

Permanency Roundtable Project

24-Month Outcome Report

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EXECUTIVE SUMMARY



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BACKGROUND

In early 2009, Georgia's Department of Human Services (DHS), Division of Family and Children Services (DFCS), and Casey Family Programs (Casey) implemented a permanency roundtable project to address legal permanency (reunification, guardianship, or adoption) for nearly 500 children, most of whom had been in foster care for 24 months or longer in two metro Atlanta counties. Permanency roundtables are intensive, structured case consultations among DFCS case managers, supervisors, administrators, specialists, and Casey permanency consultants, all of whom are focused on bringing creativity and urgency to expediting permanency for children in care.

Care Solutions, Inc., a Georgia-based consulting firm, served as the project evaluator in collaboration with Casey's Research Services work unit.

The primary goals of the roundtable project were to:

1. Achieve legal permanency for children, defined as reunification with a birth parent or with the family from which the child was removed, or adoption or guardianship with a relative or non-relative before the youth turned 18 years of age
2. Promote staff development through the roundtable consultation process
3. Identify and address systemic barriers to expediting permanency

This report focuses on the permanency outcomes achieved after 24 months by the youth who participated in the PRTs, and updates a previously published report on child outcomes at 12 months following the roundtables.^a

RESULTS

The Children (n=496)

- The children were 57% male and 92% black/African American.^b
- At the time of the roundtable, 19% were age 0-6, 27% were 7-12, and 54% were 13-18.
- The median age at the time of the roundtable was 13; the median age at foster care entry was 6.
- The median length of stay in foster care was 52 months; about three in four children (76%) had been in care for at least two years.

^a Rogg, C. S., Davis, C. W., & O'Brien, K. (2011). Permanency Roundtable Project 12-month outcome report. Seattle, WA: Casey Family Programs. www.casey.org and www.caresolutions.com.

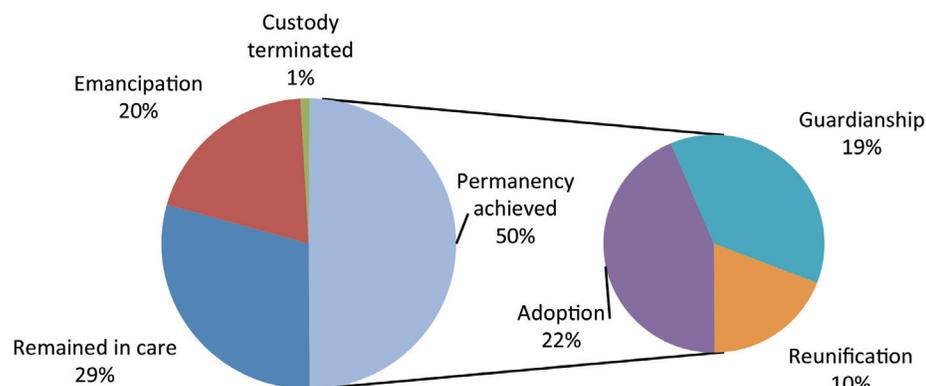
^b Although high, the percent of African American children in the project population is similar to that of the Fulton and DeKalb foster care population generally (90% of children under 18 in care on January 1, 2009). These figures are higher than the U.S. Census Bureau estimates for African Americans in the general population of those two counties (53% of children age 0-18; U.S. Census Bureau, 2008a, 2008b).

OUTCOME FINDINGS 24 MONTHS AFTER THE PERMANENCY ROUNDTABLES

Legal Permanency Achieved (see Figure A)

- Half of the children (50%) achieved legal permanency: 10% achieved reunification, 22% achieved adoption, and 19% achieved legal guardianship with a relative or non-relative.
- One in five youth (20%) emancipated; that is, they reached age 18, though they may have remained in voluntary care.
- Three youth (1%) re-entered care after achieving legal permanency.
- More than a fourth (29%) remained in care.

Figure A. Permanency Achieved at 24-Month Follow-Up (n=496)



LEGAL PERMANENCY ACHIEVED BY AGE GROUP

The likelihood of achieving permanency decreased as child age increased, supporting previous research findings from this project.^c Within 24 months of their roundtable, permanency was achieved by approximately:

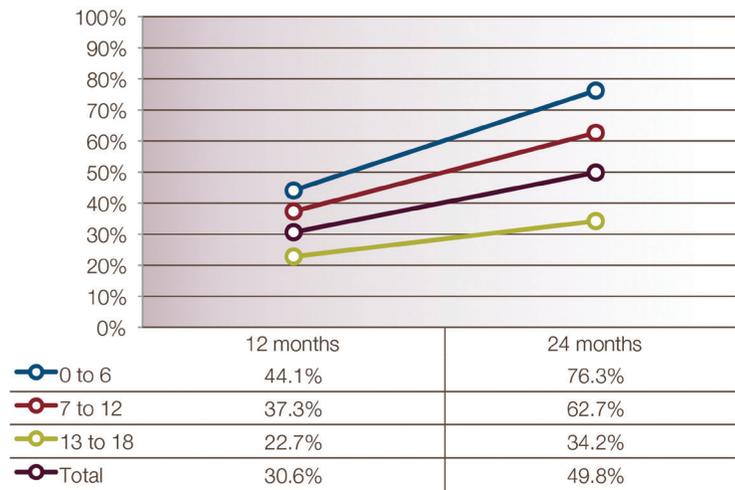
- Three in four of those age 0-6
- Three in five of those age 7-12
- One in three of those age 13-18

Figure B shows the percent achieving legal permanency for each of three age groups and for the entire group 12 and 24 months after the roundtable.

^c Rogg, C. S., Davis, C. W., & O'Brien, K. (2011). Permanency Roundtable Project 12-month outcome report. Seattle, WA: Casey Family Programs. www.casey.org and www.caresolutions.com.

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Figure B. Permanency Achieved at 24-Month Follow-Up (n=496)



RESTRICTIVENESS OF LIVING ENVIRONMENT

Between the time of the roundtable and the time of the 24-month follow-up, restrictiveness of living environment decreased for 51% of the children, increased for 10%, and remained the same for 33%; whereabouts were unknown for 6% at the 24-month follow-up.

PERMANENCY STATUS RATING

Of the 496 children, 29% had an improved permanency status rating (the 6-point scale ranged from *poor permanency* to *legal permanency achieved*) at the 24-month follow-up compared to their rating at the 12-month follow-up, and 58% had an improved permanency status rating compared to their rating at the time of the roundtable.

PREDICTORS OF LEGAL PERMANENCY

Multivariate analyses were used to analyze predictors of achieving permanency. Findings differed significantly by age group (0-6, 7-12, and 13-18):

Child/Family Characteristics. Legal permanency was less likely if the child had:

- 0-6: (a) two or more siblings or (b) moderate to severe emotional/mental health needs.
- 7-12: moderate to severe behavioral needs.

For those 13-18, none of the child/family characteristics analyzed were significant.

Perceived Permanency Barriers (by the case manager). Legal permanency was less likely if:

- 0-6: (a) any birth parent issues (such as substance abuse or incarceration) were identified as barriers or (b) there was no permanency resource identified.

- 7-12: any sibling issues (such as a disability or behavior disorder) were identified as barriers.

For both those 7-12 and 13-18, legal permanency was more likely if any court/legal issues were identified as barriers.

Permanency Goals and Strategies. Predictors related to permanency action plans (developed at the roundtable) were significant only for the two younger age groups.

- 0-6: permanency was less likely if the child's permanency action plan included a diligent search or child engagement strategy.
- 7-12: permanency was more likely if the child's recommended permanency goal was guardianship or reunification.

RECOMMENDATIONS

Both the 12- and 24-month findings highlight the need to maintain connections for children the entire time they are in care; to ensure children in care receive sufficient, effective, and age-appropriate mental and behavioral health services; and to sustain aggressive casework until permanency is achieved. The following recommendations, some of which were included in previous reports, are based on the collective results of the process, participant, and outcome analyses.

1. Improve child well-being and preparation for permanency from the start:
 - o Identify potential permanency resources and connections, through discussions with parents and relatives and diligent search, at the time a child is placed (or prior to placement, if placement appears likely).
 - o Ensure that children in care maintain connections with or are reconnected with their siblings and significant adults in their lives.
 - o Address mental, emotional, or behavioral issues with evidence-based interventions.
 - o Tailor specific strategies to the child's needs and age/stage of development.
2. Improve permanency practice:
 - o Communicate permanency values and a sense of urgency about achieving permanency throughout the organization.
 - o Train all staff on values and best practices for achieving permanency, especially for large sibling groups and for children and their siblings who have moderate or severe physical, mental health, and/or behavioral needs.
 - o Ensure that residential, group care and foster caregivers; judges; attorneys; and Court Appointed Special Advocates (CASAs) receive training on permanency values and strategies, and ensure that their practices are permanency-oriented.
 - o Share knowledge and best practices.
 - o Monitor roundtable practice to ensure fidelity to the model, including intensity of preparation and follow-up; structured brainstorming and planning format; manifestation of strengths-

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based, non-blaming and solution-focused values; and inclusion of appropriate staff and external partners on roundtable teams.

- o Establish a timeframe for achieving permanency and re-evaluate action plan strategies if permanency is not achieved in a timely manner.
- 3. Adopt innovative strategies to overcome systemic barriers (casework, court/legal, policy):
 - o Be creative; seek waivers and exceptions as needed.
 - o Ensure that funding and supports encourage legal permanency and do not provide an incentive to keep children in foster care.
- 4. Hire, support, and mentor qualified caseworkers; ensure reasonable workloads:
 - o Hire staff who support permanency values and culture.
 - o Evaluate success in achieving permanency; reinforce and celebrate good work.
 - o Ensure that staff are culturally competent and able to develop and maintain strong relationships with youth from diverse backgrounds.
- 5. Conduct additional research to drive permanency practice and outcomes:
 - o Conduct rigorous evaluations of permanency roundtables in other states and jurisdictions; design the evaluation prior to implementation to include a control or comparison group and measures of model fidelity.
 - o Explore differences within the broader age groups, for example 0-3 vs. 4-6 and 13-15 vs. 16-18.
 - o More closely examine the characteristics of the youth's families (e.g., parent age, marital status, employment status) to gain a better understanding of the environment from which the youth came—and in the case of reunification, to which they returned.
 - o In cases of adoption, gain a better understanding of the adoptive families (e.g., relative, foster parent, or other adoptions) and the strategies used to recruit them.
 - o Examine the impact of worker attitudes, turnover, and characteristics (e.g., educational level, time in position) on achieving permanency.
 - o Evaluate the outcomes for children who achieve legal permanency as well as those who age out of foster care.



acknowledgements

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To read the full report go to: www.casey.org/resources/publications/garoundtable/24month.htm



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