The Department of Children, Youth & Families (DCYF) Strategic Priorities 2020-2025

**MISSION:** Protect children and strengthen families so they flourish.

**VISION:** All Washington’s children and youth grow up safe and healthy – thriving physically, emotionally and educationally, nurtured by family and community.

In this first five-year Strategic Planning cycle, DCYF will focus on five Strategic Priorities – three relate to our intention for children, youth, and families, and two relate to building necessary agency capacity to accomplish the first three. The priorities are grounded in the mission, vision, values and legislative purpose of the new agency. Additionally, the priorities enable the agency to meet its outcome goals for children, youth, and families in Washington, with a specific focus on the populations for which we are responsible.

Resilience, education, and health outcomes for children, youth, and families are often much worse for people of color. DCYF is committed to eliminating disproportionalities in each of these priorities by race/ethnicity, family income, geography, sexual identity/gender expression and disability status. Threaded throughout this plan are specific actions focused on eliminating these disparities. In addition, a more detailed plan from our Race Equity Change team will be available by the end of 2020.

DCYF is committed to a government-to-government approach with Federally Recognized Tribes of Washington State, and to work in collaboration with Recognized American Indian Organizations (RAIOs) and individual American Indians and Alaska Natives to ensure quality and comprehensive service delivery to all Indian children, youth, and families served.

### DCYF AGENCY PRIORITIES

<table>
<thead>
<tr>
<th>Agency Priority</th>
<th>Focused Agency Work To Accomplish Priorities</th>
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</thead>
</table>
| Safely reduce the number/rate of children in out-of-home care by half | • Implement and expand effective secondary prevention  
• Safely reduce placement rates | • Reduce length of stay |
| Create successful transitions into adulthood for youth and young adults in our care | • Stable adult relationships, youth-centered single plan  
• Integrated adolescent support system  
• Mental health/substance use disorder treatment | • Supporting young adults through age 25  
• High school graduation and beyond  
• Stable housing |
| Create high quality integrated B-5 system | • Integrated Pre-K  
• Expand access to affordable high quality child care | • Expand home visiting  
• Expand access to developmental services |
| Improve quality and intention of our practice | • Support staff as our most valuable resource  
• Evaluate and re-design child welfare practice model | • Re-dedication to JR residential therapeutic model (DBT)  
• Supportive management and supervision |
| Improve quality and availability of provider services | • Agency-wide implementation of performance-based contracting  
• Expand access to needed services matched to needs | • De-silo agency services  
• Expand effective linkages and referrals |

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Prevention

We were charged as an agency with preventing harm to children and youth – getting as far upstream as possible. Weaved in this document are investments in services and practices designed to prevent children, youth and families from penetrating deeper into our service array.

FEW
Less than 1% of the total population in the state, but makes up the majority of the children, youth and families DCYF serves. Currently, about half of the agency’s resources and the majority of its staff go toward the top tier of this pyramid.

SOME
“Some” is the middle tier, which may include specific populations identified for services, such as children, youth, and families in poverty.

ALL
The “All” tier represents all children, youth and young adults in Washington State. DCYF’s goal is to move individuals out of higher tiers of service into this lower tier as soon as possible.

DCYF TARGET OUTCOME GOALS AND TARGET POPULATIONS

<table>
<thead>
<tr>
<th>Category</th>
<th>Outcome Goal</th>
<th>DCYF Target Populations</th>
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</thead>
<tbody>
<tr>
<td>Resilience</td>
<td>Youth are supported by healthy relationships with adults</td>
<td>B-5/Child Welfare/ Juvenile Rehabilitation (JR)</td>
</tr>
<tr>
<td></td>
<td>Parents and caregivers are supported to meet the needs of children and youth</td>
<td>B-5/Child Welfare/ JR</td>
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<tr>
<td></td>
<td>Family economic security</td>
<td>Low-income families eligible for child care and B-5 supports</td>
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<tr>
<td>Education</td>
<td>Kindergarten readiness</td>
<td>All Washington children</td>
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<tr>
<td></td>
<td>Youth school engagement</td>
<td>Child Welfare/JR</td>
</tr>
<tr>
<td></td>
<td>High school graduation</td>
<td>Child Welfare/JR</td>
</tr>
<tr>
<td></td>
<td>Healthy birthweight</td>
<td>Pregnant women with Substance Use Disorder, teen moms, other at-risk</td>
</tr>
<tr>
<td>Health</td>
<td>Child/youth development</td>
<td>Children at risk of delay, children with special needs B-5, Child Welfare/JR</td>
</tr>
<tr>
<td></td>
<td>Child/youth mental/behavioral health</td>
<td>B-5/Child Welfare/JR</td>
</tr>
</tbody>
</table>
Safely Reduce the Number/Rate Of Children In Out-Of-Home Care By Half

The first two words of our agency mission are to “Protect Children.” This is at the core of our child welfare practice. The essence of our strategy is to get upstream of the problem with prevention investments, to only remove children and youth from their birth families when there is no other strategy that keeps the child safe, and to be very intentional and careful in our child welfare practice to help build a safer home environment so the child can return or, failing that, quickly find an alternative permanent placement for the child. In our judgment we can, using this strategy, remove fewer children and youth, and have them attain permanent stability more quickly than we currently do, resulting in significantly fewer children and youth in out of home care.

prevent needless entries into foster care

- Re-work our child welfare practice model, initially focusing on high-fidelity, consistent implementation of the safety assessment.
- Increase availability of high quality-services for at-risk families including the array of services available in our Family First Prevention Services Act plan.
- Assess and improve the effectiveness of Family Assessment Response (FAR)/Family Voluntary Services (FVS) models.
- Increase active efforts (as defined by ICWA) to keep children and youth with their families as much as possible in tribal communities.

Reduce Length of Stay

Much of the work to reduce length of stay in foster care must be done in partnership with Tribes, the Attorney General, courts, parents, and others. We will work jointly to:

- Reduce unnecessary delays in court processing.
- Fully license kinship foster parents.
- Reduce adoption/guardianship backlog.
- Speed up home studies to 90 days.

Across the board, reducing the length of time children and youth stay in foster care will also reduce caseloads, improving our ability to do quality work.

Improve Service Quality and Availability

This includes providing visitation that works, access to mental health and substance use disorder treatment for those who need it, expansion of needed placements for high-need and LGBTQ youth, and expansion of evidence-based in-home services. Expansion of needed placement options will include an increase in Behavioral Rehabilitation Services (BRS) availability and collaboration with DSHS to increase the number of CLIP (Children’s Long-term Inpatient Program) beds, both aimed at meeting the needs of children and youth with behavioral health issues or developmental disabilities.
Create Successful Transitions Into Adulthood
For Youth And Young Adults In Our Care

DCYF will promote the education, economic security, and behavioral health of youth exiting foster care and JR in order to ensure youth are prepared for a successful transition to adulthood.

One team, one plan: A successful transition is focused around a youth-centered planning process that prepares youth for adulthood through education, employment, housing, life skills, strong relationships and appropriate behavioral health treatment.

FOUR-YEAR HIGH SCHOOL GRADUATION RATE

Mental Health and Substance Use Disorder Treatment
We know that youth in our care on average experience worse behavioral health the longer they are in our systems. In our JR facilities, we are currently only treating about one third of youth with a SUD treatment need. We will improve and re-focus our treatment models and substantially improve access to effective mental health and SUD treatment throughout the state in both child welfare and juvenile rehabilitation.

Support Young Adults to Age 25
Build adequate education and vocational programming for young adults now in the juvenile rehabilitation system, including adequate staffing at facilities to ensure safety. Expand community capacity instead of institutional.

High School Graduation and Beyond
Prepare young people exiting JR or foster care for high school graduation and post-secondary access or vocational training at the same rate as non-system-involved youth.

- Institutional education must be adequately funded and delivered in an effective way.
- Expand Treehouse education advocates for foster youth statewide, to cover all middle and high school youth and youth involved with JR.
- Access to vocational education.

Stable Adult Relationships
Promote healthy relationships with adults for system-involved youth by increasing school engagement, decreasing the number of absences from school, and eliminating needless placement changes.

Integrated Adolescent Support System
DCYF's Adolescent Division consolidates transition service availability and aids in meaningful navigation of aftercare supports, and will lead creation of an integrated DCYF adolescent support system. This division will build our agency's capability to connect adolescents and young adults with education and employment opportunities, stable and affordable housing, life skills critical to a successful transition into adulthood and engagement and mentorship opportunities to foster wellbeing and good mental health.

Stable Housing
With youth in our care exiting foster care and JR, we will make effective plans to get these youth access to affordable, sustainable and supportive housing programs. In addition, providing youth with independent living skills training and supports will help them successfully re-enter the community as opposed to re-entering our systems.
Create High Quality Integrated Birth-To-Five System

**Integrated Pre-K**

Through close collaboration with partners across the state, DCYF will create an integrated preschool model that will allow all children to access high-quality pre-school experiences that are inclusive and blend funding from multiple existing funding streams. This model will mix ECEAP, transitional kindergarten, developmental pre-school, Head Start, local contributions and private co-pay to exist as integrated classrooms in both K-12 and community settings. The integrated model will be built on the quality foundations of Early Achievers and ECEAP, and will promote collaboration among providers to respond to the various needs of children and families.

**Expand Access to Affordable, High Quality Child Care**

High-quality, affordable child care should be available in all geographic areas, be culturally and linguistically relevant and should score at least a level 3 on the Early Achievers scale. To ensure healthy development in the most critical stage of development, and to support the economic security of families with young children, we will focus specifically on high quality infant and toddler care.

The economics of childcare are complex. Rates need to be adequate to allow providers to hire, train, and retain high-quality staff, but higher rates make childcare even more difficult for families to afford. We must support our providers with adequate rates and build a subsidy system that eliminates the large cliff effects that block families from economic mobility today. We will need additional funds in order to implement this as desired.

**Support Early Learning Providers**

Additionally, implementing a shared services model will provide important comprehensive services and business supports for providers in early learning settings across the state. Providing mental health consultation, support for providers serving children who have experienced extreme trauma, and targeting our economic mobility supports currently offered in ECEAP to only those families needing it will enable providers to meet the needs of families and support resilience and educational growth in children.

**Home Visiting**

In partnership with the Health Care Authority, we must build a system of “light-touch” home visiting in all hospitals in Washington. An effective referral system will connect families to services they may specifically need.

Expand access to our more intensive home visiting models for vulnerable families with young children. These models support the development of early healthy parent-child relationships, healthy parental choices to support their child’s development and kindergarten readiness.

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**KINDERGARTEN READINESS, 2020**

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<tbody>
<tr>
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<td>56%</td>
<td>53%</td>
<td>44%</td>
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<td>44%</td>
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**Developmental Services**

Expand referrals from child welfare and community sources to Early Support for Infants and Toddlers (ESIT) to reduce developmental delays in children who have experienced trauma.
Improve Quality and Intention Of Our Practice

Since most of the children and youth in the top tier of the pyramid have an assigned caseworker, much of the success we will have improving outcomes for children and youth depends on the capabilities of our caseworkers. It is our responsibility to train staff to deliver effective services, provide them the support they will need to do their jobs, and foster a culture that is supportive and not based in fear. For the services that we deliver directly, we will improve the intentionality of our work. Having clear, precise models of how we run programs and deliver services, and monitoring our fidelity to the model with formal quality assurance processes, will help us achieve our top three priorities.

Support Staff as our Most Valuable Resource

DCYF recognizes that our 4,000+ staff are the most valuable resource we have for creating the improvement in outcomes we seek for the children, youth, and families we serve. Supporting employees means creating a positive culture where staff are supported to do their best work and to be present with those they serve. It means supportive training and supervision aligned with our practice model and expectations, such as in JR parole, where we want to support the effective implementation of Functional Family Parole. This includes providing supports for trauma-informed/healing-centered approaches that will also benefit our staff, who often experience secondary trauma from working with traumatized children, youth, and families.

Evaluate and Refine Child Welfare Practice Model

Our child welfare practice model has many effective components, but needs refreshing so we can safely reduce the number of children and youth in out-of-home care. We will evaluate and assess our practice model and refine it incrementally to achieve clearer intention, starting with examining of our safety framework and assessment. Incremental implementation of Comprehensive Child Welfare Information System (CCWIS) upgrades will support this work, in addition to policy reduction and simplification so we have a practice model that can be followed effectively by caseworkers.

JR Residential Therapy Model (DBT)

We will build off of the 2019 “Evaluation of Dialectical Behavioral Therapy in Washington State’s Juvenile Rehabilitation” [www.dcyf.wa.gov/sites/default/files/pdf/reports/Evaluation-DBT-JR.pdf] report by re-focusing on DBT, modified to build greater capability of improving youth mental health outcomes in our JR institutions and community facilities. This will require training and staff resources dedicated to each unit to ensure a consistent standard across units. It will also be necessary to staff the program adequately to support the whole population, including older youth now in our care up to 25 years old.

Supportive Management and Supervision

Creating a supportive environment for staff must involve an intentional focus on supporting our supervisors’ ability to provide quality oversight and support to their staff, and an understanding that a fear-based culture is a barrier to quality improvements in our practice. We will shift to a supervisory model that enhances supervisors’ capacity to provide clinical supervision and coach their casework staff to strengthen their skills. Shifting towards a supportive management culture will improve workforce satisfaction and retention, leading to more consistent service delivery and quality for children, youth, and families.
Improve Quality and Availability Of Provider Services

Almost all of the services delivered in the bottom two tiers of the pyramid are provided by external partners and third-party providers. We will focus on the quality and availability of providers and making appropriate referrals will help us deliver the right services to children, youth, and families in need.

Quality

Performance-based contracts (PBC) will ensure state resources are directed toward high-performing contractors and support all contractors to continually improve their services. By July 1, 2023, all DCYF contracts for client services will meet service, quality and outcome standards. DCYF’s PBC framework includes attention to provider capacity to respond to the various physical, social, economic and cultural conditions that impact service delivery.

Early Achievers, DCYF’s Quality Rating and Improvement System (QRIS) in child care, will continue to drive practice improvements and consistency. DYCF is also requiring all BRS facilities and non-family group homes to meet Qualified Residential Treatment Program (QRTP) requirements to remain contracted. QRTP standards will ensure contractors engage in work, such as using a trauma-informed treatment model, having the ability to implement identified treatment, providing reflective supervision, having licensed and available clinic staff and being appropriately accredited.

Availability

DCYF must curate an array of providers to ensure that critical services are available in all geographic areas throughout the state. We will regularly assess the population-level needs of the children, youth, and families we are serving, identify effective services, map the availability of services and work with local communities to build new providers in service access deserts. Service delivery in rural areas of the state may require alternative approaches, such as telemedicine, video, or other non-place based technological service delivery methods. Availability must refer not only to access to services across geographic areas, but also culturally relevant and appropriate services and providers that match the racial, ethnic and linguistic backgrounds of our clients.

De-Silo Agency Services

We will eliminate unnecessary barriers to staff referring children, youth, and families they serve in one part of the agency to helpful services in another part of the agency. This will involve making changes in contracting and how we organize programs inside the agency, as well as developing supportive referral networks.

Partnerships

To deliver services at the population level, we work closely with other agencies and community partners. Effectively delivering services in conjunction with other agencies (like OSPI, HCA and DSHS) requires intentional collaboration, coordinated planning and aligning our work and priorities. We will continue to focus on measuring and improving the quality of our partners’ work in these collaborations, intervening to improve outcomes for those we serve.

Effective Linkages and Referrals

Coordinate referral systems for families available in all 39 counties. Ensure that families can find needed services (childcare, help with family dynamics issues, developmental screening…) and that there are effective warm handoffs between services statewide. We are exploring the Help Me Grow™ model in several trials.

Workforce

Population-wide services like the early learning systems described here cannot exist without a high quality, trained, and stable workforce. We will continue our efforts to provide high-quality training and certification programs in an effective way.
Cross-Cutting Themes

Trauma-Informed Approach
Weaving a trauma-informed and healing-centered approach through all our work is essential to the health and wellbeing of the children, youth, and families we serve, as well as our staff. All staff interacting with children, youth, and families should receive professional development on trauma-informed care. Staff support (mentioned above), including building a better understanding of how our staff experience secondary trauma, will help lead to increased workforce wellbeing and retention — a component of providing consistent, high-quality care that we are challenged with today. Improving staff retention will help us to reduce the number of unnecessary interruptions or transitions in care, which we know have negative impacts on educational outcomes and mental/behavioral health of children and youth.

Integration And Alignment Of Services
HB 1661 directed DCYF to integrate and align services to achieve the best possible outcomes for children and youth; we were not envisioned to remain three separate administrations within one large agency. De-siloing services, developing common contracting approaches and resourcing the new adolescent division described above are examples of ways to do this. Additionally, we will remove barriers and increase supports so that staff in different parts of the agency can learn about the work of their new colleagues and develop new ways of working together.

Quality Improvement (QI)
Building a system that supports improvement in quality that is intentional, continuous and incremental is necessary to accomplish our priorities throughout the organization. Right now the agency has quality improvement activities across our different services lines and programs with varying capacity. We will build on the DCYF Baseline Performance Assessment (www.dcyf.wa.gov/sites/default/files/pdf/reports/DCYFBaselinePerformanceAssessment-summary.pdf), completed for us by Chapin Hall in 2019 to strengthen quality improvement systems across the agency and establish agency-wide standards for quality improvement, minimum resource requirements and an agency-wide QI community of practice.

Sustainability
All DCYF’s implementation plans will be developed and approved with the goal of implementing in a sustainable way. We know from implementation of past best practices that the agencies of origin are able to effectively stand up new programs and services. Doing so in a way that is sustainable requires focused attention to budget considerations, alignment so that capacity built in part of the system is leveraged to produce benefits in others, and attention to scaling in implementation. Our intent is to build a system that is focused and resilient, to meet the needs of those we serve today, and for years to come.
### Monitoring Plan

As a part of its accountability function, DCYF’s Office of Innovation, Alignment, and Accountability (OIAA), in collaboration with DCYF program leaders, will establish targets and metrics for measuring and reporting on each of the five agency priorities. OIAA envisions that each agency priority will have a primary outcome indicator, one or more balancing indicators to help monitor potential unintended consequences, and a set of indicators associated with the drivers that lead to the outcome. Although much work remains to develop the actual indicators, this division of indicator type is illustrated in the table below. Driver indicators are the least well defined at this time, and OIAA will continue to work to identify the true drivers of the outcomes of interest and develop monitoring indicators. To the extent possible, all indicators will be reported as trends over time, and will be disaggregated by race/ethnicity, geography, and family income.

<table>
<thead>
<tr>
<th>Agency Priority</th>
<th>Outcome Indicators</th>
<th>Balancing Indicators</th>
<th>Driver Indicators (Potential)</th>
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<tbody>
<tr>
<td><strong>INTENTION</strong></td>
<td>Safely reduce the number/rate of children and youth in out-of-home care by half</td>
<td>Number/rate of children and youth in out-of-home care, by age</td>
<td>Re-entry rates (safety) Extended foster care utilization (avoid premature exit)</td>
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<tr>
<td></td>
<td>Create successful transitions into adulthood for youth and young adults in our care</td>
<td>High school graduation rates Workforce participation following exit</td>
<td>5-year graduation rates Rates of homelessness following discharge</td>
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<tr>
<td></td>
<td>Create high quality integrated B-5 system</td>
<td>Percentage of 3-4 year olds participating in high quality preschool Improvement in access to high quality child care</td>
<td>Quality ratings of new expanded preschool</td>
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<tr>
<td><strong>CAPACITY</strong></td>
<td>Improve quality and intention of our practice</td>
<td>Practice indicators (TBD) Balancing practice indicators (TBD)</td>
<td>Caseload Turnover Quality of supervision</td>
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<td></td>
<td>Improve quality and availability of provider services</td>
<td>Client outcome metrics from PBC Improvement in access to high quality services</td>
<td>Serving most vulnerable (avoid skimming)</td>
</tr>
</tbody>
</table>

The initial outcome and balancing indicators will be developed and finalized in CY 2020, and will be posted as a part of our Agency Performance Dashboard externally with the December 2020 revision. As OIAA develops and validates the driver indicators, those will be posted as well.
Strategic Plan Supplemental Resources

For more information related to DCYF Strategic Priorities, go to: www.dcyf.wa.gov/practice/strategic-plan/resources.