Permanency Roundtables
Overview
Permanency Roundtables (PRTs)
Katie Sepnieski, Department of Children and Families
Introductions:

Your Name

Current experience with child welfare system

One word that describes you
The History of PRTs

• In April, 2010 the federal government conducted Wisconsin’s Child and Family Services Review (CFSR)
  • Length of time in care
  • Re-entry rate

• As part of the PIP, the Department of Children and Families (DCF) developed a plan with the assistance of Casey Family Programs to implement PRTs statewide by June 30, 2013.

• The PRT process is a professional consultation designed to expedite permanency for children and youth in out of home care through innovative thinking, the application of best practice, and the “busting” of systemic barriers.
  • The process also includes required follow-up to ensure steps are being taken to expedite the action plan.
Permanency Roundtable Rollout

Grey: Current PRT County
Orange: Phase I
Yellow: Quarter 2, 2012
Pink: Quarter 3
Green: Quarter 4
Blue: Quarter 1, 2013
Purple: Quarter 2, 2013
Permanency Roundtable Rollout

As of December 31, 2012 – 45 Counties

Blue: Quarter 1, 2013 - 13
Purple: Quarter 2, 2013 - 14
Wisconsin Statistics

As of September 30th, 2012:
6406 children in Out of Home Care

Placement Type:
2% in Pre-Adoptive Homes
33% in Relative Foster Homes
50% in Foster Care
7% in Group Homes
7% in Institutions
1% Runaways

Median Age of Children: 
8.75

Median Length of Stay: 
12.4 Months

Rate of Decrease 2005-10: 
17.1%
## Fall of 2011 Counties

<table>
<thead>
<tr>
<th>County</th>
<th>kids in OHC</th>
<th># of kids PRT'ed</th>
<th># of PRTs</th>
<th>% of kids PRT'ed in OHC</th>
<th>Permanency Achieved</th>
<th>Age of Majority</th>
<th>% of Permanence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brown</td>
<td>177</td>
<td>42</td>
<td>21</td>
<td>24%</td>
<td>16</td>
<td>1</td>
<td>38%</td>
</tr>
<tr>
<td>Dane</td>
<td>369</td>
<td>55</td>
<td>21</td>
<td>15%</td>
<td>11</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Adams</td>
<td>22</td>
<td>9</td>
<td>12</td>
<td>41%</td>
<td>3</td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>Columbia</td>
<td>40</td>
<td>13</td>
<td>18</td>
<td>33%</td>
<td>1</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Crawford</td>
<td>22</td>
<td>5</td>
<td>6</td>
<td>23%</td>
<td>2</td>
<td>1</td>
<td>40%</td>
</tr>
<tr>
<td>Grant</td>
<td>11</td>
<td>7</td>
<td>9</td>
<td>67%</td>
<td>3</td>
<td>1</td>
<td>43%</td>
</tr>
<tr>
<td>Green Lake</td>
<td>5</td>
<td>8</td>
<td>6</td>
<td>13%</td>
<td>1</td>
<td>1</td>
<td>13%</td>
</tr>
<tr>
<td>Green</td>
<td>33</td>
<td>16</td>
<td>24</td>
<td>49%</td>
<td>5</td>
<td>31%</td>
<td></td>
</tr>
<tr>
<td>Iowa</td>
<td>8</td>
<td>1</td>
<td>6</td>
<td>13%</td>
<td>1</td>
<td>1</td>
<td>17%</td>
</tr>
<tr>
<td>Jefferson</td>
<td>96</td>
<td>12</td>
<td>9</td>
<td>13%</td>
<td>1</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>La Crosse</td>
<td>158</td>
<td>74</td>
<td>87</td>
<td>47%</td>
<td>7</td>
<td>1</td>
<td>9%</td>
</tr>
<tr>
<td>Lafayette</td>
<td>12</td>
<td>2</td>
<td>6</td>
<td>17%</td>
<td>1</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Marquette</td>
<td>11</td>
<td>2</td>
<td>6</td>
<td>18%</td>
<td>2</td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>Rock</td>
<td>156</td>
<td>32</td>
<td>30</td>
<td>21%</td>
<td>7</td>
<td>22%</td>
<td></td>
</tr>
<tr>
<td>Waupaca</td>
<td>47</td>
<td>16</td>
<td>15</td>
<td>34%</td>
<td>4</td>
<td>2</td>
<td>25%</td>
</tr>
<tr>
<td>Waushara</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>83%</td>
<td>2</td>
<td>40%</td>
<td></td>
</tr>
</tbody>
</table>
## Summer of 2012 Counties

<table>
<thead>
<tr>
<th>County</th>
<th>kids in OHC</th>
<th># of kids PRT'ed</th>
<th># of PRTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calumet</td>
<td>12</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Dodge</td>
<td>51</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Door</td>
<td>10</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Fond du Lac</td>
<td>166</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>Jackson</td>
<td>61</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Juneau</td>
<td>6</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Ozaukee</td>
<td>35</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Richland</td>
<td>8</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Sauk</td>
<td>32</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Trempealeau</td>
<td>13</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>
End of August Totals

<table>
<thead>
<tr>
<th>kids in OHC</th>
<th># of kids PRT'ed</th>
<th># of PRTs</th>
<th>Permanency Achieved</th>
<th>Age of Majority</th>
<th>% of Permanence</th>
</tr>
</thead>
<tbody>
<tr>
<td>1567</td>
<td>342</td>
<td>321</td>
<td>65</td>
<td>7</td>
<td>24%</td>
</tr>
</tbody>
</table>

57 Children were reunified with a parent
8 Children were discharged to a guardianship

Other cases that have not achieved Permanence but have a status of Good or Better:
TPR is in Process
Trial Reunification is Occurring
Wisconsin Permanency Roundtable Initiative

Goals:
The overarching goal of the statewide implementation is to expedite safe, legal, permanency for children in Wisconsin’s child welfare system, particularly those children who have spent longer times in care, including juvenile justice cases.

The outcomes being measured are:
- The child’s progress to legal permanency (reunification, guardianship, or adoption)
- Changes in the level of placement restrictiveness
- The rate of re-entry into a Out-of-Home Care setting
- The rate of discharge to legal permanency

Other outcomes experienced from the PRT process:
- Increased staff knowledge
- Identifying and ‘busting’ systemic barriers
- Strengthening systems integration
- Decrease in the number of children in out-of-home care
Now that you know the history...

WHAT IS A PERMANENCY ROUNDTABLE?
The Team Members

• Administrator/Policy Expert
• County Caseworker and Tribal Caseworker
• External Consultant
• Facilitator (Handout)
• Permanency Consultant
• Scribe
• County Supervisor and Tribal Supervisor

Other Professionals involved with the case
• Placement Agency Social Worker
• Adoption Worker
• Other County Staff
  • Foster Care Coordinator
  • Coordinated Service Team Staff
  • CLTS Service Coordinator
  • Former Caseworker
PHASE I: WELCOME & OVERVIEW
(5 minutes)

• Welcome team to PRTs

• Introduce yourself and your role for PRTs

• Team members introduce themselves

• Overview of the purpose
  • Reunification
  • Transfer of Guardianship
  • Adoption

• Overview of the Six Phases

• Develop Group Agreements
PHASE II: Presentation of the Case (20 minutes)

• The worker presents the case **UNINTERUPTED**
  • Oral Case Presentation Tool (Handouts)
    • Genogram
    • Timeline of Placements
  • Phase III allows time for follow-up questions

• The Supervisor and other case-related team member will be able to provide additional information after the caseworker is finished
PHASE III: Clarify and Explore (15 minutes)

- Team members ask clarifying questions
  - Focus on permanence
  - Strength-based
- Team members explore other aspects of the case
- Housekeeping in eWiSACWIS
  - Full Disclosure
  - Where the child wants to be
  - Current Permanent and Concurrent Goal
  - Legal Permanency Status rating
Instructions to Team: Please rate the child’s current legal permanency status based on the information presented by the Ongoing Case Manager and Supervisor before beginning to discuss any specific strategies or actions to take following the consultation. It is important to note this is a rating of the child’s current situation as it relates to achievement of legal permanency. Legal permanence is defined as reunification, adoption or transfer of guardianship. This is not a rating of caseworker or agency competency. NOTE: If team consensus cannot be reached on permanency status, the team should opt for the lower rating. (Handout)

<table>
<thead>
<tr>
<th>Current Child Legal Permanency Status</th>
<th>Rate the child’s current permanency status as described below based on existing evidence:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child has legal permanency (reunification with safe case closure expected, adoption or legal guardianship).</td>
<td>Permanency achieved</td>
</tr>
</tbody>
</table>
| Child is in a family setting that the child, the caregivers and the casework team believe is lifelong, and the caregivers and child are committed to formalizing the relationship through adoption or transfer of guardianship;  
– OR –  
Child is in stable living situation with own parents (not a trial reunification) and identified safety threats have been eliminated. | Very good permanency status | □ |
| Child is in a family setting that the child, caregivers and case workers believe could endure lifelong; a plan is in place to maintain safety and stability; the child, if old enough, and the caregiver(s) are committed to the plan; and adoption/guardianship/issue(s), if any, are near resolution.  
– OR –  
Child is in stable living situation with own parents (not a trial reunification) and identified safety threats are being controlled through an in-home safety plan. | Good permanency status | □ |
| Child is in a family setting that the child, caregivers and casework team feel could endure lifelong; they are developing a plan to achieve safety and stability, and it is uncertain if the relationship will be formalized legally;  
– OR –  
Child is in a temporary placement, and likelihood of reunification or a legally permanent home is uncertain; adoption/guardianship issues are being assessed; and concurrent permanency plan(s), if any, are uncertain or problematic. | Fair permanency status | □ |
| Child is in a family setting that the child, the caregivers and the casework team believe is lifelong, and the caregivers and child are committed to formalizing the relationship through adoption or transfer of guardianship;  
– OR –  
Child remains in temporary home without a realistic or achievable legal permanency goal; and concurrent permanency plan(s), if any, have stalled or failed. | Uncertain permanency status | □ |
| Child is living in a home that is not likely to endure or is moving from home-to-home due to safety and stability problems, failure to resolve adoption/guardianship issues, or because the home is unacceptable to the child;  
– OR –  
Child is living in a home that is not likely to endure or is moving from home-to-home 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 home without a realistic or achievable legal permanency goal; and concurrent permanency plan(s), if any, have stalled or failed. | Poor permanency status | □ |
PHASE IV: Brainstorming
(25 minutes)

• What will it take to achieve permanence?
• What can we try that has been tried before?
• What can we try that has never been tried?
• How many things can be done concurrently?
• How can we engage the youth in planning for permanence?
PHASE V: Create Action Plan (35 minutes)

ACTION PLANNING

• No more than 4 ideas are chosen from the Brainstorming Phase

• Discussion and advocating specific items occurs

• Action Steps are developed
  • Who is assigned?
  • What is the target date of completion?
  • Are there any barriers to completing step?

A well developed action step should be understood by someone that Did Not participate in the PRT.
### How to Write a Good Action Step

<table>
<thead>
<tr>
<th>Brainstorming Idea</th>
<th>Bad Example</th>
<th>Good Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get Mother to WI for face-to-face</td>
<td>Look at mom’s ability via time &amp; money. Preparing child for a visit with mom.</td>
<td>Ongoing worker will contact mom to determine if she is interested in visiting her son in WI.</td>
</tr>
<tr>
<td>Family Find</td>
<td>Refer case to family find</td>
<td>Supervisor will determine if the county can pay for the Family Find program then follow-up with worker on outcome.</td>
</tr>
<tr>
<td>Explore relative in Appleton</td>
<td>Call Uncle to see if he will take the child</td>
<td>Ongoing worker will send a letter to Uncle Bob; explaining that the child is in care and would like to schedule a time to discuss the option of the Uncle becoming a resource for the child.</td>
</tr>
<tr>
<td>Request ICPC home study on birth father</td>
<td>Request ICPC home study on birth father</td>
<td>The ongoing worker will send a referral to the DCF ICPC worker requesting a home study for the birth father in California.</td>
</tr>
<tr>
<td>Explore type of home child wants</td>
<td>Talk to child about where he wants to live</td>
<td>The ongoing worker will discuss with the child’s therapist the option of having the therapist address with the child who he would like to live with.</td>
</tr>
</tbody>
</table>
PHASE VI: Debrief
(10 minutes)

• How can the worker best explain the action plan to families and youth?

• Are there any unanswered questions or concerns?

• What did you learn in this discussion that could be applied to other cases?

• How did you feel the process went?

After the PRT is complete the Action Plan is on the Worker’s Desktop as a Permanency Consultation
Plan Information
Child Name: Johnson, Reginald (84251458)
Case Name: Johnson, Frances (4127845)
Permanency Consultation Finalized: [ ]
PC Date: 00/00/0000
PC Type: 15 Month
Worker Name: Chandler, Allison C.
Supervisor Name: Holliday, Sylvia
Permanency Consultant: Frietag, Mellisa M.

Basic

Finalized PCs

Brainstorming
- What will it take to achieve permanency?
- What can we try that has been tried before?
- What can we try that has never been tried?
- How many things can we do concurrently?
- How can we engage the youth in planning for permanence?

Action Steps
Assigned To: Chandler, Allison C.
Target Date: 00/00/0000
Status: [ ]

Options: [ ]

Save Close
<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Name</td>
<td>Johnson, Reginald (84251456)</td>
</tr>
<tr>
<td>Case Name</td>
<td>Johnson, Frances (4127845)</td>
</tr>
<tr>
<td>Permanency Consultation Finalized</td>
<td>□</td>
</tr>
<tr>
<td>PC Date</td>
<td>00/00/0000</td>
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<tr>
<td>PC Type</td>
<td>15 Month</td>
</tr>
<tr>
<td>Worker Name</td>
<td>Chandler, Allison C.</td>
</tr>
<tr>
<td>Supervisor Name</td>
<td>Holliday, Sylvia</td>
</tr>
<tr>
<td>Permanency Consultant</td>
<td>Frietag, Mellisa M.</td>
</tr>
</tbody>
</table>

**Systemic Barriers Identified**

<table>
<thead>
<tr>
<th>Barrier Category</th>
<th>Barrier Type</th>
<th>Description</th>
<th>Row</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 of 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3 of 3</td>
</tr>
</tbody>
</table>

**Next Consultation**

Next Consultation Due On: 00/00/0000
What happens after a PRT?

Work on assigned Action Steps

State Permanency Consultants follow-up:
   With Worker—Monthly
   With Worker & Supervisor—Quarterly

Schedule another PRT
   At 5 months
   At 10 months
   And on and on…

UNTIL PERMANENCE is ACHIEVED
How are Cases Chosen?

When it is determined that a PRT would be beneficial for a case and other types of consultation have been attempted, the SPC must prioritize the cases to be scheduled for a PRT.

1. The child has been in OHC for 24 months or longer
2. The child is age 14 or older
3. The child has been in 3 or more placements
4. The child is not in a community setting
5. The child is part of a sibling group

In order to maintain efficiency, three PRTs are required to be scheduled each day.