



**NORTH DAKOTA'S CHILD AND FAMILY
SERVICES PLAN
FFY 2015 – 2019**

**Administered by:
North Dakota Department of Human Services
Children & Family Services Division
Shari Doe, Division Director**

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I. GENERAL INFORMATION

The North Dakota Department of Human Services has been designated by the Governor of North Dakota as the single state agency responsible for administering Title IV-B of the Social Security Act, Child Welfare Services, CAPTA, and the Chafee Foster Care Independence Program Plan. The Children and Family Services Division of the North Dakota Department of Human Services has administrative responsibility for the Child and Family Services Plan, the policies and procedures relating to children and families, and for program supervision and technical assistance for the delivery of public child welfare services.

The Children and Family Services (CFS) Division administers child protection services, foster care services, adoption services and family preservation services. These include child abuse and neglect prevention and intervention, Children's Trust Fund, Community-Based Grants for the Prevention of Child Abuse and Neglect (CBCAP), Child Fatality Review Panel, Institutional Abuse, Interstate Compact on the Placement of Children, Refugee Services, Independent Living Services, Subsidized Guardianship, Subsidized Adoption, services to pregnant teens, Parent Aide services, Prime Time Child Care services, Respite Care services, Safety/Permanency Funds, Intensive In-Home Family Therapy services, Family Group Decision Making (FGDM), Family Team Decision Making (FTDM), Early Childcare Services, and Head Start. A copy of the CFSP will be placed on the Department's website along with the other key reports. Upon final acceptance of this report, the information will be available at:

<http://www.nd.gov/dhs/info/pubs/family.html>. Name and Information of State CFSP
Contact:

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There are 48 local county social service boards providing child welfare services in North Dakota, with one district made up of 4 counties (Dakota Central) and one district consisting of 2 counties (Lakes District). The child welfare delivery system is county-administered and state-supervised. The county child welfare personnel are county employees and operate child welfare programs in accordance with state policy, direction, law, regulation and contracts.

The eight Human Service Centers are located in the primary economic, medical and business centers of the state. The 1981 North Dakota Legislative Assembly created these regional human service centers. Each Human Service Center has a Regional Representative/Supervisor who serves as the liaison between the counties and the CFS Division. These representatives provide direction and program supervision of child welfare services provided by the county social service agencies.

The target populations for the CFSP delivery system are identified as follows:

- Parents in need of parent education and family support;
- Children who are suspected of being abused or neglected and their families;
- Children who have been adjudicated to be deprived, delinquent, or unruly and who are in need of foster care and their families;
- Children from the foster care system who are free for adoption (or an adoption is planned) and their adoptive families;
- Children who are at risk of becoming any of the above populations;
- Children who choose to sign themselves back into foster care until the age of 21; and
- Former foster youth who have aged out of care.

Please see [ATTACHMENT A](#) for the organizational chart.

Vision

Safe Children - Strong Families

Mission

To work together to achieve safety, permanency, and well-being for children and families by engaging and educating communities and systems to jointly provide services.

Values & Principles

- Safety of children is paramount
- Unconditional commitment to working with families and children is provided
- Families are full and active partners and colleagues
- Services are culturally responsive
- The process is team driven
- Services focus on strengths and competencies of families, not on deficiencies and problems
- Service plans are outcome-based
- Services and plans are individualized to meet the needs of children and families
- Resources and supports, both in and out of the family, are utilized for solutions
- Family engagement is essential to achieving safety, permanency and well-being for children
- Workforce development and training are critical for the efficient and effective delivery of child welfare services

II. NORTH DAKOTA ASSESSMENT OF PERFORMANCE

Child and Family Outcomes

GENERAL INFORMATION:

Federal Measures: North Dakota submits NCANDS and AFCARS data per the required federal timeframes and information on the state's CFSR Data Profile is included below. The data for both reports is derived from FRAME and CCWIPS.

Case Reviews: North Dakota has utilized the Federal Child & Family Services Review Instrument (v. 2008) as our Quality Assurance tool since the federal review in 2008. North Dakota's "CFSR Year" is May – June. A data analyst from Decision Support Services, a division of the Department of Human Services, is responsible to complete the random case draws using FRAME. Below is general information regarding the cases reviewed each year:

- May 2010-April 2011: The 67 cases reviewed were comprised of 55% foster care (one DJS case per region) and 45% in-home. Seventeen (25%) of the cases were from the largest metropolitan area in the state, Cass County.
- May 2011-April 2012: The 71 cases reviewed were comprised of 55% foster care (one DJS case per region) and 45% in-home. Seventeen (24%) of the cases were from the largest metropolitan area in the state, Cass County.
- May 2012-April 2013: The 71 cases reviewed were comprised of 55% foster care (one DJS case per region) and 45% in-home. Seventeen (24%) of the cases were from the largest metropolitan area in the state, Cass County. Four of the cases reviewed were tribal child welfare cases (one from each ND tribe).
- May 2013-April 2014: The 68 cases reviewed were comprised of 56% foster care (one DJS case per region) and 44% in-home. Seventeen (25%) of the cases were from the largest metropolitan area in the state, Cass County. Four of the cases reviewed were tribal child welfare cases (one from each ND tribe).

Stakeholder Meetings: North Dakota Stakeholder meetings were convened with caseworkers, court systems, administrators, foster parents, youth, education personnel, constituents/parents, and community providers in 2 regions per year according to the following schedule:

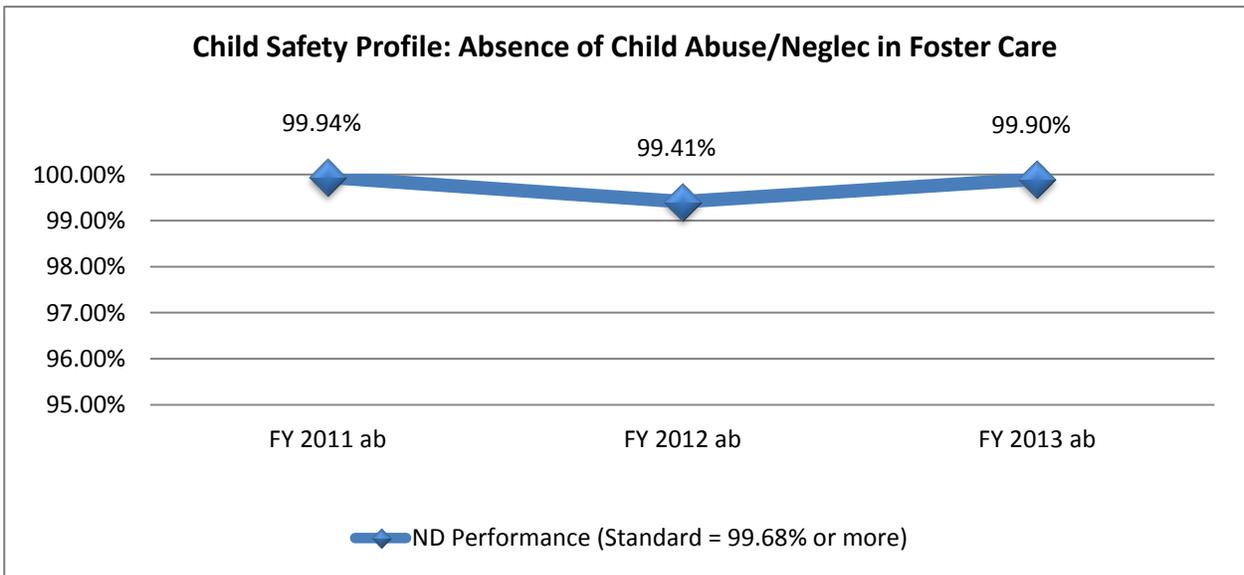
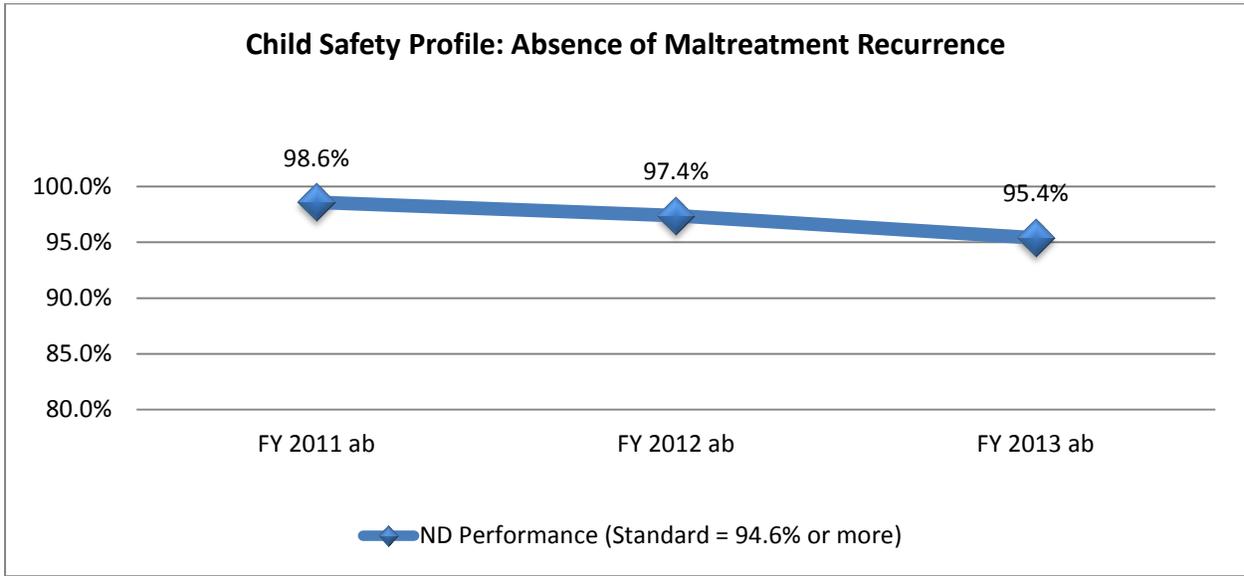
- May 2010-April 2011: Region V (Fargo) and Region VIII (Dickinson)
- May 2011-April 2012: Region II (Minot) and Region IV (Grand Forks)
- May 2012-April 2013: Region III (Devils Lake) and Region VII (Bismarck)
- May 2013-April 2014: Region I (Williston) and Region VI (Jamestown)

Comments received were documented and shared regionally and statewide through annual reports. Additionally, in preparation for the 2015-2019 Child & Family Services Plan, strategic planning sessions were held in February and March of 2014, to solicit stakeholder feedback from a statewide group representing state, county, juvenile court, DJS, tribal child welfare, residential child care facilities, psychiatric residential treatment facilities, and private providers. The feedback received from this group was also

documented and shared. The information from both Stakeholder and Strategic Planning meetings are included in this report at the conclusion of each section.

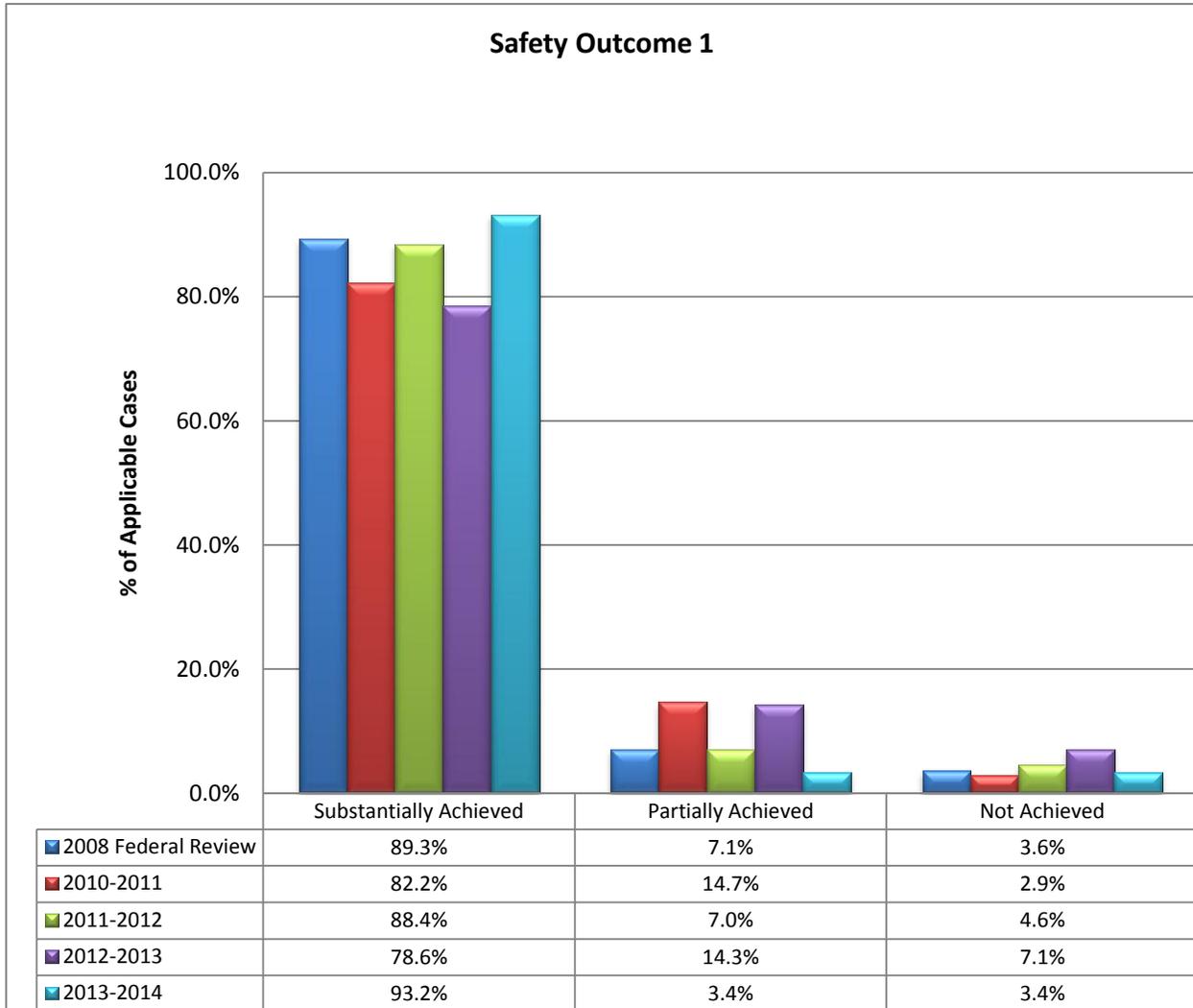
1. SAFETY

A. Federal Safety Measures: North Dakota has consistently met or exceeded the national standards for both safety measures.

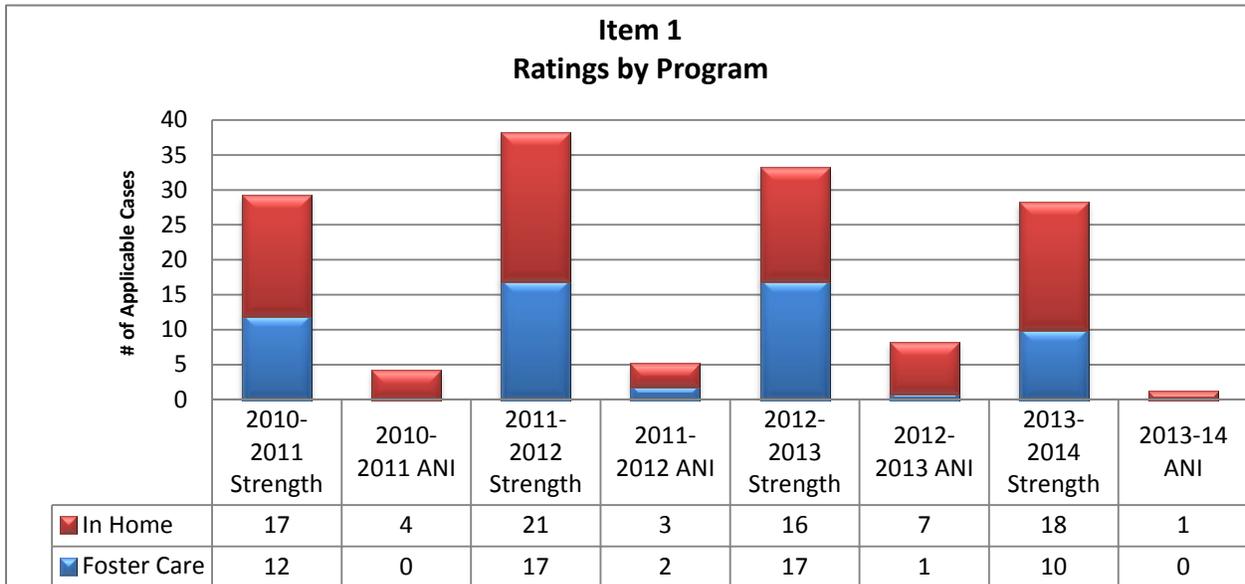
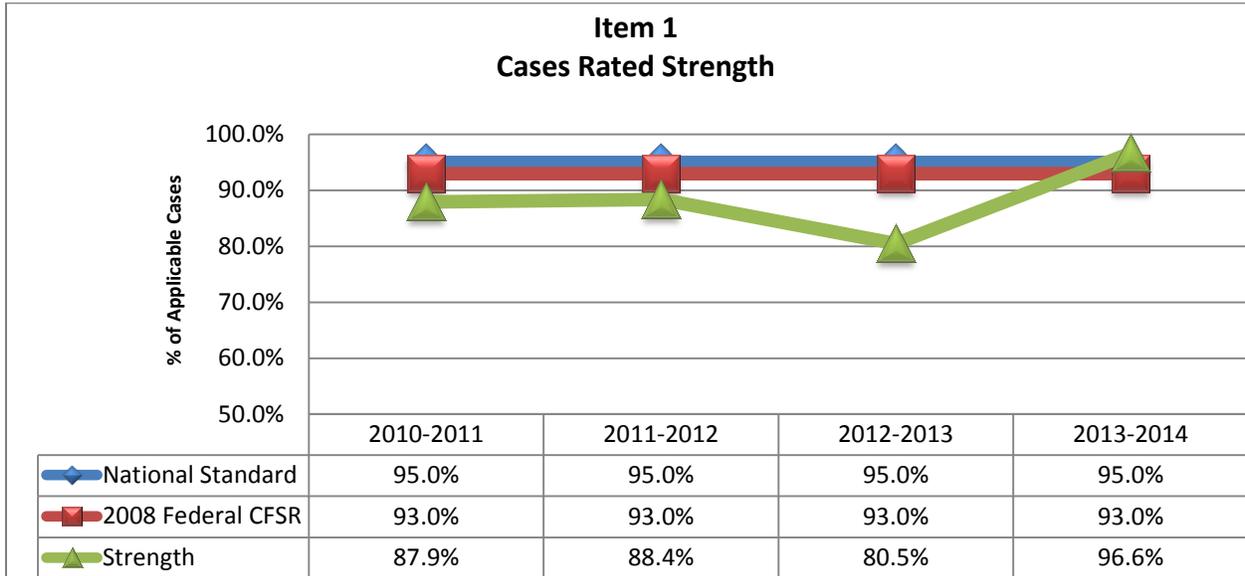


B. ND Case Review Data:

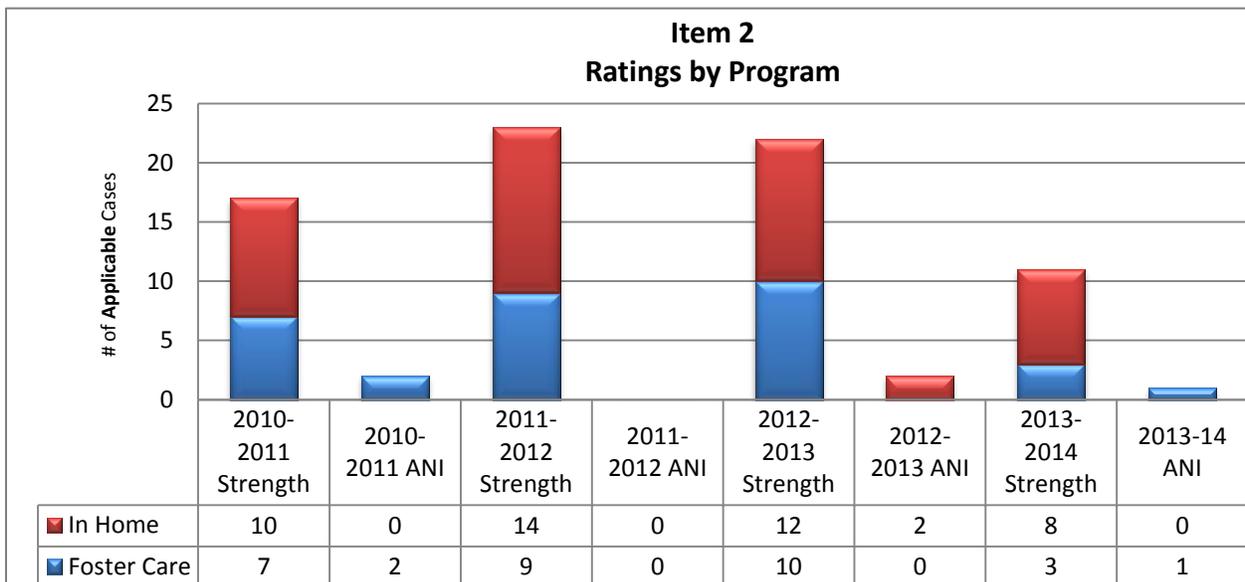
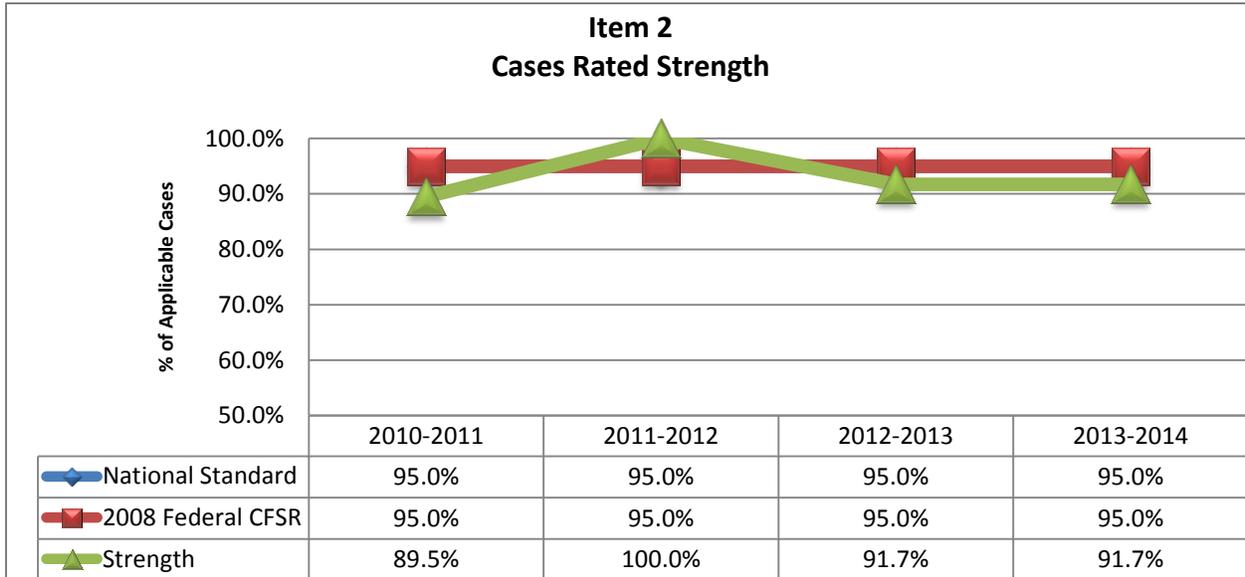
1. Safety Outcome 1: Children are first and foremost protected from abuse and neglect



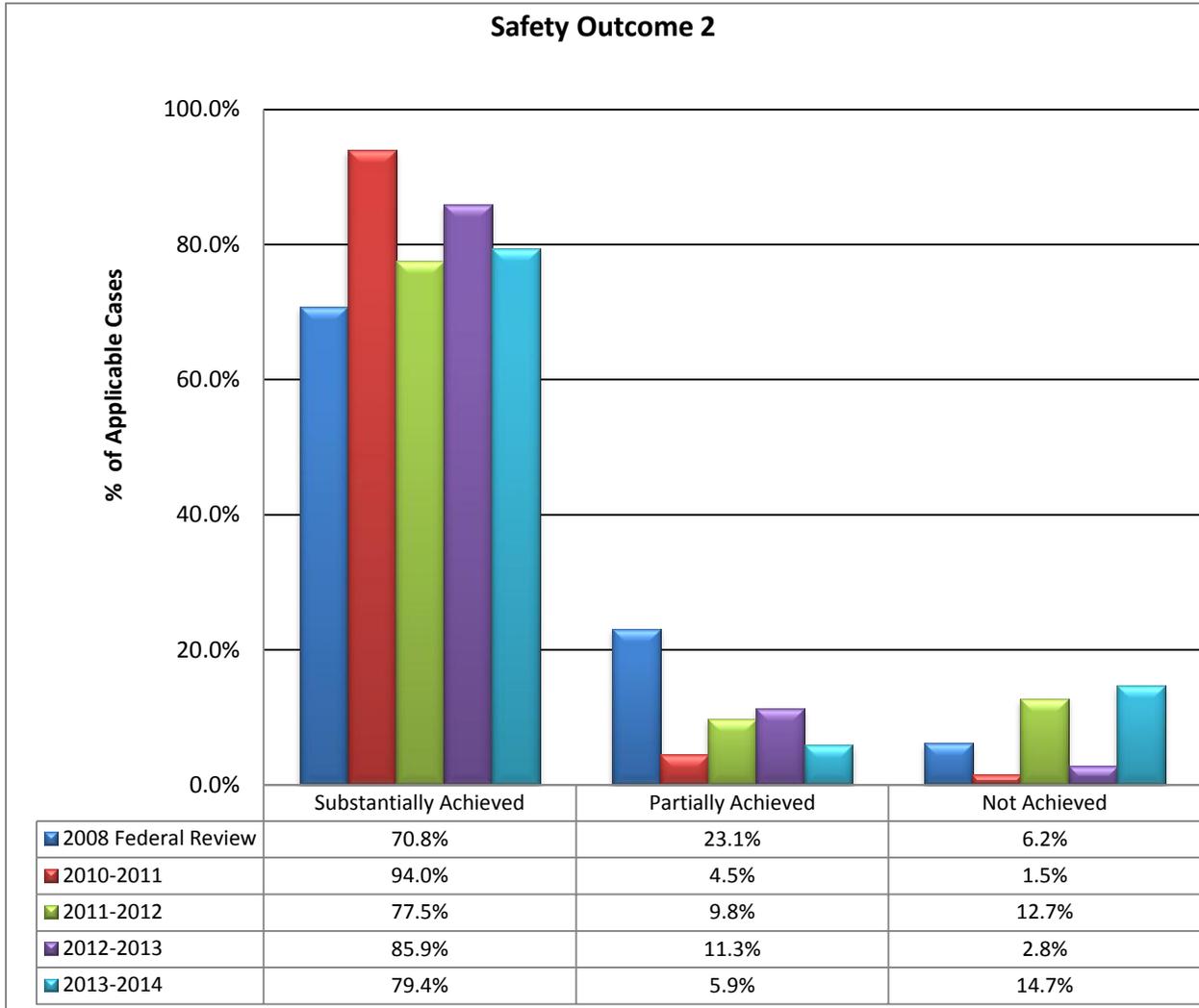
- a. **Item 1, timeliness of initiating investigations of reports of child maltreatment:** This item was applicable in 146 of the cases reviewed and in 128 (88%) of the cases the item was rated as a Strength.



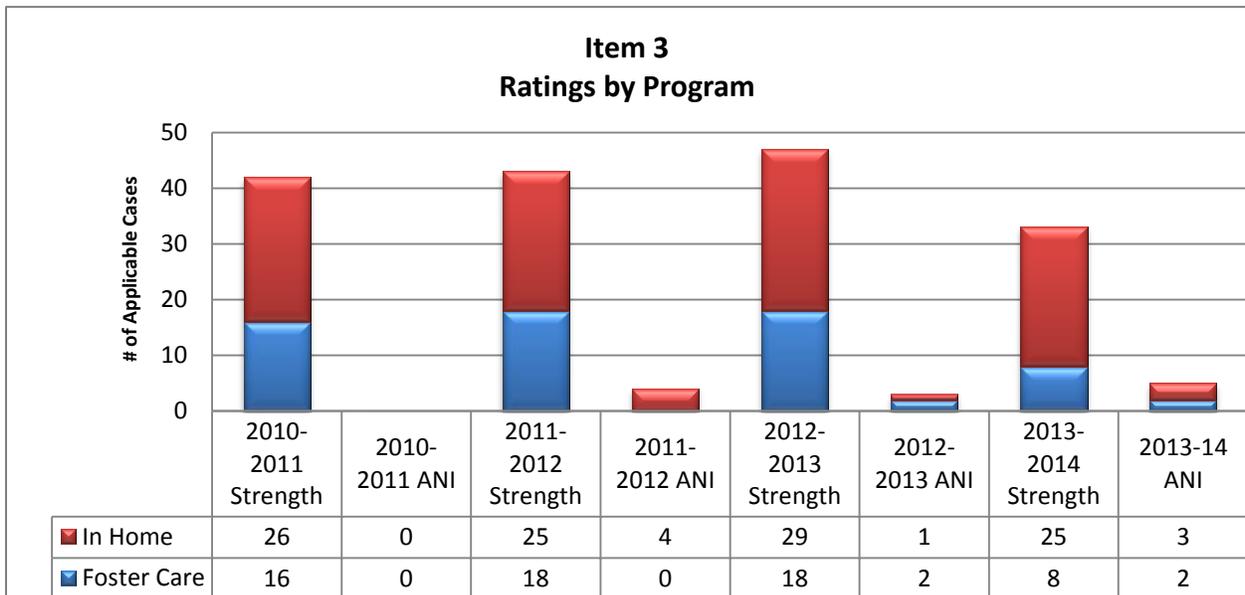
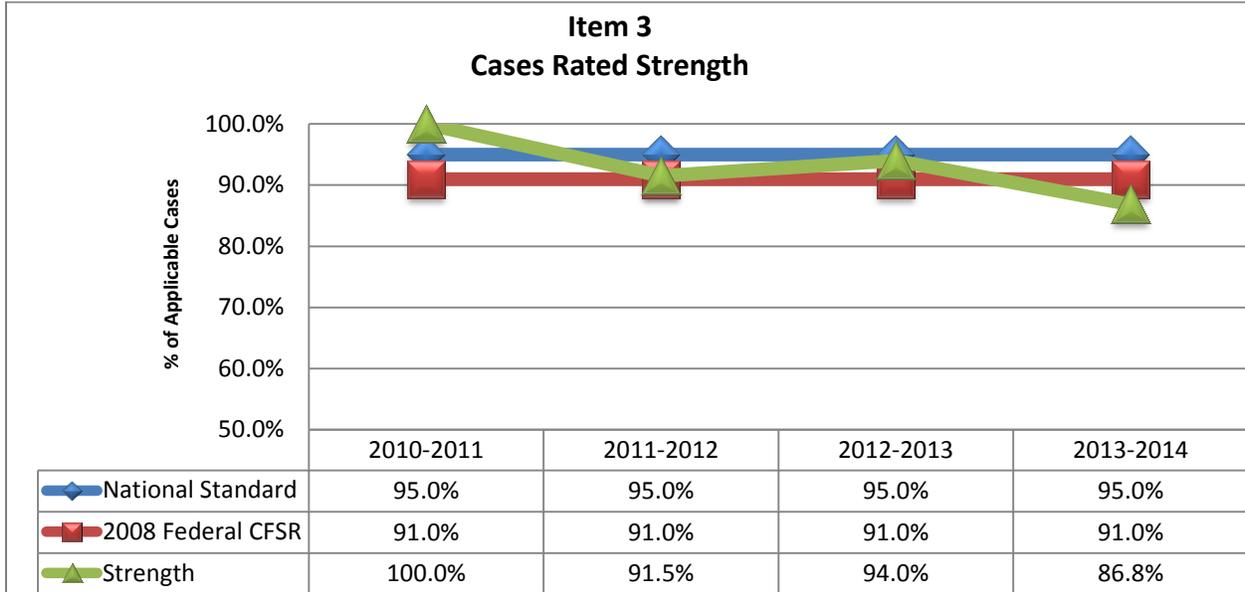
- b. Item 2, repeat maltreatment:** This item was not applicable in most cases reviewed; therefore, the data is based on a small sample size. Of the 78 applicable cases reviewed over the past four years, 73 (94%) received a rating of Strength.



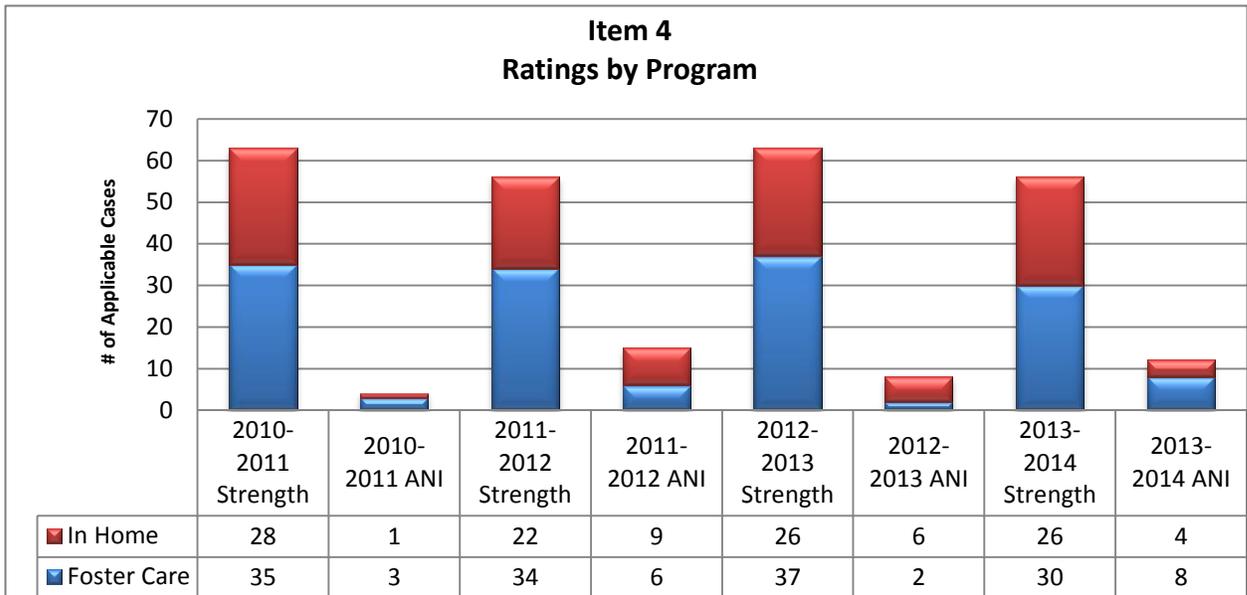
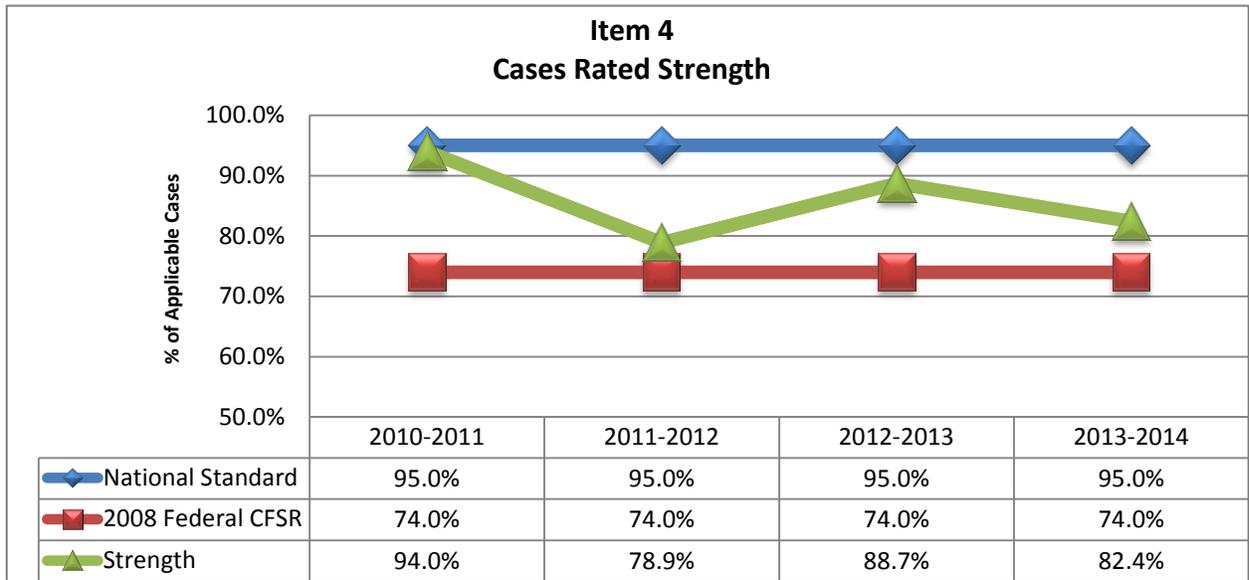
2. Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate



- a. **Item 3, services to the family to protect the child(ren) in the home and prevent removal or re-entry into foster care:** Of the 160 applicable cases reviewed, 148 (93%) received a rating of Strength.



b. Item 4, risk assessment and safety management: Of the 277 cases reviewed since May 2010, 238 (86%) received a rating of Strength. Of the 122 in-home cases, 102 (84%) received a rating of Strength. Of the 155 foster care cases, 136 (88%) received a rating of Strength.

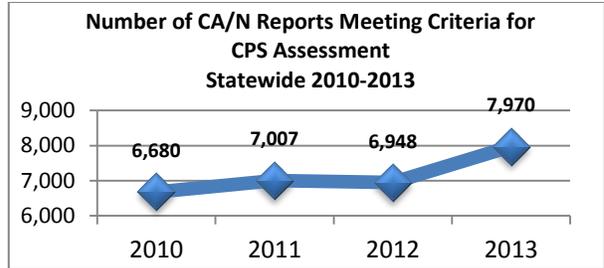
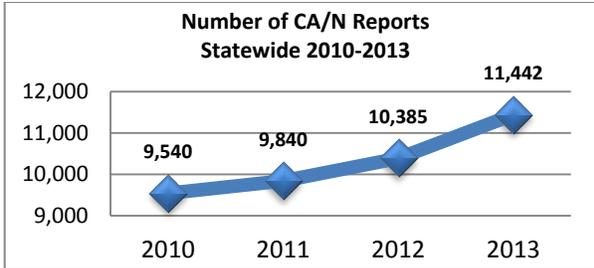


C. Safety: Practice & Systemic Strengths

- In the great majority of cases reviewed, CPS state policy time frames were followed and the work was well-documented.
- Stakeholder groups reported county agencies are very quick to respond to CPS reports and ensure children are safe.
- Online child abuse/neglect mandated reporter training made available to the public, through partnership between ND DHS and Prevent Child Abuse ND has been well received by law enforcement, education personnel, medical professionals, clergy, child care professionals and other mandated and non-mandated reporters. An estimated average of 50 professionals per month register for and complete the training.
- The initial assessment of risk/safety is a noted Strength in ND child welfare practice.

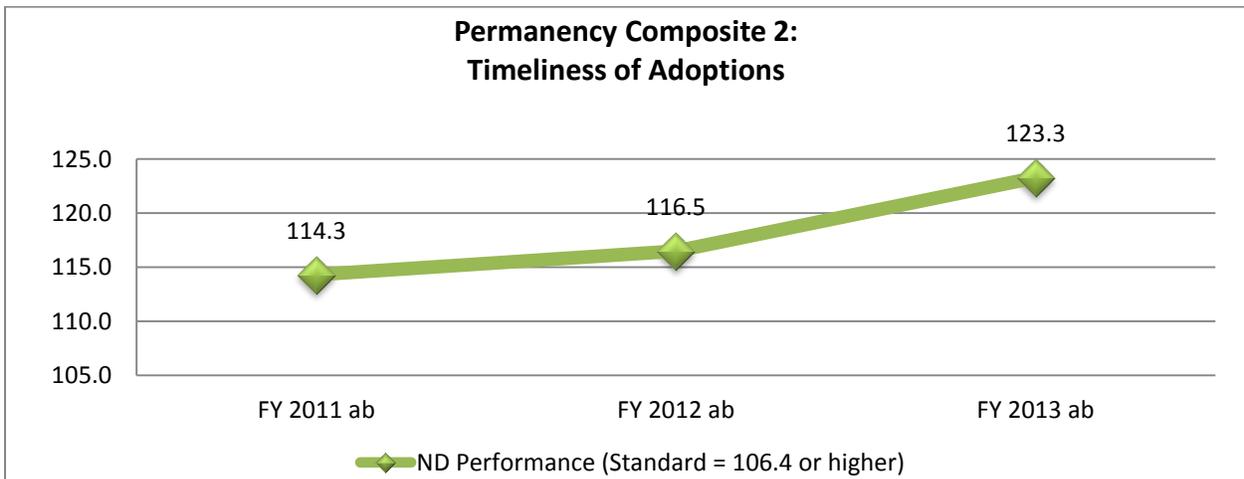
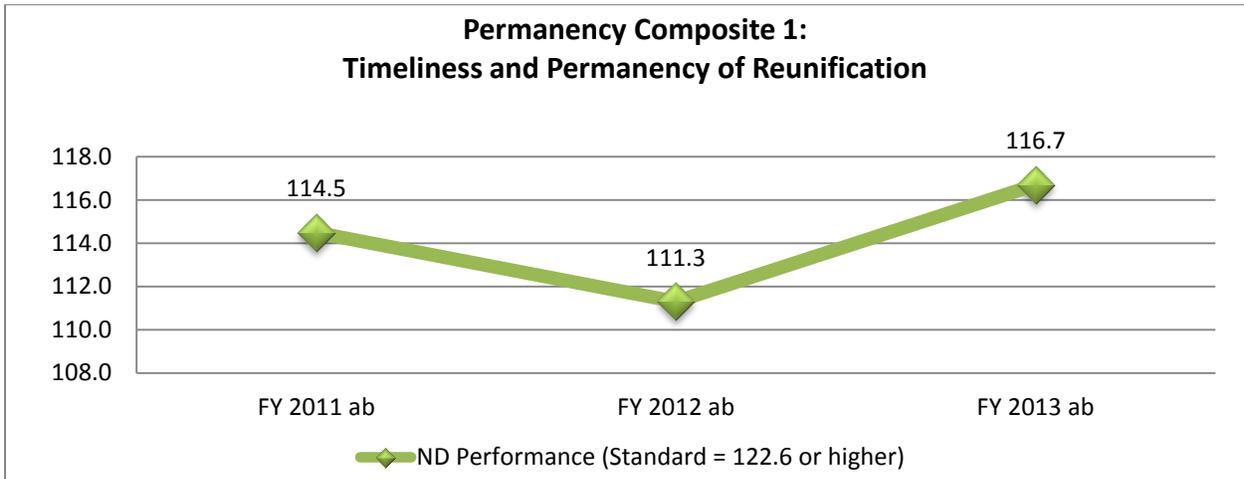
D. Safety: Practice & Systemic Concerns

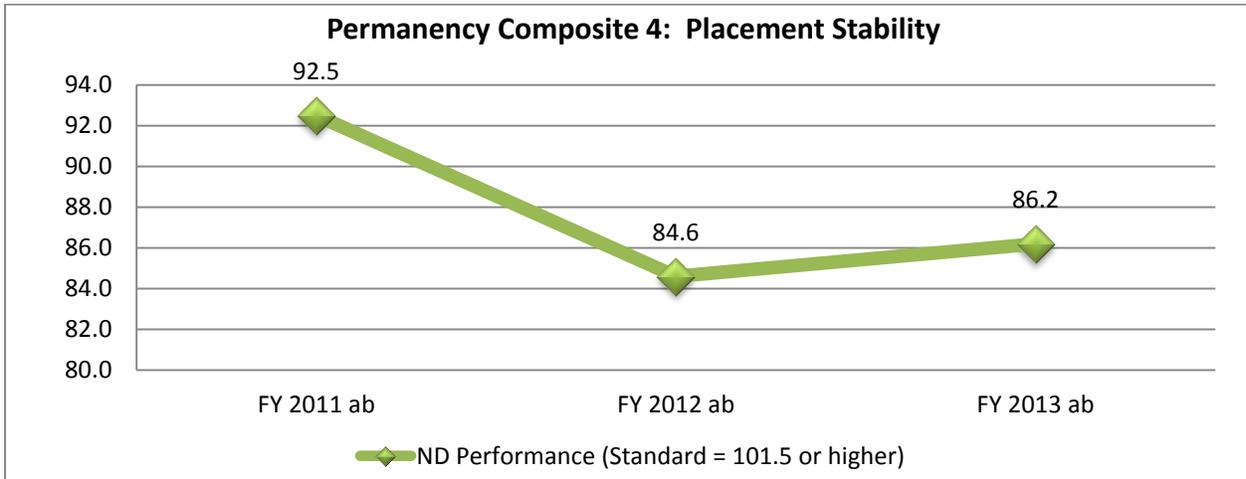
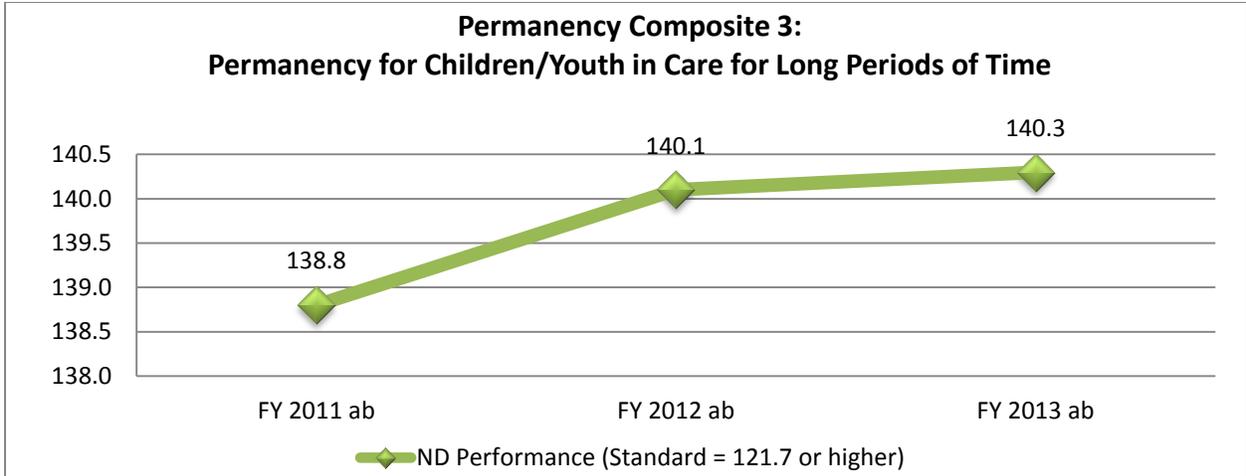
- Item 4: cases generally receive an ANI rating due to lack of concerted efforts to assess risk/safety on an ongoing basis. This practice challenge is evident in both foster care and in-home cases. Through the second round PIP, North Dakota provided additional training to child welfare case managers and partner agencies to address this challenge. CFS Administrators have established program policy related to ongoing assessments of risk/safety as well as safety planning. Practice has improved since 2008, and the state recognizes improvements need to continue.
- Due to unprecedented growth in ND related to energy production, particularly in the western half of the state, CPS workers compromise their own safety at times to locate children and families, and law enforcement is often unavailable to assist due to their increased workload.
- Large CPS caseloads in both county and tribal agencies were noted by case manager and administrator stakeholder groups.
- Population growth, along with other factors such as improved mandated reporter training, contributed to a 20% increase in reports of suspected child abuse/neglect since 2010. While a 20% increase in reports meeting criteria for CPS assessments has been noted, the number of full assessments has remained stable. Contributing to this increase is the fact that multiple reports for the same case are included in a single CPS assessment, and policy that allows some assessments to be terminated in progress because of new information related to the case or a change in jurisdiction. See NCANDS data trends below.



2. PERMANENCY

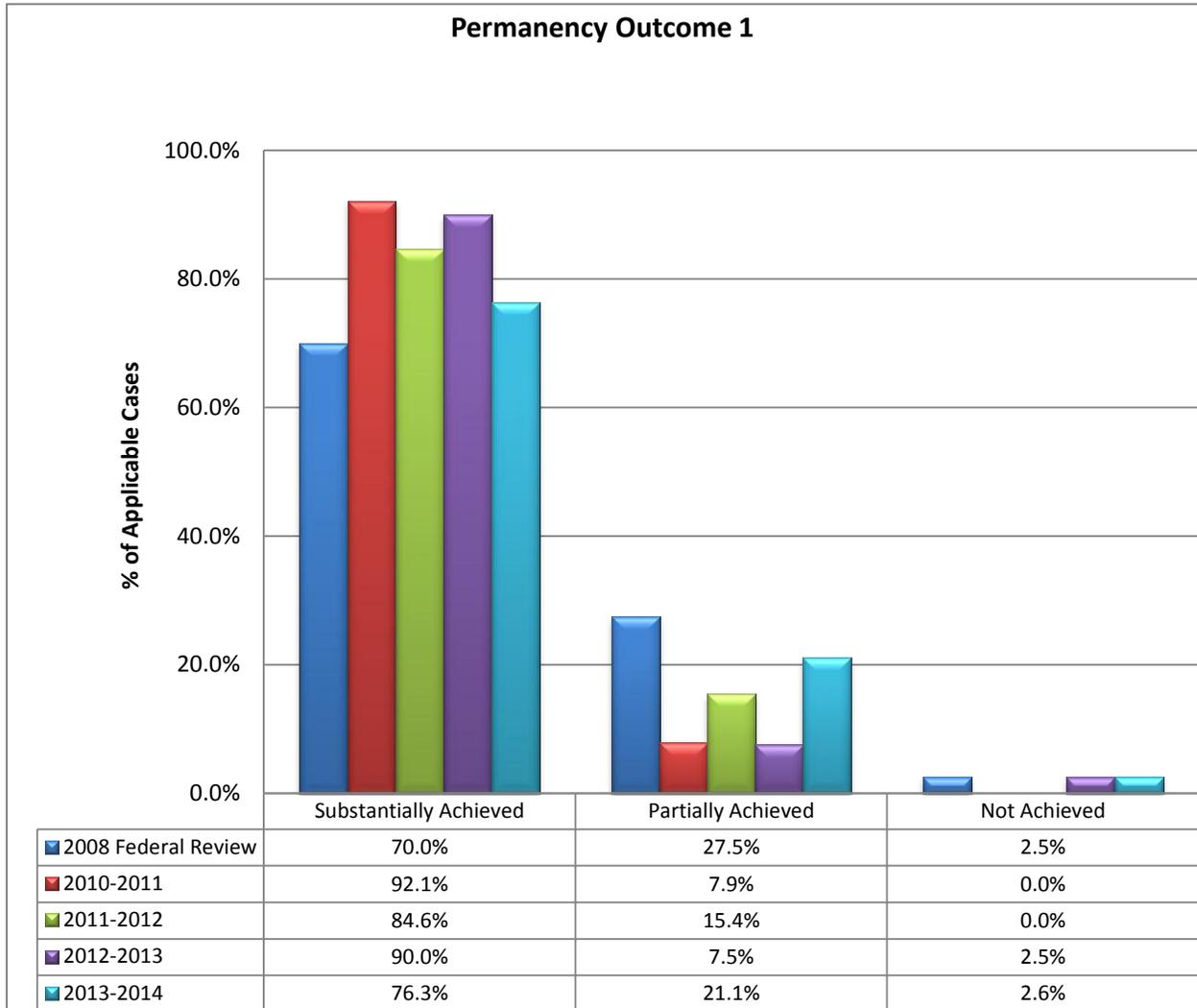
A. Federal Permanency Measures: See below for data trends related to the four Permanency composites.



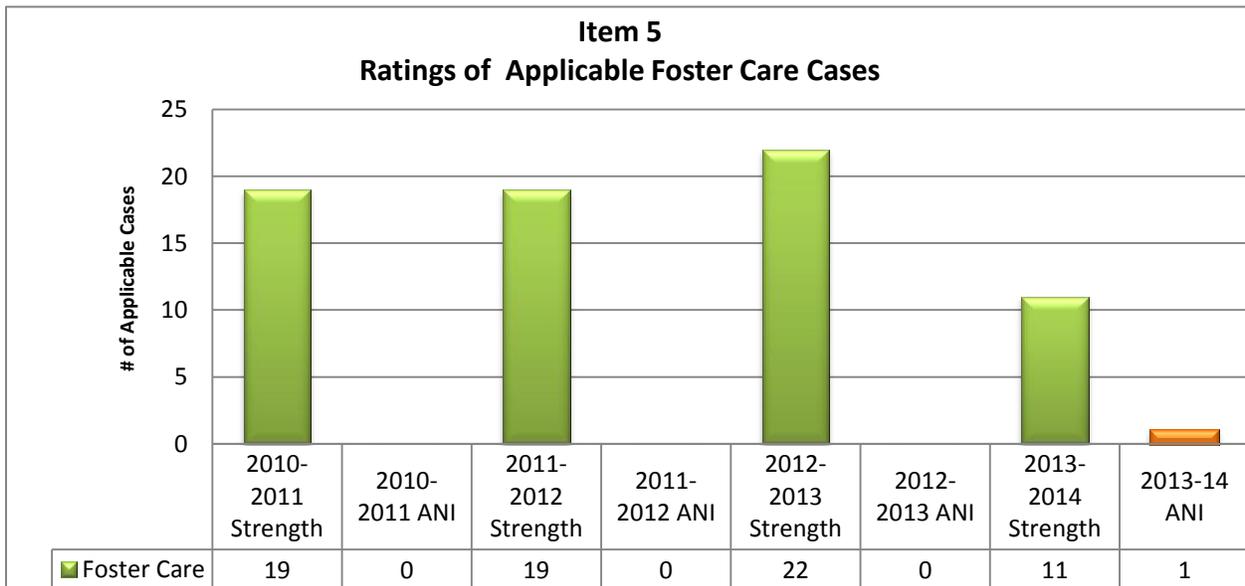
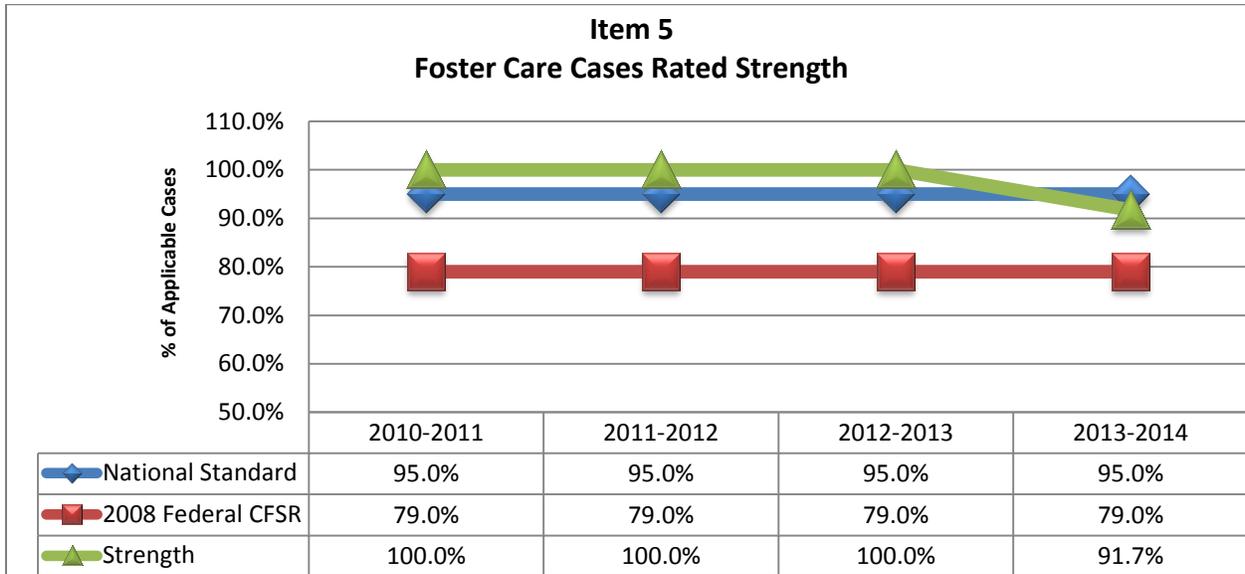


B. ND Case Review Data

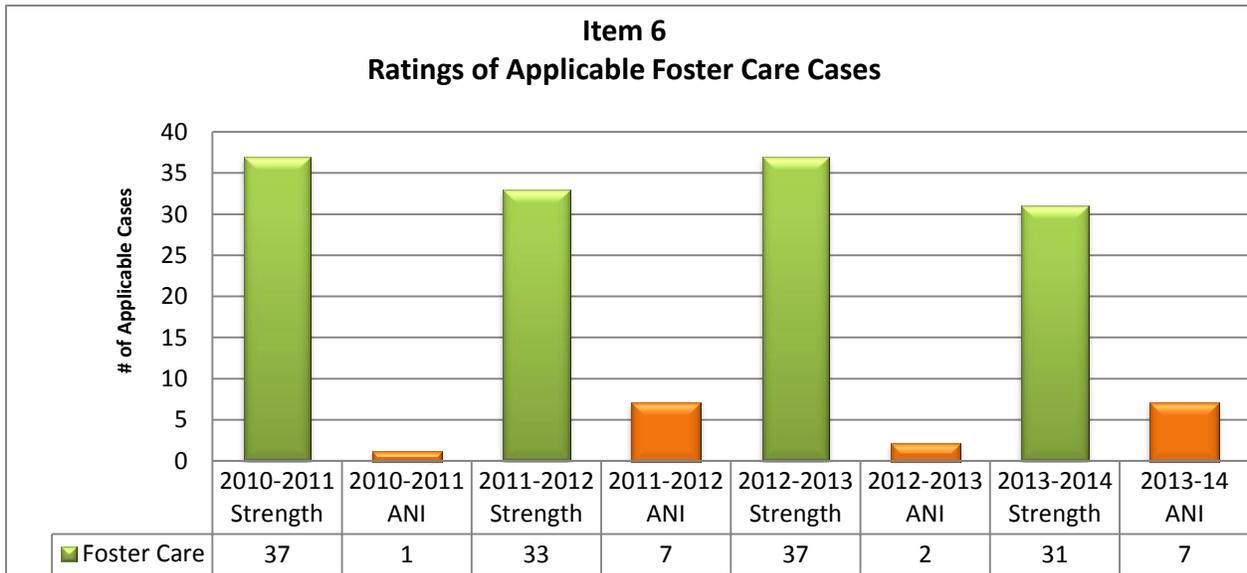
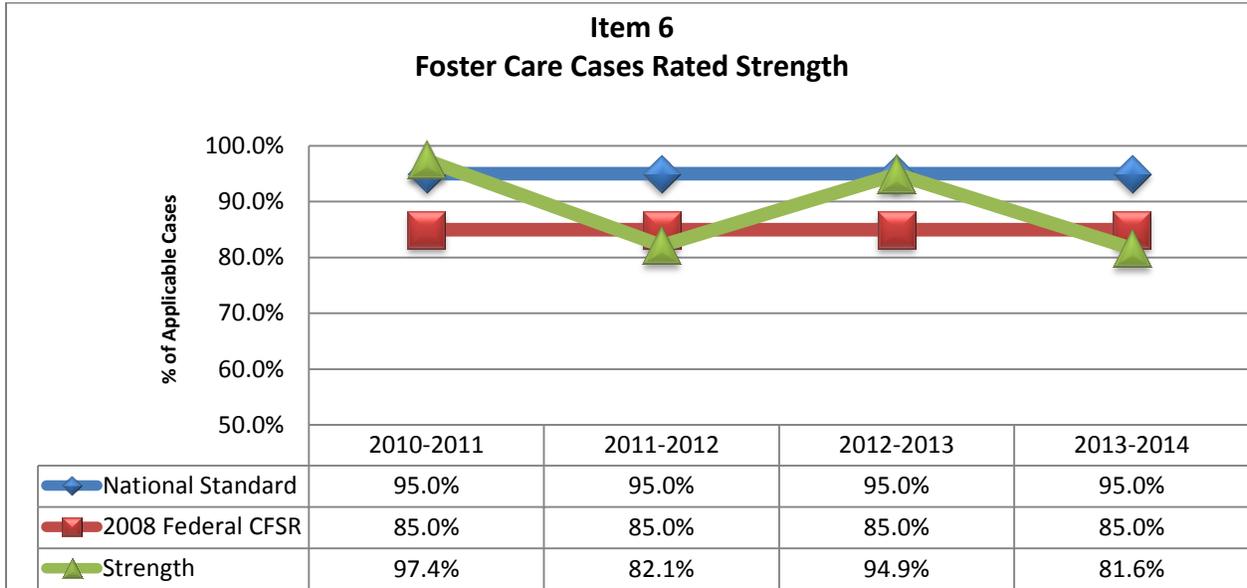
1. Permanency Outcome 1: Children have permanency and stability in their living situations



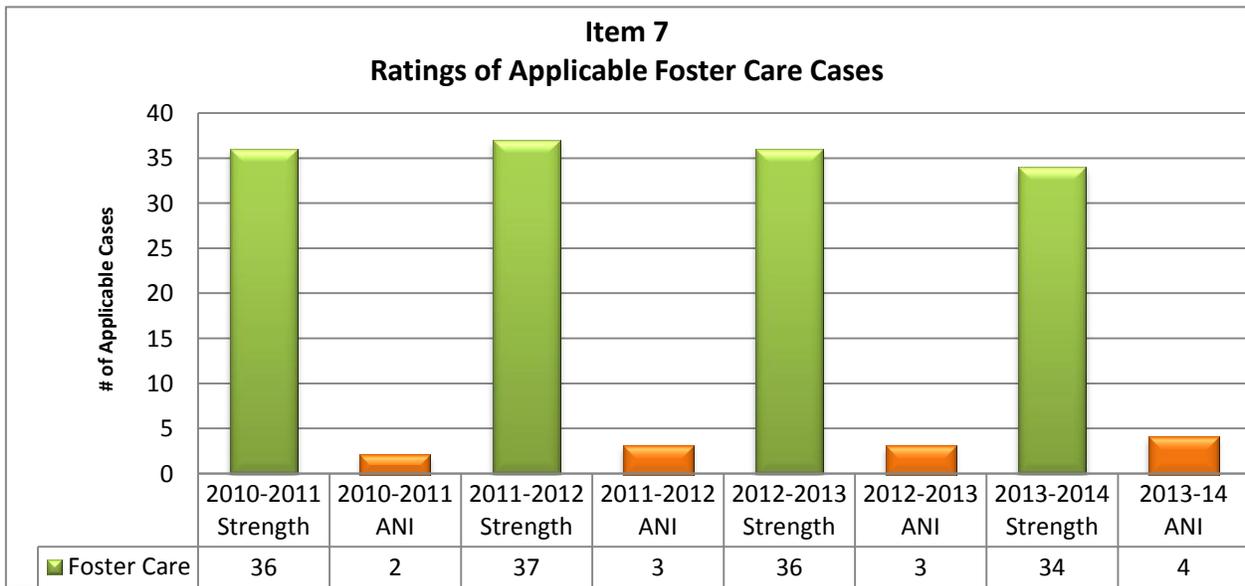
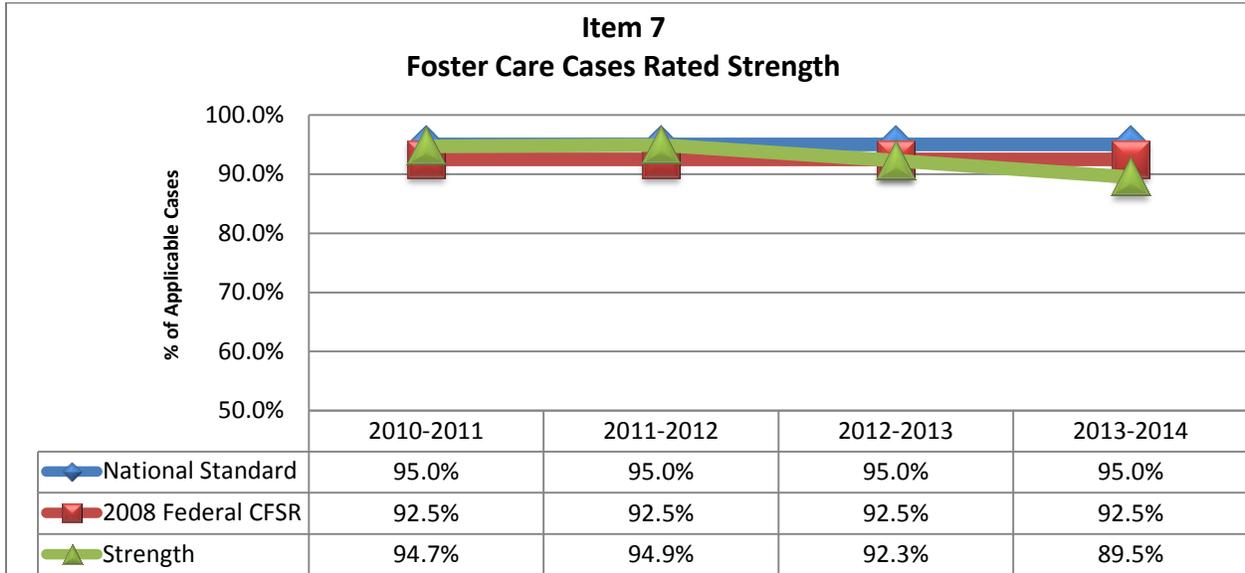
- a. **Item 5, foster care re-entries:** In the past four years only 1 out of 72 applicable cases was rated ANI. Thus, nearly 99% of the cases reviewed received a rating of Strength.



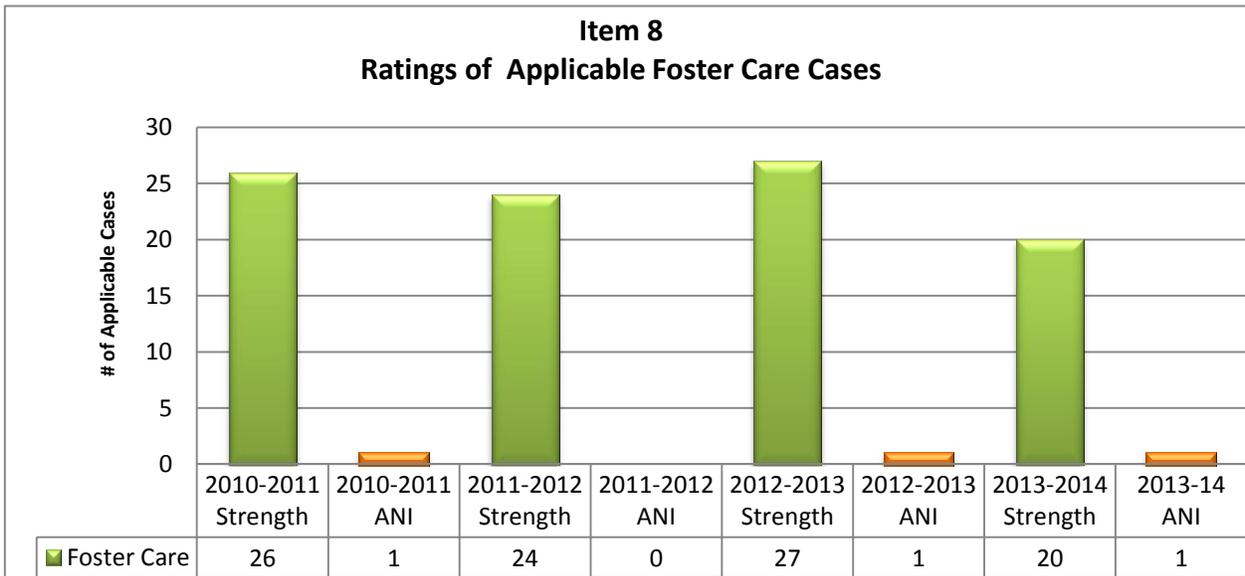
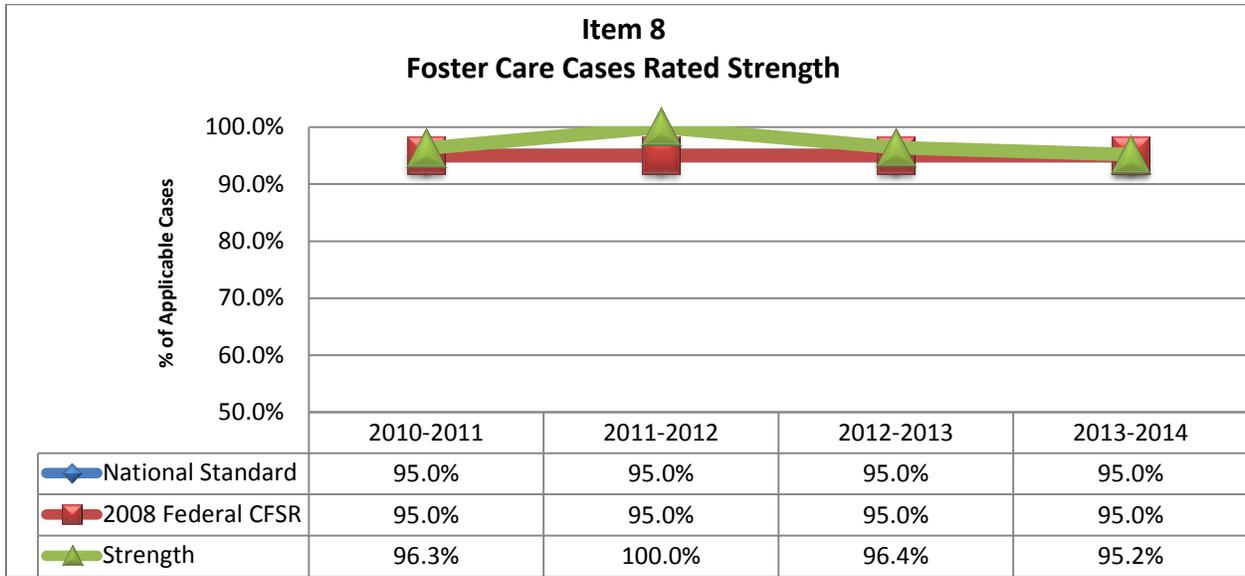
b. Item 6, stability of the foster care placement: Of the 155 foster care cases reviewed since 2010, 138 (89%) received a rating of Strength.



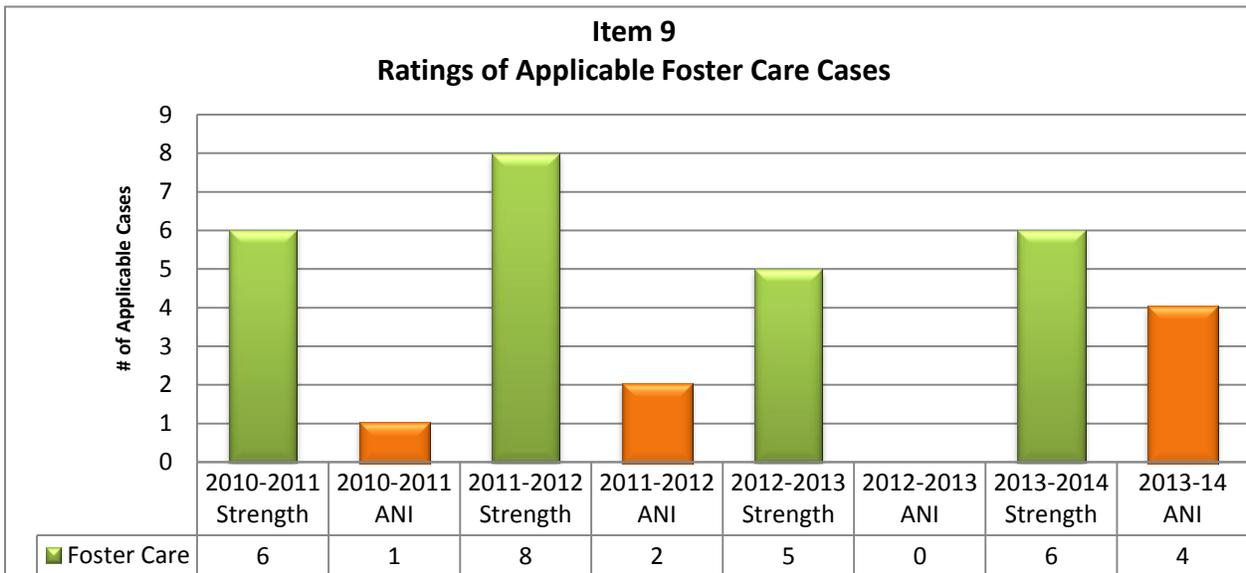
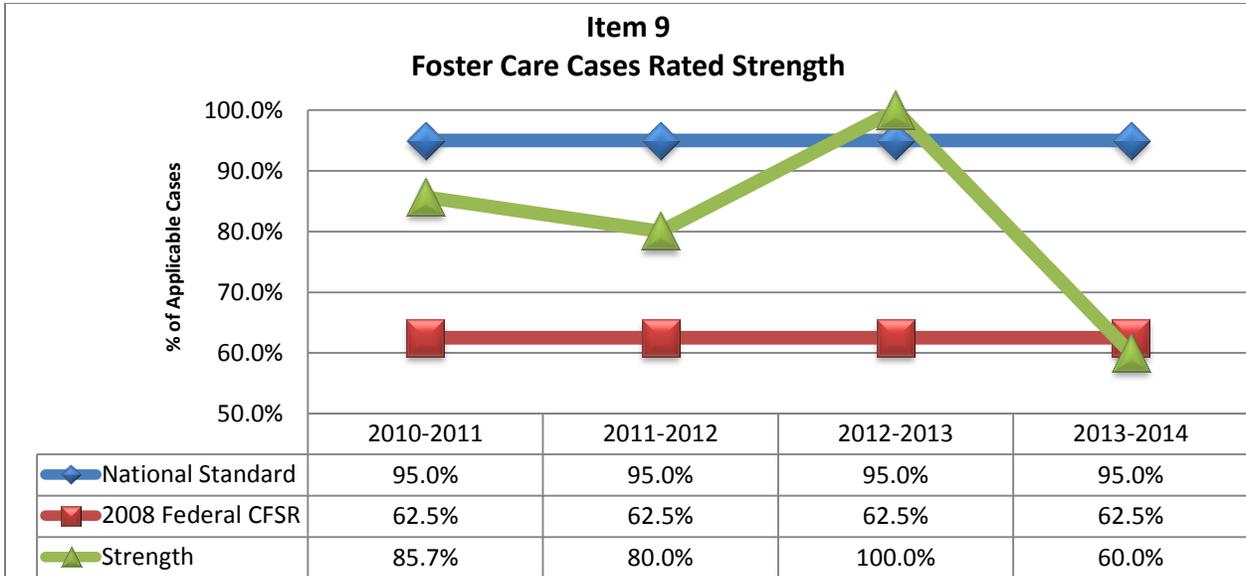
c. Item 7, permanency goal for the child: Of the 155 foster care cases reviewed, 143 (92%) received a rating of Strength for this item.



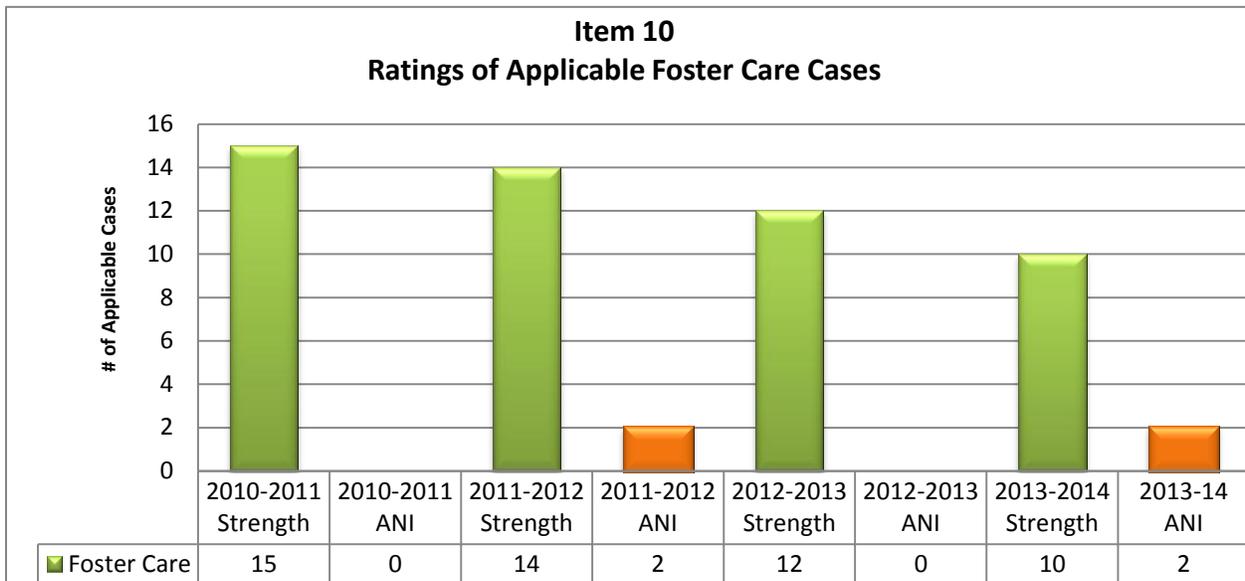
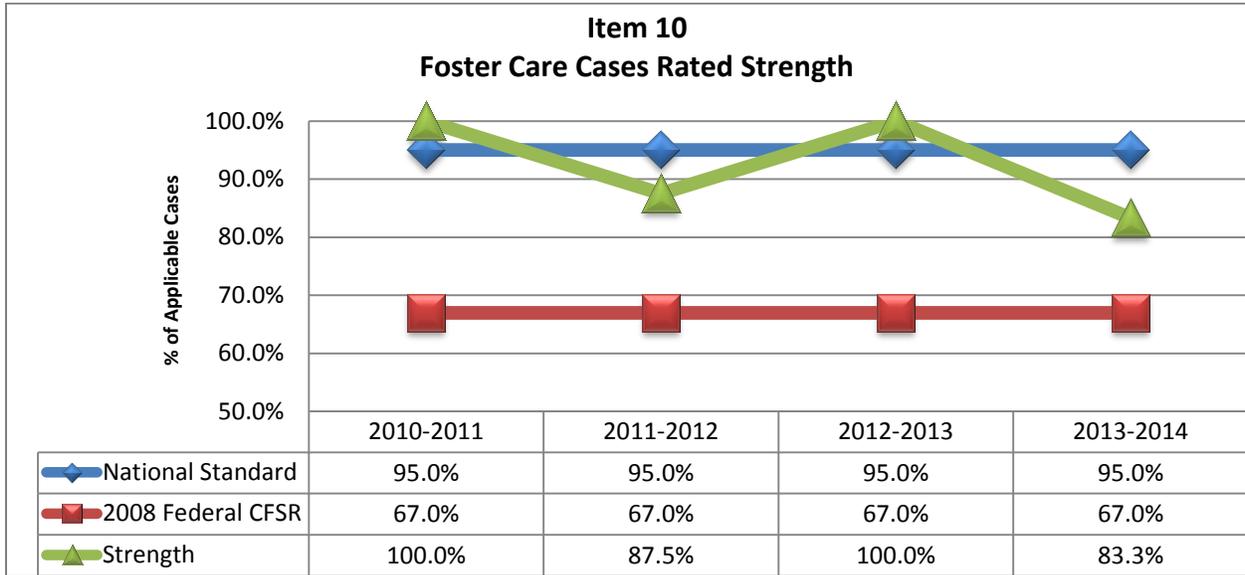
d. Item 8, reunification, guardianship, or permanent placement with relatives: Of the 100 applicable foster care cases reviewed over the past four years, 97 (97%) received a rating of Strength for this item.



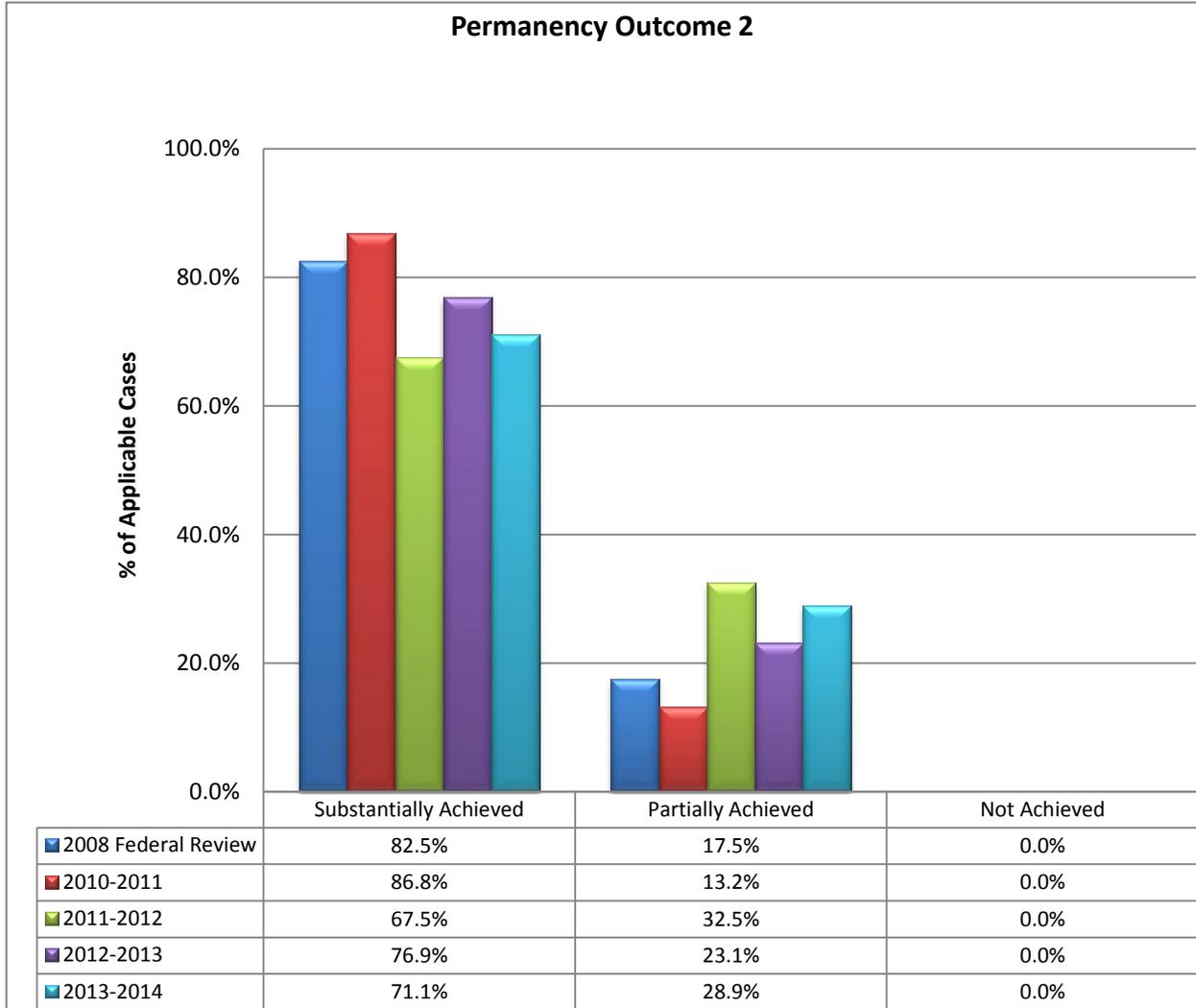
- e. **Item 9, adoption:** Very few foster care cases reviewed have this permanency goal as either the primary or concurrent. Over the past four years, of the 32 applicable cases, 25 (78%) of the cases received a rating of Strength.



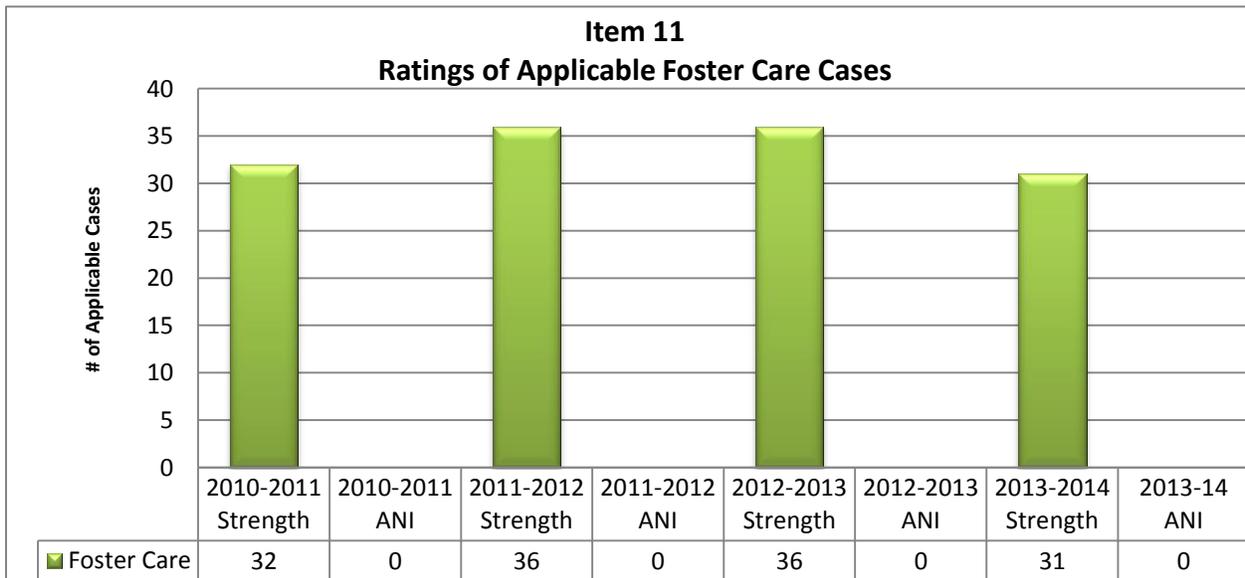
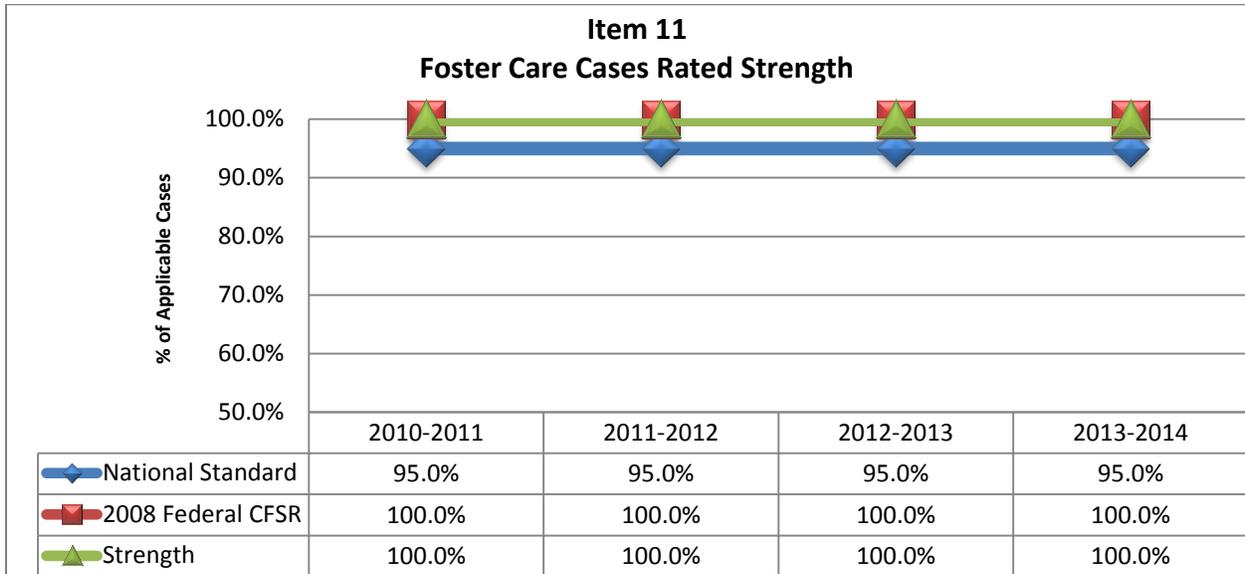
- f. **Item 10, other planned permanent living arrangement:** This item was not applicable in most foster care cases reviewed; therefore, the data is based on a small sample size. Out of the 55 applicable cases reviewed over the past four years, 51 (93%) received a rating of Strength.



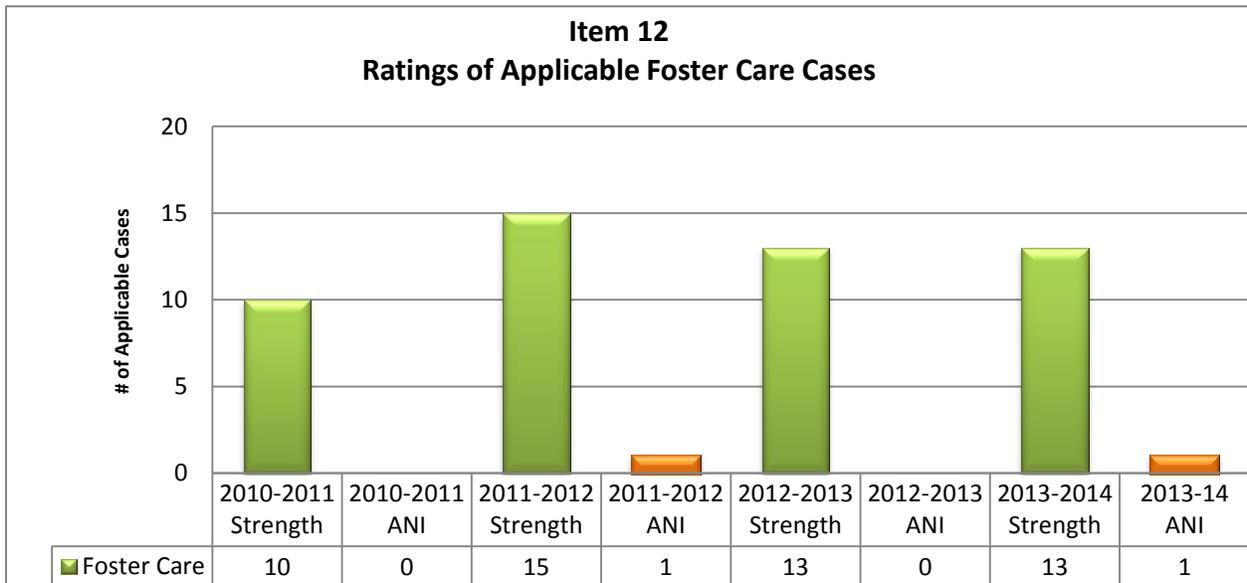
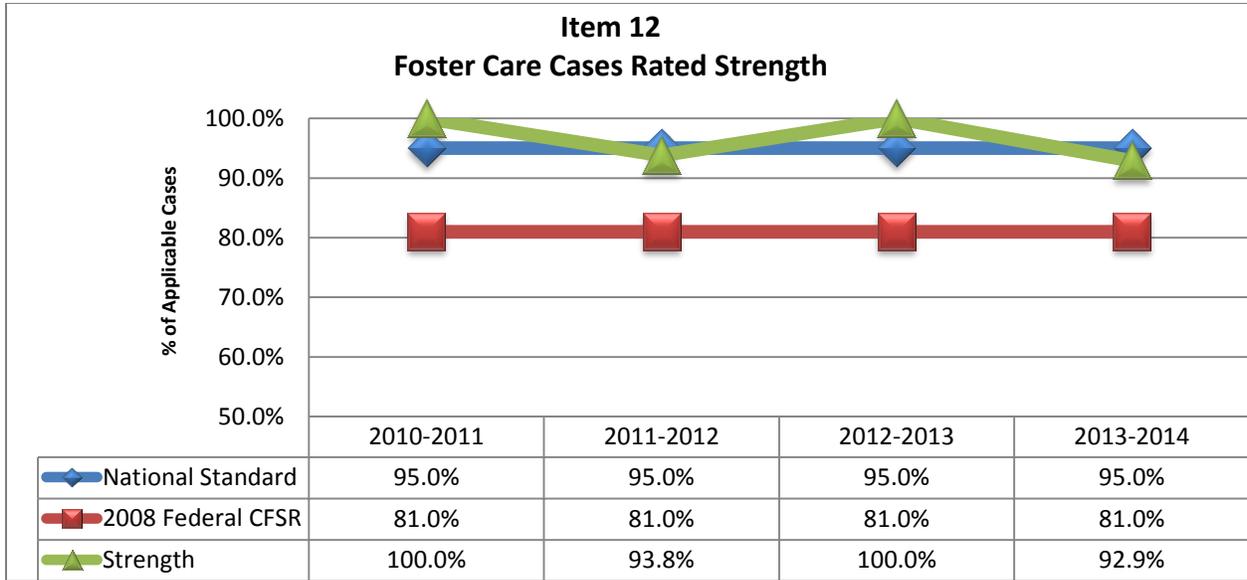
2. Permanency Outcome 2: The continuity of family relationships and connections is preserved for children



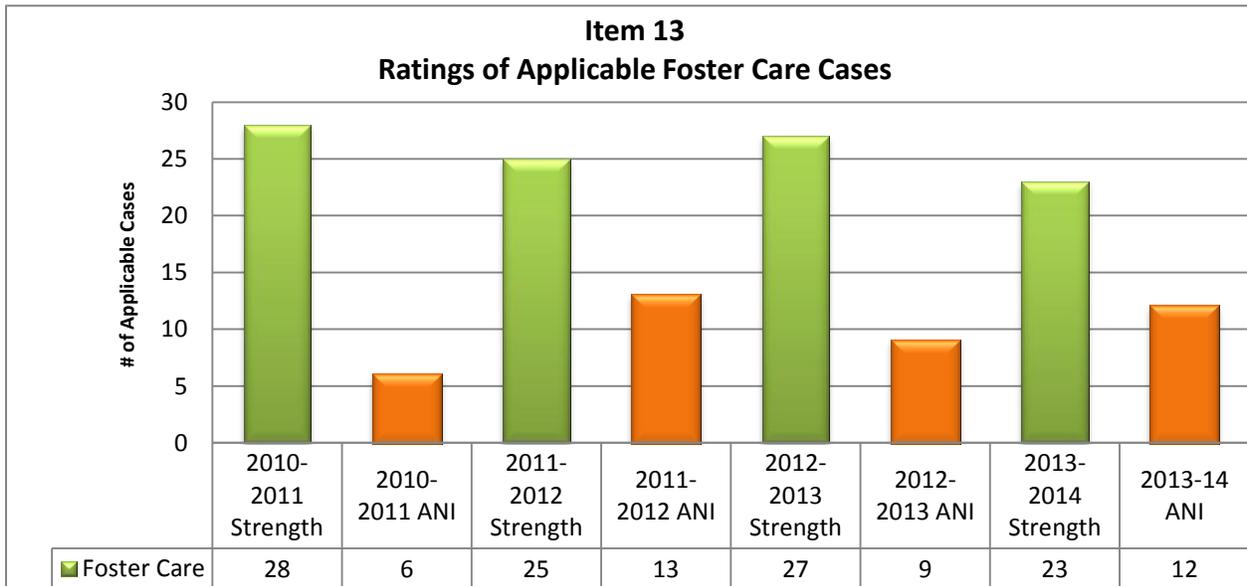
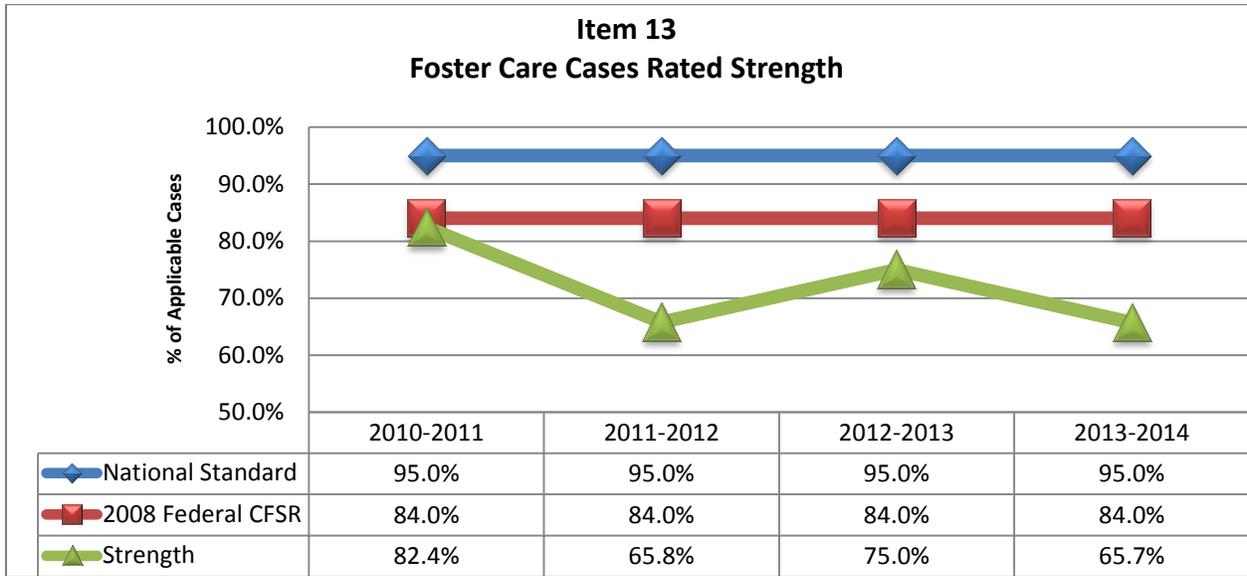
- a. **Item 11, Proximity of the foster care placement:** Over the past four years, all applicable foster care cases (100%) received a rating of Strength for this item.



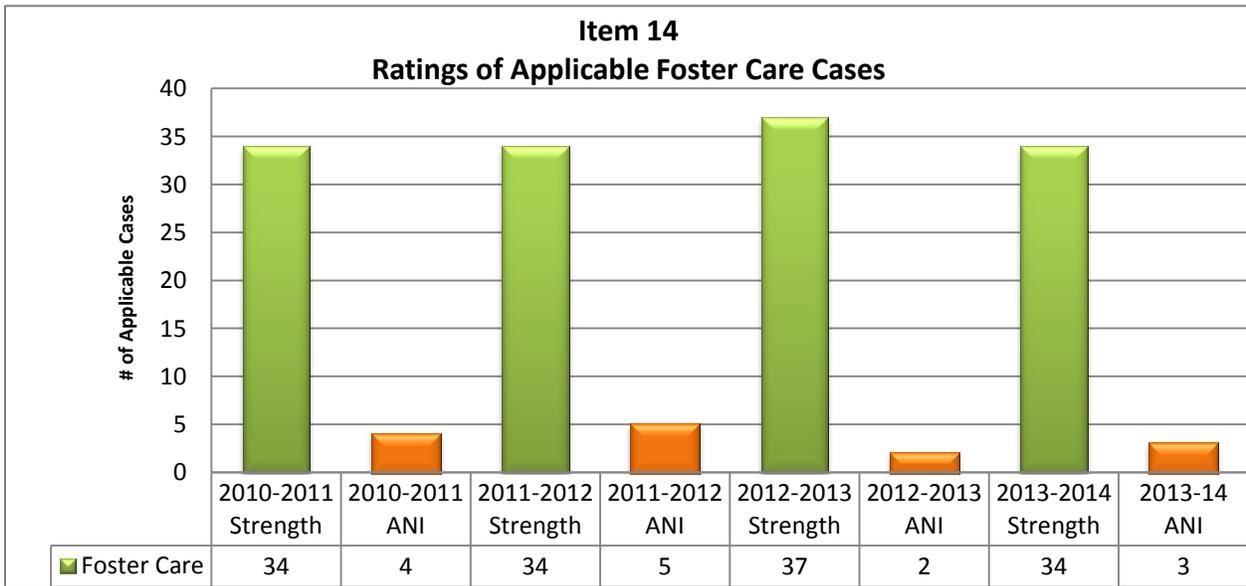
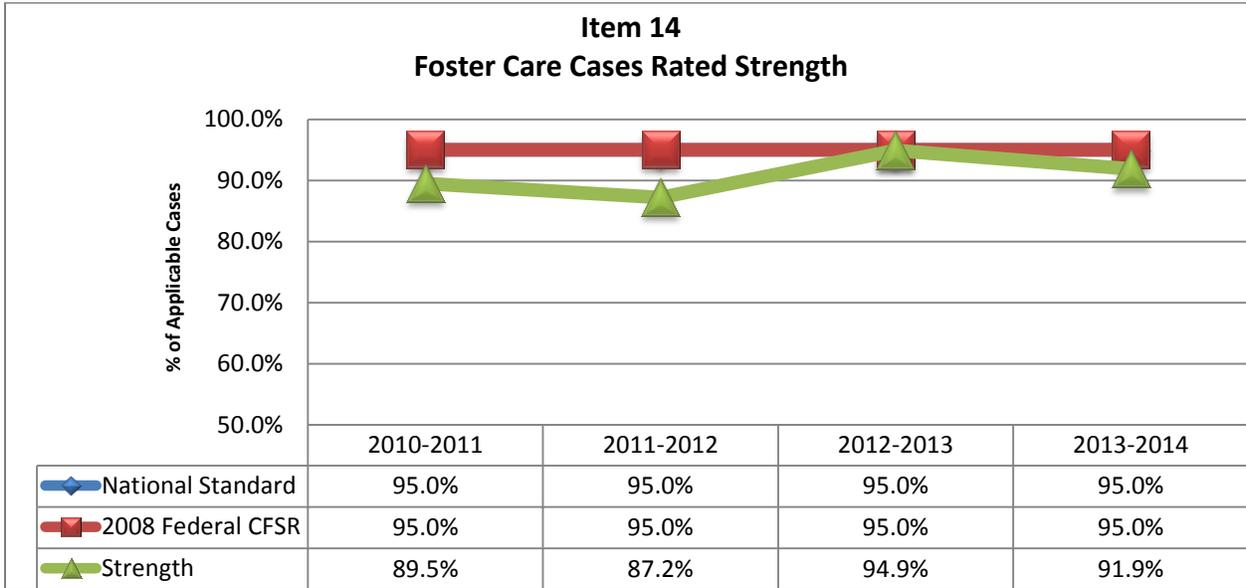
b. Item 12, placement with siblings: This item was not applicable in most cases reviewed; therefore, the data is based on a small sample size. Of the 53 applicable cases reviewed over the past four years, 51 (96%) received a rating of Strength.



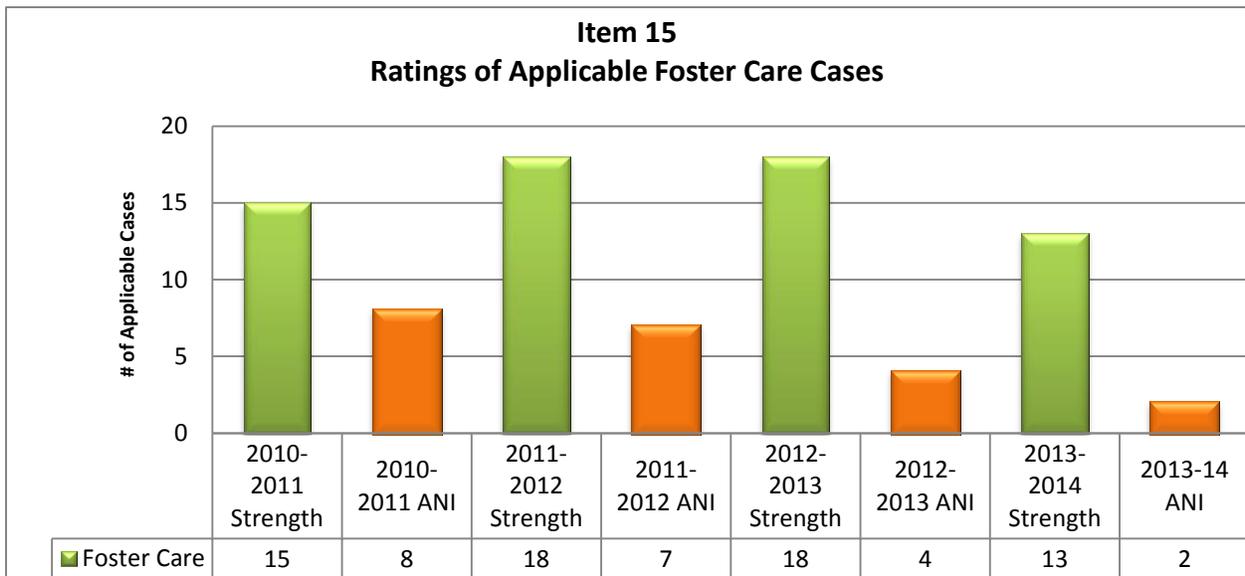
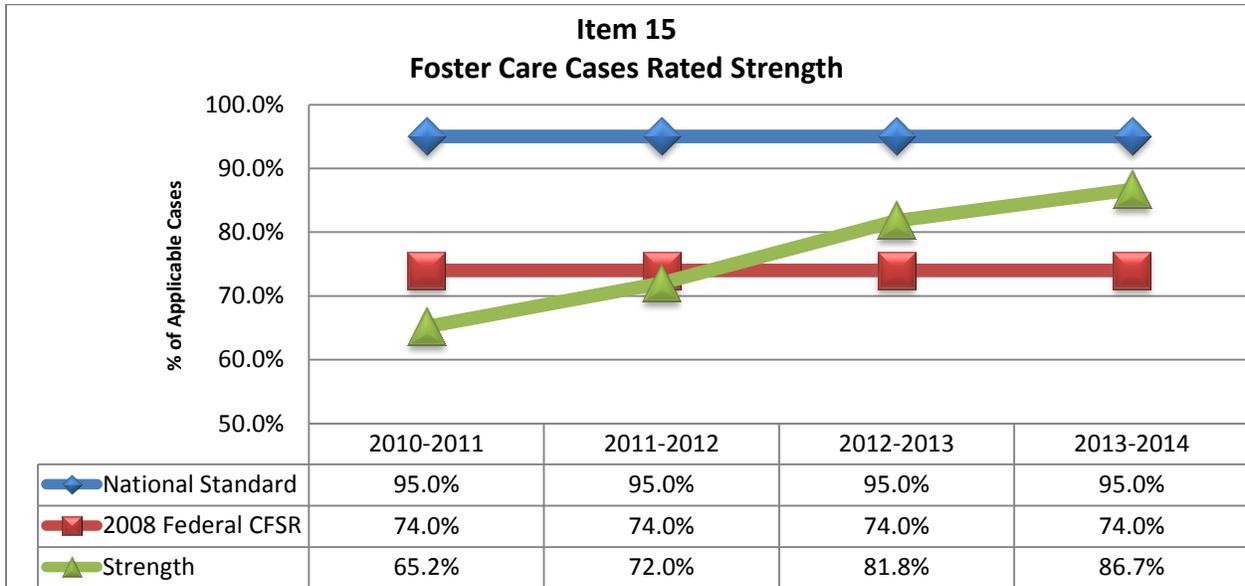
- c. **Item 13, Visiting with parents and siblings in foster care:** Of the 143 applicable foster care cases reviewed in the past four years, 103 (72%) received a rating of Strength for this item.



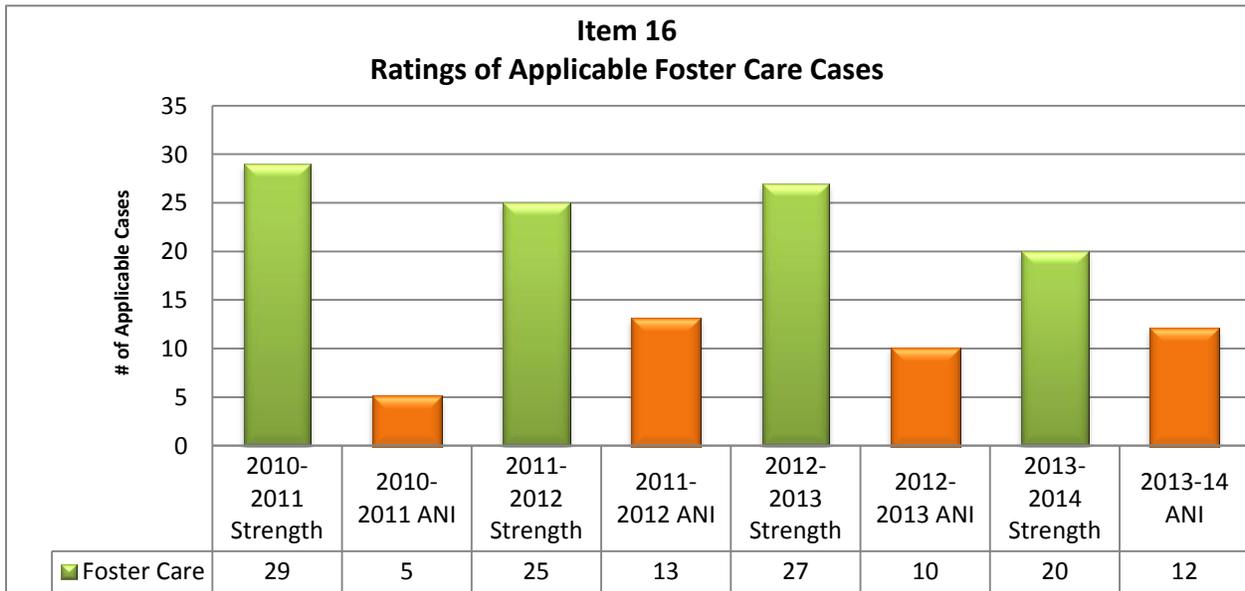
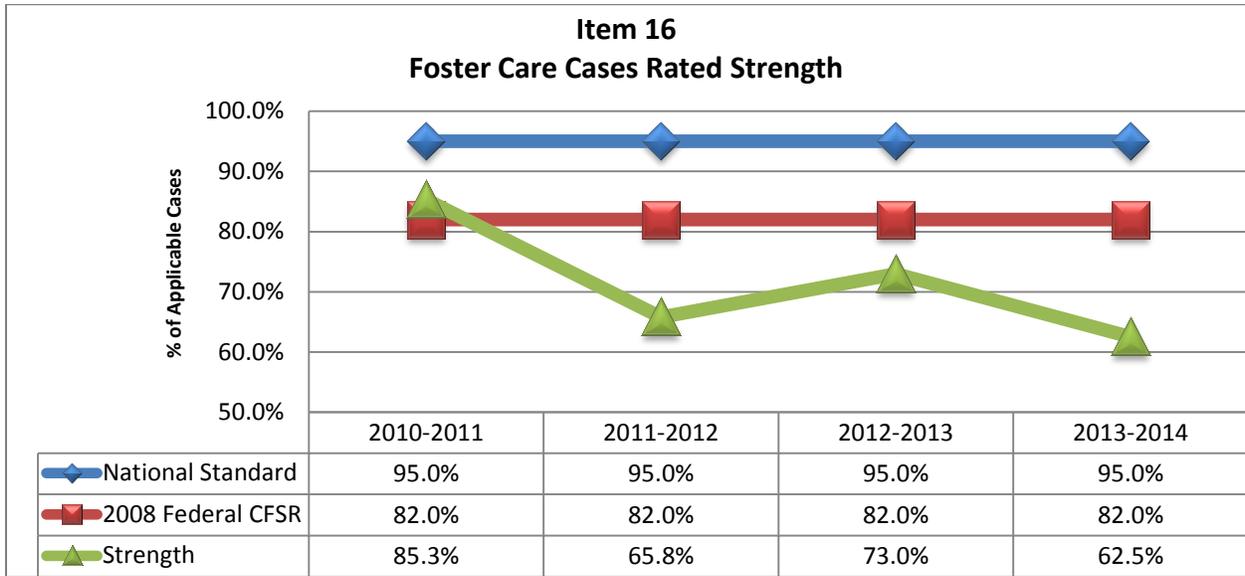
d. Item 14, preserving connections: Of the 153 applicable foster care cases reviewed, 139 (91%) received a rating of Strength for this item.



- e. **Item 15, relative placement:** Just over half of the foster care cases were applicable for this item. Of the 85 cases reviewed, 64 (75%) received a rating of Strength.



- f. **Item 16, relationship of child in care with parents:** Of the 141 applicable foster cases reviewed, 101 (72%) received a rating of Strength for this item.



C. Permanency: Practice & Systemic Strengths

- Permanency Composite 2
- Permanency Composite 3
- Item 5: Since 2010, 99% of the cases reviewed show children who entered foster care during the period under review did not re-enter within 12 months of a previous foster care episode.
- Item 7: Permanency goals were specified in the case file, all permanency goals in effect during the period under review were established timely, the goals were appropriate to the circumstances of the case, and ASFA criteria was followed.
- Item 8: Most foster care cases reviewed have this permanency plan as either the primary or concurrent goal. In the vast majority of these cases, the agency was making concerted efforts to achieve this goal in a timely manner.
- Item 11: ND has consistently exceeded the national standard by making efforts to place children in close proximity to family whenever possible.
- Item 12: Child welfare agencies have consistently made concerted efforts to place siblings together whenever possible and appropriate.
- Stakeholders report an increase in kinship care, which has also been reflected in the data.
- Several youth stakeholders reported that being in foster care provided them with opportunities they otherwise would not have had. Among the examples given were education, leadership, employment, housing, financial assistance for college, and extracurricular activities.

D. Permanency: Practice & Systemic Concerns

- Item 6: In the majority of cases rated ANI, it was noted the agency placed the child out of an immediate need to ensure the child's safety. The initial placement was not appropriate to achieve the permanency goal or address the child's needs, and therefore the child was eventually moved to another placement setting.
- FRAME/CCWIPS data does not accurately assess placement stability for children due to current system limitations. This deflates the percentages in AFCARS (Permanency Composite 4), meaning it appears as though children in foster care are moved from one placement to another with greater frequency than is actually the case. Therefore, this concern has been identified as a needed system enhancement in FRAME.
- Item 9: The majority of ANI ratings were due delays in achieving the goal of adoption in a timely manner. Generally, responsibility for these delays was shared by both the court and agency.
- Item 13: The majority of ANI ratings were due to lack of concerted efforts to ensure the child's absent parent (most often the biological father) was provided opportunities for frequent and quality visits with the child in foster care
- Item 16: The majority of ANI ratings were due to lack of concerted efforts to promote, support and otherwise maintain positive relationships between the child and his/her absent parent (most often the biological father).

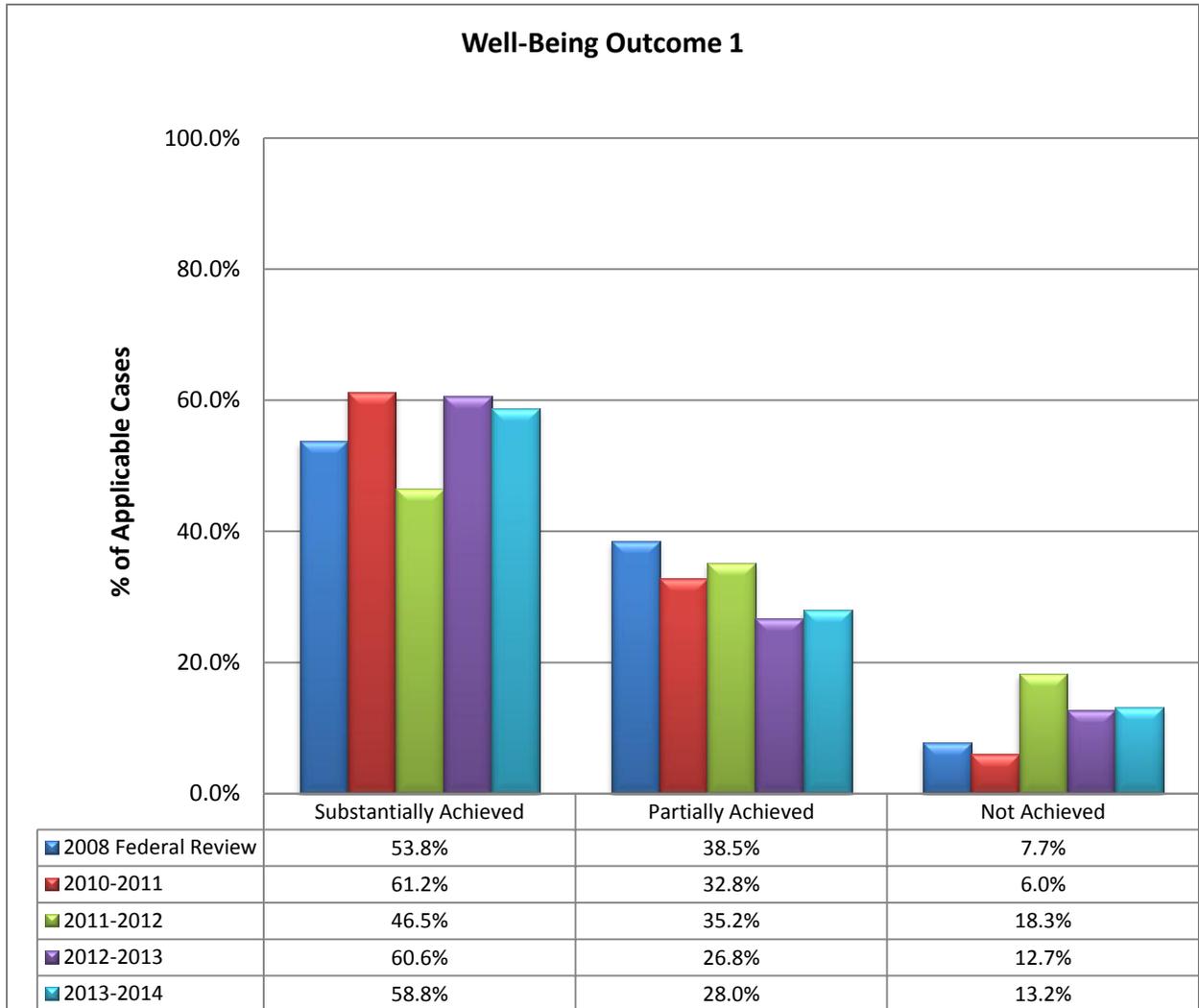
3. WELL-BEING

A. ND FRAME(MIS) Information:

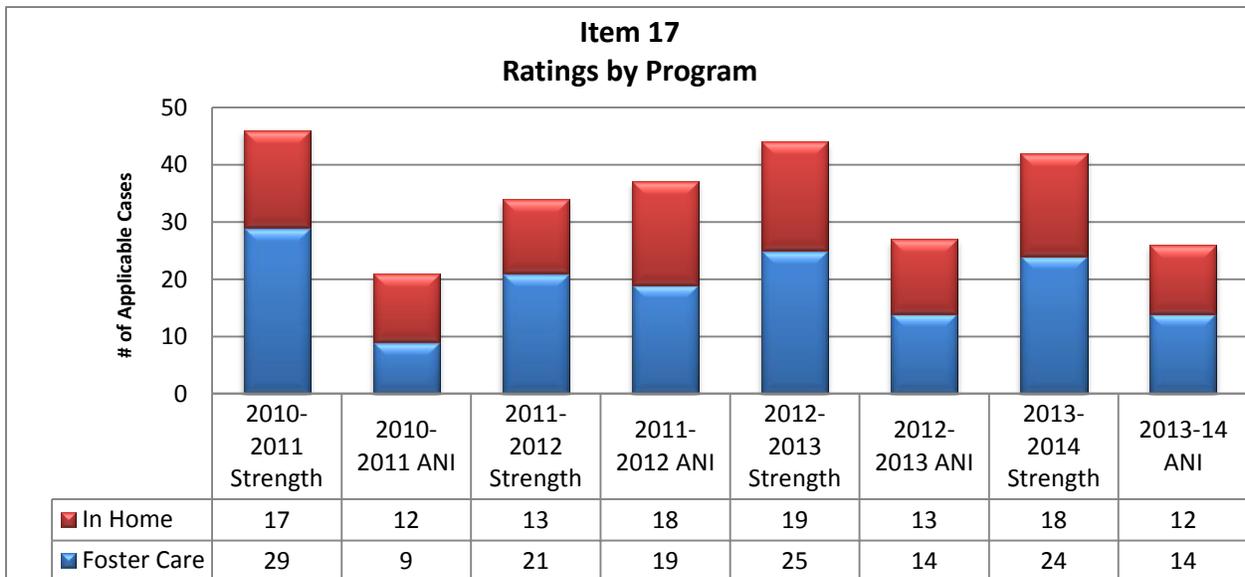
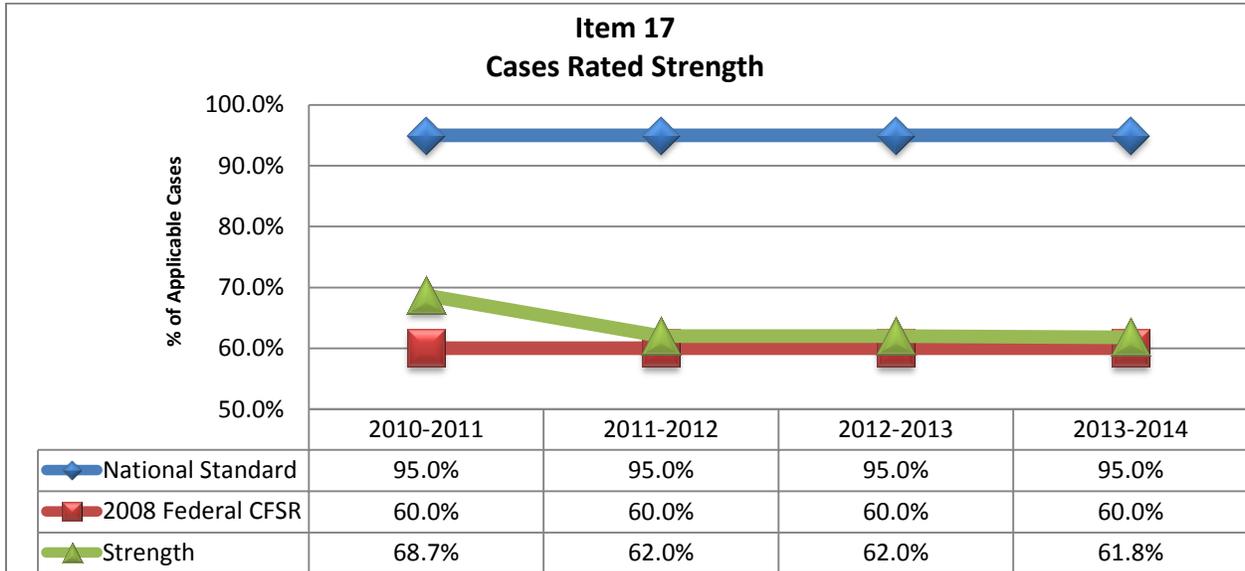
1. **Assessment of needs:** Case workers utilize the Family Assessment Instrument and the case activity logs in FRAME to document assessments of children, parents, and foster parents. Because this information is often in narrative form, it is difficult to pull together aggregate data in relation to this outcome. The best source for gathering this information is through the regional CFSRs.
2. **Team planning:** North Dakota Wraparound Practice Model policy 600-05-20-35 requires a child and family team meeting occur at least every 90 days, or whenever a major change occurs in the plan. Issues impacting the frequency of meetings may include the safety issues, cohesiveness of the team, availability of community resources, needs of the child and family, and difficulty of placement. The policy is applicable to both foster care and in-home case managers.
3. **Caseworker visits with children:** Reports of monthly caseworker visits with children are available in FRAME, in the Cognos data warehouse. Both foster care and in-home case managers are required, through Wraparound Practice Model policy 600-05-15-10, to see children “with sufficient frequency to address issues pertaining to the safety, permanency and well-being of the child and promote achievement of the care plan goals.” Documentation of visit frequency and quality is entered into the case activity log in FRAME. For both in-home and foster care cases, visits are to be at a minimum once every 30 days.
4. **Caseworker visits with parents:** Reports of monthly caseworker visits with parents for in-home cases are available in FRAME, in the Cognos data warehouse. Such a report for foster care cases is not currently available in the system, but is listed as one of the needed enhancements. Both foster care and in-home case managers are required, through Wraparound Practice Model policy 600-05-15-10, to see parents of the children “with sufficient frequency to address issues pertaining to the safety, permanency and well-being of the child and promote achievement of the care plan goals.” Implementation of this policy includes these levels of acceptable contact: face-to-face, telephone, or written. Contact should always be at the highest possible level. Meaning, if it is possible to have face-to-face contact with the parents then that is required. Documentation of visit frequency and quality is entered into the case activity log in FRAME. For both in-home and foster care cases, visits with parents are to be at a minimum once every 30 days.

B. Case Review

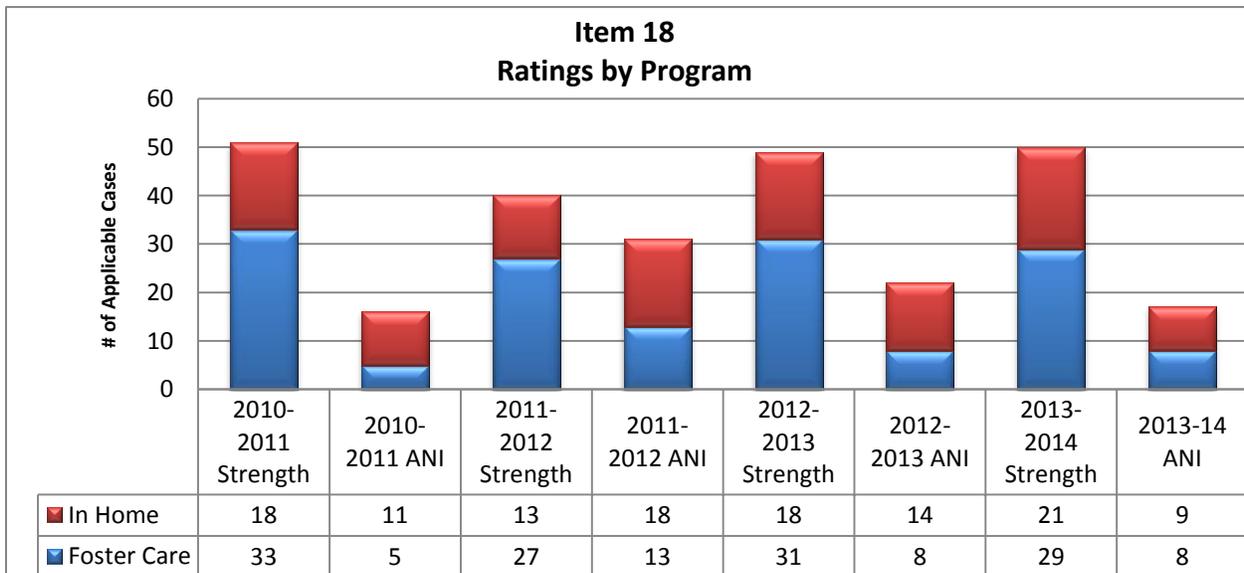
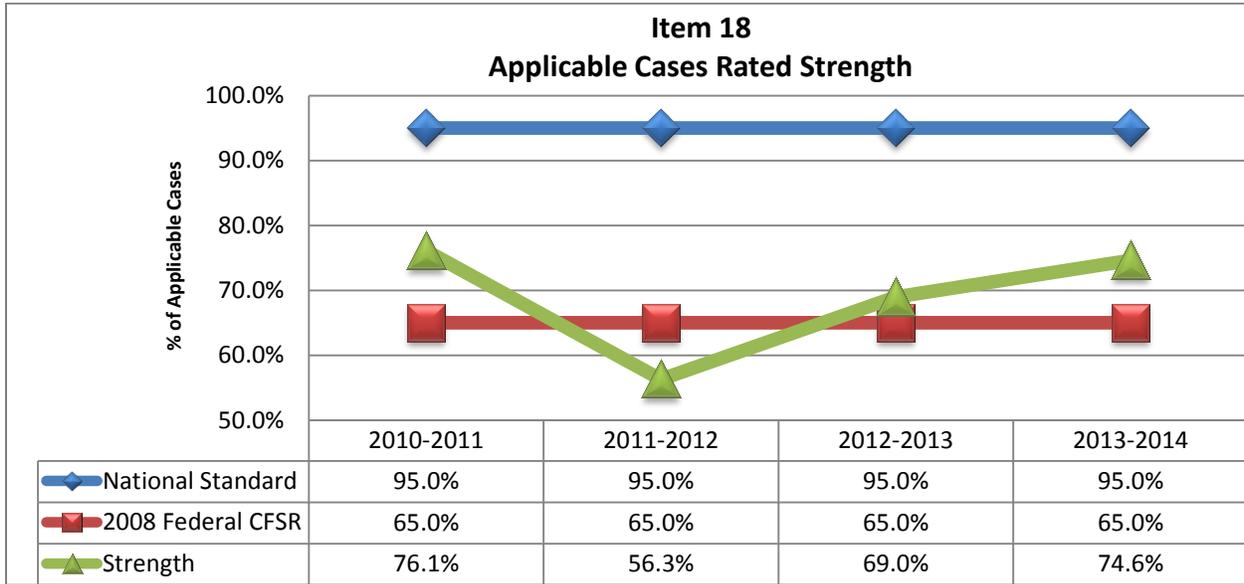
1. Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs



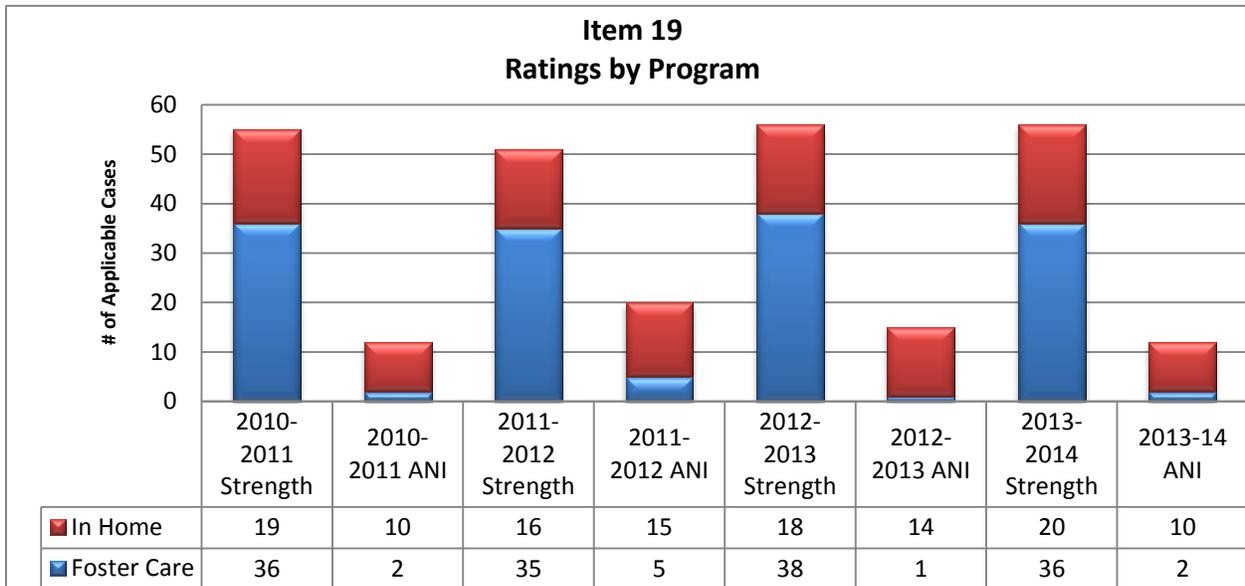
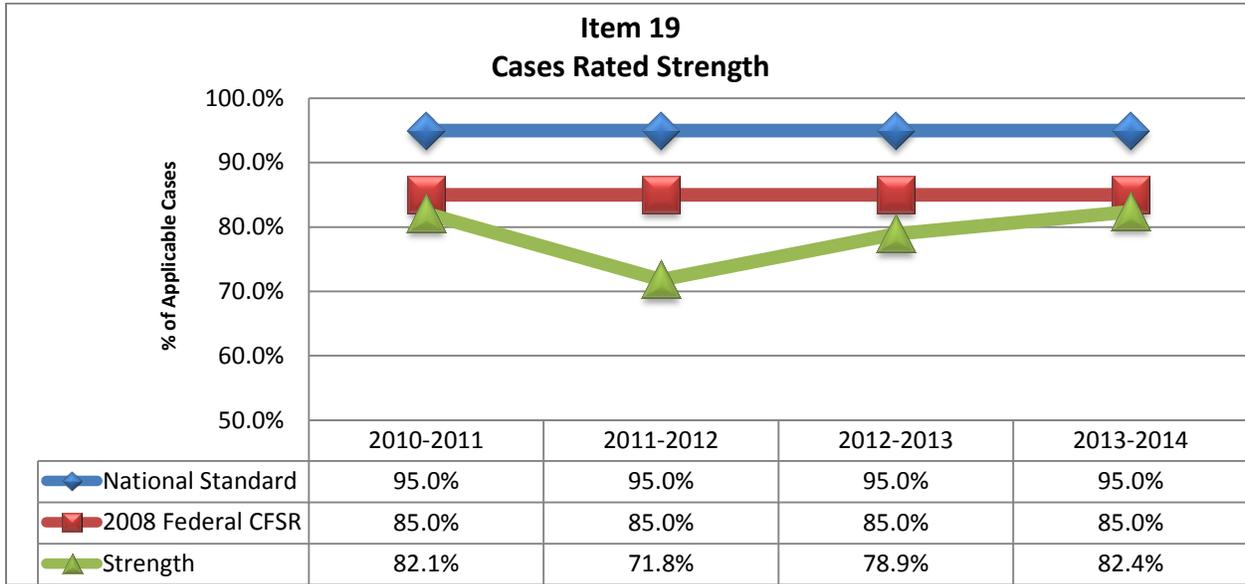
- a. Item 17, Needs and services of child, parents and foster parents:** Of the 277 cases reviewed since May 2010, 166 (60%) received a rating of Strength. Of the 122 in-home cases, 67 (55%) received a rating of Strength. Of the 155 foster care cases, 99 (64%) received a rating of Strength.



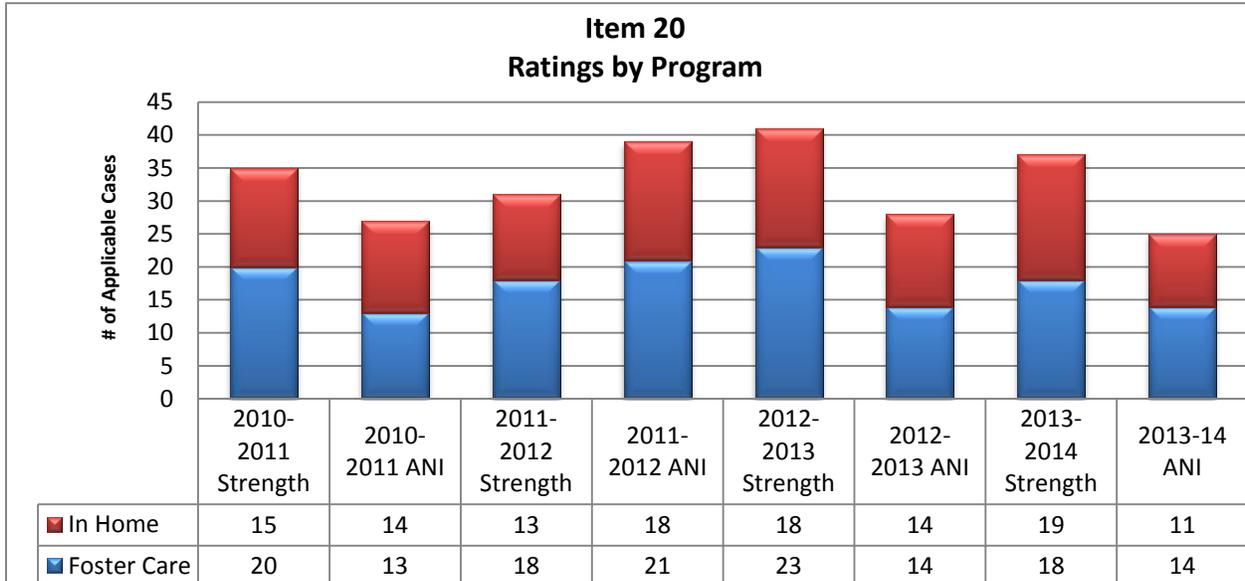
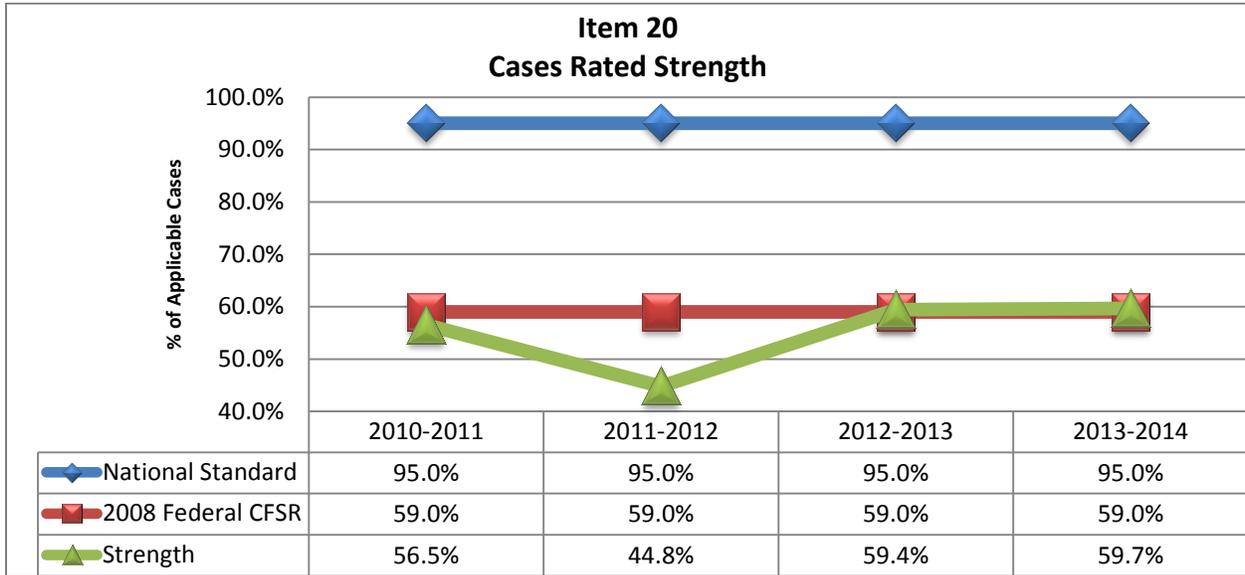
- b. Item 18, child and family involvement in case planning:** Of the 276 applicable cases reviewed since May 2010, 190 (69%) received a rating of Strength. Of the 122 in-home cases, 70 (57%) received a rating of Strength. Of the 154 applicable foster care cases, 120 (78%) received a rating of Strength.



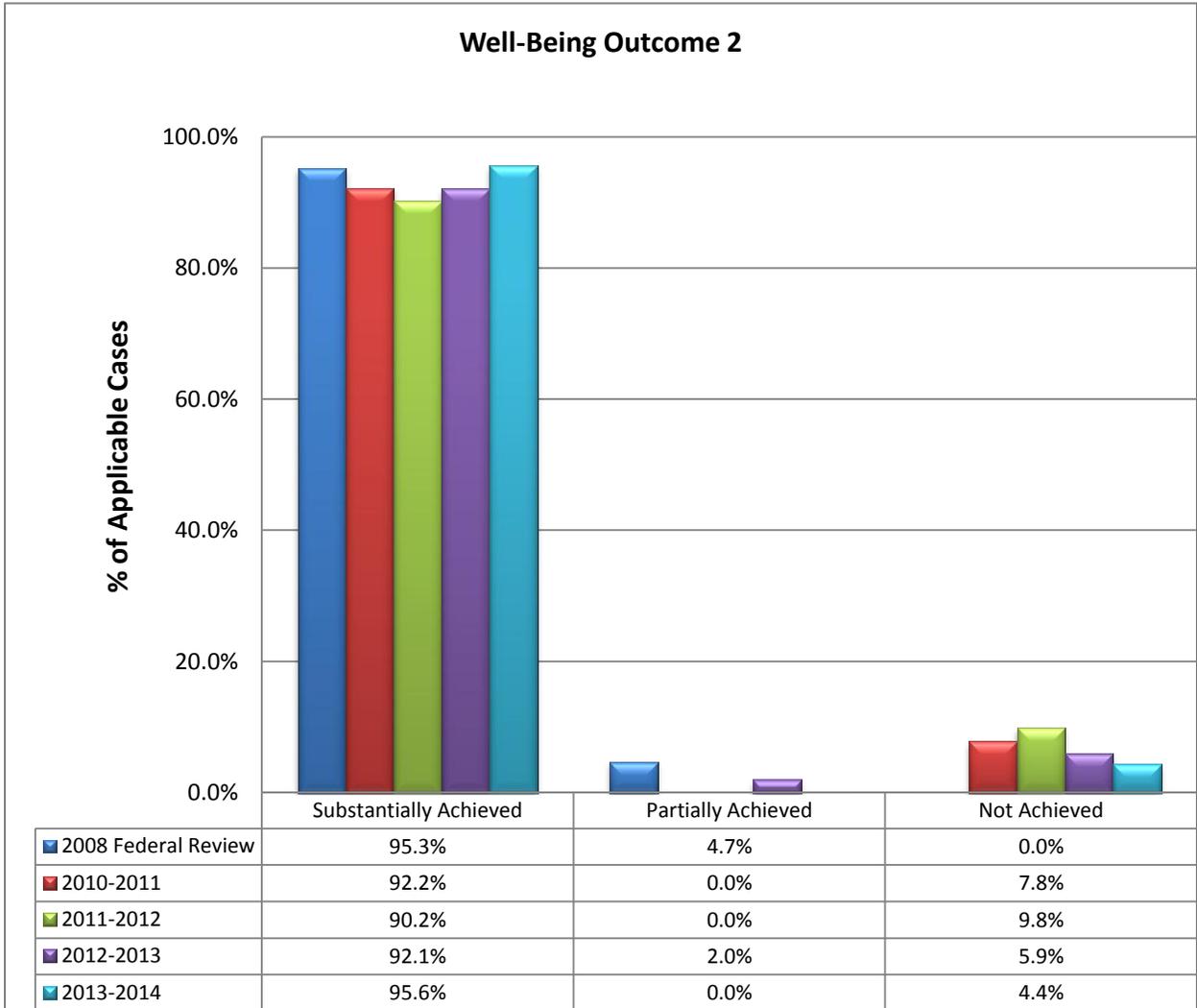
c. Item 19, caseworker visits with child: Of the 277 cases reviewed since May 2010, 218 (79%) received a rating of Strength. Of the 122 in-home cases, 73 (60%) received a rating of Strength. Of the 155 foster care cases, 145 (94%) received a rating of Strength.



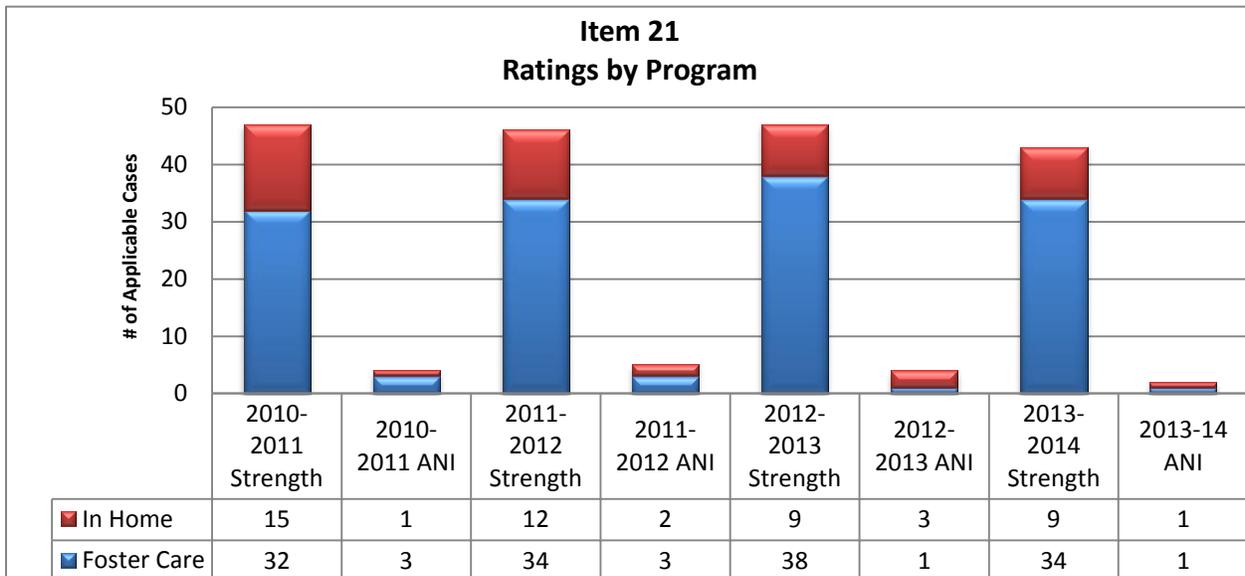
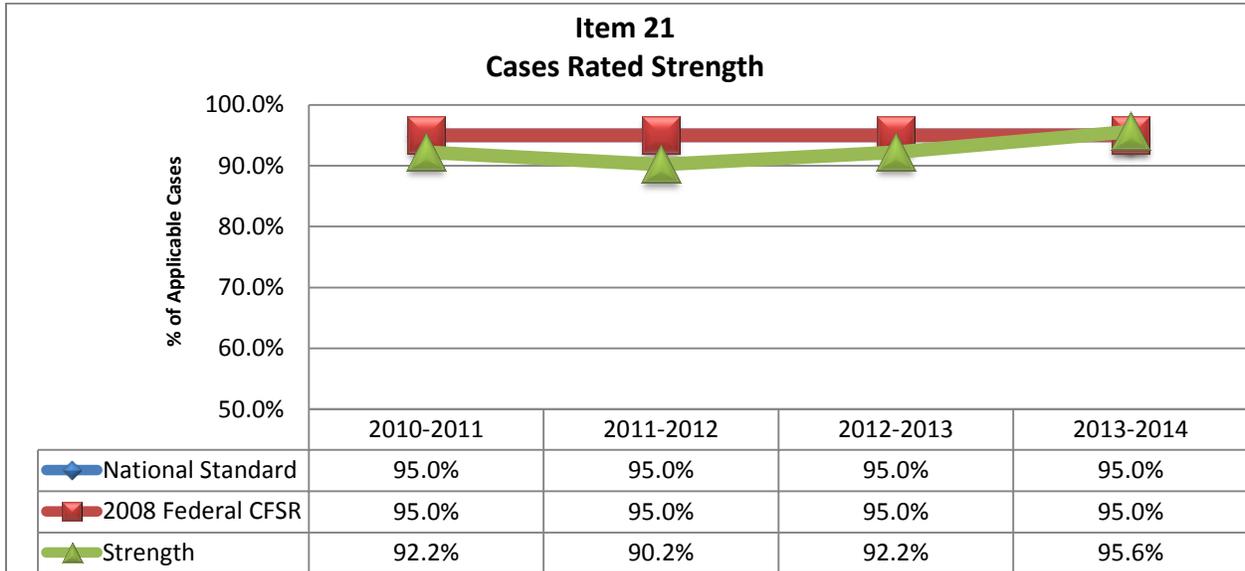
d. Item 20, caseworker visits with parent(s): Of the 263 applicable cases reviewed since May 2010, 144 (55%) received a rating of Strength. Of the 122 in-home cases, 65 (53%) received a rating of Strength. Of the 141 applicable foster care cases, 79 (56%) received a rating of Strength.



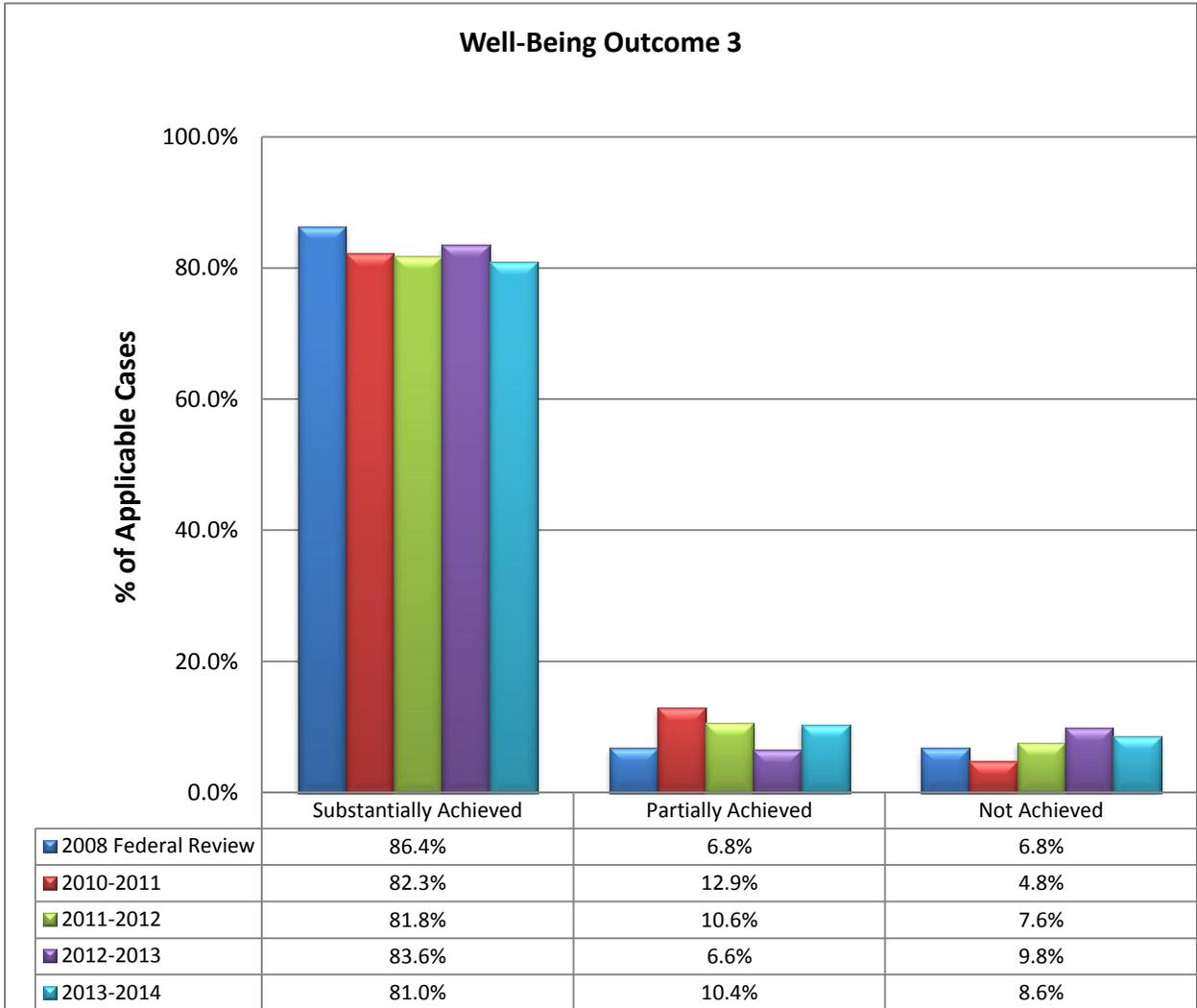
2. Well-Being Outcome 2: Children receive appropriate services to meet their educational needs



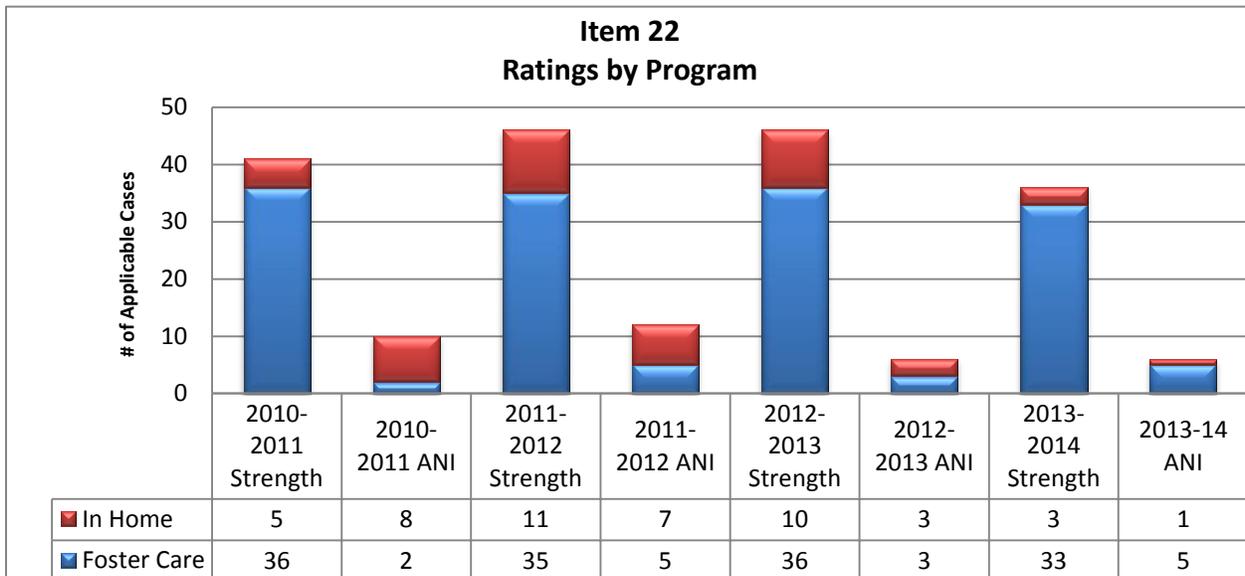
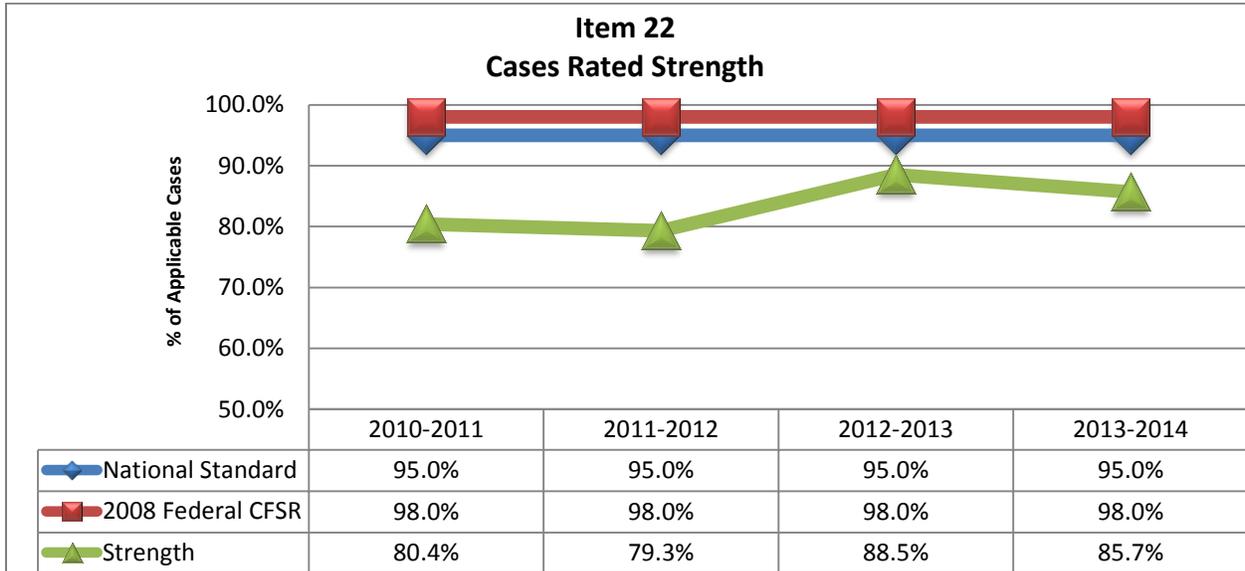
- a. Item 21, Educational needs of the child:** Of the 198 applicable cases reviewed since May 2010, 183 (92%) received a rating of Strength. Of the 52 applicable in-home cases, 45 (87%) received a rating of Strength. Of the 146 applicable foster care cases, 138 (95%) received a rating of Strength.



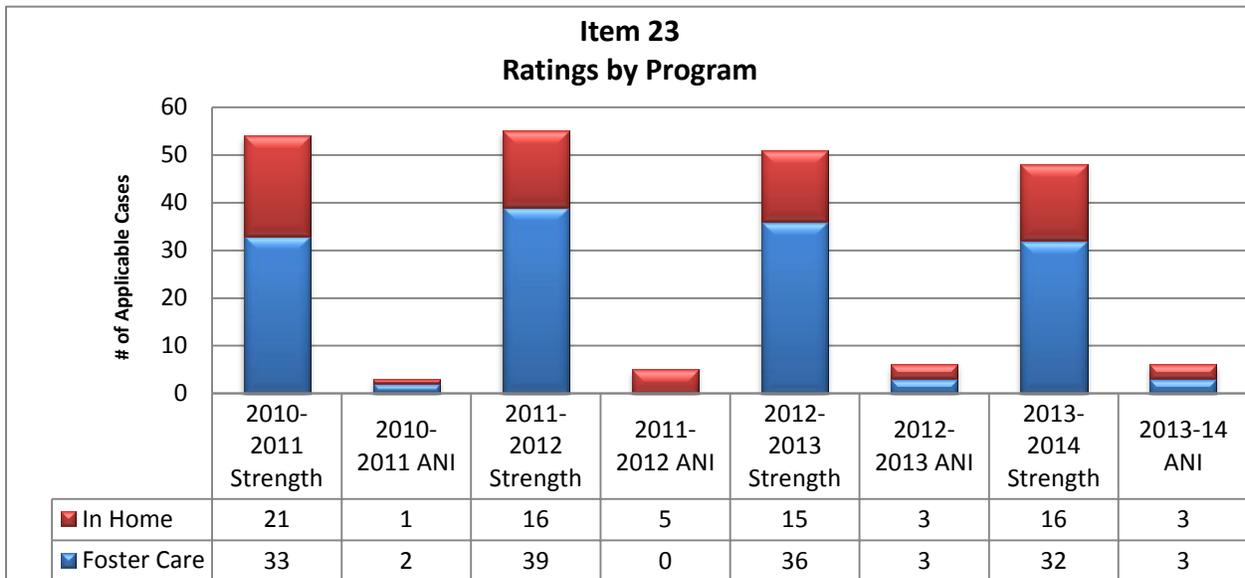
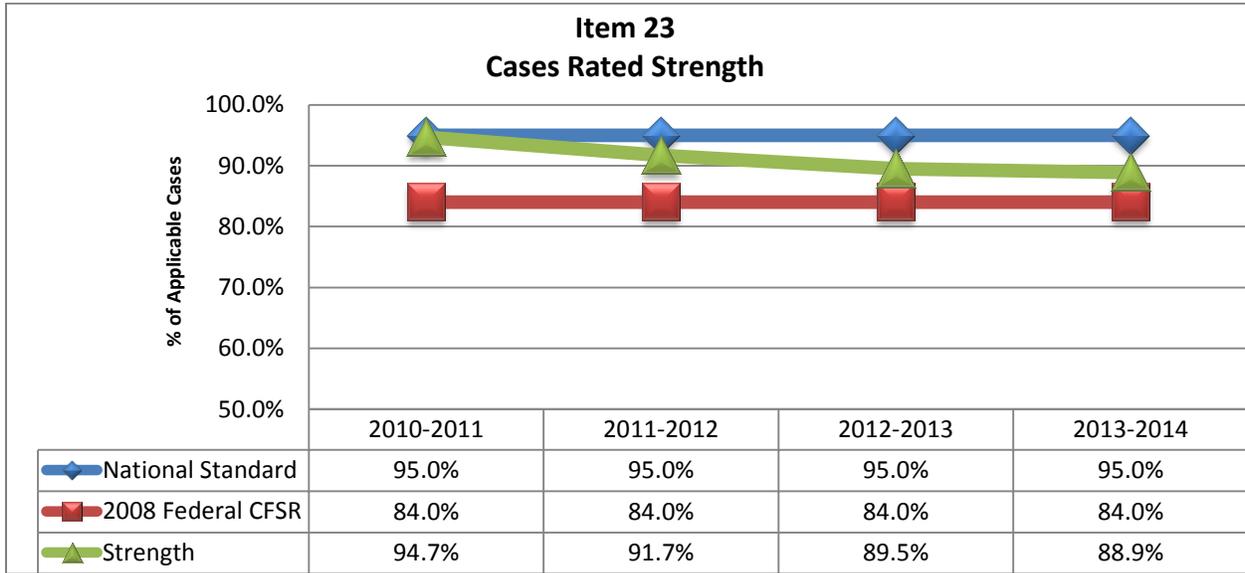
3. Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs



- a. Item 22, Physical health of the child:** Of the 203 applicable cases reviewed since May 2010, 169 (83%) received a rating of Strength. Of the 48 applicable in-home cases, 29 (60%) received a rating of Strength. Of the 155 applicable foster care cases, 140 (90%) received a rating of Strength.

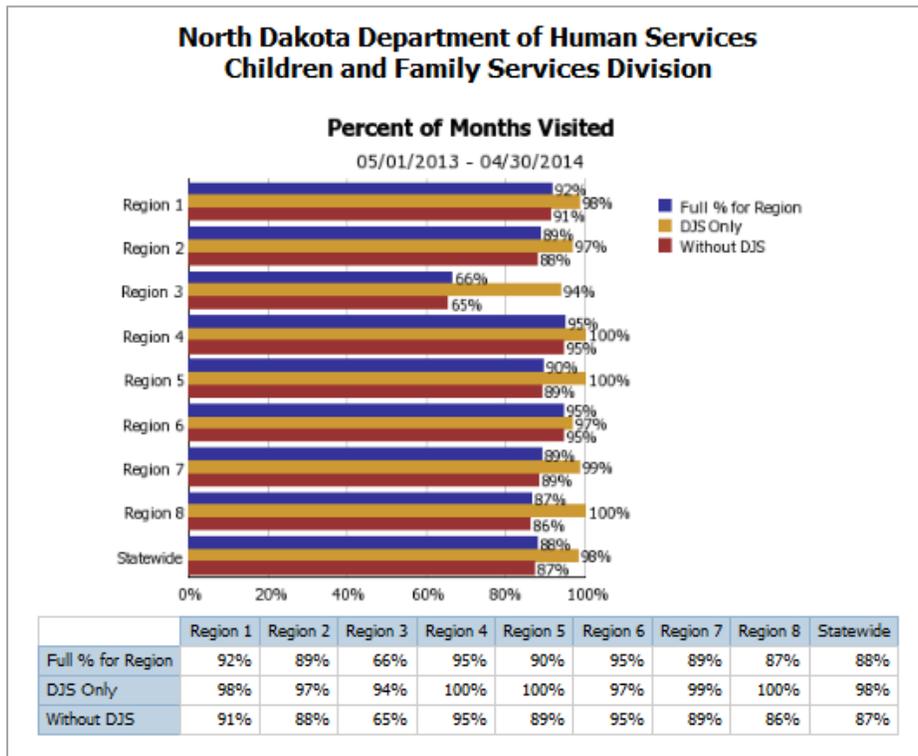


- b. Item 23, Mental/behavioral health of the child:** Of the 228 applicable cases reviewed since May 2010, 208 (91%) received a rating of Strength. Of the 80 applicable in-home cases, 68 (85%) received a rating of Strength. Of the 148 applicable foster care cases, 140 (95%) received a rating of Strength.



C. Well-Being Practice & Systemic Strengths

- Collaboration between agencies throughout the state was noted by Stakeholders.
- Stakeholders reported a great deal of agency creativity in finding ways to address service needs of children and parents when resources are few and waiting lists are long.
- Concerted efforts were consistently made to engage the children, custodial parents/mothers, and foster parents in the case.
- Frequency of visits between caseworkers and both children and parents/caregivers were strong.
- Foster care case managers consistently record caseworker visits with children and parents in FRAME, resulting in an accurate report in Cognos. The report includes county and IV-E eligible tribal child welfare cases. Below is an example of the report:



D. Well-Being Practice & Systemic Concerns

- Since 2010, a significant majority of ANI ratings received for Well-Being Outcome 1 were due to a lack of documented concerted efforts to engage the absent parent (most often the father) in the case.
- Documentation of quality visits resulted in ANI ratings for items 19 and 20.
- In-home case managers do not consistently record caseworker visits with children and parents in FRAME. Therefore, the Cognos report shows an inaccurately low percentage of visits.

- A Cognos report showing caseworker visits with parents of children in foster care is not a currently available. It is on the FRAME enhancements list.
- Most of the ANI ratings for items 21-23 were due to lack of documentation in FRAME/case record.

Systemic Factors

1. INFORMATION SYSTEM

The state is operating a statewide information system that, at a minimum can, readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.

A. Data and information

North Dakota utilizes FRAME to provide case management information and track children throughout foster care. Formerly known as the “Front End System”, FRAME, a web based application developed by North Dakota, serves as the comprehensive child welfare statewide information system for county and regional staff. FRAME hosts the information for Child Protective Services, In-home services and Family Preservation services, and Foster Care services. FRAME was implemented statewide in November 2009. FRAME collects extensive information on each child in foster care including, but not limited to: (1) the demographics related to the child in care; (2) the location and type of foster placement; (3) changes in foster care placements; (4) case goals for the child; and (5) time in care to achieve these goals. North Dakota continues to utilize the CCWIPS (Comprehensive Child Welfare Information and Payment System) system as the legacy system used for licensing providers, tracking incoming ICPC foster care requests and serves as the payment system for foster care and subsidized adoption.

Demographic characteristics, placement and permanency goal information is entered into the FRAME system upon a child’s entry into foster care. This begins the tracking of the child’s status while in foster care. Demographic information is required in order to register a client. FRAME uses the MCI “Master Client Index” when registering a case and that list interfaces with the ES100K number, which is an individual client ID assigned to each person. The ES100K is a master list that is created through the registration process of Medical Assistance programs (Medicaid, SNAP, TANF, Healthy Steps), Child Support, and CCWIPS. The Medical Assistance programs are required to verify the client information through ND Verify prior to registration. ND Verify is interfaced with vital statistics, Health Insurance (DEERS), ND Child Support (FACSES), ND Department of Corrections, ND Motor Vehicle/Watercraft (Motor Vehicle/Game and Fish), ND State Directory of New Hires, ND State Hospital Admission/Discharge, ND

Unemployment Insurance Benefits (Job Service), ND Wages (Job Service), Other Benefit Information, SNAP Intentional Program Violation and WSI Medical Claims Status (ND Workforce Safety and Insurance). Protocols are in place for client identification in the registration process and what happens when a duplicate record is created.

FRAME is the primary system to capture placement related information for children in foster care. The system has the ability to enter primary and secondary placements. However, in practice, most secondary placements as defined in AFCARS are not entered into the placement section of FRAME. Information in this section has direct link to the payments system (CCWIPS). Thus, in order for a provider to get paid, accurate and update to date information is required. Primary non-paid placements are also reflected in this section. Because North Dakota does not pay for respite settings, or other temporary absences from the placement setting, such as summer camps, these events are most often captured in a caseworker's case notes, not in the log of placements. In North Dakota, once a child is placed for adoption but their adoption is not finalized, the primary case management responsibilities shift from the county social service agency to the contracted adoption provider, Adults Adopting Special Kids (AASK). Due to the limitations required during the building of the FRAME application, the adoption case management function was not able to be completed. Therefore, a "Birth Counseling" (BC) case is opened for the child and an adoption (AD) program is opened for the adoptive family in the CCWIPS system. This is the information system county, regional and state office personnel utilize to locate placement related information for children in adoptive placement not yet finalized. Should an adoptive placement disrupt and the child needs to return to a foster care placement, the case management responsibilities revert back to the county social service agency. The FRAME case is reopened and the case management services for that youth would continue in the FRAME system.

Permanency goals for children in foster care are also captured in FRAME and can be updated at any time. FRAME requires an active permanency goal be present before the case worker can approve (finalize) the child's care plan. This typically occurs after each child and family team meeting, which occurs every three months. Thus, a child's permanency goal is reviewed at least four times a year. Permanency goals for children in adoptive placement would be contained in the FRAME system and replicated into the CCWIPS system.

FRAME is able to track the child's foster care status from the entry into foster care through discharge from care. Once a child is discharged from foster care, their foster care program in FRAME is closed. The only exception is when a child is placed for adoption. In these situations, the child's FRAME case is closed and the system of record becomes CCWIPS. The child's status, demographics, location and goal is tracked during the adoptive placement period and would close once the adoption is finalized. As noted above, if the adoption

disrupts and case management responsibilities return to the county, the child's foster care program is re-opened.

Case managers and supervisors can enter information only on cases they for which they are assigned. All security roles can view statewide information unless a case is locked to the county, region or state office. Regional supervisors have access to view information for all children in their service area and State Office personnel have access to view statewide information on children.

FRAME and CCWIPS information generates the required information for AFCARS and NYTD. While challenges exist for some of data elements within each of these federal reports, information related to demographics, location and goals for the placement of every child who is (or within the immediate preceding 12 months) in foster care is accessible and available.

Pursuant to the State/Tribal Title IV-E agreements and established policies, county social services staff or human service center personnel enter information into FRAME/CCWIPS on behalf of children in the Tribe's custody deemed eligible for Title IV-E.

B. Strengths

Strengths of the FRAME system include the ability to have statewide access to child protection data and case level information for children and families. This was a feature not available prior to the FRAME implementation and stakeholders in all program service areas have commented that having readily available data in this regard has strengthened their safety and risk assessments and provided data tools for supervisory management and payments. Previous to FRAME, CPS data was stored in a mainframe system dating to the 1980s. This antiquated system was not adequate to NCANDS Child File reporting. Beginning in 2010, North Dakota has been able to submit a complete child file to NCANDS. State Office experience as well as stakeholder feedback indicates that FRAME has worked well in most areas for the child protection program since the conversion. FRAME implementation has provided clear delineation and statewide access to the Child Abuse Information Index (central registry), formerly accessible only to state central and regional offices, enabling the ability to check the registry locally and to improve responses to requests for North Dakota CPS history information from other states. This is particularly significant given North Dakota's new and fluid population boom. FRAME's integration with other state data systems, as described above, has improved data quality when registering new CPS cases, as well, enabling case workers to obtain reliable identifiers such as dates of birth and social security numbers rather than the simple age element contained in the old mainframe.

Stakeholder feedback reveals FRAME enhancements to supports the needs of the Chafee Independent Living program, Independent Living Services and NYTD

survey data are working well. This is a foster care service area where FRAME is readily accessible by the case managers and state office personnel.

Another strength noted by stakeholders is that information from FRAME is much more accessible than prior to FRAME. As a web-based application, users are able to access the information from any secure internet connection.

A notable improvement in the past several years is an increased desire for more information and data to inform services and practices. The reporting features of FRAME and CCWIPS remain an area for ongoing improvement, yet with the reporting capabilities presently in the system, there has been an increased reliance and need for data. It has been encouraging to the state to see that users want data which can help improve services to children and families.

C. Concerns

While the FRAME and CCWIPS systems meet the basic needs of an information system, the challenges between these two systems are many. One of the prominent concerns is that the FRAME system does not capture adoption-related case management information for children placed for adoption but whose adoption is not yet finalized. These children's foster care episode continues until the adoption finalization, yet case management activities are provided by a contracted entity which does not have access to FRAME at the present time. The state has identified this as a priority system enhancement and efforts to remedy this issue will begin in FFY 2015.

Another area of concern with FRAME is that given the current linkage between the FRAME (placement record) and CCWIPS (payment process) when the funding source for a child's placement changes, but the child does not physically move, another placement setting must be entered into FRAME. It's quite feasible that the one placement could be entered into the system three times due to a payment issue. Thus, the ability to accurately assess placement stability for children is compromised with the current reporting method due to system limitations. This has been identified as another system enhancement that is needed in order to provide quality data to inform outcomes.

North Dakota has been working to enhance the FRAME and CCWIPS systems since the system went live in 2009. However, resource limitations have impacted the Department's ability to realize the level of improvements and upgrades needed. At the present moment, emphasis has been placed on ensuring the three federal reports are in full compliance. Other divisional needs remain on a waiting list.

Stakeholders through the CFSR's held in the last several years and at the strategic planning session held in February and March of 2014 made many comments about the challenges and frustrations with these systems. Therefore,

undergoing a detailed analysis regarding the business need for a child welfare information system and ultimately implementing an improved system is one of the strategies in the 5-year plan. It is also known that having quality data is a core component of a functioning CQI system. North Dakota has already engaged many partners to begin securing the resources to conduct such an analysis. A complete list of the requirements for an information system that meets the needs of child welfare is underway.

2. CASE REVIEW SYSTEM

The state's case review system has procedures in place that provide for a written case plan to be developed jointly with the child's parent(s); a periodic review of the status of each child no less frequently than once every six months; assurance that each child in foster care has a permanency hearing no later than 12 months for the date the child entered foster care and every 12 months thereafter; a process for termination of parental rights proceedings; and foster parents, pre-adoptive parents, and relative caregivers of children in foster care with notice of and a right to be heard in permanency hearings and periodic reviews.

A. Data and Information

Written Case Plan: Case planning through child and family team meetings is required for all foster care and in-home cases. Per ND Wraparound Practice Model Policy Manual Chapter 600-05 -20-25, once the family's safety and risk concerns are addressed and needs and strengths are identified, a written case plan is developed and recorded in the Family Assessment Instrument section in FRAME. The case plan is a working document that includes the goals and tasks developed at child and family team meetings (CFTM). A CFTM must be held within 30 days of a child's placement in foster care. Policy requires parents and children participate as active members on their child and family team. CFTMs are to be held at a time and location convenient for the family. If a family member cannot attend, the agency is to ensure he/she has opportunity to provide input and receives updated information following the meeting.

The ND CFSR process ensures a review of all written care plans for all cases reviewed. During May 2010 – April 2014, 78% of the foster care cases were rated strength. Areas needing improvement were largely due to the lack of absent parent involvement in the case planning process.

Periodic Reviews: The state's policy and protocols provide for the periodic review of the status of each foster child at a minimum of once every three months through an administrative review, the CFTM. An initial CFTM is required within 30 days following a child's entry into foster care. Progress towards the case goals are reviewed and updated by the child and family team at least every 90 days to reflect the accomplishments and changing needs of the family.

The ND CFSR process reviews compliance with the state's policies surrounding periodic reviews. During May 2010 – April 2014, virtually of the foster care cases reviewed reflected periodic reviews held within stated timeframes.

Permanency Hearings: In accordance with state law (NDCC 27-20-36) and policy, Permanency Hearings are conducted by the court. The hearing must be held in a juvenile court or tribal court of competent jurisdiction, or as an option, by DJS for youth under its custody. The agency must obtain a judicial determination that it made reasonable efforts to finalize the permanency plan that is in effect (whether the plan is reunification, adoption, legal guardianship, placement with a fit and willing relative, or placement in another planned permanent living arrangement) within twelve months of the date the child is considered to have entered foster care, and at least once every twelve months thereafter while the child is in foster care. The requirement for subsequent permanency hearings applies to all children, including children placed in a permanent foster home or a pre-adoptive home.

During May 2010- April 2014, the ND CFSR process revealed 92% of foster care cases received a rating of strength for item 7, which measures if permanency goals were established in a timely manner, if the permanency goals are appropriate to the needs of the case, if AFSA criteria for TPR is followed, and if compelling reasons for not following the TPR provisions are in the case file.

Process for Termination of Parental Rights: State law (NDCC 27-20-20.1) and policy provide for the TPR legal process in accordance with the provisions in ASFA. Concurrent planning is used statewide on a case-by-case basis to build plans for children that emphasize the recognition of early identification of cases that may move to TPR. At the time of the TPR, and/or when adoption is identified as a goal of the concurrent plan, adoption partners are invited to the table to participate in refining a plan(s) for the child.

Right to be Heard: The ND Supreme Court Rule 4.2 requires that in any matter involving a child in foster care under the responsibility of the state, the state must notify the child's foster parents, pre-adoptive parents and relatives providing care for the child whenever any proceeding is held with respect to the child. While "the state" has not been officially defined, the child welfare agency (e.g. the county social service office) by policy is responsible for issuing the notice of hearing to the foster parents, et.al. in advance of the hearing.

B. Strengths

Both AFCARS and case review data indicate the Case Review System is a notable strength of the ND child welfare system. Individualized case plans, quarterly child and family team meetings, annual permanency hearings, a process for TPR proceedings, and provisions to allow foster parents, et.al the right to be heard in permanency hearings and case planning meetings are well-

established functions of foster care case management throughout the state. Contributing to these strengths is the state structure, providing policy oversight and supervision through Regional Supervisors located in each region of the state.

Per case review data above, 92% of foster care cases received a rating of Strength in establishing permanency goals timely, 97% received a rating of Strength in achieving the permanency goal of reunification, guardianship, or permanent placement with relatives in a timely manner, and 93% received a rating of Strength in ensuring the goal of other planned permanent living arrangement is accomplished. Additionally, stakeholders reported strong agency efforts to meet expectations of this systemic factor. Of note were efforts to convene CFTMs at least every 3 months, and arrange placement in close proximity to family with whom the children were to be reunified. When a child's needs required placement farther away from home, stakeholders pointed to agency efforts to ensure these close relationships were maintained through visitation, phone calls, and other forms of communication.

FRAME generates an alert to the courts to ensure timely notification of permanency hearings for foster parents, pre-adoptive parents and relatives providing care for the child and their rights to be heard in these proceedings. Foster Parent Stakeholders confirmed the receipt of timely notification.

North Dakota's protocols are such that if any of the written case plan, periodic reviews or permanency hearings are not held within the states' timeframes, no state or federal dollars can be used to pay for the foster care maintenance payments. The FRAME system captures the requisite language for reasonable efforts.

C. Concerns

Delays in achieving the permanency goal of reunification were noted in AFCARS data.

Delays in achieving TPRs include continuances in court hearings, late requests, or requests for court appointed counsel by parents that occur in the midst of the legal process, often result in continuances that delay Permanency Hearings or other legal processes; and lack of training for judges and/or judicial application of the concept of child-centered permanency so that delays hinder the ability to move cases toward resolution.

Additionally, delays in achieving TPRs were noted in situations when tribes intervene in a case, or when a tribe does not respond to the required notification of hearing in a timely manner. Stakeholders note this can create obstacles in the permanency timelines.

Achieving the permanency goal of adoption in a timely manner has been a concern during case reviews in the past two years (see CFSR item 9 data). However, this data reflects a small number of cases. Additionally, AFCARS data for Permanency Composite 2, Timeliness of Adoptions, reflects a pattern of strong outcomes, with ND consistently exceeding the national standard. The Division will continue to monitor case practice through the CFSRs and Stakeholder meetings.

3. QUALITY ASSURANCE SYSTEM

The state has developed and implemented standards to ensure that children in foster care placement are provided quality services that protect the safety and health of the children and is operating an identifiable quality assurance system as described in the CFSP that: (a) is in place in the jurisdictions within the State/Tribal service area where services included in the CFSP are provided; (b) is able to evaluate the adequacy and quality of services provided under the CFSP; (c) is able to identify the strengths and needs of the service delivery system it evaluates; provides reports to agency administrators on the quality of services evaluated and needs for improvement; and (d) evaluates measures implemented to address identified problems.

For this CFSP Self-Assessment, review the 2014 APSR assessment of the state's QA/CQI system and CB's CQI status letter to the state concerning how the state CQI system could be enhanced. The state must provide an updated assessment and describe strengths concerns and enhancements to the QA/CQI system.

A. Data and information

The Informational Memorandum (IM) issued by the Administration for Children and Families on August 27, 2012 provided the state with information to establish and maintain a Continuous Quality Improvement (CQI) system. An initial assessment of the state's CQI was completed for the 2014 APSR submitted June 20, 2013. These two sources of information will be utilized as the current self-assessment for this systemic factor.

The ND CFSR QA/CQI process is deeply rooted in the ND CFSR process that was implemented in 2003. The process has included a reviewer pool of up to 50 trained individuals from the public and private child welfare sector. The ND CFSR process is conducted in each of the eight HSC regions of the state with annual reviews of child welfare cases regionally representing both in-home and foster care cases, for a total average sample of 70 cases annually. The cases are randomly drawn from FRAME data and represent diverse populations and permanency goals for children in foster care. The case draws include all counties (urban and rural), DJS, and tribal child welfare. The Assessment of Performance section of this report under Child and Family Outcomes gives a detailed report of the number of cases reviewed and outcomes for the 4 "CFSR cycles" of post federal CFSR data.

In addition to the case reviews conducted in six regions each year, two regions participate in a 'full review' which includes stakeholder meetings with eight groups in the region. The groups include: Youth served through the child welfare system (past and present); Caseworkers; Legal/court representatives; Education personnel; Foster Parents; Community service providers; Constituents; and Administrators. QA review of each case and Case Debriefing components from the federal model have been implemented as part of the process. An exit interview open to all child welfare staff, community partners, and the public is held in each region upon completion of the on-site ND CF SR QA process. A written report with outcomes of both case ratings and Stakeholder comments is provided for each region, county, DJS, applicable tribe, and stakeholders. The local agency has the ability to appeal a finding in case, yet once results are finalized and any 'areas of improvement' remain, the local agency completes an 'Agency Practice Improvement Plan' (A-PIP). A progress report of the A-PIP is required after 6 months.

Statewide cumulative results of the 23 items and 7 outcomes are tabulated and shared with all county, regional, and private providers of services. Trends are provided to region, county and state partners through meetings with County Directors, Supervisors, and child welfare staff at quarterly and annual meetings and conferences. An annual report of the ND CF SR findings is published on the Department's website. (<http://www.nd.gov/dhs/info/pubs/family.html>)

Additional QA processes

In addition, each child welfare program completes separate QA processes and procedures. These include the following:

- **Child Protection Services:** For QA purposes, the Regional Supervisor reviews on an annual basis 10% or a total of five completed CPS cases, whichever is greater, from each county in the region. The child protection law, administrative rules, policies and procedures provide the framework for the case reviews. The CPS Multi-disciplinary Teams also review the CPS assessments completed by the county social workers and assist with decisions about safety and risk of future maltreatment of children. A monthly review of all open CPS cases in the state is conducted by the state CPS Administrator and is used to evaluate the quality of services, case load size, and assessment timelines (cases open over 62 days). After review by the CPS Administrator, the report is sent to the Regional Supervisor for review and action. The information is used by state, regional, and county staff for program improvement planning.
- **Wraparound case management:** Supervisory staff members are responsible for ongoing case reviews to monitor service effectiveness and agency success in providing time-limited services. The supervisor conducts a formal case review on all closed cases.

- **Foster Care:** Regional Supervisors meet regularly with CFS staff to discuss state and federal law changes; federal rules and regulations; provide policy input; and discuss trends and pertinent programmatic issues.
- **Adoption:** A full team staff meeting of the AASK program occurs monthly. Cases are staffed, program improvements and plans are discussed, and policies are reviewed and revised. A QA Peer Review of open and closed case files is conducted on a quarterly basis.
- **Independent Living:** Each Regional IL Coordinator staffs cases with their agency supervisor. Detailed quarterly reports are submitted to the State IL Administrator. The State IL Administrator conducts annual site reviews of each of the IL programs. CFS conducts annual Regional Youth Stakeholder Groups where feedback from youth is received regarding their experiences with the child welfare system. Youth surveys have also been initiated to gather additional information regarding youth in care and their experiences and involvement with case planning and services.
- **Licensure Reviews:** CFS staff direct and/or participate in the following licensure reviews: Human Service Centers, Residential Child Care Facilities (RCCF's), and Licensed Child Placing Agencies (LCPA's). Each review provides an opportunity for Children and Family Services Division staff to examine the quality of services provided by these entities, review program and policy improvements and assess overall compliance with established laws, rules and policies which guide practice. These licensing reviews also establish an avenue to enhance collaborative relationships.
- **Local County Social Service efforts:** Within county social services, the county supervisor has the primary responsibility for quality assurance for child welfare programs, including the integrity of the Wraparound process and quality of work performance of the case managers. It is important the case manager and supervisor discuss specific cases on an ongoing basis. At a minimum, the supervisor is involved in the decision-making process at critical points in the life of each case. Regional Supervisors have responsibility for administrative supervision of child welfare programs and work collaboratively with county staff.

Effective methods of supervision are individualized for each case manager and to the group as a whole. Thus, county supervisors identify an individual's learning needs in relation to the job requirements and professional experience. They use this information to develop training materials and appropriate teaching methods relative to the specific needs of the case managers.

Five essential components to a functioning CQI system were identified in the aforementioned IM. The CFS Division began the assessment of how North

Dakota's system achieves each of the five components last year. There has been discussion about the IM and needs relative to Continuous Quality Improvement with partners and stakeholders. In fact, various aspects of the North Dakota process were a discussion item during the strategic planning meetings. Components of the state process were noted to be strengths, concerns were noted, and the need for improvements rose to level of a specific goal in our five –year plan. Partners share the desire to ensure children and families have improved outcomes as a result of quality services. Compliance-based reviews were seen as less helpful. There is momentum in the state to refine and enhance strategies to partner in a CQI process which supports positive outcomes in a supportive and informative manner.

A brief summary on how the state meets each of the five components is included below:

- 1. Fundamental Administrative Structure:** There is a statewide approach to QA applied through all regions. At the county level, supervisors have a role in reviewing casework and case files to ensure compliance and positive outcomes. Regional Supervisors, as described earlier, conduct case reviews of child protection assessments and report findings back to the worker and the CPS Administrator. Furthermore, the ND CFSR process is well established and applied consistently through all counties and regions in the state. There is an approved training process for all case reviewers and a guidebook is available for each reviewer. Further evidence of the administrative support for CQI in the past year is that North Dakota has encouraged and supported four staff members to participate in the CQI Academy. The Child Welfare Infrastructure Administrator was accepted and participated in the Child Welfare Analytics Course offered through Chapin Hall in November 2013. Together, these opportunities have provided important foundational support as the state moves forward with a formalized CQI program.
- 2. Quality Data collection:** Quantitative data is largely collected through the state's information systems, FRAME and CCWIPS. Data related to demographics and outcomes for each of the program area can be accessed through these systems. Qualitative data is collected largely through the state CFSR process of case reviews, stakeholder interviews, and focus groups. Reliance on survey information is utilized through the CHAFEE program in relation to the NYTD survey. The Department of Human Services also conducts biennial regional focus groups or surveys as a method of gaining information on how services are being provided and gaps in services. Quantitative Data is obtained through NCANDS, AFCARS, NYTD as well as established division reports, such as the Child Welfare Data Snapshot, Monthly Caseworker Visitation Reports, and assorted FRAME reports. Qualitative data has been received through the stakeholder meetings provided through the full CFSR's and convening statewide stakeholder meetings, such as was done for the development of this Children and Family Services Plan. These data elements

provided the foundation for this self-assessment of the Child Welfare Outcomes and Systemic Factors.

In the case review process, the federal CFSR instrument is utilized and ratings are completed in a way that is consistent with the instructions across many reviewers. The QA process built into the review and debriefing of the case ensures consistency in the ratings. Results of the case reviews and the CFSR process are analyzed and utilized to assist in the development of any necessary agency practice improvement plans (A-PIPs).

The CFS Division monitors existing federal requirements and guidelines and will pursue changes to FRAME to assist with federal reporting requirements. NCANDS data has been submitted in a timely fashion. Any irregularities or areas for which the state is unable to report are clearly identified and the state works with the Children's Bureau to address any questions. North Dakota implemented the new reporting fields for reporting NCANDS data. In this process, enhancements were needed to better align our data with the NCANDS definition. This work is in process. NYTD reporting submissions have been in compliance and timely. North Dakota participated in a site review for NYTD in July 2013. This review provided valuable information regarding the strengths of the systems the state has implemented to comply with the reporting requirements, as well as the challenges. North Dakota is in the process of pursuing the changes to our FRAME system and mapping logic to bring the few identified elements into full compliance.

An area of great challenge for the state continues in the AFCARS reporting process. The state entered into an AFCARS Improvement Plan in 2003 and improvements continue. Complications in part have come from the changes in the FRAME and CCWIPS systems. Enhancements and modifications were completed and applied to the 2013A submission. However, through this process it was decided that changes to the Legacy system would not produce the desired results and a complete re-write of the reporting program was needed. Efforts are underway and North Dakota is preparing to submit test deck cases of the new mapping logic by October 2014. Following this process, additional system enhancements will be necessary and North Dakota is committed to ensuring fully compliance with quality AFCARS data reporting.

To assist internal efforts to address data quality, the CFS Division, along with internal partners, employs workgroups to manage the state's reporting needs for NCANDS, AFCARS, and NYTD. A workgroup made up of the state's Information Technology Department (ITD), Information Technology Services (ITS), Decision Support Services (DSS), and program managers comprise the key members of the group. Groups meet throughout the year to review the state's reporting process, review the quality of data and coordinate efforts to improve areas where challenges are found. Prior to each submission, the reports are run and reviewed. Any data quality issues that can be fixed are addressed with the field

and corrections. Areas which indicate a data quality issue in which policy or programming must be altered are discussed and workgroup members coordinate plans to remedy the identified problem.

The FRAME system became the system of record in late 2009. FRAME is able to provide the basic demographic, placement and goal related information for children in foster care. However, during the implementation phase, several challenges with the system for all programs involved were identified and a group has been working on system improvements since that time. The CFS Division meets with ITS, ITD, and DSS representatives through “FRAME Strategy Meetings” to address and prioritize the work orders. Opportunities to discuss the approach to training users and maintenance of the user manual are also discussed at these meetings. This is another avenue the state continues to utilize related to quality data collection.

Finally, the CFS Division continues to utilize information gained through the many standing committees (Regional Supervisors, County Directors, County Supervisors, Court Improvement Project, Statewide Recruitment & Retention Task Force etc.) to monitor the state’s achievements in relation to the systemic factors of the federal CFSR. Additionally, needs relative to training, the array of services available, recruitment and retention needs, etc. are monitored through the state’s CFSR process and the input described above.

- 3. Method for conducting ongoing case reviews:** This is one of the strongest areas for North Dakota. There is an established, ongoing case review component that includes reading case files, and interviewing parties involved in the case. The universe of cases includes children who are/were recently in foster care and children statewide who are/were served in their own homes. The universe includes youth in North Dakota’s juvenile justice system in foster care and tribal foster care youth determined to be IV-E eligible. All four tries participated in the CFSR process this past year.
- 4. Analysis and Dissemination of Quality Data:** Results of the case reviews are shared locally, regionally, and statewide. The CFS Division has made available the administrative data to organizations such as Casey Family Programs and Kids Count to assist in analyzing and understanding the state’s data. Improvements have been achieved in the state’s FRAME system, allowing users at the local level to access certain data. Examples of reports available to the all users of the FRAME system includes reports such as the Worker/Child Visitation report for foster care and in-home cases, pending CPS assessments, Foster Care Placement Location by Worker or Provider report, Foster Care Placement Report, a report on children placed with unlicensed relatives and the reasons for not being licensed, and a Foster Care ICWA report. Supervisors, County Directors, and Regional Supervisors also have access to various CPS payment reports. In March 2014, North Dakota released the “Foster Care Demographics Report” as an additional report available to all users. Challenges remain,

however, in the state's ability to have timely access to data which can help inform policy and practice outcomes. Challenges have ranged from ensuring the data was entered correctly, to identifying problems with the replication of data between the two systems, to having limited staff resources to manage the multiple demands. The workgroups described in the quality data section are often called upon to assist with data quality issues. The CFS Division is committed to sharing all available reports and data with the various stakeholders as will be described below.

- 5. Feedback to Stakeholders and Decision-Makers and Adjustment of Programs and Process:** The CFS Division has a strong commitment to utilize feedback received along with analysis of available data and adjust policies or programs accordingly. Avenues for feedback from stakeholders is provided at many levels ranging from various task forces, community focus meetings held by the department and stakeholder meetings through the CFSR process to name just a few. Established stakeholder meetings include: county case managers, county supervisors, county administrators, school personnel, court representatives, constituents, youth, community services providers, and foster/adoptive parents. CFS Division staff participate on a regular basis, as requested, at various committees, such as the County Supervisors meeting, to help supervisors and field staff understand the correlation between the outcomes and casework practice. Youth and family participation in various task forces within the CFS Division is valued. Established task forces and committees with youth, family and citizen participation include the Foster-Adopt Task, Foster and Adopt Recruitment and Retention Task Force, the Alliance for Children's Justice, the State Child Protective Services Team, the Child Fatality Review Panel, and the ND Youth Leadership Board. Feedback from all these sources is critical as the Division seeks program and service enhancements throughout the state.

B. Strengths

North Dakota's QA/CQI system is rooted in a strong administrative structure that supports a consistent, well-defined case review process. Many of the strengths were noted in the assessment of the core components above and will not be repeated. North Dakota has made great strides in providing and accessing quality data and has identified action plans to address outstanding challenges. Data is synthesized, analyzed and disseminated. Annual reports, charts and graphs can inform regional and statewide trends over the past several years. Stakeholder feedback is valued and utilized as programs and policies are reviewed and funding decisions are reached.

C. Concerns

As noted in the 2014 APSR CQI Assessment, concerns remain regarding the small sample size currently utilized in the ND CFSR process. It is not a statistically significant sample. Thus, the ability to make assumptions about

practice in a particular county or region is often based off the review of one case per year (sometimes every other year for small counties). This concern is acknowledged by the CFS Division, recognizing that the sample size is a direct reflection of available resources. Another concern acknowledged by the CFS Division is the timely return of case review information to the local agency/region. The CFS Division has, and will continue to explore, organizational capacity to support timely response. Local agencies have reported struggles to develop meaningful A-PIPS which result noted improvements to practice and outcomes. The CFS Division remains a resource to counties, yet collectively, this is an area of the ND CQI system which would benefit from the planned enhancements described below. As a result of some of these challenges with the ND CFSP process, a final concern noted through stakeholder feedback is that some of the local agencies have experienced the process to be more punitive than is intended. CFS desires to partner with local agencies to identify strengths, practice challenges and identify strategies to improve outcomes for children and families and will bring this commitment to the table as the partners convene to review and revise the state protocols.

A final concern to be noted with North Dakota's CQI/QA system is that of having quality data at all levels of the service continuum. This concern has been stated in more detail in the Information Systems systemic factor, thus the 'systems' issues related to this area will not be further delineated. A critical practice component for this factor, however, is that of timely and accurate usage of the system of record. CFS desires to partner with local agencies to strengthen quality data practices at the worker and supervisory level. It is anticipated that this concern will be addressed in the planned enhancements described below.

Planned enhancements to the ND QA/CQI system

North Dakota anticipates requesting Training and Technical Assistance in the area of a specific CQI State Assessment. It will be important to bring all stakeholders together to collectively assess the needs of the state relative to CQI in child welfare and articulate the vision and action steps which will be needed to propel the state into meeting these goals. There is a shared commitment to providing quality services and increasing positive outcomes for children and families in the state. A statewide CQI Assessment and development of a CQI program, as noted in Goal 2 of the CFSP will be the focus of the state's efforts in the upcoming five years. Opportunities to focus on strengthening the last two components of a CQI system (analysis and dissemination of quality data and feedback to stakeholders and decision-makers and adjustment of programs and processes) prove to be some of the more exciting enhancements possible as a result of completing Goal 2.

4. STAFF TRAINING

The state is operating a staff development and training program that: (a) supports the goals and objectives in the agency's CFSP; (b) addresses services provided under both subparts of title IV-B and the training plan under Title IV-E of the Act; (c) provides training for all staff who provide family preservation and support services, child protective services, foster care services, adoption services and independent living services soon after they are employed and that includes the basic skills and knowledge required for their positions; (d) provides ongoing training for staff that address the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP; and (e) provides training for current or prospective foster parents, adoptive parents, and the staff of State/Tribal-licensed or State/Tribal-approved child care institutions providing care to foster and adopted children receiving assistance under Title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to caring for foster and adopted children.

A. Initial Staff Training

1. Data and Information

CFS contracts with the UND Department of Social Work, to operate the Children Family Services Training Center (CFSTC). This training center is responsible for most of the child welfare training in ND. CFSTC provides a Child Welfare Certification Program, which is a competency-based training curriculum. The training is delivered as a four-week curriculum (over 100 hours of training) offered in both spring and fall.

In addition to the county child welfare social workers, social workers with PATH of ND and the AASK program agencies are also required to attend. Tribal child welfare personnel are invited and encouraged to attend. The training must be completed within the first year of employment and must commence within the first six months. The training is held at UND in Grand Forks. Between 50 and 60 new case managers complete the training annually. During the SFY 2014, 59 case managers completed the training.

If a case manager begins employment after a session has commenced, they can begin during any week of the cycle with the exception of Week III. Regardless of the specific duties in their individual job descriptions, all case managers and child protection workers attending the training are required to complete all four weeks of training. CFSTC covers the costs of all experiences for the training participants except mileage, which is the responsibility of the employing agency.

Participants, at the completion of each week of training, evaluate their specific competencies/skills. They rate themselves on their understanding of the concepts or their skill acquisition. Feedback is also elicited from the training

group on any additional training needs they identify. For example, if a participant does not understand a concept or skill, CFSTC staff will work with the individual and their supervisor to help them attain the skill.

The training model incorporates classroom teaching, field assignments (e.g. completing a CA/N assessment), and on-line training. The four weeks of training cover the areas detailed in the ND Training Plan (**ATTACHMENT E**).

Staff from CFS work with CFSTC as both trainers, evaluators of the training, and make modifications when necessary, particularly when laws and policies change.

Children's Mental Health Workers, DJS workers and family preservation workers from the Village Family Service Center and Lutheran Social Services of North Dakota participate in the week 2 of Child Welfare Certification to receive their initial Wraparound Certification.

The State IL Administrator provides or makes arrangements for training newly hired IL Coordinators within the first month of employment. Training is ongoing through quarterly meetings.

Adoption case managers through the AASK contract are required to complete the Adoption Competency Curriculum (National Resource Center for Special Needs Adoption at Spaulding) within their first year of employment. Additional trainings on the PRIDE family assessment model and Train the Trainers are also required.

Training on the FRAME system is included in the Child Welfare Certification program. For new employees not attending that session, training occurs at the local social service agency. North Dakota's training plan for the 2015-2019 CFSP includes additional training opportunities for participants utilizing the system who are not required to attend Child Welfare Certification training. Additionally, Title IV-Eligibility training for new eligibility workers will be offered by the state office personnel.

Additional PRIDE trainings are offers to support the use of the PRIDE model in foster parent licensing and adoptive family assessments. PRIDE Train-the-Trainer is a training course for any case manager or foster/adoptive parent designed as a PRIDE trainer. In SFY 2014, ten additional people were trained as trainers during the fiscal year. PRIDE Model – Conducting a Mutual Family Assessment is a session designed for the licensor/adoption worker in applying the PRIDE competencies to the family study process. This past year, 14 case managers, licensing workers or adoption workers were trained.

2. Strengths

CFSTC is a longstanding partner in the effort to provide initial staff training for child welfare services in North Dakota. They are highly regarded in the state and are active participant to assist CFS in identifying and providing necessary training. Consistent training messages are possible.

Over 90% of responses from participants in training indicate that they agree/strongly agree that they have obtained the knowledge or skills necessary to complete the competencies outlined in the training. Additionally, participants must achieve at least 90% on their on-line testing in order to pass those portions of the training.

CRSTC is presently working on how trauma informed practice principles are incorporated into Child Welfare Certification. During a recent training of this new material, 94% of participants completing the evaluation strongly agreed (81%) or agreed (13%) with the statement "I understand the impact of trauma and can apply to my work with children and families".

3. Concerns

During the strategic planning session in February and March 2014, feedback primarily focused on the strengths of the initial staff training plan in North Dakota. Participants expressed, however, some concern that the amount of required content has grown so much in the past years it has been hard to keep the training contained to four weeks. Many other national models have a six-week based program so as the need to increase content continues the length of the certification training will need to be a factor considered by North Dakota. With that said, participants and supervisors have also expressed concerns about the amount of time in training and out of the office. This often places a burden on the worker if their agency is unable to provide adequate back up support while the worker is training.

Because the state is a county administered system, there are some inconsistencies in training reinforcement across the state. There is no clear process for transfer of learning into the field.

Feedback from stakeholders, tribes and courts reveals the need for an initial supervisor certification course for North Dakota. Supervisory training has been made available as resources permit to strengthen skills, yet all acknowledged our system would be improved with such a supervisory training program.

B. Ongoing Staff Training

1. Data and information

In ND, individuals who provide child welfare services are required to carry a license to practice social work. As Licensed Social Workers, they are required by ND law to complete 30 Continuing Education Credits every two years to retain their license. In addition, child welfare staff that provide case management services are required to be certified in the Wraparound process and must be recertified every two years. The CFSTC Director partnered with CFS for the completion of the 2015-2019 Training Plan (**ATTACHMENT E**). In addition, CFS develops an annual work plan with CFSTC to address on-going training needs in child welfare practice.

Child welfare case managers are encouraged to identify, with their supervisors, any training needs as part of ongoing supervision. At the present time there is no “advanced” training curriculum in the state specific to child welfare practice. However, there are a number of ongoing training opportunities available to staff throughout the year that are designed to strengthen knowledge, skills and competencies consistent with the goals of the CFSP. These ongoing opportunities are detailed in the Training Plan.

Ongoing supervisory training is provided to county child welfare supervisors during their regularly scheduled quarterly meetings. This past year the training focused on “Managing Effectively in Organizations.” The Training Center utilized Marsha Salus as Training Consultant. Advanced Training on Secondary Trauma was also offered in two locations for supervisors (Minot and Grand Forks). 30 supervisors took advantage of this training during SFY 2014.

CFSTC coordinates the Secondary Trauma Education, Prevention and Support Project. The Cost of Caring: The Impact of Secondary Trauma has been delivered to approximately 250 persons in the SFY 2014 (as part of Child Welfare Certification, the Children and Family Services Conference, and community workshops). Additionally, 25 Trauma and Stress Reduction classes have been delivered to a number of counties and have focused on a variety of topics (i.e. grief and loss, second guessing and rumination, team building and resiliency). These have been delivered through interactive video, live internet streaming and classroom settings. Other workshops have been delivered as part of the Children and Family Services Conference reaching nearly 100 participants.

Parent Aide Training is delivered to newly hired parent aides who assist in providing direct services to families where child abuse and neglect has been identified. In SFY 2014, a weeklong training was held where participants from

the counties and tribal social services participated. 12 parent aides were trained.

Wraparound Certification Training continues to be a collaborative effort between the Division of Juvenile Services (DJS), Children's Mental Health, and PATH. It is a required training for all newly employed county case managers, children's mental health workers, DJS workers, and private partner agencies providing contracted services through the Department. Recertification is required every two years. 84 participants completed Wraparound Certification Training in SFY 2014 and approximately 259 public and private practitioners were recertified during this same time period.

Certain trainings impact both ongoing staff members as well as foster parents. For example, CFSTC provides training for PATH ND, Inc. Treatment foster care as administered by PATH ND Inc., has adopted the Non-Violent Crisis Intervention model developed by the Crisis Prevention Institute (CPI). All PATH foster parents and staff are required to attend a 12-hour session on Non-Violent Crisis Intervention presented by certified trainers in the CPI model. In addition, it is a PATH requirement that all treatment foster parents attend an annual refresher course reviewing the major elements of the CPI model. In SFY 2014, 100 participants attended this training.

Since the implementation of the ND CFSR QA process in 2003, CFS has provided on-going training related to the CFSR process, case review instrument, policy related issues, and documentation of case related best practices. Training has included county and tribal social service caseworkers and supervisors, Regional Supervisors, DJS workers and supervisors, legal and court related staff, county directors, and CFS staff. CFSR training has been held in central locations, during Child Welfare annual conferences, and has utilized technology such as video conferencing to support attendance from distant locations.

To further imbed the practice standards of the CFSR into actual practice, a variety of professionals have been recruited and trained as reviewers across the state. Child Welfare supervisors and caseworkers having completed the training and participating subsequently as a reviewer have indicated the usefulness of their experience and knowledge as they return to their agencies for day-to-day work. Staff of private agencies providing therapeutic foster care and special needs adoption, DJS staff, and tribal social service members has been included on review teams. Currently, designated court personnel have been included in the pool of trained review members.

The Native American Training Institute (NATI) is another collaborative partner providing valuable training opportunities for ongoing staff development. They organize an Annual Indian Child Welfare Conference; host Cultural Awareness workshops, as well as offering additional training curriculums aim

at improving services to Native American communities. NATI are key partners in providing additional training opportunities to North Dakota's tribal agency social service staff.

In addition to the above, CFS continues its collaboration with the clinical staff at the regional human service centers and private providers in the Trauma Collaborative for Traumatized Youth (TCTY) Initiative. Additionally, the Mental Health and Substance Abuse Division of the Department (MHSA) received a System of Care Expansion Grant in July 2013. The focus of the grant is to develop and implement a statewide, cross-systems trauma informed system of care. MHSA is working closely with the regional human service centers, county child welfare agencies, tribal child welfare agencies, residential child care and psychiatric residential treatment facilities, and the juvenile justice systems to provide training and related technical assistance. CFS looks forward to the ongoing staff training opportunities afforded through these partnerships.

2. Strengths

ND CFSR QA Stakeholders commenting on this issue note there are many on-going training opportunities available for staff at the state, regional and county levels, including annual state conferences which focus on a variety of issues.

In an effort to provide consistent, high quality and low-cost training for persons mandated and permitted to report suspected child abuse and neglect, an Internet-based training module, available to the public, has been developed. Enhancements to this training module include the addition of an option to obtain a certificate of completion and integration with an existing training database for early childhood professionals. The Internet-based Training Module for Mandated Reporters of Child Abuse and Neglect was posted to the Internet on April 1, 2012 and publicly released by means of a press release on 4/20/12. Consistent, quality and low-cost training is now available for mandated reporters and will continue increase the quality of reports of suspected child abuse and neglect and enhances the administrative handling of child abuse and neglect cases. The module includes a tracking mechanism to monitor completion of the training by mandated and permissive reporters. View the training module at: <http://www.stopchildabusend.com/> .

NATI has been a key partner in the provision of ongoing staff development opportunities. The North Dakota Indian Child Welfare Conference has grown through the year such that it attracts national participation and is a critical component to increasing the knowledge of the child welfare workforce on policies and practice opportunities when working the Native American communities.

3. Concerns

During the strategic planning session in February and March 2014, there was feedback from stakeholders, tribes and courts identifying a need for ongoing child welfare training program for a variety of mental and behavioral health topics. One of the specific comments from a meeting participant highlights this need: “there is a lack of training staff/professionals on topics related to high aggressive behaviors, effects of trauma.” Ideas and suggestions offered during this meeting included an increased use of on-line training opportunities.

Given the county administered/state supervised structure, there is a lack of training specifically for administrators in child welfare. This continues to be seen as a need and CFS looks forward to discussions and possibilities with stakeholders, tribes and courts on strategies to address this need.

C. Foster & Adoptive Parent Training

1. Data and Information

CFSTC provides foster and adoptive parent training statewide using the PRIDE foster/adopt parent pre-service training curriculum. Each new prospective foster parent or adoptive parent must complete the training. State foster care policy requires foster parents complete the training prior to placement. This requirement can be waived with the approval of the Regional Supervisor on a case-specific basis. However, all foster/adopt parents must complete the training within their first year of licensure.

Training teams are made up of case managers and foster/adoptive parents who complete a Train-the-Trainer program delivered annually by CFSTC. The primary method of training is live delivery to a group of prospective foster and adoptive parents. Foster and adoptive parents attending the training have commented that close connections can be formed with other foster parents while sharing the training experience. CFSTC can deliver the PRIDE pre-service over the Interactive Video Network (IVN) when there are enough participants in need of this format. Using technology of Interactive Video has proven to be a successful model for training foster parents residing in remote areas that would likely have had to wait to begin the training process. Evaluations of those attending training do not reflect a difference in the satisfaction of trainees who attend the IVN training versus live training.

If a foster or adoptive family is a two-parent household, both parents are required to attend the training. Since the curriculum is written and designed to train both foster and adoptive parents, if a foster family is preparing to adopt, they are not required to complete the training again unless the adoption agency has a specific reason to make this request.

The frequency of training varies across the regions of the state. Some regions run up to six sessions a year (e.g. Fargo), while in other regions there may be two sessions. Some regions, such as Williston in the far northwest corner of the state, have used the IVN training when there are not sufficient numbers for a group session and waiting for additional participants would delay preparation and licensure for those interested and waiting. The PRIDE training is a widely accepted training program for foster/adoptive parents that has been field tested and modified to meet identified pre-service training needs over the years. PRIDE is being used in 32 states, eight provinces in Canada, and 15 other countries around the world.

The PRIDE core curriculum is used throughout the state to as one method to supplement the pre-service training curriculum. This additional training provides opportunities for foster and adoptive parents to enhance their skills in regard to specific topic areas, based on the needs of the individual and regions/communities. In addition, various areas of specialty training are provided at conferences and in individual training sessions across the state. The PRIDE Core Curriculum is available through a digital format, which allows parents to access the training from their home.

Additional training opportunities for foster parents during SFY 2013 included an annual ND Foster Parent Conference: The 2013 North Dakota Foster and Adoptive Parent Conference was held in Bismarck in October 2013 and 263 people participated in the event.

Specific and specialized training is provided for therapeutic/treatment foster parents, including the PRIDE pre-service training, a “basic-training” curriculum specific to therapeutic parents, and other sessions designed to cover fire safety, first aid and crisis prevention. Therapeutic foster parents have access to Individual Education Funds to support their individually created training plans. The foster parents, in consultation with their licensing worker, develop these plans.

New therapeutic foster care families are required to complete the 27 hours of PRIDE training prior to initial placement. Additionally, they are required to complete 12 hours of non-violent crisis intervention and 17 hours of therapeutic foster care training (much of which is centered on trauma informed care). CPR and First are also required. The additional requirements are to be completed in the first year of fostering. PATH therapeutic foster parents are required to complete 30 hours of annual training after the first year.

County foster parents are required to complete the 27 hour PRIDE training pre-service curriculum prior to placement which meets the training requirements for the first year. After the first year, foster parents are required to complete 12 hours of annual training.

CFSTC annually assesses the training needs of all foster parents. Regional plans and workshops are developed based on the needs and the interests of foster parents. The workshops are based on input from county foster parents, as well as information received from PATH (treatment foster care organization) and AASK (Adults Adopting Special Kids).

Training for licensed or approved residential child care facility staff is offered through annual conferences or facility-sponsored training opportunities. The 2013 CFS Conference offered specialized training topics directly related to facility operations and needs; street drug awareness and suicide prevention protocols. A nationally known and well respected expert, Lindsey Hayes, came to North Dakota to work as a consultant with two ND facilities as well as present to over one hundred attendees on suicide prevention techniques for facilities.

Facilities are required to develop annual training plans with employee input. Twenty hours of annual training is required and must prepare staff to best meet the needs of the children in placement. The following subject areas are required trainings for all facility staff: children's emotional needs and problems, reporting CA/N, behavior management techniques (including crisis management and nonviolent crisis intervention), and emergency and safety procedures, including first aid and CPR.

Foster Care facilities are responsible for providing training to employees according to licensing policies. When the annual onsite licensing review is completed, personnel files; including the training records are reviewed to ensure training completion and full licensing compliance.

2. Strengths

In January 2014, a foster parent retention survey was conducted by the Children & Family Services UND Training Center. 131 respondents indicated that 73.2% (96) felt agree or completely agree that they were adequately trained to be foster parents. Only 1.5% (2) of the respondents did not feel they were adequately prepared to be foster parents. Foster parents offered comments requesting specialized training modules to consider for future training opportunities; drug exposure, trauma, PTSD, FAS, RAD to name a few. In the same survey, 62.6% (82) of foster parents indicated that they prefer to receive their training in the classroom and 61.8% (81) felt that online training was also appropriate and helpful.

CFSTC issues a regular online newsletter for foster and adoptive parents. A recent version of this newsletter can be found at <http://und.edu/centers/children-and-family-services-training-center/may-2014.pdf> . This publication reaches a wide audience and helps to strengthen foster parent skills. The AASK program also issues a regular electronic

newsletter, The Heart Times, which features an educational component to supplement the recruitment opportunities provided by such a publication. The Heart Times is made available to all current foster families and families who have adopted through the AASK program.

A two-hour fire safety course and a one-hour fire safety course was recently developed and added to the DHS website. This training is an alternative to personally attending fire safety courses that are offered in each region of the state. By completing a fire safety course online, foster parents can meet the fire safety training requirement prior to initial licensure, or at annual re-licensure in the comfort of their own home according to their own schedule. (<http://www.nd.gov/dhs/info/pubs/docs/cfs/fire-safety-training.pdf>)

The North Dakota Foster and Adoptive Parent Association has been a strong partner in meeting the training needs of foster families.

The Department received a grant to enhance training opportunities for ND facilities, October 2013 “Trauma Informed Care and Transformation Towards Positive Outcomes” was offered free of charge to facility staff in Bismarck, ND. The Department is committed to ensuring that employees understand trauma and the effects past trauma has had for children in placement. In addition, a second phase to this training initiative will occur in the fall of 2014 to ensure youth and families touched by residential interventions realize sustained positive outcomes post discharge.

ND facilities are offered on-site child abuse and neglect mandated reporter training by CFS Child Protection staff. In addition, facilities are encouraged to utilize the CA/N mandated reporter online training module as another way to receive this critical training for all staff as required annually.

3. Concerns

Availability of resources and supports remains an ongoing challenge for North Dakota. This challenge impacts our ability to provide consistent and available foster parent training to rural areas. Use of interactive training modules, on-line training resources, training DVD’s have assisted our efforts, yet foster parents and case management staff continue to voice this need.

Feedback from the PRIDE sessions and other stakeholder comments acknowledge North Dakota’s desire to increase the availability of resources and supports for non-licensed relative (kin) providers. Discussions will continue in the upcoming five years to identify and implement solutions to address this concern.

5. SERVICE ARRAY

The state has in place an array of services that includes, at a minimum: services to assess the strengths and needs of children and families assisted by the agency and are used to determine other service needs; services that address the needs of the family, as well as the individual child, in order to create a safe home environment; services designed to enable children at risk of foster care placement to remain with their families when their safety and well-being can be reasonably assured; services designed to help children achieve permanency through reunification where appropriate, or placed for adoption, guardianship, or other planned permanent living arrangement and through post adoption services; services that are individualized to meet the unique needs children and families served through the agency.

A. Data and Information

Please see Service Description for a complete list of services available through North Dakota's child welfare system.

Assessment of child/family strengths and needs: Caseworkers (county, tribal, DJS) are responsible to assess children and families initially and ongoing. In doing so, caseworkers collaborate with public and private educators, medical professionals, dentists, mental health and substance abuse providers, and other providers to address identified needs. Documentation of assessments are in FRAME under the Family Assessment Instrument tab. Refer to case review data for Well-Being Outcomes 1, 2 & 3 for data.

Safe home environment & placement prevention: Case management and parent aide services are those most commonly accessed to support safety in the home environment. Intensive in-home family therapy services are available statewide to support case plan goals. Family Group Decision Making (FGDM) services are also available statewide. Family Team Decision Making (FTDM) services continue in three ND counties (Burleigh/Morton, Cass, Grand Forks).

Achievement of permanency: Wraparound case planning, and specifically the child and family team process, is used to establish, monitor and evaluate primary and concurrent permanency goals for children in foster care.

Accessibility: Availability of services varies across the state. Primary factors contributing to this include the rural nature of the state and recent population growth.

Individualization: The ND Wraparound Practice Model values speak to ensuring that services are individualized to meet child and family needs. In many areas of the state, caseworkers and supervisors show creativity in finding services to address individual needs.

B. Strengths

Stakeholders report agencies are very creative in finding resources to meet child and family needs.

At virtually every CFSR, it is reported that Parent Aide services are a valued support to children and families in both preventing foster care placement and supporting a successful reunification.

The Department has committed state general funds to assist tribal social service agencies in providing family preservation services to children and families they serve. In all four tribes, the funds have been used to provide parent aide services. Some tribes have also expanded the use of these funds to include additional services, such as intensive in-home family therapy.

Both public and private agencies work diligently at collaborating to maximize resources and services available to children and families. This has been shared time and time again at Stakeholder meetings throughout the state.

Health Tracks screenings are completed at least annually for children in foster care and include physical, dental, vision, and mental health components. Those providing the screenings assist the agencies in making referrals if additional services are needed.

C. Concerns

Since 2010, North Dakota cities are among the fastest growing in the nation, with Williston (Williams County) leading the country, having grown nearly 11% in population in one year. McKenzie County, directly south of Williams County, has grown over 46% in population since 2010, making it the fastest growing county in the nation. Of North Dakota's 53 counties, 38 have gained in population. Source: <http://oilpatchdispatch.areavoices.com/2014/03/27/north-dakota-cities-among-fastest-growing-in-nation/>. Population growth has impacted accessibility of services throughout the state.

Based on stakeholder comments (primarily from the western half of the state), families moving to the area have resulted in unprecedented increases in school enrollments, children's mental health needs, substance abuse (adult and child) problems, and reporting of child abuse/neglect. They acknowledge single men are moving into these areas in droves, but specifically mention increases in the number of families, too. Particularly challenging are multiple families living in the same residence and families without legal addresses (i.e. living in RV campgrounds).

The 63rd ND Legislative Assembly appointed an interim committee to study availability of child and adult behavioral health services in North Dakota. The

result of this study was The ND Behavioral Health Planning Report (final draft dated 6/19/14). Per this report, *the number one concern across the state can be summed up in one phrase: “Not enough services.”* The report defines these as being the following: all levels of prevention, case management, substance abuse, children’s residential, detox, and psychiatric. The draft report goes on to say, *“challenges in providing services are complicated by the workforce shortage throughout the state of North Dakota. The shortage is statewide but is exacerbated in the western part of the state due to the growth in the Oil Patch.”*

Community stakeholders commented that children have entered foster care for the purpose of obtaining mental/behavioral health services or substance abuse services, because these services were not available in their communities.

Statewide, there are long waiting lists for mental health and addiction services for both children and adults. In the more rural communities, families have to travel well over 100 miles to access the nearest psychiatrist, addiction counselor, or inpatient mental health center.

Because the majority of North Dakota counties are rural, many services are often not available, or waiting lists are long due to staffing shortages.

The lack of concerted efforts to engage absent parents (most often the fathers) in services has been a significant challenge.

Foster parent stakeholders consistently report the need for ongoing support and respite but these services are not available in all areas.

State funding for parent aide services and in-home case management is not available to all counties at this time.

6. AGENCY RESPONSIVENESS TO THE COMMUNITY

The state, in implementing the provision of the CFSP, engages in ongoing consultation with a broad array of individuals and organizations representing the State/Tribal and county/local agencies responsible for implementing the CFSP and other major stakeholders in the service delivery system including, at a minimum, Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child and family serving agencies; there is evidence that the agency’s goals and objectives included in the CFSP reflect consideration of the major concerns of stakeholders consulted in developing the plan and on an ongoing basis.

A. Data and Information

The North Dakota Department of Human Services, Children and Family Services Division (CFS), began planning for the 2015-2019 CFSP in September 2013. CFS requested Training and Technical Assistance (TTA) through the

Administration of Children, Youth & Families (Children's Bureau). The National Resource Center for Organizational Improvement (NRCOI) has assisted our efforts. The consultants conducted a focused discussion with the Children & Family Services Committee of the County Director's Association in December seeking input. In addition, an online survey was distributed to a wide range of child welfare partners during December/early January, providing an opportunity to begin identifying strengths and challenges of the child welfare system, along with potential solutions. A series of strategic planning meetings were held. The two-day session in February 2014 focused on reviewing the current CFSP and assessing outcomes. The facilitators guided a review of North Dakota's Vision, Mission, Values and Principles, which then led into a SWOC Analysis (Strengths, Weaknesses, Opportunities, and Challenges). From this exercise, themes were identified which guided the development of five goals. Information from the meeting was shared with participants, who agreed to share the information within their local organizations/groups and bring feedback to the next round of meetings. A two-day session was held in March 2014 in which the planning group identified potential strategies to and action steps for each goal.

Following these planning meetings, CFS continued the work of assessing the state's performance relative to the Child and Family Outcomes and Systemic factors through divisional meetings and review case review data, CFSR Stakeholder feedback comments over the past 4 CFSR cycle, and the ND Data Profile. Based on this review and information gained in the planning sessions, CFS refined the goals into three broad goals. Strategies and interventions were also revised to reflect the newly stated goals. Once drafted, CFS distributed the draft CFSP documents (Vision, Mission, Values, Goals, and Strategies) to the planning group for final review and feedback. Once all feedback was received, CFS finalized the goals found in this document.

Participants involved with the CFSP planning group include representation from: County Director's Association, Regional Human Service Center Supervisors, Residential Child Care Association, Private agency service providers (The Village Family Service Center, Lutheran Social Service Center ND, PATH ND, Inc., Catholic Charities North Dakota- AASK, Prevent Child Abuse ND), University of North Dakota/Children & Family Services Training Center, Division of Juvenile Services, North Dakota Court Improvement Project, North Dakota Juvenile Court, North Dakota Foster Adoptive Parent Association, Tribal Social Service Directors, Native American Training Institute, Children's Mental Health and Substance Abuse, Prevent Child Abuse ND, individuals representing parents and residential group and treatment facilities. Not all participants were able to attend all sessions, yet all participants received all related information throughout the process.

From the onset of the process, CFS understood that a broad representation from differing voices in the child welfare world was needed to accomplish a successful planning effort. The CFSP planning process was based on the principle of

inclusion. Each major “player” in the child welfare world was asked to pick a representative/s to participate in the planning process.

In addition to the program specific opportunities for stakeholder engagement and inclusion, the implementation of the ND CFSR QA process has provided an opportunity statewide for discussion with local representatives related to child welfare policy, practice, strengths, challenges, and needs/barriers. CFS also engages in regular and ongoing meetings with stakeholders (County Director’s Association, Regional Supervisors, County Supervisors, NATI/STEPS, various task force meetings, etc.). Through these venues, comments related to needs and barriers result in a plan to drive changes in local service delivery, and state and local program design and policy. These Stakeholder comments provide direction to CFS in the development of the strategic plan and the budget building process.

B. Strengths

Collaboration and consultation is a regular and ongoing part of CFS regular business practice. This accepted practice is the base for ND’s strong working relationships that enjoy a commendable level of trust with and between Stakeholders, Tribes and Courts.

Evaluation comments received by CFS during and following the planning process include:

- Very productive – great to get all done what was to be accomplished. Process was very organized and worked smoothly.
- Excellent process – great to have so many entities around the room.
- I thought this was a really good process in getting so many stakeholders together. It was great working with so many other smart and caring people. It’s nice to know that our children are in such good & loving hands.
- Common Visioning and creating a sense of hope and urgency and the multidisciplinary approach was a strength of the meeting
- All members of the group had an opportunity for input.

C. Concerns

While there have been improvements in recent years (a strong ND Youth Board and a specific stakeholder group during full CFSRs for Constituents, for example), consistent inclusion of service recipient (consumer) voices remains a challenge for North Dakota. In fact, some of the responses to the evaluation of the planning meetings held in February and March noted that the inclusion of families, youth and even additional providers would have helped the meeting be more productive. CFS remains committed to seeking solutions to strengthen this aspect of the CFSP and APSR process in the state.

The state develops, in consultation with these or similar representatives, annual reports of progress and services delivered pursuant to the CFSP.

A. Data and Information

Practice has been to engage stakeholder groups in the review of the CFSP as the state prepares to complete annual reports of progress and services. Once the report has been approved, CFS distributes the report to key stakeholder groups as well as making the report available on the Department's website. The state plans to continue to this practice in the upcoming year. The ongoing involvement of Stakeholders provides information for evaluating and reporting on progress toward agency goals. The input of key Stakeholders, including courts and tribes, has been essential to planning and goal setting for change.

State and federal policy requires the CFSP and APSR be updated annually, with a new plan developed every five years. Administrators of the various child welfare programs within CFS provide updates and new information for the Plan. The team approach to completing the plan allows administrators to share strengths and needs in regard to their specific programs.

B. Strengths

CFS reviews progress and goal achievement with various stakeholder groups, courts and tribes for the completion of the APSR. Once submitted and approved, CFS ensures the APSR is available electronically and on the Department's website.

C. Concerns

During the course of the CFSP planning process and review of feedback received from stakeholders, tribes and court (May 2010- April 2014), no concerns were noted regarding the state's practices surrounding the APSR.

There is evidence that the services under the plan are coordinated with services or benefits under Federal or federally-assisted programs serving the same populations to achieve the goals and objectives in the plan.

A. Data and Information

CFS coordinated services provided under the CFSP with the following agencies that serve the same populations:

- HSCs provide administrative supervision and direction to county child welfare staff through the Regional Supervisors. Title IV-E is one of several funding streams that support these positions.
- Catholic Charities and PATH of ND (AASK) provide statewide adoption services to children in foster care and families adopting these children.
- Medicaid has been used to finance Wraparound Targeted Case Management Services for multiple systems. Private and public health providers complete the Health Track/EPSTD Screenings with Medicaid funds.
- TANF is used as an incentive for families to obtain a screening for their children.
- CFS contracts with the Village Family Service Center to provide intensive in-home family services, FGDM Services and FTDM. Title IV-B, Medicaid and TANF are funding streams that support these services.
- The TANF Kinship Care Program was developed in collaboration with the Economic Assistance Division in 2005.
- The Department of Human Services, and specifically the CFS Division, is the agency designated by the Governor to administer Unaccompanied Refugee Minor and Refugee Medical Assistance programs for refugees arriving in the United States and into North Dakota. Under a Memorandum of Understanding between the North Dakota Department of Human Services (ND DHS) and Lutheran Social Services of ND (LSS/ND), LSS/ND will administer Refugee Cash Assistance through a Wilson/Fish Alternative Project. In addition, LSS/ND will be the grantee for other Office of Refugee Resettlement (ORR), Administration for Children and Families, US Department of Health and Human Services federal funding. Federal dollars are available to meet the needs of newly arriving refugee families and Unaccompanied Refugee Minor Youth. Primary resettlement sites are in Cass County (Fargo and West Fargo), Grand Forks County (city of Grand Forks), and Burleigh County (Bismarck), North Dakota.
- Unaccompanied Refugee Minor (URM) children identified by federal government agencies as appropriate for resettlement in the United States are placed, upon arrival in ND, into licensed foster care homes. These licensed homes are recruited and licensed by the private nonprofit resettlement agency (who sites as a member of the local recruitment/retention coalition) and are required to meet the state licensing standards for family foster care homes. Services for Unaccompanied Refugee Minors are provided through the resettlement agency in collaboration with other public and private service providers. A Regional Supervisor is an ongoing team member for

individualized planning for these youth. Services outlined in the CFSP for children in foster care are extended to include URM children.

- Seven parenting and family resource centers receive CBCAP dollars to fund specific parent support and education activities for the prevention of CA/N. These seven centers are local, collaborative efforts providing opportunities for parents, youth, and community members. The Parent Resource Centers participate in a Family Resource Center Network coordinated through the Family Life Education Program, a partnership with NDSU Extension Service.
- Three Child Advocacy Centers are available in the state to conduct forensic interviews and physical exams in child physical abuse and sexual abuse cases (two are fully accredited).
- The Chafee Foster Care Independence Program relies heavily on collaborative efforts with numerous agencies to provide services. Included are: county social services, education, Job Service North Dakota, private agencies, courts, HSCs and tribes. The collaboration is essential to the referral process, case plan development, delivery of services and to maintain contact with youth as they age out of the foster care system.
- CFS coordinates with the ND Supreme Court, through the Assistant State Trial Court Administrator, a member of the ND CFSR QA process Review Team. The Assistant State Trial Court Administrator, or their designee, has participated in all Stakeholder meetings, encouraged involvement of local court and legal Stakeholders, and served as co-facilitator of the Post-CFSR meetings.
- CFS collaborates with the ND Court Improvement Project (CIP) through the ND Supreme Court to improve communication with judges, court administrators, State's Attorneys, Juvenile Court staff, and tribal staff to address systemic issues. The Director of CFS is a member of the ND Court Improvement Project.

Agreements with public and private contractors

CFS has entered into Memorandums of Agreement with county social service agencies to provide family preservation services and Wraparound Targeted Case Management funded through Title IV-B, Title XIX, TANF, and state and local revenues. CFS has a contract with the Village Family Service Center to provide intensive in-home family services and FGDM services statewide. The Department also has contracts with four tribal social service agencies to provide family preservation services.

CFS contracts with Catholic Charities of ND to provide adoption services to children in foster care and the families who adopt them. Please refer to the

Service Description section regarding “Adoption” for a full description of the AASK Program.

The Department currently supports five projects through Memorandums of Agreement with county social service agencies to conduct multi-county CA/N assessments.

CFS contracts with PATH ND, Inc. to provide Chafee Foster Care and Independence Programming service. Please see the CFCIP section for complete details.

Please see the Assessment of Performance section for the systemic factor, “Staff Training” as it contains information regarding IV-E funded training contracts with the CFSTC.

CFS contracts with NDSU to maintain a network of Parent Resource Centers in the state.

B. Strengths

North Dakota has a longstanding practice of collaboration. As a small state with many miles between towns and cities, collaboration is essential. The rural, small town culture of neighbor-helping-neighbor is a strength of the system and evidenced through the many collaborative projects, agreements and shared-service arrangements. Many individuals serve on multiple committees, boards, and task forces and are engaged in the collaborative process. This collaboration is especially evident during the legislative session when groups with shared goals come together to educate law makers on the many facets of child welfare work and how this work impacts families in North Dakota.

Comments from stakeholders, courts and tribes received during the ND CFSR Process from May 2010- April 2014 include several observations regarding efforts by CFS to coordinate services among other federally-supported programs. Some comments include:

- “Open and honest communication work to worker and with other agencies”
- “Invite other agencies in to teach on new programs”
- “In foster care we have some good relationships with the ICWA workers with the tribes. They do a good job getting affidavits to the State’s Attorneys in a timely manner”
- “Working relationships with agency partners are very good”

Sharing resources across systems is also a strength. Partners engage in planning discussions around complex challenges to maximize and share resources for optimal solutions. Through this process, it is anticipated children and families in North Dakota will have improved outcomes. For example, the

Division of Mental Health and Substance Abuse, Division of Juvenile Services and Children and Family Services have pooled resources to address mental/behavioral health needs of North Dakota youth. The chosen solution was to add a psychologist position to the Division of Mental Health and Substance Abuse. This position will provide support for all three divisions, something that could not have been accomplished without the collaboration.

C. Concerns

As a county-administered state-supervised child welfare system, coordination of services among other federally supported programs is critically important, yet challenging. Insufficient resources can curtail this effort and create gaps in how coordination of services is accomplished. CFS will continue to advocate for sufficient divisional resources to enhance and support these efforts.

Being able to demonstrate needs, trends, and outcomes is also critically important to keep stakeholders, other federally-supported programs and decision-makers informed and engaged. Lack of research on prevalent child welfare issues can limit the ability to communicate strategies necessary to implement effective solutions. Evaluations that document measurable impacts of these strategies enable decision makers to invest their resources in programs and services proven to improve child welfare outcomes

7. FOSTER & ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

The State has established and maintains standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards.

Foster care licensing for family foster homes is governed by North Dakota Century Code (NDCC) 50-11, and by North Dakota Administrative Code (NDAC) 75-03-14. Foster home licenses are issued for one year. Annual licensing studies are completed by a county social worker or staff of a licensed child placing agency and submitted to the Regional Supervisor, who issues or denies the license. Licensure is required for relative homes when state or federal funding is used for a foster care payment.

Licensure for group and residential child care facilities (RCCF's) is governed by NDCC 50-11 and NDAC 75-03-16. The Licensing Review Team consisting of a CFS administrator, Regional Supervisor, and selected peer reviewers conduct an annual onsite visit to review licensing compliance for each RCCF in North Dakota. CFS will review each onsite and action is taken on the proposed license. RCCF's are issued either a one year or two year license, depending upon the facility's status. RCCF's who are granted a two year license are also scheduled for an annual onsite visit with a focus to verify ongoing compliance of buildings and grounds, child files and personnel files.

Psychiatric residential treatment centers (PRTF's) are licensed by Mental Health and Substance Abuse (MHSA,) ND Department of Human Services. These facilities serve children who have private insurance and those that are covered by the state's Medicaid program. These facilities are considered Psych under 21 facilities and must be accredited through a nationally recognized accreditation body. The facilities have joint approval through licensure from Medical Services Division and MHSA. The PRTF's are licensed for up to a two year period. A Certificate of Need (CON) process is used for children covered by the ND Medicaid program to assure they are in need of this level of care. Onsite visits led by NDDHS licensing staff are done periodically in addition to the accreditation reviews. The Health Department conducts a review of two facilities per year to examine compliance with seclusion and restraint protocol and policy.

CFS licenses child-placing agencies that in turn may either license homes for foster care and/ or approve homes for adoption. The LCPA licensing process includes all the safety requirements for family homes and additional specific requirements related to administration, administrative and staff training, and programmatic content and activities. LCPA's are issued either a one year or two year license, depending upon the agency's status.

A. Strengths

Institutional Child Abuse & Neglect Reporting: CFS program staff and the Licensing Review Team members are close collaborators in conducting licensing reviews. The CFS foster care administrator and licensing administrator are notified of all CPS reports and all decisions made in assessments of suspected institutional CA/N. Additionally, reports of suspected institutional CA/N are assessed by Regional Supervisors, who are also part of the Licensing Review Team. When licensing issues intersect with child maltreatment concerns, a joint approach of staffing and problem solving occurs. The CFS licensing administrator participates in the State CPS Team as an ad hoc member.

RCCF Coalition: CFS is often invited to the statewide RCCF Coalition meetings to report on relevant topics and discuss facility concerns or needs. This ongoing partnership offers ongoing strong relationships and positive collaboration to best meet the needs of children in placement.

NDAC Rule Changes: CFS invites RCCF representatives to participate in the development or adjustments made to administrative code. This makes for an open dialogue, agreement and understanding before engaging in the promulgation process with the Department's Legislative Rules Committee.

Training: NDDHS MHSA Division received a grant from SAMSHA to provide trauma training to ND statewide facility (RCCF and PRTF) staff.

B. Concerns

Training: RCCF and PRTF providers in North Dakota continue to seek additional training opportunities to best meet the needs of children in placement. The cost of trainings are a barrier for the facilities and not an allowable maintenance cost for reimbursement. NDDHS continues to research opportunities to assist facilities to best meet this need.

Staff: RCCF and PRTF providers have expressed concern for the challenge they are faced to recruit and retain qualified staff due to the recent oil boom in North Dakota. Individuals seeking employment tend to apply to oil related businesses as these employers offer higher salaries.

The standards so established are applied by the State to every licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.

The same licensing standards are used for relative or non-relative family foster homes if they are to receive state or federal funds. In cases where the home of a Native American family, not subject to the jurisdiction of the State of North Dakota for licensing purposes, is located on a recognized Indian reservation in North Dakota, an affidavit from an agent of the Tribal Child Welfare Agency, or an appropriate tribal officer, is accepted in lieu of a licensing procedure. The affiant states that an investigation of the home was completed by the tribe's child welfare agency or tribal council, and that the prospective home is in compliance with the standards required by NDCC 50-11-02. North Dakota tribes have not adopted standards through tribal resolution that differ from State licensing requirements.

North Dakota does not issue provisional licenses for family or therapeutic family foster care homes. Compliance related to licensure requirements must be met in order to provide foster care payments in any family foster care setting.

Provisional licenses have been issued to group/RCCF's. State or federal funding is not used in situations where a foster child is placed in a facility with a provisional license. In the situation where a provisional license was issued to a group home, the license was ended in CCWIPS which prevented eligibility workers from authorizing a payment to the facility until a full license was issued and the CCWIPS system updated.

A. Strengths

The Licensing Review Team has developed a good working relationship with licensed facilities throughout the state. The team ensures licensing compliance, but also provides insights to the facilities on how improvement to services can be achieved. In addition, members of the team may assist CFS on special licensing reviews of facilities when a concern for safety is expressed.

B. Concerns

One of the barriers the state faces in licensure activities is the absence of a licensing unit with CFS and DHS.

The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.

Consistent with the provisions of the Adam Walsh Act, all prospective foster parents, adoptive parents and employees of facilities are required to provide fingerprints, so that a nationwide FBI background check can be conducted. CFS conducts state, local and federal background checks in accordance with state and federal law and policy.

Since 1997, in accord with law, administrative rule and policy, background checks have been conducted for staff of group homes and RCCFs. Residential facilities do not allow a newly employed staff person to have contact with children until receipt of a satisfactory background check.

Internally, CFS criminal background check staff analyzes negative results in light of statutory authority for each applicant. The applicants have the option of providing additional information that may affect the outcome of the criminal background check findings and decision. CFS advises the licensing agent of negative results affecting the applicant's ability to provide foster care, provide direct care in a facility, or to be approved as an adoptive resource for foster children in accordance with guidelines established by the Federal Bureau of Investigations and the ND Bureau of Criminal Investigations.

The licensing agent includes any information relating to an applicant's criminal background information into the assessment or hiring process, as applicable. The regional supervisors review and issue licenses ensuring any new license has met all standards.

Residential Child Care Facility (RCCF) employee and nonemployee background check section **NDAC 75-03-16-12.2** was updated and goes into effect July 1, 2014. The changes offer flexibility to facilities who do not want to lose a strong candidate for potential employment as they await background check results. This opportunity reinforces if a facility chooses to allow the prospective employee to begin work that the employee could complete training and orientation, but is not allowed contact with the children in placement at any time until the results of the background check are on file. Additionally, the rationale for this flexibility was brought forward as facilities in western ND struggle to retain interest from potential employees as the process could

take up to eight weeks to retain multi-state background check information in order to offer employment.

Each year, an assembled RCCF Licensing Review Team visits facilities onsite. During the onsite visit, personnel files are viewed for full compliance. NDAC 75-03-16 requires the results of the initial criminal background check and the annual child abuse and neglect checks be placed in the personnel files. Facilities have been compliant in maintaining the required documents. There have been times, that the release of information to have the annual child abuse and neglect check completed has been on file, but the results of the check have been missing. Facilities then are made aware of this oversight; often times can locate the results and place the results in the file while the Review Team is onsite.

A. Strengths

The procedures and safeguards implemented in North Dakota are functioning in accordance with established laws and policies. Regional Human Service Centers undergo a biannual licensing process and all Licensed Child Placing Agencies and RCCF facilities undergo an annual review process. During the course of these reviews, no concerns have been identified as it relates to the processing of criminal background information.

CFS conducts a peer review of Title IV-E cases periodically throughout the year. Reviewers have found that criminal background clearances were completed in all Title IV-E eligible cases per the federal and state requirement.

The Licensing Review Team reviews criminal background check results during each facility licensing review to ensure compliance. Facilities were found to be compliance in each licensing review.

The Criminal Background Check Unit (CBCU) processes an average of 165 full background checks per month for foster care, adoption and residential facility employees. To ensure accuracy with the CBCU, a tracking log is maintained for all returned background checks and requests for CPS forms.

The availability of electronic scanning technology allows the CBCU to receive fingerprints immediately for efficient processing of fingerprint results. The state covers the background check processing fee while individuals pursuing adoption are responsible to pay the processing fees.

B. Concerns

ND is aware of some delays in the processing background checks because forms are submitted as incomplete, inaccurate or because we are waiting for CPS results from other states. This creates delays in licensure or the ability for new employees to work directly with children placed in facilities.

Although each human service center has a live scan unit and there are several portable units available, individuals living in extreme rural areas find it difficult to access these. Therefore, they utilize law enforcement. Law enforcement rolls the individual's fingerprints and submits these to the CBCU, which can also result in delays.

The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.

CFS received technical assistance in March, 2012. Presenters from the NRC for the Recruitment and Retention of Foster and Adoptive Parents and the NRC4Tribes provided training to key individuals around the state who are responsible for the recruitment and retention of foster and adoptive parents. The presentation outlined the benefits of using data to inform recruitment and retention planning. It also outlined the value of creating recruitment and retention strategies focused on targeted activities as well as general activities.

As a result of the TA, North Dakota developed a State Recruitment and Retention plan in August, 2012. The State Plan identifies both targeted and general recruitment and retention goals, strategies and outcomes.

The eight regional coalitions requested and received funding for the 2013-15 biennium based on proposals which address recruitment and retention activities. Coalitions were directed to analyze their regional data in order to identify gaps and needs in their region and submit their proposal based upon this determination.

Outcomes are required at the end of the biennium. These outcomes will measure their success as well as identify reasons that families did not follow through with licensure after inquiry, and reasons why families are no longer licensed for foster care.

A. Strengths

North Dakota has struggled with the challenge of obtaining data related to foster care demographics. Recently added to FRAME is a "Foster Care Demographics Report" which is available to all FRAME users. This report allows users access to data for any given point of time. Coalitions can view demographics specifically or globally to determine their need through an inquiry process.

B. Concerns

The "Foster Care Demographics Report" cannot identify sibling groups or special needs children. The report also cannot identify foster homes in their region. The

regional coalitions continue to hand count licensed foster homes within their region and report the numbers to CFS on a quarterly basis.

The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.

The AASK Program completes a recruitment plan for each “waiting” child that has been referred for adoption services by public agency custodians. Policy that clarifies recruitment and ICPC procedures pertaining to child specific recruitment and follow up activities is in place. File reviews conducted by the State Adoption Administrators during program peer file reviews, licensing reviews, and ongoing review of service file documentation affirm procedures are followed and applied consistently.

Child specific recruitment for “waiting” children may happen in a variety of ways. Biographies of waiting children are mailed monthly to families (both within and outside of the state) who have an approved adoption home study and are on the AASK program’s waiting family list. Special staffing occurs monthly for waiting children. Biographies of these children are regularly published in a quarterly newsletter published by the AASK Program, which is disseminated to all adoptive and foster families within the state. Children who may be placed cross-jurisdictionally are also placed on the Adopt US Kids web site and/or the Adopt America Network.

Our state is also the recipient of a grant for a full time Wendy’s Wonderful Kids recruiter, who currently is located in the eastern side of the state. WWK has indicated they have approved a second recruiter position for North Dakota that will be located in the western part of the state and will have a primary focus on child specific recruitment for Native American children.

Additionally, North Dakota has an active ND Heart Gallery movement which facilitates web site and a photo gallery of waiting children that travels the state. There is an annual “gala” where new portraits are unveiled; however children can be added to the gallery throughout the year.

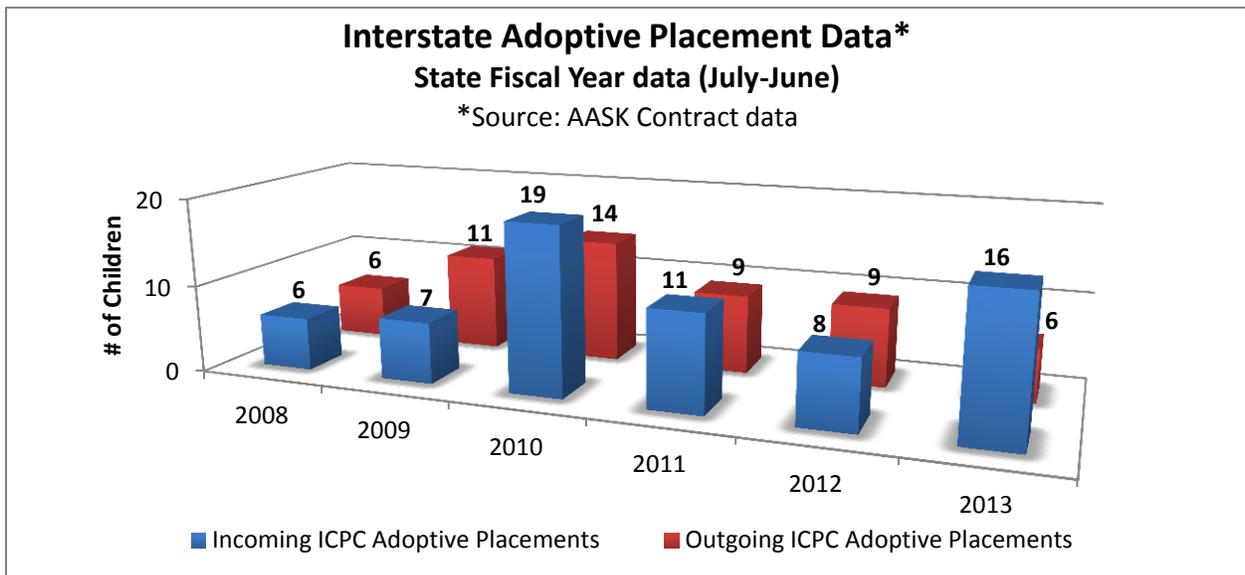
Families who inquire from out of state through the various recruitment efforts are directed to the AASK Program. The families are invited to submit a copy of their current approved adoption study and a release of information for their adoption worker to the AASK Program. When the approved study is received, the family is placed on the waiting families list maintained by the program and mailed monthly biographies of children waiting to be adopted and the AASK newsletters. They may then inquire on any of the featured waiting children and be considered for placement.

As the contract agency funded by the Department to provide adoption services to children in foster care, the AASK program serves children ND children leaving the

state to a permanent placement (ICPC outgoing) as well as those children coming into this state for the purpose of adoption who are in the custody of another state's public agency and the families who adopt them (ICPC incoming requests).

Based on the AASK Program reports, the following data regarding children leaving and children entering the state for the purpose of adoption are as follows:

- SFY 2008, six children were placed into ND from other states and six ND children were placed into other states.
- SFY 2009, seven children were placed into ND from other states and eleven ND children were placed into other states.
- SFY 2010, nineteen children were placed into ND from other states and fourteen ND children were placed into other states.
- SFY 2011, eleven children were placed into ND from other states and nine ND children were placed into other states.
- SFY 2012, eight children were placed into ND from other states and nine ND children were placed into other states.
- SFY 2013, sixteen children were placed into ND from other states and six ND children were placed into other states.



A. Strengths

North Dakota has a strong adoption service component wherein we contract with private agencies to provide a broad range of adoption services for children in foster care and the families who adopt them. This includes child specific recruitment for waiting children and adoption worker involvement in local foster adopt recruitment and retention teams in all of our regions for more general and targeted family recruitment. North Dakota also is a recipient of a Wendy's Wonderful Kids grant which currently supports a child focused adoption recruiter

in the eastern part of the state, with plans to add a second worker for the western part of the state. North Dakota has developed a strong Heart Gallery organization which provides a traveling gallery of waiting children that are viewed across the state and nationally in an online format. Visit <http://www.ndheartgallery.org> for details.

B. Concerns

North Dakota licenses foster parents through the public agency and approves adoptive parents through our contracted private adoption service provider. This perceived duplication of effort has been a concern both for families and for professionals within the system. Although we have made extensive efforts in the past to develop a streamlined process of foster care licensure/ adoption approval, we have been unsuccessful in bringing that to fruition for a variety of reasons, primary of which now is the unavailability of a technical system to support the process. This area is a primary focus of consideration as we contemplate future information systems and their capacity to meet this business need. Additionally, the foster care program has brought its licensing study closer to our adoption study process in that foster care includes assessment of the five PRIDE competencies in their licensure study. The adoption program as also streamlined its paperwork for families by obtaining as much of the foster care file as is available to them for use in the adoption study process.

III. NORTH DAKOTA PLAN FOR IMPROVEMENT

GOAL I: Families have enhanced capacity to provide for their children’s needs.

MEASURE: 73% of all cases reviewed receive a substantially achieved rating for Well Being Outcome 1 by July 2019. This reflects a 10% increase based upon current performance.

OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>1. Build capacity of Family Team Decision Making services.</p>	<p>1.a. The availability of Family Team Decision Making Services in unserved areas of the state are increased.</p>	<p>1.a. CFS</p>	<p>1.a. Qtr 4</p>
<p>2. An Intervention Selection Team (IST) is convened to apply CQI principles in analyzing disparity and disproportionality in foster care rates, researching evidenced-based national approaches to disparity reduction and develop recommendations regarding the needs, identifying resources and gaps in agency and community services for three counties with the highest rate of Native American youth over represented in the foster care system. Recommendations will identify methods to support Native American families to provide for their children’s needs to allow them to safely remain in their home.</p>	<p>2.a. Disparity IST recommendations are shared with CFS Management.</p> <p>2.b. Based on IST recommendations, a plan is identified, resources secured, the plan is implemented and monitored.</p>	<p>2.a. CFS, NATI</p> <p>2.b. CFS</p>	<p>2.a. Qtr 5</p> <p>2.b. Qtr 12</p>

OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>3. Out of home provider resources in the state will meet the needs of more youth, requiring fewer out of state placements.</p>	<p>3.a. An Out of Home Placement Resource Intervention Selection Team (OHPR IST) will analyze the following and provide recommendations:</p> <ul style="list-style-type: none"> • Current policies that limit in-state placement • Recommendations for policy changes. • Identification of additional resources needed • Consideration of performance-based contracting • Incentives for facilities to follow up services post-discharge. • Alternative approaches to providing foster care services • Opportunities in kinship care <p>3.b. Based on OHPR IST recommendations, a plan is identified, resources secured, the plan is implemented and monitored.</p>	<p>3.a. CFS, MHSA, CFS Committee, RCCF, PRTF, TFC providers</p> <p>3.b. CFS</p>	<p>3.a. Qtr 6</p> <p>3.b Qtr 12</p>

Data source(s): AFCARS Data Profile, CFSRs (Items 17-20), CFSR Stakeholder meetings & CFSP Strategic Planning meetings (qualitative).

GOAL II: A comprehensive Continuous Quality Improvement process will support a strong practice base in accordance with the North Dakota Wraparound Practice Model.			
MEASURE: North Dakota’s comprehensive Continuous Quality Improvement process is established by September 2019.			
OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>1. Strengthen the fundamental administrative structure of North Dakota’s Child Welfare System.</p> <p>1.a T/TA from NRCOI to assist in comprehensive assessment of ND CQI system.</p> <p>1.b Determine who’s directly responsible for CQI in ND (state office, system partners – county, region, DJS, etc.).</p> <p>1.c Establish written and consistent standards, policies, procedures and practices for ND CQI process.</p> <p>1.d Training process for CQI staff, including any contractors or stakeholders conducting CQI activities.</p>	<p>1.a T/TA approved by CB has been received.</p> <p>1.b Roles regarding CQI are identified, communicated, and understood. “CQI Champions” are identified and supported.</p> <p>1.c Policy is manualized.</p> <p>1.d CFS Division Staff have trained all regions on CQI.</p>	<p>1.a CFS</p> <p>1.b CFS</p> <p>1. c CFS</p> <p>1.d CFS</p>	<p>1.a Qtr 12</p> <p>1.b Qtr 16</p> <p>1.c Qtr 16</p> <p>1.d Qtr 17</p>

OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>2. Enhance the system’s ability to gather, maintain and utilize quality data.</p> <p>2.a Identify what qualitative and quantitative data will drive the ND CQI process.</p> <p>2.b Analyze the current management information system (MIS) in ND to evaluate its effectiveness and capacity, and identify what we need in a system.</p> <p>2.c The MIS will better meet the needs of the child welfare system.</p>	<p>2.a List of qualitative and quantitative data measure used in ND’s CQI process is approved and disseminated.</p> <p>2.b Vendor has completed review of MIS resulting in a specific action plan including timelines.</p> <p>2.c An enhanced MIS system is implemented.</p>	<p>2.a CFS, DHS, Counties, Stakeholders</p> <p>2.b CFS, DHS</p> <p>2.c DHS, CFS, Counties, Stakeholders</p>	<p>2.a Qtr 3</p> <p>2.b Qtr 6</p> <p>2.c Qtr 19</p>
<p>3. The state’s case record review process is enhanced.</p> <p>3.a A CFSR Task Force is convened to review & enhance the CFSR process.</p> <p>3.b CFS will develop policies and procedures for the CFSR process addressing the recommendations of the CFSR Task Force.</p>	<p>3.a Task Force has reviewed CFSR process and submitted recommendations.</p> <p>3.b Written policies are manualized and disseminated.</p>	<p>3.a CFS, DHS, Counties, DJS, Tribes</p> <p>3.b CFS, DHS, Counties, DJS, Tribes</p>	<p>3.a Qtr 1</p> <p>3.b Qtr 3</p>

OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>4. A process is established for the analysis and dissemination of quality and timely data on all Performance Measures.</p> <p>4.a Identify mechanisms for gathering, organizing and tracking information and results related to outcomes.</p> <p>4.b A protocol for analyzing data which includes stakeholder, tribal, court input is defined within the ND CQI Process.</p> <p>4.c Quarterly and annual reporting of outcome information is shared with all stakeholders.</p>	<p>4.a Mechanisms are identified so that we have a template developed for the ND outcome measurements report.</p> <p>4.b Process defined as evidenced through established policy.</p> <p>4.c Data is shared in accordance with established policy and evidenced by CQI reporting.</p>	<p>4.a CFS, DSS, ITS</p> <p>4.b CFS, DSS, ITS, Tribes, Court</p> <p>4.c CFS, DSS, ITS, Tribes, Court</p>	<p>4.a Qtr 3</p> <p>4.b Qtr 16</p> <p>4.c Qtr 18</p>
<p>5. The state’s CQI system maintains the ability to provide feedback to Stakeholder and Decision-makers and, as needed, uses information to adjust programs and processes.</p> <p>5.a Newsletter publication highlighting practice strengths/improvements in an electronic format.</p> <p>5.b T/TA to identify processes/models for providing feedback to stakeholders and decision-makers.</p>	<p>5.a Newsletter publication distributed</p> <p>5.b CQI program establishes specific action planning process inclusive of timeframes, formats and structures.</p>	<p>5.a CFS, DHS, Public Information Liaison</p> <p>5.b CFS</p>	<p>5.a Qtr 3</p> <p>5.b Qtr 12</p>

Data source(s): CFSR Stakeholder meetings & CFSP Strategic Planning meetings (qualitative)

GOAL III: North Dakota will have a thriving child welfare workforce.

MEASURE: County & state child welfare staffing levels will be strengthened through recruitment and retention efforts by September 2019.

OBJECTIVES & INTERVENTIONS	EVIDENCE OF COMPLETION	RESPONSIBLE	QUARTER DUE
<p>1. Identifying child welfare workforce capacity and shortages within the county and state child welfare service continuum.</p>	<p>1.a Baseline data for current approved FTE's and vacancies are identified.</p> <p>1.b Data from child welfare workforce (county, state staff) is retrieved from an annual survey and workforce needs are identified.</p>	<p>1.a CFS, DHS, DSS, CFS Committee</p> <p>1.b. CFS, DHS DSS, CFS Committee</p>	<p>1.a. Qtr 1</p> <p>1.b Qtrs 5,9,13,17</p>
<p>2. Recruit & retain additional county and state child welfare staff through partnership with UND.</p> <p>a. Utilize the funding for stipends to offset tuition costs to gain a bachelor's or master's degree in social work.</p> <ul style="list-style-type: none"> ✓ Partner with UND to implement their National Child Welfare Workforce Institute grant. ✓ Partner with UND to continue IV-E stipends. <p>b. Promote the available funding opportunities</p> <ul style="list-style-type: none"> ✓ To current child welfare field staff ✓ To broader audience to recruit social workers 	<p>2.a.1 Quantitative data regarding number of students enrolled or graduated through stipend opportunities is gathered, reviewed and disseminated.</p> <p>2.a.2 Data on how many stipend students become employed or are retained by county or state child welfare providers is shared.</p> <p>2b Marketing plan regarding the stipend application process is employed.</p>	<p>2a CFS Director & UND Social Work Dept</p> <p>2b DHS CFS, Public Awareness Liaison, HSC, UND Social Work Dept, Counties</p>	<p>2a: Qtrs 4,8,12,16, 20</p> <p>2.b Qtrs 4,8,12,16,20</p>

<p>3. Partner with DHS and Child Welfare Workforce service providers to advance employment recruitment initiatives.</p>	<p>3.a Recruitment tool developed & disseminated.</p> <p>3.b Partnership with Job Service ND, ND Chamber of Commerce and affiliates regarding recruitment opportunities has been explored.</p>	<p>3.a CFS, DHS, Public Information Liaison, Counties, CFS Committee</p> <p>3.b CFS, Counties</p>	<p>3.a. Qtr 13</p> <p>3.b. Qtr 12</p>
<p>4. Strengthen local agencies ability to provide professional supports for their child welfare staff.</p>	<p>4.a Direct Services and Supervisory workload standards will be defined based on evaluated information.</p> <p>4.b Child Welfare workforce members will report increased satisfaction with the support received through annual surveys.</p>	<p>4.a DHS CFS, HSC, County Directors, County Supervisors</p> <p>4.b CFS,DHS, DSS</p>	<p>4.a Qtr 4</p> <p>4.b Qtrs 1,5,9,13,17</p>

Data source(s): CFSR Stakeholder meetings & CFSP Strategic Planning meetings (qualitative)

ND Plan for Improvement Supplemental Information:

The process to establish the aforementioned goals is described in the Assessment of Performance section (3) under the Agency Responsiveness to Community systemic factor. The goals were established after a comprehensive strategic planning process in which a wide array of stakeholders was present, including tribal and court representatives. The three goals selected were paired down from five goals which the larger group initially recommended. Following the assessment of performance and review of priorities, CFS identified three broad goals targeted at a few significant areas of improvement to be accomplished in the upcoming five years. Each goal stated above identified the data sources used to support the selection of the particular goal. The goals were selected and ranked according to a prioritization of identified needs.

Goal 1: Families have enhanced Capacity to provide for their children's needs

This goal was selected as North Dakota has struggled to achieve the targets for Well-Being 1. This goal started out being a goal to increase the service array. As CFS began to analyze the data, review funding resources, apply CQI principles, it was decided to restate this goal into a more focused goal directly related to one of the Child and Family Services Outcomes which has proved most challenging to North Dakota. Criteria for selection of the intervention and strategies were those that were evidence-based practices (such as Family Team Decision Making) or were rooted in the CQI principles supported by the CQI Academy. CFS realized that a thorough root analysis of the problem selected to be addressed were needed before a specific intervention could be identified. Ensuring the appropriate intervention is selected was important to the CFS team.

Goal 2: A comprehensive CQI process will support a strong practice base in accordance with the North Dakota Wraparound Practice Model

Goal 2 addresses North Dakota's need to further define and enhance its CQI process and thereby support a strong practice base in accordance with the North Dakota Wraparound Practice Model. The interventions and strategies selected for this goal were identified following a thorough review of the state's 2014 CQI Assessment contained in last year's APSR, the feedback received from the Children's Bureau Regional Program Manager, and feedback from stakeholders, including county, tribal, regional, DJS, and court partners. This goal seeks to strengthen all five core components of a functioning CQI system as outlined in ACFY-CB-IM-12-07.

Goal 3: North Dakota will have a thriving child welfare workforce

Goal 3 is a goal which seeks to strengthen North Dakota's child welfare workforce. During the course of the strategic planning meeting, much qualitative feedback was received from all participants regarding the limitations placed on ensuring positive outcomes for children and families when agencies are struggling to recruit and retain their workforce. Even when agencies have allocated funding for position, several other

challenges have been noted by partners such as, but not limited to: housing, transportation, competing with private sector jobs, especially in the oil-impacted counties. As a county-administered, state-supervised child welfare system, the complexities involved in addressing this issue are significant. Thus, the interventions and strategies selected are based on a collaborative approach. A joint effort with the University of North Dakota in their recent University Partnership Award through the National Child Welfare Workforce Institute provides an exciting prospect to augment the social service workforce.

Staff Training, Technical Assistance plans are detailed in the North Dakota Training Plan. Please see **ATTACHMENT E** for details.

Evaluation and Research Activities

Family Connection Discretionary Grant: The Village Family Service Center continues to participate in the Family Connections Discretionary Grant program. They are in their third year of a Family Group/Team Decision Making program focused on the Native American children and their families served by the county social service system. CFS supports the evaluation activities of this grant through the provision of administrative child welfare data.

Implementation supports

Implementation supports for the CFSP Goal's Objectives & Interventions are first and foremost specified in the 'Evidence of Completion' tables above. In addition to this information, CFS anticipates staffing resources, financing, and data systems offer the greatest challenges to the state's ability to achieve the stated goals. Training needs are addressed in the North Dakota Training Plan. Coaching for the case managers is offered through the local social service agencies and the human service center supervisors. County social service supervisors strengthen their coaching skills through the use of Learning Circles. The memoranda of understanding with other agencies needed to accomplish the goals are already in place. Policies, physical space and equipment are also important considerations that will impact the achievement of this plan. CFS remains committed to partner with local agencies and divisions within the state agencies to advocate for and secure adequate resources.

IV. SERVICES

A. Child and Family Services Continuum

Child Protection Services (ca/n prevention, intervention and treatment)

- **Child Protection Services (CPS)** The North Dakota Department of Human Services – Children and Family Services Division is responsible for administering CPS. CPS protects the health and welfare of children by

encouraging the reporting of children who are known to be or suspected of being abused or neglected. CPS provides adequate services for the protection and treatment of abused and neglected children and to protect them from further harm. CPS identifies the cause of children's deaths, where possible and identifies those circumstances that contribute to children's deaths. In doing so, CPS recommends changes in policy, practices, and law to prevent children's deaths. As a county-administered state-supervised system, direct CPS services are provided by County Social Service Agencies. Institutional Child Protection Services is administered through the Department of Human Services. Institutional CPS is identified as situations of known or suspected child abuse or neglect when the institution responsible for the child's welfare is a residential child care facility, a treatment or care center for mentally retarded, a public or private residential educational facility, a maternity home, or any residential facility owned or managed by the state or a political subdivision of the state.

- **Child Fatality Review Panel (CFRP)** The CFRP is required to meet at least semi- annually to review the deaths of all minors and to identify trends or patterns and systemic issues in regard to the deaths of minors. Typically, the CFRP meets quarterly. The CFRP is responsible for making recommendations for changes in policy, practices, and law to prevent children's deaths.
- **The Nurturing Parent Program** The North Dakota Nurturing Parent Programs are group-based programs in which both parents and their children participate. This field-tested and nationally recognized program provides a common learning experience and enhances positive interactions for parents and children. Nurturing Parent programs offer, "The Nurturing Program for Parents and Children Ages 5-12", and "The Nurturing Parent Program for ages Birth to 5 Years". The Nurturing Parenting Program is recognized by the SAMHSA National Registry of Evidence-based Programs and Practices (NREPP) and by OJJDP's Model Programs Guide as a Promising Program.
- **Parent Resource Centers** Eight Parent Resource Centers (PRCs) are receiving grant awards of CBCAP dollars to fund specific parent support and education activities for the prevention of child abuse and neglect. PRCs contract to provide parenting education and in doing so they offer the following:
 - Parenting education designed to assist parents or primary caregivers to strengthen their knowledge and skills and enhance understanding and performance of positive parenting practices, which prevent child abuse and neglect and reduce primary risk factors: caregiver problems with mental health, substance abuse,

family and community violence, and other negative conditions in the child and family's life situation

- Meaningful involvement of parents in the development, operation, evaluation, and oversight of the funded programs;
 - Collaborative community activities specific to Child Abuse Prevention Month
 - Identification and community needs for parent education and support, and strategies to address the identified needs
 - Parent education outreach activities which include referrals to social services and community supports and participation in the Family Resource Center Network.
- These centers are local, collaborative efforts providing opportunities for parents. Each PRC participates in the Family Resource Center Network coordinated through the Family Life Education Program, a partnership with North Dakota State University Extension Service. The Network provides for site visits, a peer review process and an evaluation component for the individual centers as well as for the Network.
- **Child Advocacy Centers (CACs)** CACs assist in the assessments of child physical and sexual abuse. The Centers are located in three communities in North Dakota (soon to be four communities). The CAC Directors are member of the Children Justice Alliance and meet with this multi-disciplinary team quarterly.

Family Preservation Services

- **In-Home case management services** This service is provided through memoranda of agreements with county social service agencies to support county case management staff in their efforts to provide ongoing case management services for families and children living in the home at risk of foster care placement.
- **Family Group Decision Making (FGDM)** The Family Group Decision Making process is utilized by families in order to prevent out-of-home placement of children and it involves bringing family members, conventional and nonconventional supports, and providers to the table in order to conference together in the development of a comprehensive plan. FGDM services are contracted through The Village Family Service Center.
- **Family Team Decision Making (FTDM)** FTDM is a facilitated team process which can include birth or adoptive parents, guardians, extended family members, youth, community members, service providers, child welfare staff and other caregivers. These meetings have only one

purpose: to make critical decisions regarding the removal of children from their homes, changes in out-of-home placement, and reunification or placement into a permanent home. The goal of FTDM is to arrive at consensus regarding a placement decision to keep the child safe and ensure his or her best interest. The priorities of FTDM are to protect children, preserve or reunify families, and prevent placement disruption. FTDM services are contracted through The Village Family Service Center and are presently available in three counties in North Dakota (Burleigh, Cass, Grand Forks).

- **Intensive In-home Family Therapy** Intensive In-home Family Therapy services are provided statewide through a contract with the Village Family Service Center.
- **Parent Aide** Parent Aide services are designed to improve parenting skills with parents who are at risk of abusing or neglecting their children, by reinforcing parents' confidence in their strengths and helping them to identify where improvement is needed and to obtain assistance in improving those skills. It uses the relationship between the parent and the parent aide as a tool to encourage, teach, and assist parents. These services are provided through memoranda of agreements in 40 North Dakota counties. Two regional Human Service Centers also provided Parent Aide services. The two HSC programs are funded with Title IV-B dollars.
- **Prime Time Child Care** Prime Time Child Care provides temporary child care to children of families where child abuse and/or neglect have occurred or there is a risk of it occurring. It gives parents an opportunity to attend counseling, addiction treatment, or other needed services while their children are cared for in a licensed facility. Services are funded in 15 counties through memoranda of agreements.
- **Safety/Permanency Funds** Safety/Permanency Funds are distributed each biennium to the eight regions in North Dakota in proportion to child population rates. The funds are managed by the Regional Supervisors with oversight by the Family Preservation Administrator.
- **Tribal Child Welfare Services** ND DHS contracts with tribal child welfare agencies in the state to provide Family Preservation services. The tribal agencies provide the non-federal match for the Title IV-B funding. Each agency was given the option to provide any or all of the Family Preservation services which include Wraparound case management, parent aide and/or intensive in-home family therapy.

Family Support Services

- **Prevention Networks, Public Awareness & Community Development and Outreach Services** Services are provided through a contract with Prevent Child Abuse North Dakota (PCAND) and are available statewide. PCAND is not a direct service provider, yet is a key primary prevention organization. Prevention Networks are provided through PCAND's efforts to build on existing networks and connect new partners, as well as forming new networks for prevention of child abuse and neglect, including the North Dakota Home Visitation Network. Programing known as "Authentic Voices" networks survivors of childhood maltreatment and others to advocate on behalf of children. This effort began with the publication of "Authentic Voices: North Dakota Child Sexual Assault Survivors" publication. It has grown as a public awareness project utilizing a facilitators guide and theater adaptations of the work. They also coordinate the "Period of Purple Crying" initiative, an evidence-based infant abusive head trauma prevention program. Public Awareness efforts include coordination of statewide Child Abuse Prevention Month activities. Community Development and Outreach efforts include the Nurturing Healthy Sexual Development (NDS), an engaging, interactive discussion-based training program developed to help adults better understand the sexual development of children and learn how to respond to children's sexuality in ways that promote healthy development. They also coordinate a Community Abuse Prevention Resource Team operating in Williston, ND.
- **Respite Care** Respite Care is temporary child care for families with disabled children, including chronically or terminally ill children, children with serious behavioral or emotional difficulties, and drug-affected children. This service is intended to provide care givers with periods of temporary relief from the pressures of caring for children. Respite Care services were funded in one northwestern county through a state Memorandum of Agreement. Three regional Human Service Centers (HSCs) also provided Respite Care services during the year. These three HSC programs were not funded with Title IV-B dollars.

Services to Support Reunification

- **Foster Care Services** Foster care is 24-hour out-of-home care for children whose parents are unable, neglect, or refuse to provide for their children's needs. This includes food, clothing, shelter, security, safety, guidance and comfort. In nearly all cases, the child in care has been removed from the home by a court order, with custody given to a public agency, such as the Division of Juvenile Services, County Social Services, or Tribal Social Services. The ND Department of Human Services' CFS Division is responsible for rules for licensure of foster care homes and facilities to maintain a standard for the safety and well-being of the children

in care. The CFS Division is also responsible for the review of all license assessments prior to issuing a license to provide foster care.

- **Therapeutic Foster Care** PATH North Dakota, Inc. also provides in-home family support, respite, reunification services, assessment homes, and adoption services collaboratively with Catholic Charities ND (collaboration occurs through CFSR inclusion, ongoing meetings for discussion of issues, licensure through ND DHS, case reviews for licensure and audits, policy issuances from the department).
- **Residential Facilities** Residential Child Care Facilities (RCCFs) and Psychiatric Residential Treatment Facilities (PRTFs) work as closely as they can with families to include biological, foster, extended family members in the process of creating and building an individual plan of care for the child placed in the facility. Families are encouraged to visit, engage in family activities, write letters, maintain phone contact, etc. RCCF and PRTF programming does vary throughout North Dakota, however some facilities provide family therapy, offer a family engagement and strengths building classes, pay for travel expenses to get families to and from the facility, as well as house the families in separate apartment units to accommodate the distance in travel.

Adoption

Pursuant to statute, the CFS Division is served notice of all adoptions that occur in the state of North Dakota. However, adoption services are provided by private providers within the state. The CFS Division facilitates a contract with a private provider to provide adoption services to children in foster care and the families who adopt them.

- **Adoption Performance-Based Contracting Overview** The Department of Human Services has long contracted with private vendors to provide adoption services in North Dakota (Adults Adopting Special Kids – AASK). Catholic Charities North Dakota (CCND), in collaboration with PATH ND, is the current contracted vendor to provide adoption services to children in foster care and the families who adopt them. Services provided by the vendor include child preparation and assessment, family preparation and assessment, general recruitment functions, technical assistance to the public agency on adoption matters, placement and placement supervision, services to finalize the adoption, assistance with application for adoption subsidy, and post adoption information and support. Under this contract, payment for services relates to adoption placement, finalization and timeliness in adoption (consistent with the national standard). An additional payment is made for those adoption finalizations where specialized recruitment was necessary to facilitate placement (degree of difficulty payment). This performance based contracting system has been in place since July 1, 2005.

The contracted adoption provider, AASK, works collaboratively with the North Dakota tribes when placing Native American children for adoption. AASK places children within the ICWA order of preference unless “good cause” has been established by the court to do otherwise, or the child’s tribe has approved placement outside the ICWA order of preference. Adoptive families, with support from the adoption worker, develop a cultural plan for all Native children being placed for adoption with non-Native families that is forwarded to the child’s tribe when requesting their approval to place outside the order of preference. At the request of the North Dakota Tribal Social Service agencies and with prior approval of the Administrator of Adoption Services, the AASK program will provide adoption services to children in the custody of North Dakota tribes where the tribe has a plan for adoption. The ND DHS services will provide adoption assistance in the form of Medical Assistance for families who are adopting child through a North Dakota tribe and the tribe is providing the monthly adoption subsidy (a 638 funded subsidy).

Kinship Care

- **TANF Kinship Care Program** Kinship Care became a statewide program available to County Social Service Agencies and the Division of Juvenile Services in February 2005. TANF currently does not include tribal social service agencies in the Kinship Care program due to lack of funding. This program offers a modest monthly financial payment to kin providers who chose not to become licensed as foster parents.

Independent Living

- **CFCIP/ ETV** Chafee Foster Care Independence Program (CFCIP) and Education & Training Voucher (ETV) program operations are administered by the North Dakota Department of Human Services, Child & Family Service Division. North Dakota ensures that all political subdivisions in the eight regions and 53 counties are served by CFCIP, including tribal youth and youth in custody of the Division of Juvenile Services.

Services for OPPLA

- **Foster Care Case-management Services** Foster youth with a goal of *Other Planned Permanent Living Arrangement* are assessed for available community services during the child and family team meeting process and within the context of foster care case management services. Eligible youth are referred to CFCIP as appropriate while all youth with this goal receive Independent Living and other supportive services through case management.
- **Subsidized Guardianship** Subsidized Guardianship offers state-funded financial support for youth who are not able to return to their parent(s). Eligibility for this program includes:

- Youth age 12 and above. Sibling groups will also be included if one member of the sibling group is 12+.
- Adoption and reunification must be ruled out before applying for a guardianship subsidy
- Youth are legally free for adoption and do not wish to or cannot be adopted
- Youth in temporary custody whose parents are incapacitated or unwilling to participate with planning for the child and whose parental rights will not be terminated
- Eligibility is limited to children in the state foster care system for at least 6 months and for whom the state has responsibility for maintenance payments.

B. Service Coordination

The CFS Division coordinates and collaborates with a number of public and private providers in carrying out the continuum of Child Welfare Services. Coordination and collaboration occurs in a variety of capacities, from day-to-day conversations, planned meetings on a regular basis, etc. For example, as we developed the Children and Family Services 2015-2019 Plan, we invited numerous public/private partners to the table. These partners included: Regional Human Service Centers, private/non-profit agencies, county social service agencies, tribal child welfare agencies, Division of Juvenile Services, State legislators, ND court representatives, Department of Public Instruction. The collaborations listed below illustrate the importance of the public/private partnerships in North Dakota. We continue to find ways to collaborate with our state and federal partners and this list continues to grow as new relationships are developed. These partnerships include but are not limited to:

- Catholic Charities and PATH of North Dakota for special needs adoption services (collaboration takes place through monthly meetings, staff review, placement proposals, review of contract work, etc.).
- Family foster homes, therapeutic family foster homes (PATH), group homes, residential child care facilities and psychiatric residential treatment facilities for the provision of foster care (collaboration occurs through CFSR inclusion, federal audits – IV-E and IV-B, licensure review and oversight by ND DHS, coalition attendance by all, ongoing dialogue with all, policy issuances from department).
- PATH North Dakota, Inc. also provides in-home family support, respite, reunification services, assessment homes, and adoption services collaboratively with Catholic Charities ND (collaboration occurs through CFSR inclusion, ongoing meetings for discussion of issues, licensure through ND DHS, case reviews for licensure and audits, policy issuances from the department), and Independent Living Services.
- The Village Family Service Center for intensive in-home family services, Family Team Decision Making services, and Family Group Decision-Making services

(collaboration occurs through a contract for provision of services along with regular contact by phone and supervisory meetings every other month).

- The University of North Dakota for training of foster and adoptive parents, child welfare case managers and system partners.
- Youthworks for shelter care has been developed and is utilized by the Bismarck/Mandan community as needed.
- Division of Juvenile Services, PATH and Mental Health and Substance Abuse Division for collaboration and implementation of the Wraparound process across systems.
- Prevent Child Abuse North Dakota for coordination and implementation of child abuse and neglect prevention activities (collaboration takes place through a contract to provide child abuse and neglect prevention activities, including Child Abuse Prevention Month activities each April, along with regular meetings of the Alliance for Children's Justice Task Force and Steering Committee, and regular contact by phone, e-mail and face-to-face meetings).
- Parent and Family Resource Centers for parenting education and parent mutual self-help groups for child abuse and neglect prevention (collaboration takes place through a contract with North Dakota State University Extension Service, regular meetings of the Parent Education Network and annual CBCAP grantees meeting, as well as through informal contacts with the Network Coordinator).
- Child Advocacy Centers (CACs) to assist in the assessments of child physical and sexual abuse. The Centers are located in three communities in North Dakota (soon to be four communities). The CAC Directors are member of the Children Justice Alliance and meet with this multi-disciplinary team quarterly.
- State Treatment Collaborative for Traumatized Youth (TCTY) Project that includes physical participation for the education and support of parents/foster parents who care for traumatized children.
- Native American Training Institute (NATI) for training of child welfare case managers.
- North Dakota State University (NDSU) Extension offices throughout the state for parent resource centers and parenting classes.
- Collaboration Workgroup – a group whose mission is to increase collaboration at the local level among the Child Support Enforcement, TANF, Medical Services, Children and Family Services, and Job Service programs in order to improve services to individuals served by those programs, and to increase performance

within the state (monthly meetings of administrators, seminars are offered to the field as well as annual reviews/reports on progress towards identified Action Plans).

- North Dakota Children’s Social Emotional Development Alliance (NDSEDA) - collaborative effort with system partners to promote awareness and understanding of health social and emotional well-being of individuals birth to 21 and their families (meet quarterly to make progress towards achieving priorities outlined on Strategic Plan).
- The CFS Division collaborates with the North Dakota Foster Adopt Parent Association on foster and adopt parent issues including programming and training. The CFS Director sits as a board member of the association, representing the state child welfare agency.
- A Constituent Stakeholder group is on the roster of the full CFSR review process. This gives our constituents a specific time and place to appear to deliver comments regarding the child welfare services provided in the region.

Additional Collaborations

- **ND Supreme Court on the Children’s Justice Symposium for North Dakota:** CFS Division staff and the ND Supreme Court staff have begun planning and work on a biennial Symposium. Emphasis will be on outreach to the law enforcement community and for those in the newly created role of parent coordinators in divorce and custody cases. Topics will include diversity issues, engaging families, and enhancing connections for children in care. This training event is planned semiannually; it will share the “flip” year of the semiannual CFS conference, a smaller conference with a long history planned for the child welfare community and hosted by the CFS Division. CFSTC is also involved in both of these events – they coordinate all the contracts and work with the trainers/presenters on the agenda.
- **County Social Service Agency Director Involvement:** The CFS Division will continue to meet with a sub-group of County Directors on a quarterly basis to discuss issues related to services for children and families. The County Directors as a whole meet monthly. The CFS Director and other administrators will meet with this larger group as needed. Quarterly meetings with the Child Welfare supervisors of Wraparound Case Management will be scheduled. These meetings will continue to occur quarterly to discuss child welfare topics as appropriate. CFS Division staff are invited to attend these meetings upon request to provide technical assistance and policy updates.
- **Regional Representatives:** The CFS Division staff will continue to meet with the Regional Representatives of County Social Service Programs, who provide technical assistance to the field, every other month to discuss program and policy issues and changes. On the off month, an Interactive Video Conferencing is scheduled. Information shared at the meetings have included, but are not limited

to, CPS Manual, Wraparound Manual, FGDM, Kinship Care, Relative Search, Subsidized Guardianship, Background Checks, CFSR, Adoption, among others.

- **County Supervisors:** The CFS Division staff will continue to meet with the County Supervisors upon invitation to provide policy updates and technical assistance related to all of the child welfare programs as well as SPOC and the new FRAME system. Per the North Dakota PIP, the CFS Division plans to convene a group of county supervisors to function as an advisory group in the development of a supervisory practice model in a concerted effort to implement a clear model of supervision that supports the Wraparound case management practice model.
- **Court System:** The CFS Division staff will continue to work closely with the Court Improvement Project (the Director of the Division has a seat on the Court Improvement Committee) through the Supreme Court to improve communication with Judges, Court Administrators, State's Attorneys, Juvenile Court staff and tribal staff and to address systemic issues across the various systems. As indicated in many of the CFSR stakeholder meetings in the regional CFSR reviews, foster parents and social workers in some regions are concerned about the delay in the legal process or defects in the legal process for children who are in the custody of the County and or Department. The North Dakota Supreme Court has a long history of consultation and coordination with the Department of Human Services and the tribes. The Court Improvement Committee/Project (CIP) was formed in 1998 and in 1999 was integrated with the ASFA Implementation Committee from CFS. Currently, the CFS Director serves as a member of the Training and ICWA Subcommittees. The Child Welfare Infrastructure Administrator serves on the Data Subcommittee.
- **Casey Family Programs:** The CFS Division engaged with Casey Family Programs in a formal contract to accept dollars and technical assistance to address identified needs in the child welfare system in North Dakota. Specifically, the engagement will focus on building data-driven decision-making capacity. Casey funding will be used to contract for the design, implementation and analysis of FTDM outcomes from all sites. FTDM outcome data will be used to evaluate the ND projects effectiveness regarding foster care diversion, shorter foster care stays and family engagement.
- Specific to the **Chafee Foster Care Independence Program/ETV program** the following highlights coordination opportunities within this service population:
 - **Regional Coordination** CFCIP Chafee IL Coordinators coordinate services with the public agency case managers by attending the quarterly Child and Family Team Meetings. Chafee IL Coordinators work collaboratively with case managers and community partners to support youth in becoming self-sufficient young adults. Chafee IL community partners include, but are not limited to: Job Service, Job Corps, Adult Learning Centers, Housing Authorities, Community

Action, Vocational Rehabilitation Services, Salvation Army, Youthworks and many other private organizations who provide resources for young adults.

- State Coordination The ND Chafee IL Administrator collaborates with transition programming partners regularly through presentations, trainings and ongoing email communications to assist agencies in understanding CFCIP programming, youth eligibility, and service needs in North Dakota.
- Tribal Involvement The ND Chafee IL Administrator works with statewide Chafee IL Coordinators to ensure that CFCIP and ETV benefits are made available to Native American youth (Title IV-E or 638) on the same basis as non-native foster care youth in North Dakota. In addition, the Chafee IL Administrator and Chafee IL Coordinators email program and contact information to the Tribal Directors as needed to ensure adequate referral opportunities are available. Children & Family Services utilizes the STEP meetings to collaboratively work with tribal partners to update and retrieve necessary information to maximize resources and ensure opportunity for foster children statewide. The 18+ Continued Care program allows for Tribal Title IV-E youth to remain in or return to foster care if desired.
- Youth Involvement Children & Family Services administers the operation of the ND Youth Leadership Board. The board involves participation from current foster youth and Foster Care Alumni. This group of young people work to build leadership skills, engages in conference panels, and facilitates local and state efforts to better the child welfare system. North Dakota replicates the Federal CFRS process in reviewing regional foster care services. Youth Stakeholder meetings are conducted during full CFRSs in ND; two locations per year. Youth Stakeholder participants have the opportunity to share with state staff their perspective of what has gone well in foster care and what areas could be improved. Children & Family Services will look to the ND Youth Leadership Board members when an opportunity for planning, organizing, or brainstorming child welfare improvements arises.

C. Service Description

North Dakota provides the following services under title IV-B, subpart 2:

- Family Preservation Services
 - Parent Aide
 - Parent Aide services are designed to improve parenting skills with parents who are at risk of abusing or neglecting their children, by reinforcing parents' confidence in their strengths and helping them to identify where improvement is needed and to obtain assistance in improving those skills. It uses the relationship between the parent and the parent aide as a tool to encourage, teach, and assist parents. These services are provided through memoranda

of agreements in 40 North Dakota counties. Two regional Human Service Centers also provided Parent Aide services. The two HSC programs are funded with Title IV-B dollars.

- In-Home case management services
 - This service is provided through memoranda of agreements with county social service agencies to support county case management staff in their efforts to provide ongoing case management services for families and children living in the home at risk of foster care placement.
- Prime Time Child Care
 - Prime Time Child Care provides temporary child care to children of families where child abuse and/or neglect have occurred or there is a risk of it occurring. It gives parents an opportunity to attend counseling, addiction treatment, or other needed services while their children are cared for in a licensed facility. Services are funded in 15 counties through memoranda of agreements.
- Family Support Services
 - Prevention Networks, Public Awareness & Community Development and Outreach services
 - These services are provided through a contract with Prevent Child Abuse North Dakota (PCAND) and are available statewide. PCAND is not a direct service provider, yet is a key primary prevention organization. Prevention Networks are provided through PCAND's efforts to build on existing networks and connect new partners, as well as forming new networks for prevention of child abuse and neglect, including the North Dakota Home Visitation Network. Programming known as "Authentic Voices" networks survivors of childhood maltreatment and others to advocate on behalf of children. This effort began with the publication of "Authentic Voices: North Dakota Child Sexual Assault Survivors" publication. It has grown as a public awareness project utilizing a facilitators guide and theater adaptations of the work. They also coordinate the "Period of Purple Crying" initiative, an evidence-based infant abusive head trauma prevention program. Public Awareness efforts include coordination of statewide Child Abuse Prevention Month activities. Community Development and Outreach efforts include the Nurturing Healthy Sexual Development (NDS), an engaging, interactive discussion-based training program developed to help adults better understand the sexual development of children and learn how to respond to children's sexuality in ways that promote healthy development. They also coordinate a Community Abuse Prevention Resource Team operating in Williston, ND.
 - Respite Care
 - Respite Care is temporary child care for families with disabled children, including chronically or terminally ill children, children with serious behavioral

or emotional difficulties, and drug-affected children. This service is intended to provide care givers with periods of temporary relief from the pressures of caring for children. Respite Care services were funded in one northwestern county through a state Memorandum of Agreement. Three regional Human Service Centers (HSCs) also provided Respite Care services during the year. These three HSC programs were not funded with Title IV-B dollars.

- Time Limited Family Reunification
 - Intensive In-home Family Therapy services are provided statewide through a contract with the Village Family Service Center.
- Adoption Promotion and Support
 - Foster and Adoptive Recruitment & Retention Coalitions
 - The eight regional Recruitment & Retention coalitions apply for funding each biennium. The approved regional “Request for Funding” proposals identify both general and targeted recruitment activities to remain consistent with the Recruitment and Retention State Plan (**ATTACHMENT B**).
 - Adoption services provided through a contract with Catholic Charities North Dakota in partnership with PATH ND, Inc.
 - The CFS Division facilitates a contract with a private provider to provide adoption services to children in foster care and the families who adopt them. The contracted agency accepts referrals from the county social service agency when the plan for a specific child is adopted (or there is a concurrent plan for adoption). The private agency then provides all adoption related services including child preparation and assessment, child specific recruitment, general family recruitment, family assessment and preparation, placement and post -placement services. The agency also assists families in applying for adoption assistance.

Please refer to Section 2, Assessment of Performance, Service Array (pages XX-XX) for an assessment of the strengths and gaps in services.

For FFY 15, the CFS Division has budgeted to spend 25% of IV-B, Subpart 2 funds for Family Preservation services, 22% for Family Support Services, 23% for Time Limited Family Reunification Services and 20% for Adoption Promotion and Support Services.

D. Service Decision-Making process for Family Support Services

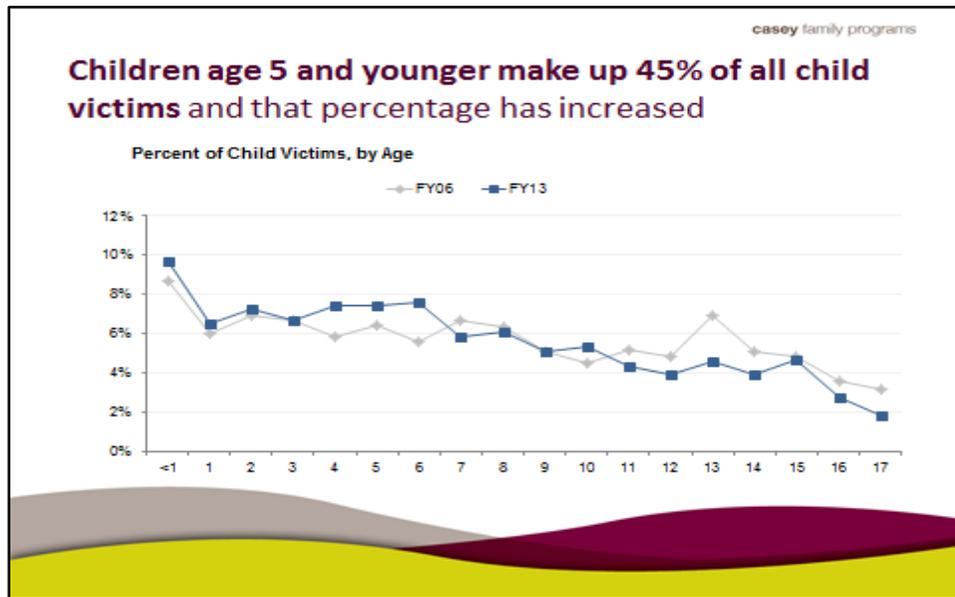
Prevent Child Abuse North Dakota (PCAND) is the only statewide organization in the state whose sole focus and mission is the prevention of child abuse and neglect in all its forms. Children and Family Services and PCAND have maintained a contractual relationship for over 20 years, working toward this goal. Objectives in the 2013-2014 PCAND workplan include support for communities in developing systematic approaches

to reducing child abuse and neglect, through community outreach and development of local community Abuse Prevention Resource Teams. Through the contractual arrangement with PCAND, the Period of Purple Crying program has been instilled into local community hospitals by training local medical providers in this evidence –based prevention model. PCAND also works with local community groups around the state to facilitate, support, and monitor Child Abuse Prevention Month projects and activities through mini-grants to local community groups. PCAND also provides direct training to local agencies for Nurturing Healthy Sexual Development. PCAND is also a pivotal force in the development and activities of the North Dakota Home Visitation Coalition, a group of over 20 organizations supporting and providing home visitation services through a variety of models

North Dakota funds respite care services as a Family Support Service through IVB funds. Williams County Social Services has a longstanding history with FS serving as a coordinating agency for respite care service provision. They are a community based social service agency servicing families residing in Williams County, North Dakota.

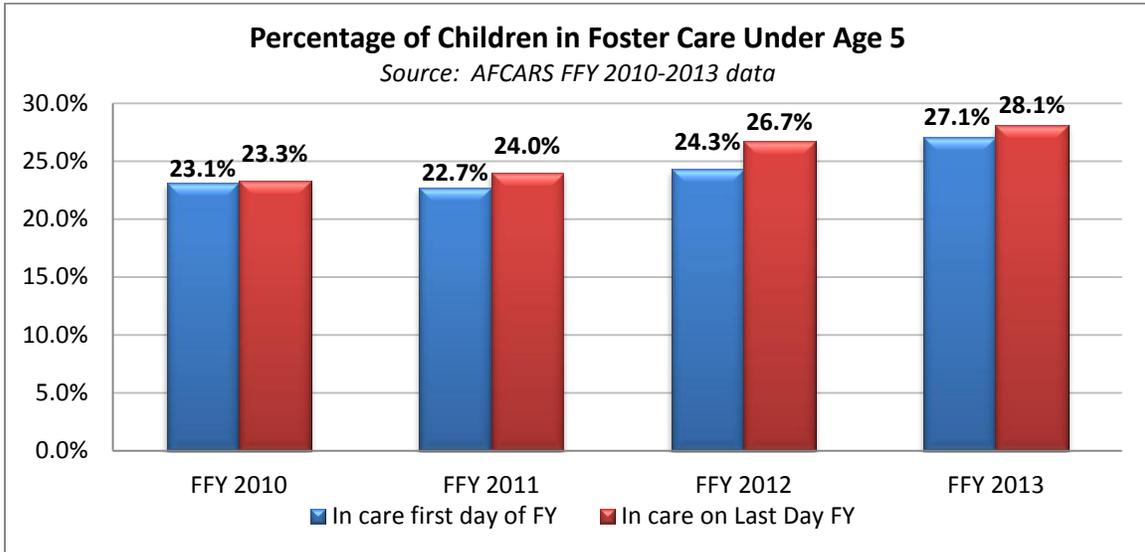
E. Populations at Greatest Risk of Maltreatment

North Dakota relies on analysis of NCANDS data provided by Casey Family Programs. This data reveals that for FFY 2006 through FFY2013 (see below), children ages 5 and younger comprise the population at greatest risk for maltreatment. This is also reflected in NCANDS data for FFY 2013. Services are targeted to this population through referrals to Early Intervention programs for all children under age three, who are identified as victims of child maltreatment, Health Tracks Screening for all children entering foster care, and referral to county case management services for individualized child and family service plans.



F. Services for Children Under the Age of Five

North Dakota has experienced a range from 23% - 28% of children under the age of 5 in foster care since FFY2009. Recent AFCARS data indicates on September 30 of 2013, 28% of the children in foster care were under the age of five.



North Dakota has an accelerated permanency planning practice for all children in foster care, including those under the age of 5. Child and Family Team meetings provide the opportunity to review a child’s permanency plan and status of reaching that goal every three months. This practice is at the core of the state’s plan to reduce the length of time that young children are in foster care without a permanent family. In addition, the following steps are in place and represent the state’s plan for this population while also ensuring the provision of developmentally appropriate services:

- All children in Foster Care receive a Health Tracks screening within 30 days of entering care, which include developmental and mental health assessments, as well as assessments for physical, dental and optical health needs.
- CFS, UND CFSTC, and the ND Foster Parent Association will address training needs for direct service staff and foster parents to meet the needs of this population.
- CFS plans to organize a collaborative effort to track this group of children and provide more specific data analysis. The division will approach the Court Improvement Project’s data analysis subcommittee as an avenue to complete this task. It is anticipated that the use of AFCARS data and the ND Supreme Court Odyssey system will assist in assessing permanency issues for this group in the legal process, as well as analysis of entries and exits into care. Once a thorough analysis can be completed for this population, the division will be in a stronger position to recommend any policy and practice changes which may strengthen the state’s ability to reduce the time spent in foster care for this young population.

- One of the priority areas of the Head Start State Collaboration Office (HSSCO) (located in CFS) is to partner with child welfare in order to maintain awareness of the availability of Head Start and Early Head Start to young children in care as well as assessing the needs of both programs and families to connect them to appropriate services. A continued activity is the distribution of educational materials to inform caretakers, foster parents, and social service workers regarding the availability of services for the children they serve. In addition to these ongoing efforts, the HSSCO Administrator is working with the North Dakota Head Start Association on a public education campaign to raise awareness of the programs in the state, especially in regards to the outcomes of the children they serve. This will be targeted at current and eligible children and their families. Additionally, the HSSCO Administrator will continue to work with the Adoption and Foster Care Task Force to promote appropriate referrals to Head Start and Early Head Start programs utilizing the information indicating any gaps where referrals have not been made. This process will continue to take into account the feedback from foster parents to ascertain any barriers to them using the programs.
- For the child under five years old who enters foster care as a result of a child protection report, the CAPTA requirements will trigger a developmental referral for this age group; thus, a developmental referral will automatically ensue per law and policy.
- CFS continued to work with the regional Human Service Centers (HSC), which provides services to young children with developmental delays, to assess their capacity to serve all foster children needing assessment and services to assure developmental progress. Regional HSC have an array of services available including developmental assessments and therapy for children in this age range.

G. Services for Children Adopted from Other Countries

Children adopted from other countries qualify for adoption and post adoption services, as would any child who is a resident of the state. Adoption specialists provide information and referral services to families who inquire or present with a need. Family preservation services are available to families who are at risk for out of home placement and may be accessed through the local County child welfare agency. Pursuant to PA 01-01, it is unlikely that foreign-born adopted children would qualify for adoption assistance, other than reimbursement of non-recurring expenses for those few children who may be designated as special needs and whose parent applies for such reimbursement prior to finalization of the adoption. Over the course of the 2015-2019, North Dakota will continue to provide services in this manner. North Dakota will also explore additional service opportunities and funding sources in order to strengthen the provision of adoption and post-adoption support.

V. CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

North Dakota has a long history of consultation and coordination with the four federally recognized Tribal Nations of North Dakota: Mandan, Hidatsa & Arikara Nation, Spirit Lake Nation, Standing Rock Sioux Tribe, and Turtle Mountain Band of Chippewa. State/Tribal Title IV-E Agreements date back to the early 1980's and consultation coordination efforts with the tribes are active and ongoing. North Dakota is unique in that it has a Tribal Service Unit, which is the only one in the United States, the Trenton Indian Service area in Trenton, ND. There is trust land, tribal organization, services, Indian Health Services, etc. They are affiliated with Turtle Mountain Band of Chippewa.

In preparation for the 2015-2019 CFSP, CFS conducted two 2-day strategic planning sessions in February and March 2014 to garner stakeholder input for the CFSP five-year plan. Participants included about 50 individuals from across the state representing various child welfare interests from the state, local and private sectors. The four tribal social service directors were invited. Stephanie Isaacson, Standing Rock Tribal Social Services Director attended and participated in the planning. Staff from the Native American Training Institute and the Indian Affairs Commission also participated in the planning process. Deb Painte, Director and Sandra Bercier, Training Coordinator, represented the Native American Training Institute (NATI) and participated. Scott Davis, North Dakota Indian Affairs Commissioner attended to extend support for the process and expressed appreciation for Native inclusion in this process. In addition, Shari Doe, CFS Division Director, participated in the strategic planning for the Spirit Lake Tribe's 2015 – 2019 five year IV-B plan. Information gained will be used to coordinate tribal and CFS's CFSP strategies and goals to further enhance collaboration.

CFS plans for ongoing coordination and collaboration with the tribes in the implementation and assessment of the CFSP through a variety of methods:

- CFS will continue the partnership with NATI and the tribal social service agencies in STEPS meetings. CFS will continue to actively participate in the STEPS meetings. These meetings are scheduled quarterly, either at a tribal location or in Bismarck. STEPS meetings provide an opportunity for CFS and tribes to discuss various issues including IV-E requirements, service array planning, caseworker visits, CFSP progress and ICWA compliance.
- CFS will continue to request tribal participation in Children and Family Services Plan strategic planning meetings and annual reviews. CFS will participate in tribal planning meetings as requested.
- Increasing Native American families ability to care for their children in their own home and thereby reducing the over-representation of Native children in foster care was identified as priority need during the strategic planning sessions. As a result of this feedback, one intervention selected was to form an Intervention Selection Team (IST) to research, select and employ strategies to accomplish this goal. Tribal

representation and participation on this team will be critical and will provide a direct opportunity for ongoing coordination with the state's CFSP

CFS plans for ongoing coordination and collaboration with the tribes in monitoring and improvement of the state's compliance with ICWA through a variety of methods including:

- State policies and practice guides require:
 - Notification of Indian parents and tribes of state proceedings involving Indian children and their right to intervene
 - Placement preference of Indian children in foster care, pre-adoptive, and adoptive homes
 - Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption
 - Tribal right to intervene in state proceedings or transfer proceeding to tribal jurisdiction
- ICWA compliance is reviewed in every randomly drawn CFSR case where ICWA applies in the eight regional CFSR's around the state. Beginning in May 2013, CFS began reviewing tribal social services cases as part of the CFSR – this practice will continue throughout the five year CFSP. CFS provided a day-long training on the CFSR instrument with four tribal social service agencies. Training on the CFSR instrument will be ongoing as needed. Additionally, the state has reached out to tribal partners inviting tribal representation on the North Dakota Child and Family Service Reviews as a state reviewer. Furthermore, a representative from each of the four tribal social service agencies has agreed to serve a Federal Reviewer for the upcoming Title IV-E Eligibility Review to be held in August 2014. It is hoped that tribal representation can be continued through participation in the state Title IV-E review team during the upcoming five years.
- The CFS Division Directors will continue to serve as a Court Improvement Project Indian Child Welfare Act subcommittee member.
- The Court Improvement Project's ICWA subcommittee commissioned an ICWA Qualitative Observations audit of court case files for ICWA compliance. This audit involves a case file review of all cases from removal through adoption from October 1, 2009 through September 30, 2010. The Court Improvement Project ICWA subcommittee met with the auditors during the ICWA Conference in February 2014. The auditors reported their findings so far and their timeline for completion. If auditors identify potential ICWA issues, they notify the Court Improvement Project staff person who then notifies the ICWA sub-committee. Solutions, both long and short term, will be discussed and implemented as appropriate. Recently, the auditors suggested a hard card of required ICWA language would likely resolve language

issues identified in some findings and orders. The sub-committee approved the creation of a hard card and asked that it be distributed to all persons who may have input into findings and orders, such as attorneys, social services, court staff, etc. When the audit is completed, the CIP ICWA sub-committee will review the report with the auditors to clarify and analyze audit findings. When the CIP Committee determines the report is final, it will be presented to the North Dakota Supreme Court Administrative Council. After reviewed by the Council it will be available to the public. This audit report could be a catalyst for changes to laws, policies or procedures intended to improve compliance with ICWA.

- CFS will continue collaborate with the Court Improvement Project, NATI and the UND Children & Family Services Training Center to arrange statewide training for child welfare workers on ICWA compliance to a wide range of participants (judges, attorneys, social workers, court administrators, etc.).
 - The University of North Dakota Children and Family Training Center includes curriculum on ICWA compliance as part of the 4 week child welfare certification process
 - The Court Improvement Project and CFS will continue to fiscally support NATI's annual "North Dakota Indian Child Welfare Conference." This conference provides a pre-session entitled "ICWA 101" as well as a variety of other ICWA-specific sessions. CFS Division Staff serve on the planning committee for the this conference
 - The Children's Justice Symposium offers an array of topics which include sessions on ICWA.

Based on discussions with the tribes and the established State/Tribal Agreements, it is understood that the state is responsible for providing child welfare services and protection for all children under the state's jurisdiction (i.e. tribal children residing off the reservations). Tribes are responsible for providing child welfare and protection for tribal children under the tribal agency's jurisdiction (residing on the reservation). Children in tribal custody deemed eligible for Title IV-E remain under the jurisdiction of the tribal agency/court while the state maintains an oversight role to ensure all procedural safeguards afforded under the Title IVE agreements are in place. Additional services and protections provide by the state for ongoing service provision for tribal children include:

- A case review system in which Tribal IV-E cases are included in the state's Children and Family Review process, on-site case file reviews are conducted periodically by CFS staff.
- Access to the general funds for preventive services for children at risk of entering foster appropriated by the North Dakota Legislature. These services include parent aide and in-home case management services.

- The state's regional human service child welfare supervisors conduct and participate in tribal child and family team meetings to facilitate reunifications, adoptions, guardianships or other planned, permanent living arrangement.
- Fund Title IV-E foster care maintenances costs and the state match for the IV-E eligible children living on the reservations.
- Continue funding of administrative IV-E dollars to the tribes. Provide technical assistance for completing and submitting IV-E administrative claims, including establishment of time study policies.
- Contract to provide IV-E training dollars to the tribal social service agencies through to the Native American Training Institute to conduct training on cultural competency, foster parent training for Native foster parents, maintenance of cultural resource service directory and the cultural resource guide for all tribes, ICWA compliance and financial support for the Indian Child Welfare Conference.
- Provision of training and technical assistance on IV-E related tribal issues. CFS will continue efforts underway to assist the Spirit Lake Nation with outside case management assistance through collaboration with Indian Affairs Commissioner's office and the private sector.
- CFS is continuing to work with DHS's IT and fiscal staff to establish a method to draw down the federal Tribal IV-E FMAP reimbursement rate. Code changes are necessary to effect the change. It is expected the changes will be implemented by early 2016.
- To enhance consistency in the IV-E eligibility determination process, North Dakota is exploring the feasibility of establishing a centralized IV-E eligibility determination process. Eligibility is now determined by counties neighboring a reservation. This results in differences in communicating rules to tribal social services.
- CFS currently obtains credit reports for youth ages 16+ in public custody, including Tribal Title IV-E youth. Tribal partners were given a copy of the federal PI, the ND Children & Family Services policy issuance, and given an opportunity to discuss the process and identify ways in which their tribal offices will engage in the federal mandate. The state assumed the responsibility of obtaining credit reports for all youth ages 16 and older in foster care, including the credit reports of tribal youth.
- The ND Chafee IL Administrator works with statewide Chafee IL Coordinators to ensure that CFCIP and ETV benefits are made available to Native American youth in tribal custody on the same basis as non-native foster care youth. In addition, the ND Chafee IL Administrator and Chafee IL Coordinators email program and contact information to the Tribal Directors ongoing to ensure adequate referral opportunities are available to tribal youth. Children & Family Services collaboratively works with tribal partners to update and retrieve necessary information to maximize resources

and ensure opportunity for foster children statewide. The 18+ Continued Care program allows for Tribal Title IV-E youth to remain in, or return to, foster care if desired. This extension of services is beneficial to youth as they transition to living independently as adults.

- The state's contracted adoption provider, AASK, works collaboratively with the tribes when placing Native American children for adoption. AASK places children with the ICWA order of preference unless "good cause" has been established by the court to do otherwise, or the child's tribe has approved placement outside to ICWA order of preference. AASK adoption specialists work with adoptive families to develop a cultural plan for all Native children being placed for adoption with non-Native families that is forwarded to the child's tribe when requesting their approval to place outside the order of preference.
- The CFS Director continues to serve as an advisory member on the board of the Native American Training Institute.
- The Department of Human Services, through an agreement with the University of North Dakota, provides an IV-E stipend program. The stipends are offered to social work students who agree to do child welfare work in the state, particularly rural and/or tribal areas, after graduation.
- The Court Improvement Project data subcommittee is looking into collecting data to analyze the number of abuse deprivation filings and neglect deprivation filings to better understand whether cultural sensitivity plays a part in Native American children entering foster care. This data could serve as a basis for tribal families (targeted prevention) training and culturally sensitivity training based on Native American family dynamics to prevent unnecessary removals.

The CFS Division will provide electronic copies and links to the 2015-2019 CFSP to the Tribal child welfare workers when submission is finalized. The CFSP will be discussed at the fall STEPS (September 2014) meeting with the four tribal child welfare directors and NATI staff. Tribal social service directors will review and discuss their CFSP during STEPS meeting and post electronically as able. Annual Progress and Services Reports will be shared in this same manner during the course of the next five years.

VI. CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP)

A. Agency Administering CFCIP

Chafee Foster Care Independence Program (CFCIP) operations are administered by the North Dakota Department of Human Services, Child & Family Service Division. The ND Chafee IL Administrator oversees the CFCIP budget, contract, programming, and data collection statewide. North Dakota ensures that all political subdivisions in the eight regions and 53 counties are served by CFCIP, including

tribal youth and youth in custody of the Division of Juvenile Services. North Dakota has one contracted CFCIP provider, PATH. Chafee IL Coordinators are employed by PATH, located in six of the eight regional PATH offices, traveling to serve eligible current foster youth and Foster Care Alumni statewide.

B. Description of Program Design & Delivery

1. Design & Delivery:

ND CFCIP has evolved into a more suitable, person centered model over time. From 2000-2005, ND issued various agreements with providers to offer classes to current foster care youth (CFCY) and Foster Care Alumni (FCA) statewide. Between 2005- 2011, ND issued eight agreements (one provider in each region) to offer individual planning and assistance to CFCY and FCA. In August 2011, the department identified one agency to provide CFCIP statewide. This was a financial decision based on the need to leverage resources and maximize the CFCIP federal funding to ensure youth were getting the most appropriate services, as well as access to flexible funding and service delivery quickly and effectively. The ND CFCIP Provider, PATH, offers individual planning, one on one assistance, group trainings, leadership opportunities, and referral options to CFCY and FCA statewide. The Department engages in a close working relationship with the CFCIP provider evaluating what is working and what can be improved ongoing. This communication happens often, with special emphasis occurring during quarterly face-to-face meetings and monthly teleconferences facilitated by ND Chafee IL Administrator.

2. Youth Involvement:

Children & Family Services administers the operations of the ND Youth Leadership Board. The board involves participation from CFCY and FCA. This group of young people work to build leadership skills, engages in conference panels, and facilitates local and state efforts to better the child welfare system. Children & Family Services will look to the ND Youth Leadership Board members when an opportunity for planning, organizing, or brainstorming child welfare improvements arises. The board meets quarterly in conjunction with the Chafee IL Coordinators. During quarterly meetings, youth board members are asked for feedback on policy, NYTD incentives/efforts, website information, state forms, and the board is given time to accomplish tasks and develop new goals. Most recently, the ND Youth Leadership Board created a ND Foster Youth Handbook to be given to youth age 16+ at their first child and family team meeting. Handbook Link: <http://www.nd.gov/dhs/info/pubs/docs/cfs/foster-youth-handbook.pdf>

3. Informing Stakeholders of NYTD:

North Dakota NYTD policy directs professional staff (county, Division of Juvenile Services, Tribal IV-E, Partnerships, and Chafee IL) to collect and enter data related to youth ages 14 to 23. A ND NYTD Handbook was created as a guide to

the field about what NYTD is and how the process of both served population data and outcomes data collection can work to better our ND child welfare system. On occasion, foster parents or the residential treatment facility providers (paid by the state) assist case managers with collecting NYTD data by indicating which independent living service categories were completed monthly. Every six months, ND submits the federal NYTD report. After submission the field is given a summary of the NYTD report highlights. The state report is similar to the report provided by the NYTD Portal indicating which independent living service categories were most utilized, how many youth were engaged in the process, as well as which agency provided the services. After the Cohort 1 baseline surveys were conducted, ND did inform the field staff on how many surveys were completed, but did not distribute outcome results as the preliminary plan was to wait until we had data to compare (17 and 19 year old data). The NYTD survey data will start to be evaluated now that ND has two phases (age 17 and 19) of Cohort 1 completed.

4. NYTD Data Efforts:

The ND Chafee IL Administrator is the ND NYTD Lead. The efforts for NYTD have offered great excitement and the energy as ND reflects on transitioned age youth needs and services. High quality data collection is the key to identifying areas we need to focus our time and talents to better the overall outcomes of our ND youth transitioning to adulthood. The NYTD Work Group is made up of the NYTD Lead from Children & Family Services, Information and Technology Development, Information and Technology (ITS) Services, Decision Support Services (DSS), and Fiscal Administration. In partnership to expand Continuous Quality Improvement efforts in ND, it is anticipated that additional reports and usage of the NYTD information will be made available in other forms of data distribution (statistical bulletin, ND Data Snapshot, etc.). It is anticipated that use of NYTD information will be a vital component to future planning efforts within the state to inform programs, policies and budgets related to transitioned aged youth in our state.

C. Serving Youth Across the State

1. Subdivisions:

The ND CFCIP Provider, PATH, employs Chafee IL Coordinators to work directly with eligible CFCY and FCA youth. Chafee IL Coordinators are located in six of the eight regional PATH offices, traveling to two regions. The tribal entities located across North Dakota also have access to CFCIP services. ND is re-evaluating the regional representation of Chafee IL Coordinators and office locations with a desire to restructure the office lines ensuring the closest proximity of a Chafee IL Coordinator to eligible youth statewide. The discussion will continue as plans are discussed for the 2015-2017 biennium budget.

2. Data by Region:

CFCIP service delivery is relatively consistent statewide; Region I (Williston) and Region VI (Jamestown) Chafee IL Coordinators travel to the two regions to meet with youth. Travel to these rural areas occurs when needed, but the hands on/stop in availability for youth is far more limited. This continues to be discussed and evaluated based on population and youth numbers. CFCIP does not have a case load standard at this time; however participation is quite high. Chafee IL Coordinator caseloads range from 25 to 45 open youth at one time depending on the location; averaging 400 youth served in CFCIP each year. NYTD data indicates that majority (68%) of the collected independent living services are provided by the CFCIP provider, while 32% of independent living services are provided by a public agency (County, DJS, or Tribe). The credit reporting federal requirement may have contributed to the increased level of budget and financial management service delivery (over 60%), while academic support (73%) remains one of the most offered services delivered to young people at this time.

D. Serving Youth of Various Ages and Stages of Achieving Independence

1. Mission:

It is the mission of the ND Chafee Foster Care Independence Program (CFCIP) to ensure that youth involved in the foster care system receive services and support which will enable them to successfully transition to live independently. Below is a list of service delivery categories:

- **Youth under age 16:** North Dakota CFCIP policy includes youth ages 14+. Youth in foster care age 14 or greater identified as “not likely to age out of care” are served as a priority 2. Policy allows exceptions to be made on an individual and ongoing basis for older siblings in need of independent living services before reunification back into the family home.
- **Youth ages 16 to 18:** North Dakota CFCIP policy prioritizes youth in foster care age 16+ as Current Foster Care Youth (CFCY) priority 1 if he/she is identified as “likely to age out of foster care”. Youth age 16+ not identified as “likely to age out” are a priority 2 and will be served by CFCIP based on individualized needs and program availability.
- **Youth ages 18-20 in foster care:** North Dakota CFCIP policy prioritizes youth in foster care age 16+ as CFCY priority 1 if he/she “aged out of foster care” by attaining the age of 18 or he/she signed into the 18+ Continued Care Program. Youth who participate in the 18+ Continued Care program are a priority 1 for CFCIP and are served by the program in conjunction with their foster care case plan. The child and family team assists the youth in creating personal IL goals and tasks to accomplish while in placement and care of the Administrative County.

- **Former foster youth ages 18 through 20:** North Dakota CFCIP policy prioritizes youth as Foster Care Alumni priority 1 if they “aged out of foster care” at the age 18+. Youth who qualify for this category are eligible for general flex funding, room and board flex funding and the Education & Training Voucher.
- **Kinship Guardianship/Adoption:** North Dakota CFCIP policy prioritizes youth as Foster Care Alumni priority 1 if they exited foster care because he/she was adopted or entered kinship guardianship after the age of 16. Youth who qualify for this category are eligible for general flex funding and the Education & Training Voucher.

2. Assessments:

North Dakota foster care policy requires all foster care youth over the age of 16 have an independent living needs assessment completed and an independent living care plan in place. Custodians are responsible to complete these requirements, with access to CFCIP as one way to help accomplish the task. All ND CFCIP youth participants are given two assessments. ND has embraced the use of the Casey Life Skills Assessment <http://caseylifeskills.org> for youth ages 14 to 18, as well as the use of the state developed ND CFCIP Assessment (recently updated in 2014). The ND CFCIP Assessment was created by ND Children and Family Services and is to be administered on all youth at the age of 17, and must be repeated annually for all participating Chafee youth until age 21 unless the youth is receiving the ETV at age 21, then continue the assessment until age 23. The ND CFCIP Assessment collects outcomes data related to the seven purposes of Chafee Independent Living (economic resources, education/employment, connectedness, safe and stable place to live, avoid high risk behaviors, access to medical, and preventing parenthood). This data is used as a guide to how CFCIP is engaging with youth participants and will continue to be used in a mirrored effort with NYTD data to analyze state successes and challenges.

3. Administrative Barriers:

North Dakota is a minimally funded CFCIP state. The cost of running and operating CFCIP statewide continues to grow as cost to retain staff, travel, and cost of living for youth continue to increase. North Dakota provides a limited amount of state general funding to the administrative CFCIP budget, but no additional dollars to the operation of the direct services in the contract to the provider. North Dakota remains on a “hold even budget” build for the 2015-2017 biennium; a consistent stance for the past six budgets. Budget constraints make program growth difficult, additional dollars for the program could retain Chafee IL Coordinators with a reasonable and fair wage, while also hiring additional staff to provide CFCIP services in each regional office to engage more eligible youth in the process of independent living skill building.

4. Room/Board Funds:

North Dakota does not expend more than 30 percent of federal CFCIP funds for room and board flex funding. CFCIP staff do a great job of exploring other community provider options to aid youth with rental deposits, first month's rent and utility charges. The community partnerships and collaboration for CFCIP participants lowers the need to expend room/board funds from the CFCIP budget. North Dakota CFCIP policy identifies that room and board flex funds are used to, *“assist youth with rent, deposits, utilities, or room and board household start up purchases. Funding is intended to help youth get moved into a permanent home, not to prolong unnecessary dependency, nor to pay for continued residential treatment.”* This definition is used to assist active Foster Care Alumni ages 18 through 20 who are no longer in foster care.

5. 18+ Continued Care & Chafee:

18+ Continued Care went into effect January 1, 2012. State law NDCC 27-20 (SB 2192) changes are consistent with the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (Pub. L. 110-351). ND 18+ Continued Care is available to eligible current and former foster care children up to the age of 21 if the youth meets certain criteria. The youth must have “aged out” of foster care while in the custody of a North Dakota public agency including; county social services, tribal social services, and the Division of Juvenile Services (DJS). Tribal Social Services foster care youth must have been Title IV-E eligible prior to discharge in order to qualify for 18+ Continued Care. The length of time that a youth is in foster care does not determine their eligibility for 18+ Continued Care. The 18+ Continued Care program philosophy encourages youth to stay in family foster care while they continue to pursue independence. Any arrangements made for placement in settings other than family foster care must be staffed with, and approved by the state office. It is not required, but highly encouraged that all youth in 18+ Continued Care program are also served in CFCIP. The joint effort by case management, the youth, and Chafee IL Coordinators in setting goals and accomplishing tasks is most beneficial for the youth case plan and youth outcomes. At this time, 18+ Continued Care youth can access general flex funding under the “aged out” definition. While in 18+ Continued Care youth are not in public agency “custody”, rather the agency has “placement and care responsibilities” of the youth. Providers do receive a maintenance payment to assist the youth with room/board needs minimizing the need for youth to access room/board flex funding from CFCIP. Majority of the youth are living in a family foster home or staying in a college dormitory while in school.

18+ eligibility youth must meet one of the federal categories in order for an 18+ Agreement to be valid:

- Education- Participate in high school, GED classes, college, tech/vocational school, etc.
- Employment- Work at least 80 hours per month.

- Preparatory Employment - Participate in programming that removes barriers to employment (Job Corps, etc.).
- Medical Condition/ Disability - Be unable to participate in education/employment due to a diagnosed medical condition/disability.

North Dakota fully supports youth remaining in or returning to foster care through the 18+ Continued Care program and works collaboratively with CFCIP to ensure youth needs are met in the program if the youth agrees to participate. 18+ Continued Care youth meet monthly (more if needed) with their foster care case manager in addition to CFCIP participation to ensure they are meeting and maintaining eligibility for the 18+ program. Monthly updates on employment hour's, school grades, scholarship/financial aid and ETV application deadlines, as well as daily living needs are addressed.

6. 18+ Data:

During North Dakota Legislative session 2011, Senate Bill 2192 changed ND state law to allow youth in foster care to remain in or return to care per federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (Pub. L. 110-351). 18+ Continued Care state policy was created by working with public agencies, youth in care, youth out of care, providers, and government entities. 18+ Continued Care went into effect January 1, 2012. During calendar year 2012, North Dakota had **42 youth** sign 18+ Agreements totaling **45 episodes**. During calendar year 2013, North Dakota had **48 youth** sign 18+ Agreements totaling **49 episodes**.

The efforts of 18+ Continued Care will be a point of data collection when North Dakota develops a formal CQI model. Specific data elements have not been identified at this time, but likely continued youth involvement and feedback will be solicited to ensure the 18+ program is effective for those involved. North Dakota fully supports youth remaining in or returning to foster care through the 18+ Continued Care program and works collaboratively with CFCIP to ensure youth needs are met in the program if the youth agrees to participate in CFCIP.

E. Collaboration with Other Private and Public Agencies

1. **Community Awareness:** ND CFCIP works closely with community partners. Community partners include, but are not limited to: Job Service, Job Corps, Adult Learning Centers, Housing Authorities, Community Action, Vocational Rehabilitation Services, Salvation Army, Youthworks, transitional housing shelters, and many other private organizations that provide resources for young adults. Children & Family Services collaborates with partners regularly through presentations, trainings and Coalition meetings, and ongoing email communications to assist partnering agencies in understanding CFCIP program and eligibility. In addition, the ND Youth Leadership Board developed the ND Youth Website as a reference point for not only young people, but providers in

need of access to local services. <http://www.nd.gov/ndyouth/> . No formal awareness campaigns have addressed youth needs at this time.

2. Coordinate CFCIP funds with other funding:

CFCIP Chafee IL Coordinators utilize local services and resources before expending any CFCIP flex funds for active youth. Community providers assist CFCIP with training youth on career exploration, job training, street drug awareness and prevention, "Reach One Teach One" planned parenthood course, safe sex & prevention programming, Rent 101, banking, higher education exploration, individual development account (IDA) savings program, FAFSA preparation, nutrition classes, money smart workshops, tax preparation, substance abuse prevention, internet safety, etc. Youth in need of financial assistance; car seat for newborn baby is provided through local Safe Kids Coalitions instead of general flex funds and rental assistance is accessed through local Salvation Army, Housing Authorities, or a Youth Transitional Housing program before accessing room/board flex funds. Unfortunately, ND has limited housing options for youth. In the larger cities there are homeless shelters or transition shelters that some youth have utilized. Conversations continue with public and private providers brainstorming ways to allow transitional housing access to Foster Care Alumni in our state. North Dakota does not have supervised independent living programming.

3. Medicaid: North Dakota established policy which will allow for the implementation of Medicaid for eligible youth to age 26. Policy reads, "*North Dakota provides Medicaid benefits to individuals who were in foster care in North Dakota and on Medicaid in the month they turned 18. ND Medicaid coverage is available to eligible youth until the month the individual reaches the age of 26. Eligible youth must complete the application at the local county social service office. Youth who aged out of foster care from another state will not be covered by ND Medicaid.*" CFCIP continues to work to help youth understand the Medicaid process and provide information and assistance to access this program ongoing.

4. Human Trafficking: Human trafficking has become a new topic nationally and has been a subject at North Dakota conferences this past calendar year. The education gained from conference trainings has led to conversations internal to the state child welfare system about how we can ensure young people are not victimized. The ND Oil Boom has offered a large increase in population; mostly middle aged men coming to North Dakota to work in the oil fields, which is known to increase the risk of trafficking activity. ND CFCIP will plan a formal training for the Chafee IL Coordinators providing resources to best educate young people on how to avoid risky behaviors, identify signs of human trafficking, etc.

F. Determining Eligibility for Benefits and Services

1. Objective Criteria/ Eligibility:

ND CFCIP follows federal guidelines and is inclusive of populations eligible for the CFCIP program. ND CFCIP does begin work with 14 year olds and offers CFCIP services to youth up to the age of 23 if they are receiving the ETV. All provisions of the Foster Care Independence Act of 1999 are equally applicable to young people with disabilities and inclusive of all racial and cultural backgrounds.

North Dakota foster youth eligible for CFCIP, placed out of state, are served by ND CFCIP to the best of our ability due to the distance. ND CFCIP provides out of state youth ongoing communications via telephone, email, SKYPE or FaceTime to discuss IL needs and case goals. In addition, curriculum activities related to independent living services are mailed to the youth placed out of state to work on then re-evaluate with the IL Coordinator. ND CFCIP partners with the custodial agency to ensure the IL needs are being met during monthly face-to-face visits with the custodian. In addition, there have been times ND CFCIP has contacted out of state providers to request services. ND has been contacted on various occasions requesting courtesy case management for out of state CFCIP eligible youth. ND has worked out details to most appropriately and effectively meet the needs of those youth.

G. Cooperation in National Evaluations

ND CFCIP will cooperate with national evaluations and engage in the process to assess and address the needs of CFCIP program improvement as needed.

H. Education and Training Vouchers (ETV) Program

1. ETV Operations:

The North Dakota Education and Training Voucher (ETV) Program provides post-secondary education financial assistance to help eligible youth make the transition to self-sufficiency and receive the education necessary to obtain employment. Youth meeting the following criteria will be considered for an Education and Training Voucher Award.

- Youth who “aged out of foster care”, were discharged on or after their 18th birthday, or continue in 18+ Continued Care past their 18th birthday, and who have not reached their 21st birthday at the time of application.
- Youth who were adopted or entered kinship guardianship from foster care after age 16, but have not reached their 21st birthday.
- Youth participating in the ETV Program on their 21st birthday can remain eligible until they turn age 23, as long as they are enrolled and making satisfactory progress toward completing their post-secondary education or training program.
- Youth who are United States Citizens or qualified non-citizens.

- Youth who are, or will be enrolled into a program at an accredited or pre-accredited college, university, technical or vocational school.
- Youth who agree to be an active participant in the Chafee Independent Living Program while receiving the ETV.
- ETV award preference will be given to youth who were in foster care for twelve months or greater.

The ETV program is administered by ND Department of Human Services Child and Family Services directly supervised by the ND Chafee Independent Living Administrator. The Chafee IL Administrator reviews applications assuring recipients are in compliance with Chafee ETV Federal conditions.

2. Cost of Attendance/ Avoid Duplication:

The Chafee IL Administrator determines the amount of the ETV awards. The ETV awards are determined through final review and audit of the application including the youth's federal financial aid resources, the educational institution's cost of attendance, along with other documents required for complete application submission. The Chafee IL Administrator ensures through a verification process and documentation provided with the application that the federal assistance does not exceed the total cost of attendance as well as avoids duplication of federal benefits. Youth are mailed a formal letter notifying them of their ETV award. The ETV voucher amount is sent directly to their educational institution.

3. Stakeholders: The Chafee IL Administrator works to market the opportunity for eligible youth to apply for the ETV. Brochures, fliers, and emails are sent to the CFCIP, county, DJS, adoption, and tribal staff three times each year reminding case managers of the ETV application deadlines. In addition, ND Youth Leadership Board members have begun to discuss what efforts could be done nationally to expand the age eligibility for the ETV to 26 (reflecting the Medicaid age), which would allow for extended utilization of the ETV. A ND Foster Youth in-state tuition waiver has been discussed in the past, but has not gained much momentum during legislative session.

4. ETV Data: The Chafee IL Administrator administers the ETV application process and collects the data for the state. The tracking record is maintained for each academic year (Fall, Spring, Summer) indicating how many youth receive the Education & Training Voucher awards. The record identifies youth demographics, how much of an award, how many awards, and if the youth was a first time ETV awardee. In 2013-2014, North Dakota issued 46 awards and 21 of the awardees were new applicants.

I. Consultation with Tribes

1. Tribal Involvement: The ND Chafee IL Administrator works with statewide Chafee IL Coordinators to ensure that CFCIP and ETV benefits are made available to Native American youth (Title IV-E or 638) on the same basis as non-

native foster care youth in North Dakota. In addition, the Chafee IL Administrator and Chafee IL Coordinators email program and contact information to the Tribal Directors as needed to ensure adequate referral opportunities are available. Children & Family Services utilizes the STEP meetings to collaboratively work with tribal partners to update and retrieve necessary information to maximize resources and ensure opportunity for foster children statewide.

At this time, there has not been interest expressed by a tribal partner to develop an agreement to administer, supervise, or oversee CFCIP.

J. CFCIP Program Improvement Efforts

North Dakota will be developing an official CQI model. Specific data elements have not been identified at this time; however CFCIP, ETV, NYTD, and 18+ Continued Care programs are all areas of great interest. The ND Youth Leadership Board will continue to be the first point of contact when Children & Family Services is in need of a youth perspective, feedback and ideas. This group of youth leaders is strong in their abilities to solicit appropriate and necessary information from their peers, generate discussion about change, reflect on their personal experience, and advocate. In addition, the CFSR full reviews will allow an opportunity for North Dakota to gain insight from young people about the strengths and challenges of our work. Assessment and quarterly evaluation will also continue with the CFCIP provider to ensure successful outcomes in the next five years.

K. CFCIP Training

North Dakota will continue to solicit feedback from the CFCIP provider and ND Youth Leadership Board regarding training needs. North Dakota will require all Chafee IL Coordinators receive the Wrap Around Certification Training held in conjunction with child welfare workers statewide. Chafee IL Coordinators are also encouraged to attend state conference relevant to their work with culture, transition, education, employment, etc. ND Youth Leadership Board members are encouraged to attend the ND Youth Transition Conference each July. In addition, North Dakota supports the costs of two CFCIP representatives to attend national conferences either the PATHWAYS or Daniel Memorial National Conferences annually. The CFS Training Center provides Child Welfare Certification training to social workers; one segment of this training is Chafee Independent Living and the importance of youth transitioning to independence. Foster parents are provided PRIDE training including information about preparing youth for transition and how to build independent living skills while the youth is in the foster home or facility.

Additional training topics for CFCIP statewide will include human trafficking, LGBTQ, cultural sensitivity, building leaders, and other topics requested by the field.

VII. MONTHLY CASEWORKER VISITS FORMULA GRANTS & STANDARDS FOR CASEWORKER VISITS

The North Dakota Foster Care Manual Chapter 624-05 reflects that monthly face to face case worker visits with all foster youth are required each and every full month that the youth is in care. It also notes that the majority of those visits must occur in the youth’s primary residence. The primary place of residence includes residential child care facilities, family care, therapeutic care, psychiatric care, residential treatment centers and the home of the parent/legal guardian of the child. Additionally, this will include all children placed out of state in a foster care setting. The noted manual chapter also states that the content of the monthly visitation must address the safety, well-being and permanence of the youth in care, and that the content of these conversations must be documented in the FRAME system. Specific examples of safety, well-being and permanence areas that must be addressed are noted.

North Dakota will continue to provide on-going training for Regional Supervisors, County Supervisors, County Directors, the Division of Juvenile Services, Tribal, and front line staff, emphasizing this requirement. The 95% visitation requirement continues to be specifically addressed with the foster care case workers in the Child Welfare Certification Program, through state-wide meetings, and through various educational conferences.

The monthly “Foster Care Case Load Visitation Report” will continue to be produced and disseminated to the field through the FRAME/COGNOS system by the state office on at least a quarterly basis. Individual agencies have access to these reports within FRAME/COGNOS at any given time if they want to check the status of case worker visitations more frequently. There continues to be an ability to look at visitation statistics from an individual county/child specific level and not just from a state or regional level. The “Foster Care Placement Report” will continue to be available within the FRAME/COGNOS system. The ability to run this “real time” report, gives all users the ability to determine where all foster youth are placed at any given time and collaborate more easily to ensure that monthly visitation are taking place for youth in foster care placement. This applies to youth placed at any level of care, both in state and out of state.

The following chart and legend will be utilized to report information pertaining to monthly case worker visitation:

REPORTING PERIOD TOTAL FOR ALL AGENCIES	
CASE COUNT	
MONTHS IN FOSTER CARE	
VISIT MONTHS	
IN HOME VISIT MONTHS	
VISIT MONTHS CASE COUNT	
VISITS IN HOME MONTHS	

LEGEND

- CASE COUNT = total number of cases in care at least one full calendar month
- MONTHS IN FOSTER CARE = number of full calendar months in care for cases included in the CASE COUNT
- VISIT MONTHS = total number of months in which a visit occurred (subset of the MONTHS IN FOSTER CARE)
- PERCENT = ratio of VISIT MONTHS CASE COUNT to the CASE COUNT
- VISITS IN HOME MONTHS = total number of months in which an in-home visit occurred, out of the cases included in the VISIT MONTHS CASE COUNT
- PERCENT = ratio of VISITS IN HOME MONTHS to the VISIT MONTHS

Monthly Case Worker Visitation Formula Grants:

Monthly case worker visitation formula grants have and likely will continue to be utilized to help agencies purchase laptop computers for their case workers. It is felt that enabling the workers to have a portable means to conduct and document the content of their case visitations will both save them time, and improve the quality of the visit/documentation. Some of the grant monies will also continue to be utilized to help support the University of North Dakota Children and Family Services Training Center (UND CFSTC). Specifically, the required four week Child Welfare Certification program will continue to focus on case worker training surrounding assessment and decision making concerning the safety, permanence and well-being of foster youth. Providing this equipment and training will help to recruit, more thoroughly train and prepare case workers, leading to increased retention of well trained and effective case workers.

Another use for formula grants being explored surrounds offsetting the costs for case worker visitation. It is felt that the actual case worker doing the monthly visitation, as opposed to a contracted worker doing the visitation, will be increased by helping offset the travel costs of the visit. It is felt that visitation by the actual assigned worker, who knows the case best, will also improve the assessment of safety, well-being and progress toward establishing permanence. North Dakota will use the MCV formula grant funds in accordance with regulations and will not supplant federal funds paid under Title IV-E.

VIII. ADOPTION INCENTIVE PAYMENTS

Adoption Incentive Funds will be used to fund North Dakota's special needs adoption collaborative, the AASK Program. Services provided by this program include recruitment, training and assessment of families, child preparation and placement, child-specific recruitment, and post placement follow up services. Should the state receive adoption incentive funds, consideration will be given to funneling those dollars to additional specific post adoption services; in particular, the provision of case management services in concert with the Wraparound practice model for those post finalization families who are in need of the service. Adoption incentive funds received by the state are currently being directed at a special focus of the AASK program in meeting a backlog of adoption assessment requests in the West Central region of the state. Because the future receipt of these funds is uncertain, it is difficult to build programs funded by the resource. Hence the funds are used for discrete projects.

IX. CHILD WELFARE WAIVER DEMONSTRATION ACTIVITIES

North Dakota does not have an approved child welfare demonstration project.

X. TARGETED PLANS WITHIN THE CFSP

A. Diligent Recruitment of Potential Foster and Adoptive Parents

Please refer to [ATTACHMENT B](#).

B. Health Care Oversight and Coordination Plan

Please refer to [ATTACHMENT C](#).

C. Disaster Plan

Please refer to [ATTACHMENT D](#).

D. Training Plan

Please refer to [ATTACHMENT E](#).

XI. FINANCIAL INFORMATION

Please refer to the CFS-101 documents found in [ATTACHMENT F](#).

In reference to the CFS-101, Part I, during FFY 2005 and FFY 2014 North Dakota did not spend any Title IV-B, Subpart 1 funds in child care, foster care maintenance, or adoption assistance payments.

In reference to the CFS-101, Part I, no state funds expended for foster care maintenance payments in FFY 2005 or FFY 2014 were used to match for title IV-B subpart 1 programs.

In reference to the CFS-101, Part II, for FFY 2015 it is projected North Dakota will spend a minimum of 20% of the Title IV-B, Subpart 2 PSSF grant funds in each of the four service categories: prevention and support services (family support), crisis intervention (family preservation), time limited family reunification services, and adoption promotion and support services.

State and local expenditure amounts for the title IV-B, Subpart 2 for FY 2011 for comparison with the State's 1992 base year amount can be found in the Maintenance of Efforts report located in [ATTACHMENT F](#).

ATTACHMENTS

- A. Organizational Chart
- B. Diligent Foster and Adoptive Parent Recruitment Plan
- C. Health Care Oversight Plan
- D. Disaster Plan
- E. Training Plan
- F. Financial Information
 - Maintenance of Effort
 - CFS-101, Part I
 - CFS-101, Parts II
 - CFS-101, Part III
- G. Assurance and Certifications
- H. Annual Reporting of Education and Training Vouchers Awarded



Assurances and Certifications

Title IV-B, Subpart 1 Assurances..... Page 3

Title IV-B, Subpart 2 Assurances..... Page 5

Title IV-E, Section 477 Certifications (CFCIP)..... Page 7

State Chief Executive Officer’s Certification for the
Educational Training Voucher Program and
Chafee Foster Care Independence Program..... Page 9



Attachment C - States

Title IV-B, subpart 1 Assurances

The assurances listed below are in 45 CFR 1357.15(c) and title IV-B, subpart 1, sections 422(b)(8), 422(b)(10), and 422 (b)(14) of the Social Security Act (Act). These assurances will remain in effect during the period of the current five-year Child and Family Services Plan (CFSP).

1. The State assures that it is operating, to the satisfaction of the Secretary:
 - a. A statewide information system from which can be readily determined the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care;
 - b. A case review system (as defined in section 475(5) of the Act) for each child receiving foster care under the supervision of the State/Tribe;
 - c. A service program designed to help children:
 - i. Where safe and appropriate, return to families from which they have been removed; or
 - ii. Be placed for adoption, with a legal guardian, or, if adoption or legal guardianship is determined not to be appropriate for a child, in some other planned, permanent living arrangement which may include a residential educational program; and
 - d. A preplacement preventative services program designed to help children at risk of foster care placement remain safely with their families.
2. The State assures that it has in effect policies and administrative and judicial procedures for children abandoned at or shortly after birth (including policies and procedures providing for legal representation of the children) which enable permanent decisions to be made expeditiously with respect to the placement of the children.
3. The State assures that it shall make effective use of cross-jurisdictional resources (including through contracts for the purchase of services), and shall eliminate legal barriers, to facilitate timely adoptive or permanent placements for waiting children.
4. The State assures that not more than 10 percent of the expenditures of the State with respect to activities funded from amounts provided under this subpart will be for administrative costs.
5. The State assures that it will participate in any evaluations the Secretary of HHS may require.
6. The State assures that it shall administer the Child and Family Services Plan in accordance with methods determined by the Secretary to be proper and efficient.



Effective Date and Official Signature

I hereby certify that the State complies with the requirements of the above assurances.

Certified by: Shandi Coe

Title: Director, Division of Children & Family Services

Agency: North Dakota Department of Human Services

Dated: 6/26/14

Reviewed by: _____

(ACF Regional Representative)

Dated: _____



Title IV-B, subpart 2 Assurances

The assurances listed below are in 45 CFR 1357.15(c) and title IV-B, subpart 2, sections 432(a)(2)(C), 432(a)(4), 432 (a)(5), 432(a)(7) and 432(a)(9) of the Social Security Act (Act). These assurances will remain in effect during the period of the current five-year CFSP.

1. The State assures that after the end of each of the first four fiscal years covered by a set of goals, it will perform an interim review of progress toward accomplishment of the goals, and on the basis of the interim review will revise the statement of goals in the plan, if necessary, to reflect changed circumstances.
2. The State assures that after the end of the last fiscal year covered by a set of goals, it will perform a final review of progress toward accomplishments of the goals, and on the basis of the final review:
 - a. Will prepare, transmit to the Secretary, and make available to the public a final report on progress toward accomplishment of the goals; and
 - b. Will develop (in consultation with the entities required to be consulted pursuant to subsection 432(b)) and add to the plan a statement of the goals intended to be accomplished by the end of the 5th succeeding fiscal year.
3. The State assures that it will annually prepare, furnish to the Secretary, and make available to the public a description (including separate descriptions with respect to family preservation services, community-based family support services, time limited family reunification services, and adoption promotion and support services) of:
 - a. The service programs to be made available under the plan in the immediately succeeding fiscal year;
 - b. The populations which the programs will serve; and
 - c. The geographic areas in the State in which the services will be available.
4. The State assures that it will perform the annual activities in the 432(a)(5)(A) in the first fiscal year under the plan, at the time the State submits its initial plan, and in each succeeding fiscal year, by the end of the third quarter of the immediately preceding fiscal year.
5. The State assures that Federal funds provided under subpart 2 will not be used to supplant Federal or non-Federal funds for existing services and activities which promote the purposes of subpart 2.
6. The State will furnish reports to the Secretary, at such times, in such format, and containing such information as the Secretary may require, that demonstrate the State's compliance with the prohibition contained in 432(a)(7)(A) of the Act.



7. The State assures that in administering and conducting service programs under the subpart 2 plan, the safety of the children to be served shall be of paramount concern.
8. The State assures that it will participate in any evaluations the Secretary of HHS may require.
9. The State assures that it shall administer the Child and Family Services Plan in accordance with methods determined by the Secretary to be proper and efficient.
10. The State assures that not more than 10 percent of expenditures under the plan for any fiscal year with respect to which the State is eligible for payment under section 434 of the Act for the fiscal year shall be for administrative costs, and that the remaining expenditures shall be for programs of family preservation services, community based support services, time limited family reunification services, and adoption promotion and support services, with significant portions of such expenditures for each such program.

Effective Date and Official Signature

I hereby certify that the State complies with the requirements of the above assurances.

Certified by: Sharon Oue

Title: Director, Division of Children & Family Services

Agency: North Dakota Department of Human Services

Dated: 6/26/14

Reviewed by: _____

(ACF Regional Representative)

Dated: _____



Title IV-E, Section 477 Certifications

Certifications for the Chafee Foster Care Independence Program

As Chief Executive Officer of the State of North Dakota, I certify that the State has in effect and is operating a statewide or area wide program pursuant to section 477(b) relating to the Foster Care Independence Program and that the following provisions to effectively implement the Chafee Foster Care Independence Program are in place:

1. The State will provide assistance and services to youth who have left foster care because they have attained 18 years of age, and have not attained 21 years of age [Section 477(b)(3)(A)];
2. Not more than 30 percent of the amounts paid to the State from its allotment for a fiscal year will be expended for room and board for youth who have left foster care because they have attained 18 years of age, and have not attained 21 years of age [Section 477(b)(3)(B)];
3. None of the amounts paid to the State from its allotment will be expended for room or board for any child who has not attained 18 years of age [Section 477(b)(3)(C)];
4. The State has consulted widely with public and private organizations in developing the plan and has given all interested members of the public at least 30 days to submit comments on the plan [Section 477(b)(3)(E)];
5. The State will make every effort to coordinate the State programs receiving funds provided from an allotment made to the State with other Federal, State and Tribal programs for youth (especially transitional living youth projects funded under part B of title III of the Juvenile Justice and Delinquency Prevention Act of 1974); abstinence education programs, local housing programs, programs for disabled youth (especially sheltered workshops), and school-to-work programs offered by high schools or local workforce agencies [Section 477(b)(3)(F)];
6. Adolescents participating in the program under this section will participate directly in designing their own program activities that prepare them for independent living and the adolescents will be required to accept personal responsibility for living up to their part of the program [Section 477(b)(3)(H)]; and
7. The State has established and will enforce standards and procedures to prevent fraud and abuse in the programs carried out under the plan [Section 477(b)(3)(I)].
8. The State will use training funds provided under the program of Federal payments for foster care and adoption assistance to provide training to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting adolescents preparing for independent living, and will, to the extent possible, coordinate such training with the independent living program conducted for adolescents [Section 477(b)(3)(D)];
9. The State has consulted each Tribe in the State about the programs to be carried out under the plan; there have been efforts to coordinate the programs with such Tribes; and benefits and services under the programs will be made available to Indian youth in the State/Tribe on the same basis as to other youth in the State; and that the State negotiates in good faith with any Indian tribe, tribal organization, or tribal consortium in the State



that does not receive an allotment under 477(j)(4) for a fiscal year and that requests to develop an agreement with the State to administer, supervise, or oversee the programs to be carried out under the plan with respect to the Indian children who are eligible for such programs and who are under the authority of the tribe, organization, or consortium and to receive from the State an appropriated portion of the State allotment for the cost of such administration, supervision or oversight [Section 477(b)(3)(G)];

10. The State will ensure that an adolescent participating in this program is provided with education about the importance of designating another individual to make health care treatment decisions on behalf of the adolescent if the adolescent becomes unable to participate in such decisions and the adolescent does not have or does not want, a relative who would otherwise be authorized under State law to make such decisions, whether a health care power of attorney, health care proxy or other similar document is recognized under State law, and how to execute such document if the adolescent wants to do so [Section 477(b)(3)(K)].



Signature of Chief Executive Officer

Date 6/17/14



**State Chief Executive
Officer's Certification for the
Education and Training
Voucher Program Chafee
Foster Care Independence
Program**

As Chief Executive Officer of the State of North Dakota, I certify that the State has in effect and is operating a statewide program relating to the Chafee Foster Care Independence Program:

1. The State will comply with the conditions specified in subsection 477(i).
2. The State has described methods it will use to:
 - ensure that the total amount of educational assistance to a youth under this and any other Federal assistance program does not exceed the total cost of attendance; and
 - avoid duplication of benefits under this and any other Federal assistance program, as defined in section 477(b)(3)(J).



Signature of Chief Executive Officer

6/17/14

Date



Annual Reporting of Education and Training Vouchers Awarded

Name of State: North Dakota

	Total ETVs Awarded	Number of New ETVs
<u>Final Number: 2011-2012 School Year</u> (July 1, 2011 to June 30, 2012)	28	15
<u>Final Number: 2012-2013 School Year</u> (July 1, 2012 to June 30, 2013)	38	19
2013-2014 School Year* (July 1, 2013 to June 30, 2014)	46	21

Comments: North Dakota updated the way we were collecting and tracking ETV awards, please see the noted changes above. In the past, North Dakota collected data by federal fiscal year (FFY). The academic year is fall, spring, summer, however if we calculated by FFY (Oct-Sept) awards were technically issued after the start of fall semester, so North Dakota reported annual data in the order of spring, summer, fall semesters to match FFY timeframe. In an effort to be consistent with the national data and the requirements of the future CFSP, we have adjusted our calculations and tracking efforts.

North Dakota received an increase in applications. State policy changes offered availability of funds to youth in foster care for less than twelve months. Youth who were in care for four, seven, or ten months are now applying for the ETV as long as they meet all other eligibility qualifications. This increased number of applicants is a great change for North Dakota.

*in some cases this might be an estimated number since the APSR is due June 30, 2014.