

CHILD WELFARE
AT A CROSSROADS:

Rethinking
Redirecting
Reinvesting

**Report of the Mayor's
Commission for the
Foster Care of Children**

City of New York

DAVID N. DINKINS, MAYOR
Cesar A. Perales, Deputy Mayor
for Health and Human Services

December 1993

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THE CITY OF NEW YORK
OFFICE OF THE MAYOR
NEW YORK, N.Y. 10007

December 1993

Dear Fellow New Yorkers:

After taking the oath of office as the 106th Mayor of this great metropolis, I stood on the steps of City Hall and dedicated my administration to the children of New York. I said then, and have repeated many times, that the measure of whether I fulfill my mandate as Mayor will be determined by how we treat the youngest members of our city.

The painful reality is that, in just five years, the number of children in our foster care system had more than doubled. By the time of my inauguration the number of children in care had gone from under seventeen-thousand in 1986 to over forty-thousand in 1990 and the numbers were still rising. We could not and did not allow this disturbing trend to continue.

To help guide, implement and facilitate City policies related to improving services which would help strengthen children and families, I immediately established a new Mayor's Office for Children and Families (MOCAF). Then I re-established the long dormant Mayor's Commission for the Foster Care of Children. It is ably led by Dr. Megan McLaughlin who, during my tenure as Manhattan Borough President, chaired my Advisory Council on Child Welfare. Under her distinguished leadership, the Council produced a report entitled Failed Promises — Child Welfare in New York City: A Look at the Past, A Vision For the Future.

All the current Commission members were chosen for their knowledge, talents and tireless commitment to improving the lives of our children. Each of the members possess a special point of view and an area of expertise. Their first challenge was to pool that knowledge, caring, and unfaltering dedication. Their task was not easy. Deteriorating social conditions and the harshness of poverty, exacerbated by many years of Federal neglect, have placed extreme demands on our child welfare system.

Though challenged by the gravity of the fiscal crisis and the truly painful choices we have had to make, we have been able to move forward with our agenda to protect children and preserve families. We have refocused the child welfare system by targeting preventive, supportive and rehabilitation services to families who live in communities that demonstrate the highest level of social need.

The Commission has supported these new programs and has provided a positive, energized climate for cross-systems dialogue between its members and officials of the Human Resources Administration, the Child Welfare Administration and the Family Court. I am pleased to report that much has been accomplished. They have worked vigorously for important changes, often quietly behind the scenes, and have also advocated on City, State and Federal levels. They have labored hard to move us closer to our goal of improving the lives of this City's children.

I charged this Commission and its Committees with recommending programs and policies that will address and correct the failures of our system. The various reports presented in this document do just that. Many of the recommendations are progressive, while others have been made before but never implemented. I have endorsed their philosophical thrust. They address the unique needs of children in the foster care and adoption systems, while charting a practical, possible path to change.

I have often quoted the old African proverb which states that "It takes a whole village to raise a child". Perhaps, as we approach the twenty-first century and telecommunication helps our world seem smaller daily, we will realize that - for New York's children - we, the people of this City, are the village.

Sincerely,

David N. Dinkins
MAYOR



THE CITY OF NEW YORK
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CESAR A. PERALES
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December 1993

Dear Colleagues:

Over the past decade, New York City's child welfare population has more than doubled. It is with this distressing reality in mind that Mayor David N. Dinkins re-established the Commission for the Foster Care of Children. It is laudable that the Commission has focused on many segments of the child welfare population.

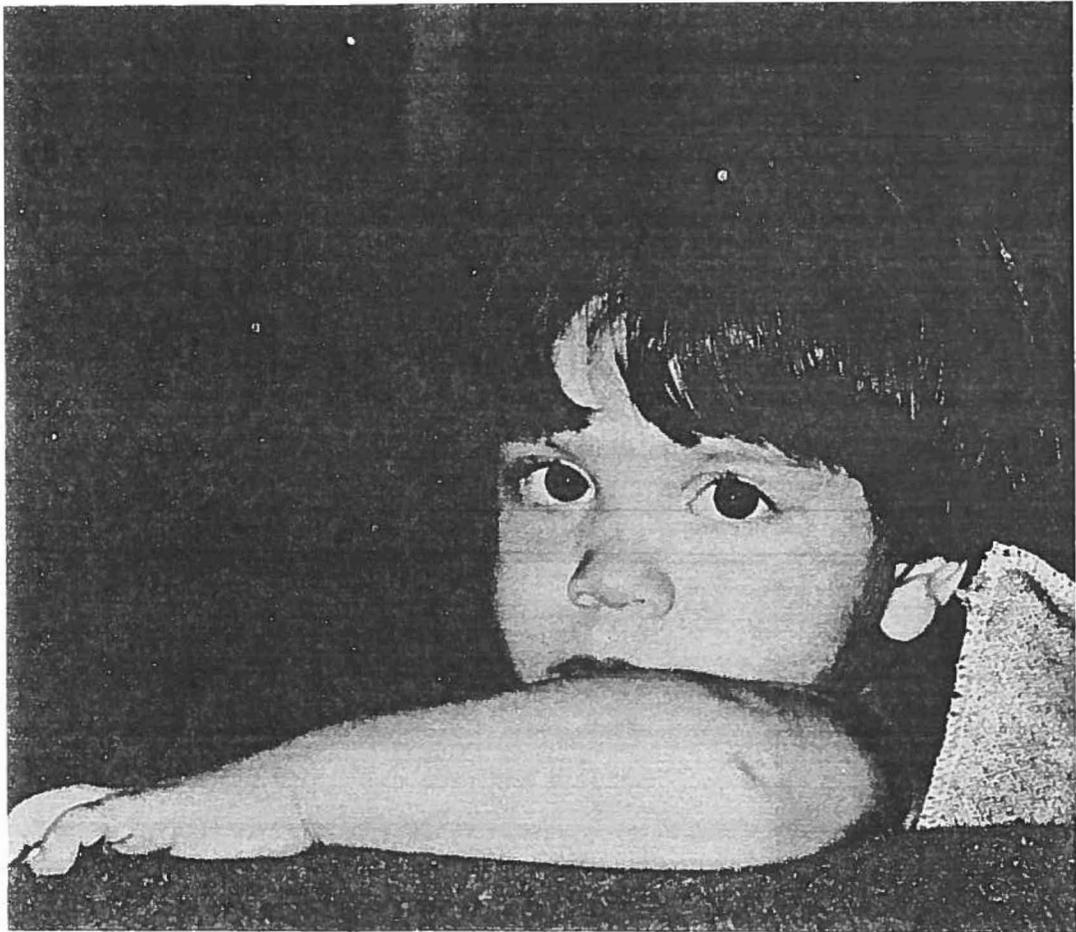
This document identifies problems inherent in today's foster care and adoption systems. These reports lay the foundation for developing new policies and initiatives which address and improve the child welfare system. This City's children deserve services which are responsive to their needs before problems become crises and are readily accessible to them, their biological, foster and adoptive families, if out-of-home placement becomes necessary.

I would like to extend special thanks to Dr. Megan McLaughlin, for her extraordinary leadership of the Mayor's Commission for the Foster Care of Children, and to the other dedicated members of the Commission and its Committees for the hard work and countless hours they have contributed in order to make this working document possible. I am confident that the Commission will continue to address other areas and propose changes which will reform the child welfare system.

Sincerely,

Cesar A. Perales

Acknowledgements



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Acknowledgements

The work of the Commission could never have been carried out without the contributions and support of many concerned individuals.

Mayor Dinkins served as both the conscience and the constant friend of the Commission. His clear commitment to improving the way our society treats its children provided a guiding light for our work.

Deputy Mayor Cesar A. Perales, who assumed chief responsibility for working with the Commission, encouraged and assisted us in recommending progressive changes in the child welfare system.

Dr. Megan McLaughlin, the Chair of the Commission, provided extraordinary leadership for our efforts. Her unwavering vision and spirit, and her dedication to the children of this city, galvanized all who had the privilege of working with her.

Josephine Pamphile, Director of the Mayor's Office for Children and Families, provided us the critical support and resources of her office. Patricia Beresford, the Staff Director, tirelessly drafted and edited various iterations of the Commission's reports and carried out the herculean task of following up on all aspects and details of its work. She, along with Staff Analyst, Alice Chin, whose organizational abilities focused us all, and Theoni Angelopoulous, Public Service Scholar, staffed our meetings and--with skill and good humor--kept us on track with our agenda and mission.

New York City's Human Resources Administration and, particularly, the Child Welfare Administration (CWA), generously shared its data and experience with us. CWA's Executive Deputy Commissioner, Robert Little, never faltered in his willingness to help our effort, even when this meant opening up his agency to the searchlights and criticisms of others. George Gabel and his staff at the Office of Management Analysis graciously put up with our numerous last-minute requests for charts, graphs and updated statistical information.

Pat Maloney, Deputy Director for the Mayor's Office for Children and Families, Dr. Barbara Emmerth, Social Work Consultant, and Elinor Bowles, Consultant, contributed their estimable editing skills; and Susan Leicher, Public Policy Consultant, provided incisive final revisions.

Alma DeGrasse from the Federation of Protestant Welfare Agencies and Savitree Balram from the Mayor's Office for Children and Families provided us with critical administrative support, and were endlessly patient in scheduling, rescheduling, and often rescheduling yet again, dozens of our meetings.

Thanks also go to Gregg Bell, of the Human Resources Administration, for the wonderful photographs; the HRA Fund for Children and Families for making the printing of this publication possible; to Wing Chu for his formatting and patience; and to John Yue, Director of DGS CityGraphics; and Edward Esposito, Foreman of the Mayor's Office of Correspondence Services Print Shop.

Special thanks to the individuals who contributed to the work of each of the Commission's committees:

The *Foster Care Committee* was skillfully chaired by Dr. Alan B. Siskind. Mario Drummonds prepared several position papers; his efforts were critical to the development of the Spectrum of Care Model. Steven D. Cohen provided his analytical expertise and Dr. Barbara Emmerth her guidance and excellent editing skills. Ezra Millstein, from the Jewish Board of Family and Children's Services, contributed ably

to the Committee's discussions, as did numerous other practitioners and administrators. Thomas DeStefano, Cecilia Francis and Ernesto Loperena made unique contributions; and Dan Kael drafted many versions of this report with diligence and grace, and ably staffed the Committee during its deliberations.

Maris Blechner skillfully co-chaired the *Adoption/Independent Living Committee* and provided outstanding stewardship and contributed vitally to the drafting of the report. Her co-chair, Charlotte Ottley, offered important input and hospitality. The Committee members, Robert Lederman, Pat O'Brien, and Alice Ott, worked diligently and added unique perspectives. Dozens of adoption experts, practitioners, administrators, attorneys, jurists, academicians, parents and concerned citizen advocates, brought their special and necessary views to the Committee's work.

Karen Goldstein brought her considerable talent and expertise to co-chairing the *Courts Committee* with Jose Nazario, who challenged the Committee to take on some of the thornier issues. Jim Purcell, Associate Commissioner at the State Department of Social Services, graciously shared his wealth of knowledge and experience and encouraged the Committee to think in the broadest possible terms. Bracha Graber, Director of CWA's Office of Case Management, and Claude Meyers, Director of CWA's Office of Program Planning, discussed the Committee's analysis of the case management system and made suggestions for reform. Jordan Peckins, the Office of Case Management's Director of Foster Care, was always available for fact-checking and feedback. John Courtney, who drafted and re-drafted the report, contributed his unique and thoughtful perspective based upon child welfare experience in both the public and private sectors. Ellen Howard-Cooper and Susan Knipps provided critical editing contributions. Elinor Bowles gave the report its final polish.

Finally, our personal and utmost thanks to all the Committee members, and particularly to the invited members, for their magnanimous contribution of time, hard work, experience, and for their rigorous and heartfelt deliberations. We are grateful and proud to have been associated with them in this effort.

Preface



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Preface

In 1991, Mayor Dinkins revitalized the New York City Commission for the Foster Care of Children to deal with a myriad of issues related to the provision of foster care in New York City. The Commission had originally been established in 1946 by the Administrative Code of the City of New York, Section 21-118, in response to an increase in the number of children in foster care, and the need to adopt more humane policies for addressing the needs of foster children. The Commission was refined and strengthened through legislative amendments in 1950 and in 1964 but, by the late 1960's, it had ceased to function.

Mayor Dinkins appointed twenty-two (22) child welfare experts to serve on the new Commission. He charged them with the task of examining existing foster care policies and practices, and presenting their findings and recommendations to Kathryn A. McDonald, Administrative Judge of the Family Court, and Barbara Sabol, Administrator/Commissioner of the New York City Human Resources Administration.

The Commission chose to focus its first efforts on kinship foster care, one of the most critical and controversial segments of the foster care system. It then turned its attention to various other aspects of the system, including prevention, foster care and adoption. Committees were selected for all of these topics. They began meeting on a monthly basis, gathering data, hearing the testimonies of dozens of experts and clients from the child welfare system, discussing the presentations and preparing reports. The kinship report was completed in November 1993. The reports of the Foster Care, Adoption and Courts Committees are contained in this document. The report of the Prevention Committee is nearing completion.

Foster care had become a major topic of concern in the late 1980's and early 1990's, when the number of children removed from the care of their birth parents and placed in the custody of the Commissioner of Social Services practically tripled, from seventeen to almost fifty thousand. The Commission was re-established in order to provide guidance for a child welfare system overwhelmed by the needs of thousands of the City's most vulnerable children to offer ways of improving a system historically beset with intractable problems.

The deliberations of the Commission's committees were necessarily slow and arduous. They forced people with strong, frequently opposing viewpoints to discuss and come to a consensus on such controversial issues as race, privacy, cultural norms, childraising practices, accountability and public cost. They forced policy analysts and administrators to devise ways to help acutely needy families at a time when budget cuts were decimating public and private social service agencies across the city.

In the end, the Commission's tremendous efforts were well worthwhile. These reports include the most recent data on the demographics and needs of the foster care population. Their recommendations are based on sound social welfare principles, and reflect the experience and needs of the children and families whose lives they will affect. Moreover, they have the broad and well-considered support necessary for shaping future policy decisions and producing much-needed change.

Three major principles guided the Commission's work, and informed all the Committee's recommended reforms:

First and foremost, children have the right to grow up safely and happily in their own families. All parents need access to adequate income, housing, health care, education and employment opportunities

in order to provide stable, secure homes for their children. While we fight for better services for families in the child welfare system, we must not lose sight of the larger battle for good quality, community-based services for all of our city's families, poor and non-poor.

Secondly, when out-of-home placement becomes necessary, the goal of foster care must remain family reunification. Every effort must be made to keep families together, to maintain ties with biological parents, and to equip these parents to resume the care and custody of their children. However, if adoption is the option of choice, it must be carried out as expeditiously as possible.

Finally, no two families are alike; the Committee's recommendations strive to offer families a wide range of options and services, to be a flexible framework within which individual family needs can be accommodated.

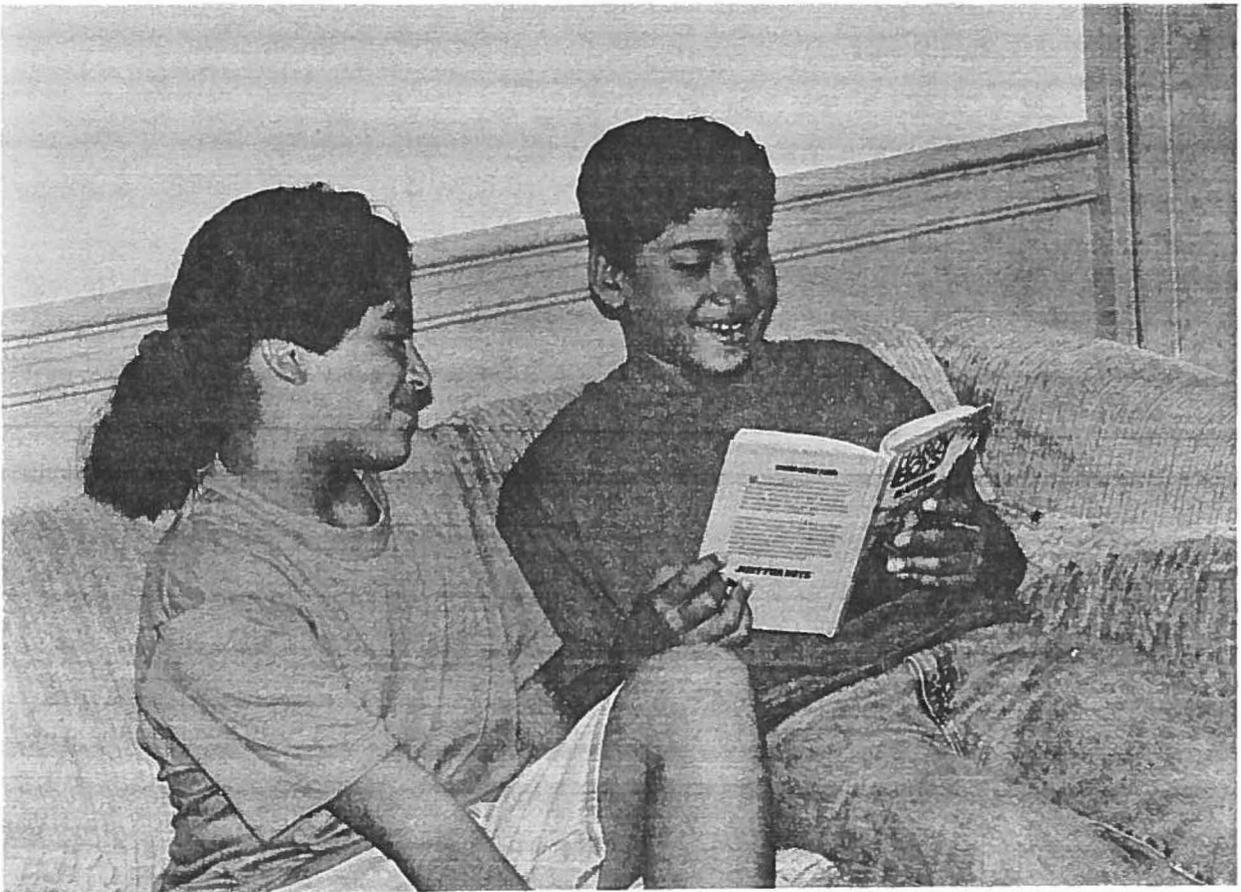
The work of the Commission was a nonpartisan effort, drawing upon the knowledge and experience of the broadest possible spectrum of practitioners, advocates and child welfare experts. It deals with a long-standing, critical issue that continues to challenge our City. The Commission's reports were not meant to sit upon the shelf. They are a call to action for all those committed to improving the lives of our citizens. Many of our recommendations cannot be carried out without changes in Federal and State laws and procedures. With a new President voicing his commitment to help families and children, the time is ripe to push for reform at the highest levels of government. We therefore offer this document as a tool to help shape the decisions of policy-makers and legislators, and we pledge our ongoing dedication to fight for better services for our most vulnerable children.

Dr. Megan E. McLaughlin
Chairperson

**MOVING TOWARD A SPECTRUM OF CARE:
FOSTER CARE SERVICES IN THE CHILD WELFARE
SYSTEM**

Prepared by the

**Foster Care Committee of
the Mayor's Commission for the
Foster Care of Children**



Dr. Alan B. Siskind
Chair of Foster Care Committee

Mario Drummonds
Chair of Work Group for
Spectrum of Care Model

1. The first part of the document discusses the importance of maintaining accurate records of all transactions and activities. It emphasizes the need for transparency and accountability in financial reporting.

2. The second part of the document outlines the various methods and techniques used to collect and analyze data. It highlights the importance of using reliable sources and ensuring the accuracy of the information gathered.

3. The third part of the document focuses on the interpretation and analysis of the collected data. It discusses the various statistical tools and techniques used to identify trends and patterns in the data.

4. The fourth part of the document provides a detailed overview of the findings and conclusions drawn from the analysis. It discusses the implications of the results and offers recommendations for future research and action.

5. The fifth part of the document discusses the limitations of the study and the potential sources of error. It acknowledges the challenges faced during the data collection and analysis process and offers suggestions for improving the quality of the research.

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Executive Summary





Executive Summary

In November, 1991, the Mayor's Commission for the Foster Care of Children convened a Foster Care Committee to examine undercare services in the current foster care system and to recommend improvements. During the late 1980's and early 1990's, foster care placements in the city had almost tripled, going from just under seventeen thousand (17,000) to fifty thousand (50,000) in just five years. The Commission, long defunct, was revived by Mayor David N. Dinkins, to reassess the state of the foster care system, and to make recommendations for reform to the Administrative Judge of the Family Court and to the Commissioner of Social Services.

The Committee began its deliberations recognizing that the foster care system cannot, and should not, be expected to solve *all* the problems of the children and families it serves. It represents only one component in the full range of services to children and families. Presentations made during the course of the Committee's inquiries established that the child welfare system has generated a considerable number of effective pilot projects. They reinforced the Committee's perception that the system suffers not from a shortage of ideas, but from a lack of cohesiveness, resources and flexibility.

Many of the shortcomings of foster care reflect pervasive deficiencies and rigidities within the larger social service system of which it is a part: a widespread shortage of basic and specialized services supporting families across the city; a major lack of adequate information systems providing guidance in planning at the system-wide and case-management levels; regulations critically limiting the ability of staff to offer an adequate range of options to clients; and an overall lack of coordination in service delivery.

The Committee concluded that it could best analyze the foster care system by first placing it in the context of the full range of services and supports needed by all families. A work group formulated a Spectrum of Care Model which (1) categorized all existing services (both foster care and otherwise) into several stages of appropriate care; (2) established a set of values to inform service delivery at every stage; and (3) promoted the coordination of care across all services. The model was used as a framework and reference point for the Committee's deliberations and recommendations.

Committee members understood that their work could not address every aspect of the vast foster care system; that many of the questions raised during their discussions would have to be addressed on an ongoing basis by various planning bodies; that many of the reforms have been proposed before; and that some of the recommended reforms will require legislative and regulatory change. They selected those areas where continued attention and action would have the greatest impact, where reform would carry the greatest weight across all aspects of the system.

The Committee's recommendations have been organized into five categories: (1) Strengthening Management Capacities, (2) Geographic Placement, (3) Professional Development, (4) Front-End Services and (5) Independent Living. The first three areas -- Management Capacities, Geographic Placement and Professional Development -- involve issues affecting the foster care system as a whole; the other two, Front-End Services and Independent Living, involve specific aspects of foster care services. All the recommendations reflect the Committee's commitment to the guiding principles of family preservation; sensitivity to individual needs; flexibility of services and options; and integration of foster care services with other available supports. A summary of recommendations follows:

Strengthening Management Capacities

- HRA/CWA must update its data processing system in its entirety, to address both centralized planning and individual supervisory and case management concerns.
- The Human Resources Administration/Child Welfare Administration must undertake an intensive internal strategic planning process to coordinate its own systems and procedures.
- CWA, the State, and voluntary providers must engage in ongoing joint planning to improve coordination of services.
- CWA must develop new methods for defining, evaluating and monitoring the quality of agency casework.

Geographic Placement

- Serving children in their own neighborhoods must be elevated to a high priority for the entire child welfare system.
- CWA should amend its computerized placement system to include geographic parameters, to help case managers make appropriate determinations.
- CWA should mandate that public and private agencies organize service delivery around local community service needs; families and children must have access to a range of child welfare services, including mental health services, in their neighborhoods.

Professional Development

- CWA should increase the clinical experience in its ranks by requiring higher minimum standards for various levels of staff (e.g., supervisors, protective diagnostic workers).
- CWA should improve staff recruitment and retention by offering more competitive salaries, establishing reasonable maximum caseloads, and addressing safety concerns of staff in the field.
- Training in appropriate areas of child development, cultural competence and family dynamics should be provided to agency staff, as well as to the family court judges and legal aid representatives, and voluntary and public child welfare workers who interact with the system, and whose decisions have an impact upon the children that it serves.

Front-End Services

- Front-end services (services provided just after a child is removed from home) should be reconfigured to avoid fragmentation of responsibility and increase the likelihood of family reunification.

Independent Living

- CWA and voluntary agencies should formalize linkages with appropriate City and State departments to increase opportunities for youth in Independent Living programs in such areas as education, vocational training, job placement and housing.
- CWA should recognize the developmental needs of older adolescents who are aging out of Independent Living programs; these needs should be addressed either through expansion and enhancement of "Independent Living" services or through the creation of a new category of services.

Introduction

The New York City Commission for the Foster Care of Children, first established in 1946, was re-vitalized by Mayor David N. Dinkins in 1991, and given the mandate to examine various aspects of the child welfare system, and recommend improvements for reform to the Administrative Judge of the Family Court and the Commissioner of Social Services. The Foster Care Committee was appointed to focus on undercare services to children and families. Members of the Foster Care Committee were selected to represent a wide variety of institutions, geographic areas, and cultural constituencies. (See front of report for a committee membership list.)

When the Foster Care Committee members began their deliberations, they understood that it would be impossible to examine every aspect of the vast foster care system. They realized that questions raised in their discussions would necessarily overlap with the work of other Commission committees on a range of issues from prevention efforts to adoption and permanency planning; some would have to be addressed on an ongoing basis by various planning bodies.

Most importantly, the Committee recognized that foster care system cannot and should not be expected to solve all the problems of the children and families it serves. The goal of the child welfare system is to prevent families from entering foster care in the first place, and to keep discharged families from returning to the system. Ultimately, however, the ability of the system to meet this goal depends in great part upon the strength of an entire range of available family services. The child welfare system does not exist in a vacuum; it must be analyzed within the framework of a much larger, inter-dependent human service system which includes education, health care, housing, day care, employment, youth development and mental health services.

Given this premise, the Committee decided to carry out its deliberations within the framework of a model depicting the range of services needed by *all* the city's families, at *all* economic levels -- and not just those "in" the foster care system. It proposed a comprehensive "Spectrum of Care Model," which categorizes existing services into several stages of appropriate care, establishes values governing care delivery at all stages, and promotes coordination of services across all stages.

The values incorporated in the model--family preservation, cultural appropriateness, flexibility of service delivery--informed all the Committee's discussions; and the model serves as a reference point throughout this report.

The report is divided into three sections. The first describes the research and inquiries of the Committee, and offers background on the child welfare system--a brief history of recent efforts at reform, and a description of the population it serves. The second section describes the development of the Spectrum of Care Model, and presents the guiding principles on which the Committee based its recommendations for reform. The last section presents a discussion of issues in five areas of foster care delivery, and presents the Committee's recommendations.

It must be emphasized that, besides uncovering problems and shortcomings in the child welfare system, the Committee's work also revealed numerous initiatives demonstrating great creativity, promise, and early indications of effectiveness. Kinship-based foster care, family preservation efforts and many of the current Independent Living programs, all promote an integrated approach of flexible, culturally sensitive efforts designed to keep families together and maintain children's sense of security and self.

The problems cited in this report do not negate the heroic work carried out by so many in the public and voluntary sectors to help families in need. The recommendations offer a plan for making the tasks of these individuals and agencies easier and more effective, by increasing the coordination and integration of planning and resources; by removing unnecessary restrictions; and by expanding the support and training available for staff.

BACKGROUND

The Committee began its work by reviewing past reports and recommendations on reforming foster care; by gathering statistics on the composition and demographic trends in the population in the system; and by hearing presentations on a range of policy, service and operational issues. (See Appendix for a list of guest presenters.)

Although the Committee's investigations provided useful data and excellent analyses of certain programs and problems, they also made the Committee keenly aware of the relative scarcity of information on both the characteristics of children in the system, and the degree of program effectiveness. There were no statistics available, for example, on the rates of recidivism for children at various ages and level of care. There existed no analysis of the impact of recently accelerating rates of teenage pregnancy on the foster care system.

The absence of solid analytic data in these areas suggested that there is a good deal that CWA does not know about the youngsters in its care. In addition, it limited the Committee's ability to determine which areas of the system require the greatest attention.

The History of Reform

Proposing changes in New York City's child welfare system is not a new activity. Foster care has been extensively studied and criticized, and recommendations for improvements have been suggested many times in the past. In 1986, Professor Brenda McGowan of the Columbia School of Social Work, underlined a 40-year history of failed efforts to reform New York's complex child welfare system, characterizing this failure as being the "inevitable outcome of the repeated tendency of City and State officials to look for 'quick fix solutions' to the very complex legal, moral and social questions posed by...the inability...of large numbers of parents to care adequately for their children."¹

The foster care system as we know it has been largely shaped by two laws--the Child Protective Services Act of 1973 and the Child Welfare Reform Act of 1979--enacted by the New York State legislature to set standards for protective services, preventive services and permanency planning for all children in New York State who are victims of abuse and neglect, or who are at risk of such mistreatment. Since the passage of these acts, a number of task forces and committees have directed their attention towards analyzing and making recommendations for reforming the system, with uneven results.

In 1980, a Task Force on Foster Care appointed by Mayor Edward Koch, issued a report entitled *Redirecting Foster Care*,² designed to examine the foster care system and suggest a new course. In 1985, a Monitoring Committee reported on how effectively the 104 recommendations in *Redirecting Foster Care* were being implemented, and observed that "the journey left to cover is much longer than the distance already traveled."³

In 1986, the Neighborhood Family Services Coalition released *The Continuing Crisis: A Report on New York City's Response to Families Requiring Protective and Preventive Services*.⁴ The study revealed devastating failures in the coordination between protective services and preventive services, but very few of its recommendations have been adopted.

By 1989, the effects of increasing poverty, homelessness and drug use were being felt across the city. The incidence of child abuse and neglect was increasing at an alarming pace. The Manhattan Borough President's Advisory Council on Child Welfare, appointed by David Dinkins and chaired by Dr. Megan McLaughlin, released its report, *Failed Promises — Child Welfare in New York City: A Look At the Past, a Vision for the Future*.⁵

Failed Promises sounded the alarm that our communities, ignored for so many years, were in grave distress. It stressed the critical need to help communities in trouble, not just the foster care system. It urged decentralization of CWA in the form of neighborhood "Family Service Centers," and called for invigorated political will to address the crisis. It recommended increased preventive services, as well as expanded coordination among social services of all types. It struck a note with those who had worked for years within the child welfare system, and led to the initiation of a number promising reforms, which have yet to be fully implemented. We strongly support continued pursuit of these goals.

Some of the Committee's present recommendations build on those made by prior task forces and committees. Others are newly-conceived and reflect the growing awareness of the need for a more integrated, flexible, culturally sensitive and collaborative system of social service delivery.

The Children in the System

The statistics provided by CWA reveal that there are currently 48,086 children in the system. Children of color are overwhelmingly in the majority, accounting for 92.9% of the total foster care population.⁶ (See Table 1). This overrepresentation of African-American and Latino children is consistent with the disproportionately high percentage of families in these populations who are living in poverty.

Table

1

Ethnic Group	Number of Children as of 6/30/93	Percentage of Total as of 6/30/93
Black	34,910	72.6%
Latino	9,762	20.3%
White	1,635	3.4%
Other	1,779	3.7%
Total	48,086	100.0%

Note: It is assumed in these statistics that children of "unknown" ethnicity can be categorized in the same proportions as children whose ethnicity is known.

Table 2 provides a picture of the age distribution of children in care. Currently, the greatest number are between 6-12 years old, representing a change from prior years, where the greatest number were contained in the younger, 2-5 year old cohort.⁷

Age Group*	June 1991	June 1992	June 1993
Less than 2	6,979	5,726	4,953
Between 2 & 5	16,647	16,043	15,243
Between 6 & 12	15,696	14,909	16,878
12 or Older	10,492	12,687	11,012
Total	49,814	49,365	48,086

* Ages estimated.

Table 2 also reveals a gradual decrease in the number of children in care over the past few years. This corroborates other CWA data showing declines in placement from about 1,300 per month in early 1991 to about 700 per month in early 1993. In fact, a June 1993 report⁸ documents that, since early 1992, the number of monthly admissions has been consistently lower than the number of discharges. Additionally, it is interesting to note that other data indicate that length of stay in foster care--both for kinship and non-kinship populations--seems to be increasing.⁹

There are no conclusive explanations for the trend towards decreasing placements, but factors may include the increase in preventive services, the fact that crack use is declining,¹⁰ and the introduction and expansion of two specific programs that aim to prevent placements by addressing the needs of families in crisis: the Family Preservation program, which provides intensive, home-based, short-term services to resolve immediate family crises, and the Family Rehabilitation Program, which coordinates case management and substance abuse treatment services when parental substance abuse is a key protective issue. While CWA's broad statistics tell only part of the story, they do convey the need to plan around reduced demand for out-of-home services, while arguing for the success of--and continued investment in--preservation and rehabilitation programs.

DEVELOPMENT OF THE SPECTRUM OF CARE MODEL

As committee members heard the presentations of various experts throughout the system, they were consistently impressed with the work being done in various areas through such projects as Agenda for Children Tomorrow and the New York State Department of Social Services' Neighborhood Based Alliance (NBA) project. In fact, the more the Committee heard about these specifics, the more clear it became that what the system lacked was not creative ideas or pilot projects, but rather a broader view of the spectrum of services needed by families and children — a conceptual framework that would help identify which services a child or family might need, and where to find those services.

The Foster Care Committee recognized that the child welfare system is not fully integrated into the larger network of human services which support New Yorkers. Services are not coordinated among agencies and providers, and there is a failure to explore all possible options for helping families in need. Although a family may benefit from CWA-sponsored preventive services, for example, it may also benefit from any number of services that are not part of the formal child welfare system.

Having come to these conclusions, the Committee members proposed a set of guiding principles for service delivery, and designated a work group to develop a model for a comprehensive, integrated system of service delivery for New York's families and children. The guiding principles of the Committee, and a description and graphic representation of the Spectrum of Care Model, are presented below.

Guiding Principles of the Mayor's Commission for the Foster Care of Children

1. Children should be given every possible chance to grow up in their own families.
 - We must do all we can to prevent the need for foster care by providing all families with the supports and services they need--viable communities, day care, education, jobs, adequate housing and health care.
 - For families with fewer resources, or facing more pressing problems created by poverty, substance abuse or illness, we should provide a range of additional services including employment training, individual and family counseling, drug treatment programs and crisis intervention efforts such as the Family Preservation or Family Rehabilitation program.
2. When it is necessary for a family to enter the foster care system, every effort should be made to maintain children's sense of security, culture and identity, and to work towards reunification.
 - Wherever possible, children should be placed with extended family members or godparents, and these kinship foster parents should be given the resources to adequately meet their needs.
 - Case planning should be family-focused, culturally appropriate, and child-centered.
 - Services should be accessible within the community where the family resides.
 - The staff providing these services should be linguistically competent, and educated about families' culture and traditions.

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3. All families are different, with distinct needs, abilities and readiness to respond to services.
 - Staff should be trained to provide on-going assessment to meet differential needs.
 - Services from the full range of social service systems must be made easily accessible to families needing support beyond that provided by CWA.

Description of The Spectrum of Care Model

The Spectrum of Care Model presents an ideal paradigm for providing social service to the wide spectrum of the city's families. It is based on the premise that all families--both those that are currently stable, and those at various stages of isolation or difficulty--require a broad, integrated range of support services.

The model describes five stages of development in which families may find themselves, and suggests the services required to meet their needs at each point. It underlines the interconnectedness of the stages, and the fact that families may enter at any point. It stresses that the services available at each stage should be coordinated with each other, and with the services at other stages. The Commission's guiding principles of service delivery--i.e., a holistic approach to families, an emphasis on preventive services, maximum flexibility and minimum restrictiveness, cultural sensitivity--inform all five stages of the service model.

In its graphic representation (See page 33), the stages of development/categories of care are shown in a spoked circle to suggest how all services are related to one another, and to show how children and families should be able move from one level of service to any other appropriate level of service. The circular representation also shows how one end of the system — aftercare — should re-connect with community-based supports at the other end of the system in order to prevent recidivism.

The stages of the Spectrum of Care Model are as follows:

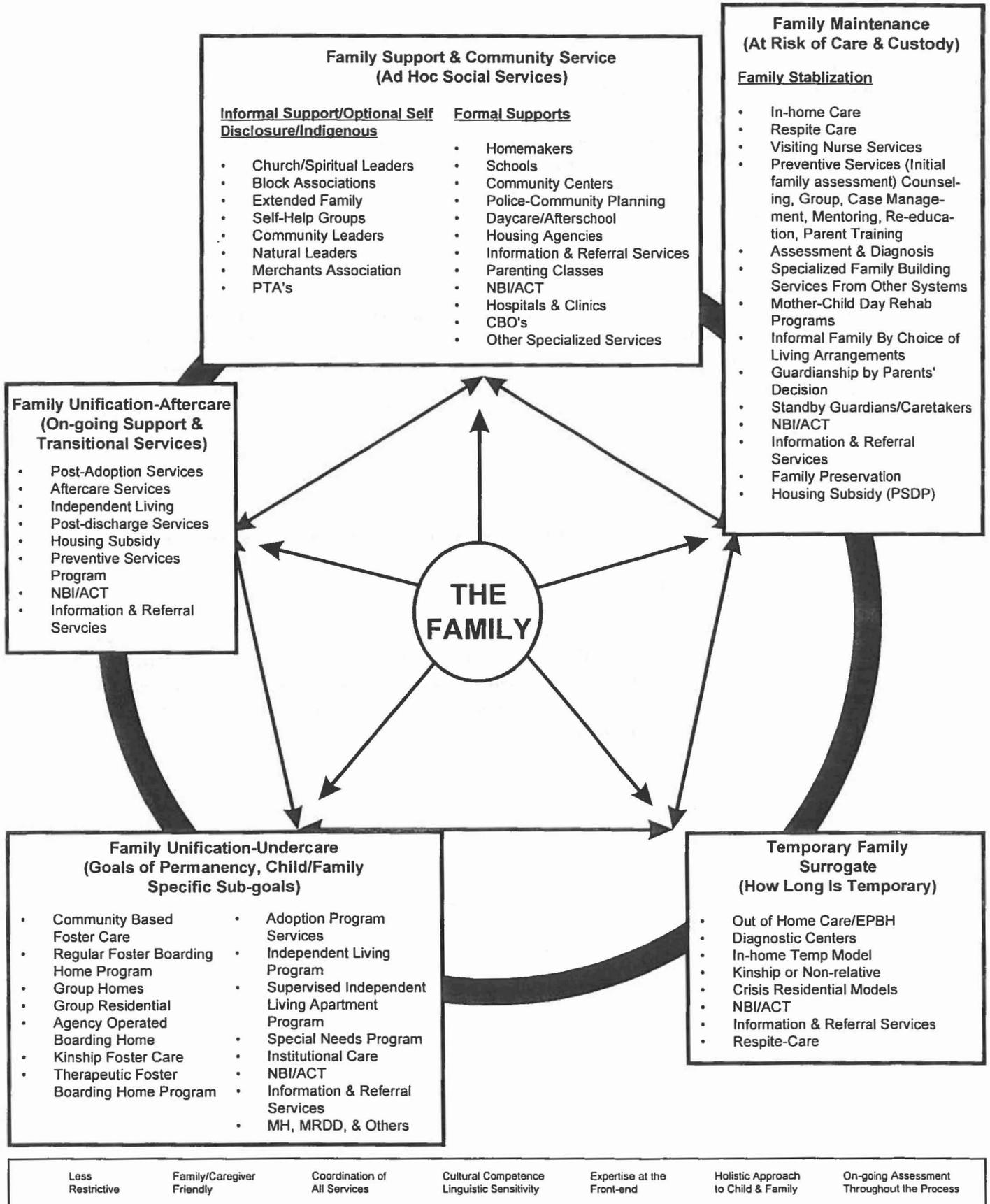
1. Family Support and Community Service Stage

Social services in this category are delivered ad hoc. They are appropriate for relatively intact families that seek out help voluntarily and respond to outreach efforts.

2. Family Stabilization/Maintenance Stage

The services provided at this stage are appropriate for families that are isolated, less aware of available services, or less willing to use services; or where children are at risk of out-of-home placement.

Proposed Spectrum of Care Model



placement.

3. Temporary Family Surrogate Stage

The services listed in this category are targeted for families that are in temporary crisis and do not have enough supports or resources to make use of less restrictive services. At this stage, short-term surrogate care is necessary, and every effort should be made to engage extended family members.

4. Undercare Stage

The options provided at this stage are for children who need out-of-home placement for an extended period of time. As in the previous stages, every effort should be made to engage extended family members, and the goal should remain the re-unification of families, whenever possible. When family unification is not appropriate, services such be geared to helping children strengthen ties with kinship families, find adoptive families or prepare for an Independent Living program.

5. Aftercare Stage

At this point children have been either reunited with their birth families, adopted, or housed in a supportive Independent Living arrangement. Aftercare services may be necessary to help prevent recidivism or homelessness.

It should be stressed that the child welfare system already espouses many of the values incorporated in the Spectrum of Care Model. However, the system does not always function in a way that reflects those values, and cannot be expected to do so unless it undergoes substantial reform. The recommendations made below represent the Committee's attempt to propose concrete changes that will move the system closer to the Spectrum of Care Model ideal.

DISCUSSION AND RECOMMENDATIONS

Cognizant that it could not possibly examine and make recommendations about every aspect of the child welfare system, the Commission limited its analysis to the five areas where the need for attention seemed greatest, or where reform promised to carry the greatest impact upon the functioning of the system as a whole.

The areas selected for discussion are: Strengthening Management Capacities, Geographic Service Delivery, Professional Development, Front-End Services, and Independent Living.

In the first three areas, the changes recommended help promote the delivery of comprehensive, integrated, family-oriented, flexible, culturally appropriate services across the full foster care system. In the last two, the changes suggested promote these values within specific aspects of service delivery.

The discussions and recommendations for changes in each area are presented below.

I. Strengthening Management Capacities

Issues

CWA's capacity to serve clients has been drastically handicapped by antiquated information systems, insufficient opportunities for collaborative planning with other stakeholders in the child welfare system, narrowly focused evaluation methods, and rigid oversight practices.

Recommendations

- 1. CWA must establish state-of-the-art computerized management and information systems to improve its day-to-day functioning and long-term planning ability.**

Without adequate data and computer capacities, administrators cannot predict the size, nature, and needs of future service populations, and plan for the recruitment and development of the work force. They cannot evaluate the impact of both long-standing and new initiatives or make decisions about where to target resources most effectively. Case workers spend needless time on paperwork that a computer could handle speedily; they are also stymied by a lack of access to key information about clients' medical and family histories and about available foster homes with particular characteristics in specific geographic areas. CWA has made considerable progress in the area of data collection, but must continue working to increase its technological capacity to gather, organize and communicate necessary information.

- 2. HRA/CWA must undertake an intensive internal strategic planning process to coordinate its own systems and procedures.**

This internal planning process will improve service coordination and lay the foundation for joint planning with the State and voluntaries. Such a planning process will not be possible, however, without the technological capacities outlined above.

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3. **Existing groups, such as the Council of Voluntary Child Caring Agencies and Child Welfare Administration (COFCCA/CWA) Issues team, and the newly convened DSS/CWA/Voluntary Joint Planning Group, should be maintained (and merged, where feasible) to make sure that all parties share information, do strategic planning addressing emerging issues in the field, and are responsive to each other and to the needs of those in the foster care system.**
 4. **CWA, the State, and voluntary providers must engage in ongoing joint planning to improve coordination of services and to develop new methods for defining and evaluating the quality of agency casework.**

Evaluation methods should measure how effectively children and families are being served. CWA's Program Assessment System (PAS), implemented in 1981, focused on quantifiable aspects of foster care and set the tone for service delivery for ten years. Many who worked in the system felt that PAS' emphasis on numbers and compliance with regulations fell far short of measuring how well agencies worked with families and children. Establishment of the Agency Self-Assessment System in 1992 to replace PAS was an important first step in improving evaluation methods, but the Self-Assessment System is limited in what it reveals about the quality of service delivery.

The Commission submits that quality of care should be judged more on the basis of the actual tasks and processes of case workers and behavioral outcomes of clients, and less on whether case workers make the right numbers of visits per month or complete certain paper work assignments in the time frame stipulated by state regulations. The nature of trying to shape human emotions and behavior is such that we cannot necessarily expect to achieve all client goals within set time frames, nor can we expect that good casework practice will necessarily change client behavior in every instance. The system should encourage case workers to meet the differential needs of families and children on a case-by-case basis.

Leadership at CWA and in the voluntary sector must collaborate to re-define good service delivery, to make sure that it is reimbursed, and to convey new standards to staff working directly with families and children.

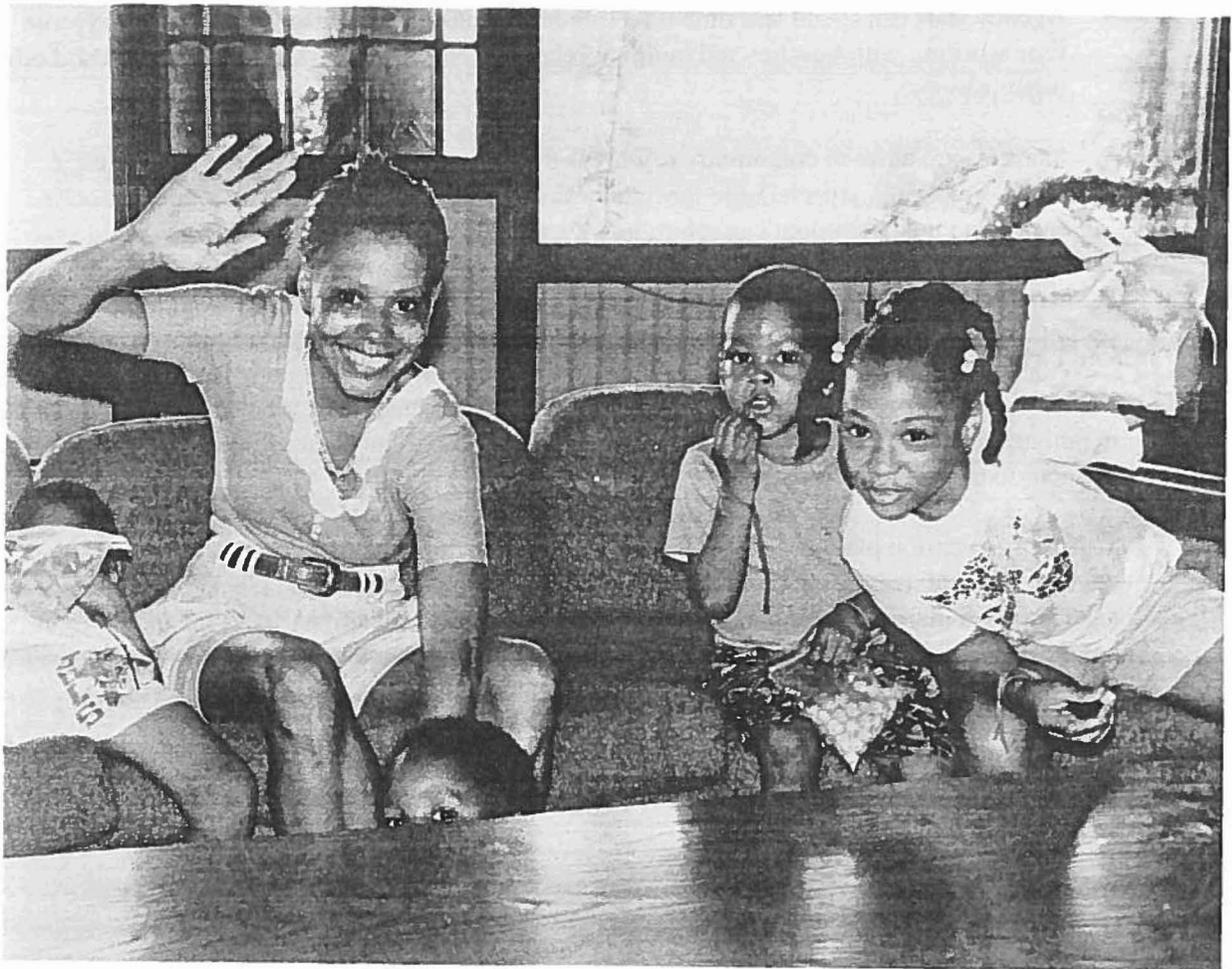
5. **CWA, in consultation with voluntary providers and with the participation of DSS, should change the process by which it oversees voluntary agency casework, beginning with reducing the number of activities that require pre-approval.**

As it stands, CWA is required by statute to oversee the work of voluntary agencies; under the current contract, CWA chooses to exercise this oversight role in a manner which requires many different types of approval. The effects of this are both to minimize the scope of professional judgment for those who actually work with children and families, and to slow down the entire process as activities await CWA approval.

CWA case managers, burdened with high caseloads and inordinate amounts of paperwork, have little opportunity for meaningful contact with either the children for whom they are responsible or the agency professionals caring for children; yet these case managers have the

responsibility to approve or disapprove components of agencies' "treatment plans." It is not the fault of overburdened case managers. Some case managers have reported that the current monitoring process leaves them feeling demoralized and deprofessionalized. The process also makes some agency professionals regard case managers as impediments to sound treatment, rather than partners.

Reducing the number of activities that require pre-approval has already been recommended by the Mayor's Commission and CWA has begun to implement the change. If case managers can approve overall UCR plans along with steps for implementation, then agencies will not need subsequent approvals before effecting steps in the plans. Though there may be some difficulties in implementation, this initiative will reduce unnecessary delays in treatment or discharge and should be supported. (See the Courts Committee report for a more detailed discussion of this matter.)



II. Appropriate Geographic Service Delivery

Issues

The goal of serving children within their own neighborhoods, close to family, friends and schools, has been emphasized and endorsed repeatedly in the past decade. However, the system has not yet undergone the organizational changes that will help make this goal obtainable. The reality is that overwhelmed CWA workers, while in agreement with the principle of reinforcing children's feelings of security, identity and familiarity, are happy to find any suitable home for a child, regardless of location.

It is worth re-emphasizing the benefits of placing children in their neighborhoods of origin:

- Children are able to maintain connections to their school, friends, churches and other social institutions, which helps to reduce disruption in their lives.
- Agency staff can spend less time traveling between remote locations and can spend more time working with families and building relationships with local service providers and other organizations.
- Families are close to community resources that are used in the treatment and discharge process; children are available for regular family visitation; the work of reunification is easier and many children can return home sooner.

With state and federal funding sources now placing more emphasis on local community revitalization (e.g., through Neighborhood Based Alliances and Economic Empowerment Zones), CWA and voluntary providers must begin planning right away to reorganize around community-based service systems. Local child welfare infrastructures need to be created so that individual neighborhoods can provide their own spectrum of care, from the most informal family support services to out-of-home placement.

This reorganization plan (as outlined in the recommendations below) emphasizes geographic concentration of agency foster boarding homes and related services; the physical location of an agency office in or near neighborhoods the agency services; sensitivity to racial and cultural composition of neighborhoods; and the elevation of geographic considerations to a high priority for CWA staff assigned to make placements.

Recommendations

- 1. CWA should amend the current placement system to make geography a significant criterion in placement decisions; the Automatch system should be revised to include geographical parameters, to help case managers make appropriate determinations.**

Too many children are needlessly placed far away from their families and their community, which makes the work of reunification all the more difficult. Of course, geography cannot be the only relevant criterion in determining placement. There will be cases in which deciding between a placement closer to home or, for example, a placement with a relative in another borough, will not be easy.

- 2. CWA should mandate that public and private agencies organize service delivery around local community service needs; families and children must have access to a range of child welfare services, including mental health services, in their neighborhoods.**

The implementation of this mandate should take the form of setting criteria for “good community-based care.” These criteria should include involvement with local community boards, involvement with local institutions, etc., in addition to the usual clinical standards for sound service. Further, these criteria should be designed to make different kinds of providers evolve in the following ways:

- Community-based providers (located entirely within the neighborhoods they serve, and operated by executives and board members who reflect or represent the populations of those neighborhoods) would continue to build strong ties locally and would be expected to forge partnerships and share expertise with centralized providers.
- Centralized providers with satellite offices in local neighborhoods would be expected to maintain and strengthen their satellite offices. Specific criteria would help agencies determine which neighborhoods they are best equipped to serve. These providers (managed centrally, with input from advisory boards that usually represent the class, culture and ethnic base of neighborhoods being served by satellites) would be expected to establish partnerships with community-based agencies in order to fill gaps and maintain services wherever possible.
- Completely centralized providers (often located far away from the neighborhoods they serve, and operated by executives and board members who usually do not reflect or represent the populations of those neighborhoods) would have to make choices about where to concentrate their services. At a minimum, they would be expected to develop satellite offices and to collaborate with community-based services in order to strengthen ties to local neighborhoods.

In the difficult transition period before these centralized providers have established a physical presence in selected neighborhood, the providers should designate teams of workers to concentrate on certain catchment areas. While these workers would operate from a central location, they would have a chance to become familiar with the resources in their catchment areas. (Since there is no perfect way to establish neighborhood boundaries, catchment areas can be defined by zip codes and/or community districts.)

3. CWA Case Managers should be stationed at local field offices.

Working out of local offices would make it much easier for case managers to develop relationships with agency professionals and expedite approvals of discharges, UCRs, medicals, and emergency actions, etc. Where it is not fiscally possible to maintain separate offices, CWA - like centralized voluntary providers - should establish teams of workers to concentrate on certain geographic areas. These workers would operate from a central location, but they would have the opportunity to become familiar with the agencies, directors and staff in their catchment areas.

III. Professional Development

Issues

CWA staff are the crucial link between at-risk children and the vast network of services available. Increasing the clinical expertise of CWA staff should be a fundamental objective, both in the system as it is currently designed and in any newly configured system that might emerge as the result of long-term planning. Increasing staff's capacity to be culturally competent regarding client's needs will assure the creation of more appropriate service plans; increasing skills and autonomy will assure more effective use of available resources. Reducing case loads, offering better salaries and increasing safety and security will help reduce turnover and improve morale.

In addition, the system as a whole will benefit from increased knowledge and sensitivity on the part of those making decisions about, and providing care to, families and children--judges in the courts, legal advocates and clinicians and caseworkers in voluntary agencies.

Recommendations

1. CWA should require a Masters of Social Work degree or some comparable clinical expertise or experience in its supervisors.

Some divisions of CWA, including Preventive Services, already have such a requirement in place. This minimum standard should be established in other divisions.

Currently, many Child Protective Services workers are making placement decisions without enough training to assess the child and family appropriately. Ensuring the continued

professionalization of supervisory ranks would help to guarantee that placement decisions of Protective Service workers were being appropriately reviewed. Enhanced supervision would promote more thorough evaluation, consideration of a family's strengths and of the range of options that might support it and, when a child must be placed in care, appropriate consideration of what level of care and what kinds of special services are needed.

2. The City and the voluntary agencies should find ways to provide financial incentives to bi-lingual and multi-lingual casework staff.

Work-force development is crucial if CWA and provider agencies are to increase their capacity to provide services that are culturally competent and that can be delivered in the primary language of a child and family. Schools of Social Work, along with the city, should be encouraged to find ways of attracting and retaining students of diverse cultures, with familiarity of diverse languages, by supporting scholarships, offering help with loans, etc.

3. Education in cultural competence for existing CWA and voluntary agency staff should be supported.

This recommendation recognizes that CWA and the voluntaries will never be able to maintain a work force that perfectly reflects its client base. Given that reality, education in cultural competence becomes all the more important.

The goal of serving families in their primary language, for instance, appears less realistic when we realize how many languages are currently spoken among New Yorkers. Korean, Russian and Haitian Creole are now prominent languages in New York City. There simply may not be a sufficient supply of multi-lingual social workers, child care workers, and protective services workers to meet the needs of all New Yorkers.

Further, the system should recognize that there will be situations in which it cannot always accommodate cultural norms. For example, many cultures are uncomfortable with women in positions of authority; yet it would be unreasonable and impractical to expect female child welfare workers and agency professionals to excuse themselves from cases.

Education in cultural competence will help CWA staff respond to families and children with appropriate sensitivity to cultural issues.

4. CWA should establish minimum standards for Protective Diagnostic workers.

Protective Diagnostic workers, like police officers, doctors and firemen, are often called upon to make potentially life-and-death decisions. Yet there is no test to measure whether or not protective diagnostic workers are prepared to make those decisions.

Trainers at CWA's Satterwhite Academy should be given more authority to evaluate the readiness and suitability of new workers. A test should be developed to measure both a worker's grasp of information and a worker's ability to apply that information to the job. Trainers should be able to share their concerns about individual Protective Diagnostic

workers with the workers' supervisors.

New Protective Diagnostic workers should also have the opportunity to "shadow" experienced workers in the field for at least six weeks.

5. CWA should work to enhance relationships between the Satterwhite Academy and academic institutions.

Ideally, trainees at the Satterwhite Academy should be able to earn continuing education credits toward Social Work Degrees. This incentive would help professionalize the ranks of CWA. Since only schools authorized by the State as degree-granting institutions can grant college or graduate credits, the Satterwhite Academy would have to undergo significant reorganization to achieve such a goal. However, the academy can take steps to enhance relationships with colleges and universities by making use of visiting lecturers, gaining access to research facilities, etc.

6. CWA and the voluntary agencies must make every effort, despite budgetary constraints, to increase salaries of child welfare workers.

It must be recognized that the high level of staff turnover at CWA and voluntaries is due in part to salaries that do not correspond to the importance of the work, and do not match the salaries offered elsewhere. If job candidates can earn more money working for the Probation Department than they can working for CWA or for voluntary agencies, then the child welfare system will continue to have difficulty attracting and retaining the best possible casework staff.

7. CWA should establish statutory maximum caseloads for all caseworkers.

Government officials know that the public will not tolerate drastic reductions in police or fire protection, so the police and fire departments are exempt from the worst effects of City budget cuts. Children and troubled families have little political clout as a group, so the pressure to maintain foster care services must come from elsewhere.

CWA and voluntaries should push to have reasonable maximum caseloads for all caseworkers established by statute. In the absence of a state statute, the city should establish such maximum caseloads as policy.

8. CWA should identify potentially dangerous situations in which child welfare workers should be deployed in pairs rather than alone, and in which solo workers should be equipped with mobile phones in case they need help in the field.

It is the job of many child welfare workers to intervene in potentially explosive family situations. CWA should take steps to ensure workers' safety by all available means. At the very least, a solo worker should have a mobile phone in case an embattled family does not have an operative telephone at home.

9. CWA should sponsor training for family court judges and legal advocates in clinical and cultural issues.

Judges make placement decisions based on information from legal guardians, legal aid representatives, and court appointed special advocates. However, these judges and advocates often have little training in child development, cultural competence, family dynamics and screening issues, and may have little knowledge of the resources available to them.

Some minimal training in cultural competence and clinical issues should be provided. At the very least, training should be provided in how to use available resources.

This training should be mandated for judges who have yet to be appointed and strongly encouraged for those judges already on the bench.

IV. FRONT-END SERVICES

Issues

The moment of crisis when a child enters the foster care system should be the time to rally around the family and child, mobilize extended family members and coordinate support services, so that the child can return home quickly; instead, our current system often fragments just at this critical time, and children stay longer in foster care because we have missed a window of opportunity.

As the system is now structured, responsibility at the point of placement is divided in such a way as to hinder swift reunification of the family:

- CWA's Office of Field Services (OFS) remains responsible for services to the parent(s), while the voluntary agency takes on responsibility for working with the child(ren).
- The OFS worker, having accomplished his or her protective mission, has little incentive to remain substantively involved with family, especially when facing the press of new abuse and neglect allegations which must be investigated.
- The foster care agency worker is required to assess the child's emotional and medical condition, and support the child's adjustment to foster care during the initial period of placement. However, arranging visitation is the worker's only required contact with the family until planning responsibility is transferred by CWA — a process that almost always takes at least 45 days and often takes more than 90 days. In practice, most agencies make some effort to begin their work with families well before this process is completed, but there is still a significant delay in the activities that can ultimately lead to reunification.
- In most cases very little information is provided to the agency at the time of placement. Even if the agency tries to contact the OFS worker to find out what is known about the family, it finds that OFS staff are rarely available because they are in the field conducting other

investigations. (Moreover, in many situations, where children have been placed at night by Emergency Children's Services staff, the OFS worker may not even know the family.)

- Legal proceedings further confound efforts to coordinate services; in cases where CWA is pursuing an abuse or neglect petition in court, it may discourage the foster care agency from being active with the family before the petition is heard, because such activity can complicate the court case.

For all of these reasons, the initial period of placement is one in which coordinated effort is rare. This results not only in the loss of time but also in the readjustment of all parties to their new situations (the child's adjustment to life in foster care, the parents' adjustment to life without the child at home), making work of reunification all the more difficult.

Recommendations

- 1. Planning responsibility for the case as a whole, and the responsibility to work with the parent(s), as well as the child, should be formally transferred to the foster care agency immediately upon placement.**

Although most agencies do attempt to engage families before formal transfer, the responsibility of agencies to work with families should be encouraged and formalized. The work of reunification is more likely to be successful if agencies have responsibility for the case as a whole.

- 2. CWA should redefine the responsibilities of protective workers to clearly include contact following placement with the foster care agency worker who will be working with the family.**

The purpose of such contact should be both to provide the foster care worker with information gained during the protective investigation, so assessment will not have to begin again from scratch, and to coordinate efforts to the extent possible even when a court proceeding will occur.

- 3. CWA should explore the possible expansion of the Emergency Foster Boarding Home Program.**

While no statistics are available, it appears that this program, which was historically limited to 90 days after placement and includes smaller caseloads and an emphasis on returning children home, has had some success.

- 4. CWA should pilot the use of family preservation approaches, now used in an effort to prevent foster care, immediately following placement, with the aim of rapid reunification.**

The "home re-builders" idea, which will provide funding for foster care services on a per client basis, regardless of length of service, rather than on a per-day-of-service basis, might be adapted as a vehicle for this model.

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- 5. CWA should also sponsor the development of post-discharge preventive services programs within voluntary agencies, to make possible ongoing support and work with families that have their children returned home quickly after placement.**

Preventive services help to keep families from entering the foster care system in the first place, and they should play an equally important role in keeping families from needing to re-enter the system when a child has been discharged after a brief placement.

V. Independent Living

Issues

The goal of family reunification is based on the assumption that families, with the necessary supports, are best equipped to care for children over the long term. In some cases, however, service providers recognize that family reunification is inappropriate. For children who cannot return to their families, permanency planning must incorporate those aspects of long-term care that we normally expect families to provide.

Over the last decade, Independent Living programs have been developed to help prepare children aging out of foster care to live on their own. While surveys suggest that some youth do manage to find jobs, enroll in school, and maintain housing after leaving foster care, it is also increasingly apparent that there are some serious gaps and deficiencies in Independent Living programs that need to be addressed. Staying afloat in New York City is difficult for all young people — especially those without means — but it can be particularly formidable for young people who are being discharged from foster care, because these youths have few social supports and have been inadequately prepared to compete for scarce housing and employment.

Recommendations

- 1. Criteria should be established to determine the effectiveness of “life skills” experience for all children in foster care.**

All children in foster care, regardless of their permanency planning goals, should be provided with the same basic “life skills” experience that other children get in their own families. CWA should ensure that “life skills” experience is included in outcome measures.

- 2. CWA should develop a waiver system to allow children to enter Supervised Transitional Independent Living Programs before reaching age 17 (when appropriate), and to allow them to remain more than one year.**

Older children often need more time in supervised Independent Living programs and, in some cases, there is no compelling reason to wait until they are age 17 to start helping them make the transition.

3. CWA, in conjunction with voluntary agencies, should increase options for youth in foster care by improving and formalizing liaisons with a number of city and state departments, as follows:

- CWA/voluntary agencies, the Department of Employment, and the State Department of Labor should maintain a job bank to facilitate vocational placement.
- Under similar auspices, an “Apprenticeship Program” should be established to place foster care youth in situations which will enhance their skills and employability.
- The Vocational and Educational Services for Individuals with Disabilities (VESID), formerly the Office of Vocational Rehabilitation (OVR), should establish a department specifically to serve foster care youth, including 16-18 year olds. VESID and the Board of Education might be able to collaborate on this.
- CWA should outstation a high-level administrator at the Central Board of Education to advocate for appropriate school placement, special education classification, transportation arrangements and tutoring for foster care youth. Educational opportunities should include assistance with college preparation.

4. CWA and providers should also establish a “Mentor Program” to make sure that youths discharged to Independent Living maintain at least one connective relationship with an outside parenting adult figure.

A “mentor” might be a past foster parent, an extended family member, an agency staff member, or anyone who can function as an advocate for the child.

5. CWA should provide enough funding to allow for a lower child/staff ratio in Independent Living programs. The current ratio of fifty children to one worker should be reduced to a 25-30:1 staffing ratio, which will allow workers time for advocacy in the critical areas of education, housing, and employment for youth in Independent Living programs.

In addition, a lower staffing ratio would allow workers to spend more time teaching “soft skills” such as communication, interpersonal relationships, alternatives to violence and peer mediation.

6. Housing initiatives for young people in Independent Living programs should be promoted in the following ways:

- Voluntary providers should expand their missions and pay more attention to housing needs of children leaving foster care. Agencies need not hire their own housing experts, but they should develop contacts wherever possible.

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- Given the obstacles encountered by some providers that are already focusing on housing needs, the Mayor should insist that HPD make it a priority to help agencies that are planning to become involved with housing development for foster care children and their families.
 - CWA and voluntaries should promote rent-sharing roommate arrangements among older children leaving foster care. (This resembles the informal system used by many college graduates.)
 - CWA should establish a central clearinghouse for rent-sharing arrangements — a city-wide housing database could be one of the more useful centralized services.
 - Providers should explore the possibility of turning over supervised apartments to the discharged youth who live there. (The roommates would have their names on the lease and would be responsible for the apartment.) The burden would then be on providers to find new apartments to supervise, rather than on discharged youth to find their own housing.
 - Providers should establish procedures for gradually reducing supervision to older children in Supervised Independent Living roommate arrangements to help the roommates accept responsibility for apartments that may be turned over to them.
 - Given the expected shrinkage of the congregate care system, CWA and voluntaries should explore the option of converting existing congregate care facilities into affordable housing facilities for youth leaving foster care.
 - The City, CWA and voluntary agencies should support the work of the newly-convened New York City Task Force on Housing for Young Adults Aging Out of the Foster Care System.
7. **CWA should recognize the developmental needs of older adolescents who are aging out of Independent Living programs; these needs should be addressed either through the expansion of “Independent Living” services or through the creation of a new category of services.**

Because there are so few services available to youth aging out of Independent Living programs, many young people discharged from care end up living on the streets. We should recognize that even older adolescents who have grown up with every advantage would have trouble managing in these difficult times without the emotional and financial support of their families. CWA/providers should develop and expand services for youth aging out of Independent Living programs that will increase the likelihood that they will be able to participate in the life of the community as young adults.

Conclusion

It bears repeating that all of the recommendations in this report are part of a larger vision of a coordinated system in which children and families get the care they need when they need it. While many recommendations have called for action specifically at CWA, the Commission would like to stress that voluntary providers need to take steps along with CWA to improve services in the foster care system.

Although there are many areas of the foster care system that have not been addressed in this report, we have worked to provide a context in which to examine all aspects of the system. The Spectrum of Care Model presented here is not a radical new invention but rather an organizational framework that links a vast array of existing services. We envision a child welfare system that acknowledges the role of professionals in assessing needs and providing care; that views children in the context of families and neighborhoods; that provides the least disruptive appropriate services; that is sensitive to the ethnic and linguistic diversity of the children and families it serves; and that is part of a larger, cohesive network of responsive and coordinated human services.



ENDNOTES

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10. The New York Times, December 2, 1993.

Appendix

PRESENTATIONS TO THE FOSTER CARE COMMITTEE

PRESENTER(S)	TOPIC
Eric Brettschneider, Project Director Agenda for Children Tomorrow	Agenda for Children Tomorrow
John Courtney, Asst. Exec. Director Little Flower Children's Services	Structural Issues
Steven D. Cohen, Asst. Exec. Vice President Jewish Board of Family and Children's Services	
Ron Davis, Chief of Staff New York City Child Welfare Administration	Family Preservation
Paula Fendall, Citywide Coordinator Family Preservation Program Mayor's Office for Children and Families	
Alexandria Douglas, Asst. Commissioner Division of Families and Children New York State Department of Social Services	State's Neighborhood Based Alliance Project
George Gabel, Director of Management Analysis New York City Child Welfare Administration	Foster Care Statistics
Charles Hollander, Associate General Counsel HRA Office of Legal Affairs	CWA Case Management Issues
Mary Jane Link, Exec. Director Statewide Youth Advocacy	Permanency Planning
Gary Mallon, Director New York City Program, Green Chimneys Children's Services	Independent Living
Marcia Sheinberg Ackerman Institute	Training Model for Treating Sexually Abused Children

BUILDING ON SUCCESS: Enhancing Adoption Services in the 90s

Prepared by the

**Adoption/Independent Living Committee
of the Mayor's Commission for the
Foster Care of Children**



Maris H. Blechner
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Preface



10/15/2017



Preface

The Adoption/Independent Living Committee of the Mayor's Commission for the Foster Care of Children was formed with a two-fold goal: to look at two foster care permanency planning goals, adoption and independent living, and to develop specific recommendations for improving the services connected to each goal. As more than one-third (39 percent)¹ of New York City's foster children have an adoption goal, while only about eight percent (7.9 percent)² have a goal of discharge to independent living, it was the decision of the Committee to look at adoption first. It is the full intention of the Committee to move forward with a full examination and detailed report on independent living.

Looking at the adoption of foster children meant looking at the process from the time a child's adoption goal is set throughout the lifetime of the child and his or her adoptive family. Thus, the Committee began its examination by defining adoption as both a process and a life circumstance. Despite the fact that the City has worked diligently to secure permanent homes for the children in its foster care system, increasing the number of finalized adoptions by 37 percent over the past year, the City could be far more successful. The Committee's goal was to create an action plan that would increase the number of adoptions and enhance adoption services. Corrective action and innovative ideas could range from small changes to major systems overhaul.

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Executive Summary





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Executive Summary

METHODOLOGY

The Committee decided that the best approach was to enlist experts in adoption and elicit their ideas about changes, both small and large, that would make the adoption process more efficient and rapid for New York City's children. The list of experts included caseworkers, supervisors and administrators, judges and attorneys, adoptive and foster parents, academicians, and other citizen advocates. Questionnaires were sent out, and many individuals were interviewed. Round-table discussions were held with service providers and consumers.

SUMMARY OF RECOMMENDATIONS

Like the experts questioned, the responses fell into clear categories and are organized as such in the final report:

I. INVESTING IN THE FUTURE

- A. Create a separate funding stream for adoption services
- B. Offer fiscal incentives to accomplish more adoptions

II. ENHANCING ADOPTION SERVICES: A COMPREHENSIVE APPROACH

A. Recruit and select adoptive parents:

1. Ensure that foster care certification automatically qualifies foster parents as adoptive parents;
2. Develop a community-based, child-specific recruitment strategy to explore a child's "circle" before looking for strangers who will adopt;
3. Develop a specialized unit to enable social workers to concentrate solely on designing individualized recruitment campaigns for "waiting" children; and
4. Develop an oversight mechanism for potential adoptive placements when there are two agencies involved.

B. Serve all children in need:

1. Help older children without permanent families understand the benefits of adoption before deciding that they do not want to be considered available for adoption;
2. Expand access to adoption for children in other out-of-home care systems; and
3. Ensure that all adoptable children are given the opportunity to be pictured (photolisted) in New York State's widely circulated photograph albums of children needing adoptive homes.

C. Support service providers:

1. Expand adoption monitoring units at the Child Welfare Administration and Court Appointed Special Advocates;
2. When hiring new staff in the adoption field, recognize the value of the life experience of being an adoptive parent, an adoptee, or a former foster child as valid considerations; and
3. Provide professional recognition within the adoption community to highly skilled adoption caseworkers.

D. Support families and children in the post-adoptive period:

1. Obtain federal and state funds for post-adoption services; and
2. Provide adult adoptees with access to birth family information.

III STREAMLINING THE LEGAL PROCESS

- A. Standardize procedures for termination and finalization
- B. Remove obstacles to obtaining children's birth certificates and up-to-date child abuse clearances for adoptive families
- C. Expedite processing by improving pre-termination documentation, reducing the number of adjournments, and implementing the new "early filing" law

IV RAISING CONSCIOUSNESS

- A. Train professionals regarding adoptive family dynamics and the validity and integrity of adoptive families
- B. Educate the public through an educational campaign focusing on the meaning and success of adoption, as well as the needs of New York City children for adoptive families

Introduction

Jimmy is a fourteen-year-old who lived in a residential treatment center because of his acting-out behavior . . . Leonard is nine and diagnosed as retarded and hyperactive . . . Lucia is three-and-a-half and has Down's Syndrome and a heart condition . . . Shaneeka, Justin, Leshia, Sean, and Kenyatta are five siblings, ranging in age from two to thirteen years old, who wanted and needed to be adopted together.

These children are not friends. They have not gone to the same schools. In fact, they live in different neighborhoods and their families will probably never know each other. One thing they do have in common is that they shared a special life cycle event this past year. They are eight of the 2,443 New York City foster children whose adoptions were finalized in Fiscal Year 1992-93.³ It was the highest annual number of adoptions ever in New York City, and merited a celebration for the New York City Child Welfare Administration. For Jimmy, Leonard, Lucia, Shaneeka, Justin, Leshia, Sean, and Kenyatta, it was even more. Their adoptions represented lifetime security and connections, the desires and rights of all children.

At a time when family life appears to be deteriorating, adoption as a viable family-building alternative grows ever more accepted. There are a number of reasons why this is so:

- Adoption works for all children. It is not just a possibility for healthy infants, but for children with AIDS, older children, children with disabilities, sibling groups, and the children of color who are the majority of the children in foster care across the United States.
- Adoption saves lives. The 2,443 New York City foster children adopted in FY 1992-93 have been given a good chance to become contributors to society. They will have parenting models for their own future parenting. They will have family values on which to base their lives and help them reach their individual potentials.
- Adoption saves money. Using the average administrative rate of \$20 per foster child per day, the minimum amount of money that New York City will save next year as a result of these 2,443 adoptions will be \$18 million. Assuming that these children will remain at home with their adoptive parents until age twenty-one, the minimum savings that will result to the City of New York during these children's childhoods, because they did not remain in foster care, is \$214 million.⁴

In order to gather the information necessary to offer the widest range of viable recommendations for improving adoption services in New York City, so that more children can be adopted and more expeditiously, the Adoption/Independent Living Committee of the Mayor's Commission for the Foster Care of Children reached out to more than fifty experts on adoption. Responses included individual interviews as well as detailed written comments. These experts included social workers, administrators,

public officials, academicians, judges, attorneys, adoptive and foster parents, and other citizen advocates. In addition, the Committee held two round-table discussions with adoption service providers, as well as consumers of foster care and adoption services. Participants were asked how they would specifically change the adoption component of the child welfare system if they could do so tomorrow, and what long-range modifications they thought would improve the entire system.⁵ Their answers, which included many common themes, are the heart of this report.

Recommendations

I INVESTING IN THE FUTURE

Currently in New York City, adoption services are not funded separately but are part of the foster care budget. Adoption costs have never been viewed or factored separately, despite recognition in the field that the number of children in foster care with a goal of adoption has grown consistently in the past decade. This year (FY 1993-94) more than one-third of the children in foster care are expected to need specific adoption services.⁶

A. Create a Separate Funding Stream

As part of the process of providing optimum adoption services in the most timely and cost-effective way, federal, state and city funds used for adoption services need to be identified and reimbursed separately from foster care services. In that way, from the time a child's adoption goal is set, all adoption-related costs and activities, including legal costs, can be clearly monitored and reimbursed appropriately. Adoption is too large and important a fiscal category to be subsumed any longer into the more general budget.

It should be noted that fiscal reform in adoption-linked spending is a topic being examined by a variety of concerned and knowledgeable organizations, including New York's Adoption Action Network, an independent New York State organization of adoption advocates and specialists from public and private social welfare agencies and the community. Discussions are already being held with federal and state governmental representatives. It is strongly recommended that the need and possibility for change be examined in conjunction with the work already being done in New York.

B. Offer Fiscal Incentives

As the system is currently designed, foster care agencies do not have a financial incentive to complete adoptions. In fact, because agencies are paid a "per diem" rate for each day a child is in foster care, there is an implicit financial incentive to keep children in care. This is particularly true during periods when the numbers of children in foster care are decreasing.

The Home Builders Program, which provides "capitated" (limited) funding for foster care and adoption services, is an important first step in removing this financial disincentive. Under the three-year demonstration project, which was begun in July 1993 and is funded jointly by the city, state, and federal governments, each agency involved receives a predetermined reimbursement rate, regardless of how long a child remains in foster care. Agencies are given the necessary spending flexibility to design the most appropriate mix of services for a child and family. Consequently, there is no financial penalty for expeditiously securing the best permanency plan for a child.

A number of adoption experts interviewed recommended other fiscal incentives to encourage agencies to complete more adoptions. Ideas ranged from cash bonuses for each adoption placement of children defined as the "toughest" to place, to transferring caseloads from agencies that do not achieve sufficient adoptions to agencies that have greater success. Performance-based contracts, which require agencies to achieve certain objectives as a

condition of payment, have proven effective and should continue to be available to agencies that do adoptions successfully.

II ENHANCING ADOPTION SERVICES: A COMPREHENSIVE APPROACH

Successful adoption is an art as well as a science, involving both interpersonal skills and a strong theoretical base. Because the children of New York City who await adoption deserve the highest quality adoption services, the adoption experts consulted by the Committee recommend the following changes to the present system:

A. Recruit and Select Adoptive Parents

- **Ensure that the certification standards for foster parents automatically qualify them to become adoptive parents at a later date.**

Since the majority of agency adoptions in New York City and State are by foster parents, it would increase efficiency to initiate the process with the home-study conducted when the foster family enters the system. The approval process for a foster parent should be an adoptive parent approval as well. That way, should adoption become a foster child's permanency planning goal and the current foster family chooses to adopt, no time consuming re-approval process will be needed.

- **Develop a community-based, child-specific recruitment strategy to explore a child's "circle" before looking for strangers to become adoptive parents.**

The conventional but flawed wisdom in the community and the child welfare system, particularly as it relates to teens and pre-teens, is that there are no adoptive families "out there" for these children.

As an example, one can think of a teen or pre-teen who is free for adoption and living in a residential treatment center. Many professionals assume that this child will never be adoptively placed and consequently change the goal to Independent Living, without considering that this child will be discharged at age twenty-one and most likely will never have formed any significant or long-term relationships with adults. However, a number of youngsters in residential treatment centers have been adopted by people who were already part of their lives, such as child care staff, agency administrators, teachers, relatives, and family friends. The adoptive parents have acted on their own, without any encouragement from the system.

The child welfare system should learn from this practice and use its underlying dynamics to develop recruitment strategies for all children needing permanent adoptive families. Caseworkers should, as a matter of agency policy, automatically explore a child's circle before doing "outside" recruitment. Certainly no teenager's permanency goal should be changed to Independent Living before a thorough exploration has been made of all existing connections.

Adoption advocates encouraging the adoption of older children highlight many studies that cite the high rate of homelessness among young people discharged from foster care without meaningful relationships in their lives. The National Association of Social Workers' October 1991 survey of shelters for homeless youth showed that 38 percent of the youth surveyed had been in foster care at some period in the past year.⁷ The Coalition for the Homeless in New York City noted, in a 1989 report, that 60 percent of the homeless in New York City Municipal Shelters have some history of foster care.⁸ Reports by Covenant House⁹ and the Citizens' Committee for Children¹⁰ also highlight the issue.

- **Develop a special unit, either at CWA or in voluntary agencies, that would enable "recruitment specialists" to concentrate solely on designing individualized recruitment campaigns for "waiting" children who are free for adoption but have no adoptive family.**

Too often, children have been free for adoption for a number of months but not yet placed in a pre-adoptive home. The creation of a special unit to handle these cases would allow an adoption caseworker to carry a small caseload and be a specialist in recruitment. The success of agencies that specialize in "hard to place" children documents the importance of small caseloads and intensive efforts. The current success of the special unit/special program approach for HIV-positive children, which has led to the adoption of many such children, shows that a focused program can be successful. It should also be noted that this approach closely models the proven concepts of family preservation and intensive case management.

- **Develop an oversight mechanism for potential adoptive placements when two agencies are involved.**

While there has been a great deal of emphasis on the need to encourage inter-agency collaboration, too often child welfare agencies refuse to place a child in their care with another agency's family. The most common explanation is that the proposed adoptive family does not meet the first agency's standards. Some reasons for this decision are valid; others are not. Too often the underlying motivation has to do with issues of distrust or "turf," as well as fees that must be paid by one agency to another. A mechanism is needed that will allow the system to explore the feasibility of placement when one agency has an approved and interested adoptive family but the agency with custody of the child refuses to allow the placement.

At present, the agency with planning responsibility for a child unilaterally determines the suitability of any family applying to adopt. There is no appeals process, and there is no structure requiring a child's case manager to be aware of studies submitted and rejected.

This Committee recommends mandated reporting to a case manager, via the written semi-annual Uniform Case Review (UCR) report, of any studies submitted for a freed and unplaced child. Further, New York City's Office of Advocacy's Independent

Review process should be expanded to allow appeals from families who have applied to adopt children who have been freed for six months or longer and have been rejected. Information about specific appeals should be made available to New York City's Office of Adoption Services, as well as to the child's case manager.

B. Serve All Children In Need

■ **Help eligible older children understand the benefits of adoption before they decide that they do not want to be considered available for adoption.**

Any foster child of thirteen, fourteen, fifteen or sixteen might well cringe when he or she hears the word "adoption." Adoption is a nebulous, abstract concept to many older children who have already spent a large number of years experiencing the impermanence of the foster care system. Adoption often represents to them only another possibility for rejection and pain. When asked outright, "Do you want to be adopted?" it is understandable that so many teens answer "No."

We, as a system, cannot simply accept that answer. Children need help in dealing with the issues of belonging and of trying to establish a permanent relationship with an adult. Such a relationship, when appropriate, can lead to adoption, particularly for those youngsters who have been, or could be, court freed for adoption.

Specific casework skills are required to help an older child understand the potential value of family life, to help a child reach beyond the pain and try to see that relationships may already exist with adults who could become his or her family. Foster care agencies and individual caseworkers who have demonstrated superior skills in helping older children remain open to adoption must become the guides for the rest of the system. The skills these people possess should be included in training for others in the field. The child welfare system owes the older children under its care an opportunity to understand that they can belong to someone. It then has a responsibility to find that someone for each child.

■ **Expand access to adoption to children in other out-of-home care systems.**

According to a paper by the New York State Citizens' Coalition for Children,¹¹ there are six systems in New York State that provide out-of-home care for children: the Department of Social Services, the Division for Youth, the Office of Mental Health, the Office of Mental Retardation and Developmental Disabilities, the State Education Department, and the Department of Health. However, the concept of permanency planning appears to be unique to the Department of Social Services. Preventive services, establishment of permanency goals, judicial review, utilization review for timeliness of service, and other aspects of the 1979 Child Welfare Reform Act and the federal Adoption Assistance and Child Welfare Act (Public Law 96-272) apply only to children in the custody of the Department of Social Services.

A report by the New York State Council on Children and Families¹² indicates that in the other five systems there are children who are free for adoption, in the process of being freed, or considered "free-able." Unfortunately, a widespread belief in the adoptability of all children does not seem to exist among caseworkers in these systems. All children in public care should have equal access to the legal protection and adoption services that are offered to children in the custody of the Department of Social Services.

- **Ensure that all children who have been freed for adoption are given the opportunity to be pictured (photolisted) in New York State's widely circulated photograph albums of children needing adoptive homes.**

A New York State law that took effect in 1993¹³ permits the photolisting of an eligible child to be delayed for six months if "the child is not emotionally prepared for an adoptive placement." This language should not be included in the law. Adoption advocates have spent much time with adoption and mental health professionals in training related to the concept that no child is considered unadoptable. To diagnose a child as "not emotionally prepared" essentially labels the child unadoptable during the time period that he or she is so described.

Agencies that specialize in the placement of older children and children with special needs know that the label of "not emotionally prepared" is subjective and that it easily could be applied to every child at some point in time. The label as a reason to delay photolisting should be eliminated from the law as soon as possible.

C. Support Service Providers

- **Expand adoption monitoring units at the Child Welfare Administration and Court Appointed Special Advocates.**

Much of the credit for the increased number of adoptions in New York City during FY 1992-93 goes to CWA's well-run Office of Adoption Services and its dedicated staff. The Office of Adoption Services provides careful oversight and planning for cases under its auspices (every child with a goal of adoption) and provides much-needed support services to adoption and foster care agencies throughout New York City. To help optimize adoption in New York City, CWA's Office of Adoption Services needs to be expanded.

Additionally, since 1979, Family Court judges have assigned CASA, a state-and-privately-funded program, to monitor the permanency plans for children in foster care. As a result, CASA has expedited countless adoptions and family reunifications. Until recently, Family Court judges had assigned CASA to monitor only the cases of children who had been voluntarily placed into foster care. Since 1992, however, Family Court judges have also begun to assign CASA to monitor the cases of children who have been placed in foster care due to abuse or neglect.

As with voluntary placements, CASA has been effective in cutting through bureaucratic entanglements and expediting cumbersome administrative processes, thereby expediting permanency for victims of neglect and abuse, as well as enhancing the Court's efficiency.

Currently the NYC CASA program has seventy-five volunteers and ten staff, who are monitoring more than 1,000 foster children's cases. CASA is a well-run program that is cost effective and should be strengthened.

■ **When hiring new staff, recognize the value of the life experience of being an adoptive parent, an adoptee, or a former foster child.**

In hiring adoption staff, life experience should count. Adoptive parents, adult adoptees, and former foster children can be rich employee resources for CWA and voluntary agencies alike. They can bring new perspectives to adoption and foster care work.

■ **Provide professional recognition.**

There needs to be professional recognition of good work. Currently, little formal recognition is given within the child welfare field for high quality work done by caseworkers in adoption. Better salaries and training are tangible forms of recognition and would also help to stabilize the work force and cut down on turnover. The Committee applauds the Mayor's initiation of Adoption Recognition Day as an annual event, and views it as an occasion when good work can be publicly recognized.

D. Support the Family and Child in the Post-Adoptive Period

■ **Secure federal and state funds for post-adoption services.**

In the field of adoption, there has been a steadily growing awareness of the need for the availability of a wide range of services for adoptive families after adoptions become final. While the legal process of adoption ends at finalization, the unique lifetime circumstances continue. The special nature of adoptive family life requires that a wide range of services be available from a variety of sources.

One of the most comprehensive current definitions of post-adoption services has been developed by the Adoption Action Network.¹⁴ Post-adoption services are defined as any services offered after finalization to adoptive families, adoptees, and birth families (the "triad" as recognized in contemporary adoption). These services should be available even after the adoptee reaches adulthood. Specific services include:

- information and referral to needed resources, including peer support groups for adoptive families, adoptees, and birth-families;
- short-term crisis counseling;
- long-term family counseling;
- advocacy for the adopted child and family (with school problems, Medicaid problems, paperwork problems, etc.);

-
- parenting education;
 - out-of-home services, whether respite or residential placement, without breaking family ties or commitment;
 - assistance for adoptees with access to records, search, and reunion; and
 - training to sensitize staff in community agencies, schools, and medical settings to the needs of the adoption triad.

The greatest need is for New York City to lead the movement to formally recognize and publicly fund post-adoption services. These services are now provided, without recompense, by enlightened child welfare agencies and community support groups. Appropriate recognition and funding will allow a greater availability of services that are a critical need in the adoption community. As with all other adoption services, the federal and state government should contribute their share.

■ **Provide access to information for adult adoptees.**

There is only one category of adults in the United States that has no right to such basic information as what their birth-parents look like, as well as to a variety of other pieces of information that the rest of us take for granted. This category of adults is adoptees.

Adult adoptees should have the human right to know about their past and to have access to the people who can give them that information. When a baby is placed for adoption by birth-parents, informal agreements are made between an agency and parent, or a lawyer and a parent, to keep the identifying information confidential. This agreement is made without regard to the fact that, as an adult, the adoptee will feel a need to know something of his or her origins and ancestry. It also should be noted that the largest number of New York City children in the public system were not placed for adoption by their birth-parents, but are available for adoption because their birth-parents' rights were court terminated. No confidentiality contracts exist with that group of birth-parents; nevertheless, the same rule applies.

The Adoption/Independent Living Committee does not dispute the fact that adults who choose confidentiality for the infant/child have a right to make that decision. We simply believe that when the child becomes an adult, that person has a fundamental human right to identifying information about his or her birth family. In this context, as stated by New York City Human Rights Commissioner, Dennis DeLeon,¹⁵ the right of access to information is as fundamental a human and civil right as the right not to be discriminated against based on age, race, sexual orientation, religion, or gender. It is time for New York City to take a leadership role in advocating for this fundamental human right.

III STREAMLINING THE LEGAL PROCESS

In looking at frustrations in adoption, adoptive parents and caseworkers alike share horror stories about long delays by the courts in terminating parental rights and in finalizing adoptions. There are many reasons why these procedures take a long time. The proceedings can be extremely complex, requiring a great deal of preparation. The failure to submit one required document can delay the entire process. The average length of time to finalize the adoptions of the 2,443 children finalized in FY 1992-93 was at least twenty months after freeing.¹⁶ If each adoption had been finalized one month sooner, the cost savings in public dollars, at a minimum, would have been \$1.5 million. If these adoptions had happened at one year after freeing, which was certainly possible, since most children are adopted by their current foster parents, \$12 million in public funds would have been saved. While no simple solution to the problem of delays exists, certain recommendations stand out:

A. Standardize Procedures

■ In termination proceedings:

The Committee urges the standardization of the requirement for a “diligent search” for absent parents. Guidelines developed this year by the Adoption Law Committee of the New York State Family Court Task Force on Permanency Planning can serve as a model.

■ In adoption proceedings:

The Committee recommends that there be one list of required finalization documents for all courts to use in approving a “full packet” for finalization. Several of these documents, including adoptive family medicals and child abuse clearances, are only considered “current” by the court for a specific period of time (usually one year). If other necessary paperwork is not completed by the end of the time period, the documents are considered “stale” and have to be redone and resubmitted, thus extending the time to complete an adoption. Therefore, it has been suggested that the court should “stop the clock” on documents such as medicals and child abuse clearances on the date that the court adoption clerk accepts the documents as submitted, in order to prevent them from becoming “stale” by the finalization date.

B. Remove obstacles

■ Improve access to birth certificates:

Agency personnel speak with great frustration of a bureaucratic problem that holds up adoptions and that appears to have an easy solution: the difficulty in obtaining birth certificates from the New York City Department of Health in a timely manner. Multiple certified copies of foster children’s birth certificates are needed for terminations as well as finalizations. Without these documents, no legal work on a child’s case can be completed. The Committee strongly recommends that a formal liaison be established between the Child Welfare Administration and the Department of Health’s Bureau of Vital Records so that birth certificate matters can be dealt with speedily.

■ **Improve access to child abuse clearances:**

Another problem noted by many adoption experts consulted by the committee is the well-known delay in court finalizations because of difficulties in obtaining clearance through the State Central Register of Child Abuse and Maltreatment. In the age of electronic communication, these delays should not exist. The Committee recommends that the State Department of Social Services give CWA's Office of Adoption Services electronic access to the State Central Registry (SCR) to conduct adoption clearances.

C. Expedite Processing

■ **Improve pre-termination documentation.**

Experts who helped provide background for this paper noted the need to increase agency workers' skills in clearly documenting the necessary work with birth-parents before a termination hearing. This could be done centrally through CWA's Satterwhite Training Academy. In addition, the idea was presented to reestablish a centralized CWA office that reviews termination cases in order to ensure completeness before filing.

■ **Reduce the number of adjournments.**

Of greatest concern when termination cases come to court are the large number of delays caused by adjournments. There needs to be consultation among the Family Court, CWA, and attorneys for the voluntary agencies in order to devise a means for cutting down on the number of Family Court adjournments.

■ **Implement important new laws.**

The Committee recommends strong and full support of the early filing law, Chapter 588 of the Laws of 1991, which allows judges to set a schedule for the completion of an adoption at the conclusion of the termination proceeding. If used appropriately, this critically important legislation could save time and money, as well as ensure that children, who suffer emotionally at every delay, will finally have the security of legal adoption.

Those caseworkers, supervisors, and therapists who work with older children and their adoptive families awaiting court finalization dates can provide innumerable case examples to dispel the fallacious thinking that the finalization court date and the court appearance are not intensely meaningful to the children. When delays occur in finalizing an adoption, escalating tension levels in adoptive homes can cause undue emotional strain, as well as potential disruption of placements. Such delays are unnecessary and unfair to adoptive families, and especially to the children.

Building on Chapter 588 of 1991, in 1993 the NYS Legislature passed another bill to address the timeliness in adoptions by requiring the court to establish time frames for finalization of completed adoption petitions. The Committee urges New York City to see that this newest law, Chapter 294 of the Laws of 1993, is well publicized and fully implemented.

The Committee wishes to note that, in looking at adoption-related delays, that there are four

parties to every finalization, all of whom have certain requirements to meet. The family, the family's attorney, the family's agency, and the courts all need to be sensitized to time factors and to be held accountable. Terminations of parental rights as well as adoption finalizations should adhere to the time-lines established by the Child Welfare Reform Act of 1979: twelve months from when the goal of adoption is established until termination of parental rights, and twelve months from placement in an adoptive home until finalization of adoption¹⁷. Further, perhaps it is time to request the federal government to enact legislation linking adoption finalizations to reimbursements.

IV RAISING CONSCIOUSNESS

Within the adoption community, enlightened child welfare agency professional staff and adoptive parents recognize a reality that others still do not seem to grasp: Adoption is a lifelong experience that directly influences not only the life and development of the adoptee, but his or her entire family circle as well. The issues of adoption, which are the issues of abandonment and of total commitment, require understanding, sensitivity, and respect from therapists, teachers, doctors, ministers: all who guide and support families. Because adoptive families may have very turbulent years with their adolescents (even more so than in non-adoptive families), and have a great need for assistance, it is time to initiate a multifaceted educational effort.

A. Train Professionals

There is a strong need for training related to adoptive family dynamics and the validity and integrity of adoptive families for:

Judges, who have great power over the lives of children and yet have no mandatory ongoing training on current adoption and child development theory or on the meaning of child welfare laws to the children;

Public school social workers and teachers, who must be able to recognize that acting-out by adopted children from healthy, functional adoptive families may be normal and typical adoptive family dynamics;

Mental health service providers, who see the largest number of adoptive families with acting-out children and need to be able to offer support;

Foster care and adoption workers, who are so often caught in a crisis of paperwork demands that they do not get to see the meaning or ramifications of their work with the children;

Child Protective Services workers, who need an understanding of adoptive family dynamics so they can recommend appropriate services to adoptive families in crisis and not mistake common adoption issues for total family dysfunction;

Foster and adoptive parents, who would benefit greatly from training on current theory and have valuable personal experiences to share with others in the field; and

Schools of Social Work, whose curricula are sadly lacking in adoption training, although they will produce both the future child welfare supervisors and the private therapists who will interact with and greatly influence children's lives.

B. Educate the Public

The Committee recommends a public education campaign conducted by the Human Resources Administration and/or the Mayor's Office for Children and Families. Such a campaign would focus on the meaning and success of adoption, as well as on the needs of New York City children for adoptive families. It should take place twice a year, during Adoption Month (November) and then again in the weeks between Mother's Day and Father's Day, and should include:

A professional advertising campaign, with slogan, logo, etc., primarily directed toward the adoption of older children of color;

Subway and bus posters showing older children of color and their different types of adoptive families, plus citywide poster distribution to libraries, banks, supermarkets, major corporations, etc.;

Radio and television public service announcements by adoptive families;

Infomercials about adoption, with messages from well-known personalities who are themselves adoptees or adoptive parents;

Use of Cable Television to advertise adoption, including the Home Shopping Network and African-American and Latino stations;

Preparation and distribution in large quantities of a "palm card" giving facts about adoption, including information about medical and financial help to adoptive families;

An approach to the corporate sector of New York City, to get financing and involvement, as well as distribution of posters citywide in work places and palm cards distributed with pay checks, along with mailings to consumers by utilities, banks, credit card companies, hospitals, and other major corporations;

Publicity regarding successful adoptions in magazine and newspaper articles, which can also feature agencies and social workers who have done exemplary work;

Publicity materials that include statistics on the number of children in need of adoptive families, as well as information on what adoption prevents, such as homelessness, and the importance of relationships: "Human beings need attachments... Where would you be today without your family?"; and

A particular focus on follow-up. There must be an information number to call. The campaign will not work unless there is tight control over who is answering the phones and

doing follow-ups, including monitoring information mailed out and what happened to the caller's interest.

The Committee also wishes to note that, along with a media blitz to sensitize the public to the positive meaning of adoption and the validity of adoptive families, an educational campaign about adoptions should be directed toward those who provide options counseling to pregnant women, particularly teenagers.

Conclusion

The Mayor's Commission for the Foster Care of Children and its Adoption/Independent Living Committee offer these recommendations in the strong belief that the strengthening and tightening of the adoption process in New York City will have many beneficial results. While a record number of foster children were legally joined to new families in FY 1992-93, thousands of New York City children are still waiting for permanent families.

What will adoption mean to those children ... and to New York City? More than any report could ever presume to measure. For the children it means an opportunity for a secure family environment, love, and a chance to develop into productive adults. For New York City it means the satisfaction of helping thousands of children to reap the rewards our society has to offer, as well as the saving of millions of public dollars.

The Adoption/Independent Living Committee is recommending a comprehensive, long-range approach to improving adoption services in New York City --- ultimately affecting the lives of thousands, if not millions, of New Yorkers. Indeed, adoption ultimately touches all of us and the quality of our own lives. Jimmy, Leonard, Lucia, Shaneeka, Justin, Leshia, Sean, and Kenyatta are connected to all of us and to the children still waiting to be adopted. It is our responsibility to make a commitment to them, and to the thousands like them, to do everything possible to provide optimum adoption services.

Appendix

The Committee reached out to the following adoption experts:

Judith Ashton, Executive Director
New York State Citizens' Coalition for Children

Carolyn Baker, Program Specialist
Regional Office II
Administration for Children and Families
United States Health and Human Services Department

Eric Brettschneider, Project Director
Agenda for Children Tomorrow

Lynette Brown, Director of Professional Issues
Council of Family and Child Caring Agencies

Frederic H. Cantlo, Director
Metropolitan Regional Office
Division of Family and Children's Services
New York State Department of Social Services

Joseph Carrieri, Esq.

The Honorable Carmen Cogna
Former Judge
New York City Family Court

Barbara Conley, Director Child Welfare,
Brooklyn Catholic Charities

Dora Diggs, Executive Director
New York State Foster and Adoptive Parents' Association

Dr. James R. Dumpson, Chair of the Board
New York City Health and Hospitals Corporation

Gilberto Faria, Executive Director
Hispanic Advocacy Resource Center

Penny Ferrer, Director
Office of Adoption Services
Child Welfare Administration

Dr. Trudy Festinger, Professor
School of Social Work
New York University

Peter Forsythe, Consultant
Former Vice President of Childrens' Programs
Edna McConnell Clark Foundation

Karen Friedman, Director
Lawyers for Children

The Honorable Jeffry Gallet
Former Judge
New York City Family Court

Monica Drinane, Esq.
Assistant Attorney-in-Charge
Manhattan Juvenile Rights Division
Legal Aid Society

Melba Bulter Hamilton, Executive Director
Harlem Dowling Children's Services

Stanley Hill, Executive Director
District Council 37
American Federation of State, County, and Municipal Employees

Jules Kerness, Legislative Director
Children and Families Committee
New York State Senate

Linda Kurtz, Regional Director
Rochester Region
New York State Department of Social Services

David Lansner, Counsel
Standing Committee on Families and Children
New York State Assembly

Mary Jane Link, Adoption Specialist
New York State Department of Social Services

Robert L. Little, Executive Deputy Commissioner
New York City Child Welfare Administration

Ernesto Loperena, Executive Director
New York Council on Adoptable Children

Frederick J. Magovern, Esq.

The Honorable Kathryn McDonald, Administrative Judge
New York City Family Court

Elba Montalvo, Executive Director
Committee for Hispanic Children and Families, Inc.

Dr. Pat Morrisey, Professor Emeritus
School of Social Work
Fordham University

Gail Nayowith, Executive Director
Citizens' Committee for Children of New York

Leora Neal, Executive Director
Association of Black Social Workers
Child Adoption Counseling and Referral Service

Cesar A. Perales, Deputy Mayor
Health and Human Services
New York City

Sonia Rodriguez, Director
Social Services Department
Coalition of Hispanic Family Services

Denise Rosario, Executive Director
Coalition of Hispanic Family Services

Benjamin Rosin, Esq.

Barbara Sabol, Administrator/DSS Commissioner
Human Resources Administration

Robert Schachter, Executive Director
New York City Chapter
National Association of Social Workers

Dennis Walcott, Executive Director
New York Urban League

Peter Winkler, Director
New York State Adoption Service
New York State Department of Social Services

Willie Wren, Executive Director
Miracle Makers

Staff members of Downey Side Families For Youth, Family Focus
Adoption Services, Lakeside Family and Children's Services, and
New York Court Appointed Special Advocates.

Commission members and knowledgeable Commission staff.

Endnotes

1. New York State Department of Social Services, *Monthly Summary of Characteristics of Children in Foster Care, District Report*, 10/31/93.
2. Ibid.
3. Statistics provided by the New York City Child Welfare Administration, from Child Care Review Service data, July 1993.
4. Calculations based on statistics of the ages of the 2,443 children at adoption, provided by the Child Care Review Service Data, July 1993.
5. The following questions were asked of the many experts contacted for this paper: If you could change one facet of adoption in New York City tomorrow, what would you change? From your personal experience, what changes do you think MUST be made in public adoption? What changes do you think can be made, realistically, in the near future? Should there be a more radical restructuring of adoption? If so, how would you envision it?
6. According to figures provided by the New York City Child Welfare Administration, November 1993.
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8. Coalition for the Homeless. *Blueprint for Solving New York's Homeless Crisis*. New York City: a report to Mayor David Dinkins, 1989, p. 1.
9. Margerson, N. and C. Lipman. *Children at Risk: The Impact of Poverty, the Family and the Street on Homeless and Runaway Youth in New York City*. Presentation delivered at the National symposium on Youth Victimization, April 27, 1990, New York, Covenant House, pp. 1-2.
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**RECONCEIVING THE ROLE OF
THE CASE MANAGER IN THE NEW
YORK CITY FOSTER CARE SYSTEM**

prepared by the
**Courts Committee of the Mayor's Commission
for the Foster Care of Children**



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Introduction

Clearly, there are things over which the foster care system has no control. We do not know enough about how to reverse some of the damage done to children by poverty, drugs, and abuse. We have no magic wand to alleviate the pain that children feel when they are separated from their birth families. We do not know how to compensate for the loss of the companionship of siblings or how to help a child gain back his or her identity.

Since we do not have the power to solve the vexing social problems underlying the need for foster care or to eliminate many of the negative consequences of out-of-home placement, we must strive to make the system the best that it can be for children and families. Significant attention must be paid to the decision-making process, an area that is wholly within the control of the professionals who manage and maintain the foster care system. Every effort must be made to speed up and improve the quality of decisions made for children in foster care.

Time is a crucial factor. The longer children stay in foster care, the harder it is to reunite them with their birth families, maintain them in the same foster home, or successfully place them for adoption. Time also has a direct bearing on the cost of the more than \$1 billion-a-year foster care system. The longer children stay in care, the larger the foster care caseload and the greater the resources needed to support it. In short, using time efficiently benefits children and their families, the system, and taxpayers alike.

As important as it is to make decisions faster, it is even more important to make better decisions. All decisions made on behalf of children must be carefully grounded in sound policy and in a thorough understanding of the needs of the individual child. In the report that follows, the Courts Committee of the Mayor's Commission on the Foster Care of Children examines the role of one of the key decision-makers in the foster care system, the case manager. Although the Committee originally set out to study the problem of the untimely filing of petitions in Family Court to extend the duration of foster care placement or to terminate parental rights in anticipation of adoption, it soon discovered that deficiencies in case management were very often at the root of these problems. In this report, the Committee offers several recommendations to improve the case manager's functioning and thereby improve the decision-making process.

Some of the Committee's previous recommendations concerning the role of the case manager are presently being implemented by the Child Welfare Administration. The Committee submits this report to document its findings on the role of the case manager, and to provide an outline for follow-up in this essential area. Further follow-up should include gathering information from the institutional litigants in the Family Courts, such as the Legal Aid Society and Lawyers for Children, regarding aspects of the court process that may contribute to these delays.

THE TRADITIONAL ROLE OF THE CASE MANAGER IN THE NEW YORK CITY FOSTER CARE SYSTEM

Sound policy as well as state regulations¹ require that the New York City Child Welfare Administration supervise the many private agencies with whom it contracts for the provision of foster care services for New York City's children. The case manager is one of the key positions through which CWA seeks to fulfill this oversight function. Traditionally, the sole task of CWA's case managers has been restricted to processing "pre-approval" requests submitted by private agencies concerning their proposed actions with respect to the children in their care. The Courts Committee of the Mayor's Commission on Foster Care believes that this limited definition of the case manager's role contributes to delays in the foster care decision-making process, while adding little to the quality of the decisions made. Clearly, there is a need for a change in the conception and functioning of this vital position.

Constructing a strategy and procedures to oversee the provision of foster care services in a system as large and complex as New York City's is a formidable task. At the present time, nearly 49,000 New York City children are in foster care. Almost one-third of these are in the direct care of the Child Welfare Administration, with most of them being in kinship foster settings. The remaining two-thirds -- or some 32,591 children -- are under the care of 67 different private child care agencies. CWA case managers monitor and supervise the foster care services provided to these 32,591 children. (No case managers are assigned to children under the direct care of CWA, since all decisions regarding their placements are made by public employees.)

The case management system devised by CWA for these 32,591 children mirrors the complexity of the foster care system. A case manager for a child in placement with a private agency may be from one of several offices within CWA, depending on the legal status of the child. When a child is placed with a private foster care agency during the pendency of a child protective matter in the Family Court, the child's case manager is located in the Office of Field Services. If the disposition in the child protective proceeding is placement with a private foster care agency, case management responsibilities are transferred to a manager in CWA's Office of Case Management Services or the Office of Direct Child Care. Finally, if all children in a family are freed for adoption, the case is transferred to a case manager in the Office of Adoption Case Management.

The CWA case managers working with the average private agency, therefore, are likely to be distributed among CWA offices as follows:

- 50% in the Office of Case Management
- 20% in the Office of Adoption Case Management
- 10% in the Office of Direct Child Care
- 20% in the Office of Field Services.

With the tremendous growth of the New York City foster care system in the past decade, the caseloads of CWA's case managers and their supervisors have grown unacceptably high and are at unmanageable levels. In the Office of Case Management, for example, the average case manager is responsible for 100 families -- representing approximately 200 children. A typical Supervisor I in that office is responsible for 500 cases, or 1,000 children; Supervisor IIs oversee 2,000 cases, almost 4,000 children. Since several

pre-approval requests may be submitted for each child in a year's time, the total number of requests each worker reviews annually is enormous.

The volume of pre-approval requests is in large part a function of the requirements of "Schedule B" in CWA's contract with the private agencies for the purchase of foster care services. In the contract for FY 1992-93, Schedule B provided that private agencies must seek pre-approval from case managers for some twenty-three categories of actions -- ranging from permission to return the child to the birth parents to permission to take a weekend trip out of state. With the support of this Committee, CWA amended Schedule B in the FY 1993-94 contract, ultimately reducing the number of actions for which pre-approval is required to thirteen.

While the number of items requiring pre-approval has been formally reduced, the cumbersome mechanics of the pre-approval process remain unchanged.

1. The first step is for the agency worker to identify the current case manager assigned to the child in question. This can be a difficult task, since CWA does not always notify the agency when a case is transferred to a new manager. This initial step is crucial, however, since misdirected requests may sit for long periods before being forwarded to the correct manager or returned to the sender.
2. Once the manager is identified, the agency worker mails the pre-approval materials to him or her, since case management offices are not equipped to receive them by fax (except for emergency situations).
3. When the request arrives, the case manager reviews it as soon as his or her caseload allows and mails back a response. The mailing of a response is a critical task in this process. Since the Office of Case Management (OCM) does not have its own mailroom, outgoing correspondence is forwarded to CWA's central mail facilities for posting -- a process that, incredibly enough, can take weeks. (OCM alone receives and sends approximately 20,000 pieces of mail every week.)

A 1990 study of the case management process² documented how time-consuming it can be: In 40 percent of the requests studied, the agency worker had to wait an average of 83 days for a response from OCM. Despite the amount of time consumed, moreover, in 98 percent of the cases, the agency's request was ultimately approved by the case manager.

PROBLEMS WITH THE CURRENT CASE MANAGEMENT SYSTEM

The length of time CWA takes to issue pre-approvals often results in an extension of the child's stay in care and, consequently, a substantial fiscal impact. For example, a trial discharge cannot occur until CWA has reviewed and approved an agency's request. In addition to the obvious negative impact on the children, their birth families and their foster families, the cost of these delays is staggering.

In the late 1980's, it was estimated that a reduction of one month in the average length of stay in foster care would cut the total caseload by 10 percent. If that holds true today, with the size of the foster care population close to 50,000, a five-week average reduction would decrease the caseload by 6,000 and save approximately \$100,000,000 each year. The result of a more efficient case management model would be reduced caseloads and improved services at a significantly reduced total cost.

Moreover, one need only consider the numbers of lapsed placements and late filings of requests to extend placement, to appreciate the degree to which the system ill serves children and families. Untimely filings violate the due process rights of birth parents who seek the return of their children from foster care. Untimely filings may also have an adverse impact on family reunification as parents, discouraged by the system, fail to follow through on service plans designed to speed return of their children. In addition, untimely filings have a substantial fiscal impact, as they subject the city to millions of dollars in sanctions when statutory time frames are not met.

The delays in granting approvals also lead to a systemic sluggishness which prevents adequate service delivery to families and children. For example, a request for permission to refer a family for specialized services that is not acted upon swiftly may unnecessarily prolong the child's stay in foster care.

Clearly, under such circumstances, case managers often experience serious morale problems caused by high caseloads and endless requests. Moreover, the current caseload levels virtually preclude any face-to-face contact between the case manager and private agency staff and families served, which undoubtedly impairs the quality of the decisions made.

At the same time, the case management system undermines the private agency staff's sense of professionalism. Their lack of decision-making authority and their inability to act on a family's behalf until they receive a response from CWA, necessarily minimizes their effectiveness and contributes to "burn out."

This combination of circumstances has led to tension and mistrust between public and private agency staff. The negative effects of all of the above -- the increased length of stay, the inadequate service delivery, and the unhealthy dynamic between caseworkers -- ultimately have an impact on the children and families the system was designed to serve.

RECOMMENDATIONS FOR REFORM

I. Track CWA's Progress in Streamlining the Pre-Approval Process

In February of 1993, the Mayor's Commission on the Foster Care of Children submitted a recommendation to the Child Welfare Administration to reduce the number of casework activities requiring pre-approval from CWA. In response to this recommendation, and a similar proposal by a working group comprised of CWA and private agency personnel, CWA Executive Deputy Commissioner Robert L. Little made significant changes to the FY 1993-94 contract with private foster care providers.

Essentially, the number of items requiring CWA pre-approval was reduced from 23 to 13. Activities such as permission for out-of-state vacations and transfers from one foster home within the agency to another were eliminated.

In addition, two other procedures were changed that are expected to hasten permanency for children: First, if a private agency receives no response within 45 days to a request for approval of a change in a child's permanency planning goal, the agency can proceed with the goal change. Secondly, discharging a child from care can now be approved as part of the child's semi-annual case review.

The Committee is aware of the difficulties in instituting new procedures in a system as large and complex as the New York City foster care system. It is important, therefore, that the Child Welfare Administration closely monitor the implementation of this initiative. CWA should ensure that information on the new procedure is adequately distributed, and that public and private staff are properly trained and are incorporating the training in their day-to-day practice. The Committee also urges CWA to study the impact of the new procedure to determine whether it results in a reduction in paperwork and/or a quicker turn-around time on granting approvals.

II. Hire and Train New Case Managers

As previously noted, the staff in CWA's Offices of Case Management and Adoption Case Management carry caseloads of up to 100 families per worker. Caseloads this large prevent anything more than cursory attention, impersonal surveillance, and brief administrative review.

The Committee strongly urges the Child Welfare Administration to redouble its efforts to hire additional case managers to bring the caseloads down to at least 74 families per worker, the level at which it is currently budgeted. The Committee also recommends that CWA develop a training program for case managers at its Child Protective Training Academy and require that all new case managers attend.

III. Make Sufficient Use of Automation

The technology available to CWA's Office of Case Management is outmoded and seriously hampers the staff's ability to be responsive to agency requests. Although the foster care case managers number approximately 125 and are located on five floors, only one fax machine is available for staff use. The office's xerox capacity is similarly limited to two large machines run by an operator and four small, older machines that frequently break down. As noted earlier, the office, located in midtown Manhattan, has no mailroom, which means that all correspondence must be batched and sent to CWA's main office downtown at 80 Lafayette Street, where it is posted and mailed.

The limited access to fax, xerox, and mail services accounts for weeks of delay in the processing of pre-approval requests. The communication problem could easily be resolved by equipping OCM and the private agencies with computer terminals, a proposal that has long been under consideration by the State. However, even minor improvements in this area (e.g., additional fax and copy machines) will dramatically improve service delivery to families, as well as improve relations between public and private agency staff.

IV. Reconceive the Role of the Case Manager

Case managers in the foster care system can be important "advocates" for children and families. They are in a unique position to coordinate services and to help families gain access to services. As representatives of CWA, they also should be responsible for ensuring that the Commissioner's policies are being properly interpreted and integrated into individual case decisions and agency practice.

In order to perform effectively, case managers can no longer be faceless bureaucrats. The case manager plays a central role in planning for the child and family. It is essential, therefore, that he or she be present at the semi-annual service plan review meetings attended by private agency staff, parents, and children. The active participation of the case manager in the service plan review also would allow for the further reduction of pre-approval requests. When the case manager is present at the review, his or her approval of requests can often be given on the spot.

To facilitate case managers' involvement, the Committee recommends that, for at least part of the time, they be out-stationed at the private agency. This arrangement would promote greater collaboration between the public agency case manager and private agency caseworker, streamline the approval process, and reduce paperwork.

The Committee believes that, by redesigning the foster care case management model, the quality of decision-making will improve, administrative delays will be minimized, and CWA's policies will be more uniformly applied.

V. Develop and Test a New Case Management Model

The New York State Department of Social Services, the Child Welfare Administration, and six private foster care agencies launched a three-year demonstration project in July of 1993 known as Home Rebuilders. By restructuring the payment system, the Home Rebuilders project allows agencies to intensify services prior to reuniting a family and to provide services after the child returns home. The goals of the project are to return children to their parents or extended families sooner and to prevent children from returning to care once they are discharged. One thousand families are the target group for this demonstration.

A critical component of the Home Rebuilders project is the CWA case manager. There has been some recognition that the existing case management scheme is problematic and may interfere with the goals of the project. While CWA has plans to make some modifications, the Committee does not believe the plan goes far enough and recommends more dramatic changes.

The Committee believes that the Home Rebuilders project presents a unique opportunity to design and test a completely new model of case management. Using the model proposed by the Committee (see Recommendation IV), case management staff for the 1,000 families (approximately fifteen case managers and supervisors) can be identified and integrated into the project. They can be trained along with private agency staff and out-stationed at the participating agencies. If, at the end of the demonstration period, delays are reduced, the quality of decisions are improved, and staff morale is raised, CWA will have the knowledge and experience to implement the changes on a systemwide basis.

Conclusion

Case managers play a critical role in New York City's foster care system. They have ultimate decision-making responsibility for thousands of children annually. Their decisions have a profound and lasting effect on the lives of children and families; yet their work is hindered by a variety of factors, including crushing caseloads, rigid procedures, and outmoded technology. The result is that case managers cannot do their jobs effectively.

The Committee believes that major changes in the role and functions of CWA's case managers are imperative. Some recent adjustments, most notably a reduction in the number of pre-approvals, have created an environment for change. The Committee urges the Human Resources Administration/Child Welfare Administration to monitor the implementation of the new pre-approval guidelines to ensure that the changes are put into practice and achieve the desired results.

The Committee also strongly urges that the process of constructive change be continued by implementing the recommendations in this report, which are intended to expedite and enhance the decision-making process. These recommendations are intended to: (1) restructure the tasks of case managers and provide adequate support services so they can perform their presently defined role more expeditiously, and (2) reshape their role so they can carry out a broader range of vital functions designed to improve services to children and families.

The Committee hopes that the recommendations contained in this report will be considered as a plan for action.

Endnotes

- ¹ The pertinent regulations are found primarily in 18 New York Code of Rules and Regulations §428.
- ² Known as the “Ukeles Report” the study was undertaken in connection with the Wilder v. Bernstein litigation by Ukeles Associates, Inc.



