

Permanency Roundtable Project

24-Month Outcome Report

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Executive Summary

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.

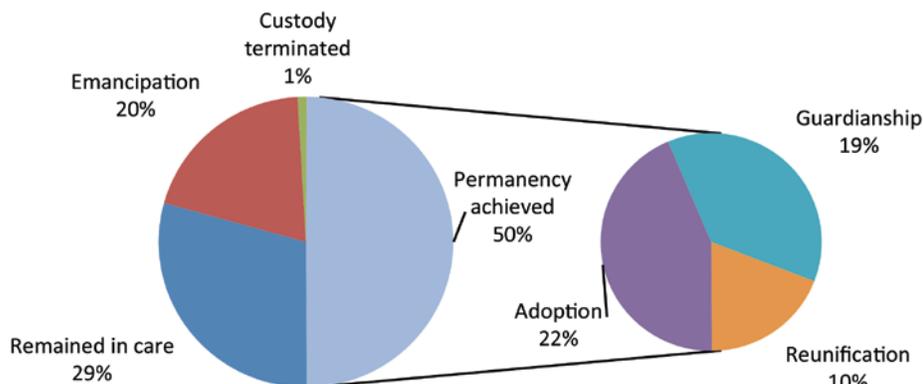
^b Although high, the percent of African American children in the project population is similar to that of the Fulton and DeKalb foster care population generally (90% of children under 18 in care on January 1, 2009). These figures are higher than the U.S. Census Bureau estimates for African Americans 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:

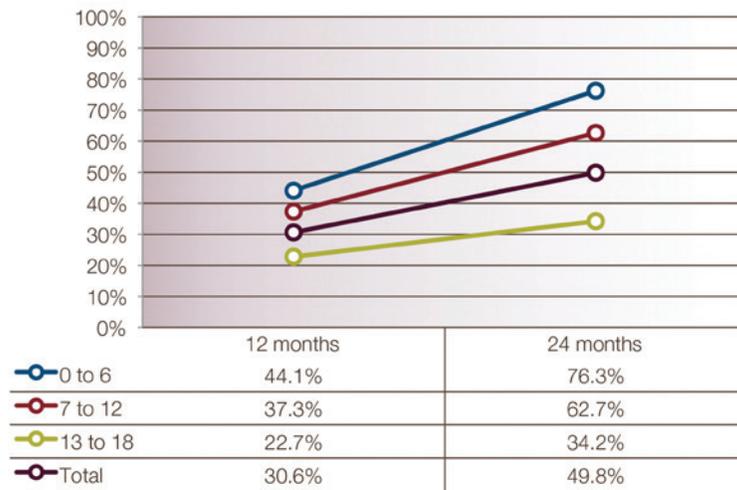
- Three in four of those age 0-6
- Three in five of those age 7-12
- One in three of those age 13-18

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-

executive summary

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.



introduction

Introduction

More than 11,000 Georgia children were in foster care at the beginning of 2008. In the fall of that year, Georgia's Department of Human Services (DHS), Division of Family and Children Services (DFCS),¹ and Casey Family Programs (Casey) developed a permanency roundtable project to address permanency for nearly 500 children, most of whom had been in foster care for 24 months or longer (median length of stay was 52 months). Within two years, 50% of these children achieved legal permanency through adoption, guardianship, or reunification.

Permanency roundtables (PRTs) are intensive, structured case consultations among agency case managers and supervisors, Casey permanency consultants, and others related to a child's case who are focused on bringing creativity and urgency to expediting permanency for children in care. These roundtables differed from the usual case staffing in that teams focused specifically on legal permanency rather than overall casework; additionally, structured roundtable sessions included brainstorming and a focus on "thinking outside the box." Roundtable teams developed permanency action plans with steps that could be accomplished within six months. As part of the roundtable process, regular follow-ups on youth progress toward permanency were conducted.²

The Georgia Permanency Roundtable project, the first project of its type for Casey Family Programs and the state, involved roundtable discussions regarding nearly 500 children over a six-week period in January and February 2009 at two locations. The project focused primarily on children in Fulton and DeKalb counties (in the Atlanta metro area), as these two counties account for a large proportion of the state's children in care and fall under a federal consent decree.³ It also included 45 children from other regions in the state.

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



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ROUNDTABLE PROJECT EVALUATION⁴

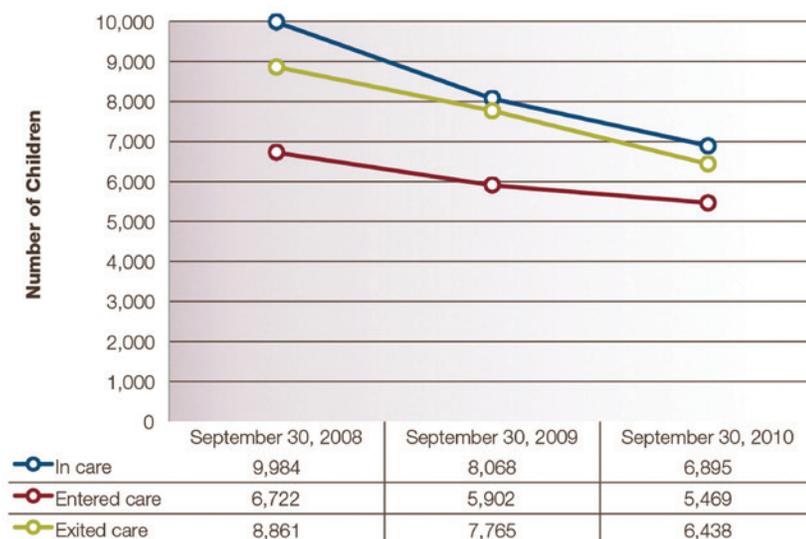
The evaluation of Georgia's Permanency Roundtable Project included a process evaluation, a participant evaluation, and 12- and 24-month outcome evaluations.

- The process evaluation report (Rogg, Davis, & O'Brien, 2009) included a detailed description of the project and the children included in the project; roundtable participants, preparation, implementation, and follow-up; perceived permanency barriers; and the permanency action plans developed during the roundtables.
- The participant evaluation (Rogg, Davis, & O'Brien, 2010) included feedback from the primary roundtable team members, and covered preparation, implementation, permanency planning, and follow-up of the roundtables as well as subsequent agency and individual practices.
- The 12- and 24-month outcome evaluations utilized data collected as part of the roundtable process and data from 12- and 24-month follow-up forms completed by caseworkers. A previous report (Rogg, Davis, & O'Brien, 2011) analyzed the 12-month outcomes; this report presents the 24-month outcomes. (See the appendix for a copy of the 24-month follow-up form.)

Background

As of September 30, 2008, an estimated 463,799 children were in foster care nationwide; this dropped by 9% to 421,350 in 2009 and then by 4% to 406,412 in 2010 (Children's Bureau, 2012). In Georgia, the number in care dropped by 19% in 2009 and by 15% in 2010. As shown in Figure 1, the numbers entering and exiting care dropped as well (Children's Bureau, 2012).

Figure 1. Number of Children in Care, Entering Care, and Exiting Care in Georgia, 2008-2010



Reducing the number of children entering care and increasing the number exiting care speaks to Georgia's commitment to safely reducing the number of children in foster care. The state's re-entry rates were 4.4% in 2009 and 6.5% in 2010 (state fiscal years).

A review of literature included in the 12-month evaluation report⁵ suggested that child characteristics such as gender, age, race, siblings, and special needs (e.g., mental/emotional disorders) may affect the length of stay in foster care and may affect achieving permanency. The most consistent finding was that older youth are more likely to remain in care and less likely to achieve permanency. Other potential predictors of achieving legal permanency include maltreatment history/reason for removal, the child's placement setting, and the number and extent of parental problems that affect their caregiving. Although some findings are inconsistent and success is defined in different ways, it is clear that many children in care face significant challenges to achieving legal permanency.

The Permanency Roundtable Project was designed to expedite permanency for children who were considered to be "stuck" in foster care. In particular, specific permanency strategies were designed to facilitate permanency for the children, such as diligent search, youth engagement, family engagement, strengthening child connections, and services to meet child needs and prepare child for permanency, as well as strategies to overcome policy, legal, and financial barriers to permanency. Analyses focused on examining these factors and roundtable practices that may be associated with achieving legal permanency.

Research Design

The 24-month outcome evaluation, an update to the previously reported 12-month outcome evaluation (Rogg, Davis, & O'Brien, 2011), was designed to measure whether the children were achieving legal permanency and to examine the relationship of predictors to achieving that permanency. The underlying hypothesis was that permanency roundtables would expedite achievement of legal permanency for children in foster care while maintaining a low rate of re-entry into out-of-home care for those youth who achieved legal permanency.

MEASURES AND VARIABLES

PREDICTORS

The variables defined as potential predictors for both the 12- and 24-month outcome analyses included child characteristics, family information, child welfare experience, and permanency roundtable planning. Most of these were reported by caseworkers at the time of the roundtable (with exceptions noted).

Because so many of the predictors were correlated with child age at the time of the roundtable, and because casework strategies may differ based on child age, analyses for both the 12- and 24-month outcome evaluations for the 496 children were conducted separately for each of three age groups:

- 0-6 (n=93)
- 7-12 (n=134)
- 13-18 (n=269)⁶

OUTCOMES

The key child outcomes reported at both the 12- and 24-month follow-ups included:

- Achievement of legal permanency
- Emancipation
- Termination of state custody
- Re-entry into out-of-home placement
- Child permanency status rating
- Restrictiveness of the child's living environment

Legal permanency was defined as reunification, guardianship, or adoption prior to the child reaching age 18. Re-entry occurs when a child re-enters foster care after achieving legal permanency (or leaving DFCS custody) and does not include voluntary re-entry of emancipated youth who choose to re-enter or remain in care for education assistance or other supports.

Child permanency status was initially rated by the permanency roundtable team and subsequently rated by caseworkers with input from the master practitioner (regional staff who served as internal permanency experts) and case supervisor. Child permanency status was rated on a 6-point scale ranging from poor to

permanency achieved, with specific descriptions of the child's situation for each scale point.⁷

Case managers indicated each child's living situation using an adaptation of the Restrictiveness of Living Environment Scale (ROLES), which included 26 possible living environments (excluding runaway), ranging from the least restrictive setting of independent living to the most restrictive setting of incarceration (adapted from Hawkins, Alameida, Fabry & Reitz, 1992). Both the child permanency status and the living situation were assessed at the time of the roundtables and again at the 12- and 24-month follow-ups.

METHOD

DATA COLLECTION

To facilitate the collection and analysis of data, a secure website and online database system were developed before the start of the permanency roundtables. Information about the child and the child's case was collected on a case summary form and shared with roundtable team members prior to the roundtables. The initial rating of the child's permanency status and the development of the permanency action plan occurred during the roundtable.⁸

For 12- and 24-month data collection, a follow-up form was developed and pre-populated with child information obtained in the previous data collection processes. The follow-up forms were distributed to the master practitioners representing the child's legal county, who completed the forms in consultation with the child's case manager and the case manager's supervisor.

QUALITY ASSURANCE

A comprehensive data quality assurance process was implemented, which included reviewing completed forms, re-contacting counties, running anomalies reports, and cleaning data as needed. For permanency outcomes at both 12 and 24 months, data entry was checked against the completed forms submitted by the county or region.⁹

DATA ANALYSIS

This 24-month outcome analysis updates the 12-month outcome analysis.

1. Child outcomes included:
 - a. Permanency achieved
 - b. Permanency status (for all youth and for youth in care)
 - c. Restrictiveness of child's living environment (for all youth and for youth in care)
 - d. Emancipation
 - e. Custody termination
 - f. Foster care re-entry

2. Kaplan-Meier analysis of the time it took to achieve legal permanency after the roundtables for the children included in the roundtable project by age group.¹⁰
3. Multivariate analysis of predictors related to achieving legal permanency using Cox proportional hazard regression analysis, which also allows for the inclusion of those who emancipated or left state custody up to the time they left custody.

LIMITATIONS

A significant limitation for evaluating the impact of the roundtables was the lack of a control or comparison group because roundtables were implemented statewide the month following project completion.

Additionally, there were data limitations at the beginning of the project due to the inability to obtain data records for children in the project from statewide child welfare information system files. Consequently, some items were missing or inconsistent.

Another limitation of this research is that the information about the child, the child's situation, and the child's family was reported by the case manager (in consultation with the supervisor) rather than measured directly. For example, the impact of a child's needs (e.g., mental health, education, or behavior) on the child's functioning was based on caseworker perceptions. The same was true for the identification of permanency barriers prior to the roundtables. The results of this research and associated recommendations are nonetheless useful for case practice considerations and for identifying additional areas for future research.

Predictors

Following are descriptions of the potential predictors included in these analyses. The 12-month evaluation report includes data on these and other potential predictors by child age group (Rogg, Davis, & O'Brien, 2011).

CHILD CHARACTERISTICS

DEMOGRAPHICS

Demographic information (gender, race, ethnicity, age, number of siblings, county) was collected from case managers at the time of the roundtables (Rogg, Davis, & O'Brien, 2009; Rogg, Davis, & O'Brien, 2010).

IMPACT OF CHILD NEEDS ON CHILD FUNCTIONING

Case managers, in preparing case summaries for the roundtables, were asked to indicate whether a child's needs in certain areas had *no impact* or had a *mild*, *moderate*, or *severe* impact on the child's functioning. The areas included behavioral needs, developmental delays, medical/physical needs, emotional/mental health needs, and learning needs.

CHILD'S CRIMINAL HISTORY AND RELATIONSHIPS WITH OTHERS

Other indicators of child functioning included whether the child had a criminal history (e.g., arrest, incarceration) and the child's relationships/interactions with others as assessed by case managers on a scale of *poor*, *fair*, *good*, or *very good*, with the option of indicating n/a (not applicable, for example in the instance where a parent's rights had been terminated).

FAMILY INFORMATION

MALTREATMENT HISTORY

Case managers reported types of maltreatment on case summary forms as open-ended text, which was subsequently coded into categories, with up to three categories coded per child.¹¹ Categories of maltreatment included neglect, parent substance abuse, abandonment, physical abuse, sexual abuse, deprivation, and parent incarceration.

BIRTH FAMILY ISSUES AND TERMINATION OF PARENTAL RIGHTS

Case managers were asked to indicate whether the child's birth mother or birth father had any issues or challenges in specific areas, such as mental/emotional health, substance abuse (whether or not indicated as maltreatment/reason for removal), and family violence. This item was not required if the parent's rights had been terminated by the court, which was the case for about half of the children's fathers (51%) and mothers (48%).¹²

CHILD WELFARE EXPERIENCE

KENNY A. CONSENT DECREE OUTCOME GROUP¹³

The Kenny A. consent decree for Fulton and DeKalb counties specified a number of outcome measures that the state must meet, including permanency outcome measures, with different outcome measures based on when the child had entered care. Inclusion in a specific Kenny A. outcome group was based on the length of time the child had been in care at the time of the consent decree.

CHILD WELFARE/PLACEMENT CHARACTERISTICS

Child welfare measures included age at admission, the length of time in foster care, the number of placement moves, and the number of caseworkers. The median length of stay was 52 months, and the average number of placement moves was five. Most (76%) had been in care for at least two years; 55% had been in care for at least four years since their most recent entry. The median number of caseworkers was three.

FAMILY ENGAGEMENT IN CASE PROCESS

On the case summary form completed prior to the roundtables, case managers were asked to rate the engagement of the birth mother (if applicable), the birth father (if applicable), and the child in case planning, family team meetings, and visitation as *not at all*, *not very*, *somewhat*, or *very engaged*. Case managers may have skipped child engagement if they thought the item was not applicable due to the child's disability or young age.

INITIAL PERMANENCY BARRIERS AS PERCEIVED BY CASEWORKERS

Before the roundtables, caseworkers listed what they felt were the primary barriers to permanency on the child's case summary form. These perceived barriers were then coded and collapsed into broad categories and subcategories, with up to three perceived barriers coded for each child (Rogg, Davis, & O'Brien, 2009).¹⁴ The broader categories were created by summing their respective subcategories. Note that these categories are simply descriptive of the nature of the barrier and do not suggest that the child or the family is necessarily to blame. Following is a list of the broad categories and subcategories:

- Birth family – parent issues, sibling issues
- Child – child characteristics (emotional/behavioral issues, other issues)
- System – casework, court/legal issues, placement/provider issues
- Potential permanency resource – lack of a permanency resource willing or able to take the child, or permanency resource with a financial or other issue

PERMANENCY ROUNDTABLE PLANNING

The primary output of the permanency roundtable was a permanency action plan (and, in some cases, a concurrent plan¹⁵) to be implemented by the case manager. The plan included a roundtable-recommended permanency goal as well as specific strategies and action steps for achieving that goal.

ROUNDTABLE-RECOMMENDED PERMANENCY GOAL

Roundtable goals included reunification, adoption, guardianship, emancipation, or long-term foster care.¹⁶ If the roundtable team recommended a goal that was different from the youth's current goal, the action plan included making a recommendation to the court that the goal be changed. As might be expected, the goals differed by age group. Youth over age 12 were less likely to have a recommended goal of adoption and more likely to have a recommended goal of guardianship than were younger youth. The likelihood of having reunification as the recommended goal decreased as age increased.

CHILD ENGAGEMENT

Pre-roundtable child engagement in the case process (case planning, family team meetings, visitation, etc.) was rated by case managers at the time of the roundtable. For the 12- and 24-month follow-ups, caseworkers were asked to rate the child's level of engagement with his or her case manager and the child's level of engagement in the permanency planning process since the permanency roundtables.¹⁷ For both, engagement was rated by the case manager on a 5-point scale from *not at all* to *extremely engaged*.

Angela

Angela entered foster care at the age of five months in March 1996 along with her older brother, Marcus. Their mother, who had a history of drug abuse, left the children without adequate supervision. Angela was a part of the Kenny A. Outcome 10 cohort that consisted of children who were in foster care for more than 24 months when the consent decree was entered in September 2005. Angela and Marcus experienced several foster home placements. Although the Division made efforts to keep the siblings together, a decision was eventually made to plan for them separately due to Marcus' challenges. At the time of Angela's permanency roundtable in January 2009, the barrier to achieving permanency was her foster parent's husband contesting his divorce. The foster parent ultimately decided not to proceed with adopting Angela.

Angela maintained a connection with Steve, a man she met through a former foster parent, even though it had been several years since she was moved from that home. Her case manager began to explore the possibility of permanency with Steve as he was an individual whom Angela identified as family. Angela was legally adopted at the age of fifteen on National Adoption Day in November 2010.

Results

This report is focused on achieving permanency, predictors of permanency, and time to permanency for youth who were typically in foster care for long periods of time (median of 52 months). The results, which update previously published 12-month outcomes, are based on data analyses of the 496 children included in the original permanency roundtables project (roundtables conducted in January and February 2009).

OUTCOMES

Outcomes included (a) permanency achieved, (b) permanency status (for all youth and for youth in care), (c) restrictiveness of child living environment (for all youth and for youth in care), (d) emancipation, (e) custody termination, and (f) foster care re-entry.

As an overview, a total of 247 children (50%) achieved legal permanency by 24 months, compared to 31% by 12 months following the roundtables. Table 1 lists the legal status of youth by age group at 12 and 24 months following the roundtables.

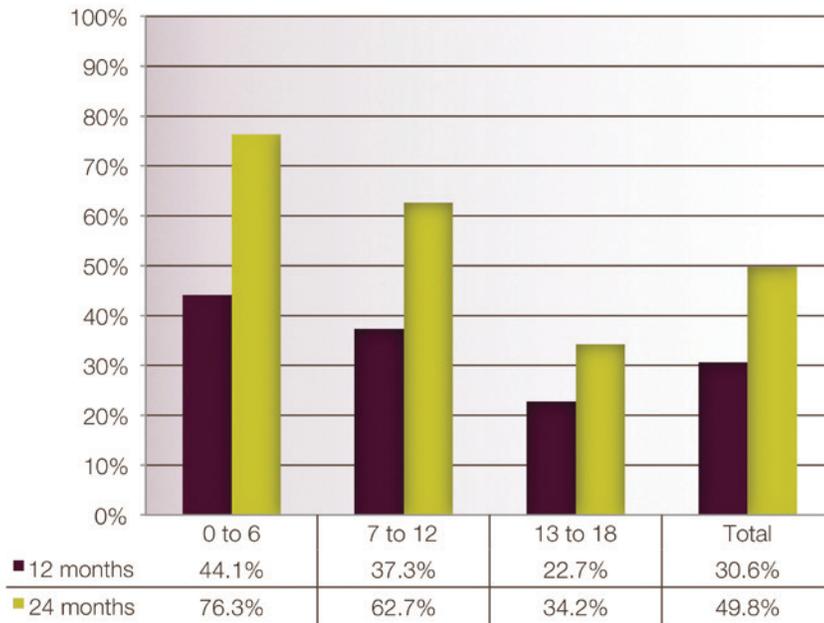
Table 1. Legal Status at 12 and 24 Months Following Roundtable by Child Age (n=496)

Outcomes	Age Group						Total	
	0-6		7-12		13-18		12m	24m
	12m	24m	12m	24m	12m	24m		
Legal permanency achieved	44.1%	76.3%	37.3%	62.7%	22.7%	34.2%	30.6%	49.8%
Emancipation (turned 18)	n/a	n/a	n/a	n/a	21.2%	36.4%	11.5%	19.8%
Custody termination (e.g., court relieved agency of custody due to child's runaway status)	0.0%	0.0%	0.0%	0.0%	1.5%	1.9%	0.8%	1.0%
Remained in care	55.9%	23.7%	62.7%	37.3%	54.6%	27.5%	57.1%	29.4%
Total number of children	93		134		269		496	

PERMANENCY ACHIEVED

A comparison of permanency at 12 months by age showed that the likelihood of achieving permanency decreased significantly with age, supporting previous research findings (Rogg, Davis, & O'Brien, 2011). This was true for the 24-month outcomes as well. Figure 2 shows the percent achieving permanency at 12 and 24 months by child age group.

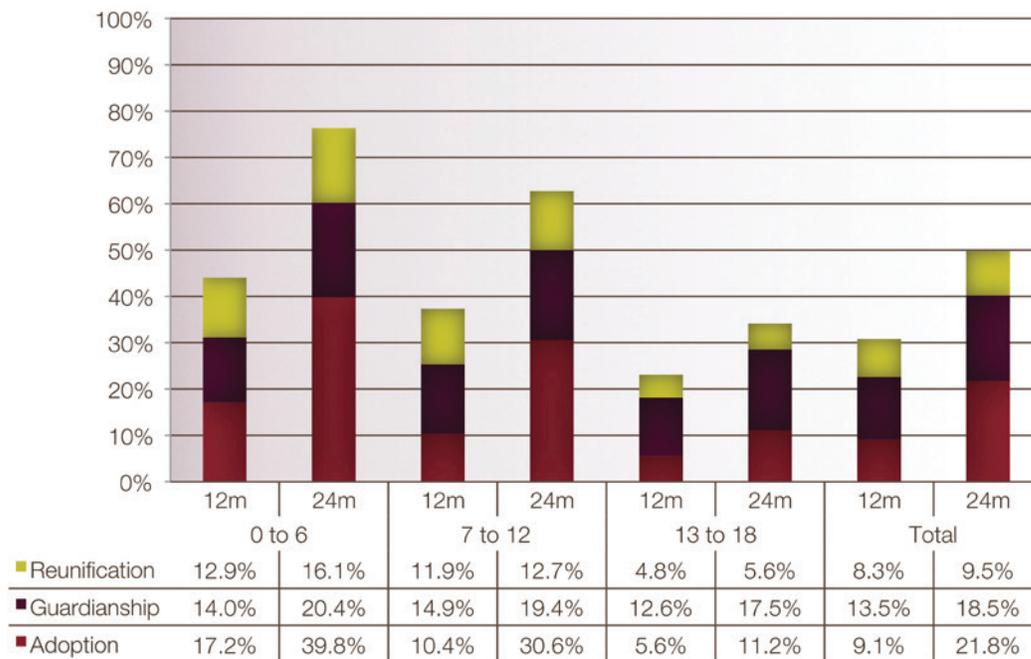
Figure 2. Permanency Achieved at 12 and 24 Months Following Permanency Roundtables by Child Age Group (n=496)



As shown in Figure 3, at the 12-month follow-up, children achieving legal permanency were most likely to have achieved legal guardianship, followed by adoption and reunification. By the 24-month follow-up, the percent of children achieving adoptions exceeded the percent achieving guardianships, and both exceeded the percent achieving reunifications. Interestingly, the percent achieving adoption more than doubled, from 9% by 12-months to 22% by 24 months (30% and 44% of those achieving permanency, respectively), confirming that adoptions typically take longer to achieve than do reunifications or guardianships.

Further, there were few reunifications in either year following the roundtable, which may suggest that reunification becomes less likely the longer children remain in care (conversely, youth who are least likely to reunify may stay in care longer). Subsequent analyses indicated that at the time of their roundtables, the children achieving reunification had been in care significantly less time (average of 2.6 years) than the children achieving guardianship or adoption (average of 4.1 years).

Figure 3. Permanency Achieved at 12 and 24 Months Following Permanency Roundtables by Type of Permanency and Child Age Group (n=496)



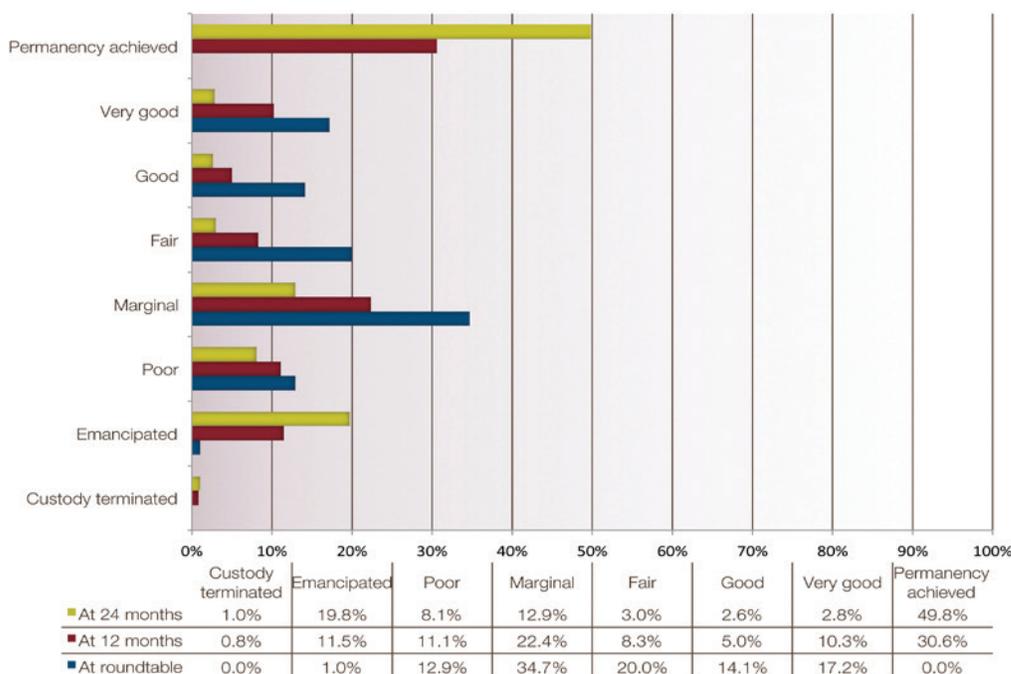
PERMANENCY STATUS

Permanency Status for All Youth

For all youth, it was anticipated that permanency roundtables would improve the child’s permanency status as measured on the child permanency status rating scale. Each child’s permanency status was rated on a 6-point scale (ranging from *poor permanency* to *permanency achieved*) at the time of the roundtable. The same 6-point scale, with some minor modifications, was used at the time of the 12- and 24-month follow-ups. To reflect other ways in which a child might leave state custody, emancipation and termination of custody were added.¹⁸

By 12 months, 152 children (31%) had achieved and maintained legal permanency; by 24 months, this number increased to 247 children (50%).¹⁹ Figure 4 shows child permanency status at the time of the roundtable and at the 12- and 24-month follow-ups.

Figure 4. Permanency Status at Roundtable (n=495) and at 12- and 24-Month Follow-Ups (n=496)



Note: Marginal was labeled uncertain at the time of the roundtable. One youth was missing the action plan and did not have a permanency status rating at the roundtable. Therefore, n=495 at the roundtable.

Of the 496 children, 29% had an improved status rating at the two-year mark compared to their rating at the 12-month follow-up and 58% had an improved status compared to their rating at the time of the roundtable. (The 24-month comparisons were not applicable for 21% of the sample due to emancipation, termination of custody, or missing data.)

Changes in child permanency status at the 24-month follow-up differed by age group, with younger youth significantly more likely to have an increased (i.e., improved) permanency rating than older youth ($p < .05$). (See Table 2.) This difference was not significant for the subset of children remaining in care at the 24-month follow-up.

Table 2. Change in Child Permanency Status at 12 and 24 Months Following Roundtable (n=496)

Permanency Status Rating Change	Roundtable to 12-Month Follow-Up				12-Month Follow-Up to 24-Month Follow-Up				Roundtable to 24-Month Follow-Up			
	Age 0-6	Age 7-12	Age 13-18	Total	Age 0-6	Age 7-12	Age 13-18	Total	Age 0-6	Age 7-12	Age 13-18	Total
Increased	59.1%	61.2%	38.7%	48.6%	41.9%	39.6%	19.3%	29.0%	86.0%	75.4%	39.8%	58.1%
No change	26.9%	20.1%	18.2%	20.4%	53.8%	53.7%	31.6%	41.7%	8.6%	9.7%	8.2%	8.7%

Permanency Status Rating Change	Roundtable to 12-Month Follow-Up				12-Month Follow-Up to 24-Month Follow-Up				Roundtable to 24-Month Follow-Up			
	Age 0-6	Age 7-12	Age 13-18	Total	Age 0-6	Age 7-12	Age 13-18	Total	Age 0-6	Age 7-12	Age 13-18	Total
Decreased	14.0%	18.7%	20.1%	18.5%	4.3%	6.7%	10.8%	8.5%	5.4%	14.9%	13.4%	12.3%
N/A (emancipated or custody terminated)	0.0%	0.0%	23.0%	12.5%	0.0%	0.0%	38.3%	20.8%	0.0%	0.0%	38.7%	21.0%
Total number of children	93	134	269	496	93	134	269	496	93	134	269	496

Permanency Status for Youth in Care

At the 12-month follow-up, 283 children (57%) remained in care, including one child who had achieved permanency and then re-entered care. By the 24-month follow-up, the number of children remaining in care was reduced to 146 (29%). Just over half (51%) of the children remaining in care at 24 months were age 13-15 at the time of the roundtable (n=74); 34% were age 7-12 (n=50), and 15% were age 6 or younger (n=22).

CHANGES IN CHILD PERMANENCY STATUS

Figure 5 presents permanency status for all children in care at 24 months following the roundtables (n=146), while Figure 6 presents the same information broken down by age group. Overall, for children in care, the percentage of youth rated as having a poor status increased over time due to increase for 13-18 year olds.

Figure 5. Child Permanency Status for Children in Care at 24 Months Following Roundtable (n=146)

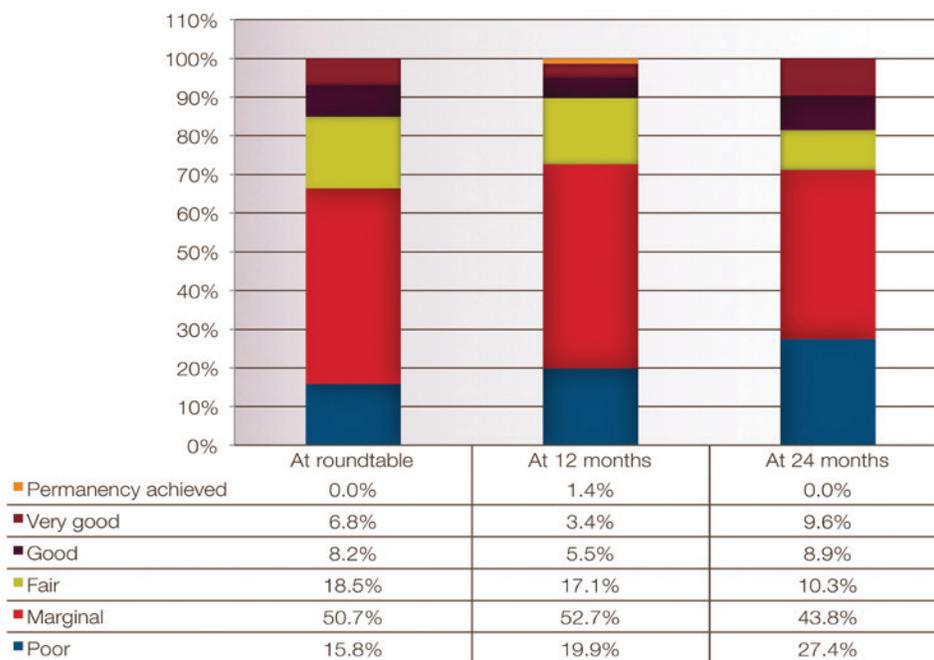
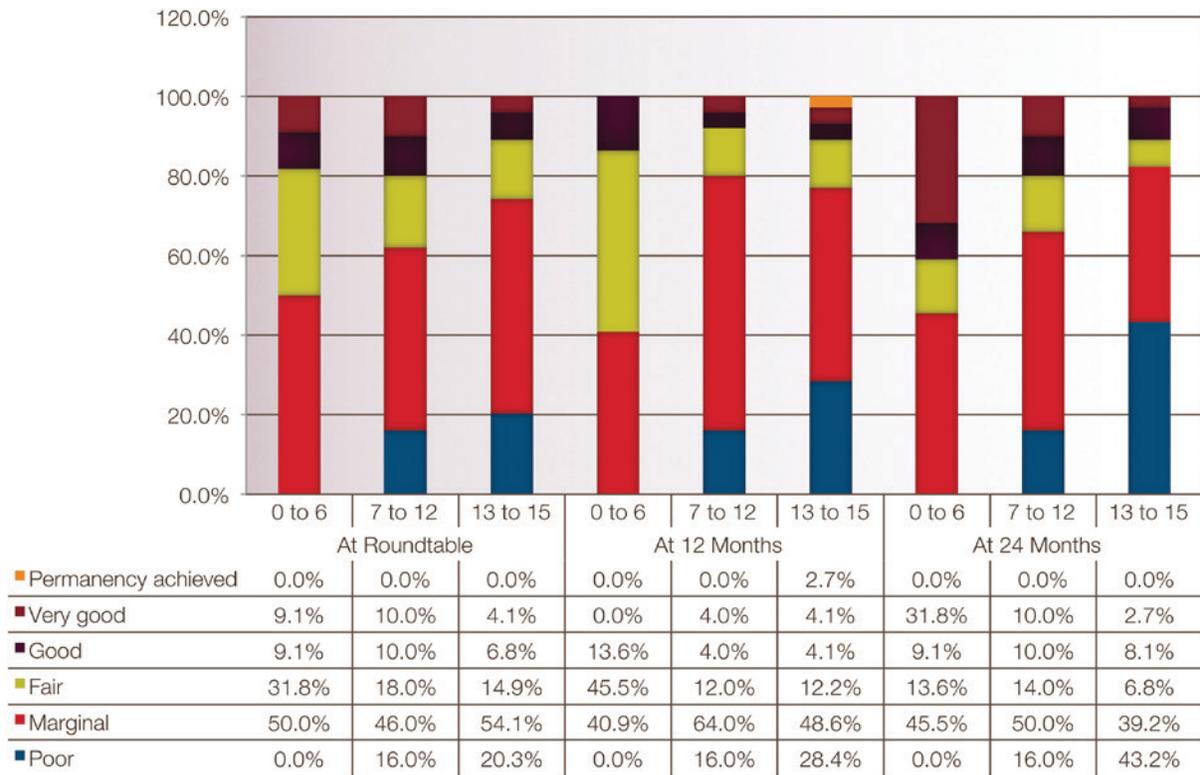
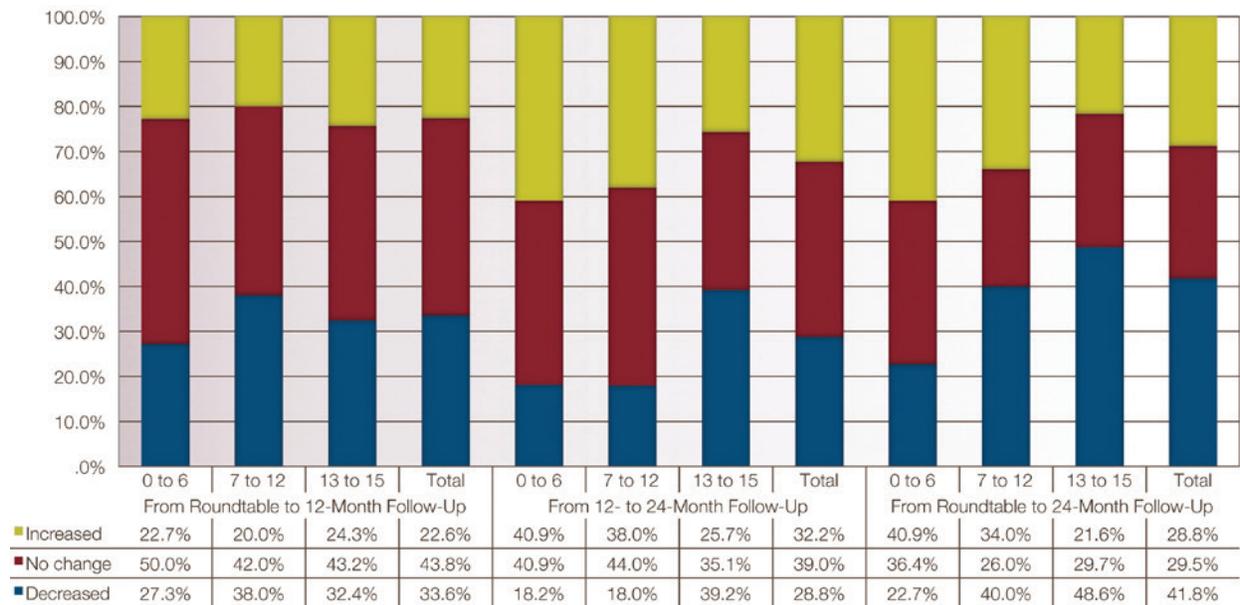


Figure 6. Child Permanency Status for Children in Care at 24 Months Following Roundtable by Age Group (n=146)



A comparison of the permanency status at the time of the roundtable to the permanency status at the 12-month follow-up showed that a larger proportion of children who remained in care at 12 months following the roundtable had no change in permanency status (44%) followed by a decreased status (34%) or an increased status (23%). Differences were similar for a comparison of the 12- and 24-month permanency status ratings. At 24 months following the roundtable, a larger proportion (42%) of children remaining in care at 24 months (nearly half of whom were age 13-15 at time of roundtable) were given a decreased status rating compared to their rating at the time of the roundtable. (See Figure 7.)

Figure 7. Change in Child Permanency Status from Roundtable to 12 and 24 Months Following Roundtable (n=146)



RESTRICTIVENESS OF CHILD LIVING ENVIRONMENT

Restrictiveness of Child Living Environment for All Youth

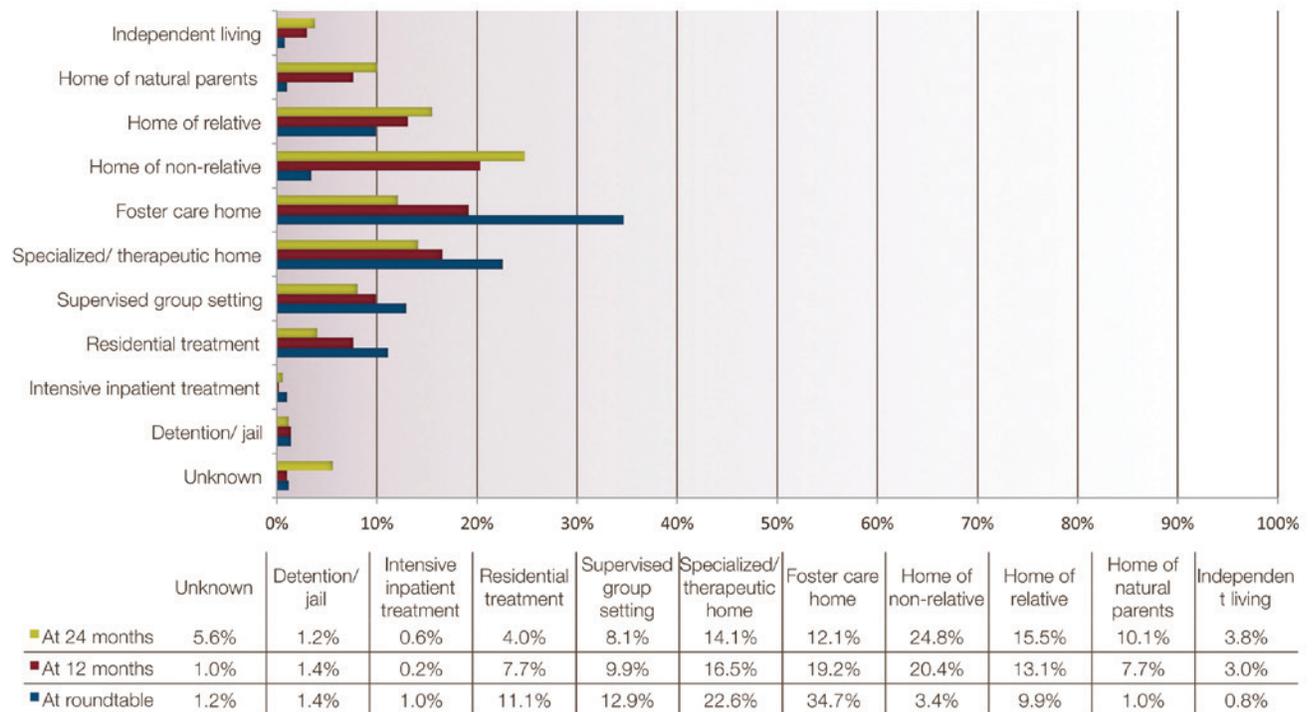
It was anticipated that permanency roundtables would reduce the level of restrictiveness of the living environment. Using the Restrictiveness of Living Environment Scale (ROLES), case managers were asked to indicate each child’s living situation just prior to the roundtable and again at the time of the 12- and 24-month follow-ups.²⁰

For the total sample of 496 children, including those achieving permanency, between the time of the roundtable and the time of the 24-month follow-up, the mean level of restrictiveness (on the 10-point scale) decreased significantly from 5.6 at the time of the roundtables to 4.4 at the 24-month follow-up.²¹ Restrictiveness of living environment decreased for 51% of the children, increased for 10%, and remained the same for 33%; whereabouts were unknown for 6%. The children were more likely to be in a home setting and less likely to be in a group or institutional setting at follow-up. For the 146 children remaining in care at 24 months, the mean level of restrictiveness decreased significantly from 6.2 to 5.9 over the same period.

As in the 12-month analysis, there were no significant differences by child age group in the child’s restrictiveness of living environment at 24-months post-roundtable. At time of roundtable and at time of 12-month follow-up, 1% of the youth were on runaway status; at the time of the 24-month follow-up, 2% were on runaway status and 4% were lost to follow-up due to emancipation or termination of custody.

Figure 8 displays the child's living environment at the time of the roundtable and at the 12- and 24-month follow-ups.

Figure 8. Restrictiveness of Child's Living Situation (n=496)



Note: The percentage with unknown living situations was higher for the 24-month follow-up, primarily due to lack of contact with youth who had emancipated (n=19) or had custody terminated (n=3).

Restrictiveness of Child Living Environment for Youth in Care

At the 12-month follow-up, 283 children (57%) remained in care, including one child who had achieved permanency and then re-entered care. By the 24-month follow-up, the number of children remaining in care was reduced to 146 (29%). Just over half (51%) of the children remaining in care at 24 months were age 13-15 at the time of the roundtable (n=74); 34% were age 7-12 (n=50), and 15% were age 6 or younger (n=22).

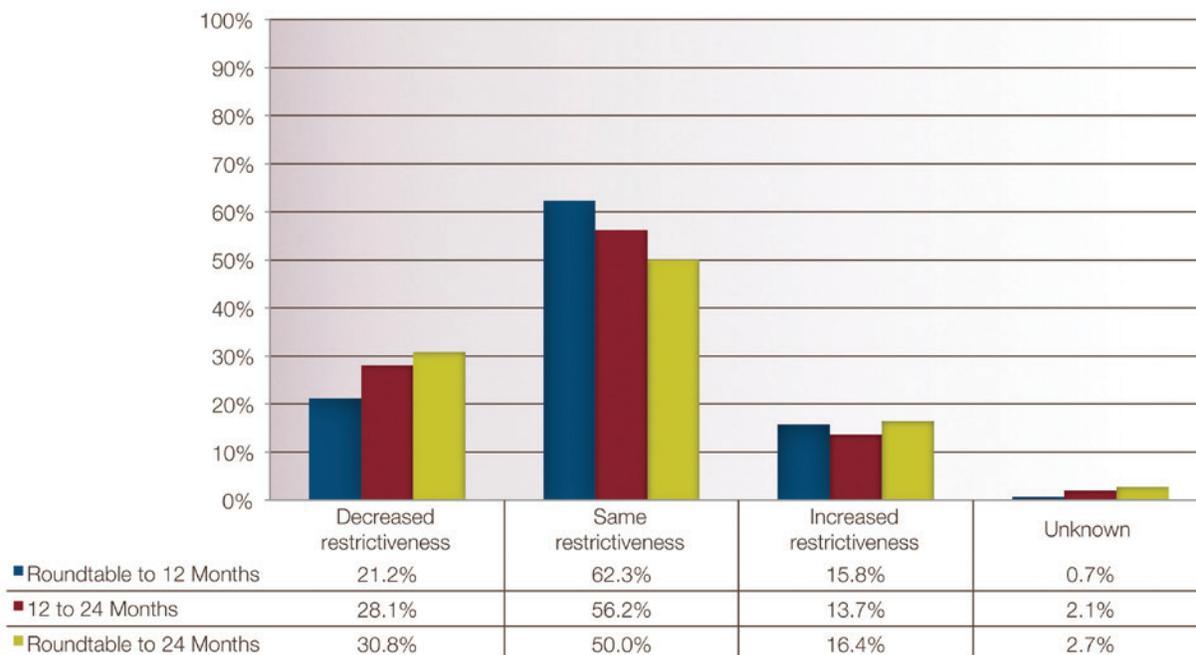
By the 24-month follow-up, for children remaining in foster care, fewer were in foster care homes and residential treatment, and more were in relative or non-relative homes and specialized/therapeutic homes. (See Table 3.)

Table 3. Child Living Environment If Remained in Care at 24 Months Following Roundtable (n=146)

Living Environment (ordered from least to most restrictive)	Percent in Each Living Environment		
	At Roundtable	At 12 Months	At 24 Months
Independent living	0.0%	0.0%	0.0%
Home of natural parents	0.0%	2.1%	2.1%
Home of relative	3.4%	2.7%	7.5%
Home of non-relative	0.0%	1.4%	4.8%
Foster care home	31.5%	29.5%	19.9%
Specialized/therapeutic home	26.7%	26.7%	30.8%
Supervised group setting	15.1%	16.4%	17.8%
Residential treatment	19.2%	19.9%	11.6%
Intensive inpatient treatment	1.4%	0.7%	2.1%
Detention/jail	2.1%	0.7%	1.4%
Unknown	0.7%	0.0%	2.1%
Total remaining in care at 24 months	146		

Figure 9 shows the changes in restrictiveness of living environment at 12 and 24 months following the roundtable.

Figure 9. Change in Restrictiveness of Child Living Environment at 12 and 24 Months Following Roundtable for Children in Care at 24 Months (n=146)



EMANCIPATION

By the 24-month follow-up, 82 of the 98 youth who emancipated (84%) had signed back into voluntary care; of those, 22 (27%) left voluntary care before the end of the two-year study period. Youth who exited averaged 5.8 months in voluntary care. Youth who were still in voluntary care at the end of the two-year study period averaged 12.3 months in voluntary care to that point.

The education status of the emancipated youth as reported by case managers was as follows:

- 11% had completed and 49% were enrolled in or attending high school or a GED program.
- 15% were enrolled in or attending a technical or other college or university.
- 3% had not completed high school and were not enrolled in school.

The education status of the remaining 21% was unknown.

Very few of the emancipated youth were reported to be working full-time (2%) or part-time (17%); 57% were not working, and work status was unknown for 24%. A small proportion (8%) was not in school or working:

- 5% had completed high school or a GED program and were not working.
- 3% had not finished high school, were not in school, and were not working.

For 20% of the youth, caseworkers did not know whether the youth was in school or whether the youth was working.

Most of the youth were still single (77%): one was reported to be married, and marital status was unknown for 22%. At both the 12- and 24-month follow-ups, case managers reported whether emancipated youth had a connection with at least one caring adult that was expected to be lifelong by both the adult and the youth. For each youth, up to three such connections were listed. For those who emancipated by the 12-month follow-up, case managers reported that most of the previously reported 97 connections (77%) were still in place at the 24-month follow-up; the status of some (20%) was unknown. Only three youth were reported to be no longer connected to a previously reported adult connection.

Table 4 lists the relationships of permanent connections to emancipated youth reported at the 12- and 24-month follow-ups.

Table 4. Relationship of Permanent Connection to Emancipated Youth

Relationship	Percent with Permanent Connection		
	Emancipated at 12 Months	Emancipated between 12 and 24 Months	Total Emancipated by 24 Months
Sibling ^a	68.4%	63.4%	66.3%
Current/former foster parent	31.6%	29.3%	30.6%
Aunt/uncle	15.8%	19.5%	17.3%
Birth mother	14.0%	22.0%	17.3%
Grandparent	7.0%	12.2%	9.2%
Mentor	10.5%	2.4%	7.1%
Social/case worker	8.8%	2.4%	6.1%
Birth father	5.3%	7.3%	6.1%
Adoptive parent	5.3%	2.4%	4.1%
Parent of a friend	3.5%	2.4%	3.1%
Adoptive grandparent	0.0%	2.4%	1.0%
None reported	8.8%	2.4%	11.2%
Total youth emancipated	57	41	98

^aBecause the follow-up form requested adult connections, the presumption is that these are adult siblings.

CUSTODY TERMINATION

By the 12-month follow-up, state custody was terminated for four of the 496 children (1%) in the roundtable project. One of these youth was 15 and three were 17 at the time of the roundtable. For three of the children, custody was terminated because of ongoing runaway issues; for the fourth, the child had committed a felony and was incarcerated. By the 24-month follow-up, a fifth participant's custody was terminated when he died due to an accidental shooting (he was 16 at the time of his roundtable).

FOSTER CARE RE-ENTRY

A total of four youth (1%) re-entered care after exiting during the two-year study period; three (two age 14 and one age 16 at time of roundtable) re-entered after having achieved legal permanency and a fourth (age 17 at time of roundtable) re-entered DFCS custody from the Department of Juvenile Justice. By the 24-month follow-up, the oldest youth had emancipated and the other three had again achieved legal permanency (guardianship). This compares to statewide re-entry rates of 4.4% for 2009 and 6.5% for 2010 (state fiscal years).

In each case, the reason for re-entry was attributed to the child's behavior. Caseworkers' reasons included "delinquent behaviors," "theft and runaway," and "not following rules and acting as if he did not want to be a part of the family."

PROJECT EVENT HISTORY ANALYSIS

To examine the time it took to achieve legal permanency as well as the impact of predictors on time to permanency, event history analyses were conducted for both the 12- and 24-month outcome evaluations.

Event history analysis was used to compare differences between age groups in time to permanency and to analyze the relationship of predictors with time to permanency.²² These types of analyses show what factors, such as age and gender, help predict whether a youth will achieve legal permanency. Specifically, these analyses were used to examine:

- The probability of achieving permanency or remaining in care over the 12-month and 24-month follow-up periods for the children included in the roundtable project
- The effect of certain predictors on time to permanency for the children in the roundtable project

Again, because age was significantly related to many of the predictors and to achieving legal permanency, and because there are practice implications for different age groups, separate analyses were run for each of following age groups:

- Age 0-6 (n=93)
- Age 7-12 (n=134)
- Age 13-18 (n=264; five youth who emancipated prior to their roundtables were excluded from the analyses because they would not have the opportunity to achieve legal permanency (reunification, adoption, or guardianship).²³

County Differences

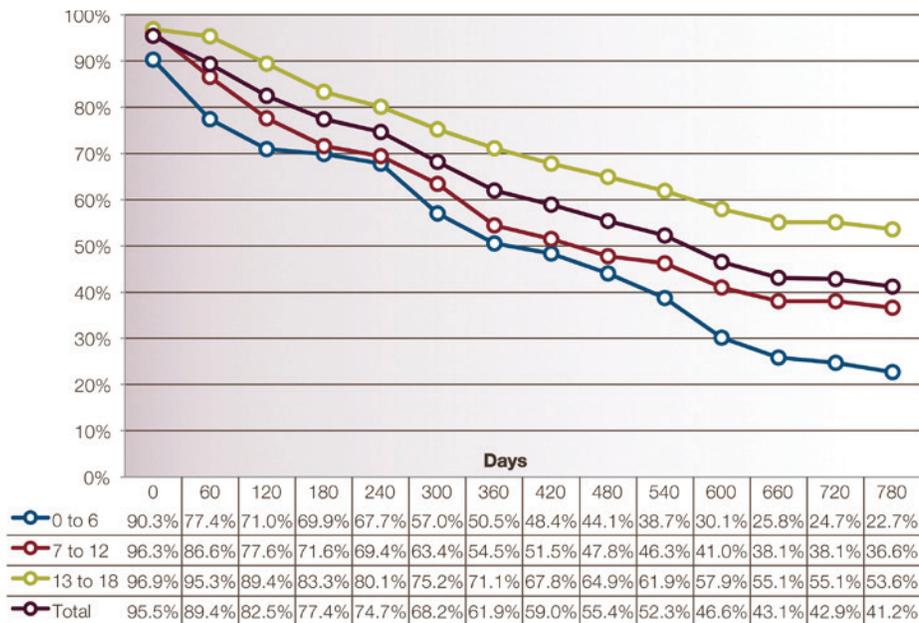
Significant differences in the characteristics of the children in DeKalb and Fulton counties may have contributed to differences in their outcomes (Rogg, Davis, & O'Brien, 2011). Compared to the children from DeKalb County, the children from Fulton County:

- Spent more years in care.
- Were more likely to fall into the Kenny A. Outcome 10 group (in care more than 24 months when the consent decree was signed in October 2005).
- Were less likely to be age 13-18.
- Were more likely to have at least one sibling in care.

TIME TO PERMANENCY

Event history analysis of time to permanency at 12 and 24 months following the permanency roundtables showed that the probability of achieving legal permanency differed significantly by age group. The oldest youth (age 13-18) were most likely to remain in care at the end of two years. Figure 10 shows the cumulative probability of remaining in care (not including voluntary care for emancipated youth) for all ages and for each age group over the two-year period following the roundtables. The two-year cumulative probability of remaining in care for the total group was 41%, meaning that there was a 41% probability that a child would still be in care two years after the roundtable. For the 0-6 age group, the cumulative probability was 23%; for the 7-12 age group, 37%; and for the 13-18 age group, 54%.²⁴

Figure 10. Cumulative Probability of Remaining in Care by Child Age Group and Number of Days Following Permanency Roundtables* (n = 491)



Note: “Days” is indicated in periods of 60 days following the roundtable. For example, “0” represents 0-59 days past the roundtable and 60 represents 60-119 days past the roundtable. The analysis excludes five youth who emancipated prior to their roundtable date.

*p < .05 (log rank test of equality of survival distributions for the different age groups)

In contrast to the 12-month findings, which showed that age-group differences were significant for Fulton but not for DeKalb, age-group differences at 24 months were significant for both Fulton and DeKalb.

Table 5 presents the average days in care and the percent achieving legal permanency during the two years following the roundtable. (Note that the number of days in care generally increases with each older age group.)

Table 5. Average Number of Days in Care and Legal Permanency Two Years Following the Permanency Roundtable by Age Group

	Age at Roundtable	Average Number of Days in Care	Number of Children	Legal Permanencies	Percent Achieving Legal Permanency
All project children	0-6	514	93	71	76.3%
	7-12	605	134	84	62.7%
	13-18	756	264	92	34.8%
	Overall	658	491	247	50.3%
DeKalb only	0-6	440	24	22	91.7%
	7-12	460	22	19	86.4%
	13-18	712	88	33	37.5%
	Overall	598	134	74	55.2%
Fulton only	0-6	543	67	47	70.1%
	7-12	599	103	64	62.1%
	13-18	768	142	48	33.8%
	Overall	654	312	159	51.0%

PREDICTOR ANALYSIS

Analyses predicting legal permanency were run separately for each of the three age groups of children in the roundtable project, in the following order:

- Cross-tabulations were used to determine which of the potential predictors were related to achieving legal permanency without controlling for other predictors.
- Individual Cox regressions were then run for each significant predictor.
- Predictors with low prevalence rates (such as for parent incarceration) or high numbers of missing observations (such as for quality of the child’s relationships with others) were excluded from the multiple-predictor regression analyses.
- Predictors with a $p < .10$ were included in initial multivariate models.
- Predictors included in the initial regression model that did not have a $p < .10$ in the model were eliminated, one at a time, until all remaining predictors in the model had a $p < .10$; however, the criteria for significance in the final model was $p < .05$.

In general, the 24-month analysis results support those of the previously reported 12-month analysis (Rogg, Davis, & O'Brien, 2011), with some differences in predictors noted below for each age group.

Results for Children Age 0-6

Child characteristics related to achieving legal permanency in this age group included:

- Emotional/mental health needs:
 - Children with no or mild impact of emotional/mental health needs on their functioning were 3.9 times as likely as those with moderate to severe impact on functioning to achieve legal permanency.²⁵
- Sibling group size:
 - Children with no siblings were 2.5 times as likely as children with two or more siblings to achieve legal permanency (similar to the 2.3 times as likely found at the 12-month follow-up).
 - Children with one sibling were 2.1 times as likely as children with two or more siblings to achieve legal permanency (not significant in the 12-month analysis).²⁶

Age at admission, which was significant in the 12-month Cox regression analysis, was eliminated ($p > .10$) in the 24-month Cox regression analysis.

Additionally, two specific barriers to legal permanency identified by case managers at the time of the roundtables were related to achieving permanency in this age group.

- Birth parent issues:
 - Children with birth parent issues (such as mental health or substance abuse) identified as a permanency barrier at the time of the roundtable were 55% less likely than those with no such barrier identified to achieve legal permanency.
- Lack of a permanency resource:
 - Children with the lack of a permanency resource identified as a permanency barrier at the time of the roundtable were 77% less likely than those with no such barrier identified to achieve legal permanency.

In the 12-month analysis, no identified barriers were significant for the 0-6 age group.

As was true in the 12-month analysis, the inclusion of two specific strategies in the child's roundtable permanency action plan predicted a lower likelihood of permanency for the 0-6 age group (presumably because these strategies were not addressed or not sufficiently addressed earlier in the case). These were strategies to be implemented after the roundtables.

- Diligent search (to identify family members and other potential permanency resources):
 - Children whose permanency plans included a diligent search strategy were 47% less likely to achieve permanency than those whose plans did not include that strategy (compared to 63% less likely in the 12-month analysis).
- Child engagement (such as involving the child in discussions about permanency, encouraging child participation in family/case meetings, or working with the child on a Lifebook to record life events, experiences, and feelings):
 - Children whose plans included a child engagement strategy were 57% less likely to achieve permanency than those whose plans did not include that strategy (compared to 87% less likely in the 12-month analysis).

These findings suggest that strategies related to diligent search and child engagement may be indicative of issues that may not have been addressed or addressed sufficiently earlier in the case. For example, diligent search is critical for identifying permanency resources. Its inclusion as an action plan strategy implies that the child lacks a critical human resource who could provide permanency. However, the reduction in these percentages between 12 and 24 months may suggest an improvement in the likelihood of permanency for these children once these strategies are implemented over a longer period of time, even though they were still less likely to achieve permanency compared to children for whom these strategies were not included in the plan.

Table 6 presents the Cox regression results for children age 0-6.²⁷

Table 6. Cox Regression Results for the Children Age 0-6

Predictor	Reference Group	B (SE)	Hazard of Achieving Permanency Ratio ^a	95% Confidence Interval for Ratio	
				Lower Limit	Upper Limit
Impact of child's mental health needs was none or mild ^{b*}	Impact of these needs was moderate to severe	1.36 (0.38)	3.91	1.85	8.30
Child had no siblings*	Two or more siblings	0.92 (0.32)	2.50	1.34	4.67
Child had one sibling*		0.76 (0.34)	2.13	1.10	4.14
Birth parent issues cited as permanency barrier*	No such barrier identified	-0.79 (0.28)	0.45	0.26	0.79
Lack of a permanency resource cited as permanency barrier*	No such barrier identified	-1.49 (0.55)	0.23	0.08	0.67
Diligent search strategy included in child's roundtable permanency plan*	No such strategy in plan	-0.64 (0.28)	0.53	0.30	0.91
Child engagement strategy included in child's roundtable permanency plan*	No such strategy in plan	-0.85 (0.33)	0.43	0.22	0.83

^a A hazard ratio of less than one indicates a reduction in the likelihood of legal permanency compared to the reference group; a ratio greater than one indicates an increase in the likelihood of legal permanency compared to the reference group.

^b Impact of mental health needs on child functioning as rated by case managers.

*p < .05

Results for Children Age 7-12

Child characteristics related to achieving permanency in this age group included:

- Behavioral needs:
 - Children with no or mild impact of behavioral needs on their functioning were 3.1 times as likely as those with moderate to severe impact on functioning to achieve legal permanency.

A maltreatment history of abandonment, related to achieving legal permanency at the 12-month mark for this group, was not significant at 24 months.

As in the 12-month analysis, at least one barrier and two roundtable-recommended permanency goals were related to achieving permanency in the 7-12 age group.

- Barriers identified at the time of the roundtable:
 - Children with an identified court/legal barrier (e.g., refusal to grant termination of parental rights [TPR], appeals, continuances) at the time of the roundtable were 1.8 times as likely to achieve legal permanency as those who did not have such a barrier identified (compared to 2.0 times as likely at 12 months). While this is counter-intuitive, it suggests that permanency is more likely when court/legal processes are already underway (e.g., waiting for hearing) and that casework can typically address this type of barrier successfully (e.g., filing for termination of parental rights or guardianship) within that time period.
 - Children with a sibling issue (such as a disability or behavior disorder) identified as a barrier were 78% less likely to achieve legal permanency than those who did not have such a barrier identified. (This was not significant at 12 months.)
- Roundtable-recommended permanency goals:
 - Children with a goal of reunification were 2.7 times as likely to achieve legal permanency as children who had other permanency goals (compared to 10.5 times as likely at 12 months).
 - Children with a goal of guardianship were 2.2 times as likely to achieve legal permanency as children who had other permanency goals (compared to 4.9 times as likely at 12 months).

Table 7 presents the Cox regression results for children age 7-12.²⁸

Table 7. Cox Regression Results for the Children Age 7-12

Predictor	Reference Group	B (SE)	Hazard of Achieving Permanency Ratio ^a	95% Confidence Interval for Ratio	
				Lower Limit	Upper Limit
Impact of child's behavioral needs was none or mild ^{b*}	Impact was moderate to severe	1.12 (0.28)	3.07	1.78	5.32
Court/legal issues cited as permanency barrier [*]	No such barrier identified	0.61 (0.24)	1.84	1.14	2.96
Sibling issues cited as permanency barrier [*]	No such barrier identified	-1.49 (0.74)	0.22	0.05	0.95

Predictor	Reference Group	B (SE)	Hazard of Achieving Permanency Ratio ^a	95% Confidence Interval for Ratio	
				Lower Limit	Upper Limit
Roundtable-recommended goal of reunification*	Not having reunification as a goal	0.98 (0.30)	2.67	1.47	4.83
Roundtable-recommended goal of guardianship*	Not having guardianship as a goal	0.77 (0.30)	2.16	1.20	3.89

^a A hazard ratio of less than one indicates a reduction in the likelihood of legal permanency compared to the reference group; a ratio greater than one indicates an increase in the likelihood of legal permanency compared to the reference group.

^b Impact of behavioral health needs on child functioning as rated by case managers.

*p <.05

Results for Youth Age 13-18

No child characteristics were significantly related to achieving legal permanency in this analysis for youth age 13-18. Although males were nearly twice as likely as females to achieve legal permanency in the 12-month analysis, gender was not a significant predictor at the 24-month mark.

For older youth, having a court/legal barrier identified was the only predictor significantly related to achieving legal permanency.

- Court/legal barrier:
 - o Youth with an identified court/legal barrier (e.g., refusal to grant TPR, appeals, continuances) at the time of the roundtable were 2.2 times as likely to achieve legal permanency as those who did not have such a barrier. While this is counter-intuitive, it suggests that permanency is more likely when court/legal processes are already underway (e.g., waiting for a hearing that has been scheduled) and that casework can typically address this type of barrier successfully (e.g., filing for termination of parental rights or guardianship) within that time period.

Predictors found to be significant in the 12-month analysis, including gender, lack of a permanency resource, and youth engagement in permanency planning, were no longer significant in the 24-month analysis. Nor was the inclusion of specific strategies in the youth's permanency plan (strengthening youth connections or diligent search).

Table 8 presents the Cox regression results for youth age 13-18.²⁹

Table 8. Cox Regression Results for the Youth Age 13-18

Predictor	Reference Group	B (SE)	Hazard of Achieving Permanency Ratio ^a	95% Confidence Interval for Ratio	
				Lower Limit	Upper Limit
Court/legal issues cited as permanency barrier*	No such barrier identified	0.79 (0.39)	2.21	1.04	4.70
Number of placement moves from most recent admission to roundtable	N/A	-0.05 (0.02)	0.96	0.91	1.00
Years from child's first admission to roundtable	N/A	-0.06 (0.03)	0.94	0.89	1.00
Diligent search strategy included in child's roundtable permanency plan	No such strategy in plan	-0.40 (0.23)	0.67	0.42	1.06
Child connections strategy included in child's roundtable permanency plan	No such strategy in plan	-0.52 (0.27)	0.59	0.35	1.01

^aA hazard ratio of less than one indicates a reduction in the likelihood of legal permanency compared to the reference group; a ratio greater than one indicates an increase in the likelihood of legal permanency compared to the reference group.

*p<.05

Table 9 summarizes the results of the 12- and 24-month multiple-predictor analyses by age group. For the 12 month analyses, 15 variables significantly predicted legal permanency. Of those 15, six were also significant for the 24 month analyses. Additionally, there were six significant predictors of legal permanency for the 24-month analyses that were not significant for the 12-month analyses. Because there was no discernible pattern across the two sets of analyses, it is difficult to make generalizations about the findings. Different variables predicted legal permanency 12 months and 24 months after the roundtables.

Table 9. Predictors of Legal Permanency at 12 and 24 Months Following Roundtables by Age Group

Children More Likely to Achieve Permanency		Age Group		
		0-6	7-12	13-18
Child/family characteristics (identified prior to roundtable)	Males			12
	Younger at first admission	12		
	Maltreatment history of abandonment		12	
	Average impact of emotional/mental/behavioral needs (combined) on child functioning was none or mild	12	12	
	Impact of emotional/mental health needs only was none or mild	24		
	Impact of behavioral needs only was none or mild		24	
	No siblings (or only one sibling at 24 months)	12 24		

Children More Likely to Achieve Permanency		Age Group		
		0-6	7-12	13-18
Caseworker-perceived permanency barriers (identified prior to roundtable)	Court/legal barrier identified		12 24	24
	No lack of a permanency resource	24		12
	No birth parent issues (such as substance abuse or incarceration)	24		
	No sibling issues (such as disabilities or behavior disorders)		24	
Roundtable-recommended permanency goals	Reunification		12 24	
	Guardianship		12 24	
Permanency planning	Strengthening connections with family not included in plan			12
	Diligent search not included in plan	12 24		12
	Child engagement/permanency preparation not included in plan	12 24		
	Youth who were rated as extremely or very engaged in permanency planning			12

Louis

Louis entered foster care at the age five in April 1999. His mother was deceased and his aunt was no longer willing to care for him. Louis was diagnosed with cerebral palsy and was non-verbal. He was a part of the Kenny A. Outcome 10 cohort. At the time of his roundtable in January 2009, one of the barriers to permanency was his attorney's lack of support for the foster parent obtaining guardianship. The child's attorney believed that the foster parent would lose services if she assumed legal responsibility for Louis.

One of the roundtable recommendations was to engage the child's attorney and explain the benefits and services for which Louis would continue to be eligible. As a result of this effort, the foster parent made the decision to adopt Louis, who was adopted at the age of sixteen in May 2010.

Discussion

ACHIEVING LEGAL PERMANENCY BY 24 MONTHS AFTER ROUNDTABLES

This study examined the impact of permanency roundtables and the impact of specific predictors on achieving legal permanency (adoption, reunification, or guardianship) prior to age 18 among 496 children in foster care. Roundtables were held primarily for children in two large metro Atlanta counties who had been in care for a median of 52 months at the time of the roundtables.

- Half of these children achieved legal permanency between the roundtable and the 24-month follow-up: 10% achieved reunification, 22% were adopted, and 19% achieved legal guardianship with a relative or non-relative.
- Only four youth (less than 1%) re-entered care after achieving permanency; three of these youth subsequently achieved legal guardianship.
- One in five youth (20%) emancipated and were no longer eligible for legal permanency as defined in this study.

Time-to-permanency comparisons for the children included in the roundtable project showed significant differences in average time to permanency both at 12 and 24 months following the roundtable by child age group, with the likelihood of achieving legal permanency decreasing and the average time to permanency increasing as child age increased, supporting previous research.

DECREASING RESTRICTIVENESS OF LIVING SITUATION BY 24 MONTHS AFTER ROUNDTABLES

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.

INCREASING PERMANENCY STATUS RATING BY 24 MONTHS AFTER ROUNDTABLES

Of the 496 children, 29% had an improved permanency status rating at the 24-month follow-up compared to their rating at the 12-month follow-up and 58% had an improved status compared to their rating at the time of the roundtable.

PREDICTORS OF PERMANENCY

The predictors of legal permanency included demographics and other child characteristics, family information, child welfare experience, perceived permanency barriers, and permanency planning. The process evaluation for this project identified a number of key perceived barriers to permanency, including child characteristics or child-related concerns, birth parent issues, a lack of permanency resources, and court/legal barriers (Rogg, Davis, & O'Brien, 2009). Action plans created during the roundtables included strategies designed to overcome many of these barriers.

Consistent with the 12-month outcome results, the impact of specific predictors or permanency strategies on achieving permanency differed based on child age.

Child characteristics:

- For those age 0-6, legal permanency was less likely if the child had (a) two or more siblings or (b) moderate to severe emotional/mental health needs.
- For those age 7-12, legal permanency was less likely if the child had moderate to severe behavioral needs.

Perceived permanency barriers:

- For those age 0-6, legal permanency was less likely if (a) any birth parent issues were identified as barriers or (b) there was no permanency resource identified.
- For those age 7-12, legal permanency was less likely if any sibling issues were identified as barriers.
- For both age groups 7-12 and 13-18, legal permanency was more likely if any court/legal issues were identified as barriers.

Permanency goals and strategies:

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

As noted in the 12-month report, the results suggest that the nature of a child's situation (child/family characteristics or child welfare experience, and, perhaps, how well the child welfare agency had worked with the child on conditions that might pose challenges to permanency) affects achieving permanency. Barriers that were a function of the child welfare system (e.g., court/legal barriers) may be overcome sooner than those related to the child's individual characteristics or situation (e.g., number of siblings, mental/emotional/behavioral needs). Again, where permanency was less likely with the inclusion of a specific strategy in a child's permanency action plan, the strategy may be indicative of more difficult hurdles that must be overcome in a child's case rather than the efficacy of the specific strategy. The diligent search strategy, for example, indicates the need to overcome the lack of caring connections and the lack of a permanency resource.

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 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-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/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 age 0-3 vs. 4-6 and age 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.

Additional detailed recommendations are included in the 12-month outcome report (Rogg, Davis, & O'Brien, 2011).

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Appendix

DFCS-CASEY PERMANENCY ROUNDTABLE PROJECT 24-MONTH FOLLOW-UP FORM

All pages of the form on the following pages should be completed by the Master Practitioner in consultation with the Case Manager and Supervisor.

Please indicate the status of the items on this form as of the Status Date in the first box, below. Complete this form for the child listed (take care that you have the correct child in a sibling group), regardless of the child's current permanency status. Please complete all items unless otherwise instructed. Return completed forms to Care Solutions, Inc. via fax [770-640-6073] or mail [1117 Perimeter Center West Suite W-300, Atlanta, GA 30338].

Current Status Date (two years from roundtable date):	Child's Last Name:	Child's First Name:	Child's Legal County:
Date of Roundtable:	SHINES Case ID:	Child's SHINES Person ID:	Child's DOB:
Case Staff at Roundtable	Case Staff at 12-Month Follow-Up	Current Staff Person (if different; n/a if child no longer in care)	Mark box if current is different person
Case Manager:			<input type="checkbox"/>
Supervisor:			<input type="checkbox"/>
Master Practitioner:			<input type="checkbox"/>
Number of different Case Managers since date of roundtable (above); put 0 if still has same case manager had at roundtable): _____		Date of last case manager contact (visit, telephone, email) with child as documented in SHINES: ____/____/____ (mm/dd/yyyy)	

How many placement moves has this child had since the initial DFCS-Casey permanency roundtable (pre-populate date of roundtable); if in same placement, put "0": _____

Restrictiveness of Living Environment Scale (ROLES)^a

Please select the residential setting below that is the closest match for the current residential setting of the child; if you do not find an exact match, please select the option that is the closest.

Independent living by self	<input type="checkbox"/>	Specialized foster care	<input type="checkbox"/>	Drug-alcohol rehabilitation center (inpatient)	<input type="checkbox"/>
Independent living with friend	<input type="checkbox"/>	Individual-home emergency shelter	<input type="checkbox"/>	Intensive treatment unit	<input type="checkbox"/>
Home of natural parents, for a child	<input type="checkbox"/>	Foster-family-based treatment home	<input type="checkbox"/>	Youth correction center	<input type="checkbox"/>
School dormitory	<input type="checkbox"/>	Group home	<input type="checkbox"/>	County detention center	<input type="checkbox"/>
Home of a relative	<input type="checkbox"/>	Residential Job Corps center	<input type="checkbox"/>	State mental hospital	<input type="checkbox"/>
Home of fictive kin (not foster parent)	<input type="checkbox"/>	Group emergency shelter	<input type="checkbox"/>	Jail	<input type="checkbox"/>
Adoptive home	<input type="checkbox"/>	Residential treatment center	<input type="checkbox"/>	Runaway	<input type="checkbox"/>
Supervised independent living	<input type="checkbox"/>	Wilderness camp (24-hour, year-round)	<input type="checkbox"/>	Homeless	<input type="checkbox"/>
Relative foster care	<input type="checkbox"/>	Medical hospital (inpatient)	<input type="checkbox"/>	Don't know	<input type="checkbox"/>
Regular foster care	<input type="checkbox"/>				

If you could not find an exact match for the child's living environment, please select the closest option above and then describe it here:

^a Adapted from Hawkins, R.P., Almeida, M.C., Fabry, B., and Reitz, A.L., "A Scale to Measure Restrictiveness of Living Environments for Troubled Children and Youths." *Hospital and Community Psychiatry*, 43, 54-58 (1992).

Current Permanency Status^b	<i>Please rate the child's current permanency status (as of the status date in the first box on this form) based on the (updated) descriptions to the left of the rating. This rating must be determined by the Master Practitioner in consultation with the Case Manager and Supervisor.</i>	Current Permanency Status
Child has legal permanency (adoption, legal guardianship, or reunification with no further DFCS involvement; does not include emancipation).		Permanency achieved <input type="checkbox"/>
Child is in a family setting that the child, caregivers and casework team believe is lifelong (adoption/ guardianship/reunification issues resolved); - OR -	Child is in a stable living situation with own parents (not a trial visit) and identified safety risks have been eliminated (child welfare agency still has custody).	Very good permanency status <input type="checkbox"/>
Child is in a family setting that the child, caregivers and casework team believe is lifelong; a plan is in place to ensure safety and stability have been achieved; the child, if old enough, and the caregiver(s) are committed to the plan; and adoption/guardianship/reunification issues, if any, are near resolution.		Good permanency status <input type="checkbox"/>
Child is in a family setting that the child, caregivers and casework team believe could endure lifelong; a plan is in place to ensure safety and stability are being achieved, and the child, if old enough, and the caregiver(s) are committed to the plan; and adoption/guardianship/reunification issues, if any, are being addressed; (may include long-term foster care); - OR -	Child is in temporary placement,* but transition is planned and child is ready to move to identified safe, appropriate, permanent home that the child, caregivers and casework team believe could endure lifelong; a child and family plan for safety and permanency is being implemented; and the child, if old enough, and caregiver(s) are committed to the plan.	Fair permanency status <input type="checkbox"/>
Child is in a family setting that the child, caregivers and casework team believe could endure lifelong, and they are developing a plan to achieve safety and stability; - OR -	Child is in a temporary placement,* and likelihood of reunification or permanent home is uncertain; adoption/guardianship issues are being assessed; and concurrent permanency plan(s), if any, are uncertain or problematic.	Marginal permanency status <input type="checkbox"/>
Child is living in a home that is not likely to endure or is moving from home to home or is on runaway status due to safety and stability problems, failure to resolve adoption/guardianship issues, or because the home is unacceptable to the child; - OR -	Child remains in temporary placement* without a realistic or achievable permanency plan; concurrent permanency plan(s), if any, have stalled or failed.	Poor permanency status <input type="checkbox"/>
Youth has emancipated (whether or not signed back into care voluntarily).	Date of emancipation: ___/___/___ (mm/dd/yyyy)	Emancipated <input type="checkbox"/>
Youth was under 18 and DFCS was relieved of legal custody	If DFCS custody was terminated, please indicate reason: Runaway <input type="checkbox"/> Incarcerated <input type="checkbox"/> DJJ custody <input type="checkbox"/> Other <input type="checkbox"/> <i>If other, please specify reason: _____</i>	DFCS custody terminated <input type="checkbox"/>

* Temporary placement setting may be a home, child caring institution, or residential treatment facility.

^b Scale adapted from Human Systems and Outcomes, Inc., scale used in Indiana Quality Service Review Protocol (2007).

Legal Permanency Achieved Since 12-Month Follow-Up (complete these items only if child has achieved permanency since the 12-month follow-up date of [pre-populate date])

What type of permanency was achieved?

Adoption/relative Adoption/non-relative Guardianship/relative Guardianship/non-relative Live with fit and willing relative Reunification

Date permanency achieved: ____/____/____
(mm/dd/year)

How much did the permanency roundtable process (roundtable and monthly follow-up) contribute to this child's achievement of permanency?

A great deal Very much Some Not very much None

What is the primary reason(s) this child achieved permanency? (one brief reason per line, please)

1. _____
2. _____
3. _____

If youth emancipated before the 12-month follow-up (between [roundtable date] and [12-month status date]), please indicate the status of the youth's connections below. [pre-populate dates]					
The following information was listed for the child's permanent connections with a caring adult on the 12-month follow-up:		Youth is still connected to this individual	Youth is no longer connected to this individual	How did you determine status of this connection?	Could not reach youth to ascertain status of this connection
Name:	Relationship:	<input type="checkbox"/>	<input type="checkbox"/>	Telephone call to youth <input type="checkbox"/> Email to youth <input type="checkbox"/> Visit with youth <input type="checkbox"/> Other (please specify): _____	<input type="checkbox"/>
Name:	Relationship:	<input type="checkbox"/>	<input type="checkbox"/>	Telephone call to youth <input type="checkbox"/> Email to youth <input type="checkbox"/> Visit with youth <input type="checkbox"/> Other (please specify): _____	<input type="checkbox"/>
Name:	Relationship:	<input type="checkbox"/>	<input type="checkbox"/>	Telephone call to youth <input type="checkbox"/> Email to youth <input type="checkbox"/> Visit with youth <input type="checkbox"/> Other (please specify): _____	<input type="checkbox"/>

If youth has emancipated since the 12-month follow-up, (between [12-month status date] and [24-month status date]), please answer each of the following questions: [pre-populate dates]		Yes	No	
Does youth have a permanent connection with at least one caring adult that both the youth and adult agree will be lifelong?		<input type="checkbox"/>	<input type="checkbox"/>	
<p>If youth has emancipated since the 12-month follow-up with at least one permanent connection, please list the name(s) and relationship(s) of up to three permanent connections:</p>	Name	Relationship to Emancipated Youth		
		<input type="checkbox"/> Sibling <input type="checkbox"/> Grandparent <input type="checkbox"/> Aunt/uncle <input type="checkbox"/> Friend <input type="checkbox"/> Parent of friend <input type="checkbox"/> Teacher/guidance counselor Other (please specify):	<input type="checkbox"/> Coach <input type="checkbox"/> Clergy member/ staff member <input type="checkbox"/> Employer <input type="checkbox"/> Co-worker <input type="checkbox"/> Neighbor <input type="checkbox"/> Youth program staff member (e.g., Boys or Girls Club)	<input type="checkbox"/> Big Brother/Big Sister or other mentor <input type="checkbox"/> Social worker/case worker <input type="checkbox"/> Foster parent <input type="checkbox"/> Birth mother <input type="checkbox"/> Birth father <input type="checkbox"/> Adoptive parent <input type="checkbox"/> Adoptive grandparent
		<input type="checkbox"/> Sibling <input type="checkbox"/> Grandparent <input type="checkbox"/> Aunt/uncle <input type="checkbox"/> Friend <input type="checkbox"/> Parent of friend <input type="checkbox"/> Teacher/guidance counselor Other (please specify):	<input type="checkbox"/> Coach <input type="checkbox"/> Clergy member/ staff member <input type="checkbox"/> Employer <input type="checkbox"/> Co-worker <input type="checkbox"/> Neighbor <input type="checkbox"/> Youth program staff member (e.g., Boys or Girls Club)	<input type="checkbox"/> Big Brother/Big Sister or other mentor <input type="checkbox"/> Social worker/case worker <input type="checkbox"/> Foster parent <input type="checkbox"/> Birth mother <input type="checkbox"/> Birth father <input type="checkbox"/> Adoptive parent <input type="checkbox"/> Adoptive grandparent
		<input type="checkbox"/> Sibling <input type="checkbox"/> Grandparent <input type="checkbox"/> Aunt/uncle <input type="checkbox"/> Friend <input type="checkbox"/> Parent of friend <input type="checkbox"/> Teacher/guidance counselor Other (please specify):	<input type="checkbox"/> Coach <input type="checkbox"/> Clergy member/ staff member <input type="checkbox"/> Employer <input type="checkbox"/> Co-worker <input type="checkbox"/> Neighbor <input type="checkbox"/> Youth program staff member (e.g., Boys or Girls Club)	<input type="checkbox"/> Big Brother/Big Sister or other mentor <input type="checkbox"/> Social worker/case worker <input type="checkbox"/> Foster parent <input type="checkbox"/> Birth mother <input type="checkbox"/> Birth father <input type="checkbox"/> Adoptive parent <input type="checkbox"/> Adoptive grandparent

For all youth who emancipated before or since their initial roundtable [pre-populate date]:		Yes	No
Since emancipating, has youth ever voluntarily signed back into DFCS care? If yes, date signed back into care: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If youth ever voluntarily signed back into DFCS care, has the youth since left DFCS care? If yes, date left voluntary DFCS care: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What is the youth's current education status?	<input type="checkbox"/> Currently enrolled in/attending high school or a GED program <input type="checkbox"/> Completed high school or GED <input type="checkbox"/> Currently enrolled in/attending a technical or other college or university <input type="checkbox"/> None of the above <input type="checkbox"/> Don't know		
What is the youth's current employment status?	<input type="checkbox"/> Working full time <input type="checkbox"/> Working part time <input type="checkbox"/> Not working <input type="checkbox"/> Don't know		
What is the youth's current marital status?	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Domestic partnership <input type="checkbox"/> Other <input type="checkbox"/> Don't know If other, please specify: _____		

If the child has <u>not emancipated</u>, please answer the following question:		Yes	No
If legal custody was changed or legal permanency was achieved (adoption, guardianship, live with fit/willing relative, reunification) at any time after the initial DFCS-Casey roundtable, has the child since re-entered foster care?		<input type="checkbox"/>	<input type="checkbox"/>
If child re-entered foster care, what was the reason?			
Permanency Not Yet Achieved (complete this item only if child has <u>not yet achieved permanency</u> – even if custody terminated or child emancipated)			
What is the primary reason(s) this child has not yet achieved permanency? (one brief reason per line, please)			
1.	_____		
2.	_____		
3.	_____		
Permanency Goal (complete this item only if child has <u>not achieved permanency</u>)			
Please indicate the child's <u>CURRENT legal permanency goal as of the 2011 status date on page 1:</u>			
Adoption/relative <input type="checkbox"/>	Adoption/non-relative <input type="checkbox"/>	Adoption/unspecified <input type="checkbox"/>	Guardianship/relative <input type="checkbox"/>
Guardianship/non-relative <input type="checkbox"/>	Guardianship/unspecified <input type="checkbox"/>	Live with fit and willing relative <input type="checkbox"/>	APPLA-Long-term foster care <input type="checkbox"/>
APPLA-Emanicipation <input type="checkbox"/>	APPLA-Live with fit and willing relative <input type="checkbox"/>	APPLA-Long-term foster care <input type="checkbox"/>	Reunification <input type="checkbox"/>
Date of legal permanency goal ____/____/____ (mm/dd/yyyy)			
Concurrent Goal (complete this item only if child has <u>not achieved permanency</u>)			
Please indicate the child's <u>CURRENT legal concurrent goal as of the 2011 status date on page 1:</u>			
Adoption/relative <input type="checkbox"/>	Adoption/non-relative <input type="checkbox"/>	Adoption/unspecified <input type="checkbox"/>	Guardianship/relative <input type="checkbox"/>
Guardianship/non-relative <input type="checkbox"/>	Guardianship/unspecified <input type="checkbox"/>	Live with fit and willing relative <input type="checkbox"/>	APPLA-Long-term foster care <input type="checkbox"/>
APPLA-Emanicipation <input type="checkbox"/>	APPLA-Live with fit and willing relative <input type="checkbox"/>	APPLA-Long-term foster care <input type="checkbox"/>	Reunification <input type="checkbox"/>
Date of legal concurrent goal ____/____/____ (mm/dd/yyyy)			

If child's goal is long-term foster care, please answer the following items:						
In the case manager's opinion, how stable is the child's current placement?						
Extremely stable <input type="checkbox"/>	Very stable <input type="checkbox"/>	Somewhat stable <input type="checkbox"/>	Not very stable <input type="checkbox"/>	Not at all stable <input type="checkbox"/>		
Please answer the following questions <i>whether or not child has achieved permanency or emancipated:</i>		Extremely engaged	Very engaged	Somewhat engaged	Not very engaged	Not at all engaged
How engaged is/was this child with his/her case manager after the initial roundtable?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A (e.g., too young, runaway, disabilities)
How engaged is/was this youth in his/her permanency planning after the initial roundtable?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date completed: _____ Signature: _____ Email address: _____

Endnotes

1. The Department of Human Services (DHS) changed its name from the Department of Human Resources (DHR) effective July 1, 2009.
2. As the numbers of roundtables and achieved permanencies increased, achieving permanency rather than improvements in permanency status became the primary indicator of success. It became more difficult to track child permanency status ratings since the roundtables had not yet been incorporated into the state's child welfare data system. Local master practitioners were responsible for ongoing follow-up on action plans at the local level.
3. In 2006, county defendants and lawsuit plaintiffs entered into a consent decree approved by the United States District Court in the Northern District of Georgia. The Kenny A. consent decree required DFCS defendants to make system changes and to comply with 31 specific outcome measures regarding children in foster care.
4. For copies of reports and appendices, see <http://www.casey.org/georgia-permanency-roundtables/> or <http://www.caresolutions.com/content/page.cfm/237/>
5. See <http://www.casey.org/georgia-permanency-roundtables/> or <http://www.caresolutions.com/content/page.cfm/237/>
6. These counts differ slightly from those in the earlier report (Rogg, Davis, and O'Brien, 2010) because six child dates of birth were corrected at the time of the 24-month follow-up (with four of the children thus changing age groups); 12-month age group results were not affected except for minor differences of less than 1% for a few variables. Data presented in this report are based on the updated data.
7. Detailed scale information is included in the appendices of 12-month report (Rogg, Davis, and O'Brien, 2010).
8. The initial data collection process and results, including detailed case information prepared prior to the roundtables and information collected at the roundtables, are described in the process evaluation report (Rogg, Davis, & O'Brien, 2009).
9. The permanency roundtable consultation form, which included the child's permanency status rating and permanency action plan, was missing for one child included in the project. This child was included in the analysis where possible because there was a case summary form and a follow-up form for the child.
10. This type of analysis was used because it allows for the inclusion of not only children who achieved permanency or remained in care but also those who emancipated or left state custody for another reason. The latter are included in the analysis up to the point they emancipated or left state custody. For information, see Singer & Willett (2003).
11. When the case summary form was initially developed, this was one of several fields that were to have been pre-populated with information from the state's new child welfare data system; this did not occur

because of the way in which the data were provided and the project timetable. For a few cases without maltreatment information, an AFCARS data file provided by DFCS was checked to ascertain type of maltreatment; for one case, maltreatment type could not be determined. Only 10% of the children had three or more maltreatment types.

12. This study did not address birth family demographic characteristics such as parental economic, educational, or marital status.
13. The Kenny A. consent decree specified permanency outcomes for children who had been in care up to 24 months (Outcome 9) and more than 24 months (Outcome 10) at the time the decree was signed in October 2005. Children entering care subsequent to the decree were in another permanency outcome group (Outcome 8). The consent decree does not apply to children outside of Fulton and DeKalb counties.
14. Up to three primary barriers were coded for each child in the order in which they were listed. (Only three children, less than 1%, had three or more barriers listed.)
15. A concurrent plan, such as for adoption or legal guardianship, is developed when the permanency goal is reunification so that there is minimal delay to legal permanency if the reunification fails. See Katz, 1999.
16. Both of the APPLA (another planned permanent living arrangement) goals of emancipation and long-term foster care, while less desirable than reunification, adoption, or guardianship, are legal case plan goals, both in Georgia and nationally.
17. In some cases, case managers indicated that engagement was not applicable due to the child's young age or disability.
18. For background and discussion of the permanency status rating scale, see the process evaluation report (Rogg, Davis, & O'Brien, 2009). For staff feedback on the scale, see the participant evaluation report (Rogg, Davis, & O'Brien, 2010).
19. One additional youth re-entered care after achieving permanency, had a permanency status rating of poor at the 12-month follow-up, and achieved legal permanency by the 24-month follow-up. Two other youth achieving permanency prior to the 12-month follow-up re-entered care between the 12- and 24-month follow-ups; they subsequently achieved legal permanency (guardianship).
20. Five of the initial case summaries did not indicate the child's living environment; in those cases, the child's last placement was obtained from a calendar year 2008 file of AFCARS data provided by the state.
21. Because a few categories were expanded to accommodate open-end responses in the initial and follow-up responses, and because the differences between some of the categories were small and may have overlapped, the 28 categories were collapsed into 10 categories.
22. Procedures were run in PASW Advanced Statistics 18. For more information on the procedures, see Singer & Willett, 2003.
23. In addition, the statistical procedures accounted for censored cases; censoring occurred when a participant could no longer achieve the outcome of interest during the time of the study – in this case,

because he or she emancipated or left DFCS custody – or was lost to follow-up (not the case in this study). These censored cases were included in the analysis up to the period in which the participant was no longer eligible.

24. Note that this probability is not the same as the actual percentage remaining in care because of the censoring of cases in which custody was terminated or the youth emancipated. For the 491 children included in this analysis, the actual percentage remaining in care was 25% for children 0-6, 38% for children 7-12, and 28% for youth 13-18.
25. Children with no or mild impact of emotional/mental health and behavior needs combined were 8.8 times as likely to achieve legal permanency as those with moderate to severe needs in this category at the 12-month follow-up. In using the combined measure for the 24-month analysis, the results suggested children with moderate to severe needs were more likely to achieve legal permanency. Given this was contrary to expectation based on previous results, frequencies were examined, and the decision was made to use the individual measures for emotional/mental health needs and behavior health needs for the current analyses despite the correlations between the two measures ($r=0.71$ for age 0-6; $r=0.78$ for age 7-12; and $r=0.59$ for age 13-18; all $p<.05$). When this was done, behavior needs were no longer significant for the 0-6 group and emotional/mental health needs remained significant. For the 7-12 group, behavior needs remained significant and emotional/mental health needs did not. For the 13-18 group, emotional/mental health was not significant, and behavior needs did not meet criteria for inclusion in the analysis ($p>.10$ as an individual covariate).
26. Analyses conducted for the 12-month evaluation showed that siblings did not necessarily achieve permanency together.
27. The overall model for children age 0-6 was statistically significant ($-2 \log \text{likelihood} = 482$; $\chi^2 (7) = 39.2$; $p<.05$). A positive coefficient (B) indicates a positive relationship to achieving permanency.
28. The overall model for children age 7-12 was statistically significant ($-2 \log \text{likelihood} = 660$; $\chi^2 (5) = 49.3$; $p<.05$).
29. The overall model for children ages 13-18 was statistically significant ($-2 \log \text{likelihood} = 759$; $\chi^2 (5) = 23.3$; $p<.05$).



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