply to the agency and program that was providing services on the first day of the fiscal year (regardless of whether the child was transferred to another program or agency during the fiscal year)
- Children on Trial Discharge (M970) are considered in placement. (Trial discharge does not count as permanency.)
- The permanency date will be determined based on the M990/M999 date in CCRS
- M990/M999 modifiers used for this measure are 570, 571, 572, 573, 574, 591, 600.
- Excludes CTH and preplacement facilities from both target calculation and credit

P3 Cohort Formula = # of children in care for more than 24m who achieved permanency during the FY

36% of children in care for more than 24m on the first day of the FY

Combined Permanency Formula = Reunification numerator + Reunification bonus numerator + P2 numerator + P3 numerator
Reunification denominator + P2 denominator + P3 denominator

Data source: Connections, Billing Data (SSPS)

3.4 Placements to KIN: This measures the achievement of placement to KIN targets set by ACS. Program targets are allocated based on a program's census at the start of the year and its budgeted capacity as a share of the overall EFFC and SFFC system capacity.

- Includes initial placements into FC (M910)
- Includes the first transfer to an agency from preplacement facilities (M981/M982)
- Includes interagency transfers (M982)
- Captures KIN home transfers from ACS to the agency (M982)
- Reflects the current program type of the facility as claimed in SSPS. KIN homes initially opened as EFFC but later claimed as SFFC are counted as SFFC.

$$\text{Formula} = \frac{\text{\# of children placed into KIN homes during the FY}}{\text{KIN Target}}$$

Data source: Connections, Billing Data (SSPS)

3.5 Placements to Non-KIN: This measures the achievement of placement to Non-KIN targets set by ACS. Program targets are allocated based on a program's census at the start of the year and its budgeted capacity as a share of the overall EFFC and SFFC system capacity.

- Includes initial placements into FC (M910)
- Includes the first transfer from preplacement facilities (M981/M982)
- Includes interagency transfers (M982)
- Includes returns from absences to a diff. agency (M960/M980)
- Interagency moves from interim RIC facilities are excluded

$$\text{Formula} = \frac{\text{\# of children placed into non-KIN homes during the FY}}{\text{Non-KIN target}}$$

Data source: Connections, Billing Data (SSPS)

4. Annual Continuous Quality Improvement Report

4.1 Safety and Stability

4.1.1 Frequency of Casework Contacts with Child: This measures the frequency of face-to-face contact between the caseworker and the child. This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.1.2 Frequency of Casework Contacts with Caretaker: This measures the frequency of face-to-face contact between the caseworker and the person/people responsible for the child's day-to-day care (e.g., foster parent or childcare worker). This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.1.3 Frequency of Casework Contacts with Parent/Discharge Resource: This measure evaluates the frequency of face-to-face contact between the caseworker and the child's discharge resource (e.g., parent or relative). This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.1.4 Supervisory Assessment: This measures the frequency and content of supervisory case documentation. This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.1.5 Re-entry to foster care: This measure represents the rate at which children

who were discharged to reunification or KinGap from the prior fiscal year did not re-enter foster care within one year of discharge.

- The program from which permanency was achieved will be measured for this outcome. Any re-entry to care will be deducted from the numerator regardless of the reason for entry or agency/program of placement
- The measure includes children under the age of 17 years old who were in placement for at least 45 days before the permanency exit
- Children discharged from RIC, preplacement, NSP and LSP facilities are excluded
- Children and youth discharged to permanency will be identified by CCRS entries of M990 (M999 if M990 is missing) with the following modifiers ('570', '571', '572', '591', '600')
- Children and youth who re-enter foster care will be identified based on M910 within 365 days from M990 or M999

Formula = $\frac{\text{\# of discharges who did NOT return to care within 365 days of reunification or KinGap}}{\text{\# of discharges to reunification or KinGap during the prior FY}}$

Data source: Connections, Billing Data (SSPS)

4.1.6 Service Planning: This measure evaluates the degree to which Family Assessment and Service Plans (FASP) accurately capture the improvements and changes needed to achieve permanency, improve child wellbeing and address the identified service needs. This practice measure is extracted from the PAMS review and is based on the full index. See Appendix 2 for details.

4.2 Meet The Present Need

4.2.1 Foster Home Recruitment: This measures the achievement of Home Recruitment targets set by ACS. Program targets are based on each provider's role in expanding the foster care system's overall capacity, with an emphasis on developing newly certified foster homes that are able to take placements during FY26. The measure tracks the number of these homes that actually accept placements during FY26.

Formula = $\frac{\text{\# Newly certified homes with placements during FY26}}{\text{Home Recruitment Target}}$

Data source: FPS Division Tracking

4.3 Focus On Family

4.3.1 Frequency of Parent and Child Visits: This measure evaluates the frequency of face-to-face visits between a child and his/her discharge resource (e.g., parent or relative). This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.3.2 Frequency of Sibling Visits: This measures the rate of face-to-face visits between the child and siblings, when applicable, who are in foster care but who have been placed in separate foster care settings. This practice measure is extracted from the PAMS review. See Appendix 2 for details.

4.3.3 Family Team Conferencing: This measure evaluates the appropriateness of the permanency plan discussed at family team conferences and the degree to which the agency took concrete steps toward implementation. This practice measure is extracted from the PAMS review and is based on the full index. See Appendix 2 for details.

4.4 Success and Well-Being

4.4.1 Educational Well-being: This measures enrollment in a school or educational/vocational program/day treatment program, ongoing communication between the child's teacher and the caseworker, receipt of remedial assistance as needed and parental involvement in educational decision-making. This practice measure is extracted from the PAMS review and is based on the full index. See Appendix 2 for details.

4.4.2 Medical Review: This measure evaluates documentation of medical, dental, mental health, and sexual/reproductive services provided during one year. This process measure is based on the Medical Audit Unit's review of foster children's medical and mental health records, which focuses on the documentation of health services delivered during a designated calendar year. The Medical Review occurs annually for all foster family-based medical programs and biennially for all other programs. The most recent annual review is applied to the corresponding fiscal/assessment year.

Medical audits are classified into three categories:

- **EFFC Medical.** The Medical Audit is based on the calendar year. Full sample reviews, which utilize 10% of eligible cases (≥ 180 funded days in care) from the prior calendar year, are conducted every other year for each Voluntary Foster Care Agency (VFCA). Medical Audit results will consist of the full sample review results. The most recent Full Review will be used.

Special Medical and HIV reviews are for those in SFFC programs. Full sample audits are done on an annual basis. SFFC Medical Audit results will consist of the Full Review results.

- **Residential** Medical reviews are for RTC, AOBH, HTP and RIC programs. Full sample reviews are conducted every other year for each VFCA that administers these programs. The most recent annual review will be used for the corresponding assessment.

4.4.3 Preparing Youth for Adulthood (PYA) Checklist: This measures the timely submission of PYA Checklists. The APPLA Unit provides this data to all providers quarterly; an annual aggregate measure is provided at the end of the fiscal year.

- In cases of multiple submissions, the first agency to submit the PYA checklist within 60 days of the child's FASP due date will receive the credit (other agencies that had the child during the 60 days will not receive credit nor be penalized for not submitting).
- If a PYA checklist is not completed within the 60-day period, the child planning agency/program at the time of the FASP due date will be responsible for the incomplete PYA checklist (other agencies who had the child during the 60-day period will not be penalized for not submitting).

4.5 Timeliness and Accountability

4.5.1 Timely Data Entry: This measure evaluates the timeliness of data entries into Connections Activity (CCRS). CCRS Update date determines whether an activity was entered within 5 business days of the activity date (actdate). Below are the selected movements that are being evaluated:

- M950, Absent from 24hr-care
- M980, Return from TD to the same facility only
- M981, Transfer between same agency facilities
- M990, Final Discharge (excluding Adoption and KinGap)

**Formula = # of activities entered within 5 business days of activity date
of acts during the FY**

Data source: Connections, Billing Data (SSPS)

5. Scoring, Ranking and Citywide Comparison

5.1 Child-Program Associations: The provider agency's SSPS claim identifies the program each child/youth in a data measure cohort is associated with. Data reflects child-program associations at the time of the scheduled data extraction. Program discrepancies need to be addressed with the Reconciliation Center.

5.2 Evaluated Elements

- **Rate achieved:** The final rate achieved for each measure will be reflected in the report
- **Comparison to Citywide:** Program's performance on each measure will be presented compared to the Citywide performance by program type (EFFC, SFFC, or Residential)
- **Scoring:** The percent obtained using the formula specified for each corresponding measure will be used to calculate Overall Agency/Program results.
- **Ranking:** Programs are ranked based on their performance within their program type. Programs that achieve the same performance level will obtain the same ranking (e.g., more than one program could be ranked 3rd).

5.3 Continuous Quality Improvement (CQI) Report

- **PAMS for Evaluation:** The final rate achieved for each PAMS index will be reflected in the CQI report. Please see Appendix 2 for details.
- **Rate achieved:** The final rate for each non-PAMS measure will be reflected in the CQI report
- **Comparison to Citywide:** Program's performance on each measure will be presented compared to the Citywide performance by program type (EFFC, SFFC, or Residential)

APPENDIX 1: FY26 FOSTER CARE SCORECARD TEMPLATES:

FY26 Foster Care Scorecard Citywide, **EFFC/SFFC**

Scored Elements					
Comparison to Citywide	Children In Seen ¹	% children seen during FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Placement Stability ²	# Moves during FY26	# Care days during FY26	% With No Moves per 1,000 care days	
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Combined Permanency Score ³	Permanency Needed to Achieve FY26 targets	# Permanency Achieved	% Permanency Achieved	Target Met?
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Placements to KIN ⁴	Placements to KIN FY26 Target	# Placements to KIN	% Placements to KIN	
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Placements to Non-KIN ⁴	Placements to Non-KIN FY26 Target	# Placements to Non-KIN	% Placements to Non-KIN	
Same	EFFC				
Same	SFFC				
Annual Continuous Quality Improvement Report					
Safety and Stability					
Comparison to Citywide	Frequency of Casework Contacts	Agency Rate FY26			
Same	EFFC Frequency of Casework Contacts with Child				
Same	SFFC Frequency of Casework Contacts with Child				
Same	EFFC Frequency of Casework Contacts with Caretaker				
Same	SFFC Frequency of Casework Contacts with Caretaker				
Same	EFFC Frequency of Casework Contacts with Parent/DR				
Same	SFFC Frequency of Casework Contacts with Parent/DR				
Comparison to Citywide	Supervision	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Re-Entry to Foster Care (% Who Did Not Re-Enter) ⁶	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Service Planning	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Meet the Present Need					
Comparison to Citywide	8. Foster Home Recruitment ¹¹	FY26 Target	# Achieved	% of Target Achieved	
Same	Newly certified homes with placements during FY25	EFFC			
Same		SFFC			
Focus On Family					
Comparison to Citywide	Frequency of Parent and Child Visits	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Frequency of Sibling Visits	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Family Team Conferencing	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Success And Well-Being					
Comparison to Citywide	Educational Well-Being	Agency Rate FY25			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Medical review	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Comparison to Citywide	Preparing Youth for Adulthood Checklist	Agency Rate FY26			
Same	EFFC				
Same	SFFC				
Timeliness and Accountability					
Comparison to Citywide	4. Timely Data Entry ⁵	Agency Rate FY26			
Same	Data entered into to CNNX within 5 business days, All Programs				

FY26 Foster Care Scorecard

Citywide Residential

Annual Continuous Quality Improvement Report

Primary Metrics

Comparison to Citywide	Children Seen ¹	% children seen during FY26			
Same	Residential				
Comparison to Citywide	Placement Stability ²	# Moves during FY26	# Care days during FY26	% With No Moves per 1,000 care days	
Same	Residential				
Comparison to Citywide	Combined Permanency Score ³	Permanency Needed to Achieve FY26 targets	# Permanency Achieved	% Permanency Achieved	Target Met?
Same	Residential				

Safety and Stability

Comparison to Citywide	Frequency of Casework Contacts	Agency Rate FY26
Same	Residential Frequency of Casework Contacts with Child	
Same	Residential Frequency of Casework Contacts with Caretaker	
Same	Residential Frequency of Casework Contacts with Parent/DR	
Comparison to Citywide	Supervision	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Re-Entry to Foster Care (% Who Did Not Re-Enter) ⁴	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Service Planning	Agency Rate FY26
Same	Residential	

Focus On Family

Comparison to Citywide	Frequency of Parent and Child Visits	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Frequency of Sibling Visits	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Family Team Conferencing	Agency Rate FY26
Same	Residential	

Success And Well-Being

Comparison to Citywide	Educational Well-Being	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Medical review	Agency Rate FY26
Same	Residential	
Comparison to Citywide	Preparing Youth for Adulthood Checklist	Agency Rate FY26
Same	Residential	

Timeliness and Accountability

Comparison to Citywide	4. Timely Data Entry ⁵	Agency Rate FY26
Same	Data entered into to CNX within 5 business days, All Programs	

APPENDIX 2: FY2026 FOSTER CARE PAMS

PAMS CASE PRACTICE REVIEW

The Provider Agency Measurement System (PAMS) is a comprehensive annual performance case record review which is designed to assess the quality of casework practice and services provided by foster care programs. The PAMS results are shared with contracted provider agencies and ACS Agency Program Assistance (APA) and utilized to identify and inform quality improvement efforts in partnership.

The PAMS review process is divided into three practice areas: safety, permanency and well-being. Within each practice area, data collected through the PAMS process is sorted further into indices. The PAMS indices capture a comprehensive view of case practice across all practice areas. The table below illustrates the PAMS case practice areas and indices.

Practice Area	Index
Safety	Safety and Risk Assessment
	Frequency of CW Contacts with Child
	Quality of CW Contacts with Child
	Frequency of CW Contacts with Caretaker
	Quality of CW Contacts with Caretaker
	Supervisory Assessment
Permanency	Service Planning
	Permanency Planning
	Family Team Conferencing/Service Plan Reviews
	Frequency of CW Contacts with Parent(s) / Discharge Resource
	Quality of CW Contacts with Parent(s) / Discharge Resource
	Frequency of Parent and Child Visits
	Quality of Parent and Child Visits
Well-being	Education
	Services
	Frequency of Sibling Visits
	Quality of Sibling Visits
	Frequency of Sociotherapist Contacts (EFFC Only)

A. PAMSSAMPLING

The PAMS process consists of a case record review via Connections. One standardized case record review instrument is utilized to evaluate all family-based and residential program records. The PAMS case record review is focused on the one child in the case who has been selected for review based on the sampling criteria. Cases are selected according to the child planning agency. The Foster Care PAMS Review represents a program-level, statistically significant sample based on a 90% confidence level. Each year the sample size is determined based on the current foster care census of all eligible cases that meet the PAMS review criteria at the start of the fiscal year. Additionally, 25% of the cases selected for review receive a secondary-level full review by a PAMS Quality Assurance Supervisor.

All programs in family-based care and residential care will be evaluated except for children placed in Diagnostic Reception Centers (DRC) and Youth Reception Centers.

Please see **Section H** for more details on PAMS case sample variables.

The following programs will be sampled:

Family-Based Care Samples	Residential Care Samples
Enhanced Family Foster Care (EFFC)	Agency Operated Boarding Home (AOBH)
Specialized Family Foster Care (SFFC)	Group Home (GH)
	Group Residence (GR)
	Intellectual/Developmental Disability (IDD)
	Prenatal, Postnatal, Parenting (YPPP)
	Problematic Sexualized Behavior (PSB)
	Residential Treatment Center (RTC)
	Sexually Trafficked (YST)
	Supervised Independent Living Program (SILP)

B. PAMS SCHEDULE AND REVIEW PERIODS

Agencies are reviewed on a “rolling” basis. The annual sample size for each type of program operated by the agency is divided into two rounds. Agencies are notified prior to the start of a review round that the review is beginning and are provided with an estimated date of review completion. Review completion is defined as the finalization of the review after which no additional alerts will be issued for the cases evaluated in that round. Upon notification of the

review start date, the agency is requested to share current contact information for their agency liaisons.

- 1. The Connections Review Period** is a contemporaneous review. It includes all case information from the first day of the Review Period to the date of the review. Earlier periods in the case may be reviewed as necessary to obtain clarity on contemporaneous events. Thus, the complete PAMS review covers a period of approximately eight months.
- 2. The Contact Review Period** is the first six months of the approximate eight-month review period during which reviewers evaluate contacts and visits. PAMS allows the month immediately prior (seventh month) to the beginning of the review month (eighth month) as a grace period and relies on the six months prior to that to review case contacts and visits. The current FASP, Permanency Planning FTC/SPR, and other case information are expected to be current to the start date of the review.

Month of Review	Review Period for Contacts and Visits
January	June 1 - November 30
February	July 1 - December 31
March	August 1 - January 31
April	September 1 - February 28/29
May	October 1 - March 31
June	November 1 - April 30
July	December 1 - May 31
August	January 1 - June 30
September	February 1 - July 31
October	March 1- August 31
November	April 1 - September 30
December	May 1 - October 31

C. SAFETY AND RISK ALERTS

Reviewers generate alerts related to Safety and Risk only. One combination alert form will be utilized for both types of alerts. Alerts are sent to the agency liaison by the PAMS Manager with a copy sent to APA and others as indicated. Agencies are required to document their responses on the alert document and submit it to APA, with a copy sent to the PAMS unit and others as indicated. Case-related actions in response to the alert must be documented in Connections within the time limits specified. APA will follow up directly with agencies on alert-related issues.

D. PERMANENCY AND PAST PRACTICE CONCERNS

Case-specific permanency and past practice concerns requiring the attention of the agency will be shared with agency liaisons and APA at the end of the agency review using the "Foster Care Permanency and Past Practice Concern Notification Spreadsheet." Agencies are expected to respond to APA within 10 business days of receiving Permanency and Past Practice concerns. APA will follow up directly with agencies about past practice concerns.

E. PAMS CASE REVIEW REBUTTALS

Agencies may submit limited rebuttals within 30 days of notice by PAMS that the rebuttal period has started.

1. Rebuttal items must specifically address systematic errors in the review or incorrect scoring. Individual case-specific rebuttals for questions that are not systemic in nature will not be considered.
2. Rebuttals for questions not included in evaluation will not be considered unless the agency has identified a broad pattern of error related to those questions.
3. Casework contact and visits rebuttals will not be considered if the case has met the minimum casework contact or visits requirement, as extra credit is not given for additional casework contacts/visits.

Limiting rebuttals allows PAMS and agencies to devote resources to reviewing the most problematic errors and to make corrections that provide the greatest improvement in results.

F. PAMSEVALUATION

The final annual PAMS results are cumulative and are based on all cases reviewed during the fiscal year. PAMS reports will be produced by program type (i.e., Enhanced Family Foster Care, Group Home, etc.). PAMS outcome reports provide an overall practice area assessment as well as an evaluation of those indices within each practice area. PAMS will share the agency's preliminary PAMS results report and the case review raw data with the agency liaison and APA after each review round is completed. The final PAMS evaluation results with system-wide performance average are shared at the end of the review year.

1. Evaluation of PAMS Questions

- All PAMS questions are categorized into one of the practice area indices.
- Each question is assigned a total possible value of 1 point; however, not all questions are evaluated.
- Some questions allow for multiple answers, but the value does not exceed a 1point total for a question
- There are different types of responses and different values for each response; the response for each question determines the point value earned.
- An 'N/A' response means the question is not applicable to the case being reviewed and the agency is not penalized. A question with an 'N/A' response is not included in the cumulative evaluation for the agency.

Please see the **Foster Care PAMS Definitions Document** for a list of all PAMS questions with the response and scoring breakdown for each question. The following is an example:

Q #	Question	Responses	Scoring
P20	Did the caseworker have discussions with the child (if age/developmentally appropriate) about progress or lack of progress toward permanency?	Yes	1/1 point
		Yes, Partially	0.5/1 point
		No	0/1 point
		N/A, question not appropriate given the child's age/development	0/0 point

2. Assessment of Casework Contacts and Visits

All contacts are assigned to a practice area and an index, just like the questions in the case record review tool. Only face-to-face contacts receive credit based on requirements. No extra credit is given for exceeding the number of required contacts. Please see **Section I** for more details on the assessment of casework contacts required for each contact type.

a. Quality of Contacts and Credit for Casework Contacts

The content of the progress note determines whether credit is given for the quality of a specific contact. Please see **Section G**, "Definitions of Key Terms for PAMS Reviews" for the definitions of quality for a contact or visit as documented in the progress notes. If there is a discrepancy between the header and the content of the progress notes, such as when the header states that a child participated but then the child is not named in the body of the notes or the body of the note specifically states the child did not attend, credit is not given.

b. Pro-Rating Required Contacts and Visits:

Contacts and visits may be pro-rated for case-specific circumstances if there is an absence of two weeks or longer. Please see **Section N** for an explanation of appropriate reasons for pro-rating and how pro-rated contacts are assessed.

c. Casework Contact Assessment Calculation:

$$\frac{\# \text{ Total Contacts Made} + \# \text{ Home Contacts Made} + \text{Diligent Efforts}}{\# \text{ Total Contacts Required} + \# \text{ of Total Home Contacts Required}}$$

3. Index and Practice Area Results

A. Index Results

- A quantitative result is calculated for each individual case with qualifying questions in an index.
- The average of all case results in an index generates the overall index result. See the following example:

INDEX: Service Planning				
PAMS Review ID	Child's First Name	Numerator (Points Received)	Denominator (Maximum Possible Points)	Index Case Result
233	Miguel	10	10	100%
234	Vicki	7.5	9	83%
235	Natasha	8.5	10	85%
236	Michael	9	9	100%
237	Crystal	8	9	89%
Overall Index Result =				91%

B. Overall Practice Area Results

- An agency's Practice Area result is generated by first establishing case results for each index within a practice area.
- The average of each case's index results serves as the case practice area result. The case practice area result only includes indices with a result. For example, a freed child's case result would not include the Frequency of CW Contacts with Parent/DR index or the Frequency and Quality of Parent and Child Visits indices.
- The average of all practice area case results generates the overall practice area result. See the following example:

OVERALL PRACTICE AREA: Permanency									
<i>Permanency Indices and Case Results</i>									
PAMS Review ID	Child's First Name	Service Planning	Permanency Planning	FTC	Frequency of CW Contacts with Parent/DR	Quality of CW Contacts with Parent/DR	Frequency of Parent and Child Visits	Quality of Parent and Child Visits	Practice Area Case Result
233	Miguel	100%	78%	86%	n/a	7%	n/a	n/a	84%
234	Vicki	83%	95%	64%	50%	2%	83%	33%	61%
235	Natasha	85%	92%	0%	67%	9%	60%	30%	60%
236	Michael	100%	88%	67%	13%	10%	0%	n/a	61%
237	Crystal	89%	88%	86%	n/a	20%	0%	n/a	56%
Overall Practice Area Result =									64%

C. Cumulative Year-to-Date Results

- The PAMS Report will include a Cumulative year-to-date index result at the completion of Round 2; this is the average of all index case results for all cases reviewed in Rounds one and two for the fiscal year.
- The Cumulative year-to-date practice area results are the average of all practice area case results for all cases reviewed in Rounds one and two for the fiscal year.

D. System Performance Results

- Once all PAMS reviews are concluded for the fiscal year, the final PAMS Report will include System Performance averages for each index and practice area.
 - The Index System performance calculates the average of all agency results for each index.
 - The Practice System performance calculates the average of all agency results for each practice area.

G. DEFINITIONS OF KEY TERMS FOR PAMS REVIEWS

The following definitions of terms from the PAMS protocol are used for consistency. They are not intended to be an interpretation of policy or regulations.

1. **Casework Contacts with the Child** are defined as individual or group face-to-face contacts between the caseworker and the child for the purpose of assessing the child's level of safety and risk, evaluating or re-evaluating the child's permanency needs and permanency goal and guiding the child towards a course of action aimed at resolving problems of a social, emotional or developmental nature any of which contribute toward the reason(s) why this child is in foster care. These contacts include documented face-to-face contacts which occur to implement the service tasks in the family and child's service plan. The case record should document the extent to which these contacts are occurring as well as the location and duration of the contacts.
2. **Casework Contacts with Foster Parent/Child Care Worker** are defined as face-to-face contacts by the caseworker with the person or people immediately responsible for the child's day-to-day care (foster parent or child care worker, if a child is in a residential care setting) for the purpose of assessing the child's level of safety and risk, obtaining information as to the child's adjustment to foster care, and for facilitating the caretaker's role in achieving the desired course of action specified in the child and family services plan. This would include any documented face-to-face contact that has occurred to implement the services in the family and child's service plan. The case record should document the extent to which these contacts are occurring and the location and duration of the contacts.
3. **Casework Contacts with Parent/Discharge Resource** are defined as individual or group face-to-face contacts between the caseworker and the child's parent or discharge resource for the purpose of assessing whether the child would be safe if s/he was to return home, and the potential for future risk of abuse or maltreatment if s/he was to return home. Such contacts are also for the purpose of guiding the child's parents or relatives towards a course of action aimed at resolving problems or needs of a social, emotional, developmental or economic nature that are contributing to the reason(s) why such child is in foster care. In the case of children with a PPG of "Another Planned Living Arrangement", with a permanency resource or adult residential care, contacts serve to mobilize family support of the youth's efforts to function independently; increase the youth's capacity to be self-sufficient; evaluate the ability of the parents/relatives to establish or reestablish a

connection with the youth and serve as a resource to the youth; and, where appropriate, encourage an ongoing relationship between the parents/relatives and the youth. These include any documented face-to-face contacts that occur to implement the services in the family and child's service plan. The case record should document the extent to which these contacts are occurring and the location and duration of the contacts.

- 4. Sociotherapist Contacts with Child** Depending on the determination of the case planning and clinical treatment teams, at times, children in EFFC will benefit from the support and services of the Sociotherapist. As currently defined, Sociotherapist contacts refer to individual or group face-to-face (treatment team meetings included) contacts between the Sociotherapist (Behavior Specialist, Skills Trainer or other worker identified by the agency that functions in the role of a Sociotherapist) and the child for the purpose of providing the treatment and supports the child needs, and to help decrease problem behaviors and increase developmentally appropriate and adaptive gains, while emphasizing the personal and social effects on behavior. The Sociotherapist/Treatment Team may make referrals for children/youth to community-based organizations (substance abuse, mental health, etc.); and maintain contact with the school to gather information that will be used in the treatment plan. There should also be behavior management training and support for EFFC Foster Parents that focus specifically on the needs of the child in their home. The Sociotherapist's contacts with child and foster parent should assess the overall impact the behavior modification techniques have on child's behavior. The Sociotherapist/Behavior Specialist makes four face-to-face contacts per month with the child: two (2) contacts per month in the foster home **and** two (2) per month may be in other locations. Sociotherapist frequency of contact with the child may be reduced as determined and documented by the Treatment Team.
- 5. Parent and Child Visits** are defined as face-to-face visits between the child and the discharge resource (parent/relative) to whom the child will be discharged. ACS policy requires family visits to be held weekly unless prohibited by court order. When the placement makes visiting impossible, agencies are required to at least plan for and facilitate monthly visits between the child and the discharge resource. The Visiting Plan should document the planned frequency and location of the visits, the names of the persons scheduled to visit, and any arrangements or assistance necessary to facilitate the visits. Documentation should include progress made by the child and parent towards resolving the problems or needs of a social, emotional, developmental or economic nature which are contributing to the reasons why the child is in foster care.
- 6. Sibling Visits** are defined as face-to-face visits between minor siblings or half-siblings who are in foster care but who have been placed in separate foster care settings. Sibling visits are reviewed for both case planning and child planning providers. Both case planning and child planning providers are responsible for supporting, coordinating and facilitating sibling visits. Credit is given regardless of who entered the documentation, as long as the documentation meets the information detail criteria. Biweekly sibling visits are required unless such contact would be contrary to the health, safety, or welfare of one or more of the children or unless lack of geographical proximity precludes visitation. Reviewers look for clear documentation as to why siblings cannot visit each other.

Foster children who are siblings or half-siblings should not be unnecessarily separated. Diligent efforts should be made to secure a foster boarding home that is willing and able to accept the placement of the siblings together, unless placement together is determined to be detrimental to the best interests of the siblings. In determining whether the record documents efforts to place siblings together, Reviewers look for documented consultation with or evaluation by appropriate professional staff that placement together of siblings is contrary to the health, safety, or welfare of one or more of the children with consideration of the following factors: the age differentiation of the siblings; the health and developmental differences among the siblings; the emotional relationship of the siblings to each other; the individual service needs; the attachment of the individual siblings to separate families/locations; the continuity of environment standards; sibling visits would endanger the child's health, safety, or welfare; visits prohibited by court order; siblings live too far apart; and siblings whereabouts unknown.

Progress notes should regularly document diligent efforts to place siblings together, or that such joint placement is contrary to the health, safety or welfare of the children. Efforts to place the children together should be an ongoing process and not a one-time event. The regulation states that FASPs "must include a discussion of the need for continued separation of siblings and any plans for reunification." Thus, this should be documented at least every six months.

7. **Supervisory Assessment** is guided by the ACS Permanency Planning Policy, Attachment B (4/15/2013) and requires at least monthly case documentation by case planning supervisors describing case activities and efforts undertaken to date. These activities may include interactions, case-related contacts, assessments and other relevant information, such as case planning guidance, goals, timeframes, and next steps.
8. **Current FASP:** The current FASP is the one with the most recent due date within the PAMS review period as of the start date of the review. The current FASP must be 'approved' to be reviewed, as FASPs pending approval are not accessible for review. The FTC/SPR for the current due FASP is reviewed even if it is in pending status. If there is no current FASP in Connections, a Safety Alert is sent to the agency.

H. PAMS CASE SAMPLE VARIABLES DEFINITIONS

Variable	Definition
A. Case Status	The case is open in CCRS from the start of the review period through at least four months of the contact review period. Cases that closed after four months of the contact review period are included in the review (except Adoption and COS cases).
B. # of Days in Program	A child must have been in the same program at the same agency at least 30 days prior to the start of the review period. The child must be in the same program at the same agency for at least 150 days for closed cases (such as final discharges for Reunification, APPLA, KinGap, and OMH/OMRDD placements) and 240 days for active cases. Cases that switch program types during the contact review period are excluded. Children who are transferred after the end of the contract review period but prior to the start of reading are included. Programs for Youth who are Prenatal, Postnatal and Parenting (previously MMCB) follow the same criteria as other program types.
C. Age of Child	The sample is not stratified by age.
D. Permanency Planning Goals	For cases with multiple PPGs, the PPG used should be the longest PPG during the review period. If 2 PPGs reflect an equal 50% of the review period, the PPG for the second half of the review should be used. Cases without PPGs or PPGs that have expired will be included.
E. Trial Discharge Cases	All TD cases in the sample will be read.
F. PINS Cases	PINS cases are reviewed.
G. AWOC Cases	The sample will exclude cases that have uninterrupted AWOC spells of 3 months or more.
H. Child Away at College	Included regardless of length of absence. Contacts will be prorated based on case circumstances.
I. Hospitalized Child Cases	Included regardless of length of absence.
J. Incarcerated Youth Cases	Included regardless of length of absence.
K. Intra-State Cases	New York State intra-state cases are reviewed.
L. ICPC Cases	Excluded from the review (Approved ICPC and child moved out of state).
M. Adoption Cases	Excluded from the review.
N. COS Cases	Excluded from the review (COS Activity Code = 55).
O. RTF Cases	Excluded from the review.
P. JD Cases	Excluded from the review: - Article 3 status without concurrent Foster Care placement. - Close to Home NSP or LSP placement.

Variable	Definition
Q. Absences: ▪ SE – Work Program ▪ SG – Temporary Foster Care Transfer ▪ SH – Overstayed Weekend ▪ SI – Pending Approval of Extended Care ▪ SK – School Holiday ▪ SL – Summer Camp ▪ SM – Religious Holiday ▪ SN – School Trip ▪ SO – Vacation ▪ SP – Weekend Visit ▪ SQ – Visit to Potential Foster of Adoptive Home	Exclude cases with uninterrupted absence of 3 consecutive months or more.
R. Cases that were Previously Reviewed	A random sample may include some cases that were previously reviewed in other rounds.
S. Siblings	Siblings in the same program are excluded.
	Siblings in different programs are included even if they are in the same home.
	Cases with a freed sibling and a non-freed sibling are considered separate cases and are included regardless of program type.
	Cases with two (2) freed siblings in the same program are considered separate cases and are included regardless of program type.
T. Foster Care Cases Receiving PPRS Services	Included in the review.
U. Agency Case Responsibility	Child Planning Agency

I. FOSTER CARE PAMS CASEWORK CONTACT REQUIREMENTS AND ASSESSMENT

1. **Acceptable Staff for Casework Contacts:** It is expected that contacts are made by the assigned case planner. Contacts made by staff other than the assigned case planner are acceptable only if made by an alternate staff member with the same credentials and qualifications as a case planner. Those staff must be identified and shared with the PAMS Manager prior to the start of the review.
2. **Child Planning Agencies ONLY - CW Contacts with Parent/Discharge Resource**
If a child planning agency does not meet the monthly casework contact requirement for the review period, they can borrow at least one contact per month with the discharge resource from the case planning agency. However, in order to be eligible to borrow contacts from the case planning agency, the child planning agency must have made at least one contact with the discharge resource.
3. **Sociotherapist Contacts with Child**
If the agency has not made all the required Sociotherapist contacts for the month, one extra contact made by the case planner may be substituted for a Sociotherapist contact, as per ACS policy. However, extra contacts made by the Sociotherapist cannot be substituted for required contacts for the case planner.
4. **Child Planner vs. Case Planner Distinction**
The tool includes questions to help identify whether the agency being reviewed has case planning responsibility and whether the case is shared by more than one foster care agency. These questions are intended to focus on collaboration, coordination, and communication between case-planning and non-planning agencies when applicable.

In addition, child planning agencies are not penalized when the FASP was not completed by the case planning agency and/or when aspects of the FASP that they cannot complete or do not control are inaccurate.

5. CASEWORK CONTACT REQUIREMENTS

A. Casework Contacts with Child (Any PPG – All cases)

Points for # of Contacts Made

- Includes home contacts and any other type of made contact
- The requirement is 1 contact per month (6 total contacts in review period)

# of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	6

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 6.

Points for # of Home Contacts Made

- Includes ONLY home contacts
- The requirement is 2 home contacts per quarter

# Of Home Contacts per Quarter	Points per Quarter
Cases with 0 home contacts per quarter receive no credit	0
Cases with 1 home contact per quarter receive partial credit	1
Cases with 2 or more home contacts per quarter receive full credit	2
TOTAL POSSIBLE POINTS in the Review Period	4

IMPORTANT: If one or more quarters are prorated, the total number of points that can be earned will be less than 4.

B. Casework Contacts with Caretaker (Foster Parent or Child Care Worker) (Any PPG – All cases)

Points for # of Contacts Made

- Includes home contacts and any other type of made contact
- The requirement is 1 contact per month (6 total contacts in the review period)

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	6

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 6.

Points for # of Home Contacts Made

- Includes ONLY home contacts

- The requirement is 1 home contact per quarter

# Of Home Contacts per Quarter	Points per Quarter
Cases with 0 home contacts per quarter receive no credit	0
Cases with 1 or more home contacts per quarter receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	2

IMPORTANT: If one or more quarters are prorated, the total number of points that can be earned will be less than 2.

C. Casework Contacts with Child's Discharge Resource: Cases with NO History of CPS Indication Including Trial Discharge Contacts (Any PPG – All cases)

Points for # of Contacts Made

- Includes home contacts and any other type of made contact
- The requirement is 1 contact per month (6 total contacts in the review period)
- If a child planning agency does not meet this requirement, they can borrow at least one contact per month with the discharge resource from the case planning agency over the 6-month review period. However, in order to be eligible to borrow contacts from the case planning agency, the child planning agency must have made at least one contact with the discharge resource.

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	6

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 6.

Points for # of Home Contacts Made

- Includes ONLY home contacts
- The requirement is 1 home contact per quarter

# Of Home Contacts per Quarter	Points per Quarter
Cases with 0 home contacts per quarter receive no credit	0
Cases with 1 or more home contacts per quarter receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	2

IMPORTANT: If one or more quarters are prorated, the total number of points that can be earned will be less than 2.

D. Casework Contacts with Child's Discharge Resource: Cases with History of CPS Indication Including Trial Discharge Contacts (PPG = 1, 2, 3, 4, 8)

Points for # of Contacts Made

- Includes home contacts and any other type of made contact
- The requirement is 2 contacts per month (12 total contacts in the review period)
- If a child planning agency does not meet this requirement, they can borrow at least one contact per month with the discharge resource from the case planning agency for a maximum of 6 borrowed contacts over the 6-month review period. However, in order to be eligible to borrow contacts from the case planning agency, the child planning agency must have made at least one contact with the discharge resource.

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive partial credit	1
Cases with 2 monthly contacts receive full credit	2
TOTAL POSSIBLE POINTS in the Review Period	12

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 12.

Points for # of Home Contacts Made

- Includes ONLY home contacts only
- The requirement is 1 home contact per month

# Of Home Contacts per Month	Points per Month
Cases with 0 home contacts per month receive no credit	0
Cases with 1 or more home contacts per month receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	6

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 6.

E. Casework Contacts with Child's Discharge Resource: Cases with History of CPS Indication Including Trial Discharge Contacts (PPG = 5A, 5B, 5C)

Points for # of Contacts Made

- Includes home contacts and any other type of made contact
- The requirement is 1 contact per month (6 total contacts in the review period)

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	6

IMPORTANT: If one or more months are prorated, the total number of points that can be earned will be less than 6.

Points for # of Home Contacts Made

- Includes ONLY home contacts only
- The requirement is 1 home contact per quarter

Number of Home Contacts per Quarter	Points per Quarter
Cases with 0 home contacts per quarter receive no credit	0
Cases with 1 or more home contacts per quarter receive full credit	1
TOTAL POSSIBLE POINTS in the Review Period	2

IMPORTANT: If one or more quarters are prorated, the total number of points that can be earned will be less than 2.

F. Casework Contacts with Sociotherapist and Child

Points for # of Contacts Made

- ❖ Includes home contacts and any other type of made contact
- ❖ The requirement is 4 contacts per month (24 total contacts in the review period)
 - ❖ Sociotherapist frequency of contact with the child may be reduced as determined and documented by the Treatment Team. In such instances, the Sociotherapist contact requirement is prorated accordingly.
- ❖ If an agency has not made all the required Sociotherapist contacts for the month, 1 extra contact made by the case planner may be substituted for a Sociotherapist contact. This is ACS policy.
- ❖ Only a Home Contact from the Casework Contact for the Child may be substituted for a Home Contact for the Sociotherapist.

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive partial credit	1
Cases with 2 monthly contacts receive partial credit	2
Cases with 3-monthly contacts receive partial credit	3
Cases with 4 monthly contacts receive full credit	4
TOTAL POSSIBLE POINTS in the Review Period	24

IMPORTANT: If 1 or more months are prorated, then the total possible points that can be earned will be less than 24.

Points for # of Home Contacts Made

- ❖ Includes ONLY home contacts only
- ❖ The requirement is 2 home contacts per month

# Of Contacts per Month	Points per Month
Cases with 0 monthly contacts receive no credit	0
Cases with 1 monthly contact receive partial credit	1
Cases with 2 monthly contacts receive full credit	2
TOTAL POSSIBLE POINTS in the Review Period	12

IMPORTANT: If one or more quarters are prorated, the total number of points that can be earned will be less than 2.

G. Parent/Child and Sibling Visits

IMPORTANT: Visits are tallied differently than Casework Contacts.

- There is no Home Contact requirement for either Parent/Child or Sibling Visits.

Parent and Child Visit Requirements	Points
# of Points Per Visit	1
# Required Visits per Month	4
Total POSSIBLE POINTS in the Review Period	24

Sibling Visit Requirements	Points
# of Points Per Visit	1
# Required Visits per month	2
Total POSSIBLE POINTS in the Review Period	12

A. Pro-Rating Required Contacts and Visits

1. Contacts and visits may be pro-rated for case-specific situations. Contacts and visits may be pro-rated if there is an absence of 2 weeks or longer.
2. Reviewers cannot pro-rate to require more contacts or visits than the minimum standard.

The following are acceptable reasons to pro-rate contacts or visits as per ACS and OCFS policy:

3. **All contact and visit types** may be modified due to a court order.
4. **CW Contacts with Child:** The child is AWOC, on vacation, incarcerated, or away at school. It must be documented in Connections if an incarcerated youth is not allowed visits and the reason.
5. **CW Contacts with Foster Parent:** The Child is away at college, the child is AWOC, the child is incarcerated, the child is hospitalized, the child is on trial discharge, and the foster parent is on vacation.
6. **CW Contacts with Parent/Discharge Resource:** The Parent's whereabouts are unknown; the parent is in an inpatient drug program, hospitalized, or out of the state or the country. It must be documented in Connections if a program or hospital does not allow contact and the reason.
7. **Parent and Child Visits:** The child is AWOC, the parent's whereabouts are unknown, the child is away at school, either the birth parent or child are out of the state or the country, the child is on vacation, the parent or child is in an inpatient program, hospitalized or refusal by either the parent or the child to visit. It must be documented in Connections if a program or hospital does not allow visits and reasons. A refusal by either the parent/discharge resource or the child to attend visits must be clearly documented in progress notes, including continuous efforts to help the family reconnect and engage in visits, if safety is not a concern.
8. **Sibling Visits:** The child is AWOC, on vacation, away at school, hospitalized, or refusing to visit. Siblings' refusal to attend visits must be clearly documented in progress notes, including continuous efforts to help them reconnect and engage in visits if safety is not a concern.

If the absence is for two weeks or longer the contacts may be pro-rated as follows:

PPG	Contact Type	First 3 months of Initial Placement	4 Months or More After Initial
All	Contact with Child	1 contact per month / 0 home contacts	0 contacts per month
All	Contact with Foster Parent	1 contact per month / 0 home contacts	0 contacts per month
All	Contact with Parent/Discharge Resource (Cases with NO History of CPS Indication)	1 contact per month / 0 home contacts	0 contacts per month
1, 2*, 3*, 4*, 8	Contact with Child's Discharge Resource (Cases with History of CPS indication)	1 contact per month / 0 home contacts	

5A, 5B, 5C	Contact with Child's Discharge Resource (Cases with a History of CPS indication)	1 contact per month / 0 home contacts	0 contacts per month
------------	--	---------------------------------------	----------------------

*If the child is not freed

B. Diligent Efforts or Attempted Contacts

Agencies are eligible for partial credit if they did not make any successful contact in a given month, and diligent efforts were made by the agency to reach the child or family.

1. A case is eligible for 0.5 Diligent Efforts (DE) points if there were "0" credited contacts/visits for the month.
2. A case is only eligible for 0.5 DE points for each spell. A spell is defined as consecutive months with "0" credited contacts/visits.
3. Diligent Efforts points will not exceed 1.5 points for each type of Contact/Visit, for the entire review period.
4. Diligent Efforts points will be awarded if the agency makes at least two attempted face-to-face contacts during the first month of a spell.

IMPORTANT: Agencies are **legally** required to meet the applicable contact, visit and diligent effort standards, even when cases are on Trial Discharge.

APPENDIX 3: FY2026 FOSTER PARENT CERTIFICATION AUDIT

FOSTER PARENT CERTIFICATION AUDIT

The Foster Parent Certification Audit is conducted by the PAMS Unit. PAMS Reviewers will audit a sample of foster parent records for all family-based program types (EFFC and SFFC). The FY2026 Foster Parent Certification Audit will be conducted in Summer 2026.

The Foster Parent Certification Audit consists of two overall measures: training requirements and home finding requirements. The home finding measure includes four sub-measures: the home study/reauthorization narrative, SCR clearance, criminal background (FBI) clearance and medical clearance.

Each area is measured by using the number of homes that met the requirement as the numerator and the number of homes eligible for review in each area as the denominator. The home finding measure equals the aggregate of the four sub-measures.

A. TRAINING REQUIREMENTS

PAMS staff review the training information within each foster parent record, including certificates, attendance sheets, curriculum, and trainer credentials.

*Please review **Section E** for the Standard Criteria for each Foster Parent sample category.*

B. HOME FINDING REQUIREMENTS

Using the same sample selected for the training requirements for each foster home type, PAMS staff will review the record for compliance with all applicable Home finding certification requirements as per OCFS regulations and ACS standards.

*Please review **Section E** for the Standard Criteria for each Foster Parent sample category.*

C. REBUTTAL PROCESS

All documents should be in the foster home records when the review team begins the onsite audit. Missing documentation submitted within 2 business days of the audit date will be considered for all elements of the Training and Home finding requirements, with the exception of Foster Home Safety Assessments, which must be in the foster home records at the time of the audit.

D. DATA SOURCE

All program samples will be pulled from Connections and provided at least two weeks prior to the scheduled audit date.

Table 1 below details the review time periods and maximum sample sizes for each program type.

Table 2 details the foster parent sample criteria.

Table 1: Review Time Periods		
Foster Home Type	Certification/Recertification	Maximum Sample Size
EFFC: Non-Kinship	5/1/2025 – 4/30/2026	20
EFFC: Emergency/Kinship	2/1/2025– 1/31/2026	10
SFFC	5/1/2025 – 4/30/2026	10
EFFC: First Recertification	5/1/2025 – 4/30/2026	20

Table 2: Foster Parent Sample Criteria	
1.	EFFC: New non-kinship foster parents certified within the review time period.
2.	EFFC: New emergency/kinship foster parents approved/emergency certified who had a relative child placed in their home within the review time period.
3.	SFFC: Foster parents who were newly certified as a Specialized Family Foster Care provider within the review time period.
4.	Recertification: Enhanced Family Foster Care (EFFC) foster parents who have completed their first recertification within the review time period.
5.	Closed homes are included if they were certified or recertified within the review time period. Exception: Emergency/kinship homes that are closed or no longer have a relative child in the home are excluded.
6.	Excluded: - Foster parents transferred to or from the agency. - Foster parents with approved Interstate Compact on the Placement of Children (ICPC). - Foster parents for Unaccompanied Minors/Refugees.

E. STANDARD CRITERIA FOR EACH FOSTER PARENT SAMPLE CATEGORY

ENHANCED FAMILY FOSTER CARE - NON-KINSHIP FOSTER PARENTS

1. Certificate to Board

- All homes must have an NYS Certificate to Board Children in the record with an effective date that is within the current review time period.
- *Non-kinship foster homes that do not have a child placement may be included in the sample.*

IMPORTANT NOTES:

- ❖ *All certification criteria must be completed prior to certification of a foster home. All documents must be dated on or prior to the certification effective date.*
- ❖ *The placement date of the first foster child (if any) must be after the home has met all certification criteria.*

2. Training for recruited, non-kinship foster parents

- a. **National Training and Development Curriculum (NTDC) with TRIPP Principles (Regular Track)**
 - Training Certificate indicating NTDC with TRIPP Principles training.
 - The number of NTDC with TRIPP Principles training hours completed – 30 hours are required to earn full credit.
 - The date training was completed (must be prior to foster home certification).

IMPORTANT NOTES:

- ❖ *If any of the above information is missing from the training certificate, an agency must provide the foster parent's Training Attendance sheets.*
- ❖ *No partial credit – All recruited non-kinship foster parents are required to complete the full training requirements before the home is certified and the first child is placed in a foster home.*

3. Home Study (NEW homes only)

- OCFS Form 5183-F – Household Composition and Relationships, **and**
- Form 5183-K – Final Assessment and Determination.
- Home Study Form 5183-K must be **dated and signed** by the Home Finder, Supervisor and foster parents prior to certification.

4. Medical Exams for foster parents and all household members prior to certification.

- OCFS Form 5183-D – Foster-Adoptive Applicant Medical Report (or other comparable medical report).
- Medical forms must be dated.
- Medical forms must be signed and stamped by a medical care provider; **a physician or clinic stamp is accepted**.
 - For **NEW homes**, medical exams must be dated not more than one (1) year preceding the initial certification date.

5. SCR (Statewide Central Register) clearance letters for foster parents and all household members 18 years of age and older prior to certification.

- Any foster parent and/or household member with an SCR finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to certification of home.
6. **Criminal History clearance letters** for foster parents and all household members 18 years of age and older prior to certification.
- Any foster parent and/or household member with a criminal history finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to certification of home.

ENHANCED FAMILY FOSTER CARE - EMERGENCY / KINSHIP FOSTER PARENTS

1. Certificate to Board

- All homes must have an NYS Certificate to Board Children in the record with an effective date that is within the current review time period.
- *If a **NEW** Kinship/Emergency home is closed or no longer has a relative child it should be excluded from the sample, as they were certified for a specific child.*

IMPORTANT NOTES:

- ❖ The placement date of a first relative foster child begins the 90-day timeframe for a foster home to complete all certification criteria.
 - *If the child's placement date is different or significantly earlier than the agency home assignment date, the agency should inform the Audit team during sample selection and provide an FAD screenshot of the agency assignment date/ The kinship home approval timeframes will be adjusted to reflect the agency assignment date.*
- ❖ *For kinship homes with extended emergency status after the initial 90-day timeframe due to pending completion of certification/approval criteria, the audit timeframe remains the same – 90 days from the initial relative child placement date.*
 - **Exception:** Please see the SCR or Criminal History sections for details regarding pending Clearance results.

2. Training for kinship foster parents

a. National Training and Development Curriculum (NTDC) with TRIPP Principles (Kinship Track)

- Training Certificate indicating NTDC with TRIPP Principles training.
- The number of NTDC with TRIPP Principles training hours completed – 15 hours are required to earn full credit.
- The date training was completed – emergency/kinship foster parents must complete Mini-MAPP training **within 150 days (~5 months)** of the first relative child's placement date in the home.

IMPORTANT NOTES:

- ❖ *If any of the above information is missing from the training certificate, an agency must provide the foster parent's Training Attendance sheets.*
- ❖ **PARTIAL CREDIT:** If the kinship foster parent completed any number of training hours, they are eligible for half credit; or if a foster parent did not complete any training hours and the agency provides, at least quarterly, documentation of efforts to engage and encourage the foster parent to comply with the required training, partial credit can be considered. Examples of such documentation may be CNNX progress notes of engagement efforts, letters of invitation to the foster parent, flyers sent to the foster parent, and emails sent to the foster parent.

3. **Home Study (NEW homes only)** must be completed prior to or within 90 days of child placement in the home.
 - OCFS Form 5183-F – Household Composition and Relationships, **and**
 - Form 5183-K – Final Assessment and Determination.
 - Home Study Form 5183-K must be **dated and signed** by the Home Finder, Supervisor and foster parents within 90 days of the child's placement date.
4. **Medical Exams** for foster parents and all household members must be dated not more than one (1) year preceding the initial home emergency approval date (child placement date) OR within 90 days of child placement in the home.
 - OCFS Form 5183-D – Foster-Adoptive Applicant Medical Report (or other comparable medical report).
 - Medical forms must be dated.
 - Medical forms must be signed and stamped by a medical care provider; **a physician or clinic stamp is accepted**.
5. **SCR (Statewide Central Register) clearance letters** for foster parents and all household members 18 years of age and older within 90 days of child placement in the home.
 - Any foster parent and/or household member with an SCR finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to approval/certification of home.

IMPORTANT NOTES:

Kinship homes should, at minimum, have an SCR Clearance application submitted within 90 days of the child's placement in the home.

- ❖ If the results letter is dated more than 90 days from the child's placement date:
 - Please **submit** a **Clearance application receipt** **IF it was submitted within 90 days of child placement** for full credit.
- ❖ If the results letter has not been received:
 - Please submit a Clearance application receipt.
 - If the application receipt is dated within 90 days of the child placement date, an FYI for following up on the pending results will be issued.
 - Please note: An application receipt dated more than 90 days from the child placement date will be considered out of compliance.

6. **Criminal History clearance letters** for foster parents and all household members 18 years of age and older within 90 days of child placement in the home.
 - Any foster parent and/or household member with a criminal history finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to approval/certification of home.

IMPORTANT NOTES:

Kinship homes should, at minimum, have a Criminal History Clearance application submitted within 90 days of child placement in the home.

- ❖ If the results letter is dated more than 90 days from the child's placement date:

- Please **submit** a **Clearance application receipt** **IF it was submitted within 90 days of child placement** for full credit.
- ❖ If the results letter has not been received:
 - Please submit a Clearance application receipt.
 - If the application receipt is dated within 90 days of the child placement date, an FYI for following up on the pending results will be issued.
 - Please note: An application receipt dated more than 90 days from the child placement date will be considered out of compliance.

SPECIALIZED FAMILY FOSTER CARE (SFFC) – (Special Medical) FOSTER PARENTS

1. Certificate to Board

- All homes must have an NYS Certificate to Board Children in the record with an effective date that is within the current review time period.

IMPORTANT NOTES:

- ❖ *All certification criteria must be completed prior to certification of a NEW SFFC foster home. All documents must be dated on or prior to the certification/recertification effective date.*
- ❖ *The placement date of the first Special Medical/Developmentally Delayed child (if any) must be after the home has met all certification criteria.*

2. Training for foster parents:

a. National Training and Development Curriculum (NTDC) with TRIPP Principles

- Training Certificate indicating NTDC with TRIPP Principles training.
- The number of NTDC with TRIPP Principles training hours completed
 - Non-Kinship SFFC Foster Parent – 30 hours are required to earn full credit.
 - Kinship SFFC Foster Parent – 15 hours are required to earn full credit.
- The date training was completed (must be prior to foster home certification).

IMPORTANT NOTES:

- ❖ *If any of the above information is missing from the training certificates, an agency must provide the foster parent's Training Attendance sheets.*
- ❖ *The PAMS Audit does not review child-specific specialized training as the ACS CSEN Unit (Children with Special Exceptional Needs) reviews training as relevant during the special or exceptional board rate reauthorization process.*

3. Home Study (NEW SFFC homes only)

- OCFS Form 5183-F – Household Composition and Relationships, **and**
- Form 5183-K – Final Assessment and Determination.
- Home Study Form 5183-K must be **dated and signed** by the Home Finder, Supervisor and foster parents prior to certification.

4. Medical Exams for foster parents and all household members prior to certification.

- OCFS Form 5183-D – Foster-Adoptive Applicant Medical Report (or other comparable medical report).
- Medical forms must be dated.
- Medical forms must be signed and stamped by a medical care provider; **a physician or clinic stamp is accepted.**
 - For **NEW homes**, medical exams must be dated not more than one (1) year preceding the initial certification date.

5. **SCR (State Central Registry) clearance letters** for foster parents and all household members 18 years of age and older prior to certification.
 - o Any foster parent and/or household member with an SCR finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to certification of home.
6. **Criminal History clearance letters** for foster parents and all household members 18 years of age and older prior to certification.
 - o Any foster parent and/or household member with a criminal history finding must have a documented **Safety Assessment** completed by the provider, which includes a justification in support of certification of the home completed prior to certification of home.

ENHANCED FAMILY FOSTER CARE (EFFC) – RECERTIFIED FOSTER PARENTS

Includes non-kinship and kinship homes that have completed recertification in the EFFC program type.

- ❖ **CLOSED HOMES**—If a non-kinship home is currently closed but was recertified and opened during the review period, it should remain in the sample for review as the focus of the Audit is recertification practice.
 - **CLOSED Kinship homes** should be excluded from the sample **UNLESS** a relative child is still placed in the home.
- ❖ **CHILD PLACEMENTS** – If a non-kinship home has never had child placement, but was recertified and open during the review period, it should remain in the sample for review.
 - **Kinship homes** that **do not** currently have a relative child placement should be excluded from the sample.

1. Certificate to Board

- We will review regular and kinship foster parent records for their first recertification.
- All homes must have an NYS Certificate to Board Children in the record with a first recertification date within the current review time period.

2. ANNUAL Training for foster parents

- A minimum of 12 hours of annual training is required for all EFFC parents prior to recertification.
- Annual training topics should be related to general child welfare and/or child development.
- Training Certificates must specify the topic, training hours, and date completed.
- Training must be completed on or prior to the recertification period start date.
- **PARTIAL CREDIT** – KINSHIP PARENTS ONLY - if the parent completes at minimum 3 hours of annual training, they are eligible for half credit.

IMPORTANT NOTES:

- ❖ *If any of the above information is missing from the training certificate, an agency must provide the foster parent's Training Attendance sheets.*
- ❖ **PARTIAL CREDIT** – KINSHIP PARENTS ONLY - if the parent completes at minimum 3 hours of annual training, they are eligible for half credit.

3. Reauthorization Narrative (RECERTIFIED homes)

- OCFS Form 5183L – Reauthorization Report must be **dated and signed** by Homefinder, Supervisor, and Foster Parents prior to recertification.

4. **Medical Exams** for foster parents and all household members prior to recertification.
- OCFS Form 5183-D – Foster-Adoptive Applicant Medical Report (or other comparable medical report).
 - Medical forms must be dated.
 - Medical forms must be signed and stamped by a medical care provider; **a physician or clinic stamp is accepted**.
 - For **RECERTIFIED homes**, medical exams must not be more than two (2) years old at the time of recertification.
5. **Criminal History clearance letters** for foster parents and all household members 18 years of age and older prior to recertification.
- Any foster parent and/or household member with a criminal history finding must have a documented Safety Assessment completed by the provider, which includes a justification in support of certification of the home completed prior to recertification of home.