



ONSITE REVIEW FINAL REPORT

OCTOBER 2018

BADLANDS REGION

This report describes the results of the North Dakota Onsite Case Review (OCR) for the Badlands Human Services region, involving county social service agencies and the Division of Juvenile Services in Adams, Billings, Bowman, Dunn, Golden Valley, Hettinger, Slope and Stark counties and the portion of the Fort Berthold Indian Reservation located in Dunn county served by MHA Children and Family Services. The Onsite Review was held October 22-26, 2018.

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INTRODUCTION

Introduction

BACKGROUND

The ND Onsite Case Reviews are a state-regional-local collaborative effort designed to help ensure that quality services are provided to children and families through the states' child welfare system. The ND Department of Human Services – Division of Children and Family Services (CFS) administered the case reviews since 2003 and in 2017 entered into a contract with the Children and Family Services Training Center at UND (CFSTC) to manage the newly revised OCR process. The reviews of the state's child welfare program and practice identify strengths and challenges in practice, services, and systemic functioning, focusing on outcomes for children and families in the areas of safety, permanency, and well-being. The reviews work in tandem with other state and federal frameworks for system planning, reform, and effective implementation such as the Children and Family Services Plan and the Federal Child and Family Services Reviews (CFSR) and the state's continuous quality improvement (CQI) efforts. Reviews are held in each of the eight human service center regions of the state each year, thus ensuring a comprehensive assessment of child welfare practice in North Dakota.

The overarching purpose of the reviews is to support practice improvement to strengthen the state child welfare system's ability to achieve its' vision of "Safe Children, Strong Families". The ND OCR support the state's partnership with the Children's Bureau and the Federal CFSR Process. The case reviews conducted during 2018 are intended to provide baseline data for the Round 3 Federal CFSR Program Improvement Plan (PIP).

The OCR promotes the identification of case practices and systemic functioning which promote safety, permanency and well-being. Performance outcomes indicate areas of casework practice or systemic functioning which either support strong outcomes or require further CQI efforts.

MEASURING PERFORMANCE

The period under review (PUR) was October 1, 2017 – date the case was reviewed, which was conducted during the week of October 22, 2018. Case files and interviews were utilized for the case review portion of the Onsite Review week and feedback from seven Stakeholder groups was received. The following report provides a description of the items and systemic factors, the results for the outcomes and items, and a summary of the region's performance relative to the outcomes, items and systemic factors, and an initial analysis of the findings intended to inform ongoing CQI efforts. Comparison data from North Dakota's September 2016 Federal CFSR will serve as a reference point throughout this report.

It should be noted that while the results contained in this report are considered "final", 50% of the cases will undergo a secondary oversight review process by the Children's Bureau. Should this review result in a change to any rating, this report will be revised and re-issued.

CHILD AND FAMILY OUTCOMES: SAFETY, PERMANENCY, WELL-BEING

The federal Onsite Review Instrument (OSRI) is utilized as the review instrument to capture information regarding child and family outcomes for foster care and in-home services. The newly revised OSRI was finalized by the Administration of Children & Families in July 2014 and updated in January 2016. A total of 4 cases were reviewed utilizing the OSRI.

INTRODUCTION

The OSRI is divided into three sections: safety, permanency, and well-being. There are two safety outcomes, two permanency outcomes, and three well-being outcomes. Reviewers collect information on several items related to each of the outcomes through case file review and case related interviews.

The ratings for each item are combined to determine the rating for the outcome. The items are rated as *strength, area needing improvement (ANI), or not applicable (NA)*. Outcomes are rated as being *substantially achieved, partially achieved, not achieved, or not applicable*.

Agencies having a case reviewed received a copy of the entire OSRI for the applicable case(s).

STAKEHOLDER FEEDBACK: CFSR SYSTEMIC FACTORS

The systemic factors refer to seven systems operating within the state that have the capacity, if well-functioning, to promote child safety, permanency, and well-being outcomes. The systemic factors, comprising title IV-B and IV-E plan requirements, are: Statewide information system (i.e. FRAME, CCWIPS); Case review system (Child & Family Team Meetings, TPRs, etc.); Quality assurance system (CQI & OCR); Staff and Provider training (including foster-adoptive parents and facility staff); Service array and resource development, Agency responsiveness to the community; and Foster and Adoptive parent licensing, recruitment and retention.

The Children's Bureau determines whether a state is in substantial conformity with federal requirements for the seven systemic factors based on the level of functioning of each systemic factor across the state during the federal CFSR. During the Third Round Federal CFSR in September 2016, North Dakota was found to be in substantial conformity with the following two Systemic Factors: Statewide information system and Agency responsiveness to the community.

The ND OCR monitors ongoing functioning of the systemic factors through Stakeholder feedback during onsite case review week activities. Systemic Factors for which feedback was sought was determined through negotiations with the Children and Family Services Division of the North Dakota Department of Human Services. This report will provide a summary of the feedback received from stakeholders for the Southeast Human Service Center Region. Identifying information of individuals, families, and agencies has been replaced with a general description to respect the confidentiality of information shared.

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
December 27, 2018

BADLANDS 2018 ONSITE REVIEW SUMMARY DETAILS

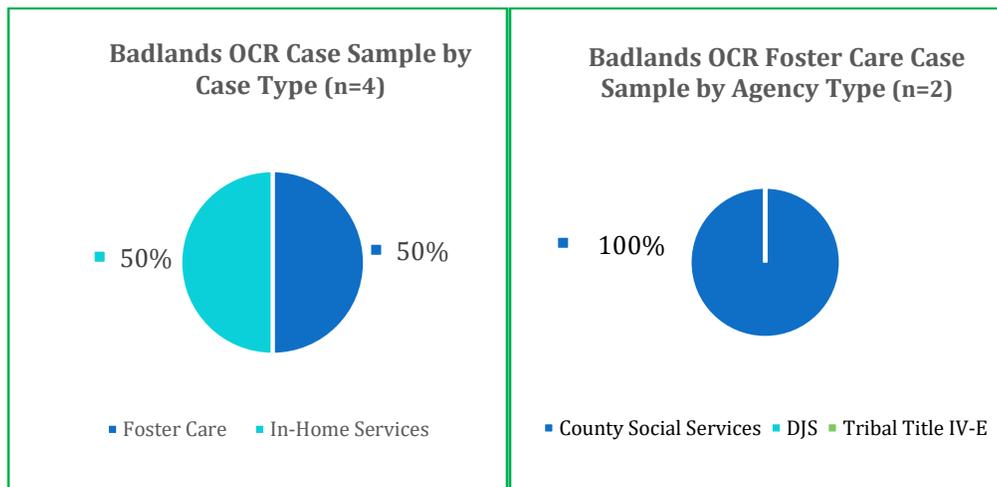
Badlands 2018 Onsite Review Summary Details

CASE FILES REVIEWS

Case Demographics

Cases are randomly selected to represent both foster care and in-home services cases. The review focuses on the activity in a case that occurs during the PUR and a rolling quarterly case sampling process is employed. Foster Care cases involved a target child in substitute care for over 24 hours or more. Foster Care services in this region are provided by county social services, the Division of Juvenile Services, and one tribal child welfare agency. In-Home Services cases involved a family receiving case management services for at least 45 days with no foster care episode greater than 24 hours during the entire PUR. In-Home Services subject to this review process are only provided by county social services in the region. For complete case sampling information, please see the ND OCR Procedures Manual available at <https://und.edu/centers/children-and-family-services-training-center/nd-ocr/overview.cfm>.

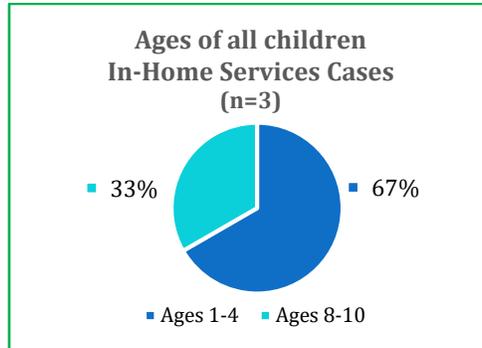
A review sample of two (2) Foster Care and two (2) In-Home Services cases were identified out of an overall sample of 102 Foster Care cases and 90 In-Home Services. Three (3) additional foster care and two (2) in-home services cases were identified as alternate cases in the event a case was eliminated during the review week. It should be noted that total case sample was to have involved six cases. However, due to a last-minute emergency, a reviewer was unable to attend, and an alternate could not be secured. Available OCR Workforce members had the capacity to review four cases, thus the third case of each case type became an alternate case. One In-Home services case was eliminated during the review week as interviews with all key case participants could not be secured. The first alternate case was then substituted in its place. Demographic data below reflects information for the fully-reviewed cases.



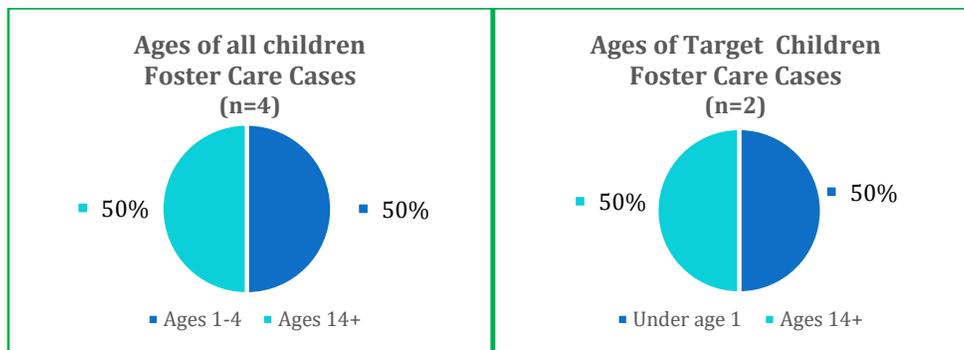
BADLANDS 2018 ONSITE REVIEW SUMMARY DETAILS

Ages of Children

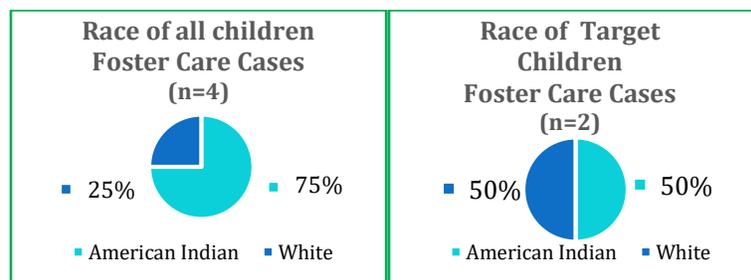
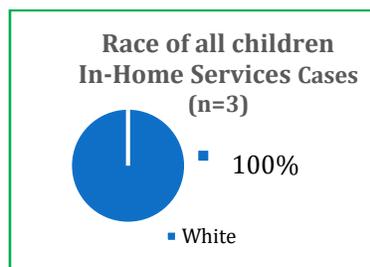
In-Home Services case involved a total of three (3) children. Their ages ranged from 0 years, 7 months to 9 years at the end of the PUR.



Four (4) children were involved in foster care cases: (2) target children and other siblings from their home of removal. Their ages ranged from 1 years, 8 months to 17 yrs. 11 months at the end of the PUR. Ages for the target children ranged from 1 year 8 months to 14 yrs. 11 months.



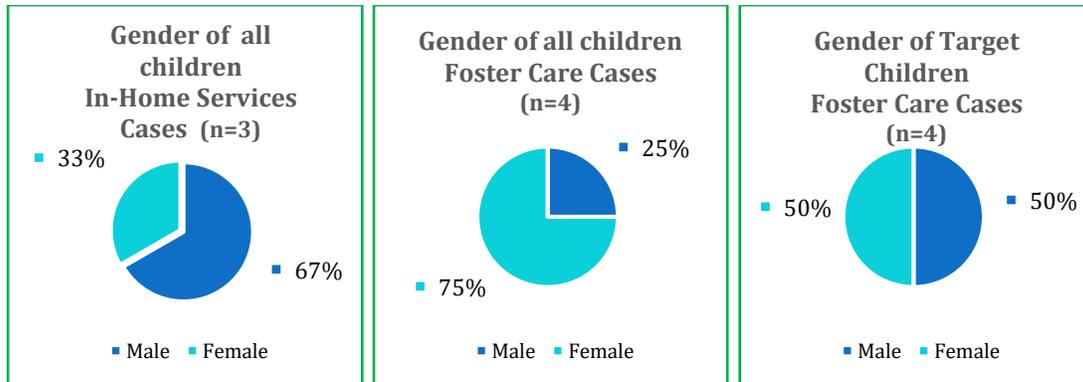
Race/Ethnicity of Children



BADLANDS 2018 ONSITE REVIEW SUMMARY DETAILS

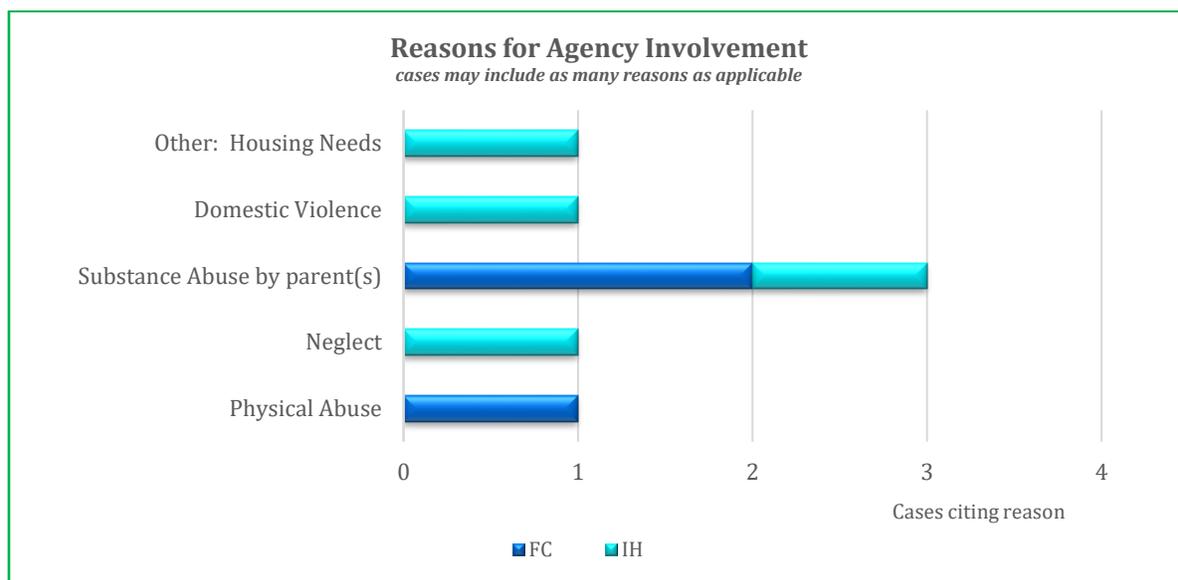
The ethnicity for all the children in all case types was “Non-Hispanic”.

Gender of Children



Reason for Agency Involvement

Reasons for agency involvement at the time the case was opened for services are identified through the course of the case review. As many reasons as were applicable to a case are selected. Substance Abuse by parents was the primary reason for agency involvement in foster care cases sampled. Additional reasons for agency involvement are noted in the chart below:



Case Related Interviews

One of the hallmarks of the ND OCR is case related interviews. These interviews are conducted with key case participants, those directly involved in the provision or receipt of services in each case reviewed. Interviews are held either in person at the review site or by telephone. During the Onsite Review, 24 interviews held for the 4 cases included:

- 1 child/youth
- 7 Parents

BADLANDS 2018 ONSITE REVIEW SUMMARY DETAILS

- 3 Mothers
- 4 Fathers
- 8 Case managers (FC, In-Home Services, CPS)
- 3 Foster Parents (non-relative foster parents)
- 5 “Other” providers (2 residential treatment provider staff, 1 Regional Representative for Institutional CPS involvement, 2 Guardians Ad Litem speaking to the target child’s perspective)

STAKEHOLDER FEEDBACK

In accordance with state policy 605-05-30-250, Stakeholder Feedback is sought from seven broad categories of child welfare partners and recipients of child welfare services:

- Agency Administrators
- Agency Case Managers
- Legal
- Community
- Parents of children in foster care
- Foster caregivers
- Youth

For this Onsite Review, feedback was received through the form of online surveys for five of the above groups and in-person meetings for two of the groups.

The collection of Stakeholder feedback questions was guided by the Stakeholder Interview Guide (SIG). The Stakeholder Interview Guide instrument and supplemental guidance are available on the Children’s Bureau website. Online surveys were developed and administered through the Qualtrics software program at the UND Children and Family Services Training Center. The survey window was the week prior to and the week of the Onsite Review. Agency Administrators, Case Managers, Legal and Community stakeholders were directly emailed the survey link along with two additional reminders. Local foster care agencies assisted by providing parents of children in foster care the opportunity to participate either through a website link, a QR scan code, or a paper version of the survey accompanied by a postage-paid envelope addressed to the OCR Manager.

Overall response rates for the surveys are as follows:

- Agency Administrator Stakeholder Feedback Online Survey
 - 11 participants received the survey and 6 completed responses were received
 - 55% response rate
- Agency Case Managers Stakeholder Feedback Online Survey
 - 20 participants received the survey and 9 completed responses were received
 - 45 % response rate
- Legal Stakeholder Feedback Online Survey
 - 23 participants received the survey and 3 completed responses were received
 - 13% response rate
- Community Stakeholder Feedback Online Survey
 - 39 participants received the survey via email and 4 completed responses were received
 - 10% response rate

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- Parent Stakeholder Online Survey
 - One survey was completed via the mail. *Unable to determine how many parents in the region were provided information about this opportunity to determine a response rate.*

In-person stakeholder meetings were held during the Onsite Review week. Participants were given the option to join in person or to call in a toll-free conference number. Participation at the meetings was as follows:

- Youth Stakeholder Meeting: 7 participants (*1 in-person and 6 via conference call*)
- Foster Caregiver Stakeholder Meeting: 4 participants (*all in person*)

CHILD AND FAMILY OUTCOMES

Child and Family Outcomes

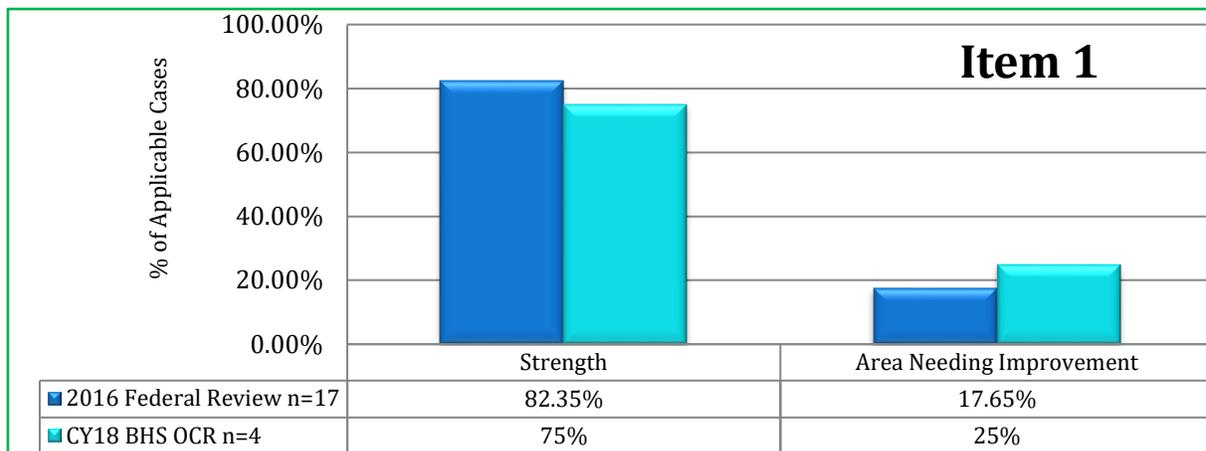
SAFETY PERFORMANCE

SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.

ITEM 1: TIMELINESS OF INITIATING INVESTIGATIONS OF REPORTS OF CHILD MALTREATMENT

Purpose of Assessment: To determine whether responses to all accepted child maltreatment reports received during the period under review were initiated and face-to-face contact with the child made, within the timeframes established by agency policies and State statute.

CY18 BHS OCR Results: Three cases received a strength for item 1 meaning that investigations (i.e. CPS Assessments) were initiated in a timely manner, and face-to-face contact with the alleged victim was made within the established time frame for half of the applicable cases.



Key strengths noted related to performance on Item 1:

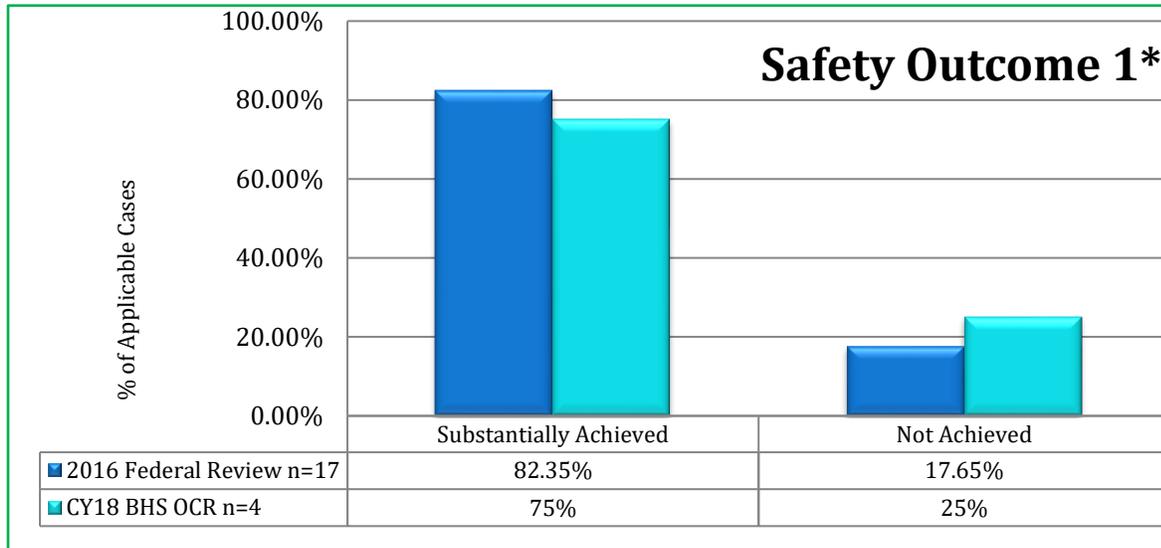
There were eleven accepted reports of child maltreatment involving seven alleged child victims received by the agencies during the PUR. Types of alleged maltreatment included: Neglect (not including medical neglect), Emotional Maltreatment, Domestic Violence in the child’s home, Inadequate Supervision, and Substance Abuse by parent(s). The priority category ascribed to each report was as follows: Category B (1) and Category C (10). The state’s established timeframes for category B and C cases requires initiation within 24 (b) or 72 (c) hours respectfully and face-to-face contact with the alleged victim(s) within 3 (b) or 14 (c) calendar days. The agency initiated their response timely in all reports received and the face-to-face contact with alleged victims occurred for most alleged victims within the calendar days required in state regulations, even when multiple reports were combined into one assessment. In several of the situations, the agency’s response exceeded state standards.

Key areas needing further examination related to performance on Item 1:

When rated an area needing improvement, face-to-face contact with all alleged victims did not occur timely. Factors contributing to these delays were not due to circumstances beyond the control of the agency. The review further identified that state policy does not specify timelines for face-to-face contact in Institutional CPS reports. The alleged child’s safety was assessed timely in this review; however, the region and state are encouraged to further examine state policy needs. Finally, the region is encouraged to examine practice related to searching all FRAME records for a client’s prior agency involvement as the family or individual may be in more than one case number.

CHILD AND FAMILY OUTCOMES

SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.



**" Partially Achieving" Safety Outcome 1 is not possible for this outcome, thus is not reflected in this table.*

Key strengths related to overall performance on Safety Outcome 1:

The agency's response to accepted reports of child maltreatment was observed to be a practice strength in three applicable cases. Initiation and face-to-face contact with all alleged victims met or exceeded timeframes established by state statutes for all Category B and C reports (those requiring an initiation response within either 24 or 72 hours). Furthermore, face-to-face contact with alleged victims was made well-within the timeframes required by the state for all reports.

Key areas needing further exploration related to performance on Safety Outcome 1:

This review identified that in some situations, face-to-face contact with all alleged victims in a family did not occur in a timely manner and in accordance with state statutes. Reasons for the delays were not evident nor due to circumstances beyond the control of the agency. Finally, the region and state are encouraged to further examine policy for timely face-to-face contact with alleged victims in Institutional Child Protection reports.

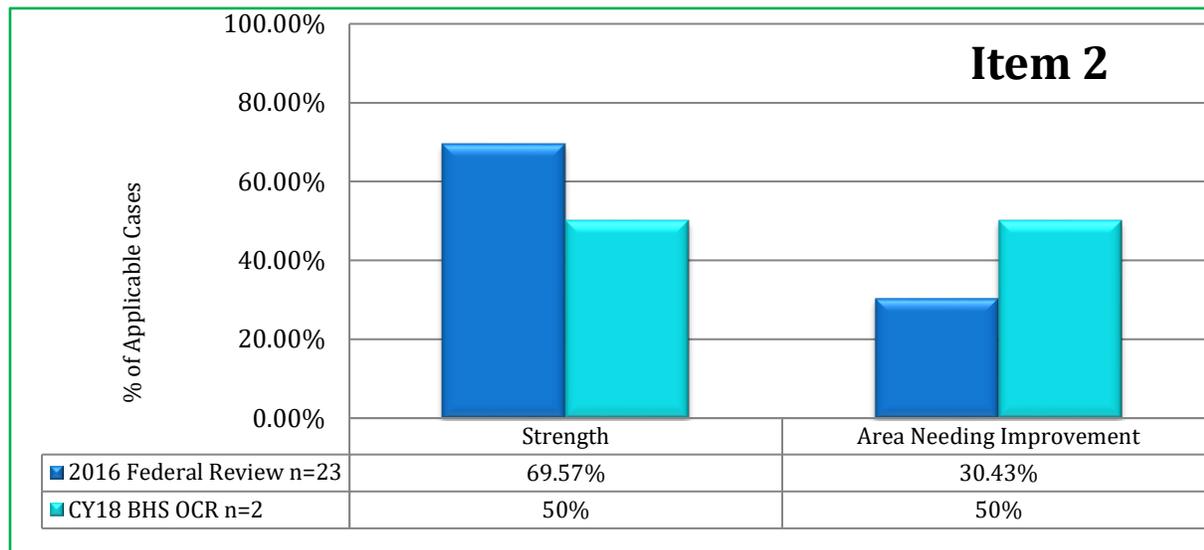
CHILD AND FAMILY OUTCOMES

SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

ITEM 2: SERVICES TO FAMILY TO PROTECT CHILD(REN) IN THE HOME AND PREVENT REMOVAL OR RE-ENTRY INTO FOSTER CARE

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification.

CY18 BHS OCR Results: One cases achieved a strength rating for this item indicating the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification whenever possible and appropriate.



Key strengths noted related to performance on Item 2:

In one situation applicable for assessment of this item, the agency made concerted efforts to provide or arrange for the family to protect the child and prevent their entry into foster care. The agency facilitated the family’s access to addiction assessments and treatments, including random QA testing and hair follicle testing for the child, and intensive in-home case management to address safety concerns related to parental substance abuse and unsafe conditions in the home.

Key areas needing further examination related to performance on Item 2:

When rated an area needing improvement, concerted efforts were not made to provide appropriate safety-related services to children remaining in the home despite safety concerns being present.

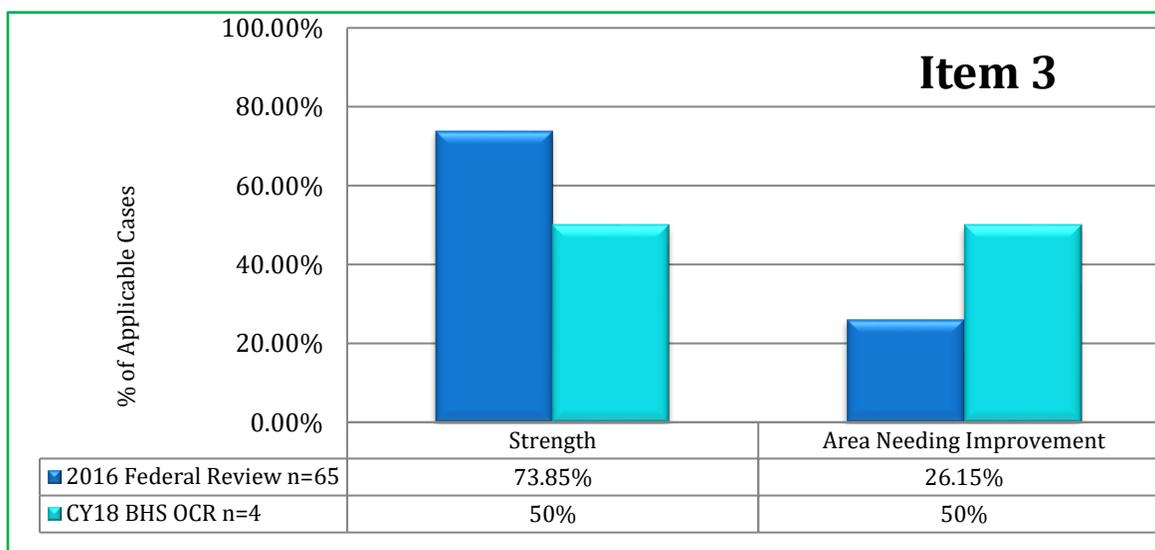
CHILD AND FAMILY OUTCOMES

SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

ITEM 3: RISK AND SAFETY ASSESSMENT AND MANAGEMENT

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess the risk and safety concerns relating to children in their own homes or while in foster care. All cases are applicable for the assessment of this item.

CY18 BHS OCR Results: Two cases were rated as a strength for Item 3 because the agency properly assessed all applicable individuals for risk and safety and appropriately addressed all identified concerns.



Key strengths noted related to performance on Item 3:

There were no maltreatment allegations about the family that were never formally reported or assessed through CPS nor were there any maltreatment allegations that received a 'no services required' finding despite evidence that would support a 'services required' finding in any of the 4 cases. The agency conducted an initial assessment that accurately assess all the risk and safety concerns in one applicable cases and ongoing assessments that accurately assessed all risk and safety concerns at critical case junctures occurred in two of the cases. When rated a strength, assessments were completed using formal and informal assessment efforts, including completion of the Family Assessment Instrument and monthly caseworker visits. When concerns were reported to the agency which did not rise to the level of child protection involvement, all safety or risk concerns were appropriately addressed through agency interventions. When safety concerns were present, the agency developed an appropriate safety plan with the family and continually monitored the safety plan as needed, including monitoring family engagement in safety-related services in one of the applicable cases. Additionally, there were no safety concerns pertaining to children in the family home that were not adequately or appropriately addressed by the agency in all applicable cases. Other practice strengths noted was that there were no concerns related to the safety of the target child in foster care during visitation with parent/family that was not adequately or appropriately addressed by the agency. Furthermore, there were no concerns for the target child's safety in the foster home or placement facility that were not adequately or appropriately addressed by the agency in both foster care cases.

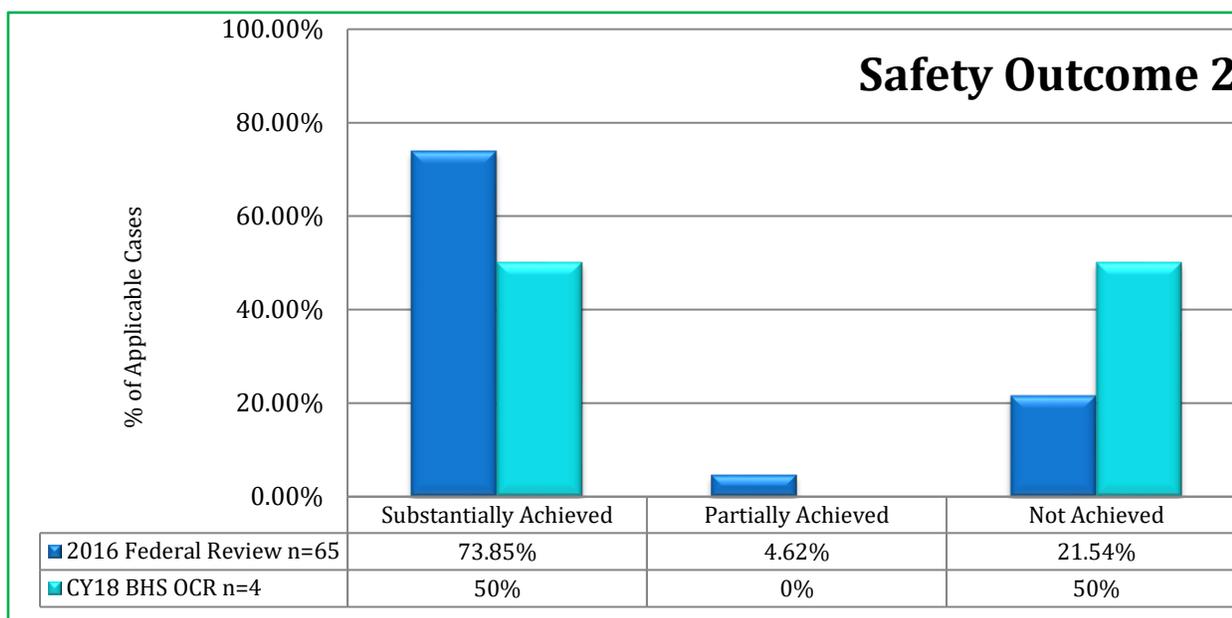
CHILD AND FAMILY OUTCOMES

Key areas needing further examination related to performance on Item 3:

When rated an area needing improvement, evidence that a thorough and comprehensive assessment of all safety and risk was conducted either initially or on an ongoing basis. The focus of service appeared to be on one aspect of the case. Areas for the region to consider when examining practice relative to Item 3 include: ensuring that the safety and risk for all children in the home is assessed and addressed, ensuring that safety and risk assessments are comprehensive and accurate, and practice related to ensuring a complete and thorough background check in the state's FRAME system. This review also identified challenges agencies experience to ensure all standards are met in situations when cases are opened for services but are addressing 'information and referral' (I&R) needs.

CHILD AND FAMILY OUTCOMES

SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



Key strengths related to performance on Safety Outcome 2:

Safety services to the family were provided immediately to remediate safety concerns and support the children remaining in the home. Evidence of strong initial and/or ongoing assessment of safety/risk and safety planning to address safety concerns was evident in some cases. There was a thorough and appropriate consideration of the individual concerns existing within the family, caseworker’s use of formal and informal assessments through collateral contacts, visitations with the target child, and foster parents/providers as means to accomplish safety/risk assessments. There were no safety or risk concerns to the target child in foster care during visitation or in their placement setting that were noted during this review.

Key areas needing further examination related to performance on Safety Outcome 2:

Key areas for further examination noted in the review involve assuring safety and risk assessments are comprehensive, accurate and address the needs of all children in the family. Insufficient contact to ensure safety/risk was adequately assessed or addressed in some cases was found to impact ratings for this outcome. This review also identified challenges ensuring all standards are met in situations when cases are opened for services but are addressing ‘information and referral’ (I&R) needs.

CHILD AND FAMILY OUTCOMES

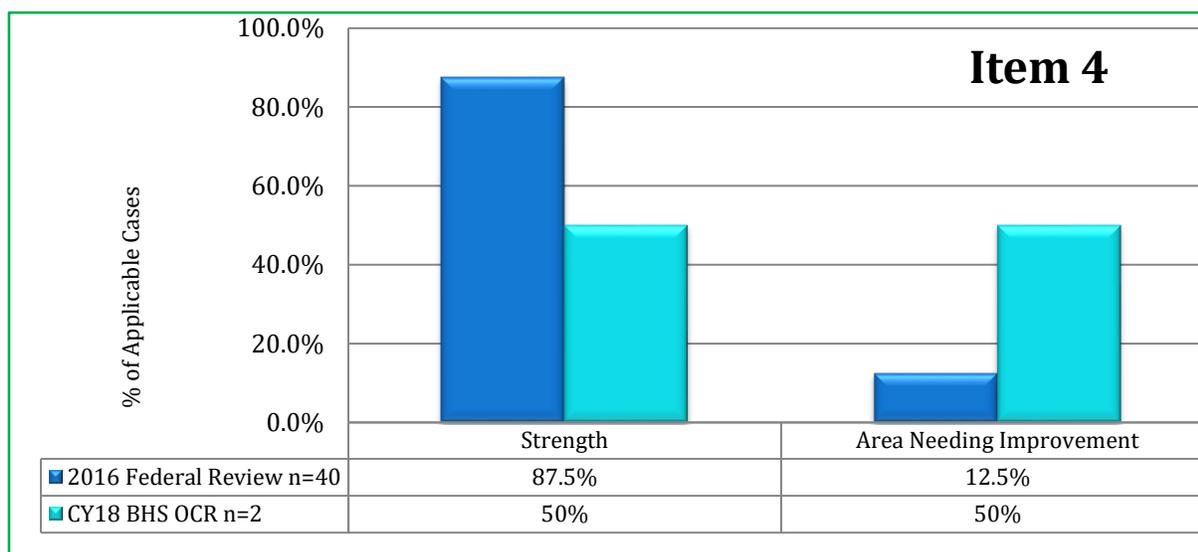
PERMANENCY PERFORMANCE

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS.

ITEM 4: STABILITY OF FOSTER CARE PLACEMENT

Purpose of Assessment: To determine whether the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the PUR were in the best interests of the child and consistent with achieving the child’s permanency goals.

CY18 BHS OCR Results: One case received a strength for item 4. In this case, the child either remained in a stable placement throughout the PUR or until they were discharged from foster care or had another placement which better met the child’s case goals.



Key strengths noted related to performance on Item 4:

One foster youth had only one placement setting during the PUR. Results indicate the agency made concerted efforts to provide appropriate services and resources to facilitate placement stability. Furthermore, the most recent placement setting for the foster youth was stable at the time of the review. A discharge from care was being planned for this youth and support provided to the placement resource (i.e. frequent contact and meeting foster parent needs) throughout the transition by the assigned case manager was found to be a factor contributing to the stability of the placement setting.

Key areas needing further examination related to performance on Item 4:

When rated an area needing improvement, the placement changes experienced by the target youth were not planned by the agency in an effort to achieve the child’s case goal. Three placement settings were noted during the PUR and there was no indication the current placement setting was stable. Furthermore, abrupt placement changes with no pre-planning or closure for the child or caregivers impacted the ratings for this item.

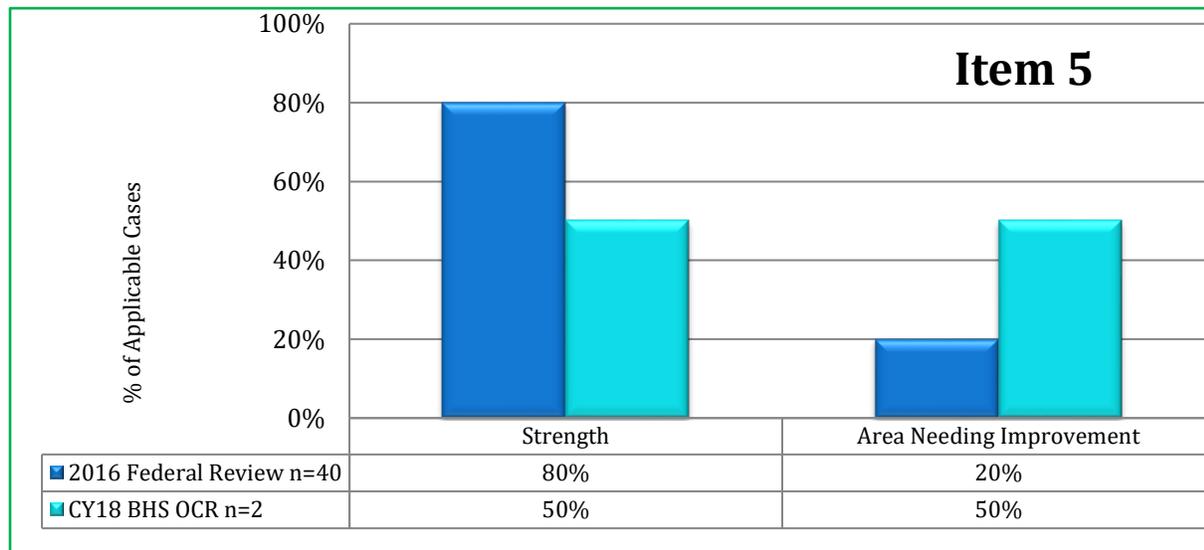
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS.

ITEM 5: PERMANENCY GOAL FOR CHILD

Purpose of Assessment: To determine whether appropriate permanency goals were established for the child in a timely manner.

CY18 BHS OCR Results: One case received a strength for Item 5 indicating that the permanency goal was appropriate for the child and was established in a timely manner.



Key strengths noted related to performance on Item 5:

In the foster care cases reviewed, one primary permanency goal was assessed as the permanency goals in effect during the PUR: Reunification (2). No concurrent goals were in effect for these cases during the PUR. Reviewers noted that in all cases, the target child’s permanency goals were specified in the case record. Permanency goals in effect during the PUR were established in a timely manner. Furthermore, for the one case receiving a strength rating, the current case goal in effect during the PUR were appropriate to the child’s needs for permanency and to the circumstances of the case. Neither foster youth had been in foster care long enough for ASFA timelines concerning the filing of a petition for termination of parental rights or documenting compelling reasons not to file to be applicable.

Key areas needing further examination related to performance on Item 5:

The establishment of concurrent goals based on the circumstances of the case was found to be the presenting concern when rated an area needing improvement. The singular goal currently established was not found to accurately reflect realistic permanency options. The region is encouraged to further examine efforts related to the effective use of concurrent planning to strengthen outcomes in this area.

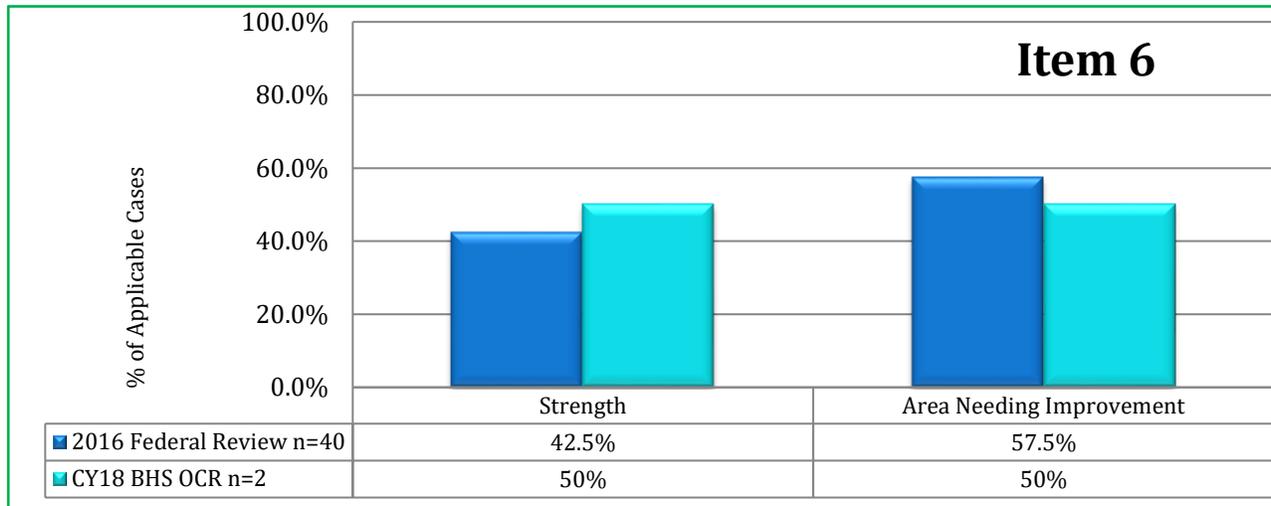
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS.

ITEM 6: ACHIEVING REUNIFICATION, GUARDIANSHIP, ADOPTION, OR OTHER PLANNED PERMANENT LIVING ARRANGEMENT

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made, or are being made, by the agency and courts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement.

CY18 BHS OCR Results: One case received a strength for item 6 because the agency and courts made concerted efforts to achieve the permanency goal in a timely manner.



Key strengths noted related to performance on Item 6:

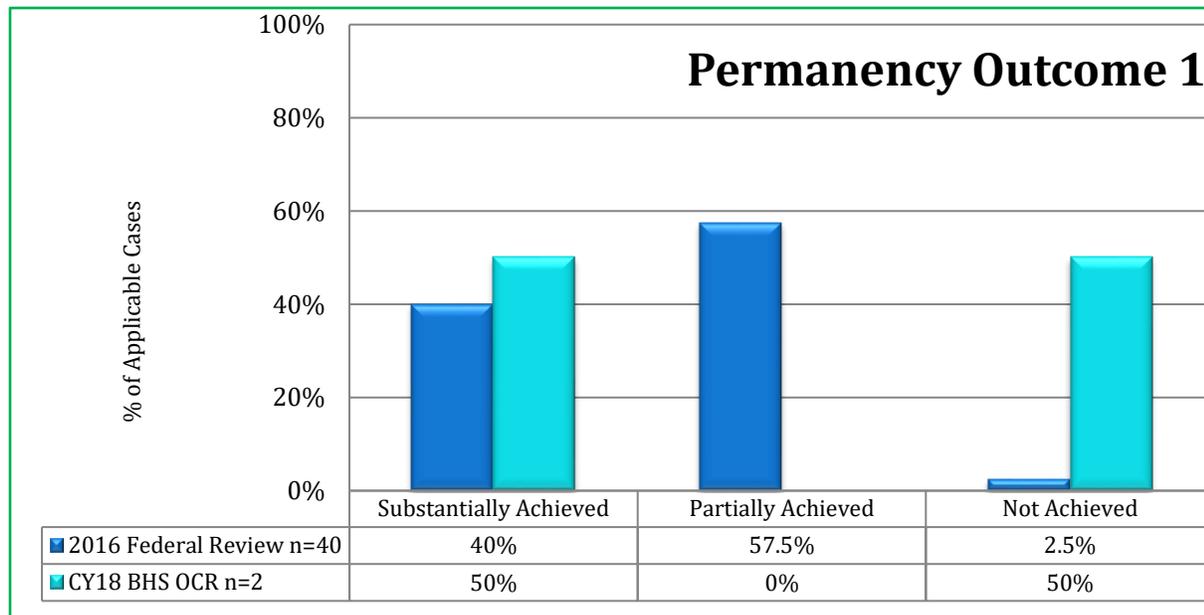
Timely achievement of permanency through reunification was realized for the one case receiving a strength rating. Permanency for this young foster child was realized in seven months. Agency efforts contributing the positive outcomes in this case were found to be accurate and timely assessments relative to the child and family's needs, timely provision of appropriate services to address the identified needs such as paternity testing and the involvement of the non-custodial parent. Court efforts contributing to the strength ratings in these items include holding regular hearings. Active and consistent support and monitoring following the reunification by the agency and court for approximately two months was also noted to support this positive outcome.

Key areas needing further examination related to performance on Item 6:

Timely achievement of permanency through reunification was not determined to be likely in the one case rated an area needing improvement. The region is encouraged to explore how agency efforts to provide an accurate and comprehensive assessment of needs and services and ensuring appropriate permanency goals correlates to improved outcomes in this area.

CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS.



Key strengths related to performance on Permanency Outcome 1:

Strong performance in this outcome was noted in one of the two cases reviewed. The review revealed that one target child experienced placement stability in their placement settings, the current permanency goals for this target child was appropriate and achieved permanency in a timely manner. Concerted efforts by the agency and courts to ensure the child experienced permanency and stability were noted.

Key areas needing further examination related to performance on Permanency Outcome 1:

Performance for one case in this review reflected struggles to ensure placement stability, appropriate permanency goals, and timely permanency. Further examination relative to this item is needed to ascertain if deeper challenges exist within the region and inform targeted improvement efforts.

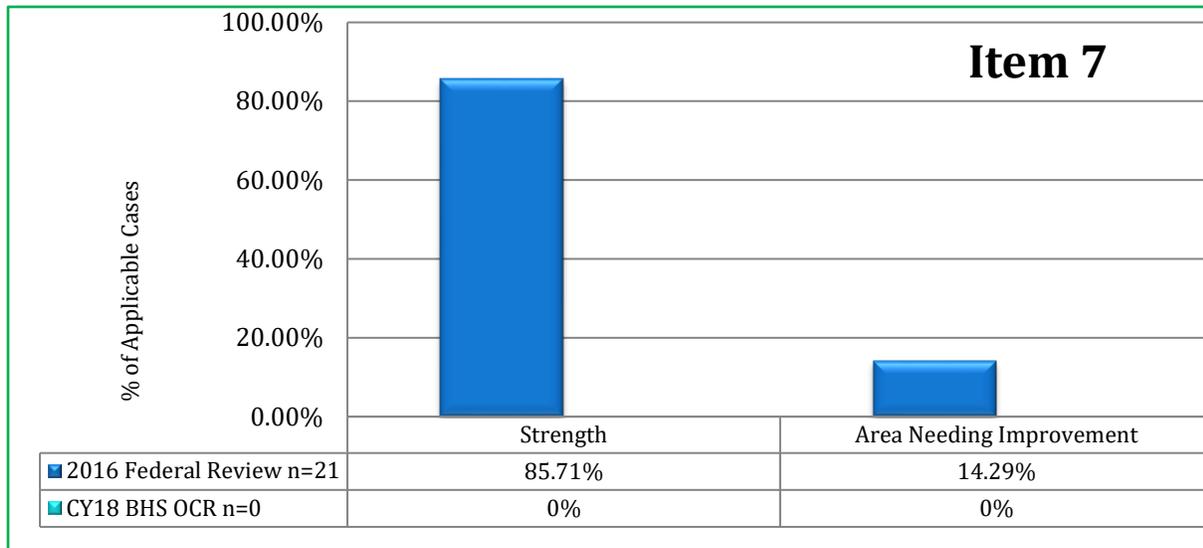
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

ITEM 7: PLACEMENT WITH SIBLINGS

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

CY18 BHS OCR Results: There were no applicable cases for Item 7.



Key strengths related to performance on Item 7:

There were no applicable cases during this review.

Key areas needing further examination related to performance on Item 7:

There were no applicable cases during this review.

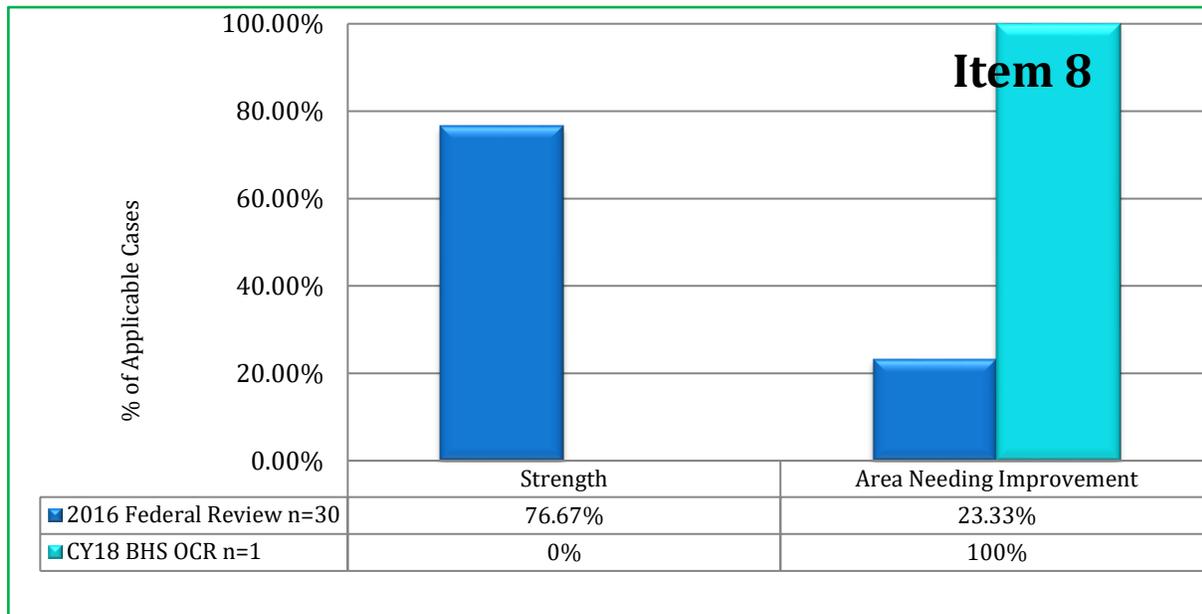
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

ITEM 8: VISITING WITH PARENTS* AND SIBLINGS IN FOSTER CARE

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members.

CY18 BHS OCR Results: No applicable case was rated as a strength for Item 8.



Key strengths related to performance on Item 8:

There was only one case applicable for assessment of this item and it although the item was not rated a strength, agency efforts to facilitate regular and consistent visitation between the target youth and one of the parents was noted. This occurred through quality visits occurring less than once a week, but at least twice a month throughout the PUR. There were no other siblings in foster care applicable to this situation, thus that portion of this item was not applicable.

Key areas needing further examination related to performance on Item 8:

Contributing the overall rating for this item was that the agency did not facilitate visits between the target youth and one of their parents during the PUR. There was no indication or documentation that visits between these two would not be in the child’s best interest.

*For the purposes of the OSRI Items 8 & 11, “Parents” are defined as the parent from whom the child was removed and with whom the agency is working toward reunification.

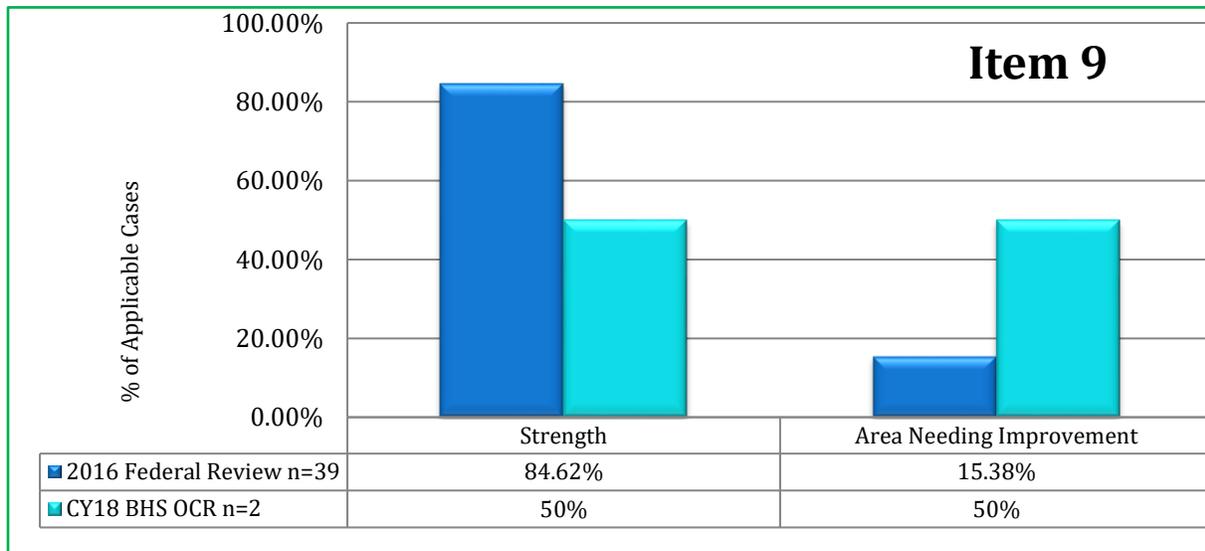
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

ITEM 9: PRESERVING CONNECTIONS

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made to maintain the child’s connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends.

CY18 BHS OCR Results: One case received a strength for item 9 because the agency made concerted efforts to maintain the child’s significant prior connections



Key strengths related to performance on Item 9:

Concerted efforts were made to maintain the child’s important connections (for example, neighborhood, community, faith, language, extended family members including siblings who are not in foster care, Tribe, school, and/or friends) in the two applicable cases. Maintaining the target child in the same school and visits with siblings not in foster care and extended family were some of the methods noted. Sufficient inquiry was conducted to determine whether a child may be a member of, or eligible for membership in, a federally recognized Indian Tribe in all cases. ICWA did apply in one situation and in that case, the agency was found to have provided the Tribe timely notification of its right to intervene.

Key areas needing further examination related to performance on Item 9:

When rated an area needing improvement, the review did not find evidence that concerted efforts were made to place the target youth in accordance with the placement preferences of the Indian Child Welfare Act when the target youth first entered foster care. Workforce challenges may be a factor within this challenge, yet further examination is needed to fully understand the context and extent of any practice challenges related to an agency’s ability to place children eligible for ICWA within the Act’s placement preferences.

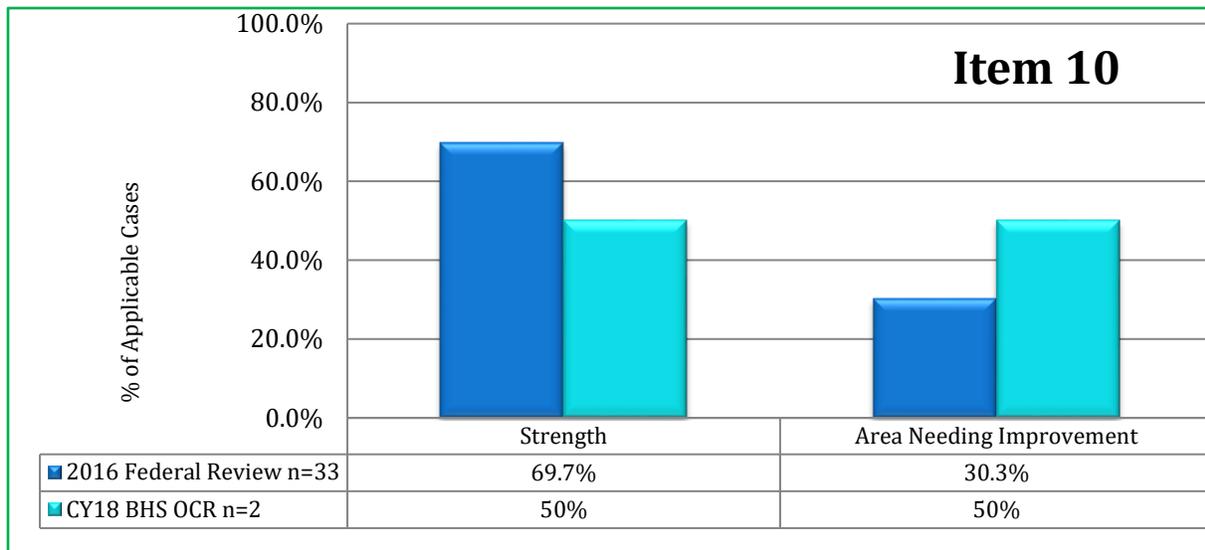
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

ITEM 10: RELATIVE PLACEMENT

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made to place the child with maternal or paternal relatives when appropriate.

CY18 BHS OCR Results: One case was rated as a strength for Item 10. In this case, the agency made concerted efforts to identify and place the child with appropriate relatives.



Key strengths related to performance on Item 10:

Although no target children’s current or most recent placement was with relatives, the reviewed revealed that agency made efforts to consider maternal and paternal relatives prior to the PUR in the one case rated a strength. It was appropriate that no ongoing search took place during the PUR because the target youth was successfully reunified with a parent shortly after the onset of the PUR.

Key areas needing further examination related to performance on Item 10:

When rated an area needing improvement, the agency did not make concerted efforts to identify and assess all maternal or any paternal relatives as placement options during the PUR. Further examination relative to this item is needed to ascertain if deeper challenges exist within the region and inform targeted improvement efforts.

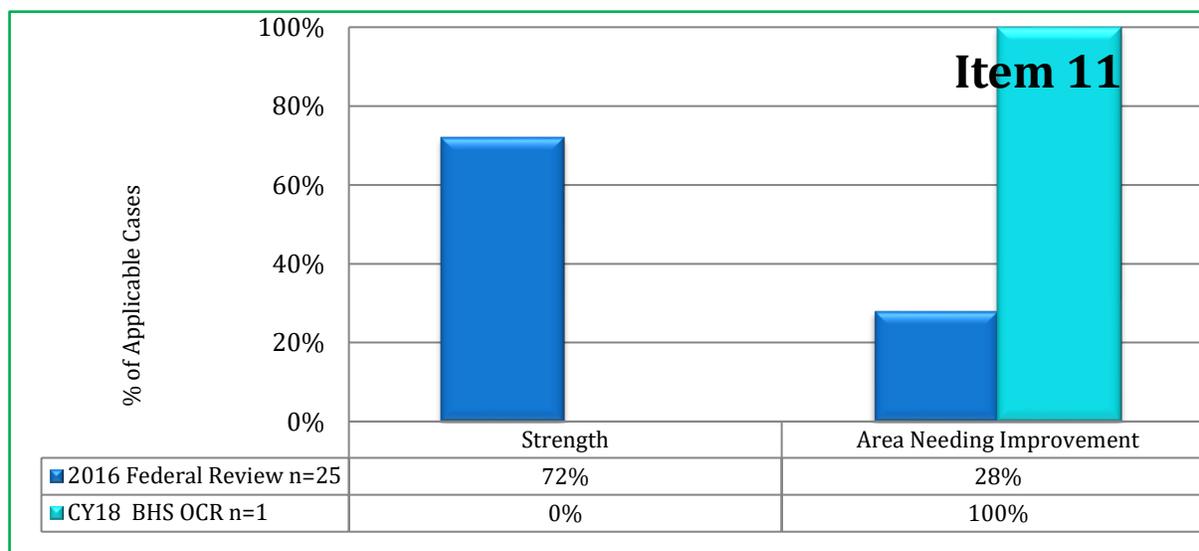
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

ITEM 11: RELATIONSHIP OF CHILD IN CARE WITH PARENTS*

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging visitation.

CY18 BHS OCR Results: No applicable case was rated as a strength for Item 11.



Key strengths related to performance on Item 11:

Evidence of key strengths relative to this item was not noted in the one case applicable during this review.

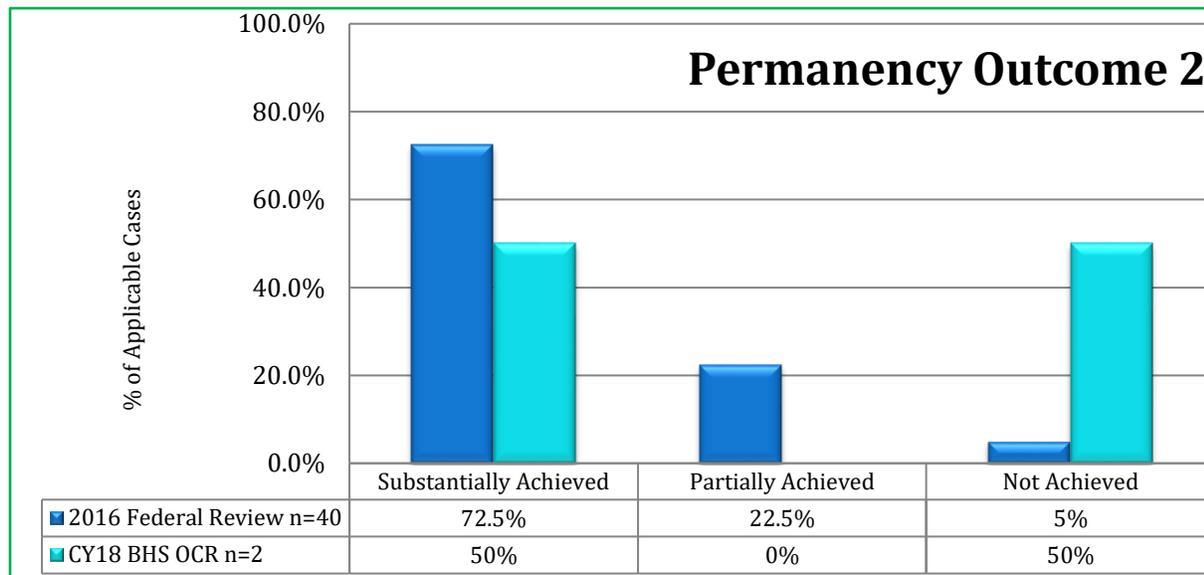
Key areas needing further examination related to performance on Item 11:

Concerted efforts to support or strengthen the parent-child relationship through opportunities other than visits was not observed in the one applicable case. Further examination is needed to ascertain if deeper challenges exist within the region and inform targeted improvement efforts. Barriers surrounding father engagement and distance between target youth’s placement and family residence may be areas to address when reviewing performance impacting this item.

*For the purposes of the OSRI Items 8 & 11, “Parents” are defined as the parent from whom the child was removed and with whom the agency is working toward reunification.

CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 2*: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.



Key strengths related to performance on Permanency Outcome 2:

Concerted efforts to preserve the continuity of family relationships and connections throughout the PUR were noted during this review. Agency efforts also focused on encouraging and supporting the target child’s need to maintain important connections, particularly with school, peers, culture, extended family, and siblings not in foster care during the PUR. In all applicable cases, efforts to determine the child’s membership in, or eligibility for membership in, a federally recognized Indian Tribe were evident. When applicable, timely notification was provided to the Tribe.

Key areas needing further examination related to performance on Permanency Outcome 2:

Concerted efforts of the agency to arrange for visits with all parents, supporting parent-child relationships through additional opportunities (medical appointments, school or community events, etc.), and ensuring comprehensive and thorough relative searches offer practice areas worthy of further examination within the region.

*For the purposes of the OSRI Permanency Outcome 2, “Parents” are defined as the parent from whom the child was removed and with whom the agency is working toward reunification for items 8 and 11.

CHILD AND FAMILY OUTCOMES

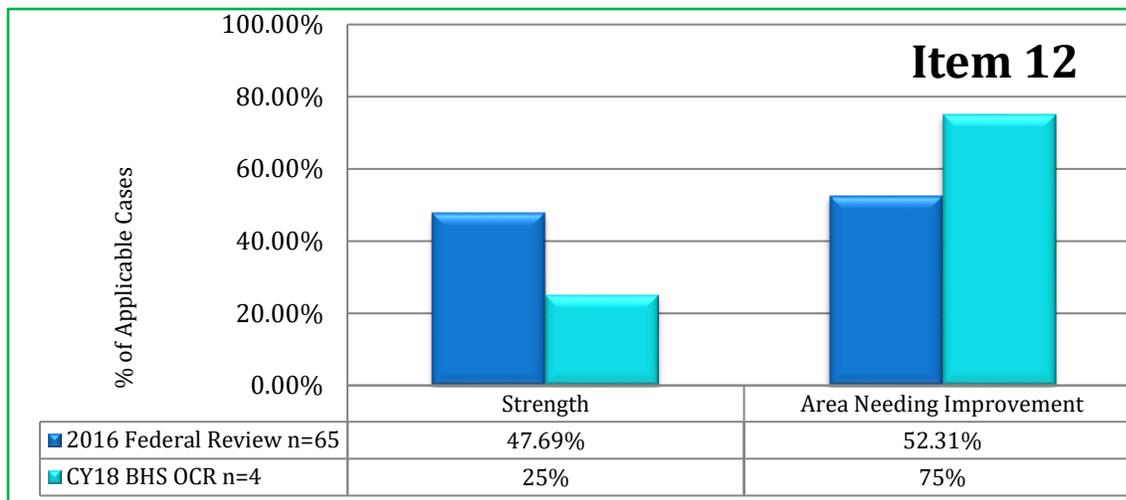
WELL-BEING PERFORMANCE

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 12: NEEDS AND SERVICES OF CHILD, PARENTS*, AND FOSTER PARENTS

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess the needs of children, parents, and foster parents (both at the child’s entry foster care [if the child entered during the PUR] or on an ongoing basis), to identify the services necessary to achieve case goals, and adequately address the issues relevant to the agency’s involvement with the family, and provide the appropriate services. All cases are applicable for assessment of this item, with the clarification that sub-item 12C is never applicable to in-home services cases.

CY18 BHS OCR Results: One applicable case was rated as a strength for Item 12 because the agency made concerted efforts to accurately and comprehensively assess the needs of the child, parents, and foster parents and provided the appropriate services to meet the needs of all the family.



Key strengths related to performance on Item 12:

When this item was rated a strength, the agency made concerted efforts to assess and address the child’s, parent’s and foster parent’s needs and ensure they received services necessary to achieve the case goals and adequately address the issues relevant to agency involvement. Efforts included the use of ongoing formal and informal assessments, including use of the Family Assessment Instrument and regular caseworker visits. Services to children, parents and foster parents were appropriately matched to the identified needs in many cases.

Key areas needing further examination related to performance on Item 12:

Predominant challenges noted when sub-items were rated an area needing improvement involved the agency’s efforts to accurately and comprehensively assess the needs of children and parents on an ongoing basis as well as to provide appropriate services to meet the identified needs to parents. Challenge was also noted in the agency’s ability to fully assess and address the needs of all foster parents. Challenges were noted in both foster care and in-home services in this item and further exploration is warranted to better understand specific barriers to stronger performance for this item.

*For the purposes of the OSRI, “Parents” are defined more broadly for Items 12B, 13, 15 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.

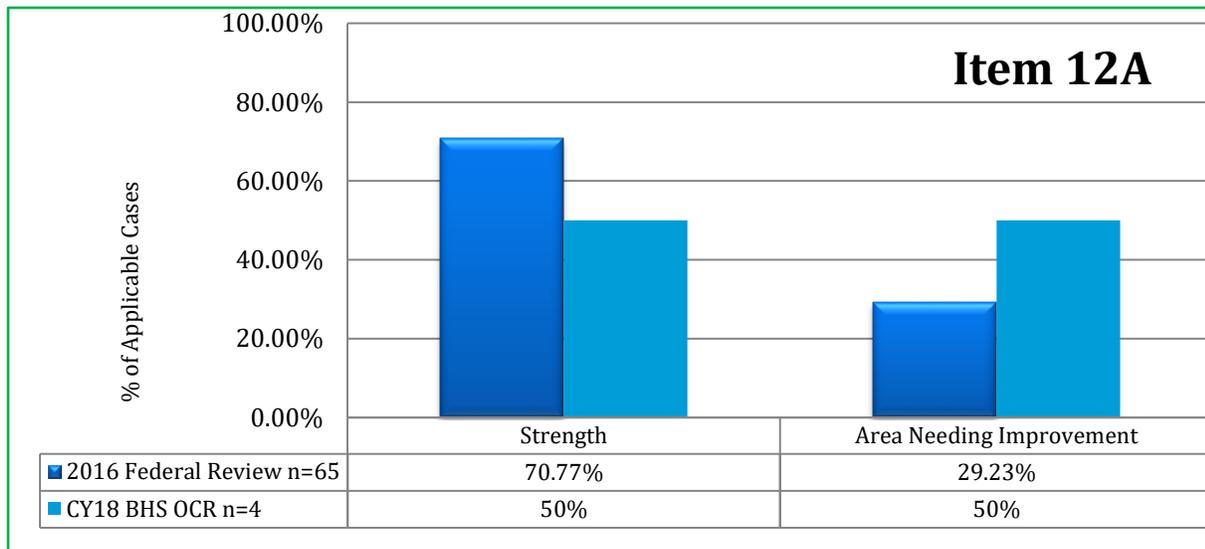
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 12A: NEEDS AND SERVICES TO CHILD

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess the needs of children (both at the child’s entry foster care [if the child entered during the PUR] or on an ongoing basis), to identify the services necessary to achieve case goals, and adequately address the issues identified. All cases are applicable for assessment of this item.

CY18 BHS OCR Results: Two cases were rated as a strength for Item 12A because the agency properly assessed and addressed the needs for the applicable children during the PUR.



Key strengths related to performance on Item 12A:

Assessing and addressing the target children’s needs was rated as strength in two cases on this sub-item. When a strength, evidence showed that the agency was consistently assessing the target child’s needs and ensuring services were provided to address needs. Services were appropriately matched to identified needs, such as early intervention services to address social skill development and services to strengthen the relationship between non-custodial/non-residential parents. Target children over the age of 14 had their Independent Living skills assessed and appropriate services were provided, primarily by the residential care facility. There were no foster youth aged 16 years or older, so the presence of Independent Living Plans in the case files was not applicable for this review.

Key Areas needing further examination related to performance on Item 12A:

When rated an area needing improvement, indication that the agency conducted a comprehensive and accurate ongoing assessment of the all children’s needs was not evident. Furthermore, the agency did not make consistent efforts to ensure needed services were being provided. Challenges were noted for both case types (foster care and in-home services) within this sub-item.

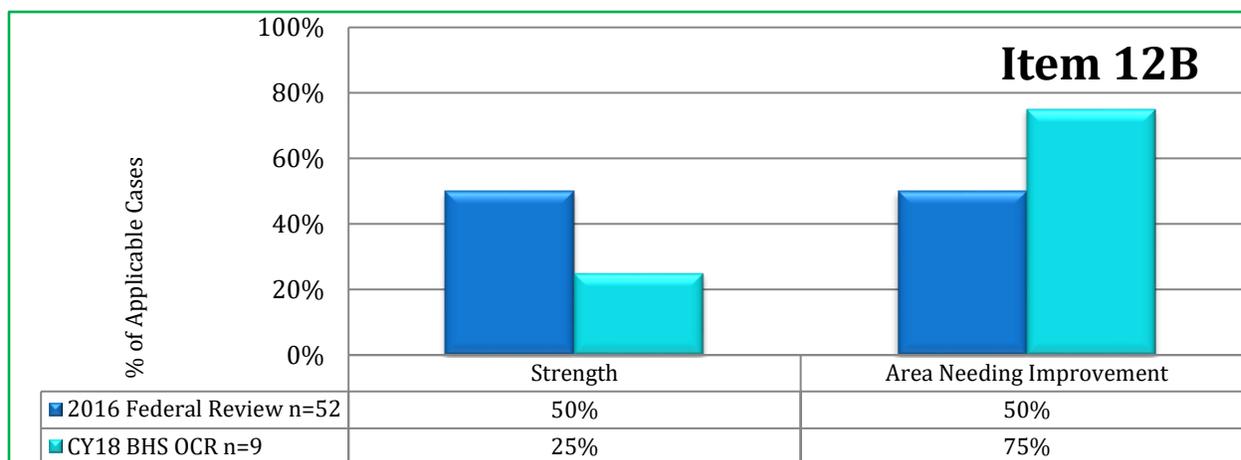
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 12B: NEEDS AND SERVICES TO PARENTS

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess the needs of applicable parents, identify the services necessary to achieve case goals, and adequately address the issues identified.

CY18 BHS OCR Results: One case received a strength for item 12B indicating the agency made concerted efforts to assess the needs of applicable parents and provide services to address identified needs and accomplish case goals.



Key strengths related to performance on Item 12B:

The agency conducted a comprehensive assessment that accurately assessed the parent’s needs and provided appropriate services to address identified needs in one case. When rated a strength, evidence that needs were assessed through formal and informal methods were seen. Services such as parenting education through case management services and referrals to WIC and food stamps and Medicaid were provided to address identified needs.

Key Areas needing further examination related to performance on Item 12B:

When this sub-item was rated an area needing improvement, challenges were noted in accurate and comprehensive assessments of the needs of mothers (n=1) and fathers (n=2), despite their whereabouts being known to the agency. The review also did not find evidence that, during the entire PUR, appropriate services were provided to address all identified needs for mothers (n=2) and fathers (n=2).

*For the purposes of the OSRI, “Parents” are defined more broadly for Items 12B, 13, 15 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.

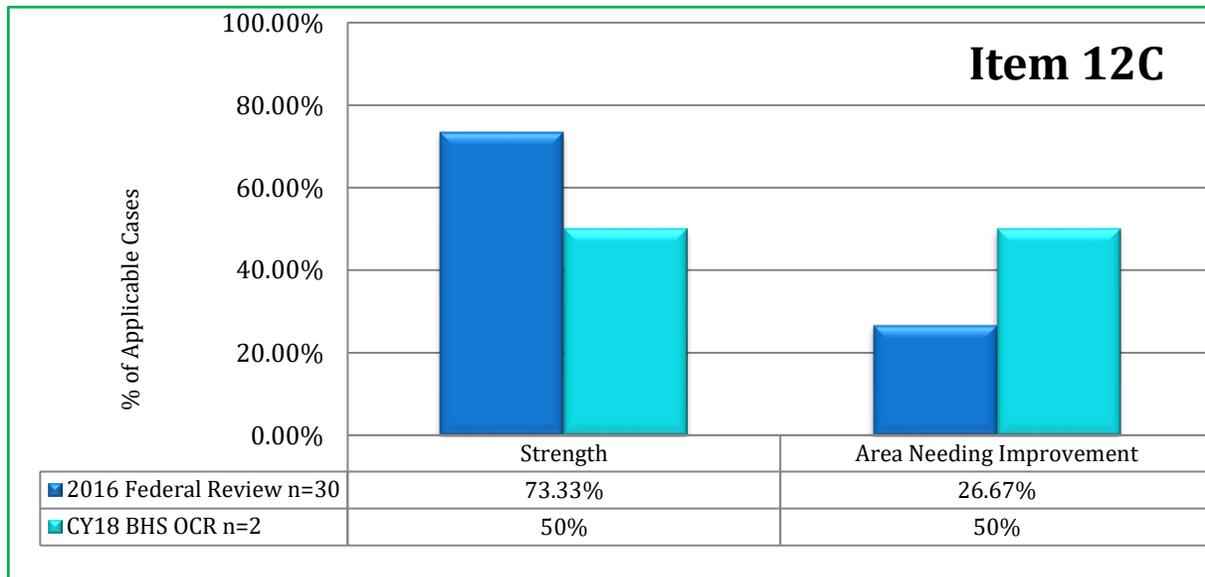
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 12C: NEEDS AND SERVICES OF FOSTER PARENTS

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess the needs foster parents (relative, licensed, pre-adopt families) to identify the services necessary to provide care for the target child, and adequately address the issues identified.

CY18 BHS OCR Results: One case was rated a strength indicating the agency made concerted efforts to assess the needs of foster parents to support their ability to care for the target child and provided appropriate services for the identified needs.



Key strengths related to performance on Item 12C:

Foster Parents needs were assessed by the agency and appropriate services provided to address the identified needs throughout the PUR in one case. Regular and supportive communication and visits by the target child’s case manager were among the agency efforts attributed to the strength performance when assessing the needs and providing services to foster parents. Agency efforts to assist the foster family support the child reunify successfully with her parent was the primary need identified.

Key areas needing further examination related to performance on Item 12C:

When this sub-item was rated an area needing improvement, the agency did not adequately assess or address the needs of the foster family. Caseworker turnover and lack of clear communication amongst team members may be contributing factors for the region to examine as practice related to this sub-item is reviewed.

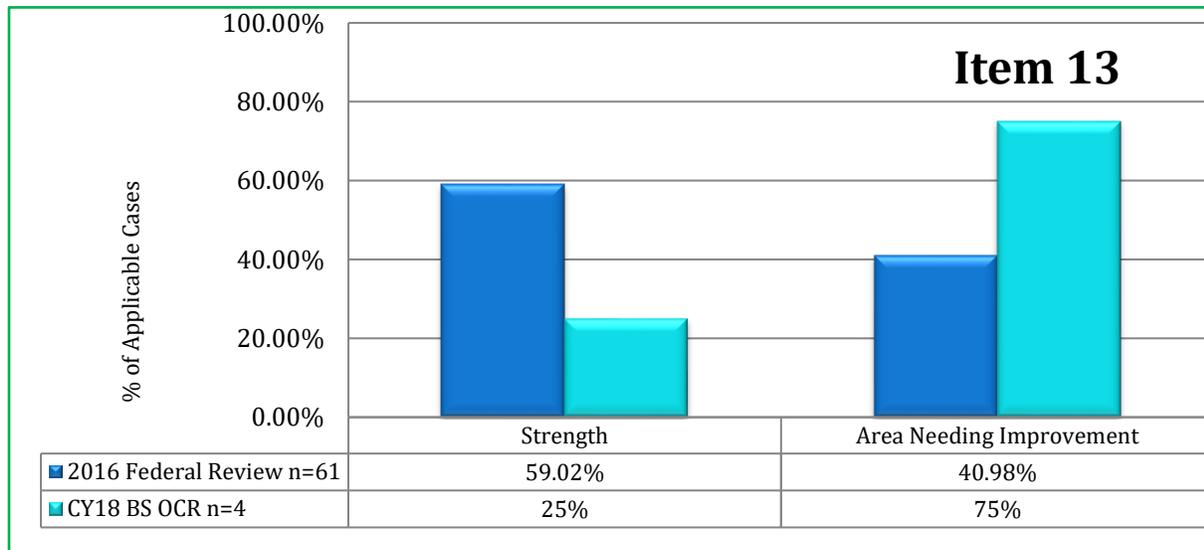
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 13: CHILD AND FAMILY* INVOLVEMENT IN CASE PLANNING

Purpose of Assessment: To determine whether, during the PUR, concerted efforts were made (or are being made) to involve children (if developmentally appropriate) and parents in the case planning process on an ongoing basis.

CY18 BHS OCR Results: One case was rated as a strength for Item 13 indicating the agency adequately involved developmentally-appropriate children and all parents in the case planning process.



Key strengths related to performance on Item 13:

Concerted efforts to actively involve the child was noted in one of two applicable cases. Mothers were actively involved in case planning efforts in all applicable cases. Evidence was found of the concerted efforts of the agency to actively involve the father in the case planning process in one of three applicable cases. The agency involved the children through participation in Child & Family Team meetings and during monthly visitations when appropriate. When rated a strength parents were engaged through participation in Child & Family Team meetings and phone calls, visits, e-mail interactions which occurred between the formal meetings. Some parents reported being able to express their thoughts and opinions and felt heard by the team.

Key areas needing further examination related to performance on Item 13:

Evidence of concerted efforts on the part of the agency to actively involve children was not found in one applicable case. Additionally, evidence of concerted efforts to actively involve fathers was not found in two applicable cases. Engaging youth and absent parents in case planning offer areas for the region to explore further as it relates to performance on this item.

*For the purposes of the OSRI, “Parents” are defined more broadly for Items 12B, 13, 15 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.

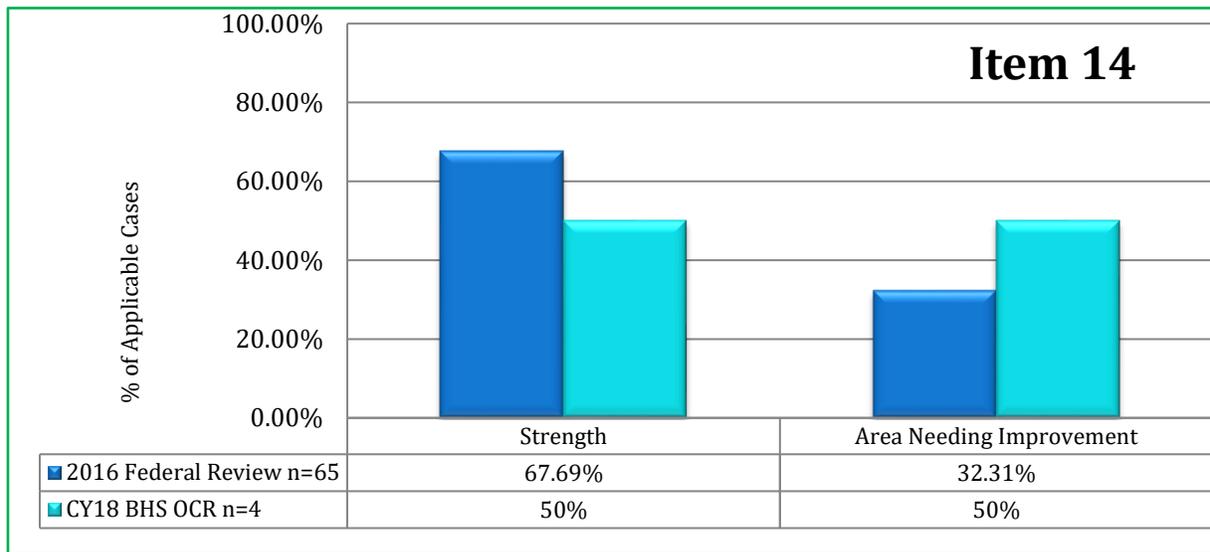
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 14: CASEWORKER VISITS WITH CHILD

Purpose of Assessment: To determine whether, during the PUR, the frequency and quality of visits between the caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals. All cases are applicable for assessment of this item.

CY18 BHS OCR Results: Two cases were rated as a strength for item 14. In each of these cases, the caseworker had visits with the child that were of sufficient frequency and quality to meet the needs of the child and promote achievement of case goals.



Key strengths related to performance on Item 14:

When rated a strength, the typical pattern of visitation between worker and child(ren) during the period under review was found to be less than once a week, but at least twice a month or less than once a week, but at least once a month. The established pattern of caseworker visits with these children was deemed of sufficient frequency to meet the needs of the children for both cases. Efforts to assess safety, permanency, and well-being needs at each visit, with most of the visits being conducted in the child’s residence, during medical or therapy appointments, engaging the child in an age and developmentally appropriate manner, as well as seeing the child alone for a portion of the visits contributed to the high quality. Documentation of quality visits, even with very young children, was in the case record and affirmed through interviews.

Key areas needing further examination related to performance on Item 14:

When rated an area needing improvement, the quality of visitations between caseworker and children was not sufficient to promote achievement of the case goals. Visits were typically occurring monthly, however, the quality of these visits and focus on accomplishing case goals was not evident. Case documentation did not clearly reflect quality components (focusing on issues pertinent to case planning, location and length of the visits, etc.).

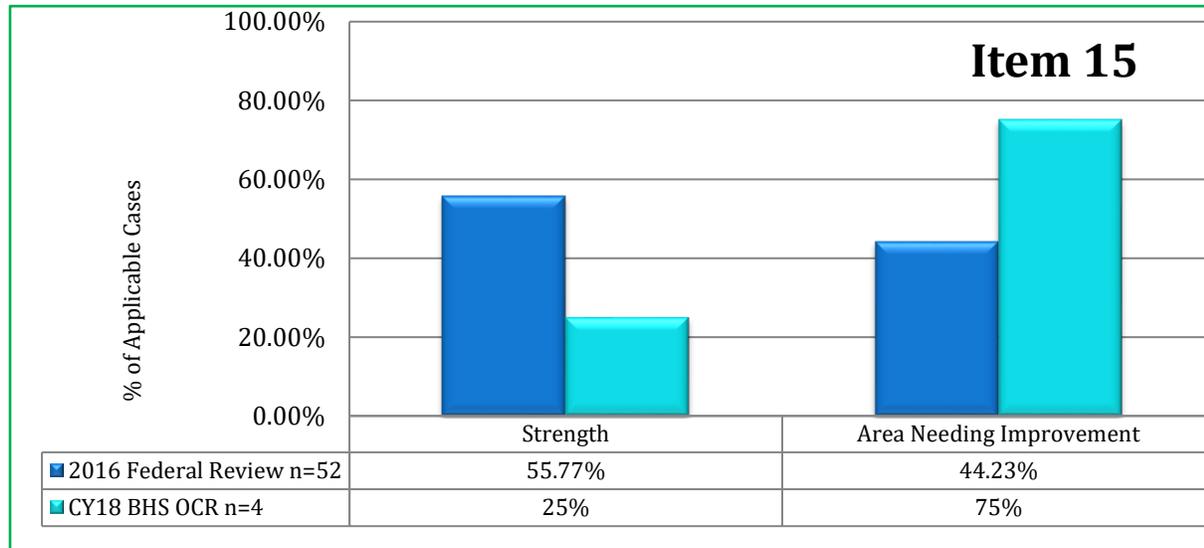
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

ITEM 15: CASEWORKER VISITS WITH PARENTS

Purpose of Assessment: To determine whether, during the PUR, the frequency and quality of visits between caseworkers and the mothers and fathers of the children are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals.

CY18 BHS OCR Results: One case was rated as a strength for Item 15 because the agency conducted visits with the parents that were of sufficient frequency and quality to promote the achievement of case goals.



Key strengths related to performance on Item 15:

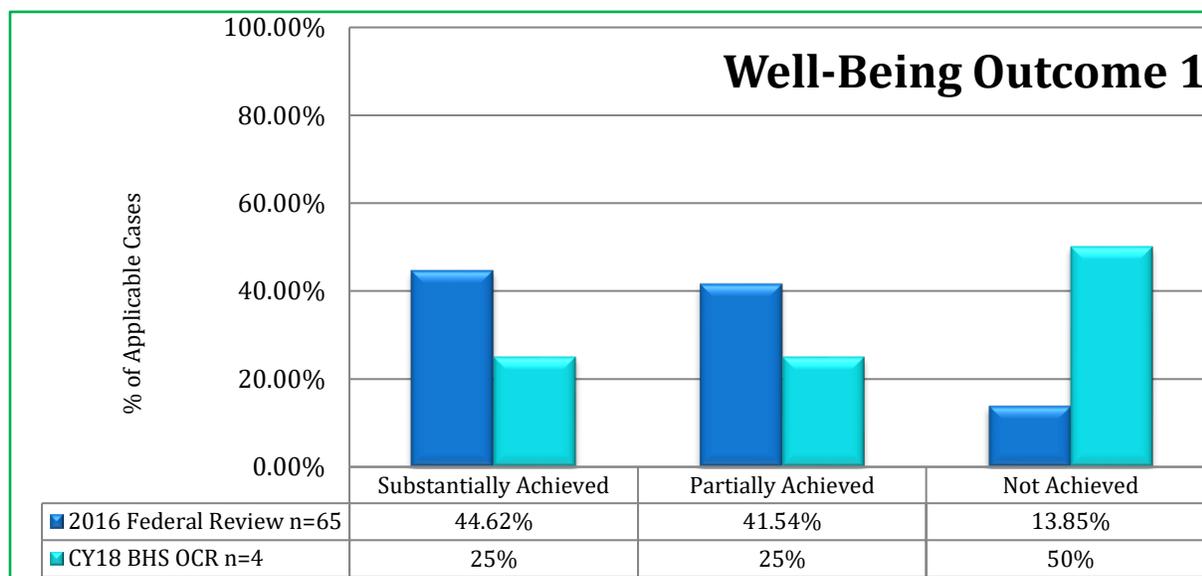
When rated a strength, the typical pattern of visits between case manager and father was at least twice a month and the quality of those visits was sufficient to meet the needs of the case. Furthermore, the pattern of visits between the caseworkers and mothers was seen as sufficient and meeting the needs of the case in two of three applicable situations. Contributing to high quality visits were efforts such as focusing on the needs of the children and family (i.e. housing, financial, mental health service needs), holding meetings in the home, office, or community locations offering adequate privacy. Supplemental efforts between visits through phone calls, emails, texts, were also noted to present in cases receiving a strength rating.

Key areas needing further examination related to performance on Item 15:

When rated an area needing improvement, the typically pattern of visitation between case worker and the parent was less than monthly (mother) to never (father). This pattern of visitation was not sufficient to meet the needs of the case. Challenges were primarily noted for in-home services cases and the region is encouraged to examine barriers unique to this case type when considering practice improvement opportunities related to this item.

CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN'S NEEDS.



Key strengths related to performance on Well-Being 1:

Robust practice related to ongoing assessments and service provision to children to address their individual needs was seen in two of the four cases reviewed. Similar practice related to the assessment of and addressing the needs of a father in one case was noted. Agency efforts to assess and address the needs of foster parents was found to be a strength in one of the cases. Caseworker visits with children and parents were sufficiently frequent and of high quality in some cases. When this occurred, agency efforts to actively involve the child and parents was found.

Key areas needing further examination related to performance on Well-Being Outcome 1:

Agency engagement with non-custodial but present fathers is a practice area for further examination. A lack of frequent and quality visits with children and parents in some cases also contributed to challenges that may warrant further examination impacting this outcome. Challenges were noted in both foster care and in-home services and further exploration is warranted to better understand specific barriers to stronger performance in relation to Well-Being Outcome 1.

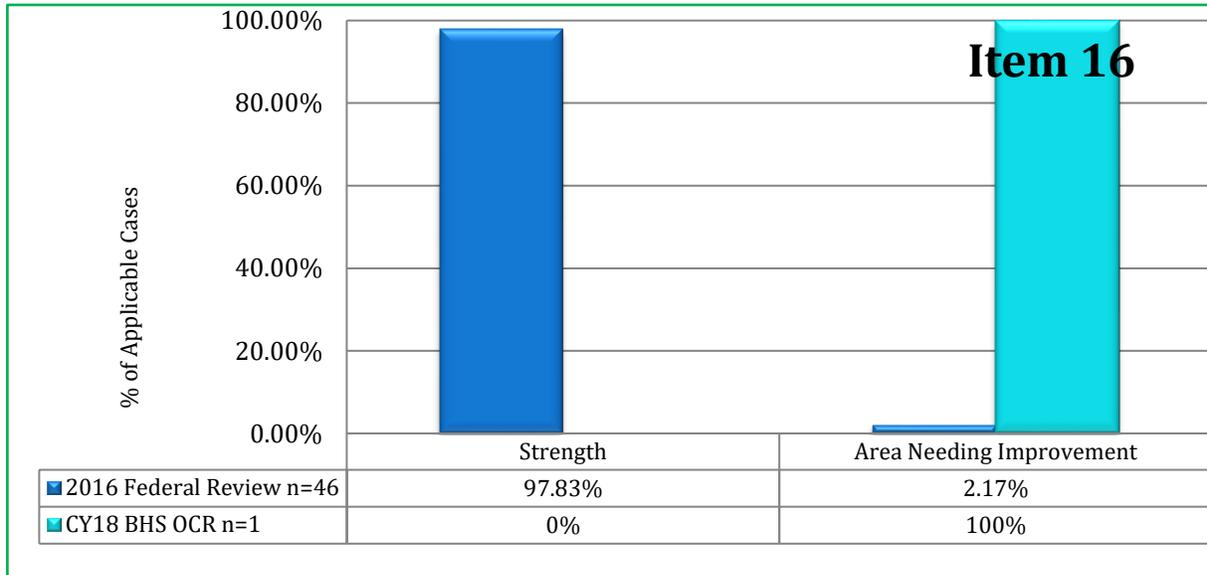
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.

ITEM 16: EDUCATIONAL NEEDS OF THE CHILD

Purpose of Assessment: To determine whether, during the PUR, the agency made concerted efforts to assess children’s educational needs at the initial contact with the child (if the case was opened during the PUR), and whether identified needs were appropriately addressed in case planning and case management activities.

CY18 BHS OCR Results: No applicable case was rated as a strength for Item 16.



Key strengths related to performance on Item 16:

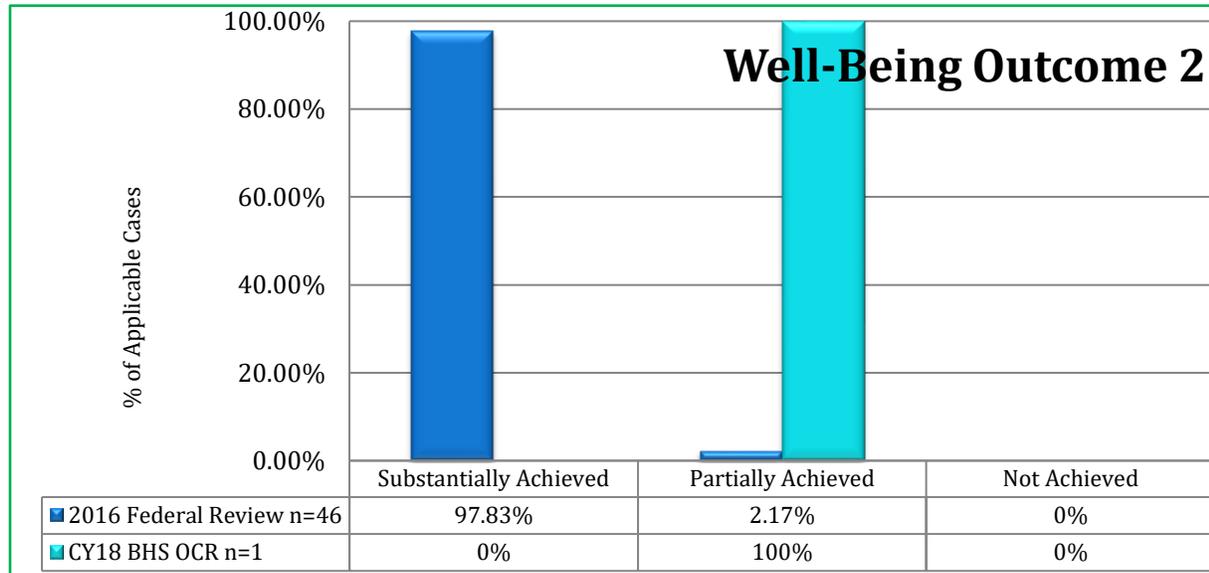
Within the applicable case, it was noted that the agency made concerted efforts to accurately assess the education needs of the foster youth.

Key areas needing further examination related to performance on Item 16:

When rated an area needing improvement, evidence that the agency made concerted efforts to address the target youth’s education needs through appropriate services was not found. It was noted that some needs were met by the agency and foster parents, yet other appropriate services that may have assist the foster youth in addressing the identified education needs were not explored.

CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.



Note: A "Partially Achieved" rating for this outcome is possible when one of the two rating questions contained in item 16 is answered "yes" but the other question is answered "no".

Key strengths related to performance on Well-Being Outcome 2:

The agency made concerted efforts to accurately assess the target child's educational needs in the one applicable case for this outcome.

Key areas needing further examination related to performance on Well-Being Outcome 2:

The agency did not make concerted efforts to address all the target child's educational needs through appropriate services in the case situation reviewed. The region is encouraged to examine regional practice in the context of Well-Being Outcome 2 further to better understand the nature of any practice challenges and inform practice improvement efforts.

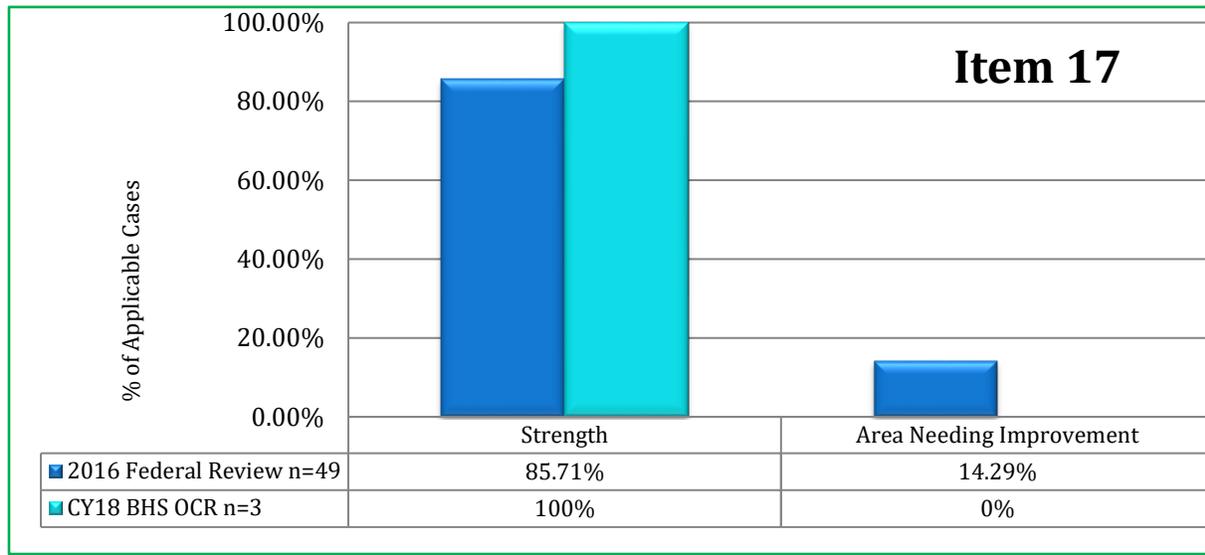
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.

ITEM 17: PHYSICAL HEALTH OF THE CHILD

Purpose of Assessment: To determine whether, during the PUR, the agency addressed the physical health needs of the child(ren), including their dental health needs.

CY18 BHS OCR Results: Three cases were rated as a strength for this item indicating the agency addressed the physical health needs of the child, including dental needs of the child(ren).



Key strengths related to performance on Item 17:

The agency accurately assessed the children’s physical health needs in all three applicable cases and accurately assessed the children’s dental health care needs in the one applicable situations. The agency provided appropriate oversight of prescription medications for the physical health issues of the target child in foster care in one applicable situation. Furthermore, the agency ensured that appropriate and timely services were provided to the children to address all identified physical health needs in both applicable cases. Services included (but not limited to): Health Tracks screenings, Immunizations as needed, Early Intervention services, medical procedures and necessary antibiotics/steroid treatments. The agency ensured appropriate services were provided to the children to address all identified dental health needs in one applicable case. Dental services provided primarily involved regular dental check-ups and orthodontia services.

Key areas needing further examination related to performance on Item 17:

This review did not identify any key areas needing further examination relative to item 17.

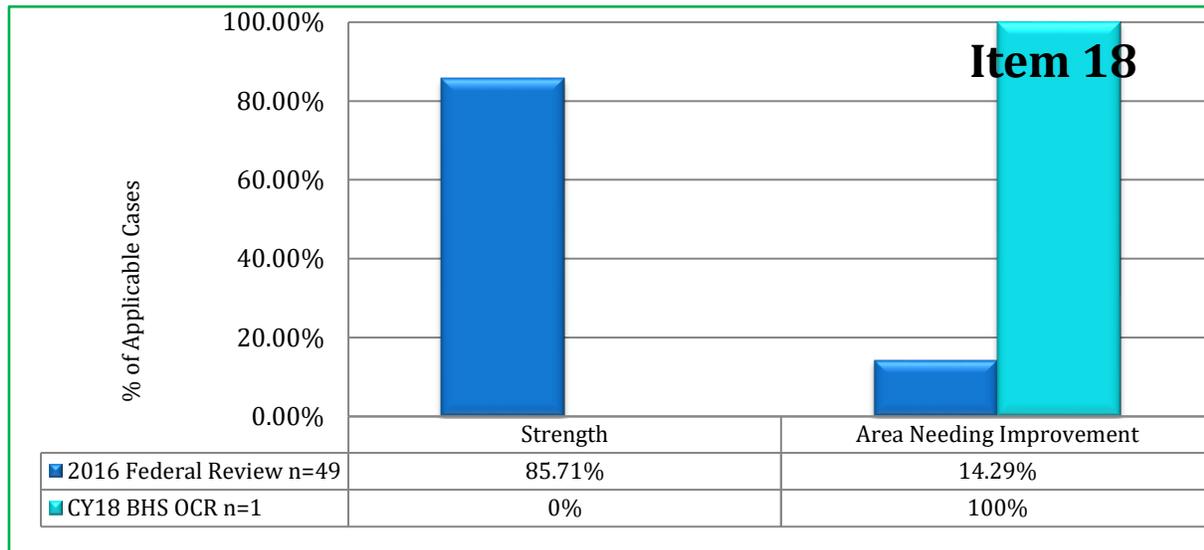
CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.

ITEM 18: MENTAL/BEHAVIORAL HEALTH OF THE CHILD

Purpose of Assessment: To determine whether, during the PUR, the agency addressed the mental/behavioral health needs of the child(ren).

CY18 BHS OCR Results: No case was rated a strength for Item 18.



Key strengths related to performance on Item 18:

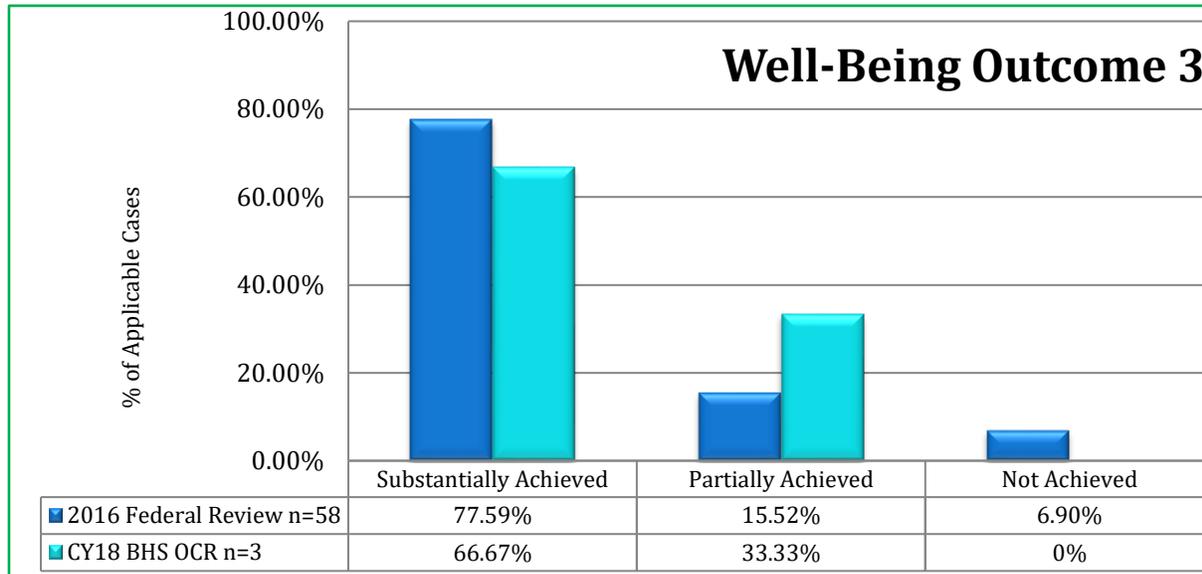
The agency conducted an accurate assessment of the children’s mental/behavioral health needs in the one applicable case. Assessments were conducted through informal and formal assessments by the agency case manager or through formal assessments provided by community providers. Examples of services employed to meet identified needs as applicable in the cases reviewed included formal mental health assessments, counseling services, residential treatment, and psychotropic medications.

Key areas needing further examination related to performance on Item 18:

The region and state are encouraged to review practices and policy related to providing appropriate prescription oversight for psychotropic medications, an area of practice found to be a challenge for this region. Ensuring children are connected to appropriate services that are effective and appropriate to the identified needs of the child provides an additional area for further examination as the region seeks to strengthen performance related to this item.

CHILD AND FAMILY OUTCOMES

WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.



Key strengths related to performance on Well-Being Outcome 3:

Concerted agency efforts to ensure physical, dental and vision health needs of children are assessed and addressed was evident in this review. The agency accurately assessed and addressed the children’s mental/behavioral health needs for all applicable children. Appropriate mental/behavioral health needs were assessed, and some appropriate services were provided timely and targeted to the needs of the specific youth.

Key areas needing further examination related to performance on Well-Being Outcome 3:

Providing appropriate oversight of prescription medications related to the physical health needs of foster youth is an area of focus for the region as it considers practice improvement efforts. Ensuring all needs are addressed for children with complex mental/behavior health needs is also an area the region may wish to examine further as it considers practice improvement efforts within Well-Being Outcome 3.

It was noted that workforce turnover may be a contributing factor impacting performance in this, and other, outcomes. The process for transferring cases to new workers so there is continuity of care may be another targeted area for the region to consider when reviewing the outcomes achieved during this review.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

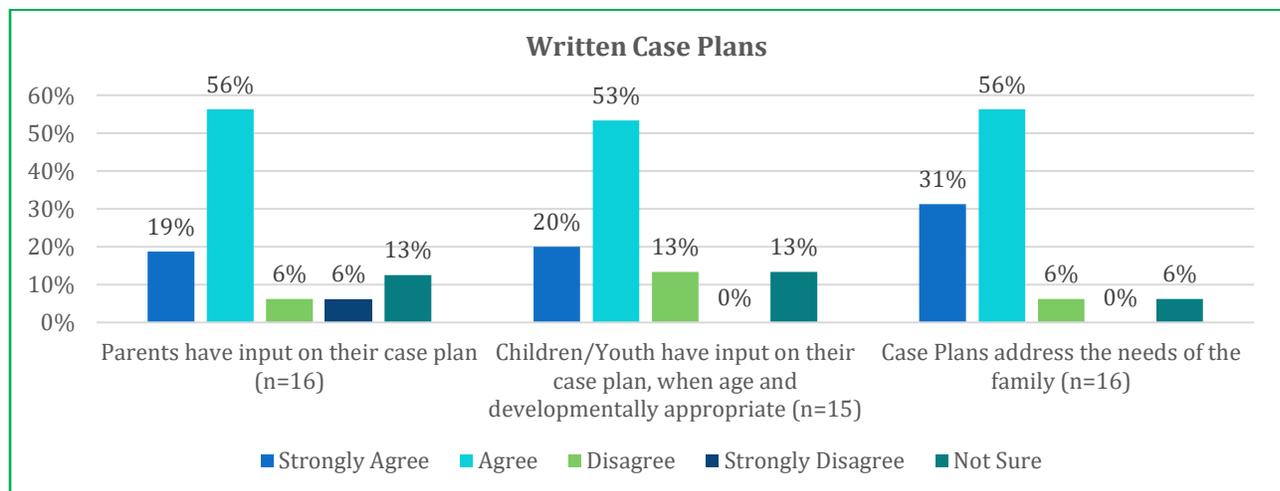
Stakeholder feedback on Systemic Factors

CASE REVIEW SYSTEM: WRITTEN CASE PLANS

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child’s parent(s) and includes the required provisions?

Feedback regarding written case plans was sought from all seven Stakeholders as noted below.

- A. Information from online survey responses revealed that parents of children in foster care (hereafter referred to as ‘parents’), Agency Administrators, Agency Case Managers, Legal, and Community partners believed that **parents and children/youth had input on the case plan** most of the time and that **case plans addressed the needs of the family**:



Note: Parents were afforded a “Does not apply” option and one (1) parent chose that option for the second question in the table above.

- B. Questions asked of the Parents include the following [n=1]:
- **I have a clear understanding of what their family needed to accomplish before their case could be closed**
Strongly Agree (0); Agree (0); Disagree (1); Strongly Disagree (0); Does Not Apply (0)
 - **My family’s case plan has information about the following items:**
 - A. My children’s placement:
Strongly Agree (0); Agree (0); Disagree (1); Strongly Disagree (0); Does Not Apply (0)
 - B. My child/ren’s school progress:
Strongly Agree (0); Agree (1); Disagree (0); Strongly Disagree (0); Does Not Apply (0)
 - C. My child/ren’s health progress:
Strongly Agree (0); Agree (1); Disagree (0); Strongly Disagree (0); Does Not Apply (0)
 - **Please comment on anything else you’d like to share about your family’s case plan (optional):**
“I’m doing extremely well and [the county] gave up on me too, too soon. I thought that keeping family together was their main concern but 90% of the time I have dealt with them I get the complete opposite. If something doesn't change my children will be lost.”
- C. Questions asked of the Foster caregivers include the following:

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Do you, in your role as caregiver for the foster child/youth, participate in meetings where case plans are created (also known as Child and Family Team meetings - CFT meetings)
 - There was consensus they generally attend Child and Family Team meetings. The following statements reflect some of the specific comments made:
 - “Yes. We get a letter with the date/time but no negotiation around that to work around our schedule.”
 - “Depends on when they’re scheduled. We just get a letter with date/time and if we can make it, we do. When we have tough kids, I would like to have been there but can’t always make it. I would like to hear the information also.”
 - If so, from your perspective, are case plans developed jointly with the children’s parents?
 - Specific comments shared were:
 - “I think the social workers and the parents have a lot of communication, so I think they’re involved in the case plan development” (others agree it’s been the case for their foster care placements)
 - “Parents don’t show up for a lot of the meetings though – depends on what the parents want for themselves”
 - Describe examples of how you have observed the agency try to involve the parents in the development of the plan
 - “They are asking if parents are in agreement with it, but maybe that’s the agency developing the plan first, then asking the parents if they agree with it – not sure of what’s been done outside the meetings, though.” [others agreed]
 - As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
 - “The parents get to say what they want but there steps they have to take to get their kids back and it’s up to them whether or not they do it”
 - “The parents have more rights than the kids. I get frustrated with their non-participation. They may say they want their kids, but will they do what they need to do?”
 - “They will say, ‘I’ll do anything for my kids... but, I won’t quit drinking.’”
 - “There seems to be a back-and-forth between the county and the parents, and the county will try to educate them, but I don’t think the parents should have a say because they won’t do what’s required to get their kids back.” [others agreed]
- D. Questions asked of the Youth include the following:
- What is your understanding of how the agency involved your parent(s) in the development of the plan?
 - Specific comments include:
 - “They never send my parents notice of the meetings but expect them to show up”
 - “Not at all – they don’t have a clue of what’s going on”
 - “My parents are supposed to know what’s going on, but the county doesn’t treat them well”
 - “I don’t want my parents involved, and they make every effort to get them involved against my wishes”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “My parents call in to the meetings, and are told about 3 days in advance (they don’t get letters either)”
- “Our foster parents [adopt] are very involved with the CFTs”
- “My legal guardians try to be involved but the social workers don’t always involve them”
- “My biological parents aren’t involved, and I’d like my biological mother to be informed on what’s going on – she hasn’t been included in CFTS”
- How have you worked on the development of your case plan? Follow up questions: Were you invited to CFT meetings? Were meetings held at times you were able to attend without missing school, etc.?
 - Participants indicated they were there. Specific comments include:
 - “We miss school for the meetings, but we go to them”
 - “We normally don’t get the letters about the team meetings until after the meeting is held”
 - “I call my social worker all the time – she never answers and never calls back”
 - “My worker never answers”
 - “My worker answers my calls”
 - “Changes to the plan aren’t sent out to us so we don’t get the updates to know what’s going on.”

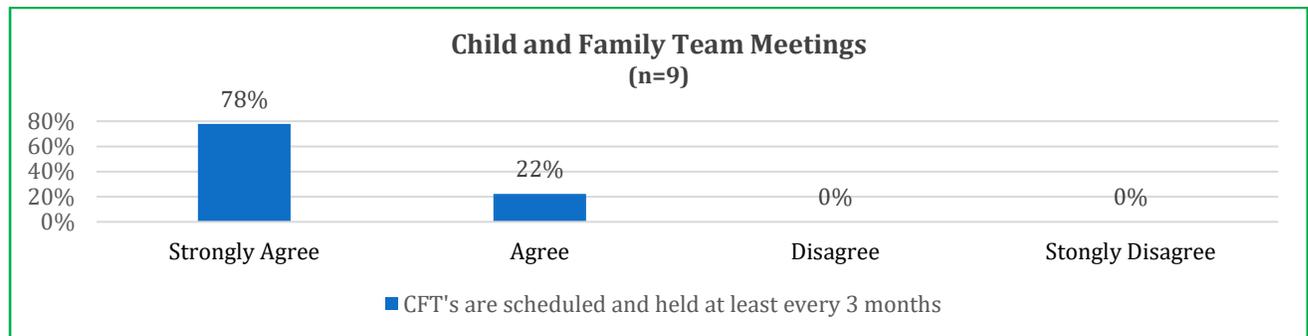
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERIODIC REVIEWS

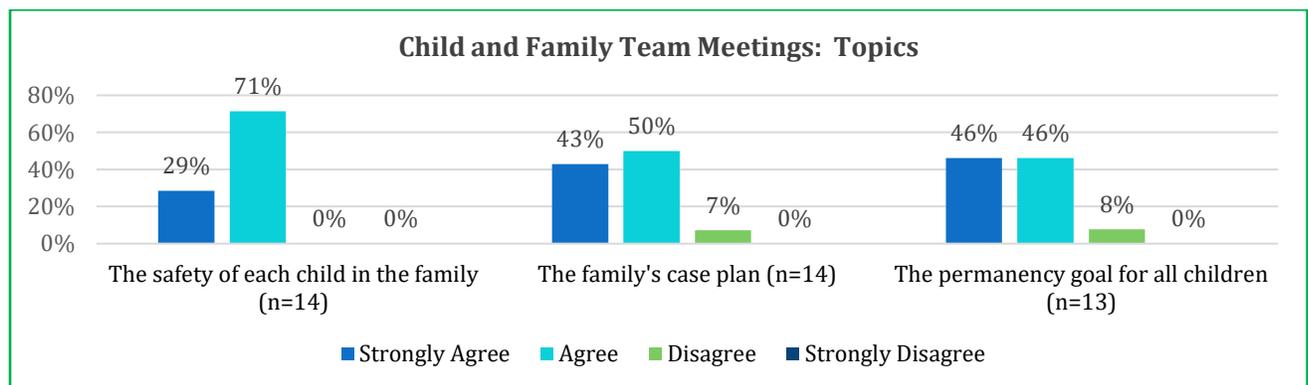
How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Feedback regarding written case plans was sought from five Stakeholder groups: Agency Administrators, Agency Case Managers, Legal, Community, and Parents. The first question was asked only of Agency Administrators, Agency Case Managers and Parents.

- The case manager schedules and holds the Child and Family Team Meetings at least every 3 months:



- At CFT Meetings, the following topics are addressed:



Note: Community members were afforded a "Do not Recall" option and one (1) respondent chose that response for the third question in the table above.

- Respondents who did not respond "Strongly Agree" were the asked: **When topics relating to safety of all children in the family, family case plan tasks, or the permanency goal for all children in foster care at CFT Meetings does not occur, please briefly explain noted barriers.** The following barriers were reported:
 - "Parents do not show up for CFT Meetings"

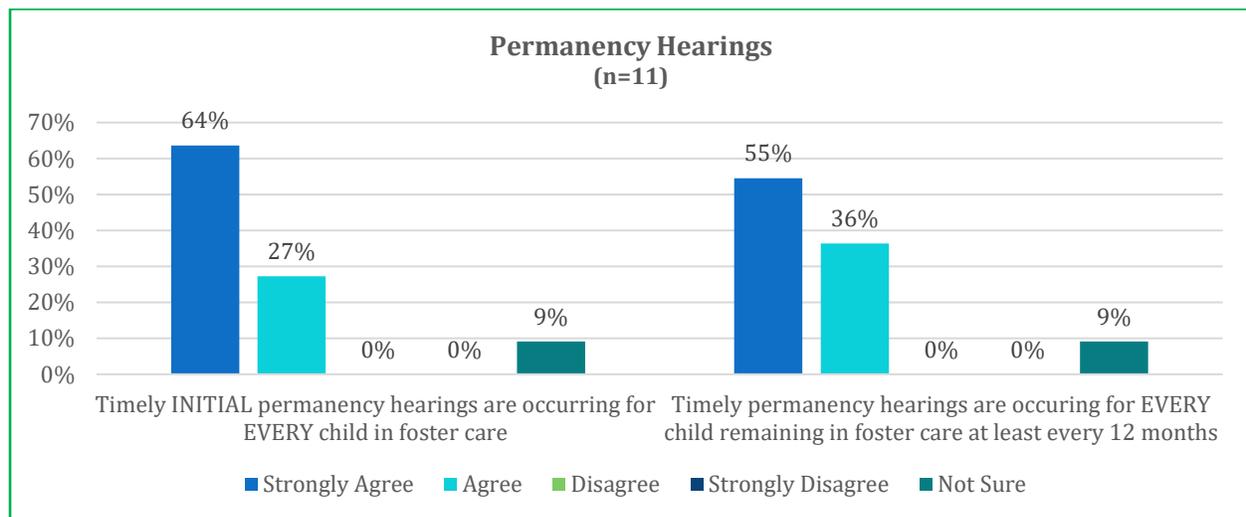
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERMANENCY HEARINGS

How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Feedback regarding written case plans was sought from three Stakeholder groups: Agency Administrators, Agency Case Managers, and Legal.

- A. Please indicate your level of agreement with the following statements: Participants in the Legal group were afforded a “Not Sure” option.



- B. If the answer to the above question was anything other than “Strongly Agree”, please select up to three options from a list of potential barriers: The total responses received for each category are as follows:

	Top rated barriers to initial permanency hearings (n=2)	Top rated barriers to subsequent permanency hearings (n=2)
<i>A continuance was needed</i>	2	2
<i>The State’s Attorney’s Office was not able to submit the request in a timely fashion</i>	1	1
<i>The Court’s calendar was full</i>	1	1
<i>Case Management staff was not able to submit the necessary paperwork to request the hearing</i>	0	0
<i>Other</i>	0	0

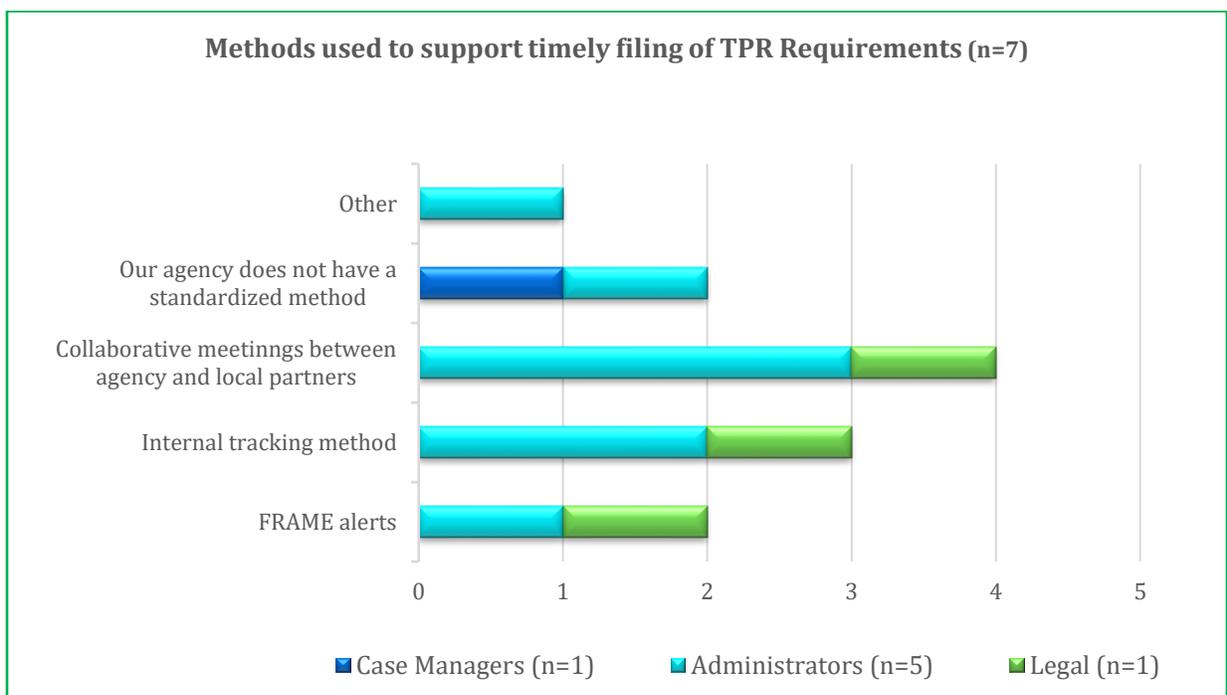
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: TERMINATION OF PARENTAL RIGHTS

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Feedback regarding written case plans was sought from four Stakeholder groups. Agency Administrators, Agency Case Managers, and most Legal Stakeholders were asked questions A & B. Community Stakeholders and Legal Stakeholders identifying as a Defense Attorney, GAL, Judge or Judicial Referee were only asked Question C.

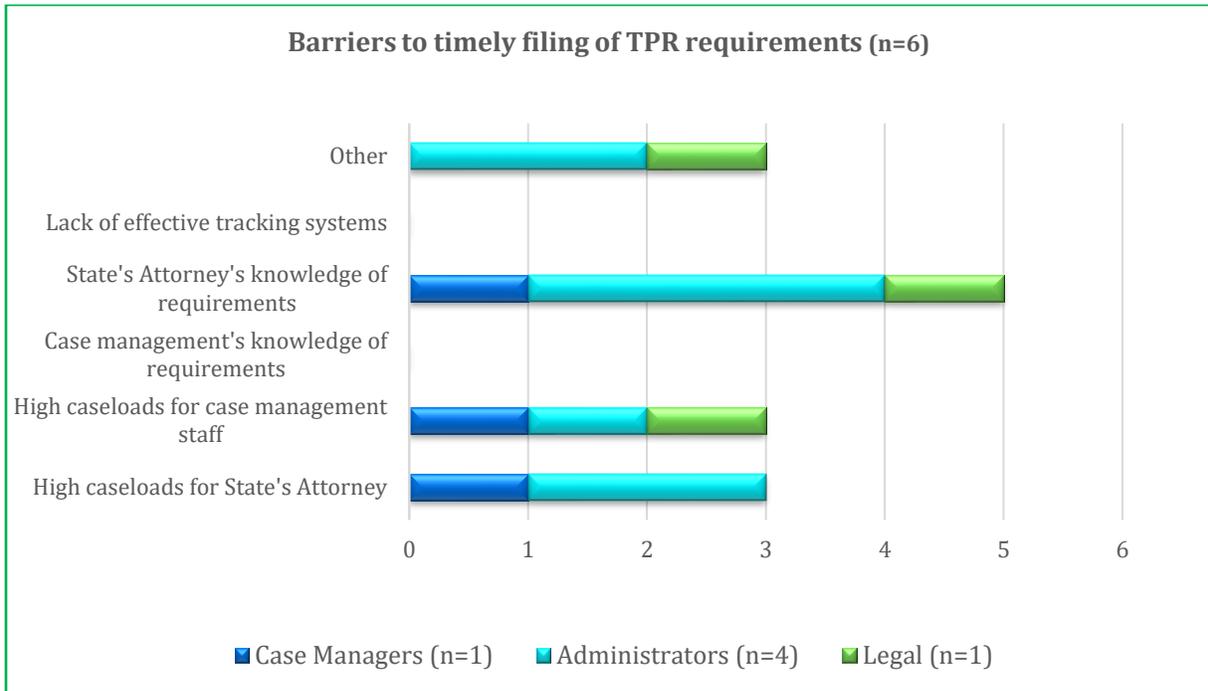
- A. How does your agency ensure that the filing of termination of parental rights occurs within the required provisions (e.g., the child has been in foster care for 15 of the most recent 22 months; the parent has committed a serious offense such as killing another child, or an exception is present, such as the child is living with relatives, there is a compelling reason why the parent's rights should not be terminated), please identify up to 3 tracking methods:



- Other methods reported:
 - “The tribe doesn’t like to do TPR’s, so we utilize Permanent Suspension of Parental Rights”

- B. What are the barriers that specifically affect your agency’s ability to ensure that filing of TPR proceedings occurs in accordance with the required provisions for each child in foster care? Please select up to 3 reasons from the list below: *(results displayed on the next page)*

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS



- Other barriers reported:
 - “All parties want to give the parent’s ample time to adhere to the requirements of the ordered services”
 - “The tribe doesn’t like to do TPR’s, so we do Permanent Suspension of Parental rights & Cultural Adopt”
 - “Need a dedicated States Attorney for Juvenile Cases”
- C. Statewide data from the Supreme Court indicate the state experiences challenges to ensure filing requirements for termination of parental rights occurs timely for all children in foster care (as reported in the 2016 Round 3 CFSR Statewide Assessment Report, found on the Department's website):

FFY	TPR PETITION FILED WITHIN 660 DAYS
2015	68% (n=128)
2014	71% (n=87)
2013	76% (n=87)

Based on your experience with child welfare partners in your jurisdiction, please comment on strong practices or barriers that impact the ability to ensure timely filing of TPRs when appropriate to do so (n=2):

- “Waiting on court decisions to make placement or services decisions”
- “Difficulty in accomplishing goals set by social services for reunification. Inability to accomplish service of process.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: NOTICE OF HEARINGS AND REVIEWS TO CAREGIVERS

How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Feedback regarding written case plans was sought from five Stakeholder groups: Foster Caregivers were asked question outlined in section A. Agency Administrators, Agency Case Managers, Community, and Legal Stakeholders were asked questions outlined in section B.

A. Foster Caregivers were asked the following questions regarding their experiences:

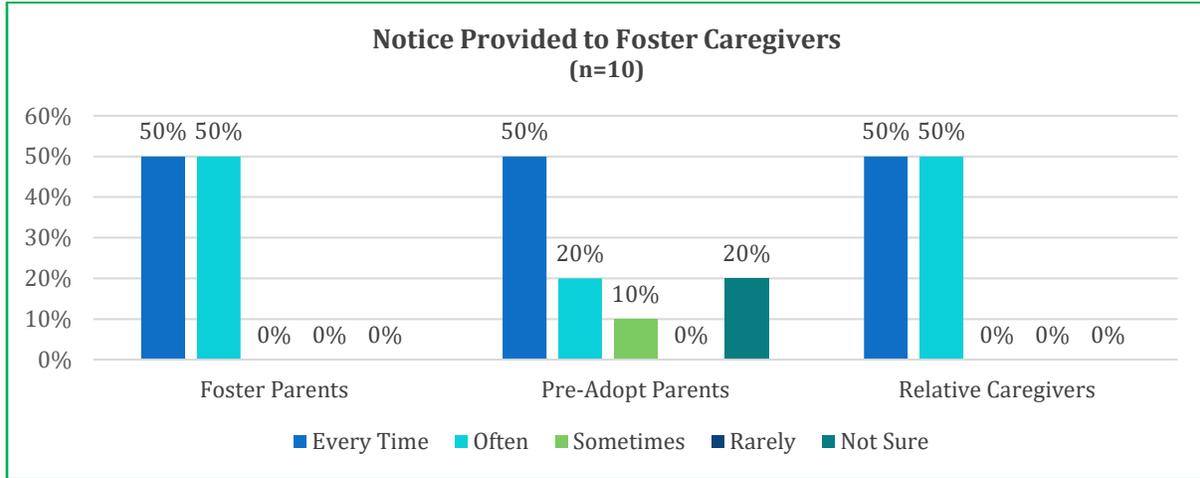
- **What has been your experience receiving notice of upcoming reviews and hearings regarding foster children/youth for whom you provide care?**
 - Most participants said it depends on the caseworker. A specific comment includes:
 - “Depends on the caseworker because some are amazing [with communication] and others don’t let us know there are hearings coming up. It would be helpful if the caseworker would call us after the court hearings and tell us what the plan is. I’ve been at an appointment with the child and have received a call that the kid was going home that day and it’s physically and emotionally hard because you have no time to prepare”
- **Does your experience match the experiences of other foster caregivers you know?**
 - Most participants stated “yes, as far as they knew.”
- **What has been your experience providing information or ‘being heard’ during a review/hearing? Have you been able to provide information to the Court during these proceedings, either in person or in writing?**
 - “I’ve never been asked”
 - “In all the many years with many kids, only one time have we been asked, and I did it in writing. I was told by the caseworker not to write too much because that wouldn’t look good.”
- **What gets in the way of the agency and court ensuring foster caregivers are notified of, and have a right to be heard, in any review hearing held in respect to the foster child in their care?**
 - “This time they don’t want parents to know where the kids are but other cases – the social worker thinks they have everything they need and don’t need input from us, other times the state’s attorney thinks we’ll be biased.”
 - “I think sometimes the social worker’s plates are too full and they’re too busy to get a hold of all of us”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

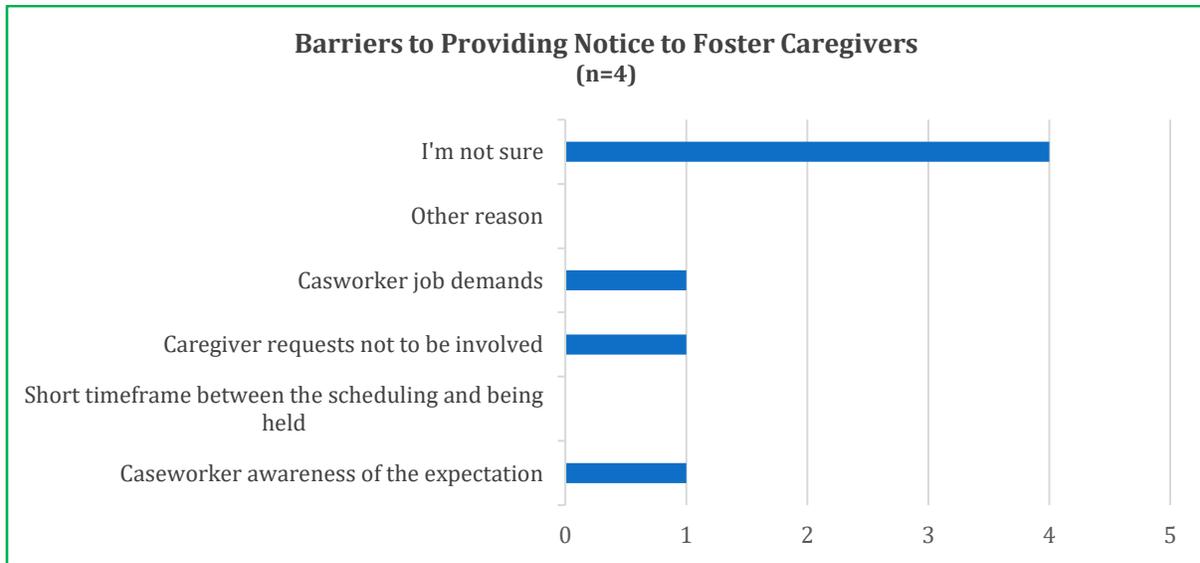
B. Stakeholders taking the online survey were asked the questions below:

Legal Stakeholder's note: Judges and Judicial Referees were not asked questions in this section.

- "To the best of your knowledge, are the following caregivers of children in foster care in the agency given NOTICE of any review or hearing held regarding the child?"



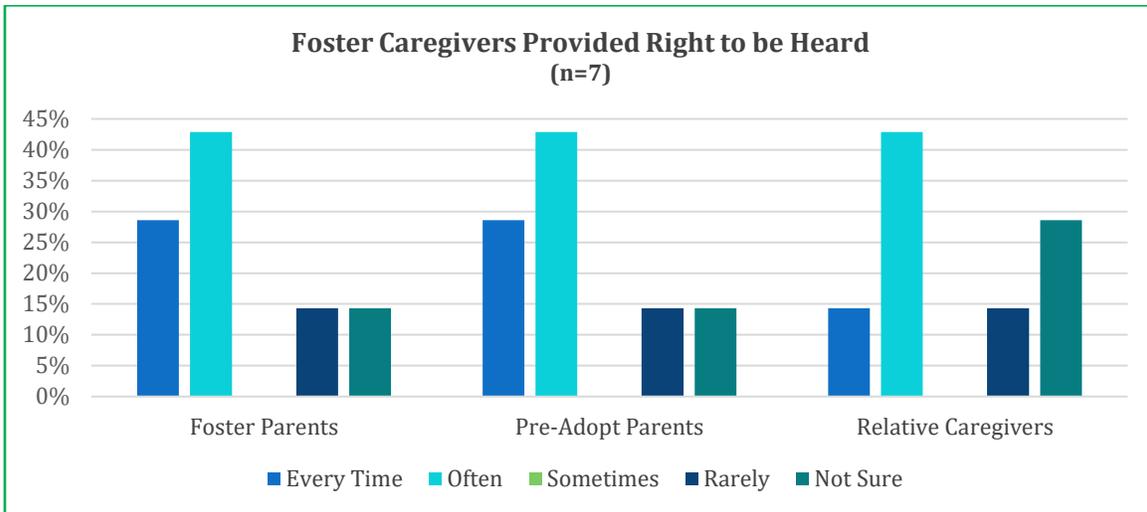
- If respondents did not respond to all three categories as "Every Time", respondents were asked to enter the most important barrier noted.



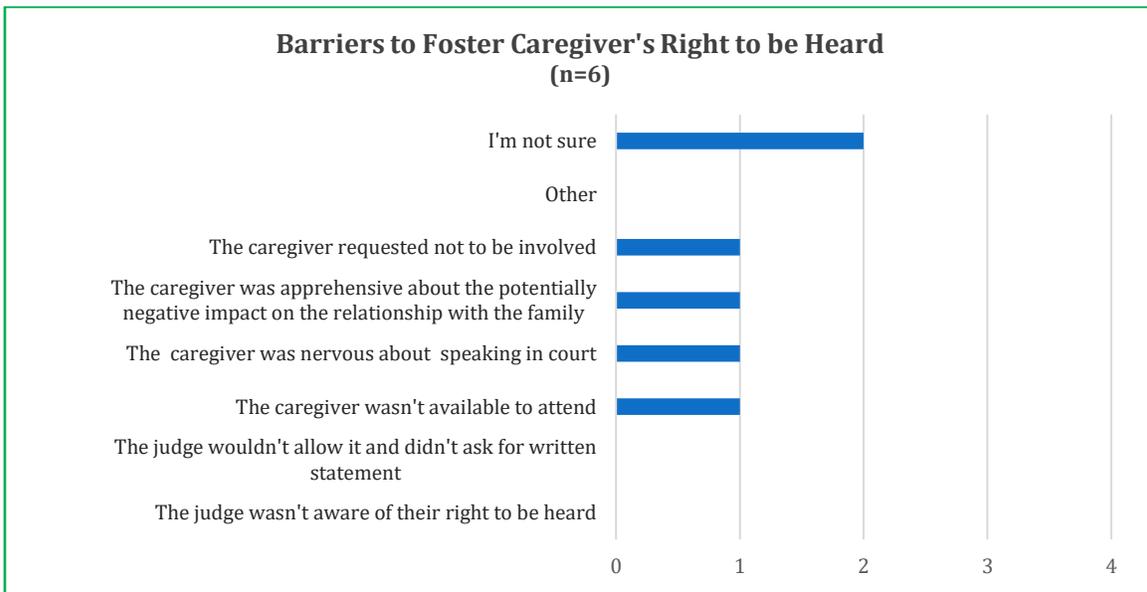
- Other reasons provided:
 - No other reasons received.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- To the best of your knowledge, are the following caregivers of children in foster care in the agency given the RIGHT TO BE HEARD in any review or hearing held regarding the child?



- If respondents did not respond to all three categories as “Every Time”, respondents were asked to enter the most important barrier noted:

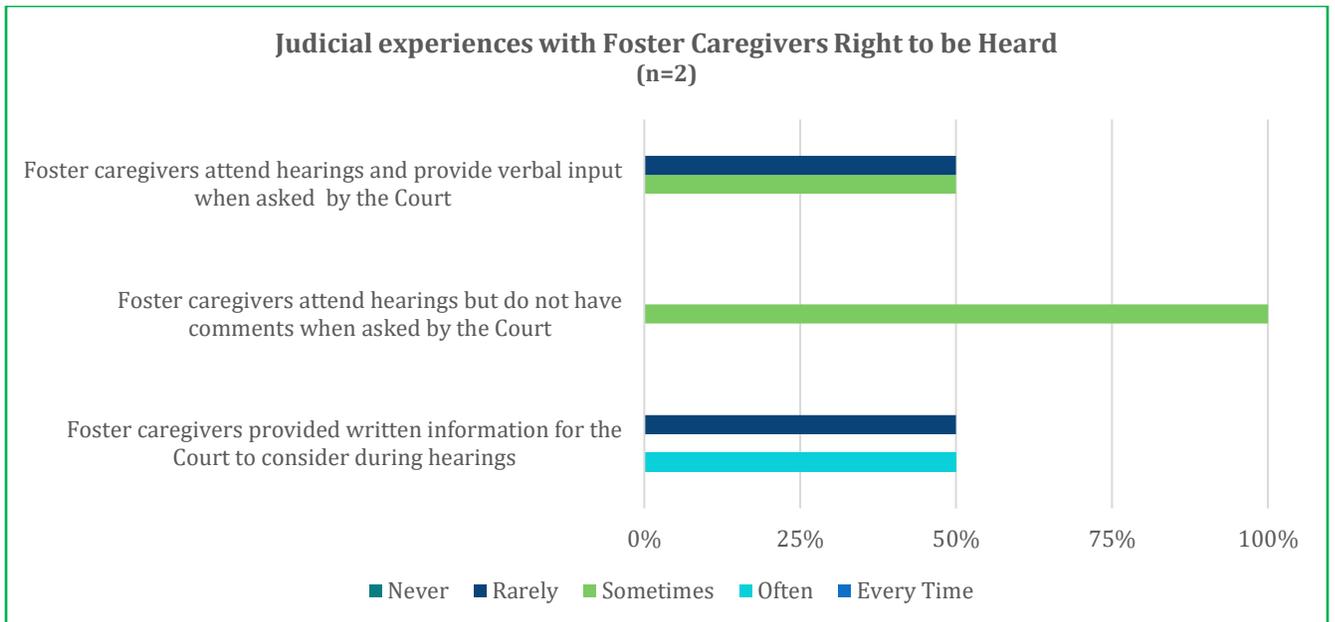


- Other reasons provided:
 - No other reasons were provided.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

C. Judges and Judicial Referees were asked the following questions:

- Please respond to the questions below based on your experiences with foster parents, pre-adopt parents, and relative caregivers (“foster caregivers”) when presiding over court reviews or hearings regarding foster children:



- Please share any comments on how our child welfare system could strengthen or support foster caregivers in their right to be heard during reviews or hearings involving the foster child(ren) in their care:
 - No responses to this optional question were received.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: INITIAL STAFF TRAINING

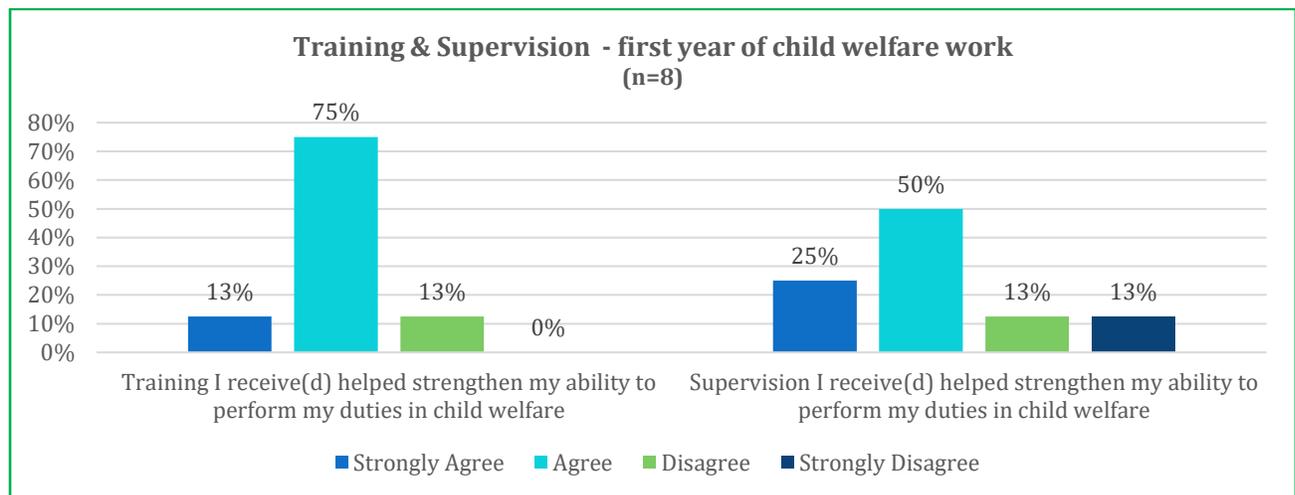
How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions?

"Staff," for purposes of assessing this item, includes all contracted and non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Feedback regarding written case plans was sought from two Stakeholder groups: Agency Administrators and Agency Case Managers.

A. Questions asked of Agency Case Managers:

- When you were first hired as a child welfare worker, were you assigned the responsibility of a full caseload (n=8)
 - Before attending Child Welfare Certification Training: 4
 - While attending Child Welfare Certification Training: 4
 - After attending Child Welfare Certification Training: 0
- If you were assigned the responsibility of a full caseload BEFORE attending Child Welfare Certification Training, in what year were you hired as a child welfare worker: (n=4)
 - One response each for the following years: 1990, 1994, 2012, 2017
- Please consider your first year of employment in child welfare and indicate your level of agreement with the following statements:

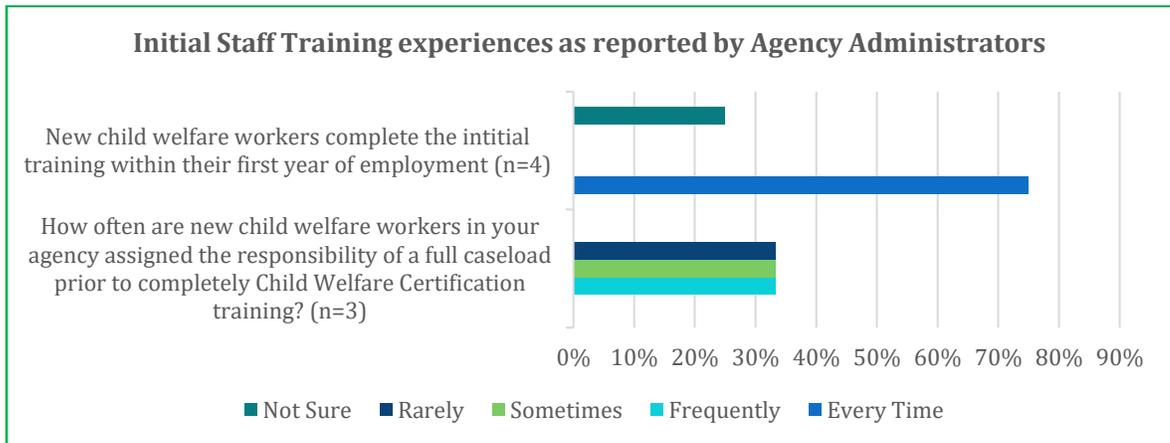


- Please provide any additional comments regarding the initial training and support offered to you or other child welfare workers within the first year of employment: (n=6)
 - "Training was beneficial but there was a clear understanding that every part of the state conducts things differently, so it was not universal."
 - "My supervisor assisted me with one visit on my first case, from there, I was on my own – although able to discuss issues, I did not have any in the field supervision my whole first year."

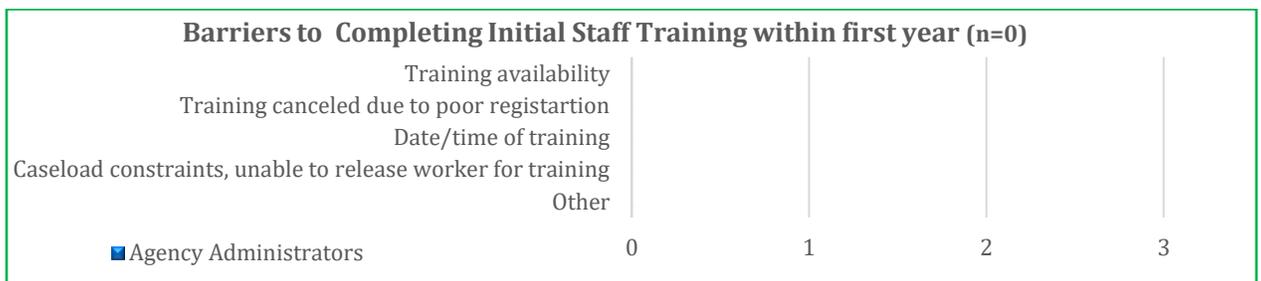
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

B. Agency Administrators were asked the following questions:

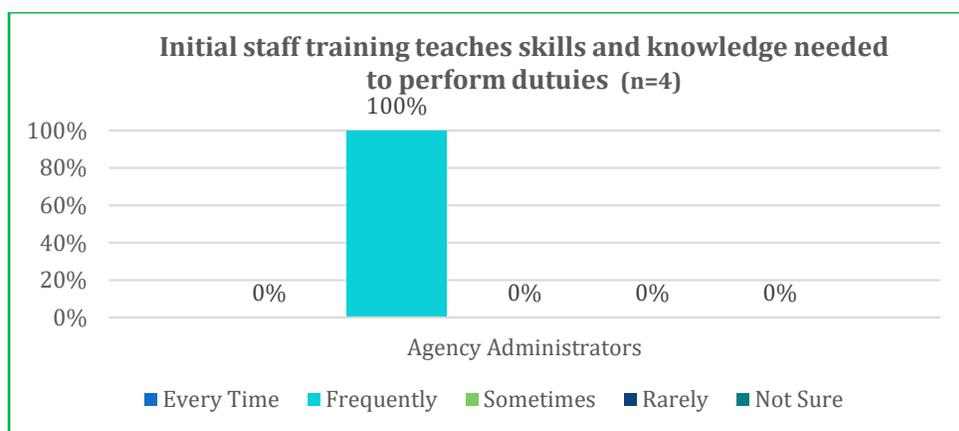
- To the best of your knowledge:



- Respondents who did not answer “Every Time” to the question of new child welfare workers completing training in the first year of employment were asked: **In your opinion, what gets in the way of all new child welfare workers completing the required training within their first year of employment? Please rank up to three barriers:**

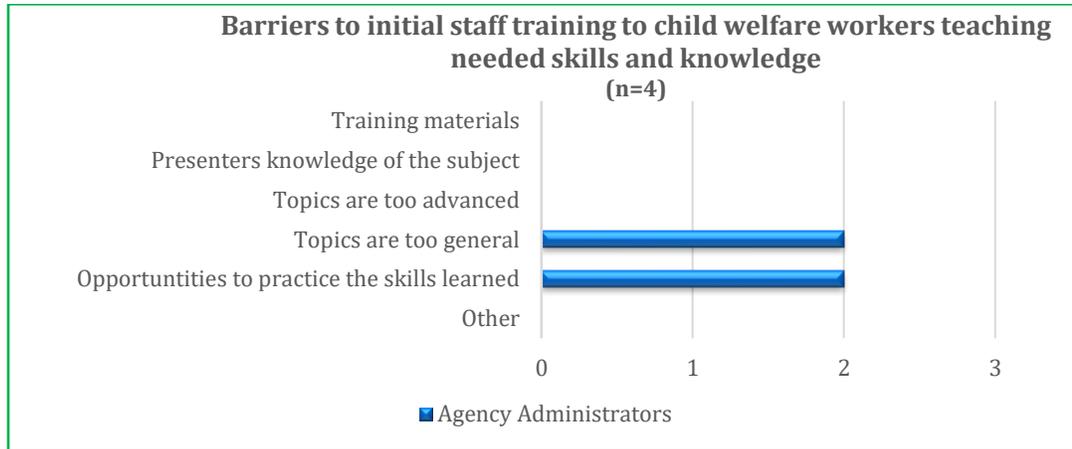


- To the best of your knowledge, does the initial training provided to child welfare workers teach the skills and knowledge needed for them to carry out their duties in child welfare:

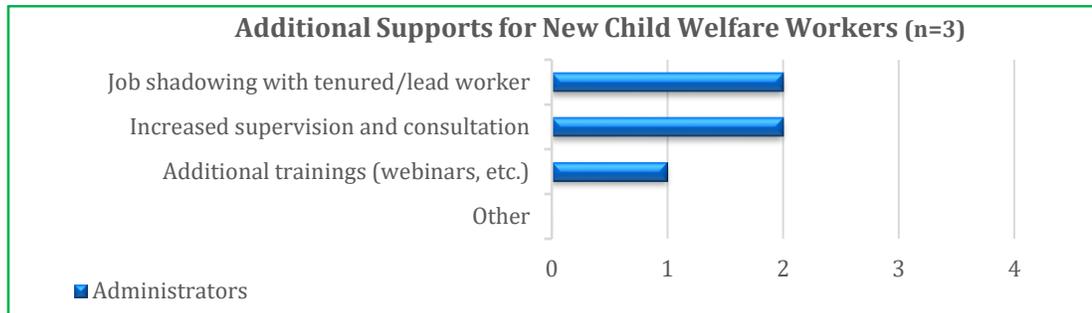


STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Respondents who did not answer “Every Time” to this question were asked: In your opinion, what gets in the way of child welfare workers getting all the needed skills and training needed to perform their duties from INITIAL trainings? Choose the most important reason:



- Other reason provided:
 - No other reasons provided.
- What additional supports are provided to new child welfare workers within the first year of employment to strengthen their skills and knowledge needed to perform their duties (check all that apply):



- Other supports provided:
 - No other comments provided.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: ONGOING STAFF TRAINING

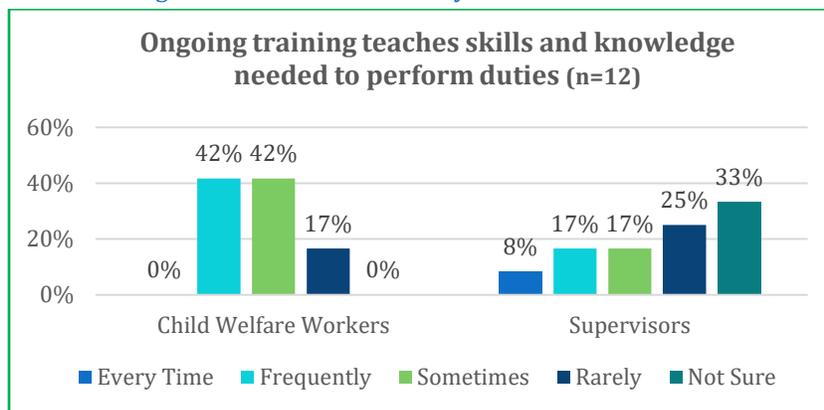
How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

"Staff," for purposes of assessing this item, includes all contracted and non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

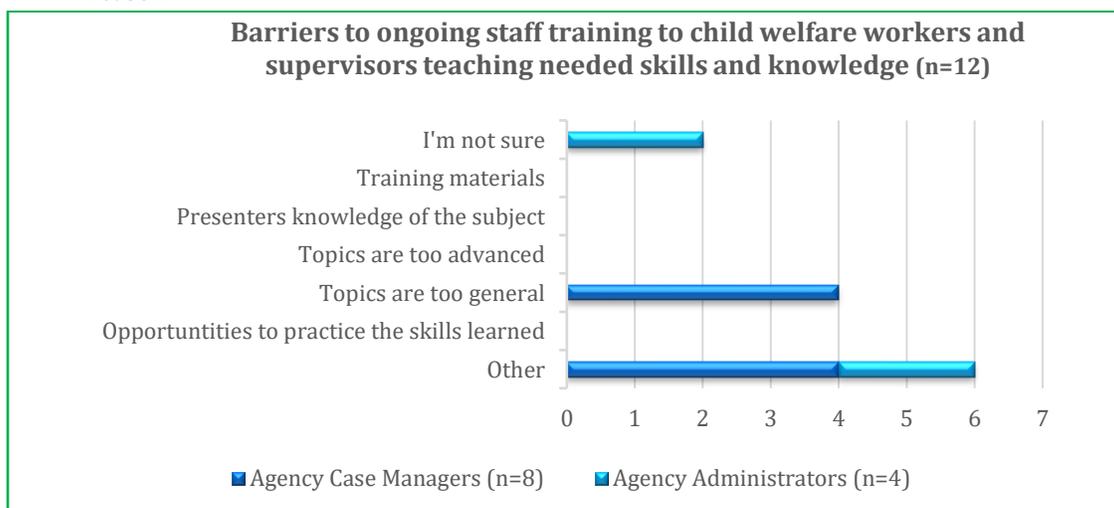
"Staff," for purposes of assessing this item, also includes direct supervisors of all contracted and non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Feedback regarding written case plans was sought from two Stakeholder groups: Agency Administrators and Agency Case Managers.

- A. To the best of your knowledge, does the ongoing training provided to each group below teach the skills and knowledge needed for them to carry out their duties in child welfare:



- B. Respondents who did not answer "Every Time" to this question were asked: **In your opinion, what gets in the way of child welfare workers/supervisors getting all the needed skills and training needed to perform their duties from ONGOING trainings? Choose the most important reason:**



STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Other reasons provided:
 - “What ongoing trainings? I am not aware of any ongoing trainings! In-Home doesn’t even have an up-to-date manual to follow. Caseloads are way too high and there are no caseload standards.”
 - “Too busy – high caseloads”
 - “Trainings are too far away, too long for staff with young children, too expensive, too much work in the office so we can’t leave for trainings.”
 - “Not enough specific training offered”
 - “No training available for supervisors to get what is needed for good supervision”
 - “Training for County Supervisors is often not offered. I believe training should be offered by the people at the State level and not by email. Actual face to face training by state administrators on policy change and requirements is best. Possibly a state/county supervisor conference or the state representatives come out to each region to give training.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: FOSTER AND ADOPTIVE PARENT TRAINING

How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

The following individuals are subject to this training requirement: current or prospective foster and adoptive parents; and staff of state licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

Feedback regarding written case plans was sought from four Stakeholder groups: Foster Caregivers, Agency Administrators, Agency Case Managers, and Community.

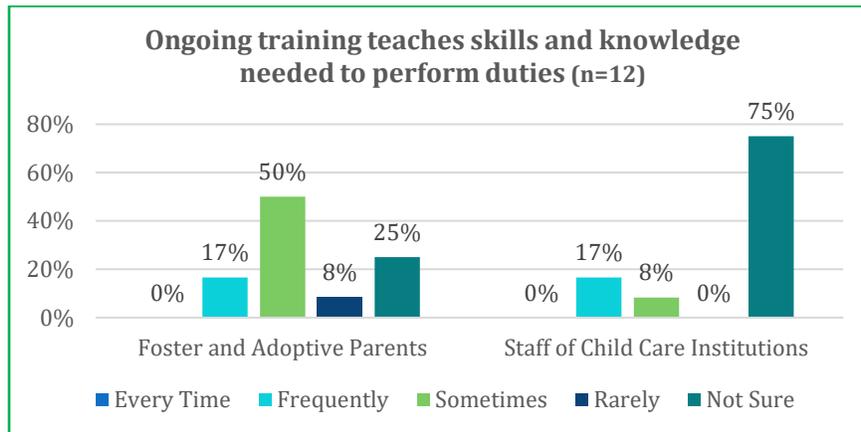
- A. Foster Caregivers were asked the following questions during the Stakeholder's Meeting:
- **What training was initially available to you when you began providing foster/relative care/pre-adoptive care?** Responses include:
 - "First placement was relative care and I was provided absolutely nothing – no training, no support from the case worker, and it was a meth baby. There was no respite care, there was no one to contact with questions. We had to find help on our own."
 - "PRIDE training and the ongoing 10 hours per year." [Others agreed]
 - **Was the initial training of high quality to prepare you for your role as a foster caregiver?**
 - "I sure wish there were some new parents here, because it was so long ago not sure."
 - "A lot of the kids are placed due to drugs and don't think there's a lot of training on that. "
 - "There's a lot of training on "This is what happened to get your kids to this place" but nothing on 'What do we do now?'"
 - **What ongoing training is available?**
 - "Ten hours per year."
 - **Is there ongoing training of high quality and does it support you in your role as a foster caregiver?**
 - "Not so much the nuts and bolts of what to do when the kids are in our homes"
 - "Sensory, suicide, trauma etc. but only one actually gave us the tools of what to do to deal with the child (sensory integration issues)"
 - "This past year since the region started in with their regional trainings for us, they've done two that have been pretty good. They are 4 hours at a time and several different speakers. We were told they'd be done quarterly but they aren't that often. It's through the Region 8 coalition."
 - "So many trainings are why the kids are the way they are but not how to help them. So many times, we've had to learn it on our own. It's not for lack of giving suggestions, but it might be that they can't get them out here. We need training on how to help babies who are born drug exposed, and what to expect from these children."

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Have you participated in, or are you aware of specialized training for adoption in your area? If so, is that training of high quality?
 - All participants responded with a “No.” Several commented “Never heard of any adoption training”
- What are the barriers, or what gets in the way, of receiving necessary training?
 - “It seems like it should be so easy, but maybe it’s a time issue, but if everything comes down to time shouldn’t that be a red flag for people and shouldn’t something be done about it? Like, more people?”
 - “I would pay for a one-hour consult with an expert. Kids are so different now as compared to 15 years ago. They used to be so easy, but not anymore.”
 - “I think lack of money is a barrier (paying the speaker, securing the site, paying/providing child care, etc.)”

B. Agency Case Managers and Agency Administrators were asked the following questions:

- To the best of your knowledge, does the training provided to each group below teach the skills and knowledge needed for them to carry out their duties in child welfare?



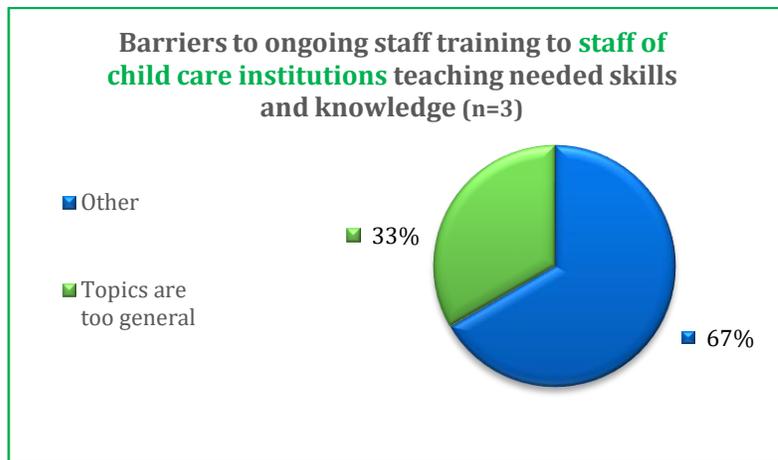
- Respondents who did not answer “Every Time” to this question were asked: **In your opinion, what gets in the way of trainings to foster and adoptive parents or staff of child care institutions getting all the needed skills and training needed to perform their duties from ONGOING trainings? Choose the most important reason:**



- Other reasons provided:
 - “Dates, time and length of trainings”
 - “Hard to find respite so they can attend trainings”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “The trainings are too long and difficult for families with children to commit to”
- “Actual training to Foster and Adoptive parents from Agency and State staff. This can be done by setting up an actual training so foster parents can get their credit hours along with information that does not get covered in the PRIDE training under the current model. It is always best to have a follow-up training in a group setting with foster and adoptive parents due to questions they have after they have a placement and not before.”

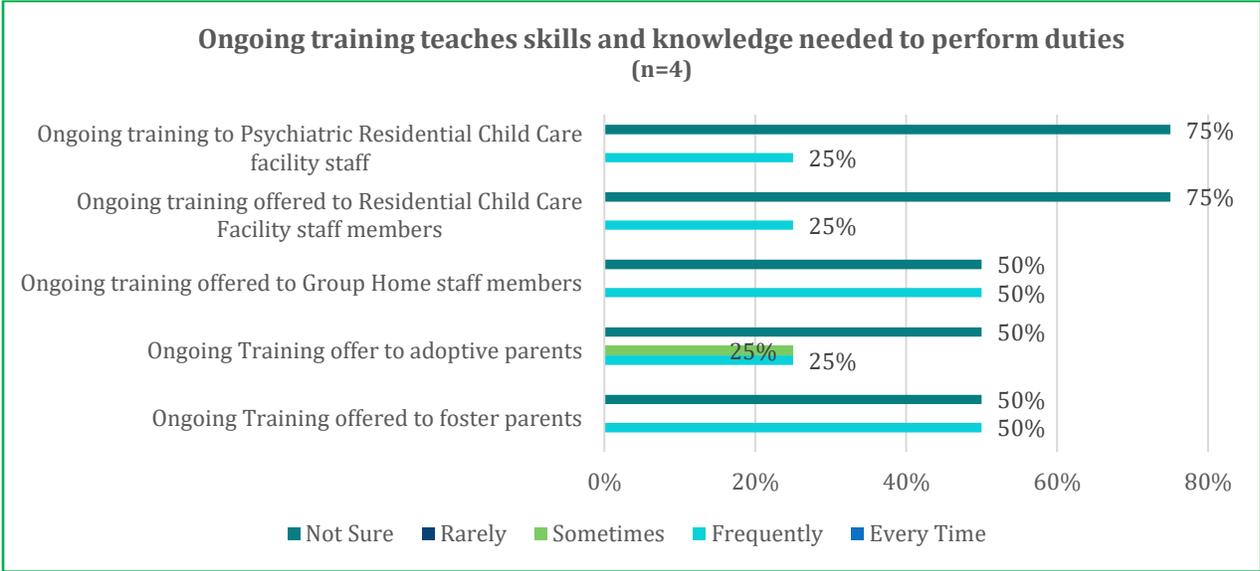


- Other reason provided:
 - “Group Homes and RCCF's as well as the state need to take a look at the training that is needed to continue to address the issues around our youth. We are seeing increased safety concerns in our youth at a younger age and youth are being refused placement even though it is needed to assure their safety. The State and the group homes need to rise to the challenge and even though the risks are their they are a very important part of how we care for the youth’s needs and safety.”
 - “Not applicable”

- C. Community Stakeholders were asked the following questions:
- To the best of your knowledge, does the training provided to each group below teach the skills and knowledge needed for them to carry out their duties in child welfare?

(results displayed on the next page)

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS



- Respondents who did not answer “Every Time” to this question were asked: *In your opinion, what gets in the way of trainings to foster and adoptive parents, or residential group home staff getting all the needed skills and training needed to perform their duties from ONGOING trainings? Choose the most important reason:*



- Other reasons provided:
 - No other reasons provided.



- Other reasons provided:
 - No other reasons provided.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

SERVICE ARRAY AND RESOURCE DEVELOPMENT: SERVICE ARRAY

How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (CFSP)?

1. Services that assess the strengths and needs of children and families and determine other service needs;
2. Services that address the needs of families in addition to individual children in order to create a safe home environment;
3. Services that enable children to remain safely with their parents when reasonable; and
4. Services that help children in foster and adoptive placements achieve permanency.

Feedback on this systemic factor was sought from all seven groups: Foster Caregivers, Youth, Parents, Agency Case Managers, Agency Administrators, Legal, and Community.

A. Questions asked of Foster Caregivers:

- Are services available to support the children placed with you? Do you receive the support you need to do the work you do with the children placed with you?
 - There was consensus among participants that there were some services available for the children, yet their area was lacking in some services. Specific comments received include:
 - “We need specialized training and support with drug exposed infants”
 - “Respite – not very available; if you take an older child to respite, you pay them their daily amount. If you take a baby there you provide diapers, formula, etc. and you still pay the daily rate – it’s kinda hard to write that check out because it’s kinda like you’re getting double charged – it’s unequal.”
 - “For what’s available – yes, but there isn’t a lot available”
 - “We don’t have a psychiatrist who works with children. We have to go to Bismarck.”
- Are there specific services you feel you need to support you in your ability to provide care for your foster that is/are NOT available? Please give examples.
 - Specific comments received include:
 - “Experts in drug-exposed babies to help us understand what to expect or how to provide care”
 - “If I’m not at home with the kids, it upsets the balance/routine for the kids and makes it really tough on them.”
 - “I have family members who help but there’s no training for them to help so they know what to do (i.e. older biological kids of the foster parents, grandparents, etc.)”
 - “Could we have a trainer come in the home to help all of us?”
 - “I believe we need a mentor-ship program for foster parents. That would be so good for new foster parents to be matched with experienced foster parents that they can call for support/information. They have that for fostering pets, but nothing for fostering kids. I think they lose new foster parents after their first placement, and maybe that wouldn’t happen if they’d had a mentor to help them, or answer questions. That would be easy to do, and at no cost.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Has anyone experienced challenges getting the child to services they need due to distance or other transportation problems? Did you receive the support you needed?
 - Some agreed transportation has been available from the agency, yet concerns were expressed. Specific comments include:
 - “I had to file to get my Medicaid license due to the high medical needs of the kids and all the expenses to get the kids to services. The agency has never offered to transport the kids to appointments.”
 - “Our agency has offered to assist with transportation to appointments.”
- Can you identify a service in your area that is particularly helpful for families in your area, or a service that is particularly helpful as you provide care for your foster child? Can you identify a specific service that is missing in your area?
 - Helpful:
 - “WIC, Occupational Therapy & Physical Therapy services”
 - “Child care coordinator from the county works very hard to find childcare for our kids.”
 - Missing (not working well):
 - “I didn’t know WIC was an option for our foster kids”
 - “School – lots of issues with IEPs at the school. The schools need more training on how to handle the kids. Better communication with all the teachers so they’re aware of what the special needs are.”
 - “Therapy for the kids is helpful to them but doesn’t teach us how to apply what’s happening in therapy in the home, like tools to help the kids.”
 - “Have to repeat what’s going on with the kids to all their providers – need to communicate among themselves better.”

B. Questions asked of Youth:

- Did you receive all the services you needed to meet your goals (i.e. Mental/behavioral health needs/physical/dental, etc.)?
 - “Yes, I am “[a few others agreed]
 - “When I went into placement I was small, now I’ve had a growth spurt and my worker approved money for new clothes but the place where I’m placed won’t buy me clothes and my worker won’t do anything about it.”
 - “They won’t do any dental work at all on me even though I need a root canal, because I refused having my wisdom teeth removed when my parents were out of the country”
 - “There’s a lot of medical treatment we don’t get because the nurse [at the facility] refuses to schedule doctor appointments for us; she dispenses meds incorrectly too; I jammed my hand, it’s swollen, and she won’t schedule me an appointment with the doctor to get it checked out”
 - “She won’t answer the phone when requests are made, and permission needed for PRN medications”
 - “I’ve been telling the nurse for months that I need to see a doctor for a long-term medical condition and the appointment hasn’t been made”
 - “I’ve filed many grievances and they don’t do anything”
 - “Case worker doesn’t do anything about it”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “I have trouble in school and need a tutor to get help, am trying my best but need more help – grades are pretty low”
- While you are in foster care, do you feel the restrictions or limitations on the things you can do are typical for teens? If you feel there are more restrictions in foster care, what are some examples?
 - Specific comments include:
 - “Yes – depends on the foster home, though”
 - “The foster parents had their own children, who are younger than us, babysit us which made us feel like crap”
 - “Getting sent here is a limitation in itself and I really don’t need to be here, they just can’t find a foster home for me, so I get put here.”
- Have you received Independent Living Services? If no, were you offered the opportunity and declined? If yes, who provided the IL Services, i.e. PATH’s IL program, custodial agency, facility, foster parents, all the above, etc.?
 - “Yes” [all agreed]
 - Specific comments include:
 - “Yes – I love my IL worker” [others agreed]
 - “I think everything is working well – but some of these things I already know, I basically raised myself”
 - “The services that they have are good, and they meet the needs for many but they don’t adjust the services to account for any skills or experience that some youth have”
- What was most helpful (IL service) and what would have made the service more beneficial?
 - Due to conversation on other topics, this specific question was not asked.
- Have you had an opportunity to talk to a counselor? If no, would you have liked to? If yes, was this helpful?
 - The consensus of the group was yes, the opportunity was provided. Specific comments include:
 - “Yes – I have the best therapist in the entire world”
 - “My therapist is a hard ass but I still love her”
 - “I don’t think we should be forced to go to therapy (other agency, institution require the service) because it can be pretty traumatic if you’re not ready or wanting to talk about things that happened”
 - “If you don’t want to talk about a traumatic experience, I think you can just explain it and compromise with the therapist – you have to be willing to talk about what you need”
- What would help the agency’s ability to ensure that services children and family need are provided?
 - Specific comments include:
 - “If my worker would listen and call me back or answer my calls, and actually talk to me, I think we’d be on the same page” [others agreed]
 - “I agree with the others – I’ve been in a foster home for a little over a year and my worker comes every month or every other month, but she doesn’t relay any information. She doesn’t call, she doesn’t send letters, so I don’t know what’s going on.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “I’m going to be an adult in a couple months and she [case worker] literally doesn’t care about me and haven’t help me plan for what’s going to happen after I’m 18. All they really talk about is signing myself back into the program and I wish they’d quit because I’m counting down the days to when I never have to be in the system again – we came from a bad situation, and we don’t need to be in another one” [others agreed]
- “My worker visits every month and she takes my calls”
- On a scale of 1 -10, with 10 being the highest, how would you rate the services you have received from your custodial agency while in foster care?
 - “8”
 - “2”
 - “1”
 - “7”
 - “8”
 - “8”
 - “7”
 - “2”
- Is there anything else you thought would be asked that wasn’t or anything else you would like to share about the services you have received from your custodial agency?
 - “We found out 5 minutes before we called you and honestly we didn’t think it was a live person, just a phone survey.”

C. Questions asked of Parents (n=1)

- My child/ren and family’s situation is considered by the agency when deciding what services are provided:
(0) Strongly Agree; (0) Agree; (1) Disagree; (0) Strongly Disagree (0) Does Not Apply
- There are many services available in my area that can help families safely care for their children:
(0) Strongly Agree; (1) Agree; (0) Disagree; (0) Strongly Disagree (0) Does Not Apply
- My family has access to services that address our needs and help me meet the case plan goals:
(0) Strongly Agree; (1) Agree; (0) Disagree; (0) Strongly Disagree (0) Does Not Apply
 - Comments received:
 - “Children are considered, but support of resources for a mother are not. I have done all I’ve done without support from them”
- Are there specific types of services you or your family need, or needed, but are not available in your area?
(1) Yes (0) No
- Briefly comment on your responses to the statements above (Optional):
 - “Domestic violence classes aren't easily available, and groups can be difficult to find. I've been on my own for everything I've done. But I've done well anyways.”

Parents were provided a list of services (Case Management Services, Intensive In-Home Therapy, Parent Aide, Addiction Services, Mental Health Services, Domestic Violence Treatment, Anger Management Treatment, Prime Time Child Care and Transportation Assistance) and asked: (A) Was it a service you felt you or a family member needed, (B) Was this a service offered to you and your

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

family, and (C) If you participated in the service, do you feel it is helping, or helped, improve your parenting?

Case Management: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (1) Y (0) N

C: (0) Y (1) N (0) DNA

Intensive In-Home Therapy: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (0) Y (1) N

C: (0) Y (0) N (1) DNA

Parent Aide: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (1) Y (0) N

C: (1) Y (0) N (0) DNA

Parenting Classes: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (0) Y (1) N

C: (1) Y (0) N (0) DNA

Addiction Services: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (0) Y (1) N

C: (1) Y (0) N (0) DNA

Mental Health Services: Respondents indicated:

A: (1) Y (0) N (0) IDK

B: (0) Y (1) N

C: (0) Y (1) N (0) DNA

Domestic Violence Services: Respondents indicated:

A: (0) Y (0) N (1) IDK

B: (0) Y (1) N

C: (0) Y (0) N (1) DNA

Anger Management Treatment: Respondents indicated:

A: (0) Y (1) N (0) IDK

B: (0) Y (1) N

C: (0) Y (0) N (1) DNA

Prime Time Child Care: Respondents indicated:

A: (0) Y (0) N (1) IDK

B: (0) Y (1) N

C: (0) Y (0) N (1) DNA

Transportation Assistance: Respondents indicated:

A: (1) Y (0) N (0) IDK

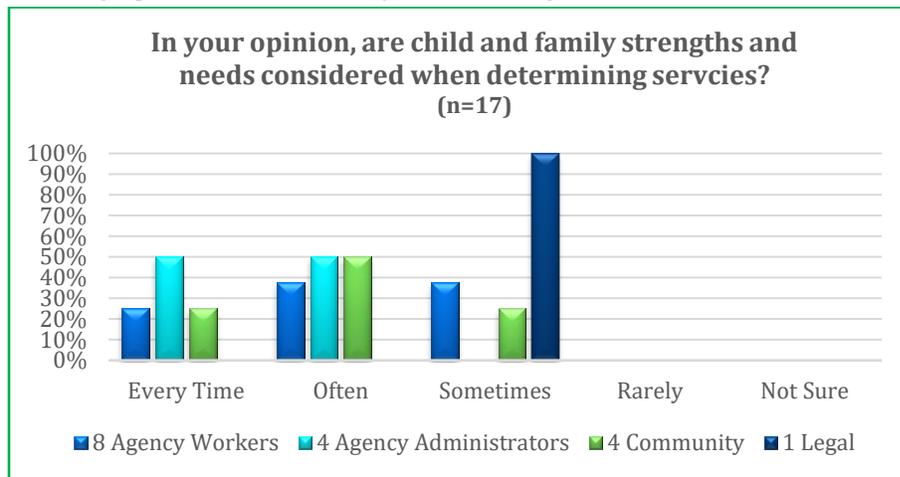
B: (0) Y (1) N

C: (0) Y (0) N (1) DNA

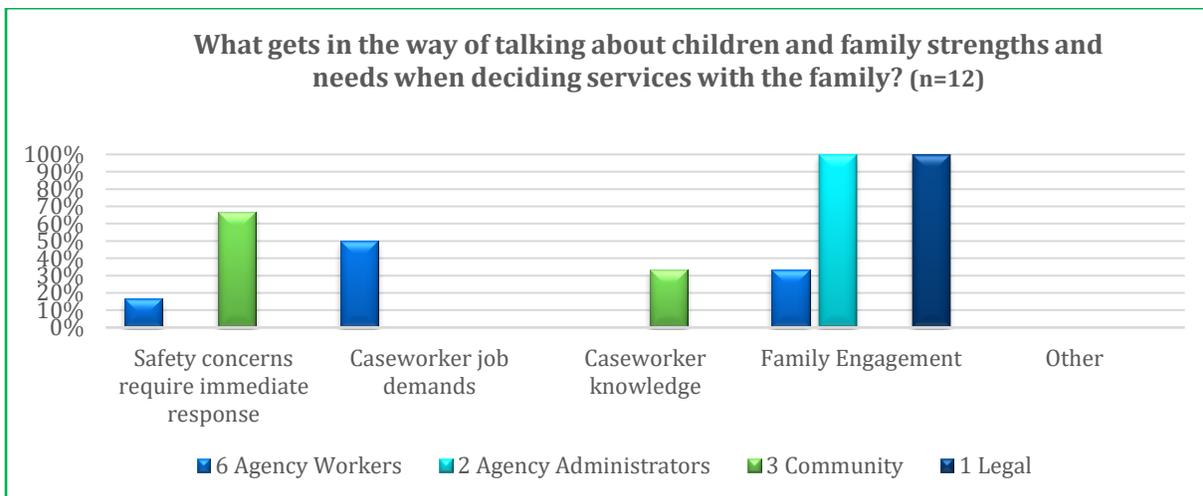
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Briefly comment about your responses to the services in the table above (optional):
 - “They tell you what’s required but do not direct or assist you to those services and some counties don’t have the options of certain services”
- Is there anything else that you can think of that would help your local agency provide services that would better able to meet the needs of families in your area?? (n=2)
 - (1) Yes (0) No
- Briefly comment on your responses to the statements above (Optional):
 - “Social Services really need to support hope and possibility to families struggling. No one truly wants to live in that misery. But it is nearly impossible to get out of when you feel you are alone and treated like an impossible failure especially by the people with so much power over your future with your kids. Please Do Better...God can change people. He has changed me...Better for families we are not hopeless.”

D. Questions asked of Agency Case Managers, Agency Administrators, Community, and Legal partners who reported being a part of child and family team meetings:



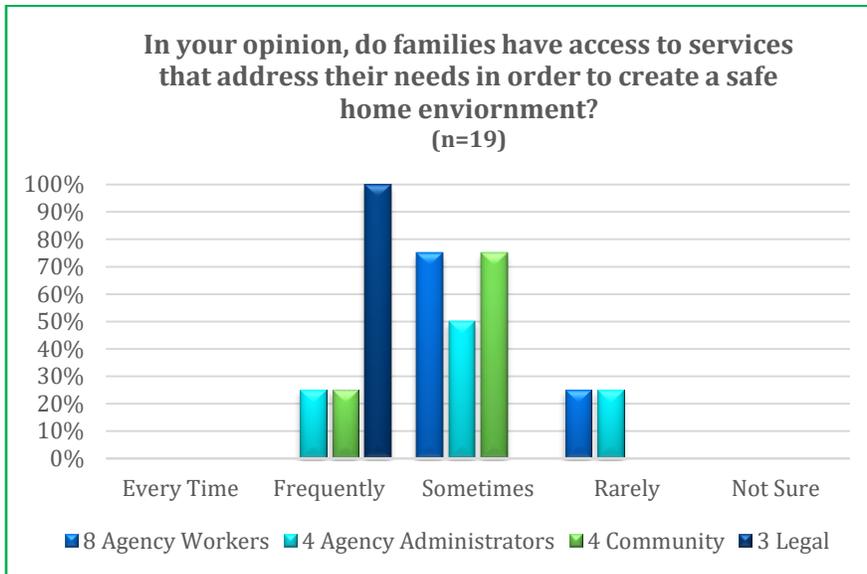
- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question on the next page:



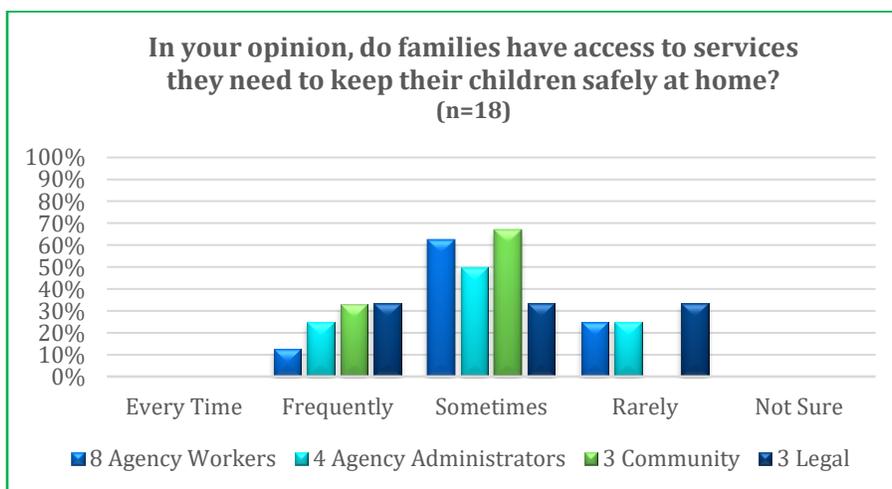
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Other Reasons:
 - No other reasons provided.

E. Questions asked of Agency Case Managers, Agency Administrators, Community, and all in Legal group:



- The respondents who did not answer “Every Time” or “Not Sure” to the above were then asked the follow-up question, “What gets in the way of families receiving services need to create a safe home environment?” (n=19) The top three issues identified were the following:
 - Lack of addiction services AND Lack of mental health services (12 responses each)
 - Lack of funding for treatment (6 responses)
 - Lack of family engagement AND Waiting lists for services (5 responses each)

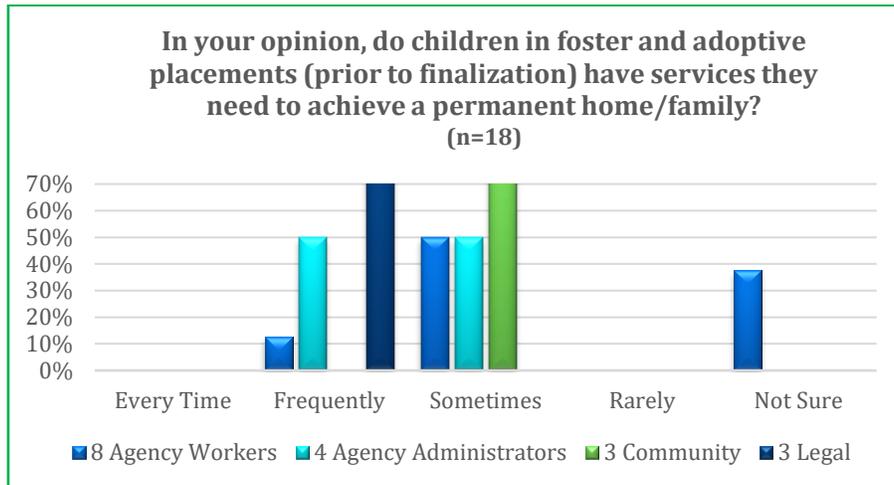


- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of families receiving services they

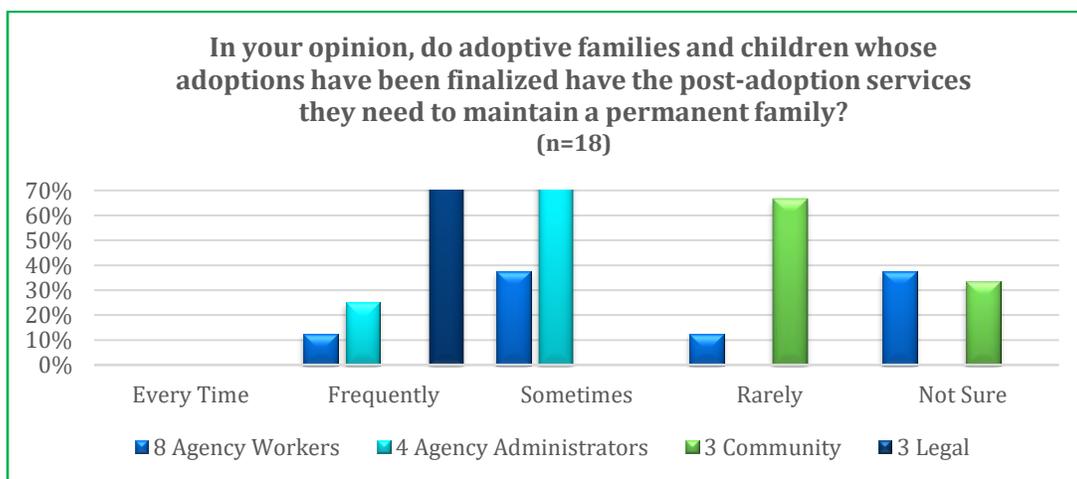
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

need to keep their children safely at home? (n=18) The top three issues identified were the following:

- Lack of addiction services (13 responses)
- Lack of mental health services (9 responses)
- Lack of family engagement (8 responses)



- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “[What gets in the way of children in foster and adoptive placements \(prior to finalization\) receiving the services they need to achieve a permanent home/family?](#)” (n=15) The top three issues identified were the following:
 - Lack of family engagement (8 responses)
 - Lack of supportive services (i.e. respite care, parent aide) AND Lack of addiction services (7 responses each)
 - Lack of mental health services AND Lack of funding for treatment (4 responses)



- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “[What gets in the way of adoptive families and children whose adoptions have been finalized having the post-adoption services they need to](#)

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

maintain a permanent home/family? (n=14) The top three issues identified were the following:

- Lack of support services (i.e. respite care, parent aide) (7 responses)
 - Lack of family engagement AND lack of mental health services (6 responses each)
 - Lack of addiction services, Lack of intensive in-home family therapy, Waiting lists for services AND Funding for Treatment (4 responses each)
- F. Other comments expressed by foster parents and community members not specifically related to other systemic factors:
- "In Western ND there are very few options for mental health treatment, lack of Intensive In-home availability, No mental health unit, more barriers than solutions. Services have been cut back to the point that if the county doesn't provide it then the service isn't available. State and local providers have moved away from providing direct support to our youth and families."
 - "Addiction Services in Region 8 needs to be monitored much more closely. We have the services, but they are extremely poor quality. For example; do not send records when requested, do not complete random drug screens, do not give higher level of treatment when requested, making inappropriate statements to clients."
 - "Our region lacks supports for addiction and mental health, which makes it very difficult to be able to reduce risk in those categories ESPECIALLY in the rural areas."

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

SERVICE ARRAY AND RESOURCE DEVELOPMENT: INDIVIDUALIZING SERVICES

How well is the service array and resource development system functioning statewide to ensure that the services in the Array of Services systemic factor can be individualized to meet the unique needs of children and families served by the agency?

Feedback on this systemic factor was sought from all seven groups: Foster Caregivers, Youth, Parents, Agency Case Managers, Agency Administrators, Legal, and Community.

A. Questions asked of Foster Caregivers:

- **How individualized are the case plan for the children?**
 - Specific comments include:
 - “When they are infants, probably easy to do but wonder if, when the kids are older and have more unique, individual needs it happens”
 - “I don’t think the needs are met with meth babies and those needs are very frustrating. We don’t have anyone helping us know what to do. I don’t think the knowledge was there within the agency or the doctors to know how to help us take care for the infant. We begged for respite but didn’t get it. Their solution was to move the kid.”
 - “The whole plan is what the parents need to do to get their kids back. There is nothing in the plan about what the kids need.”
 - “The deprivation cases focus more on what the parent needs to do, and the delinquency cases focus more on what the child needs to do.”
- **Are the children’s needs being met with the services provided?**
 - Specific comments include:
 - “I think for the most part they get everything they need but it takes a lot of searching by us as foster parents to find what they need or figure out what they need because we are with them every day.”
 - “Our first experience with a meth baby was tough – we’re the ones staying up all night with them and the residue from the baby would cause us to be positive – nobody knew that but us (law enforcement told us that)”
 - “We were told to burn everything the kids bring with them because it’s not safe”
 - “We’ve had lice, scabies, bed bugs, etc. at our house.”
- **Can you provide an example of how the agency (of your foster youth) in the last year adjusted a case plan or service to meet the specific need of the child (religious, cultural, language, special needs, etc.)?**
 - One example was provided:
 - “Parents wouldn’t sign off for any medical help, so I assume it was the state’s attorney who helped us “force their hand” to get the children’s medical needs met.”

G. Questions asked of Youth:

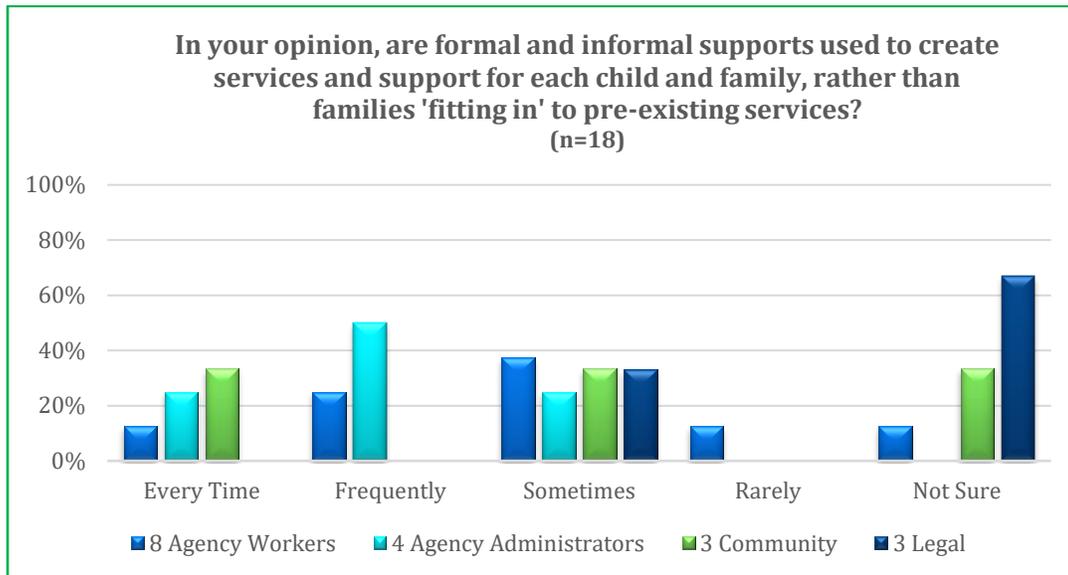
- **Do you feel the services you and your family receive (d) are (have been) the right services for your family?**
 - Specific comments include:
 - “No” [others agreed]

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Mine are, but I understand where the others are coming from.”
 - Did you think these services were culturally appropriate and addressed any special needs of you or your family?
 - Specific comments include:
 - “More like every single kid gets the same services and if they don’t respond to what’s given they get thrown into placement” [others said it depends on the worker somewhat, but they do the same thing]
 - “If the workers listened to our opinions, it would be better”
 - How did your worker help you understand what services you were going to receive?
 - Specific comments include:
 - “They didn’t” [several said this]
 - “I’d just be told to pack my stuff cuz I’m moving (no warning)”
 - “My worker’s been pretty good”
 - “I had no idea what was going on”
 - “The system has been good at protecting me and finding places that would benefit me the most”
 - Did any of the decisions about services change after talking with your worker?
 - Due to discussion on other topics, this specific question was not asked.
 - When you think about the services you and your family have received from the agency, please share an example of one good experience and one that needs to be improved.
 - Good
 - “My worker has helped me a lot”
 - Improve
 - “They [case workers] don’t help – they pretend they don’t want to move me, but there’s nowhere else – every time I’m moved”
 - Were services available at times when you were able to attend? For example, did you have to miss school if you wanted to participate in a service, or were accommodations made whenever possible to meet your needs?
 - Due to discussion on other topics, this specific question was not asked.
- H. Question asked of Parents (n=1) (*Options for response included Strongly Agree, Agree, Disagree, Strongly Disagree, Does not Apply*)
- The agency works with me to identify and offer services to help the unique needs of my family.
 - (0) SA; (0) A; (0) D; (1) SD (0) DNA
 - The case managers I have worked with were available and respectful.
 - (0) SA; (0) A; (1) D; (0) SD (0) DNA

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

I. Questions asked of Agency Case Managers, Agency Administrators, Legal and Community:



- The respondents who did not answer “Every Time” to the above question were then asked the follow up question, “What gets in the way of formal and informal supports being used to create services and supports that are developmentally and culturally appropriate?” (n=11)
The top five issues identified were the following:
 - Services tailored to meet the needs of parents [6 responses]
 - Lack of culturally appropriate services [5 responses]
 - Collaboration between Child Welfare, Behavioral Health, Developmental Disability, [4 responses]
 - Lack of residential services for dually diagnosed children [4 responses]
 - Child’s distance from home/Tribe AND Language barriers [3 responses]

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

AGENCY RESPONSIVENES TO COMMUNITY: STATE ENGAGEMENT WITH STAKEHOLDERS PURSUANT TO CFSP AND APSR

How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

Feedback was sought from all seven Stakeholder Groups.

A. Youth were asked the following questions:

- Now, thinking more generally, when you think of child and family services in your area, can you tell me one good thing that is happening and one thing you think really needs to be changed?
 - Time and discussion on other topics did not permit this question to be asked.
- Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?
 - “No, we don’t know about it” (All but one agreed)
 - “I don’t think any of us were informed on this”
 - “I know the state has a lot of meetings that the youth can go to, but I’m not allowed to go because I’m in the facility and my case worker wouldn’t let me go.”
- What can the system do to gather more input from youth as it develops and reviews the plan the state agency has for serving children and families?
 - “Listen”
 - “Answering the phone or calling back”
 - “Start caring about our opinions”
 - “Don’t shut us down in CFTs b saying ‘you’re too young to make this decision’”
[others agreed]

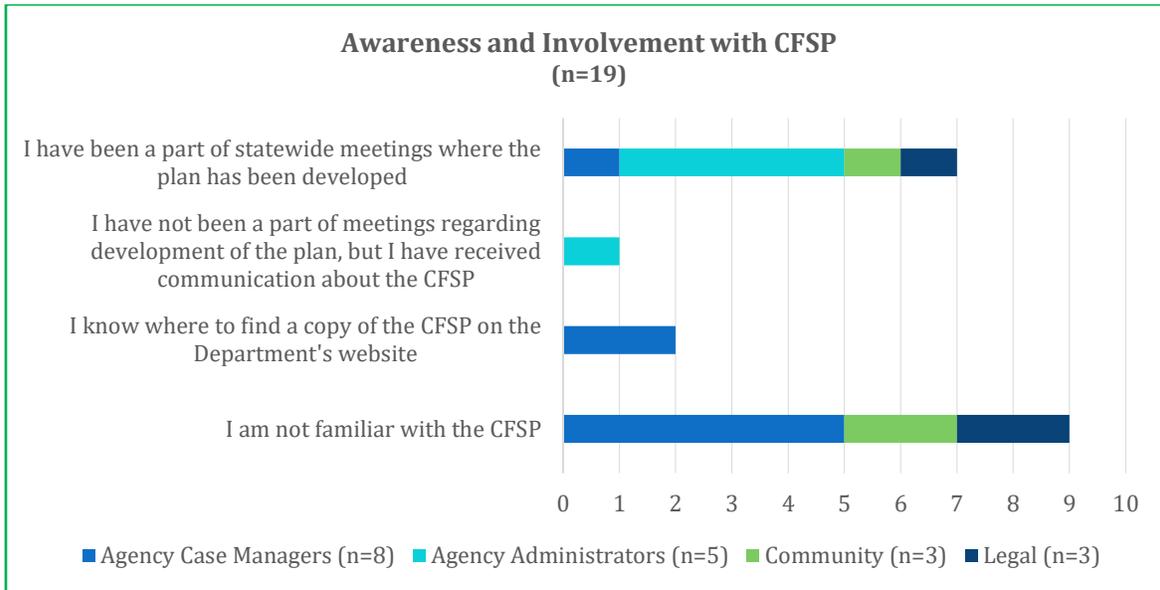
B. Foster Caregivers were asked the following questions:

- Have you, or anyone you know, been involved in a “IV-B Planning” meeting – a meeting to work on the state’s five-year plan, also called the Children and Family Services Plan (CFSP)?
 - There was a universal “No” response.
- Have you, or anyone you know, been a part of a meeting to review the annual progress of the state’s IV-B plan, known as the Annual Progress and Services Report (APSR)?
 - There was a universal “No” response.
- Do you know where to find the state’s plan and annual reports on the Department’s website?
 - There was a universal “No” response.

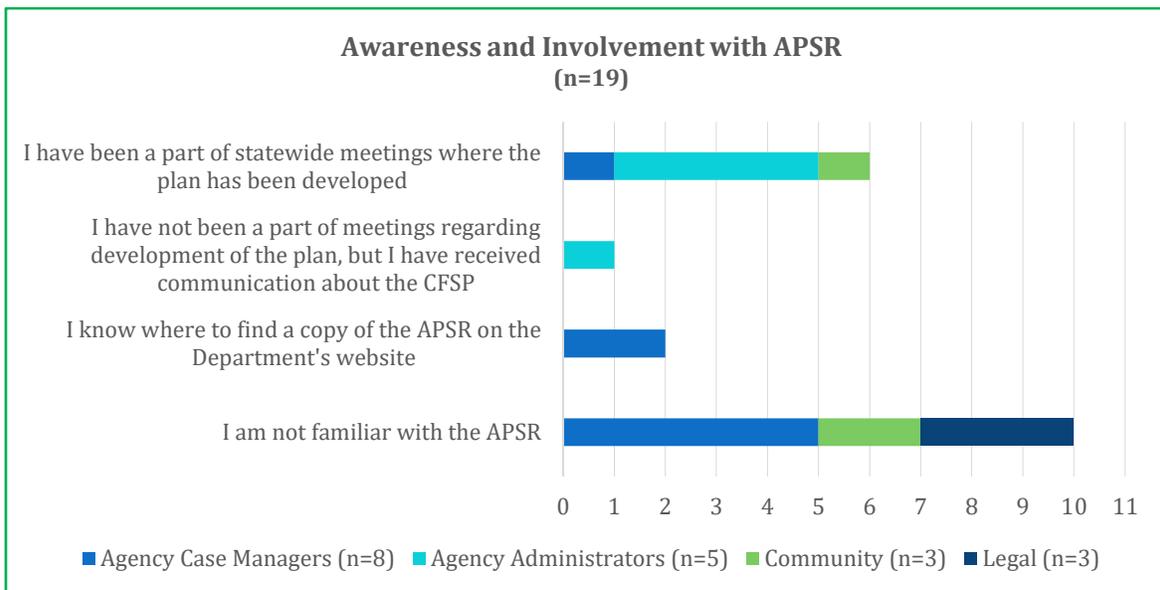
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

C. Agency Case Managers, Agency Administrators, Legal and Community Stakeholders were asked the following questions and could check up to two responses within each question:

- Which statement below reflects your involvement in the meetings held every five years to develop the state’s five-year plan for child welfare services, known as the “IV-B” or “CFSP – Children and Services Plan”:



- Which statement below reflects your involvement in the meetings the annual reviews of the “IV-B Plan” or “CFSP” (known as the APSR):



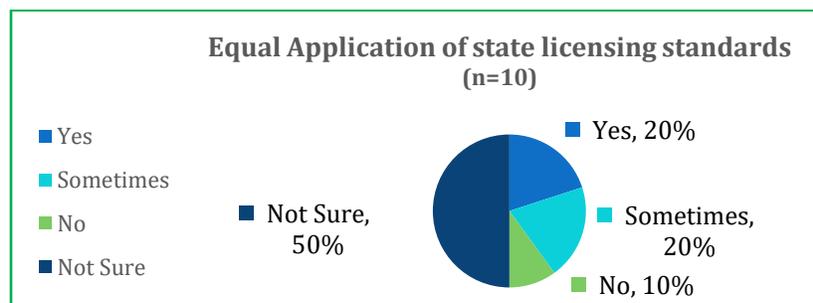
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION: STANDARDS APPLIED EQUALLY

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

Feedback on this systemic factor was sought from three groups: Foster Caregivers, Agency Case Managers indicating responsibilities Foster Care or CPS, and Community.

- A. Foster Caregivers were asked the following question:
- **Are the state’s standards applied equally to all licensed foster home or child care institutions?** Responses from the participants include the following comments:
 - “I would think yes”
 - “I think so”
 - “The hardest part of the licensing is the training”
- B. Agency Workers and Community groups were asked the following questions:
- **Do you believe there is equal application of state standards when licensing foster care providers in North Dakota (ex: Licensed Foster Homes, Residential Child Care Facilities, Group Homes):**



- **Please comment on your response (n=1):**
 - “Some licensors ask more in-depth questions than what is required, to gain a better understanding of family dynamics, strengths, weaknesses, etc.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION: REQUIREMENTS FOR CRIMINAL BACKGROUND CHECKS

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that 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?

Feedback for this systemic factor was sought from two groups: Community Stakeholders and Legal Stakeholders indicating a role as Defense Attorney, Guardian Ad Litem, and Juvenile Court Officers.

A. Question asked of Legal Stakeholders:

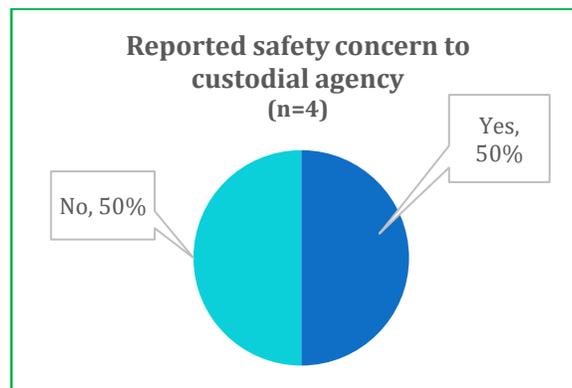
- From your experience, are the required criminal background checks being conducted for foster parents, adoptive parents, and staff in child care facilities?



- Please comment on your response above (n=0):
 - None received

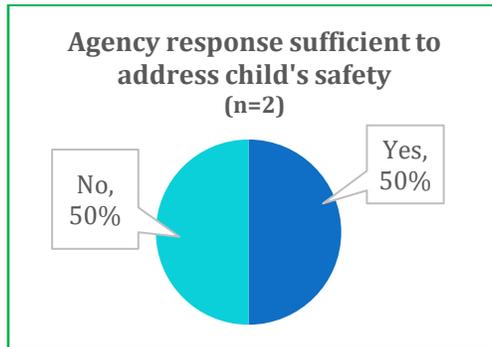
B. Questions asked of both groups:

- In your role, have you ever raised a concern with a custodial agency pertaining to the safety of children placed outside the home either in a foster, adoptive or residential group care setting?



STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

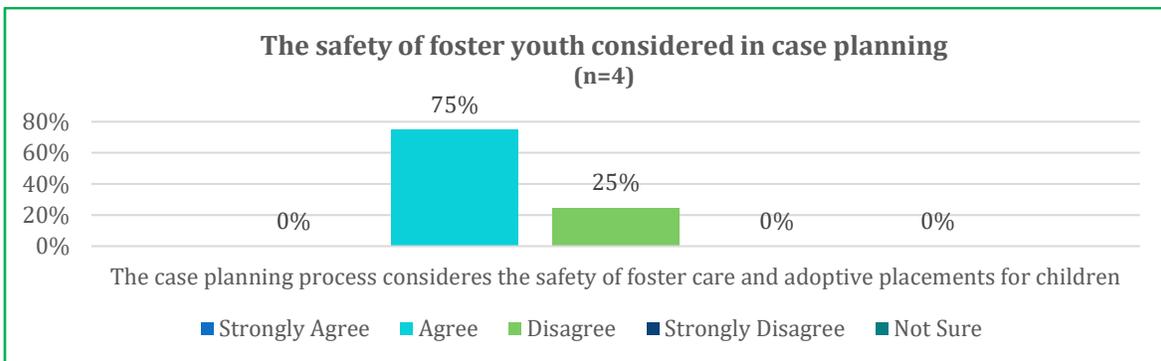
- If yes, do you believe the custodial agency’s response was sufficient to ensure the child’s safety?



- Please comment on your response above(n=0):
 - No comments received.

C. Question asked of Community Stakeholders:

- Please indicate your level of agreement with the following statement regarding child welfare agencies in your region:



- Please comment on your response above (n=0):
 - No comments received.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION: DILIGENT RECRUITMENT OF FOSTER AND ADOPTIVE HOMES

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the 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 is occurring statewide?

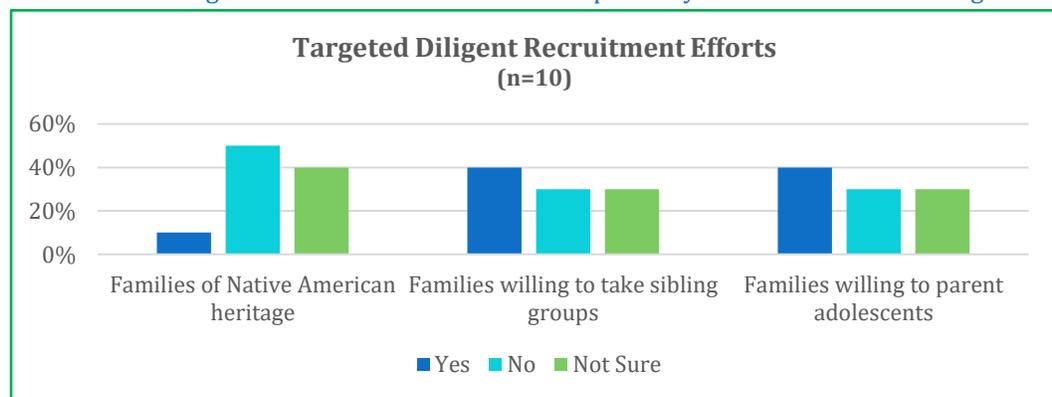
Feedback on this systemic factor was sought from three groups: Foster Caregivers, Agency Case Managers reporting a role with Foster Care or CPS responsibilities, and Community.

A. Foster Caregivers were asked the following questions:

- Are there diligent efforts to recruit foster parents in this region?
 - “No”
 - “The majority come from a local church who preaches it from the pulpit.”
 - “They try to have a picnic, but it usually gets cancelled because there’s no interest”
 - “The coalition bought us t-shirts, coffee, and coffee mug, etc. It must be an area they’re working on”
- Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
 - “We were told we couldn’t take any Native kids from the reservation because we’re not Native”
 - “Sometimes I think we don’t know the things that are going on, like specialized homes for trafficked children”
 - “I just assumed that teenagers went to group homes or those other places”

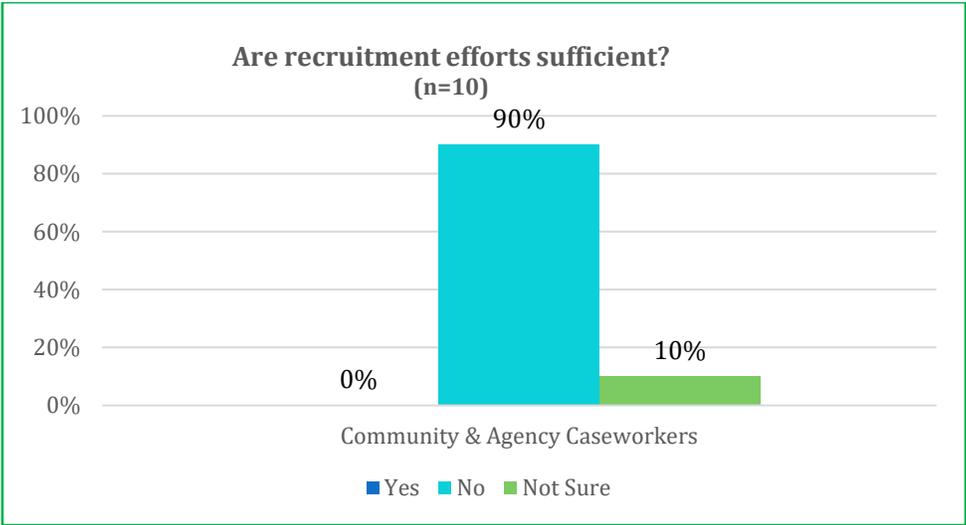
B. Questions asked of Agency Case Managers reporting job responsibilities in Foster Care or CPS, Legal and Community participants:

- Is there diligent recruitment of foster and adoptive in your area for the following:



STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Are recruitment efforts sufficient to provide the number of licensed foster homes or adoptive homes to meet the region’s needs?



- What could be done to increase the availability of foster and adoptive homes able to meet the needs of youth in foster care in your area? (n=6)
 - “Social Services Foster Care Staff could be more approachable and easier to work with.”
 - “More informational opportunities and recruitment events to make people aware of the need”
 - “More community engagement”
 - “Bringing more awareness of the need for foster homes in the community by doing recruitment events within the community”
 - “Better support, reimbursement and respite care”
 - “More foster care training could possibly increase interest in becoming foster parents”

C. Question asked of Agency Case Managers indicating a role with licensing foster care licensing:

- Because you have indicated you have responsibility for the licensing of foster homes in your agency, please briefly comment on how your local recruitment effort is informed by the ND Foster and Adoptive Parent Recruitment plan. (n=1)
 - “Unsure”

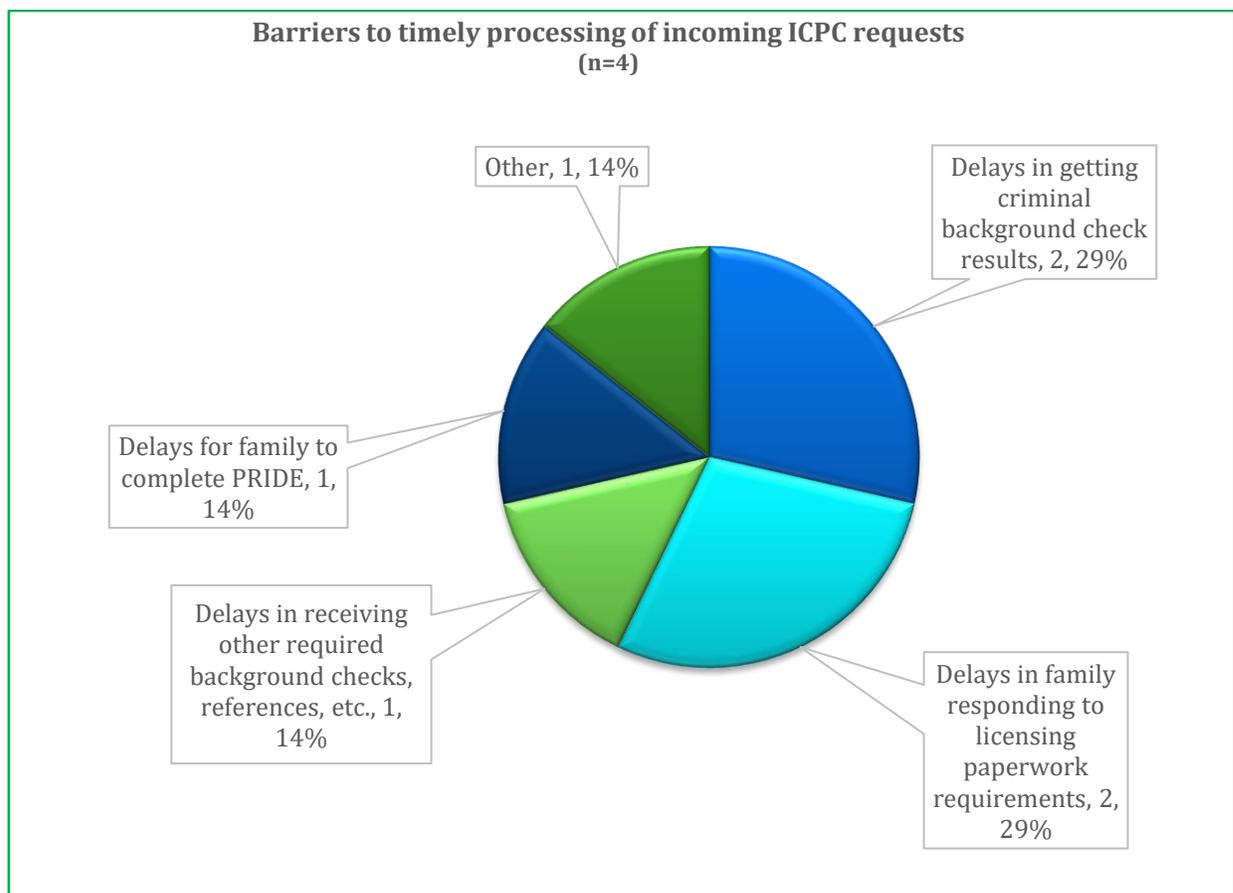
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION: STATE USE OF CROSS-JURISDICTIONAL RESOURCES FOR PERMANENT PLACEMENTS

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Feedback on this systemic factor was sought from those indicating a role with processing Interstate Compact for the Placement of Children (ICPC) requests from: Agency Case Managers (n=1), Agency Administrators (3), and those indicating a role with AASK in the Community Survey (n=0).

- A. ICPC data indicate that our state has challenges in meeting the 60-day requirements (75 days if certified the delay is in the child's best interest). To help the state understand the nature of these challenges, please select up to three factors listed below which contribute to delays in processing incoming ICPC requests in a timely manner:



- Other reason provided:
 - "I don't know that we have had delays"

APPENDIX

Appendix

- 1.1 R3 Federal CFSR State Rating Summary Report, September 2016
- 1.2 CY18 BHS OCR Site Rating Summary Report, October 2018
- 1.3 CY18 BHS OCR Site Rating Summary Report, October 2018: In-Home Services Breakdown
- 1.4 CY18 BHS OCR Site Rating Summary Report, October 2018: Foster-Care Services Breakdown
- 1.5 ND OCR Review Team Composition

APPENDIX

1.1 Case Rating Summary – ND R3 All Sites (Grand Forks, Fargo, Bismarck/Mandan), September 2016

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	82.35% n=14	17.65% n=3	n=48					
Outcome S1				82.35% n=14		17.65% n=3	n=48	n=17
Item 2	69.57% n=16	30.43% n=7	n=42					
Item 3	73.85% n=48	26.15% n=17						
Outcome S2				73.85% n=48	4.62% n=3	21.54% n=14		n=65
Item 4	87.5% n=35	12.5% n=5	n=0					
Item 5	80% n=32	20% n=8	n=0					
Item 6	42.5% n=17	57.5% n=23	n=0					
Outcome P1				40% n=16	57.5% n=23	2.5% n=1	n=0	n=40
Item 7	85.71% n=18	14.29% n=3	n=19					
Item 8	76.67% n=23	23.33% n=7	n=10					
Item 9	84.62% n=33	15.38% n=6	n=1					
Item 10	69.7% n=23	30.3% n=10	n=7					
Item 11	72% n=18	28% n=7	n=15					
Outcome P2				72.5% n=29	22.5% n=9	5% n=2	n=0	n=40
Item 12	47.69% n=31	52.31% n=34						
Sub-Item 12a	70.77% n=46	29.23% n=19						
Sub-Item 12b	50% n=26	50% n=26	n=13					
Sub-Item 12c	73.33% n=22	26.67% n=8	n=35					
Item 13	59.02% n=36	40.98% n=25	n=4					
Item 14	67.69% n=44	32.31% n=21						
Item 15	55.77% n=29	44.23% n=23	n=13					
Outcome WB1				44.62% n=29	41.54% n=27	13.85% n=9		n=65
Item 16	97.83% n=45	2.17% n=1	n=19					
Outcome WB2				97.83% n=45	2.17% n=1	0% n=0	n=19	n=46
Item 17	85.71% n=42	14.29% n=7	n=16					
Item 18	85.71% n=42	14.29% n=7	n=16					
Outcome WB3				77.59% n=45	15.25% n=9	6.9% n=4	n=7	n=58

APPENDIX

1.2 Case Rating Summary –ND OCR BADLANDS, October 2018: All Cases

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	75% n=3	25% n=1	n=0					
Outcome S1				75% n=3		25% n=1	0% n=0	n=4
Item 2	50% n=1	50% n=1	n=2					
Item 3	50% n=2	50% n=2						
Outcome S2				50% n=2	0% n=0	50% n=2		n=4
Item 4	50% n=1	50% n=1	n=0					
Item 5	50% n=1	50% n=1	n=0					
Item 6	50% n=1	50% n=1	n=0					
Outcome P1				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 7	0% n=0	0% n=0	n=2					
Item 8	0% n=0	100% n=1	n=1					
Item 9	50% n=1	50% n=1	n=0					
Item 10	50% n=1	50% n=1	n=0					
Item 11	0% n=0	100% n=1	n=1					
Outcome P2				50% n=1	0% n=	50% n=1	n=0	n=2
Item 12	25% n=1	75% n=3						
Sub-Item 12a	50% n=2	50% n=2						
Sub-Item 12b	25% n=1	75% n=3	n=0					
Sub-Item 12c	50% n=1	50% n=1	n=2					
Item 13	25% n=1	75% n=3	n=0					
Item 14	50% n=2	50% n=2						
Item 15	25% n=1	75% n=3	n=3					
Outcome WB1				25% n=1	25% n=1	50% n=2	n=0	n=4
Item 16	0% n=0	100% n=1	n=3					
Outcome WB2				0% n=0	100% n=1	0% n=0	n=3	n=1
Item 17	100% n=3	0% n=0	n=1					
Item 18	0% n=0	100% n=1	n=3					
Outcome WB3				66.67% n=2	33.33% n=1	0% n=0	n=1	n=3

APPENDIX

1.3 Case Rating Summary – ND OCR BADLANDS, October 2018: *In-Home Services Breakdown*

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	100% n=2	0% n=0	n=0					
Outcome S1				100% n=2	0% n=0	0% n=0	n=0	n=2
Item 2	100% n=1	0% n=0	n=1					
Item 3	50% n=1	50% n=1						
Outcome S2				50% n=1	0% n=0	50% n=1		n=2
Item 12	0% n=0	100% n=2	n=0					
Sub-Item 12a	50% n=1	50% n=1	n=0					
Sub-Item 12b	0% n=2	100% n=2	n=0					
Sub-Item 12c	0% n=0	0% n=0	n=2					
Item 13	0% n=0	100% n=2	n=0					
Item 14	50% n=1	50% n=1	n=0					
Item 15	0% n=0	100% n=2	n=0					
Outcome WB1				0% n=2	50% n=1	50% n=1	n=0	n=2
Item 16	0% n=0	0% n=0	n=2					
Outcome WB2				0% n=0	0% n=0	0% n=0	n=2	n=0
Item 17	100% n=1	0% n=0	n=1					
Item 18	0% n=0	0% n=0	n=2					
Outcome WB3				100% n=1	0% n=0	0% n=0	n=1	n=1

APPENDIX

1.4 Case Rating Summary – ND OCR BADLANDS, October 2018: Foster Care Services Breakdown

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	50% n=1	50% n=1	n=0					
Outcome S1				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 2	0% n=0	100% n=1	n=1					
Item 3	50% n=1	50% n=1						
Outcome S2				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 4	50% n=1	50% n=1	n=0					
Item 5	50% n=1	50% n=1	n=0					
Item 6	50% n=1	50% n=1	n=0					
Outcome P1				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 7	0% n=0	0% n=0	n=2					
Item 8	0% n=0	100% n=1	n=1					
Item 9	50% n=1	50% n=1	n=0					
Item 10	50% n=1	50% n=1	n=0					
Item 11	0% n=0	100% n=1	n=1					
Outcome P2				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 12	50% n=1	50% n=1	n=0					
Sub-Item 12a	50% n=1	50% n=1	n=0					
Sub-Item 12b	50% n=1	50% n=1	n=0					
Sub-Item 12c	50% n=1	50% n=1	n=0					
Item 13	50% n=1	50% n=1	n=0					
Item 14	50% n=1	50% n=0	n=0					
Item 15	50% n=1	50% n=1	n=0					
Outcome WB1				50% n=1	0% n=0	50% n=1	n=0	n=2
Item 16	0% n=0	100% n=1	n=1					
Outcome WB2				0% n=0	100% n=1	0% n=0	n=1	n=1
Item 17	100% n=2	0% n=0	n=0					
Item 18	0% n=0	100% n=1	n=1					
Outcome WB3				50% n=1	50% n=1	0% n=0	n=0	n=2

APPENDIX

1.5 OCR Review Team Composition

Statewide child welfare partners provide the primary source of recruitment for the OCR Workforce. Participation and involvement from local agencies and statewide partners in the OCR Workforce offers a meaningful avenue to ensure practice is assessed from multiple angles.

The OCR Review Team is comprised of two OCR Reviewers with a designated Quality Assurance (QA) Lead. All OCR Review Team members must undergo a certification training to become familiar with the Onsite Case Review Instrument and case review process. Each 'review team' review generally reviews two cases during the Onsite Review, with one team reviewing three cases for this OCR. QA Leads for this Onsite Review included the CFS Administrator of the OCR (2 cases), a retired child welfare professional (1 case), and the OCR Manager (1 case). Second Level Quality Assurance (SLQA) was provided by the OCR Manager for two (2) cases. The Children and Family Services Center Director provided SLQA for two (2) cases.

Review Team members are either a paid 'consultant' for the Children and Family Services Training Center or participate as part of their regular job duties as authorized by their agency of hire.

The collaborative representation included:

ND OCR REVIEW TEAM COMPOSITION FOR BHS ONSITE REVIEW	
Child Welfare professionals from Central Office, DHS	2
Private Non-Profit/University partners (AASK, Dakota Boys & Girls Ranch, PATH ND, Inc., UND's Children Family Services Training Center, etc.)	3
Retired child welfare professionals	2

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