

WASHINGTON STATE RACIAL  
DISPROPORTIONALITY ADVISORY COMMITTEE

SHB 1472

# Racial Disproportionality and Disparity in Washington State Report to the Legislature

Chapter 465, Laws of 2007 (SHB 1472)

March 6, 2012



**CA** Children's Administration

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Department of Social and Health Services

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A current list of Washington State Racial Disproportionality Advisory Committee Members can be found at <http://www.dshs.wa.gov/ca/about/disproportionbios.asp>.

## Introduction

As required by the Washington Legislature in SHB 1472 (2007), this report is the third annual update on efforts by the Department of Social and Health Services (DSHS) to remediate racial disproportionality in the Washington state child welfare system.

This report describes and reflects the thoughtful work of a network of DSHS leaders, staff, tribes, stakeholders, state partners and DSHS Children's Administration philanthropic partners such as Casey Family Programs, Stuart Foundation and Annie E. Casey Foundation to reduce disparate outcomes for children of color in the child welfare system.

Racial disproportionality is defined as the overrepresentation of children of color in the child welfare system compared to their numbers in the general population. Across the country, children of color enter and remain in the child welfare system at rates greater than their proportions in the population. Racial disparity in the child welfare system refers to the treatment and services provided to children of color compared to White children. Children of color in the child welfare system do not have equitable access to culturally appropriate services and supports delivered by culturally competent and sensitive staff and service providers.

The results of a 2008 study conducted by the Washington State Institute on Public Policy (WSIPP) found that racial disproportionality exists for Native American, Black<sup>1</sup> and Hispanic children in the Washington state child welfare system. In response to these findings, the Washington State Racial Disproportionality Advisory Committee (WSRDAC) developed recommendations for remediation and the DSHS - Children's Administration began work to implement remediation activities.

In 2011, the department implemented plans to address not only specific remediation initiatives but also other initiatives to safely reduce racial disproportionality. Children's Administration held workgroups and focus groups in partnership with DSHS Juvenile Rehabilitation Administration and Casey Family Programs. DSHS administrations convened staff trainings and workshops to educate and help staff to address more directly racial disproportionality and disparity at an organizational level.

Children's Administration leadership committed to safely reduce racial disproportionality and racial disparity. When briefing the WSRDAC, the CA Assistant Secretary asked the committee's consideration to focus their future remediation recommendations on items that would directly impact day-to-day practice and front line decision making.

Children's Administration, in following this focus, identified from the initial data that the first and biggest impact on racial disparity happens when a mandated reporter first reports a child to Intake. CA and WSRDAC saw that mandated reporters needed training and understanding of racial disproportionality. CA, in collaboration with statewide partners, created and

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<sup>1</sup> We use the term Black in this report to be inclusive of all African populations around the world, which include Sub-equatorial African, African American, Afro-Caribbean, Afro-Latin American and Black Canadian.

distributed to regional staff and community partners a Mandated Reporter Toolkit, which includes information and discussion about racial disproportionality and anti-racism. This toolkit is used to train mandated reporters on when, where and how to report child abuse and neglect. Mandated reporters must think about their own potential racial and ethnic biases related to cultural differences in parenting. There is a delicate balance between not discouraging reporters from making a report but keeping in mind any biases that could influence that decision. The toolkit addresses this issue directly by asking reporters to “check themselves” and discusses ways to do this. However, child safety must always take precedence. In May 2011, several CA leaders introduced the new Mandated Reporter Toolkit at the Black Administrators in Child Welfare 40<sup>th</sup> anniversary national conference. The information was well received by conference participants. The link to this toolkit is in the status update for Item H. Mandated Reporter Training.

CA introduced a Racial Equity Impact Analysis tool to staff in 2011. The tool is used to assess the impact of legislation, policies, practices and procedures on racial disproportionality. CA staff attended an initial training in collaboration with our partner, Annie E. Casey Foundation, nationally known for their expertise in child welfare reform and as a leader in helping states reduce racial disproportionality in child welfare. DSHS staff, other government entities, and our partners can use this tool when making decisions regarding children and families. During this period, CA also completed administering an agency assessment survey, the NAPCWA disproportionality diagnostic tool, to all CA staff. The information from the survey was analyzed and CA is developing recommendations to fill gaps identified in the survey, including training and efficient delivery of information to all staff regarding disproportionality.

The WSRDAC monitored and assisted the efforts of CA to reduce and eliminate racial disproportionality and racial disparity, and continued to educate themselves and CA during 2011. During this period, committee members led a workgroup at the request of the Braam Panel to investigate whether or not race was an issue in 1) sibling separation in foster care or 2) youth on the run from foster care. The workgroup reviewed data and factors affecting each issue, and brainstormed ideas to reduce racial disparity in both areas. Participants included the co-chairs of WSRDAC, the Braam Panel executive coordinator, veteran parents, a foster parent, a CA SW supervisor and other CA staff.

At the June 2011 retreat, WSRDAC members reviewed work completed on the original 11 remediation recommendations. Of the 11 recommendations, five were complete, four were in process, one was rescinded and one was dependent on the work of the Transformation Design Committee, which is charged with implementing HB2106 phase 2, transforming the child welfare system in Washington state.

Completed	Rescinded
A. Structured Decision Making	G. Caseloads (Council on Accreditation Standards)
B. Family Team Decision Making	
C. Kinship Care	
E. Enactment of a Washington State Indian Child Welfare Act	
H. Mandated Reporter Training	

The WSRDAC recommended the following new remediation initiatives in November 2011:

- Increase recruitment and licensing of caregivers of color
- Increase documentation of ethnic and racial background and tribal affiliation in FamLink
- Eliminate the use of long-term foster care for children of color 12 or older
- Make Disproportionality awareness training mandatory for CA staff

The department is currently developing strategies to implement the new initiatives. The January 2013 status report will include progress achieved and an update on each of these.

DSHS staff and the WSRDAC research sub-committee continue to define data measures to track more accurately the changes in race population and disproportionality. CA continues to look deeper into the data, refining data and measures. As an example, CA added multi-racial categories to our measures in this report.

Significant reduction in disproportionality has not yet occurred throughout the Washington state child welfare system. New initiatives will take several years to produce results and it will take time for system changes to be reflected in the data in Washington state. However, several positive findings have emerged in the CY 2011 analysis.

- Racial disproportionality is decreasing in intakes and removals for Native American and multiracial children
- Decreases in disproportionality achieved for Black children appear to be holding into 2010

WSRDAC continues to evaluate strategies and activities and monitor progress to safely reduce racial disproportionality. CA continues to work internally and with state, regional and national leaders to reduce racial disproportionality and disparity of services in the Washington state child welfare system.

## Measuring Progress

### Summary & Status:

The Department of Social and Health Services (DSHS) Children’s Administration (CA) monitors the progress and impact of implementation of the remediation plan. This third report to the legislature highlights changes in disproportionality rates from 2006 - 2010.

The table below lists each remediation activity and highlights where the Washington State Racial Disproportionality Advisory Committee (WSRDAC) intends to see changes in disproportionality rates. The shaded columns are those decision points emphasized in the remediation plan.

<b>ACTIVITIES</b> <i>These activities are expected to decrease disproportionality in:</i>	<b>Referrals</b>	<b>Accepted Referrals</b>	<b>Removed from home</b>	<b>Out of home &gt; 2 years</b>
Conduct Assessment of Children’s Administration	X	X	X	X
Implement a Racial Equity Impact Analysis Tool	X	X	X	X
Evaluate Structured Decision Making (SDM®)			X	
Maintain Compliance with Indian Child Welfare Act by Continuing ICW Case Reviews	X		X	X
Study impact of Enactment of a Washington State Indian Child Welfare Act			X	X
Evaluate Family Team Decision Making (FTDM)			X	X
Implement Kinship Care Policies			X	X
Implement Cultural Competency and Anti-Racism Training	X	X	X	X
Implement Mandated Reporter Training	X	X		
Explore Implementation of In-Home, Community Based Services			X	
Implement Council on Accreditation Standards Caseload Standards		X	X	X

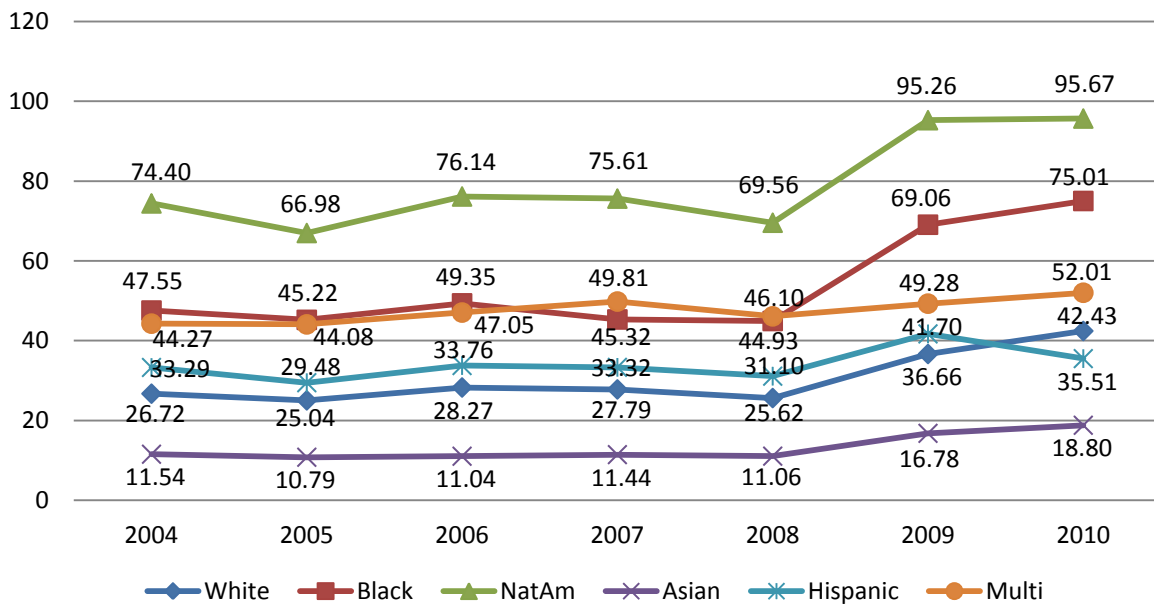
In 2011, Children’s Administration made changes to the performance metrics used to measure changes in racial disproportionality. CA continues to measure trends in key decision points. However, new data is now available to fine-tune the existing measures and add new measures that relate to the types and stability of out-of-home placements. We outline these changes below:

### Changes to Intake Definition

In past reports, the data system captured information only for screened in intakes. CA’s new data system now collects information on intakes screened in for investigation and screened out. Including the screened out intakes affects the number and disproportionality

of total intakes in 2009 and 2010. We see this in measures of the total number of intakes. In addition, we broadened the definition of intakes to include children placed up to 3 days prior to an intake, which can happen in emergent situations. It is important to include these placements and intakes when looking at disproportionality. Figure 1 shows the effects of including these intakes in 2009 and 2010; intake rates for all racial groups increased.

**Figure 1: Rates per Thousand, of Children Identified in any Intake, by Race and Year**



**Changes to placements over 2 years**

The definition of this indicator was changed to eliminate the delay in reporting. Rather than choosing a cohort of children in placement and following them into the future, we now look at children in care during the current year and look back to see how long they have been in care. We included children in care 2 years or more in the analysis. This allows us to track this indicator more closely to real time, rather than have a 2-3 year delay in reporting this outcome.

**Changes to Disproportionality Index After Referral (DIAR)**

The DIAR is the ratio of a racial/ethnic group compared to whites, which controls for disproportionality at referral. FamLink, CA’s data system, changed the term “referral” to “intake/” Therefore, the new statistic used in this report is the Disproportionality Index After Intake (DIAI). The DIAI measures any increase in disproportionality after a CPS intake. The meaning of the statistic is the same as in previous reports; values greater than one (1.0) indicate disproportionality; values less than one (1.0) indicate underrepresentation.

## Changes to Racial Groups

In previous reports, statistics were calculated on a “Multiracial” group. This group included all children with more than one race identified, regardless of the races identified. WSRDAC and CA staff expressed concern that by combining mixed race in one multiracial group, we might mask potential disparities that existed based on physical characteristics. In this report, for indicators based on CA’s children in care, we separated the multiracial group into three categories: Multiracial Native American, Multiracial Black, and Multiracial Other. When we separate the multiracial category into subcategories for children in care, the results do suggest different rates of disproportionality for these three groups.

For this report, new race categories were used for indicators based on the child welfare population, but we cannot calculate these new race categories for indicators that use the state population estimates. For those indicators we used the original multiracial category.

## New Measures

Children’s Administration added 4 new measures.

- DIAI of children not initially placed with relatives
- DIAI of children who moved twice or more in the first 12 months of placement
- DIAI of children reunified within 12 months of placement
- DIAI of children in care over two years who moved within the last 12 months

## Results

Significant changes in performance are not expected in the short time since we developed remediation plans in 2009 and implemented starting in 2010. However, there have been improvements in several areas over the last 2 years.

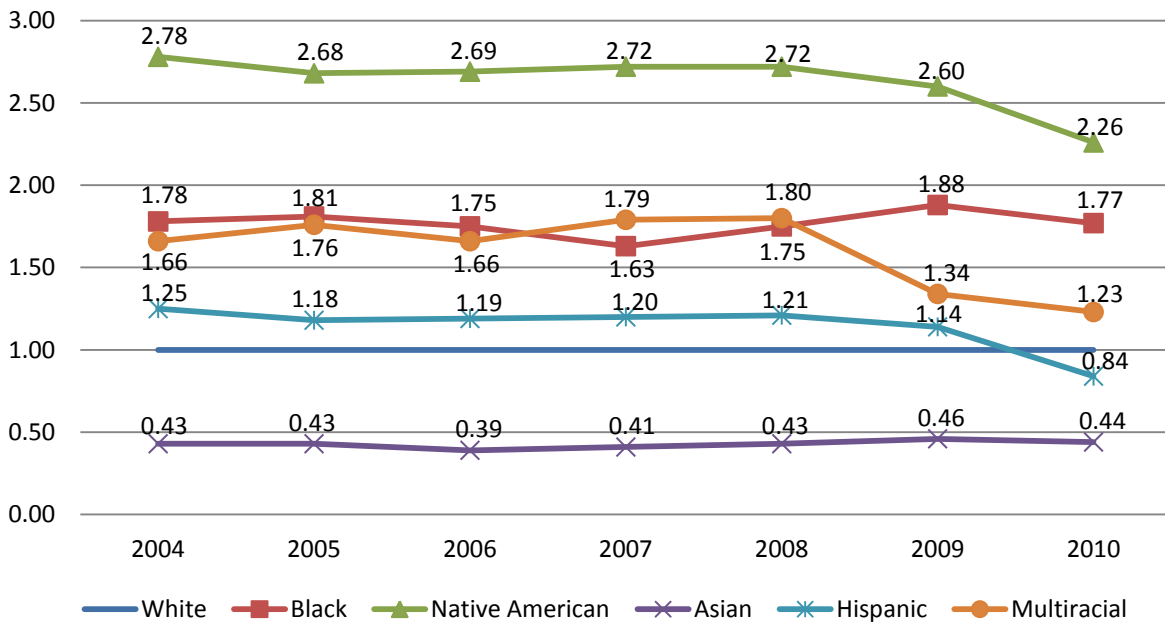
Overall intake and removal rates have decreased for children. As seen in Figure 2, between 2008 and 2010, disproportionality in overall intakes declined significantly for Native American (-.46%), Multiracial (-.57%) and Hispanic (-.37%) children, and stayed constant for Black and Asian children. A similar pattern appears when looking only at screened-in intakes. Disproportionality declines for Native American (-.41%), Multiracial<sup>2</sup> (-.52%) and Hispanic (-.32%) children. (Figure 3)

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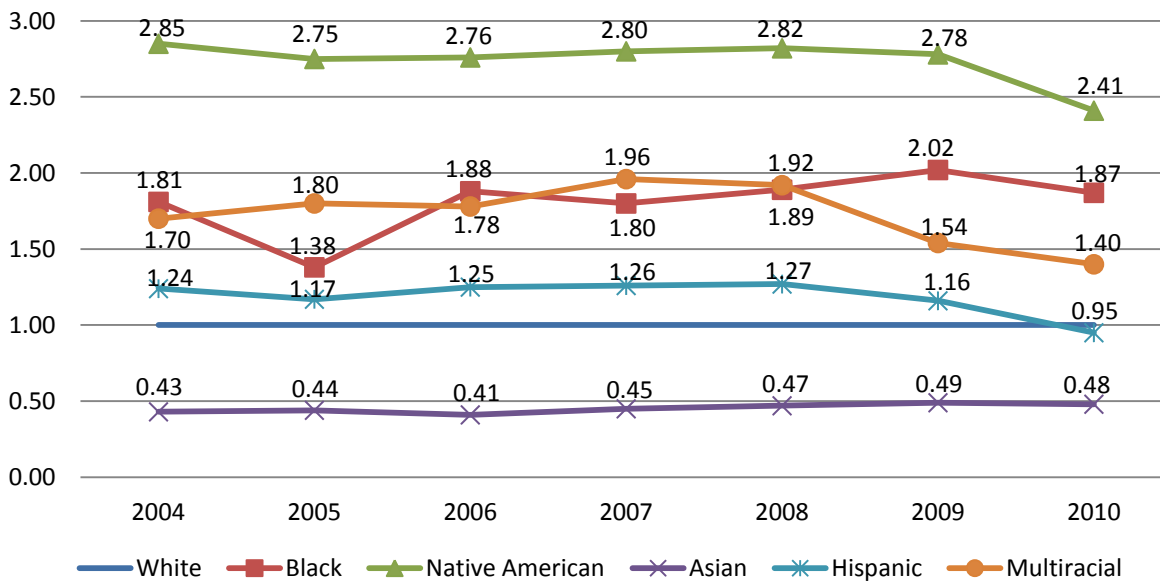
<sup>2</sup> These two measures are based on state population estimates therefore do not have the breakout of the three multiracial categories. The measures on the following pages are based on Children’s Administration’s data and are broken out into the three multiracial categories.



**Figure 2. DI: All Intakes (Screened Out or Screened-In)**

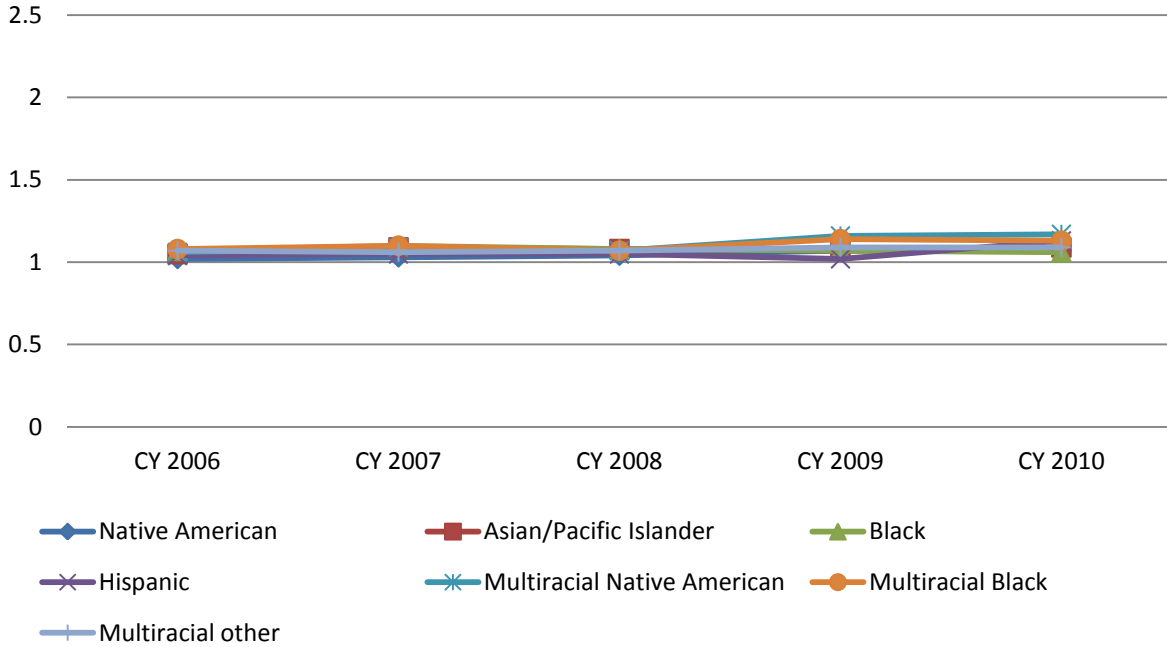


**Figure 3. DI: Intakes (Screened-In)**



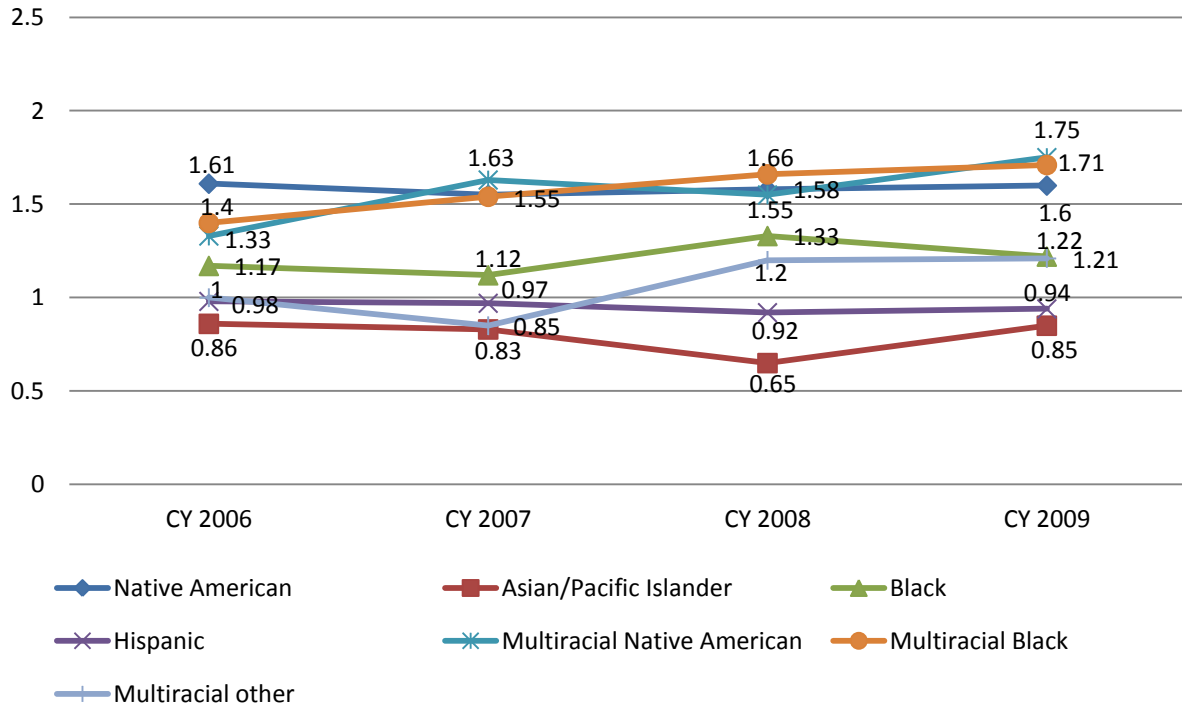
For screened in intakes compared to all intakes, there is very little disproportionality for any minority group. This finding remains consistent across all reports. (Figure 4)

**Figure 4. DIAI: Children with Screened-In CPS Intakes**



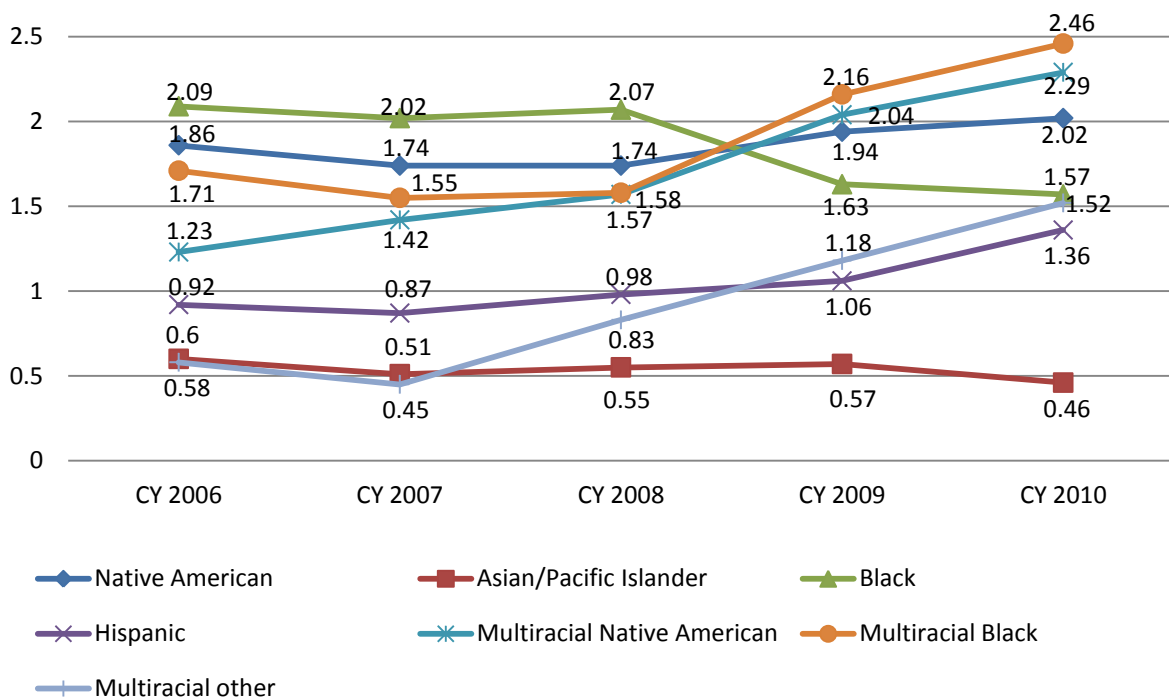
Disproportionality in placement remains high for Native American, Multiracial Native American and Multiracial Black children in care. They enter placement one and half times more often than White children. Black and Multiracial Other children enter placement 1.2 times more often than White children. (Figure 5)

**Figure 5. DIAI: Children Entering Placement within 12 Months of CPS Intake**



For children in care more than 2 years, disproportionality decreased between 2008 and 2010 for Black children (-.50), and Asian children (-.09). Disproportionality increased for Multiracial Black (+.88), Multiracial Native American (+.72), Native American (+.28), Multiracial Other (+.69), and Hispanic (+.38) children. Multiracial Black, Multiracial Native American and Native American children are more than twice as likely to be in care more than 2 years compared with White children. In 2010, Multiracial Other and Hispanic children were one and a half times more likely to remain in care longer than 2 years than White children. (Figure 6)

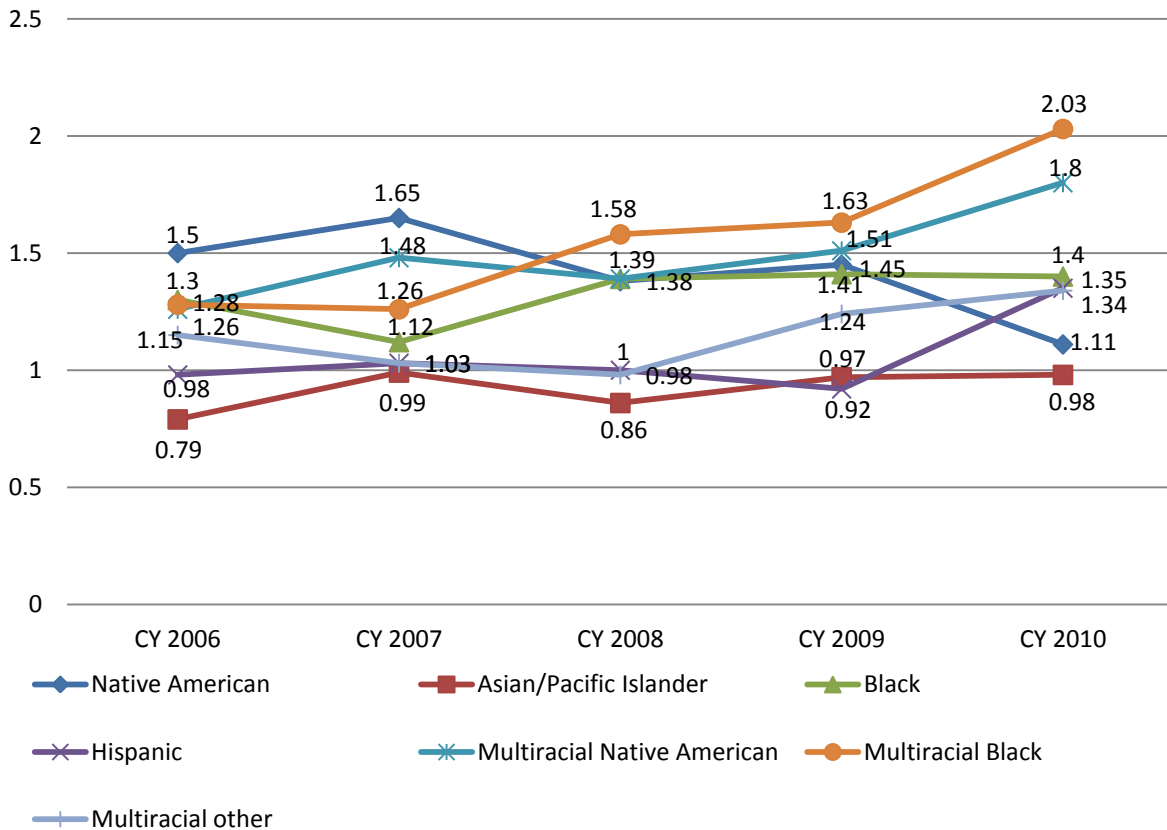
**Figure 6. DIAI: Children In Care for more than 2 Years**



### New Measures

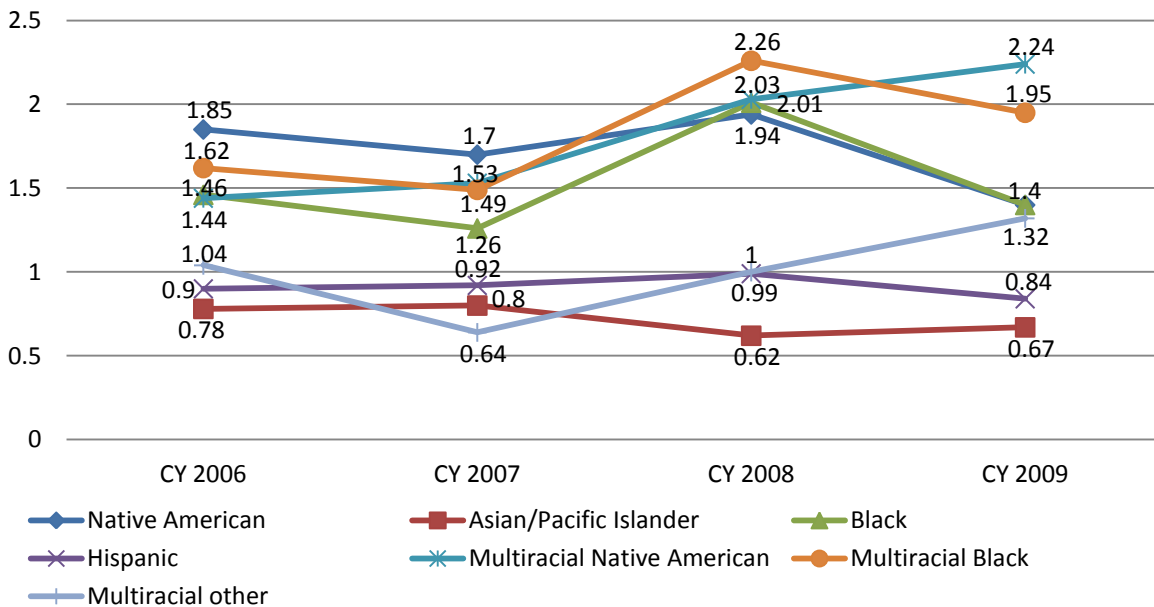
Multiracial Black children are twice as likely, and Multiracial Native American children are 1.75 times as likely not to be placed with relatives. This trend has increased in the last year (Multiracial Black +.40, Multiracial Native American +.29). Native American children are more likely to be placed with relatives than in past years and are close to the rates for White children. (Figure 7)

**Figure 7. DIAI: Children Not Initially Placed with Relatives**



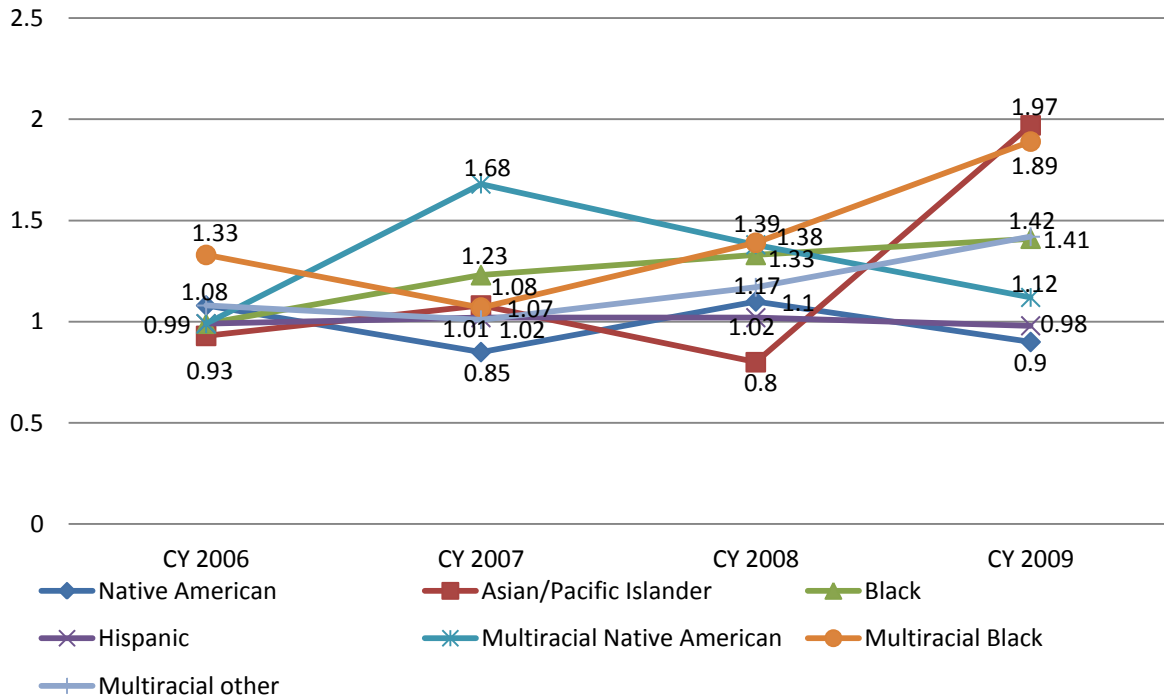
Since 2008, Multiracial Native American and Multiracial Black children are two times more likely to move during the first 12 months of placement than White children. Hispanic and Asian children were less likely to move in the first 12 months of placement. Disproportionality rates decreased in the last year for Multiracial Black (-.31), Black (-.61), and Native American (-.54) children. Rates increased for Multiracial Native American (+.21) and Multiracial Other children (+.32). (Figure 8)

**Figure 8. DIAI: Children Moved twice or more during first 12 months of Placement**



Asian (1.97) and Multiracial Black (1.89) children were twice as likely as White children to be reunified within 12 months of placement. Hispanic, Native American and Multiracial Native American children were as likely as White children to be reunified within 12 months. Disproportionality increased in reunification for all children in 2009, except for Hispanic, Multiracial Native American and Native American children. (Figure 9)

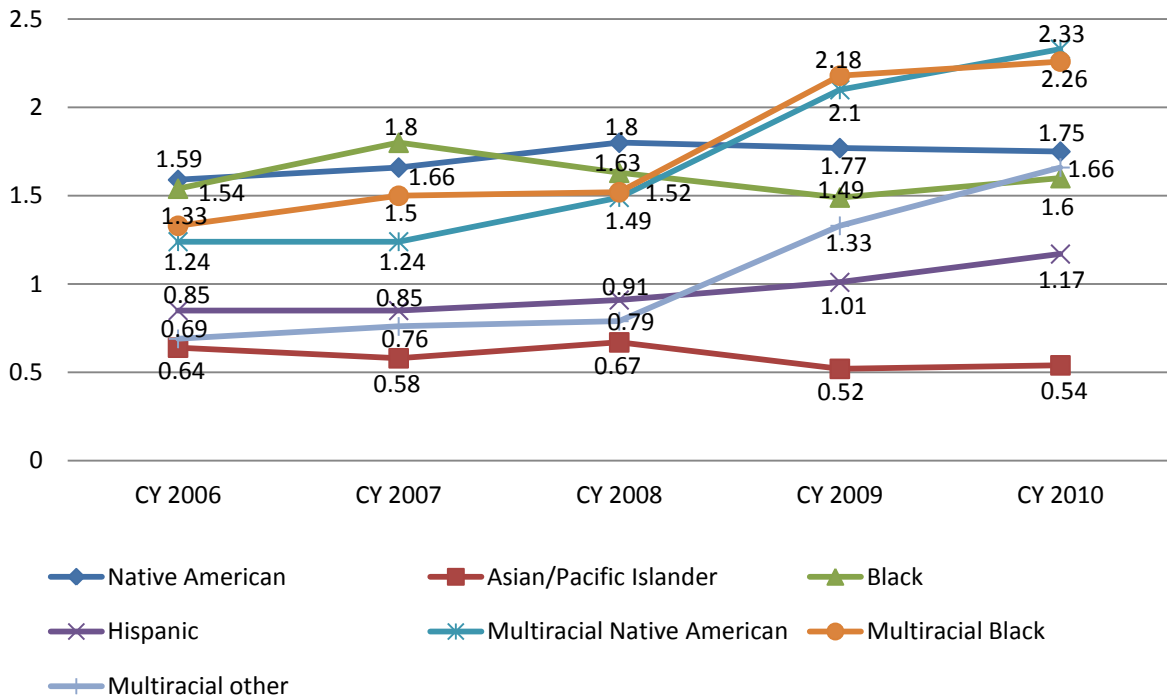
**Figure 9. DIAI: Children Reunified within 12 Months of Placement\***



\*For this indicator only, DIAI values above 1 are positive, indicating that children are more likely to be reunified within 12 months of placement

Multiracial Native American(2.33) and Multiracial Black (2.26) children in care over two years are 2 times more likely to have moved within the last year, and their rates have increased since 2008 (+.23 and +.08). Rates have also increased for other Multiracial children (+.33) and Hispanic children (+.17). Rates for Black and Native American children have remained constant at more than 1.5 times higher than White children. (Figure 10)

**Figure 10. DIAI: Children in care over two years who moved within last 12 months**





## Recommendation A: Structured Decision Making (SDM)<sup>®</sup>

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“Structured Decision Making (SDM<sup>®</sup>) should be studied to determine its impact on reducing disproportionality for Black, Native American and Hispanic Children referred to the Washington Child Welfare System.”

### **Status: Completed**

Washington state implemented the Structured Decision Making risk assessment system developed by the Children’s Research Center (CRC) in Madison, Wisconsin. It is designed to assist Child Protective Services (CPS) workers in making decisions regarding child safety and the risks associated with a child remaining in a home (California Department of Social Services, 2007).

Children’s Administration implemented the SDM<sup>®</sup> tool in October 2007 after an intensive training and validation process.

The Washington State Institute for Public Policy (WSIPP) conducted an evaluation of the Administration’s implementation of Structured Decision Making (SDM<sup>®</sup>) as directed by the 2009 Legislature. CA’s program and data staff met with WSIPP staff to provide and discuss programmatic information and data needed for the evaluation.

### Findings:

The study found that when comparing outcomes of children in 2008 with those of children with referrals in earlier years, there was no effect on out-of-home placements or on new reports of CPS. When analyzing outcomes for each race separately, we found no effect on White, Indian, Asian, and Latino children. For referrals in 2008, Black children were more likely to be removed from home and to have new CPS referrals than Black children prior to 2008. WSIPP further reported, “We cannot be certain that the SDM<sup>®</sup> risk assessment was the cause of the differences in 2008; differences may also be the product of the largely unexplained year-to-year fluctuations in disproportionality for Black children.”

### CA Response:

The Children’s Research Center (CRC), who provided consultation and technical assistance to CA when CA was planning and implementing SDM<sup>®</sup>, published “A Commentary on the WSIPP Report” which found some issues with the research question and limitations of the research design.

In brief, the CRC report states “the research question in the WSIPP study was whether use of the SDM<sup>®</sup> risk assessment reduced racial disparity. The specific hypotheses tested by WSIPP were whether implementation of SDM<sup>®</sup> risk assessment affected (1) the rate of out of home placements and (2) reduced the rate of subsequent referrals. CRC specifically questions “the relationship between the research question and the outcome being measured.”

- Regarding the first hypothesis, SDM® is not designed to influence placement decisions. CA uses a safety assessment to help determine if a child should be placed to ensure safety.
- The second hypothesis is also at issue because the rate of re-referral is a measure of service effectiveness. It is unclear how this relates to reducing racial disproportionality or disparity.

The link to the WSIPP report is <http://www.wsipp.wa.gov/pub.asp?docid=11-05-3901>

The link to the CRC report is [http://www.nccd-crc.org/crc/crc/c\\_pubs\\_main.html](http://www.nccd-crc.org/crc/crc/c_pubs_main.html).

**Timeline:**

WSIPP published the report on the effectiveness of SDM® as a tool for reducing racial disproportionality in May 2011.

## Recommendation B: Family Team Decision Making (FTDM)

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“The Family Team Decision Making (FTDM) model should be assessed to determine its impact on disproportionality for American Indian, Black, and Hispanic Children. Specifically, it should be determined if the model reduces disproportionality in the placement and length of stay for Native American, Black, and Hispanic children in the Washington child welfare system.”

### **Status: Completed**

Family Team Decision Making (FTDM) is one of four “core strategies” within the Family to Family (F2F) initiative. FTDM meetings bring together family members, relatives, and other support systems to make placement decisions about a child or children.

WSIPP conducted an evaluation of CA’s implementation of FTDM as directed by the 2009 Legislature. CA program and data staff met with WSIPP staff to provide and discuss programmatic information and data needed for the evaluation.

#### Findings:

The study found that “in 2008, DSHS convened 6,600 FTDM meetings regarding nearly 8,000 children.” WSIPP studied the outcomes “for the child welfare caseload statewide.” The study concluded that FTDM had no overall significant impact on out-of-home placement, time to permanency, or new referrals to CPS. However, when WSIPP examined outcomes by racial groups, FTDM did have a differential impact on outcomes, depending on race. Latino children experienced decreased rates of placement; Asian children achieved permanency more quickly than those in non-FTDM offices did; and Black children exiting to permanency were less likely to be the alleged victims of new accepted CPS referrals. Otherwise, WSIPP found that FTDM did not affect disproportionality for Indian or Black children regarding placement in foster care or time to permanency.

WSIPP noted that for all state offices in 2008, only 36 percent of children in out-of-home placement were the subject of an FTDM meeting.

#### CA Response:

CA had several significant concerns with the WSIPP report.

1. The WSIPP study examined all child outcomes in offices that offered FTDMs, as opposed to comparing outcomes for children who actually received FTDMs. “If a child’s case was opened after the office had implemented FTDM, the case was considered an FTDM case.”

We believe a measurement and comparison of children actually receiving an FTDM with children who did not would give a more accurate and fair.

2. The FTDM data used (2008) was during a period when statewide expectations, coordination and quality assurance structures for FTDM practice were few or nonexistent.

Between Oct 2008 and July 2009, regions received technical assistance and an assessment of practice. The assessment and recommendations formed the basis of CA's present efforts to improve FTDM practice.

3. FTDM is one of four strategies in the Family to Family (F2F) Initiative. FTDM alone was not designed to have a direct impact on disproportionality. Without the training, strategy and focus for FTDM practice on disproportionality, plus organized community and caregiver engagement strategies, it is not surprising WSIPP found little significant affect.

The link to the WSIPP report is <http://www.wsipp.wa.gov/pub.asp?docid=11-03-3901>

**Timeline:**

WSIPP published the report on the effectiveness of FTDMs as a tool for reducing disproportionality in March 2011.

## Recommendation C: Kinship Care

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“Policies should be implemented to ensure equitable services and supports for children and families in kinship care.”

### **Status: Completed**

Children’s Administration (CA) implemented new and continued current activities to ensure equitable services and supports for kinship caregivers. The Kinship Care Oversight Committee implemented recommendations throughout 2010 and 2011. Progress to date includes:

- The 2011 Legislature reauthorized the statewide Kinship Care Oversight Committee. The committee addressed issues such as cuts to TANF benefits, means testing for benefits, and advocating for support to kinship caregivers.
- Sustained implementation and continued embedding of the Federal Fostering Connections to Success and Increasing Adoptions Act (Fostering Connections) strategies for supporting relative caregivers, which promotes legal permanency through relative guardianship (R-GAP) and adoption. R-GAP allows foster care licensed relative caregivers to receive a subsidy similar to the foster care payment.
- Increased collaboration within the Department of Social and Health Services and with partners, including the Area Agencies on Aging, to respond better to the needs of kinship caregivers. The DSHS Kinship Care Work Group has set four major priorities for kinship care: 1) Improve access to medical and mental health care for children in kinship families; 2) Improve health of kinship caregivers, including through improved respite; 3) Improve kinship caregiver access to information, resources and services; and 4) Promote readiness to learn for children in kinship care. Administrations continue to work on recommendations as resources allow.
- CA received the three-year LifeSpan Respite Grant from the federal government for \$189,000. In 2011, CA hired a statewide director and began planning to provide greater respite opportunities for caregivers. LifeSpan Respite Care programs are coordinated systems of accessible, community-based respite care services for family caregivers of children or adults of all ages with special needs.
- In FY2011 CA continued to revise practice and policies to ensure relative caregivers have access to the same supports as foster parents and continues active efforts to license relatives. Revisions include:
  - CA will use the Unified Home Study for all caregivers, including relatives with a dependent child in their care. Once approved through the home study, relatives and foster parents will be eligible to adopt a child without a further home study.
  - Relative caregivers have the same access to childcare, mileage reimbursement, clothing vouchers, etc. as do foster parents.

- CA staff will invite relatives to Shared Planning Meetings (Family Team Decision Meetings) and court hearings involving children in their care, just as are foster parents.

**Timeline:**

Efforts by CA and our partners inside and outside of the department are ongoing to ensure progress towards relatives receiving the same supports as foster parents and continued active efforts to license relatives.

## Recommendation D: Compliance with Indian Child Welfare Act

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“DSHS should comply with ICWA. The Indian Child Welfare Case Review Model developed in collaboration with Tribal partners and the Indian Policy Advisory Committee (IPAC) should be the anchor for an enhanced ICW quality improvement/compliance measurement system.”

### Status:

DSHS Children’s Administration (CA) continues collaboration with tribes and Recognized American Indian Organizations (RAIOs) in administering the Indian Child Welfare Case Reviews (ICW CR). Two ICW Case Reviews have been held, the first in 2007 and the second in 2009.

As noted in the January 2011 Remediation Plan update, Children’s Administration made improvements between the 2007 ICW CR and 2009 ICW CR. Early identification of Indian children, early engagement of tribes (by making contact early in the life of a case) and timely legal notice continue to be primary goals.

On October 13, 2010, Casey Family Programs funded a daylong retreat for CA, tribes and Recognized American Indian Organizations to develop implementation plans for the former six regions based on the 2009 ICW Case Review. CA and tribes monitor these plans at regional 7.01 meetings, the statewide CA IPAC Subcommittee meetings and the quarterly IPAC meetings.

In 2011 the following activities occurred:

- CA and the Washington state Attorney General’s office developed training on legal notice to tribes and identification of Indian children. Assistant Attorneys General and CA staff received statewide training March 13, 2011 and training continues at the regional level.
- CA provided tribes in Washington state access to the FamLink Search module that gives tribes access to data on tribal members receiving services from CA. To date 27 tribes are participating, one is in the process of gaining access and one has declined to participate.
- Regional staff worked with tribes in their local areas to develop Local Agreements. This supports early legal notice to tribes, early engagement of tribes and positive, productive working relationships between CA and tribes. CA staff can access completed Agreements on the CA intranet and tribes and other community partners can access them on the DSHS internet.
- CA updated the list of federally recognized tribes in the FamLink data system. This will support timely and accurate legal notice to tribes.
- The CA IPAC Subcommittee recommended that CA conduct limited ICW case reviews, outside of the statewide case review, at the office level. This began in the fall of 2010 in Region 3. These case reviews help assess and improve the quality of casework services, build positive relations between local offices and tribes and serve as a training

opportunity for CA staff on ICW requirements. Tribes and CA offices are collaborating to roll this initiative out in other Regions with a tentative start date of Spring 2012

**Timeline:**

CA scheduled the statewide ICW Case Reviews to occur every two years with the next review due in fall 2011. Assistant Secretary Denise Revels Robinson and the IPAC approved postponing the next ICW Case Review until the fall of 2012. CA and tribes agreed the ICW Case Review tool needed updating due to passage of the Washington State Indian Child Welfare Act (ESSB 5656 effective June 22, 2011).



## **Recommendation E: Enactment of a Washington State Indian Child Welfare Act**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“DSHS should study the impact that state-level Indian Child Welfare Acts have had in states, such as Iowa, that have implemented state ICW legislation. If the study finds that implementation of state-level legislation increases compliance with the core tenets of ICW and reduces racial disproportionality, DSHS should support enactment of a Washington State ICWA.”

### **Status: Completed**

As reported in the January 2010 report, a literature review found no articles or research on the impact of state ICW legislation on the disproportionality of Indian children in the child welfare systems.

Washington state tribes and Recognized American Indian Organizations led the development and passage of the Washington State Indian Child Welfare Act (WSICWA), which the legislature passed into law on July 22, 2011. This Act strengthens the commitment of Washington state to protect essential tribal relations and best interests of Indian children. The Act does this by promoting practices designed to prevent voluntary or involuntary out-of-home placement consistent with the Federal Indian Child Welfare Act. The state Act also defines active efforts and qualified expert witness, which is undefined in the federal Act. CA is strengthening practice through a number of initiatives. Washington state is now one of seven states in the nation to have comprehensive Indian child welfare legislation.

Children’s Administration continues implementing the requirements of the federal Indian Child Welfare Act and developing initiatives to implement the Washington State Indian Child Welfare Act (WSICWA). Some of the initiatives are:

- Develop an ICW guide for social workers that clarifies and strengthens how to implement current policy and practice as defined in both the state and the federal ICW Act. December 2011 is the expected completion date.
- Update the ICW Case Review tool in collaboration with tribal partners to include questions on the WSICWA. The next CA ICW Case Review is scheduled for the fall of 2012.
- Provide information, including a copy of the WSICWA, to contracted training providers to ensure they update training materials to reflect the active efforts requirements and expert witness as defined in the ICW Acts. These providers deliver ICW training at the CA Social Worker Academy, CA Social Worker Supervisor Academy, and post Academy ICW training. ICW training updates were completed for CA Social Worker, Supervisor and post Academy ICW training in January 2012.
- Update training curriculum on legal notification and tribal identification to include the components of the WSICWA. As of November 2011, AAGs and CA staff In Region 2 and

most offices in Region 3 received training. Training will continue as capacity allows in accordance with scheduling and office availability.

- Develop and implement memorandums of agreement (also known as Local Agreements) with the 29 federally recognized tribes in Washington state. As of November 2011, six are completed and on the CA intranet and DSHS internet. The other 23 are in stages of development.

**Timeline:**

Governor Gregoire signed legislation (ESSB 5656) on May 10, 2011 establishing the Washington State Indian Child Welfare Act. The Act became effective on July 22, 2011.

## **Recommendation F: Cultural Competence and Anti-Racism Training**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“On-going anti-racism training should be mandatory for all case-carrying Children Administration and Child Placing Agency workers, all service provider staff, all Court Appointed Special Advocates (CASA), all Guardian ad Litem (GAL), all individuals who represent children and birth parents in dependency proceedings, and all individuals who serve on public committees, boards, and other groups that are charged with providing guidance, oversight, or advice regarding the operation and management of the Washington child welfare system. This training should focus on increasing the trainee’s level of cultural competency and understanding of race and racism. The training should include ICW standards, government-to-government relations, local agreements, and the operation of the Indian Policy Advisory Council. The training should also include a self assessment of cultural competency using a tool similar to the Cultural Competency Continuum.”

### **Status:**

Each region developed a formal training plan for all social work staff, community partners and tribes to receive Building Bridges training. Typically presented as a one-day seminar, Building Bridges (also known as the Prejudice Reduction Workshop) is a participatory program that reduces the harmful effects of prejudice and discrimination, and begins to explore the cycle of systematic oppression. The workshop increases awareness and teaches specific skills that empower individuals to be effective allies on behalf of others. CA plans to have three staff members trained to facilitate Building Bridges workshops by the spring of 2012.

Regional leads developed other training consisting of films, articles, and research, as well as expert presentations. They offer training and education in all-staff meetings, unit meetings and brown bag lunches. Some field offices use the Mandated Reporters Training Kit, which incorporates information relating to disproportionality, as another medium to educate and keep efforts to reduce racial disproportionality in front of staff.

Planning is underway to host several workshops and trainings to CA leadership, other staff, and external partners in 2012.

### **Timeline:**

Building Bridges training is scheduled to be complete by summer of 2012. Informal training and guided discussions are ongoing as staff turnover occurs and as requested by our community partners. CA plans to host additional Undoing Racism training sessions in 2012.

## **Recommendation G: Caseloads (Council on Accreditation Standards)**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“Children’s Administration caseloads should be reduced to meet COA standards. Caseloads for CPS Workers should not exceed ten (10) and caseloads for Child Welfare Workers should not exceed eighteen (18).”

### **Status: Rescinded**

At the June 2011 Washington State Racial Disproportionality Advisory Committee retreat, the committee decided to rescind this recommendation because it lacked a clear connection to reducing racial disproportionality and eliminating racial disparities.

### **Timeline:**

The Washington State Racial Disproportionality Advisory Committee rescinded this recommendation.

## **Recommendation H: Mandated Reporter Training**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“The training for mandated reporters should be revised. One of the major goals of this revised training is to increase awareness of racial disproportionality in the child welfare system, familiarize mandated reporters with the data regarding referral and the impact of race and racism on their reporting decisions. We recommend an evaluation of training in all mandated reporter work settings external to DSHS to determine if this training has a cultural competency component that is designed to facilitate an understanding of race and racism and how these factors impact their reporting decisions. Further research is warranted regarding mandated reporters and their decisions to report.”

### **Status: Completed**

The first major decision point where disproportionality is evident in the child welfare continuum is when a child is referred based on concerns of abuse or neglect. In Washington state mandated reporters make approximately 60 percent of referrals to Child Protective Services. Mandated reporters are those who, because of their professional or volunteer role or proximity to children, are required by law to report any concerns of abuse or neglect.

Disproportionality at this early decision point indicates that mandated reporters are referring children of color at rates that are disproportionate to White children.

Children’s Administration revised the mandated reporter training materials and created a “toolkit” which includes a video brochure, a PowerPoint presentation, and Protecting the Abused and Neglected Child, a Guide for Mandated Reporters, which includes information about racial disproportionality in child welfare. CA distributed the toolkit to field staff and published it on the CA internet and intranet in June 2011. CA also distributed the toolkit to community partners and continues to do so. Field trainers will report quarterly on demographics of attendees and have participants fill out a survey at the end of their training. CA will use the results to refine the training as needed.

CA also is developing plans to use this information to help track if intakes of children of color in specific zip codes are safely decreasing because of more awareness by reporters regarding disproportionality after receiving the training.

### **Timeline:**

CA sent new and updated mandated reporter training resources to the field in June 2011 and continues to distribute to the field and community partners. Regional staff will submit quarterly reports beginning in October 2011. CA will develop plans to monitor and track training of mandated reporters in zip codes with high referral rates. These plans will be given to WSRDAC to review and provide guidance.

## **Links to Mandated Reporter Training Materials:**

“Protecting the Abused and Neglected Child: A Guide for Recognizing & Reporting Child Abuse & Neglect”

<http://www.dshs.wa.gov/pdf/publications/22-163.pdf>

Mandated Reporters' Video

<http://www.dshs.wa.gov/ca/fosterparents/videoMandReport.asp>

Child Protective Services: Guidance for Mandated Reporters

<http://www.dshs.wa.gov/pdf/ca/MandatedReporterTraining.pdf>

What Mandated Reporters Need to Know About Racial Disproportionality in the Child Welfare System

[http://www.youtube.com/watch?v=HHLw5rylqow&feature=channel\\_video\\_title](http://www.youtube.com/watch?v=HHLw5rylqow&feature=channel_video_title)

## **Recommendation I: Assessment of Children’s Administration**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“CA, its service providers, and child placing agencies should assess their organizational cultural competency and commitment to the elimination of racial disproportionality for children of color. The National Association of Public Child Welfare Administrators (NAPCWA) Disproportionality Diagnostic Tool should be used to conduct the assessments. This tool is used to evaluate social, systemic, and individual factors that may be contributing to disparate treatment of children of color in the child welfare system.”

### **Status:**

Between August 2009 and January 2011 the Children’s Administration distributed the assessment in phases, to executive leadership, regional leadership, the Washington State Racial Disproportionality Advisory Committee, and the Children, Youth and Family Services Committee. The last group to receive the assessment was all other CA staff, which consisted of over 2,800 staff and had a response rate of 73 percent.

CA enlisted the services of our partners at the University of Washington to help analyze the results of the assessment. The analysis will provide major themes, strengths and challenges and determine gaps. The identification of key themes will help target practice and policy areas for improvement to guide our work in effectively reducing racial disproportionality. CA and our partners will report on the results of the analysis beginning in January 2012.

### **Timeline:**

Children’s Administration staff completed the assessment; CA’s partners at the University of Washington compiled and analyzed the results and provided a report to CA in January 2012. They presented the analysis in February 2012 to CA staff and the Washington State Racial Disproportionality Advisory Committee. CA will develop next step recommendations by spring 2012.

## **Recommendation J: Implement a Racial Equity Impact Analysis Tool**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“DSHS, Office of Superintendent of Public Instruction (OSPI), relevant legislative committees and staff, relevant judicial committees and staff should use this tool to review all policies and practices. The policy staff of legislative, judicial, and executive branch agencies, including DSHS, should be trained in the use of a tool that assesses the racial disproportionality impact of legislation, administrative policies, practices and procedures. These agencies should be required to apply the tool. The Applied Research Center has developed an analysis tool that is currently used in the child welfare system in Ramsey County, Minnesota.”

### **Status:**

In June 2011, Children’s Administration provided a daylong training to CA leadership, policy developers, disproportionality staff and policy reviewers on the Racial Equity Impact Analysis Tool. The Administration collaborated with the Annie E. Casey Foundation and Community Development Associates (CDA) to develop and facilitate the training. The purpose of the training is to increase the understanding of racism and disproportionality, and explain and practice how to use the tool when developing CA policy and procedures. The tool can also be used when making decisions affecting children and families.

Children’s Administration is working with CDA to determine the need for additional classroom training. In lieu of a day-long training for employees, headquarters staff and the regional disproportionality leads are working together to create training materials to use at various levels of the administration. CA staff will develop a plan for leadership approval to use the training materials and other methods to embed the Racial Equity Impact Analysis Tool in our everyday work.

### **Timeline:**

CA will integrate the tool into everyday use and provide additional training in the second half of CY2012 on the Racial Equity Impact Analysis Tool.



## **Recommendation K: In-Home Community Based Services**

Recommendation from the Washington State Racial Disproportionality Advisory Committee Remediation Plan, dated December 2008:

“Explore Implementation of in-home, community based services that will keep children safe and reduce the need for out-of home placement.”

### **Status:**

Children’s Administration believes implementing in-home community based services is best practice. CA planned to use the implementation of Performance Based Contracting for Services as the vehicle to increase these in-home services for the children and families we serve. CA released a Request for Proposal for Performance Based Contracting for Services in February 2011. The RFP included expectations to increase in-home community-based services to keep children safely in their own homes and prevent out-of-home placement. In May 2011, the Thurston County Superior Court issued a preliminary injunction, which stopped CA from moving forward with implementing Performance Based Contracting for Services. As of March 2012, the injunction remains in place.

CA is also exploring the use of differential response, which advocates the use of more than one method of initial response to reports of child abuse and neglect. This approach focuses on an assessment in the home rather than investigation if the child is not in immediate danger. Differential response can improve family engagement and produce better outcomes for children. CA leaders and staff participated in a Casey Family Programs sponsored Learning Collaborative in December 2011. This collaborative brought together five states, including Washington, to share experiences, provide and receive technical assistance and discuss how using differential response can keep children safely in their homes.

### **Timeline:**

A timeline will be established after Engrossed Second Substitute House Bill 2264, Performance Based Contracts, goes into effect on June 7, 2012.

## Conclusion

Washington state has made many improvements and significant progress towards reducing racial disproportionality in the child welfare system. We completed five remediation recommendations and continue work on the others included in this report. In addition, we are adding new initiatives to continue efforts to reduce racial disproportionality.

In this report, we separated the multiracial category into three smaller categories, Multiracial Native American, Multiracial Black, and Multiracial Other. DSHS staff and WSRDAC members expressed concern that by combining mixed race in one category, we might be masking potential disparities that existed based on physical characteristics. The results suggest different rates of disproportionality for these three categories. In addition, the Administration added four measures looking at placement and permanency outcomes. This additional data will inform efforts and future activities to reduce disproportionality.

The Administration hired a full-time Disproportionality Program Manager in October 2011 who will continue to focus our efforts to address racial disproportionality and disparity in the child welfare system. The program manager will work alongside internal and external stakeholders to increase positive outcomes for the children and families of color we serve.

The Washington State Racial Disproportionality Advisory Committee recommended four new remediation initiatives to the department in November 2011. The department is planning and developing strategies to implement these new recommendations and will report on progress in the January 2013 status report. The new initiatives are:

- Increase recruitment and licensing of caregivers of color
- Increase documentation of ethnic and racial background and tribal affiliation
- Eliminate the use of long-term foster care for children of color age 12 or older
- Make disproportionality awareness training mandatory for CA staff

Work continues with the FamLink Information Management System staff to enhance the ability to capture and report data at the region, unit and worker levels. CA staff continue to investigate and refine data reports and analysis. In 2012, FamLink should have unit and worker level reports available so regional managers, supervisors and social workers can track rates of disproportionality at their local level.