



ONSITE REVIEW FINAL REPORT SEPTEMBER 2018

SOUTHEAST REGION

This report describes the results of the North Dakota Onsite Case Review (OCR) for the Southeast region, involving county social service agencies and the Division of Juvenile Services in Cass, Ransom, Richland, Sargent, Steele, or Traill counties. The Onsite Review was held September 17-21, 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 July 1, 2017 – date the case was reviewed, which was conducted during the week of September 17, 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 12 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 6, 2018

SOUTHEAST 2018 ONSITE REVIEW SUMMARY DETAILS

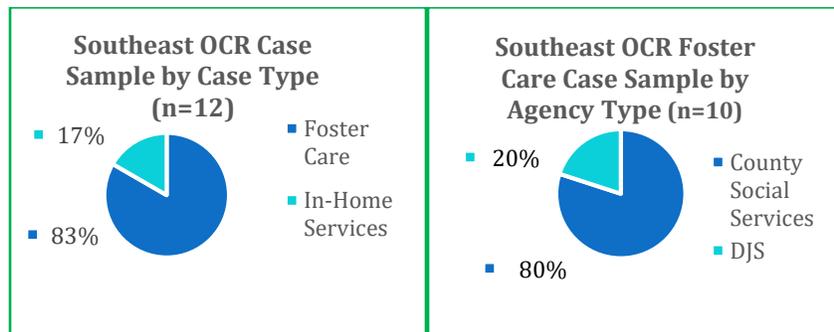
Southeast 2018 Onsite Review Summary Details

CASE FILES REVIEWS

Case Demographics

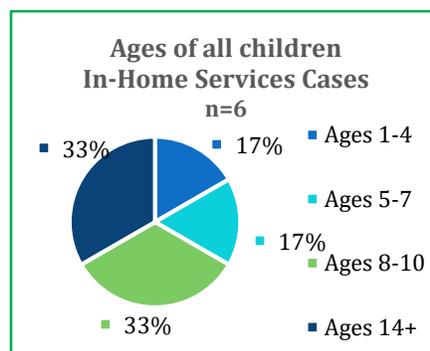
Cases are randomly selected to represent both foster care and in-home services cases. The review focuses on the activity in a case that occurs during the PUR and a rolling quarterly case sampling process is employed. Foster Care cases involved a target child in substitute care for over 24 hours or more. Foster Care services in this region are provided by county social services and the Division of Juvenile Services. 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 three (10) Foster Care and three (3) In-Home Services cases were identified out of an overall sample of 396 Foster Care cases and 38 In-Home Services. Two (2) additional foster care and in-home services cases were identified as alternate cases in the event a case was eliminated during the review week. One In-Home services case was eliminated at the end of review week as interviews with all key case participants could not be secured. Available resources did not permit the review of an alternate case by the end of the quarter, thus the final case sample for this region is reflective of twelve (12) cases.



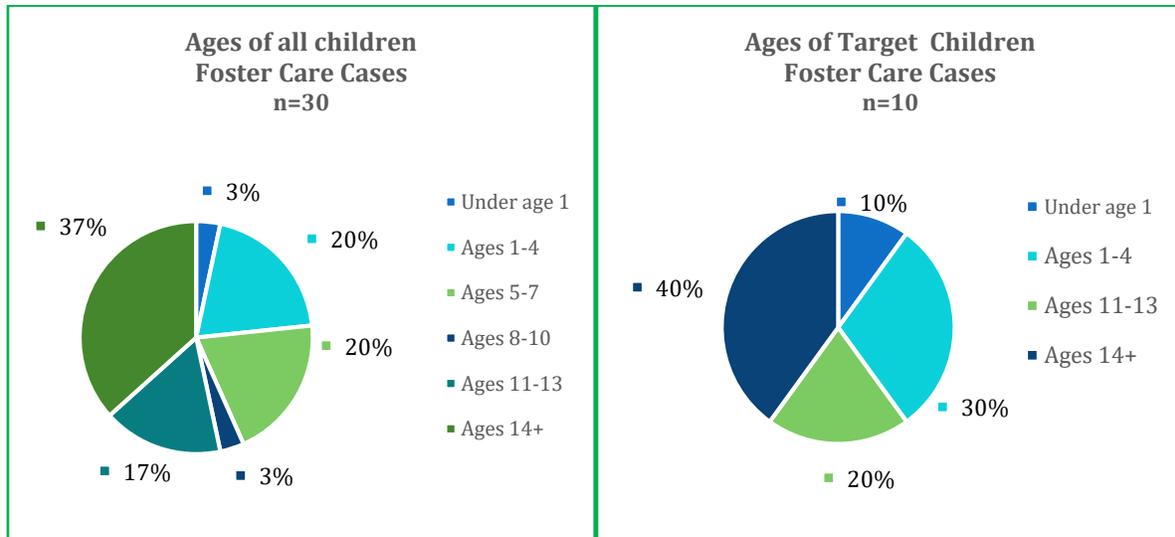
Ages of Children

In-Home Services case involved a total of six (6) children. Their ages ranged from 2 years, 2 months to 16 years 11 months at the end of the PUR.

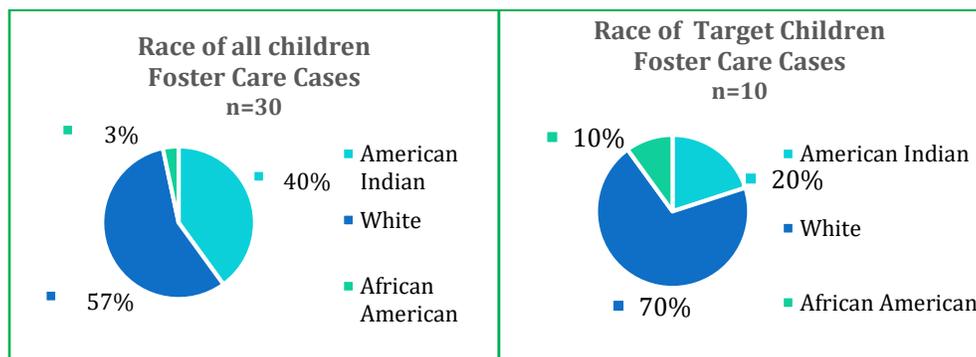
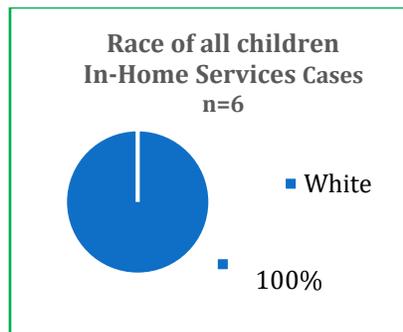


SOUTHEAST 2018 ONSITE REVIEW SUMMARY DETAILS

Thirty (30) children were involved in foster care cases (10 target children and other siblings from their home of removal). Their ages ranged from 11 months to 18 yrs. 6 months at the end of the PUR. Ages for the target children ranged from 1 year 11 months to 18 yrs. 6 months.



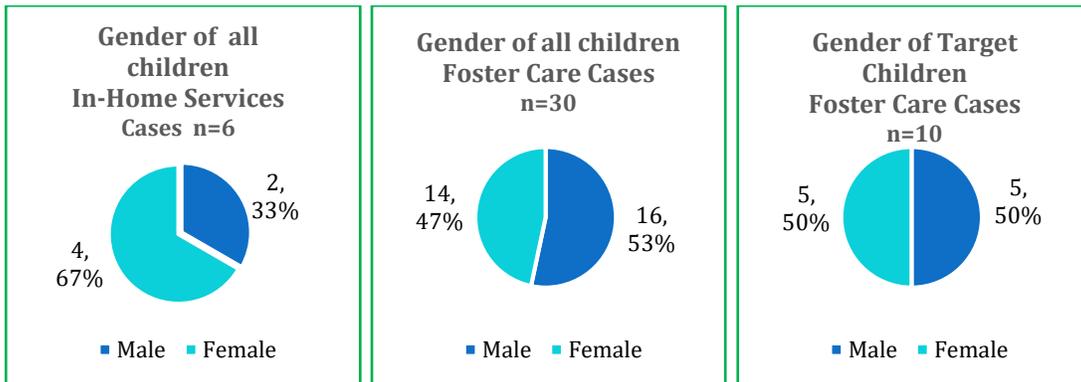
Race/Ethnicity of Children



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

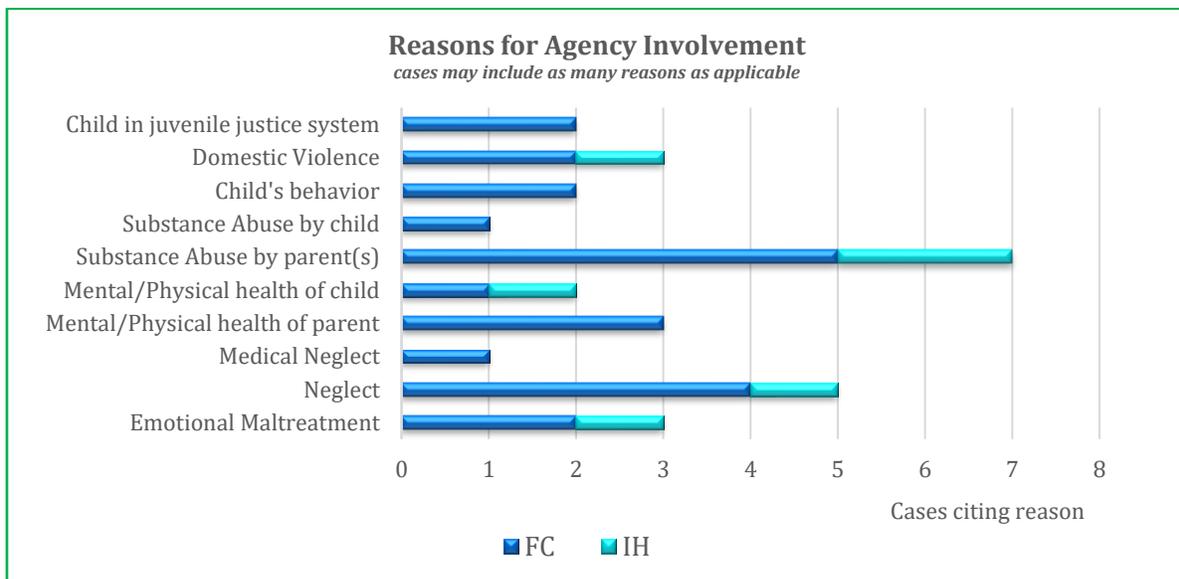
SOUTHEAST 2018 ONSITE REVIEW SUMMARY DETAILS

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 both case types 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, 55 interviews held for the 5 cases included:

- 4 children/youth
- 11 Parents
 - 8 Mothers
 - 3 Fathers

SOUTHEAST 2018 ONSITE REVIEW SUMMARY DETAILS

- 18 Case managers (FC, In-Home Services, CPS)
- 2 Supervisor
- 9 Foster Parents (2 relative & 7 non-relative foster parents)
- 11 “Other” providers (2 residential treatment provider staff, 1 Adoption Worker, 1 Therapist, 1 Alternate Relative Caregiver, 2 relatives speaking to parents’ perspective, 2 relative supports not living in home or in caregiving role, 2 other professionals 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
 - 21 participants received the survey and 9 completed responses were received
 - 38% response rate
- Agency Case Managers Stakeholder Feedback Online Survey
 - 47 participants received the survey and 18 completed responses were received
 - 38 % response rate
- Legal Stakeholder Feedback Online Survey
 - 76 participants received the survey and 19 completed responses were received
 - 25% response rate
- Community Stakeholder Feedback Online Survey
 - 412 participants received the survey via email and 65 completed responses were received
 - 16% response rate

SOUTHEAST 2018 ONSITE REVIEW SUMMARY DETAILS

- Parent Stakeholder Online Survey
 - Eight surveys were 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: 3 participants (*all in-person*)
- Foster Caregiver Stakeholder Meeting: 11 participants (*10 in person and 1 joined via conference call*)

CHILD AND FAMILY OUTCOMES

Child and Family Outcomes

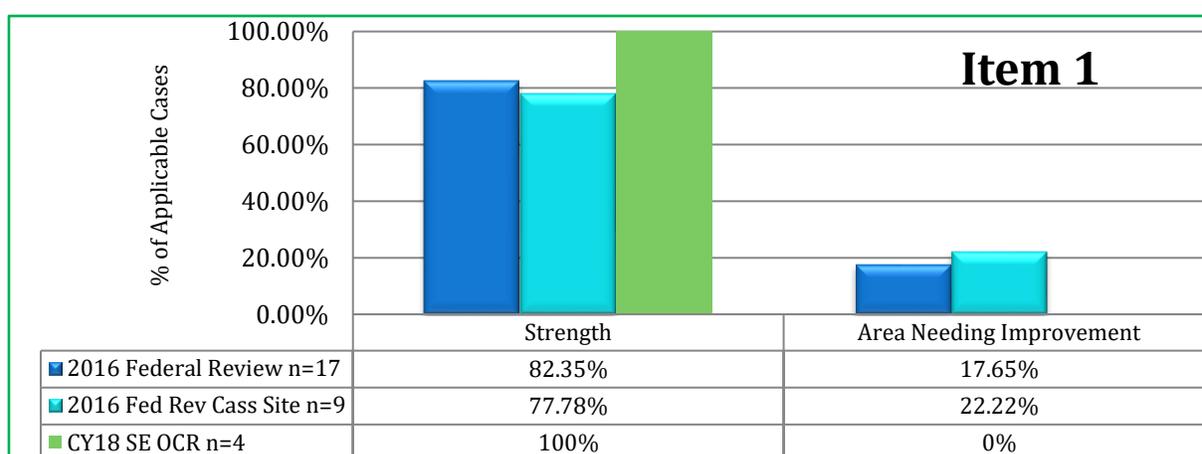
SAFETY PERFORMANCE

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 SE OCR Results: Four 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:

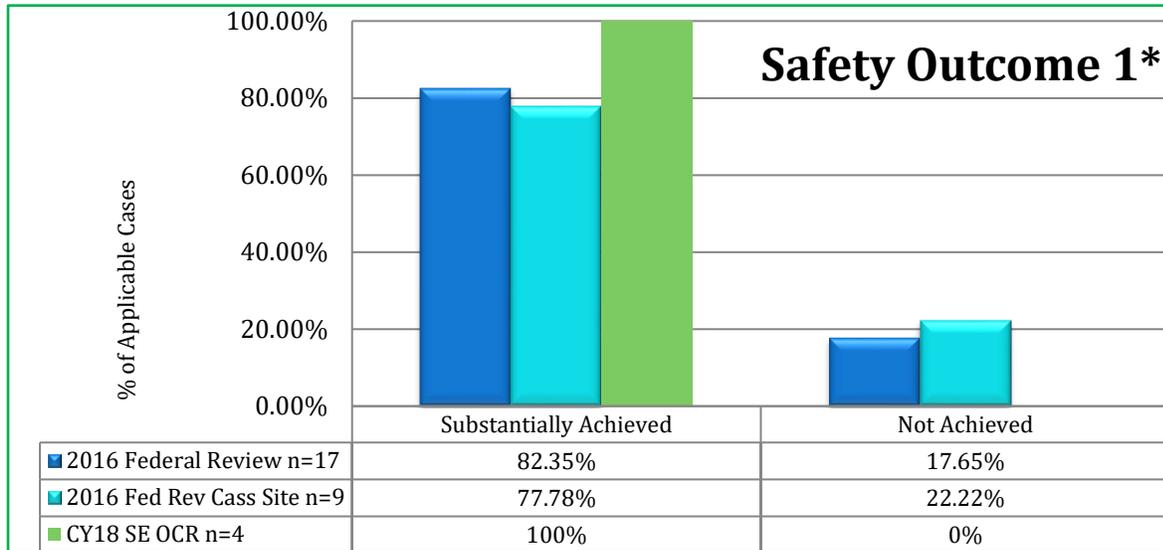
There were ten accepted reports of child maltreatment involving eight alleged child victims received by the agencies during the PUR. These reports involved six distinct allegations. Types of alleged maltreatment included: Neglect (not including medical neglect), Emotional Maltreatment, Domestic Violence in the child’s home, Mental/Physical health of the child, and Substance Abuse by parent(s). The priority category ascribed to each report was as follows: Category A (0); Category B (2); and Category C (8). 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 within the calendar days required in state regulations, even when multiple reports were combined into one assessment. In five of the reports, the agency’s response exceeded state standards by ensuring face-to-face contact was completed on the same day or within 1 day of the report.

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

This review did not identify any key areas needing further examination relative to Item 1.

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 the four 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 did not identify any key areas needing further examination relative to Outcome 1.

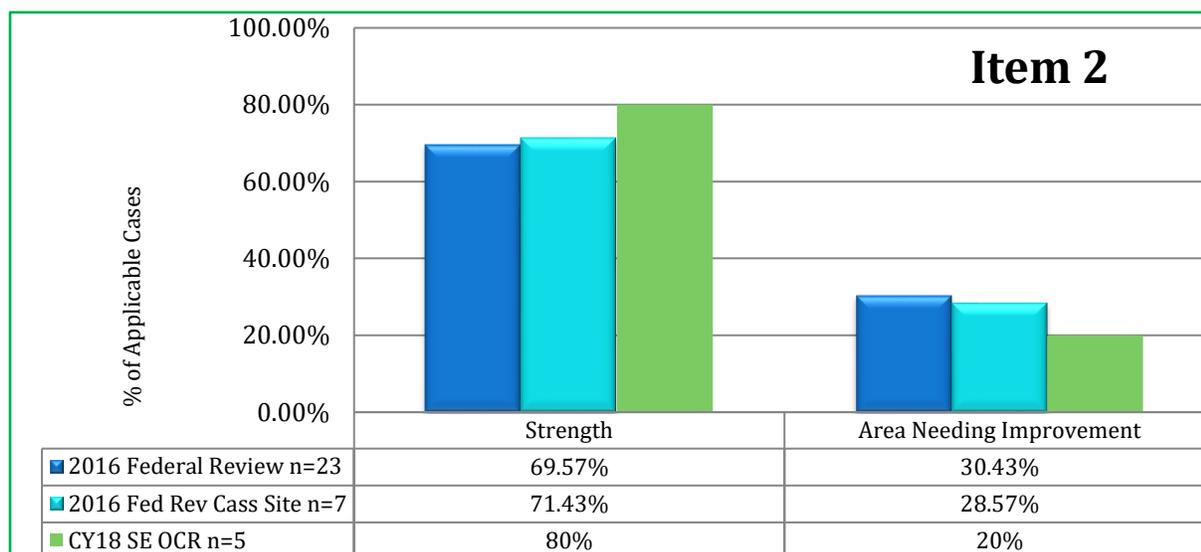
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Four applicable 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 two situations applicable for assessment of this item, the agency made concerted efforts to provide or arrange for the family to protect the children and prevent their entry into foster care. The agency facilitated the family’s access to intensive in-home case management, Family Group Decision-Making, Parent Aide, intensive in-home therapy, and substance abuse treatment services to address safety concerns related to parental substance abuse, financial stress, and unsafe conditions in the home. In the other two situations applicable for assessment of this item, the agency did not make concerted efforts to prevent entry into foster care as the agency but the children’s entry into foster care was necessary for their immediate safety.

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

Concerted efforts were not made to provide appropriate safety-related services and prevent their entry into foster care in one applicable situation. This review highlighted systemic challenges related to service provision following agency involvement with “Pregnant Woman” assessments on several levels (i.e. workforce, policy, service array) and the region is encouraged to further examine practice in this regard to inform practice improvement efforts. Furthermore, while the children’s removal was necessary to ensure the child’s safety in one situation, evidence revealed that local law enforcement was aware of a risky situation through contacts two weeks prior to removal. However, a report was not filed timely. The region is encouraged to explore if such a challenge represented is indicative of a deeper systemic concern.

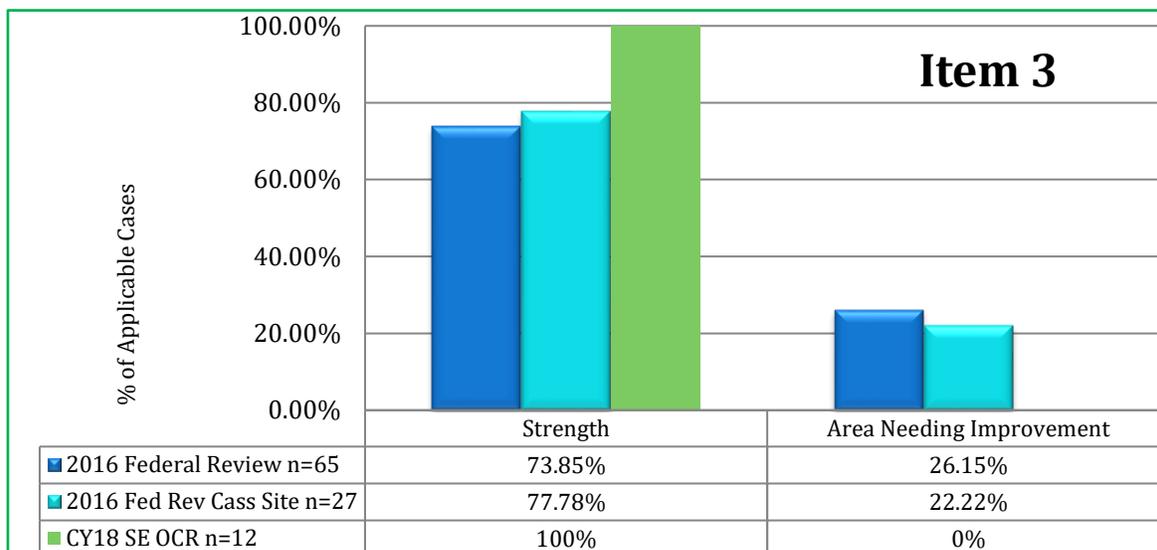
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All twelve 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:

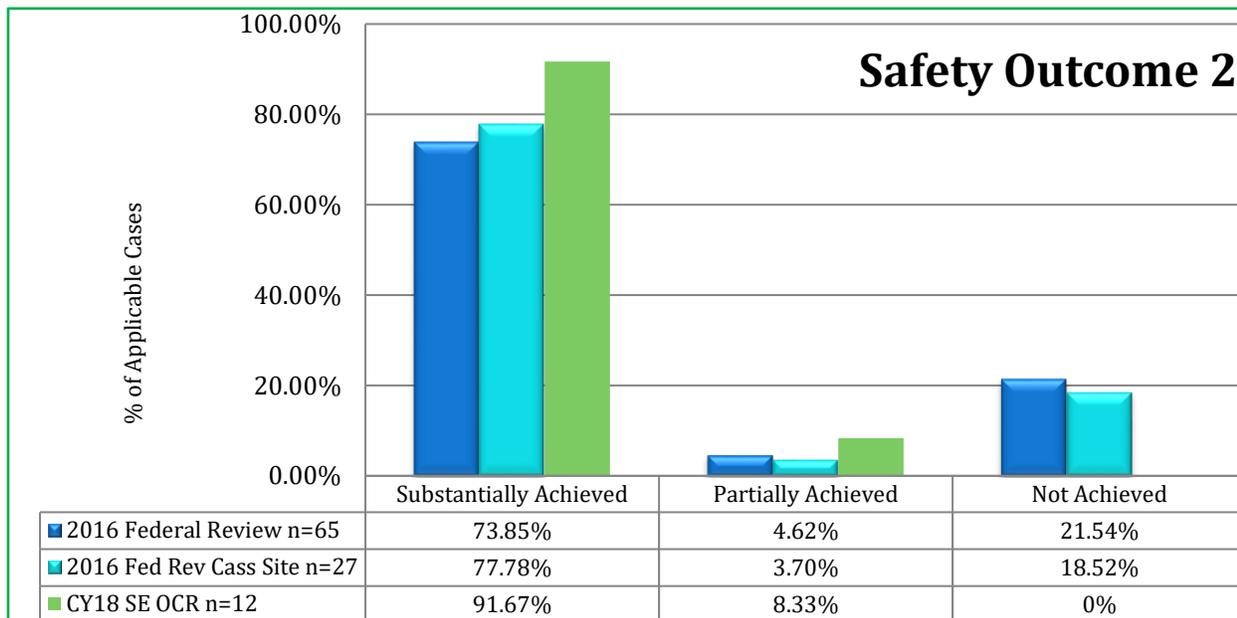
There were no maltreatment allegations about the family that were never formally reported or assessed through CPS nor were there any maltreatment allegations that received a ‘no services required’ finding despite evidence that would support a ‘services required’ finding in any of the 12 cases. The agency conducted an initial assessment that accurately assess all the risk and safety concerns in all applicable cases and ongoing assessments that accurately assessed all risk and safety concerns at critical case junctures occurred in the 12 cases. 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 the 3 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 all ten foster care cases.

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

This review did not identify any key areas needing further examination relative to Item3.

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 and risk was evident. There was a thorough and appropriate consideration of the individual concerns existing within the family, creative efforts to use alternate methods for children with developmental disabilities, 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. In applicable cases, strong safety planning with parent and child involvement was observed. 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 how the region (and state) practice relative to pregnant women assessments. Specifically, further examination of efforts agencies can make to prevent the removal of infants from parents managing substance abuse challenges is encouraged. Additionally, the review indicated a possible practice challenge related to delayed reporting of child maltreatment concerns from law enforcement.

CHILD AND FAMILY OUTCOMES

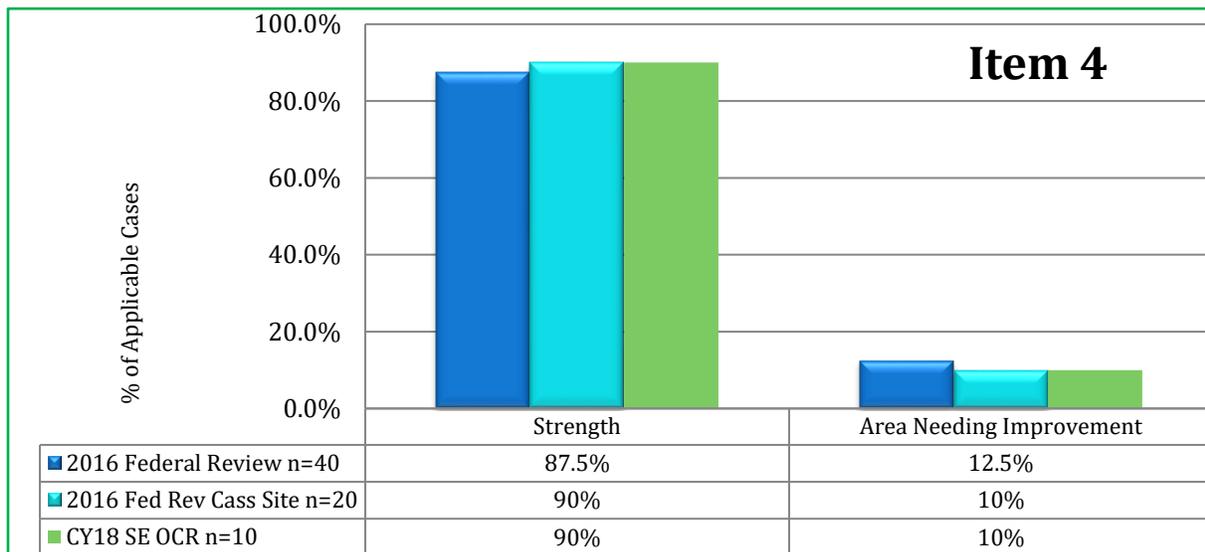
PERMANENCY PERFORMANCE

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 SE OCR Results: Nine applicable cases received a strength for item 4. In each of these cases, 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:

Eight target children had only one placement setting during the PUR. One youth experienced two placement settings during the PUR, yet the placement changes which occurred during the PUR was planned by the agency in an effort to meet the needs of the child and achieve case goals. Results indicate the agency made concerted efforts to provide appropriate services and resources to facilitate placement stability. Furthermore, the current or most recent placement setting for all twelve target youths were stable at the time of the review. Support provided to the placement resource (i.e. frequent contact and meeting foster parent needs) throughout the PUR 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 change experienced by the target youth was not planned by the agency in an effort to achieve the child’s case goal. Increasing an agency’s ability to adequately assess the most appropriate placement resource for child upon entry, especially with relatives, may be an area for further exploration when considering efforts to increase performance on this item. The review also highlighted systemic issues around caring for children with high level and complex needs and caregiver’s long-term ability to commit to their care. This appeared to be an emerging concern within the region but did not negatively impact ratings for this item.

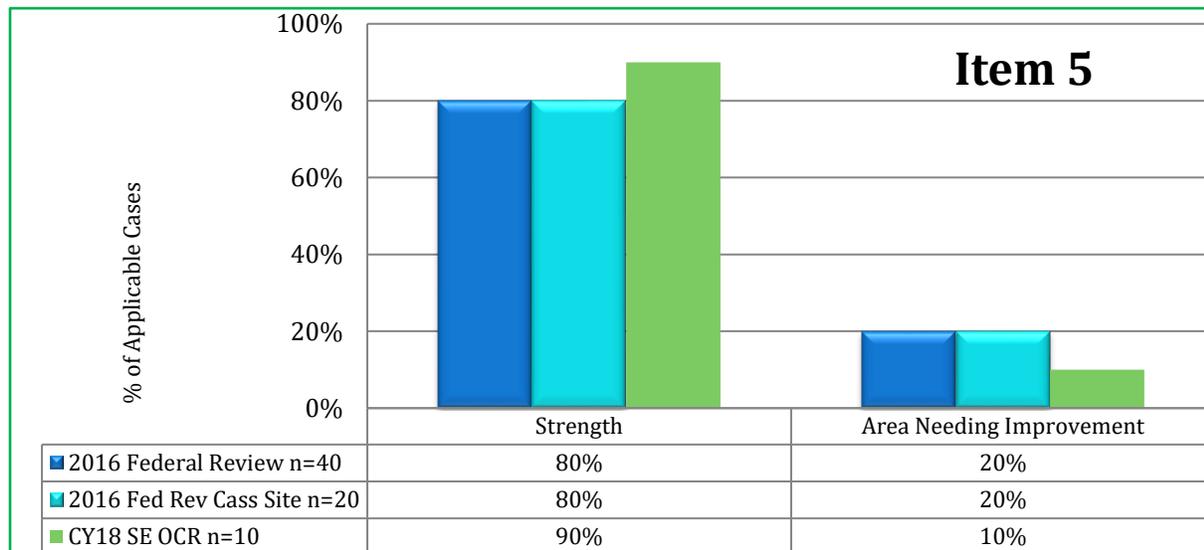
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Nine cases 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, three primary and concurrent permanency goals were assessed as the permanency goals in effect during the PUR: Reunification (7); Adoption (6); Guardianship (0); Other Planned Permanent Living Arrangement (0). Current permanency goals for the applicable cases included: Reunification only (4); Adoption only (5); and, Reunification and Adoption (1). Reviewers noted that in all cases, the target child’s permanency goals were specified in the case record. Most permanency goals in effect during the PUR were established in a timely manner. Furthermore, current case goals in effect during the PUR were appropriate to the child’s needs for permanency and to the circumstances of the case. The agency either filed or joined a termination of parental rights petition in a timely manner prior to the PUR in five applicable situations.

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

Permanency goals in effect during the PUR were not established in a timely manner in one case. An earlier establishment of concurrent goals based on the circumstances of the case was found to be the presenting concern. The region is encouraged to further examine efforts related to the effective use of concurrent planning to strengthen outcomes in this area.

An additional ‘systemic’ issue was noted during the review despite the basic requirement of case permanency goals being in the case file was achieved. There was some difficulty discerning when the permanency goals were established and what goals were in effect at a given time. Information in FRAME and the case record/interviews was not consistent or easily trackable in some cases. This is an area the region may wish to explore further.

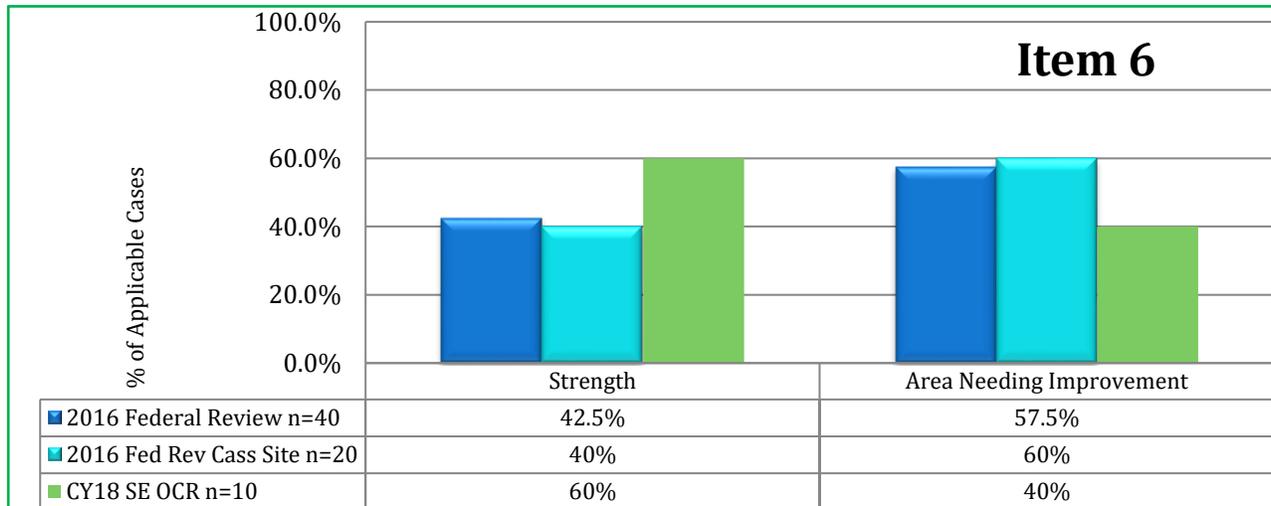
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Six cases 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:

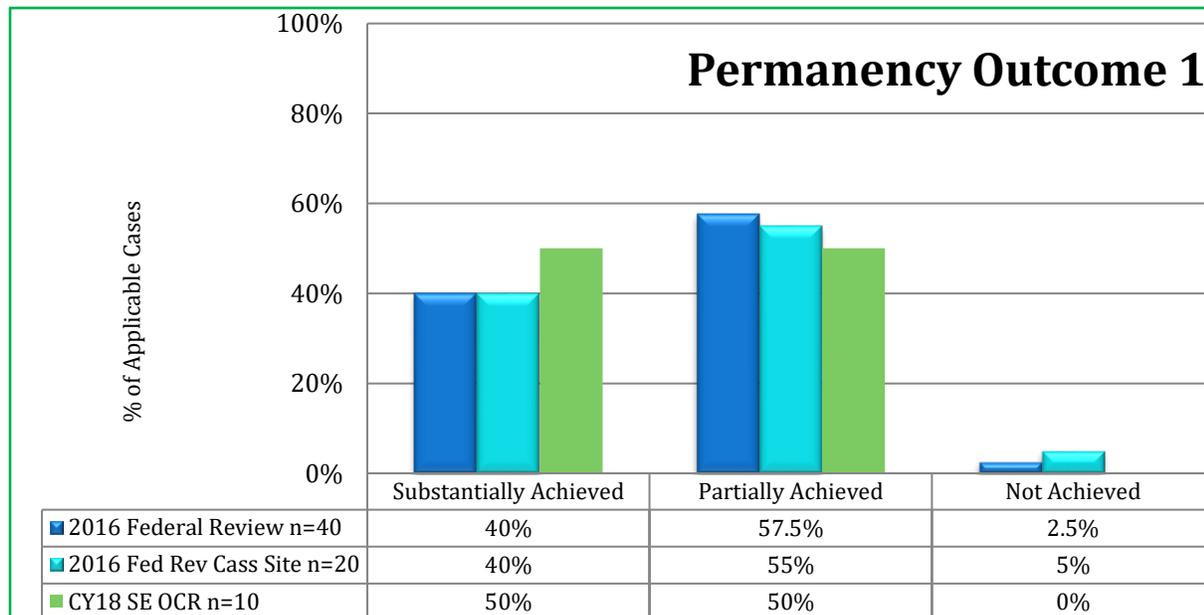
Timely achievement of permanency was realized (or is likely to be realized) for the six cases receiving a strength rating. Four cases involved a reunification with a parent in six months or less. Two cases involve an adoption goal in which the finalization of the adoption is anticipated to occur in 24 months or less. Agency efforts contributing the positive outcomes in these cases 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, involvement of non-custodial parents, effective concurrent planning, and a timely Interstate Compact for the Placement of Children (ICPC) request. Court efforts contributing to the strength ratings in these items include holding regular hearings, timely filing and hearings for a Petition of Termination of Parental Rights. The review also reviewed that the state’s Supreme Court facilitated a timely review of an appeal to the termination of parental rights. Although other challenges impacted the timeliness of that situation, concerted efforts of the court in responding to such appeals were noted.

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

During the PUR, the agency and court did not make concerted efforts to achieve permanency in a timely manner for four cases, all of which involved the permanency goal of adoption. Factors attributed to delayed permanency include: delayed implementation of concurrent planning, court challenges (prolonged termination of parental rights proceedings, continuation of annual reviews despite youth remaining in care for long periods of time, etc.), and adoption service provider challenges (time to complete adoption home studies, delaying recruitment for youth until after TPR, challenges recruiting for children with several special needs, etc.). Systemic challenges within the service array at the agency and court level were noted to impact this item and further analysis is warranted.

CHILD AND FAMILY OUTCOMES

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



Key strengths related to performance on Permanency Outcome 1:

Target children experienced placement stability in their placement settings during the PUR. When changes were necessary in one case, the change was planned and, in an effort, to help the child achieve case goals. All current permanency goals for the target children were found to be appropriate to the case situation. Four cases involved short term foster care placements with successful accomplishment of reunifications goals in six months or less.

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

A larger systemic challenge related to timely permanency for children when adoption becomes the goal remains a challenge for this region and is the primary factor which impacts the overall rating for this outcome. Timely and effective concurrent planning, the length of time to receive a decision on a petition for termination of parental rights, and meeting the complex needs of foster youth with extensive special needs were noted to be contributing factors when items within this outcome were rated an area needing improvement. Furthermore, delays in the adoption process were also noted to impact performance in this outcome. Further examination by the region in this area could inform practice improvement efforts.

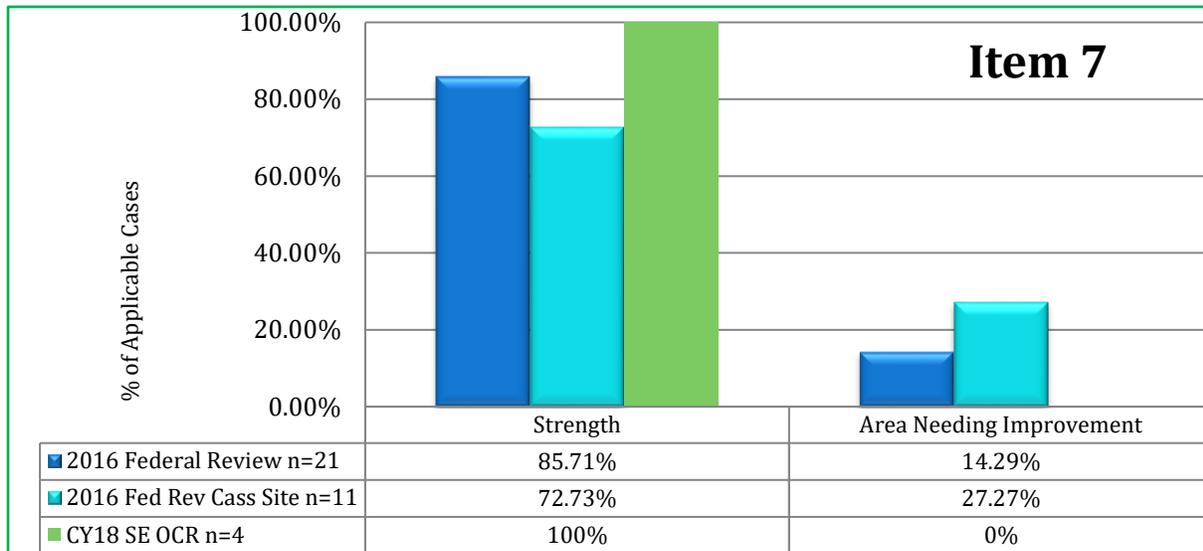
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All applicable cases received a strength indicating the agency made concerted efforts to place siblings together or separated the siblings due to the specific needs within the sibling group.



Key strengths related to performance on Item 7:

In two applicable cases, the target child was placed with all siblings who were also in care throughout the PUR. In both cases, agency efforts focused on keeping these siblings together and all permanency planning and recruitment efforts ensured the siblings remained in the same home. In the other two applicable situations, the target child and siblings were not able to be placed together due to a valid and well-documented reason focused on meeting the needs of all children.

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

This review did not identify any performance areas needing further examination relative to Item 7.

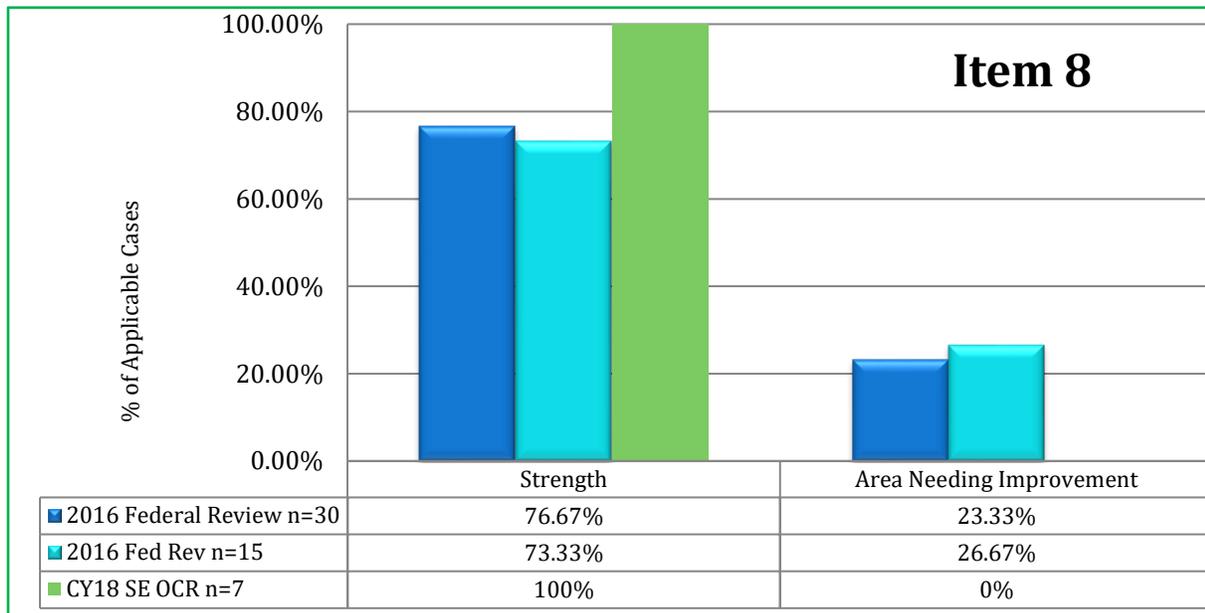
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All applicable cases were rated as a strength for Item 8 indicating that the agency ensured that the visits between the child and his/her siblings and/or parents were of sufficient frequency and quality to maintain the relationship.



Key strengths related to performance on Item 8:

This review found evidence of concerted efforts on the part of the agency to ensure visitation between the target child and siblings also in care but placed separately was of sufficient frequency to promote the continuity of their relationship. Quality visits were held twice a month and supplemented through social media, phone and Skype contacts. Agency efforts to ensure visitation between the target child and parents were frequent and of high quality and based on the circumstances of each case. Factors contributing to quality visitations were noted to include a flexible and comfortable location. Scheduling of visits between the target child parent also changed according to the circumstances of the case. When visits were occurring less than monthly throughout the PUR, there was documented efforts on the part of the agency to facilitate quality visits.

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

This review did not identify any key areas needing further examination relative to Item 8.

*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.

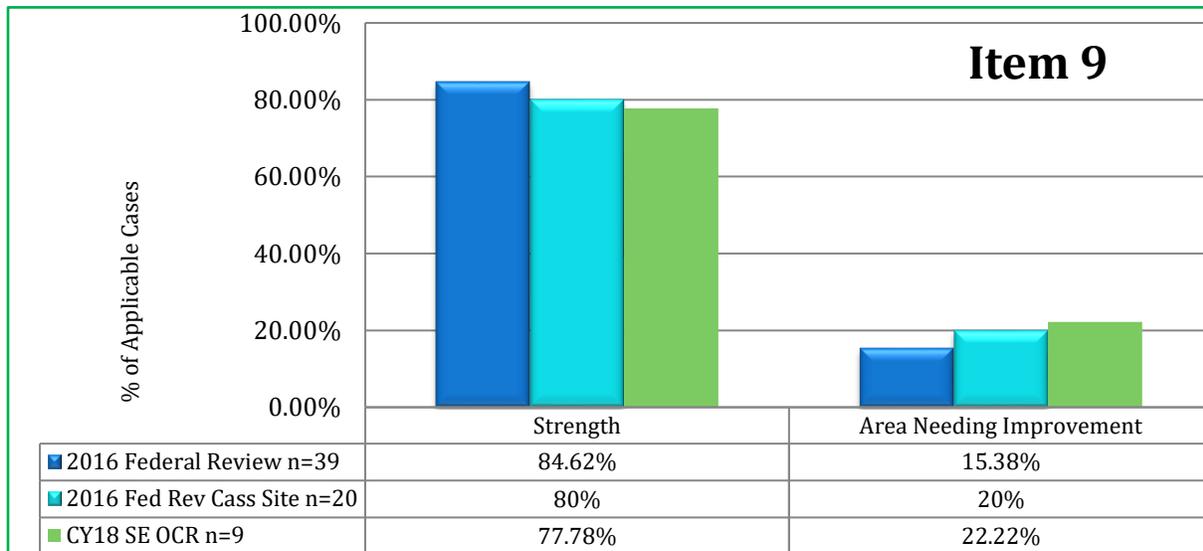
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Seven applicable cases 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 seven of nine applicable cases. Agencies were found to make careful decisions surrounding maintaining these connections and to considering connections to siblings previously placed for adoption. 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 and place the child in foster care in accordance with ICWA’s placement preferences.

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 maintain the target child’s important connections. In both situations, the target child was under the age 5. Agency efforts to maintain extended family connections for this young population provides the region with a focus area for further examination.

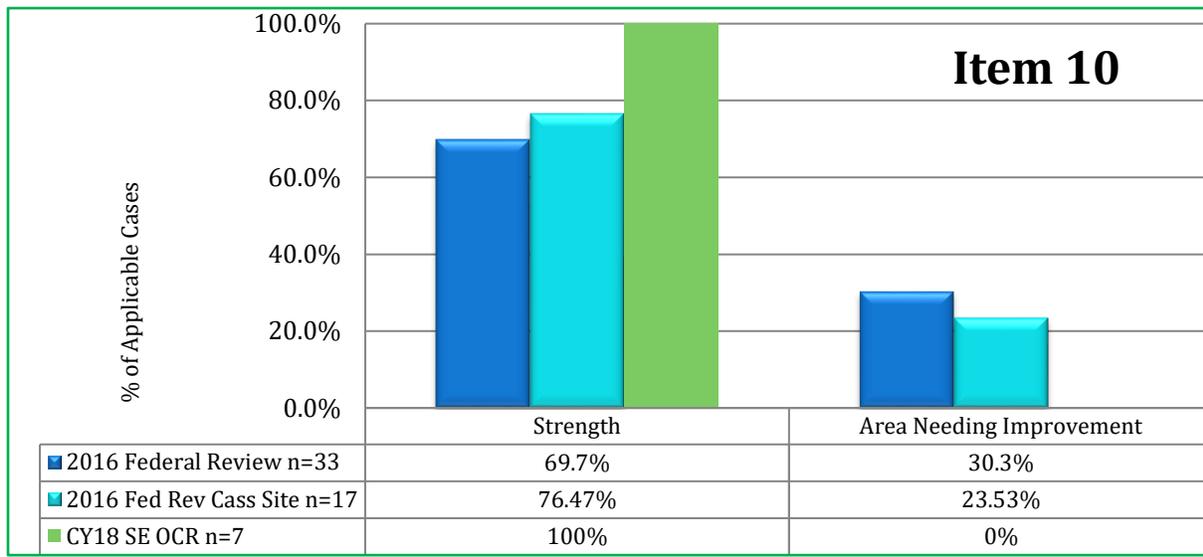
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All seven applicable cases were rated as a strength for Item 10. In each of these cases, the agency made concerted efforts to identify and place the child with appropriate relatives.



Key strengths related to performance on Item 10:

Three target children's current or most recent placement was with relatives and evidence suggested the placement was stable and appropriate to meet the child's needs. When this item was rated a strength and the target child was not placed with a relative (n=4), documentation in the case file and interviews reflected the agency's efforts to conduct maternal and paternal relative searches. At times, relatives had been evaluated and, in the files selected, ruled out for safety reasons or by their own request. In other situations, the agency conducted a sufficient relative search of maternal and paternal relatives prior to the PUR and all known possible options were appropriately ruled out.

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

This review did not identify any key areas needing further examination relative to Item 10.

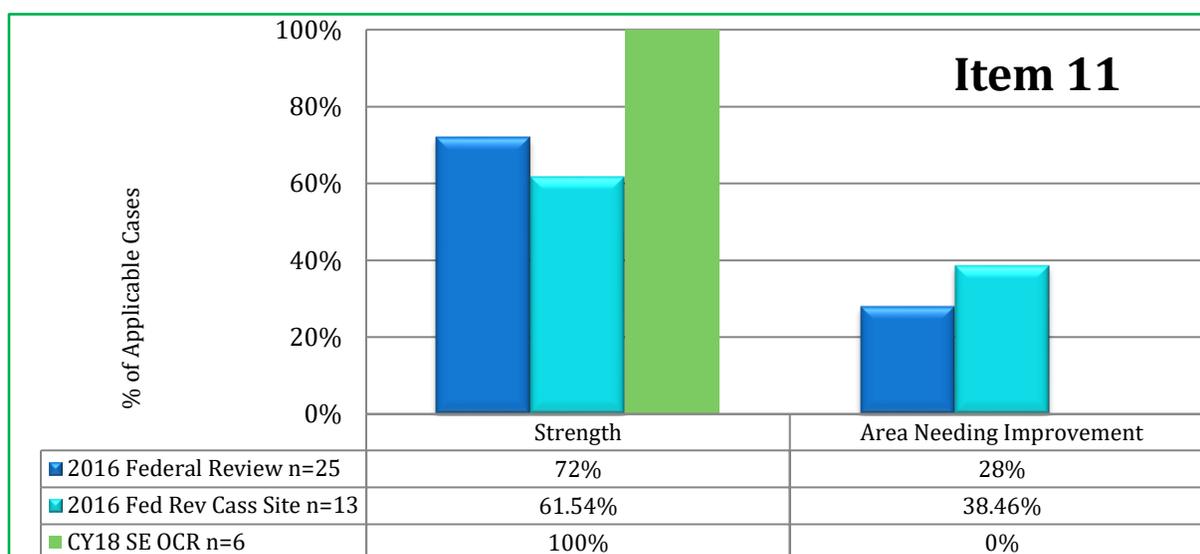
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All applicable cases were rated as a strength for Item 11 indicating the agency made concerted efforts to strengthen the parent/child relationship through activities beyond arranging visits.



Key strengths related to performance on Item 11:

Concerted efforts on the part of the agency to strengthen the relationship of the child in care with his/her parent was evident in all applicable cases. Mothers were involved in all six cases and father involvement was applicable for three cases. Efforts noted to contribute to this performance included providing opportunities for the parents to participate in medical appointments, school and special community activities, as well as participation in family therapy.

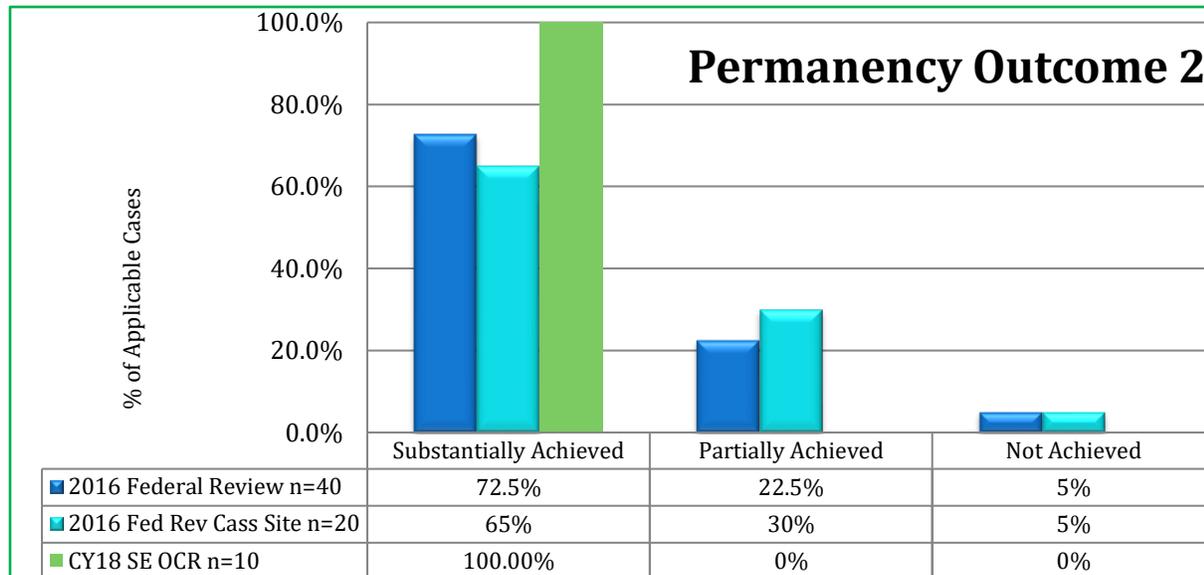
Key areas needing further examination related to performance on Item 11:

This review did not identify any specific practice or systemic challenges related to Item 11.

*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. Siblings were either placed in care together or a valid reason existed indicating why this was in the target child’s best interest. The agency made concerted efforts to support the parent/child relationship by arranging frequent and quality visitation. Parents were also provided opportunities to strengthen their relationship through other efforts, such as involvement in medical appointments, therapy, and school events. Agency efforts also focused on encouraging and supporting the target child’s need to maintain important connections, particularly with culture, school, peers, 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. Relative searches of both maternal and paternal relatives were completed as appropriate to the child’s circumstances in most cases during the PUR.

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

This review did not identify any specific performance challenges related to Permanency Outcome 2 ratings during the PUR. Yet, the review highlighted challenges for children with different fathers being placed separately so that the children can be with their respective parents. While this is a positive outcome in many ways, reviewers noted the emotional toll separation has on these siblings. This may be an area worthy of further examination for the region and state as it looks to practice relative to this outcome.

*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

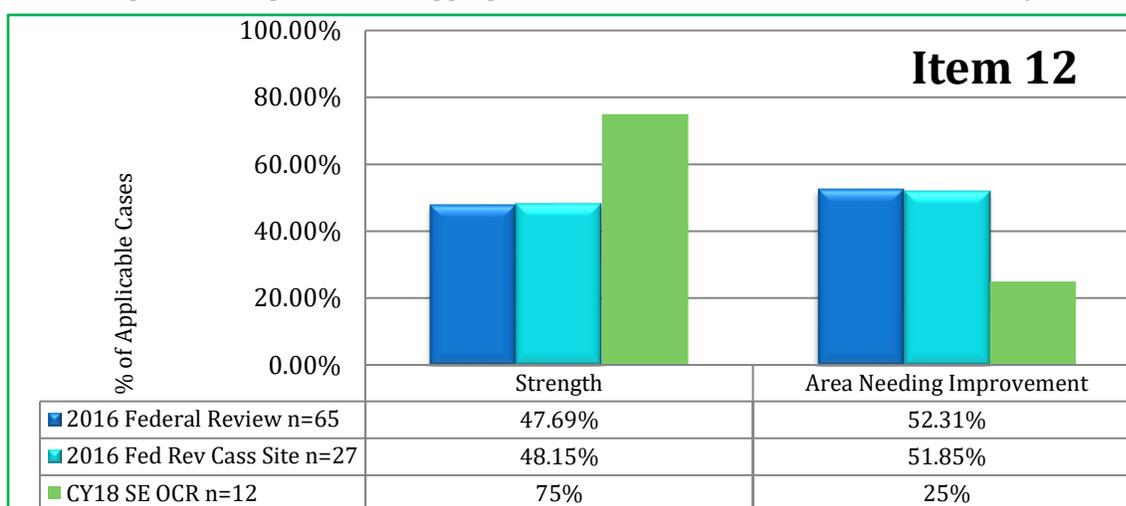
WELL-BEING PERFORMANCE

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 SE OCR Results: Nine of three applicable cases were 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:

In many situations, 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 initial or 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. Strong practice related to ongoing assessments and service provision to foster parents was found in this review.

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.

*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.

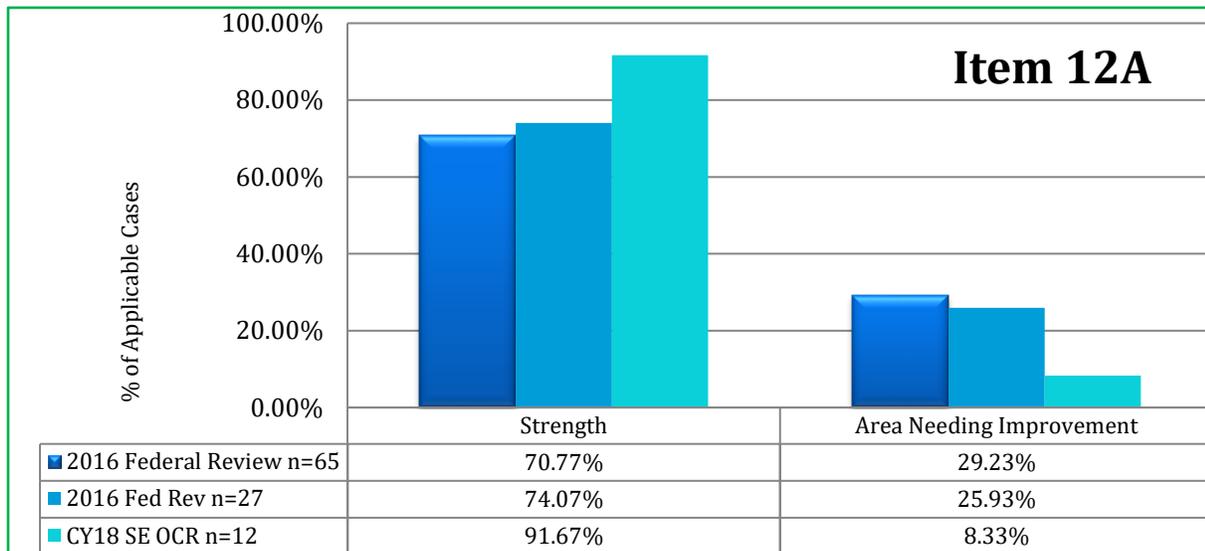
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Eleven 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 most cases on this sub-item. When a strength, evidence showed that needs were assessed initially and on an ongoing basis during caseworker visits and team meetings. Services appropriately matched to identified needs, such as adoption preparation services, services to strengthen the relationship between non-custodial/non-residential parents, and trauma-informed intensive in-home family therapy. Social skill development was a need of several target children during this review and use of community resources, such as dance, music, church activities were utilized. Assistance with transportation was provided to support participation in these services as needed. When applicable for in-home services cases, the agency assessed the need of alternate caregivers to provide for the children in their home. Target children over the age of 14 had their Independent Living skills assessed and appropriate services were provided. In some cases, services were creatively modified to meet the unique needs of the target child. Independent Living Plans for youth 16 and older were in the case files.

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 target child’s needs was not evident.

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 SE OCR Results: Six cases 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 formal or information initial and/or ongoing comprehensive assessments that accurately assessed the mother’s needs and provided appropriate services to address identified needs in seven of nine cases. Similar efforts were noted for fathers in six of eight cases. When rated a strength, evidence that needs were assessed through formal and informal methods were seen. Services such as mental health/addiction related evaluations, treatment as recommended to addressed mental health/addiction needs, family therapy aimed at strengthening parent’s ability to meet the mental and behavioral health needs of their children, parenting education, intensive in-home family therapy, and family group decision making services were some of the primary services noted. It was also noted that parents were able to access substance abuse services timely in this region. Parents for whom parental rights were terminated prior to the PUR throughout the PUR are not applicable for assessment of this sub item.

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 and fathers. A systemic challenged noted in a juvenile services situation involved barriers to assessing the father’s needs as the target child had not signed a release of information to involve the father in the case. Assessing and addressing the needs of alleged fathers where paternity has not been established is also an area for further examination.

*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.

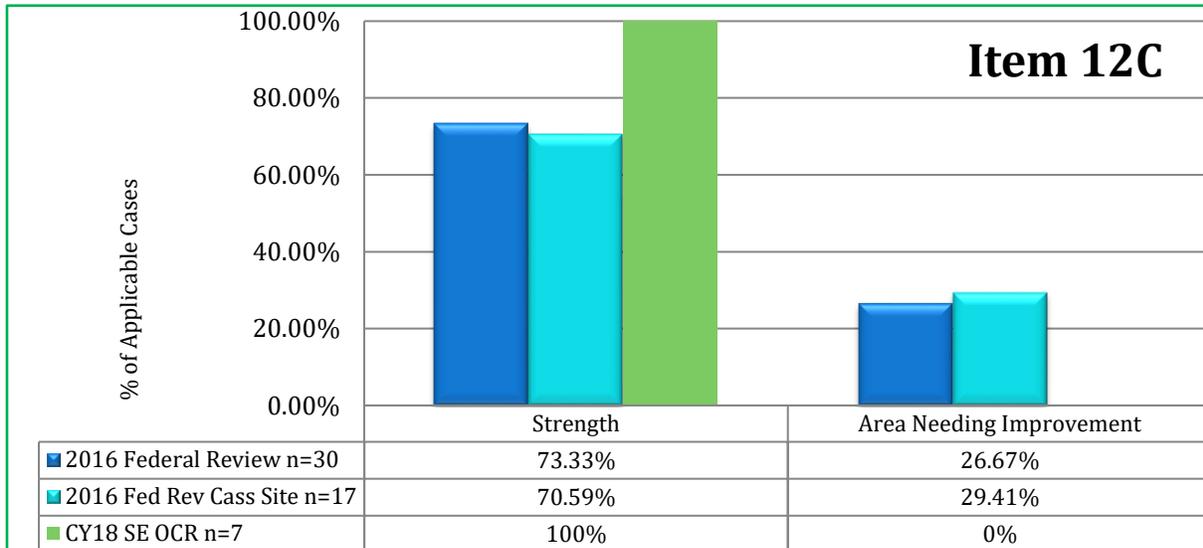
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All seven applicable cases were 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 all applicable cases. 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 with transportation, child care assistance, education on maintaining sibling contact, and support through the adoption process were practices found in those cases receiving a strength rating. Agency efforts to assess and address the needs of foster parents were attributed to supporting stable placements of their foster children.

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

This review did not identify any specific practice or systemic challenges related to sub-item 12C. The region is encouraged to consider the feedback noted in the systemic factors section of this report as the information reflects additional experiences and perspectives which may offer opportunities to strengthen practice pertinent to assessing and addressing the needs of foster caregivers.

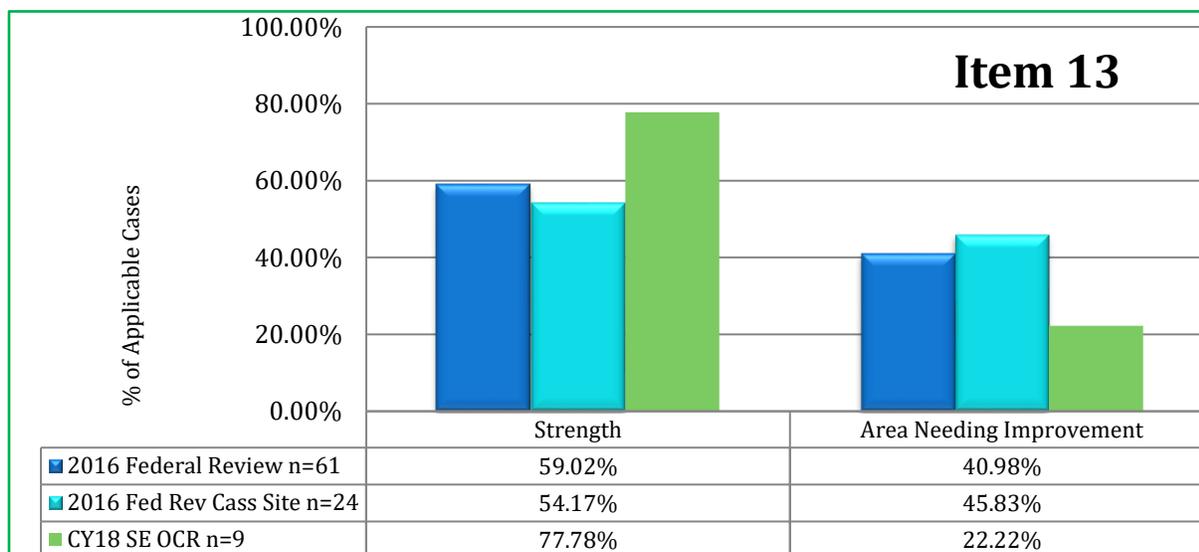
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Seven cases were 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 and their mothers in case planning efforts was noted 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 six of eight applicable cases. The agency involved the children through participation in Child & Family Team meetings when appropriate. There were several younger target children or children with developmental needs and efforts to involve the children outside of the formal meetings and with developmentally appropriate language was evident. Older youth were actively involved in the process and the review suggests they were active participants in the case planning process. 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. Parents for whom parental rights were terminated prior to the PUR are not applicable for assessment of this item.

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

Evidence of concerted efforts on the part of the agency to actively involve fathers was not found in two applicable case and was the contributing factors to the ‘area needing improvement’ rating 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.

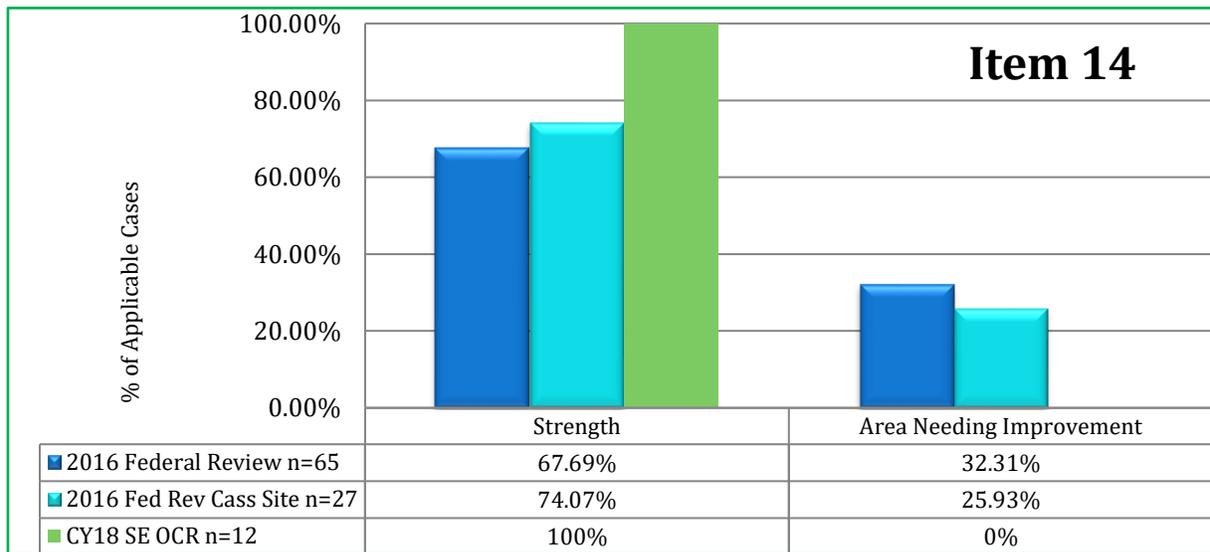
CHILD AND FAMILY OUTCOMES

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

ITEM 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 SE OCR Results: All twelve 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:

The typical pattern of visitation between worker and child(ren) during the period under review was found to be less than twice a month, but at least once a month in ten cases with the other two cases receiving weekly visits. The pattern of caseworker visits with the child was deemed of sufficient frequency to meet the needs of the child for all 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:

This review did not identify any specific practice or systemic challenges related to item 14.

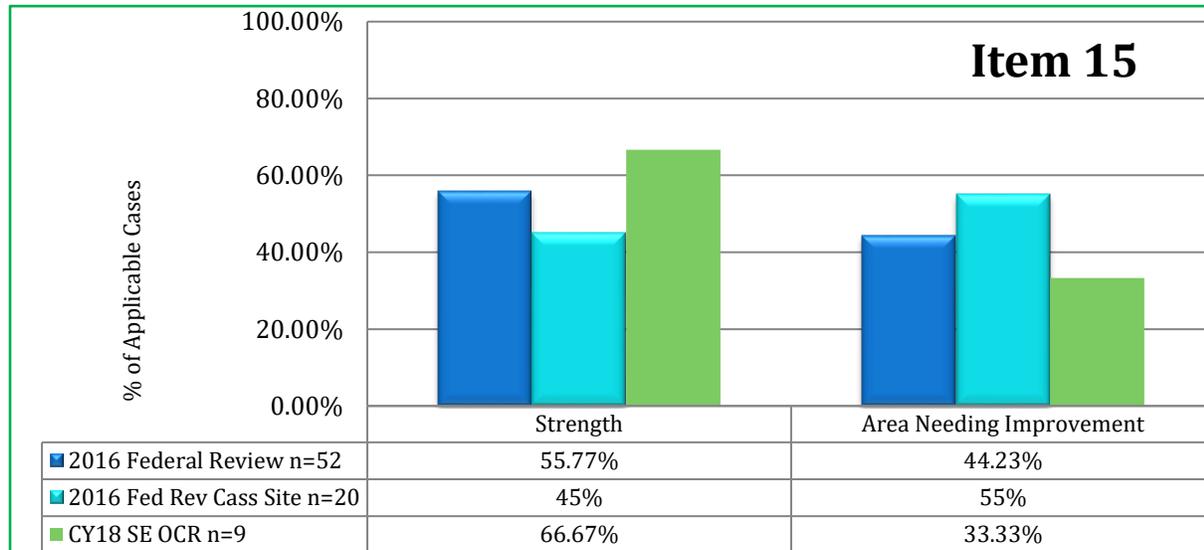
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Six cases were 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:

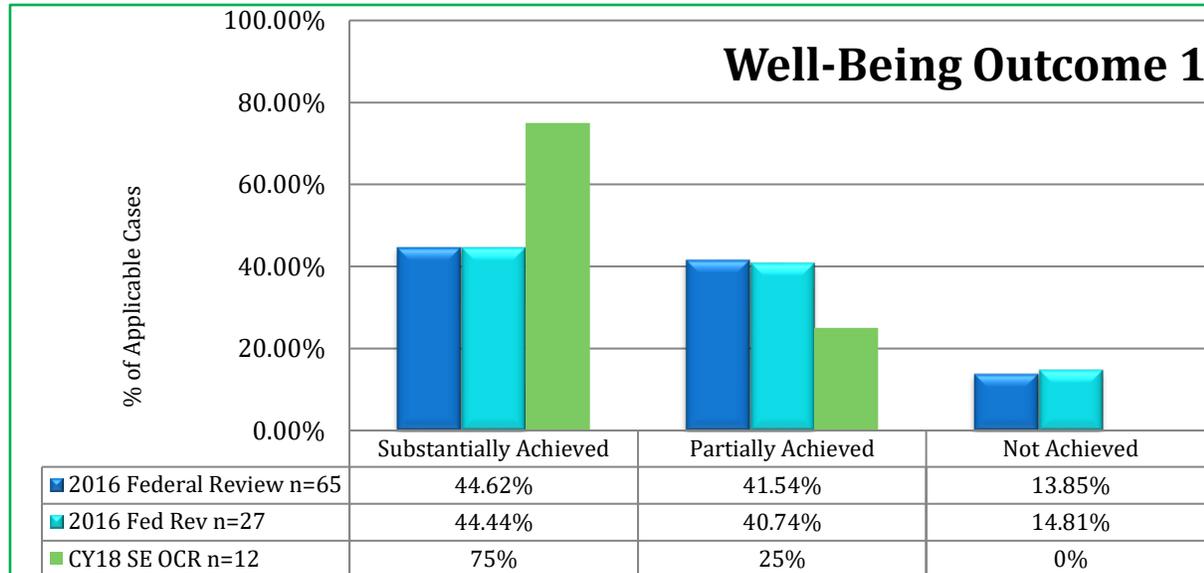
When cases were rated a strength, the typical pattern of visits between case managers for mothers was at least once a month. Seven cases reflected that the quality of visits between the caseworker and the mother was sufficient to meet the needs of the case. The typical pattern of visits between case managers and fathers was at least once a month and the quality of caseworker visitation with the father was sufficient to meet the needs of the case in five of the situations. Contributing to high quality visits were efforts such as focusing on the needs of the children and family (i.e. housing, employment, mental health service needs), holding meetings in the home, office, or community locations offering adequate privacy, and addressing legal needs of the parents. Supplemental efforts between visits through phone calls, emails, texts, were also noted to present in cases receiving a strength rating. Parents for whom parental rights were terminated prior to the PUR are not applicable for assessment of this item.

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 (fathers). This pattern of visitation was not sufficient to meet the needs of the case. The region is encouraged to explore systemic challenges related to policies regarding agency contact with parents when the target child does not sign a release of information as this appears to be a barrier in at least one situation. Engagement of alleged fathers where paternity is not yet established is another area for further examination.

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:

Strong practice related to ongoing assessments and service provision to children to address their individual needs was seen in most cases. Caseworker visits with children were sufficiently frequent and of high quality, contributing to children being actively involved in case planning. Frequent and quality visits with parents, particularly with mothers, were seen in many cases. Strong provision of Independent Living services was evident for youth over the age of 14.

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 parents in some cases also contributed to challenges that may warrant further examination impacting this outcome.

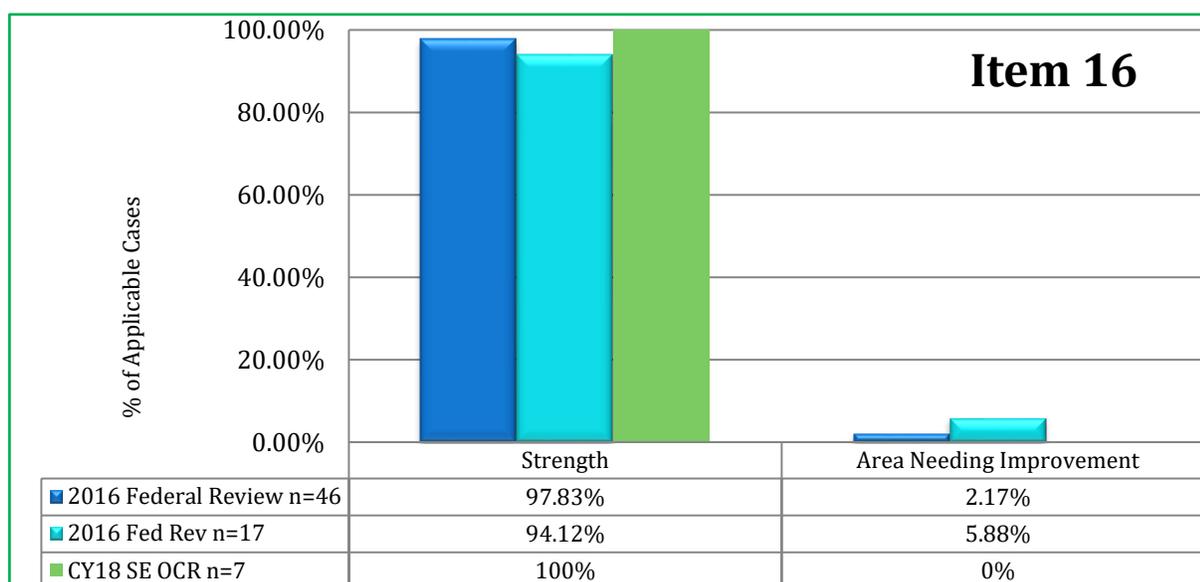
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Seven applicable cases were rated as a strength for Item 16. In each case, the agency assessed and provided appropriate services to meet the educational needs of the child(ren) in the course of case planning.



Key strengths related to performance on Item 16:

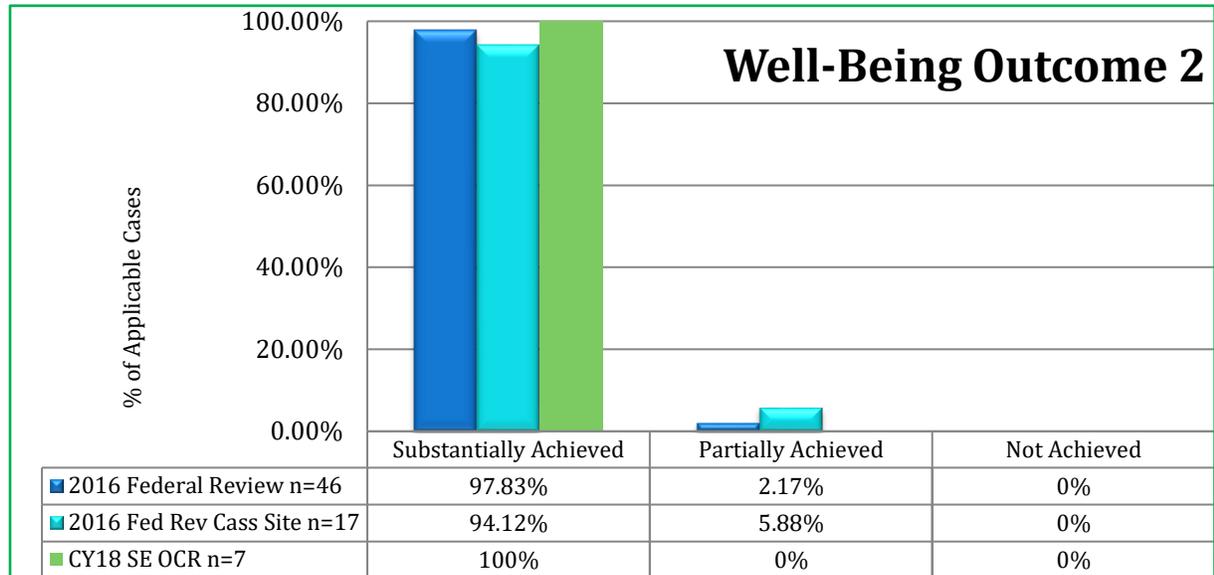
Efforts of the agency to address the educational needs of foster youth through the course of case planning activities included regular contact and coordination between the agency, school, parents, foster parent, and, when age-appropriate, the youth. Some of the children participated in an Individual Education Plan (IEP) and evidence was found of regular efforts by the agency to monitor educational progress. Examples of services provided include: Individual Educational Plans, modified curriculum, Head Start, speech therapy, and GED supports. Supporting the family to meet the educational needs of the children were not a reason for agency involvement in the in-home services cases and were not applicable for assessment of this item during the review.

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

This review did not identify any key areas needing further examination relative to Item 16.

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:

Strong efforts on behalf of caseworkers to ensure foster children's educational needs were assessed and addressed through the course of case planning were observed.

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

This review did not identify any key areas needing further examination relative to Well-Being Outcome 2.

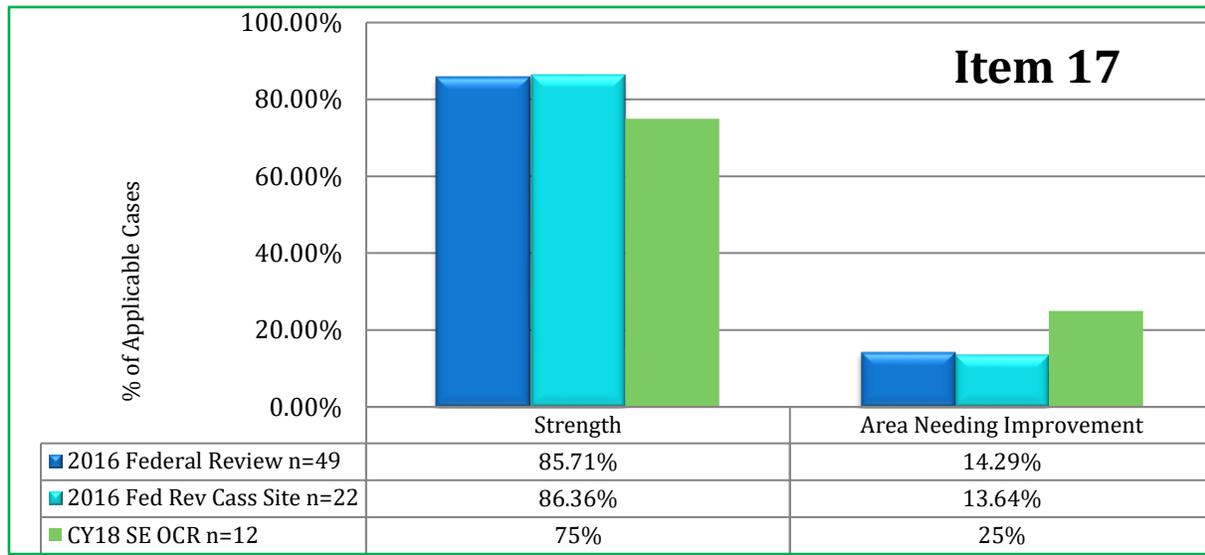
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: Nine 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 twelve applicable cases and accurately assessed the children’s dental health care needs in all eleven applicable situations. The agency provided appropriate oversight of prescription medications for the physical health issues of the target child in foster care in two of four applicable situations. Furthermore, the agency ensured that appropriate services were provided to the children to address all identified physical health needs in ten of eleven applicable cases. Services included (but not limited to): Health Tracks screenings, Immunizations as needed, vision examinations, Early Intervention services. The agency ensured appropriate services were provided to the children to address all identified dental health needs in all three applicable cases. Dental services provided primarily involved regular dental check-ups and cleanings as no youth had more extensive dental needs. Vision needs were appropriately addressed for foster youth.

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

When this item was rated an area needing improvement, agency efforts to provide appropriate oversight of prescription medication for foster youth was not evident. The review noted caseworkers were receiving information from caregivers but were not directly involved in comprehensive and specific prescription oversight activities. Systemic issues related to high caseloads or lack of specific or clear policy were noted as potentially contributing to this practice challenge. Additionally, concerns were noted that not all foster children’s immunizations were current which contributed to the outcomes relative to this item.

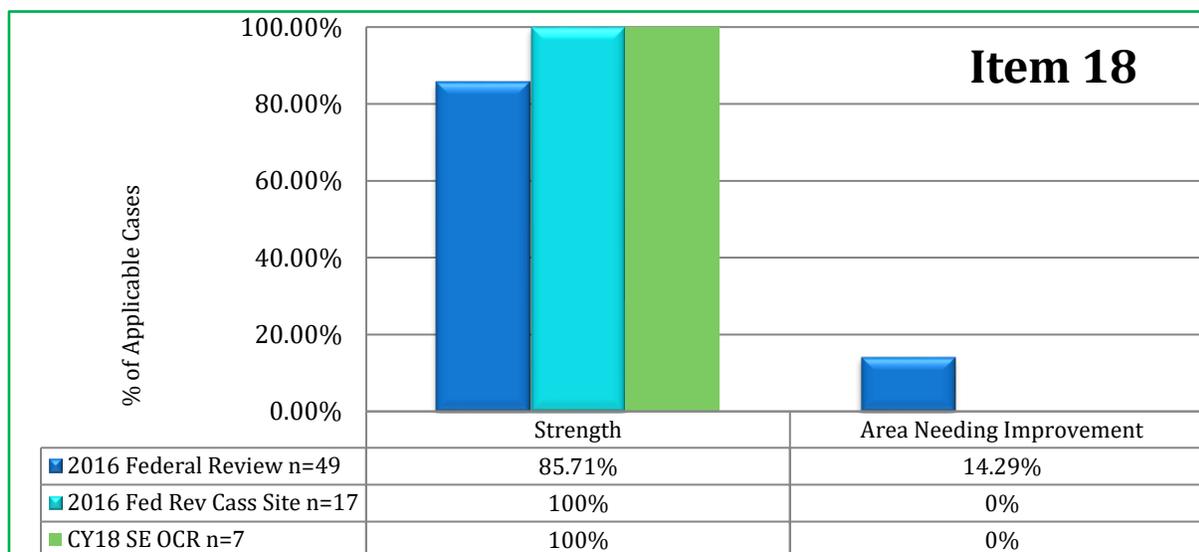
CHILD AND FAMILY OUTCOMES

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 SE OCR Results: All seven cases were rated a strength for Item 18 revealing the agency assessed and provided (or was providing) appropriate service needs to meet the mental and behavioral needs of the child.



Key strengths related to performance on Item 18:

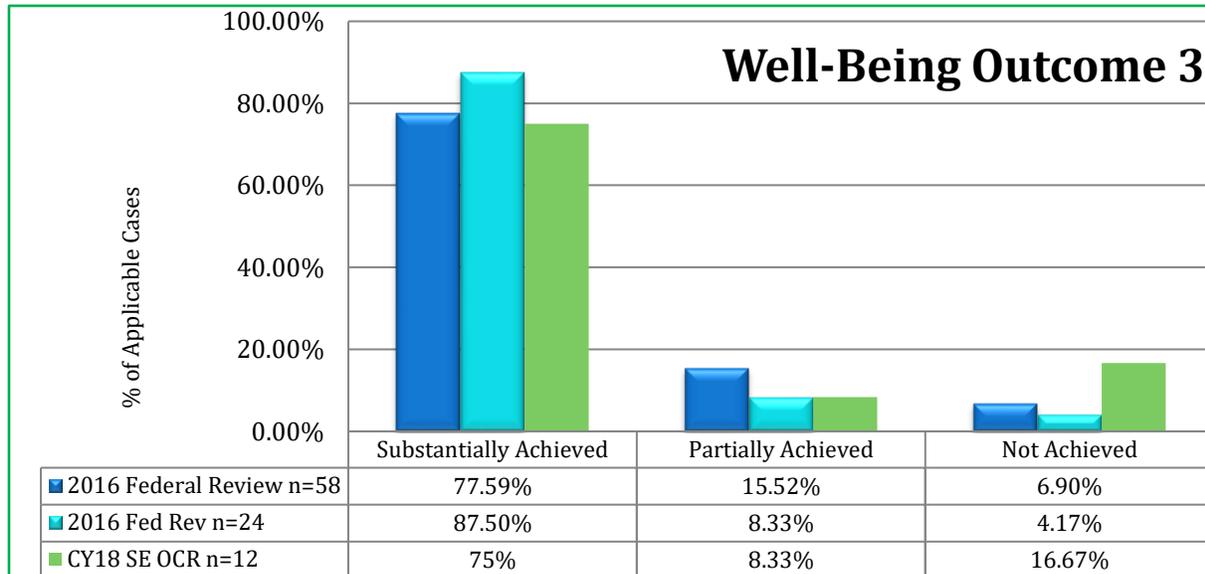
The agency conducted an accurate assessment of the children’s mental/behavioral health needs in all applicable cases. The agency provided appropriate services to match these needs in three of the cases. Three foster youths were prescribed psychotropic medications during the PUR and the agency provided appropriate oversight of this medication. Oversight activities included agency communication with the prescribing doctor, residential staff, youth and parents to monitor for effectiveness and potential side effects. 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, medication monitoring, intensive in-home family therapy, and individual counseling. Agency case manager interactions with service providers to monitor the effectiveness of services were evident in cases.

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

This review did not identify any key areas needing further examination relative to Item 18.

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 seven applicable children. Appropriate mental/behavioral health services were provided timely, including the provision of appropriate oversight of psychotropic medication for the three applicable cases. Meeting the mental/behavior health needs of children remains a strong component contributing to the solid performance relative to this outcome.

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.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

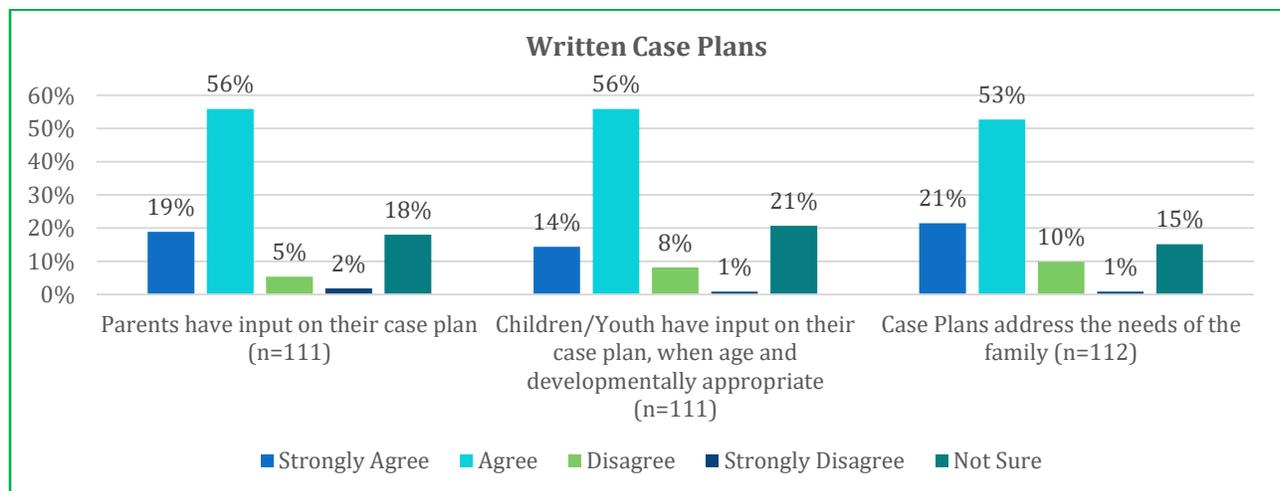
Stakeholder feedback on Systemic Factors

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**:



- B. Questions asked of the Parents include the following [n=8]:
- **I have a clear understanding of what their family needed to accomplish before their case could be closed**
Strongly Agree (3); Agree (3); Disagree (2); 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 (3); Agree (5); Disagree (0); Strongly Disagree (0); Does Not Apply (0)
 - B. My child/ren’s school progress:
Strongly Agree (3); Agree (3); Disagree (1); Strongly Disagree (1); Does Not Apply (0)
 - C. My child/ren’s health progress:
Strongly Agree (4); Agree (3); Disagree (0); Strongly Disagree (1); Does Not Apply (0)
 - **Please comment on anything else you’d like to share about your family’s case plan (optional):**
No responses received.
- C. Questions asked of the Foster caregivers include the following:
- **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:

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Not where the plan is created, but that’s where the information is discussed/introduced” [others agreed]
 - “The case plans aren’t brought up a lot in the team meetings” [others agreed]
 - “When I provided care in another state we got everything. But we don’t get that here. There’s a huge difference in the amount of information we receive. It’s sporadic. No consistency to when information is passed along, or what the case manager may be telling me vs. what’s brought up in the team meetings.” [others agreed]
 - If so, from your perspective, are case plans developed jointly with the children’s parents?
 - Specific comments shared were:
 - “I don’t know”
 - “My understanding is that the agency creates it and presents it to the family” [others agreed]
 - Describe examples of how you have observed the agency try to involve the parents in the development of the plan
 - Most present said ‘no’ and did have examples to offer.
 - “If parents are involved, then they really want to have input and best interest of the kids for the most part. But when the parents do try to put forth the effort it seems to get shot down by the team members. I see it happen a lot that the children go back home, and the situation isn’t good for them.”
 - As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
 - “Yes”
 - “Varies from bio parent to bio parent. The opportunity is there, whether or not they take it is variable. It’s just if they feel heard or not.”
 - “I think the parents are very heard and they get more resources than the children do.” [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:
 - “This was not applicable in my case”
 - “There were separate meetings from parents, so not sure how they were involved” (there was a no-contact order in place)
 - 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:
 - “I try to make sure they schedule it when I can go”
 - “I am invited to every single one of the meetings, I usually toward the end of the day (after school)”
 - “I didn’t really go to those meetings, I’ve been to one. I couldn’t be there because of a no contact order. But they did talk to me about what the plan was.”

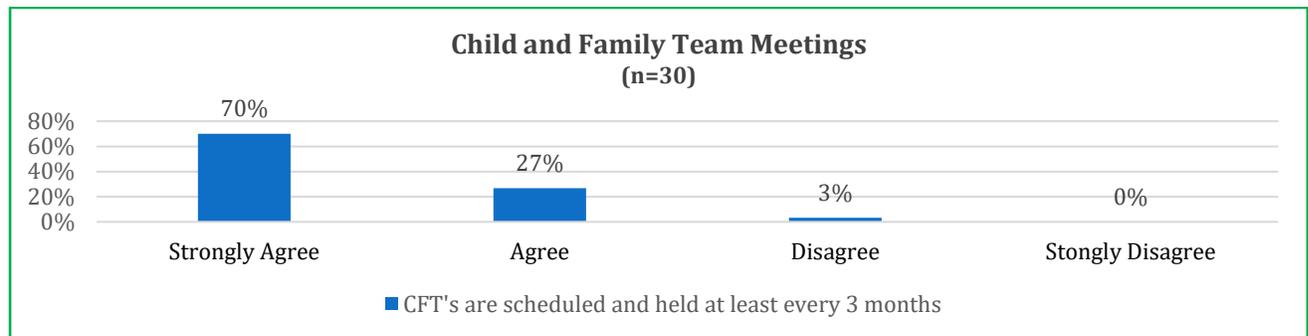
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERIODIC REVIEWS

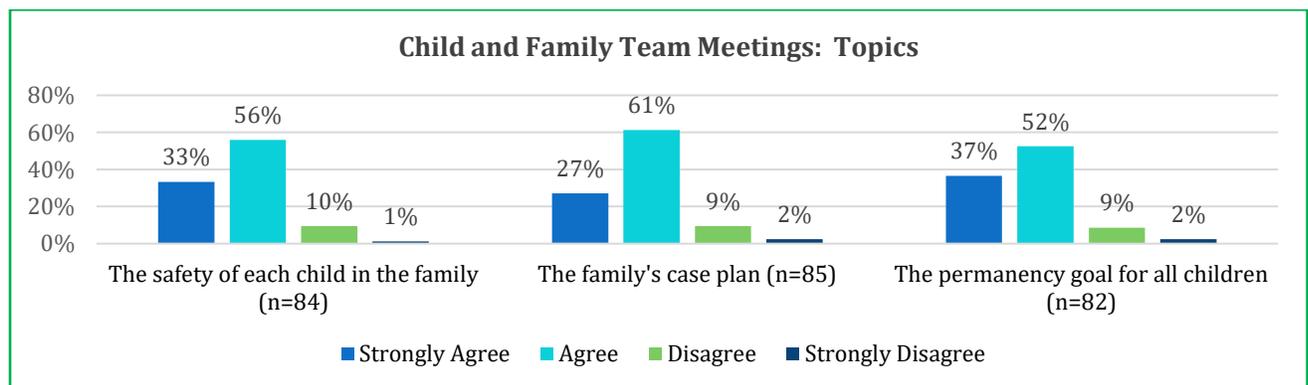
How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

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:



- 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:
 - “Due to the number of cases, each CFTM has a limited amount of time and depending on what comes up during the meeting, at times not all areas are covered. A barrier at times is also respecting the privacy of the family so other team members have been excused, which at times unintentionally eats up some of the meeting time.”
 - “Too little time and too much info to cover”
 - “Parents are not cooperative”
 - “These topics are all discussed at some level. However, CFT are very tightly scheduled as the availability of the regional office is limited. It sometimes feels like we spend too much time on basic updates - dental screen, vision screens, health track dates, etc. and not on the issues at

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- hand. many times, family case plan tasks are covered one on one with the case manager and parent vs. during a team meeting”
- “I believe the safety of the child is discussed more when on home visits versus meetings”
 - “Locating the parents, getting everyone's schedule to work out, high caseloads”
 - “There's just not enough time. 30 min. meetings are too short. We tend to focus on how the kids are doing in the foster home, services the kids are involved in. The Parents' case plan is briefly reviewed and a statement or two made about progress. We sometimes schedule a 60 min. meeting when there are multiple children in a family, but the focus continues to be the same.”
 - “Meeting time availability”
 - “May simply be overlooked occasionally (permanency goal) due to other pressing areas of discussion. Most times it is addressed specifically.”
 - “There are a lot of topics to cover in CFTMs, time can be a barrier, also, at times, parents lack of participation (by choice) or sometimes the tasks are more geared towards what the county wants to see (listed in their words) vs. what the parents or family "wants".”

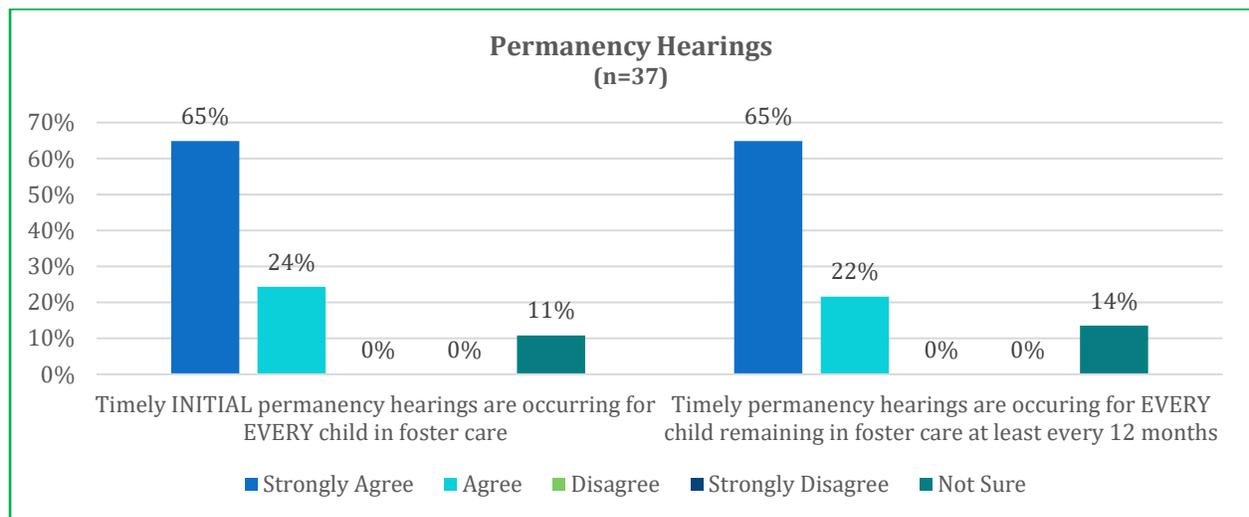
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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=12)	Top rated barriers to subsequent permanency hearings (n=12)
<i>A continuance was needed</i>	5	5
<i>The State’s Attorney’s Office was not able to submit the request in a timely fashion</i>	4	3
<i>The Court’s calendar was full</i>	3	3
<i>Case Management staff was not able to submit the necessary paperwork to request the hearing</i>	3	3
<i>Other</i>	2	0
	“Not available to attend set hearing”	
	“These cases are designated to referees, thus I am not personally aware of the inner workings”	

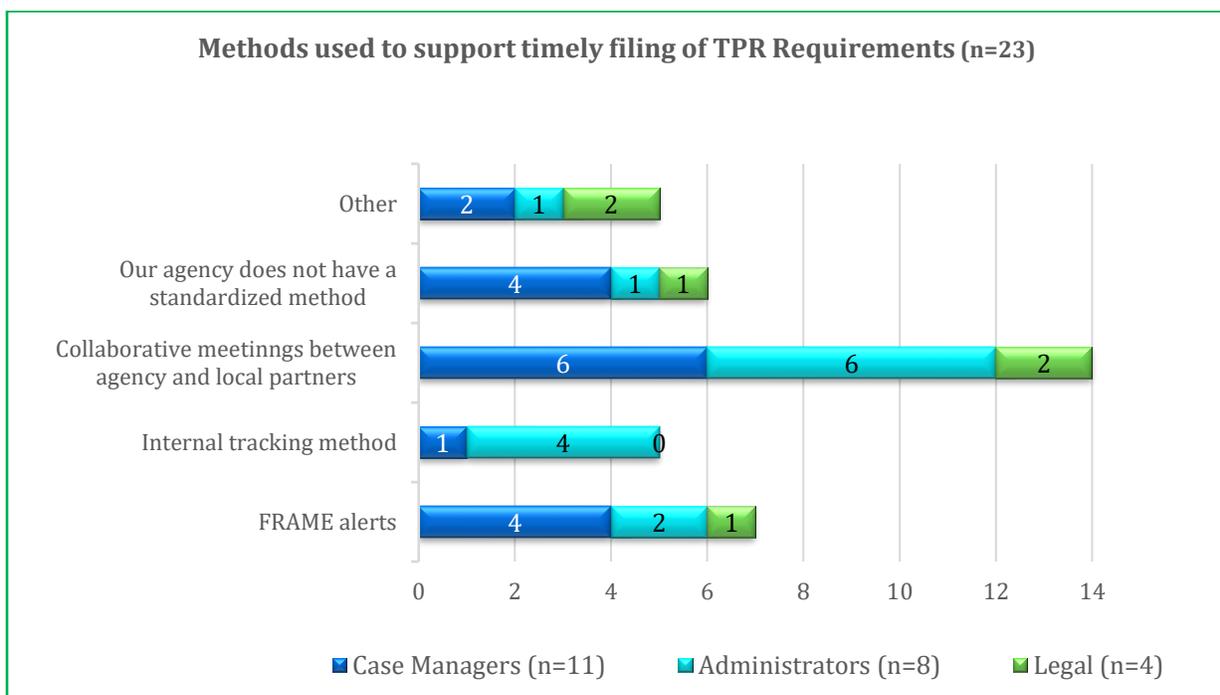
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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.

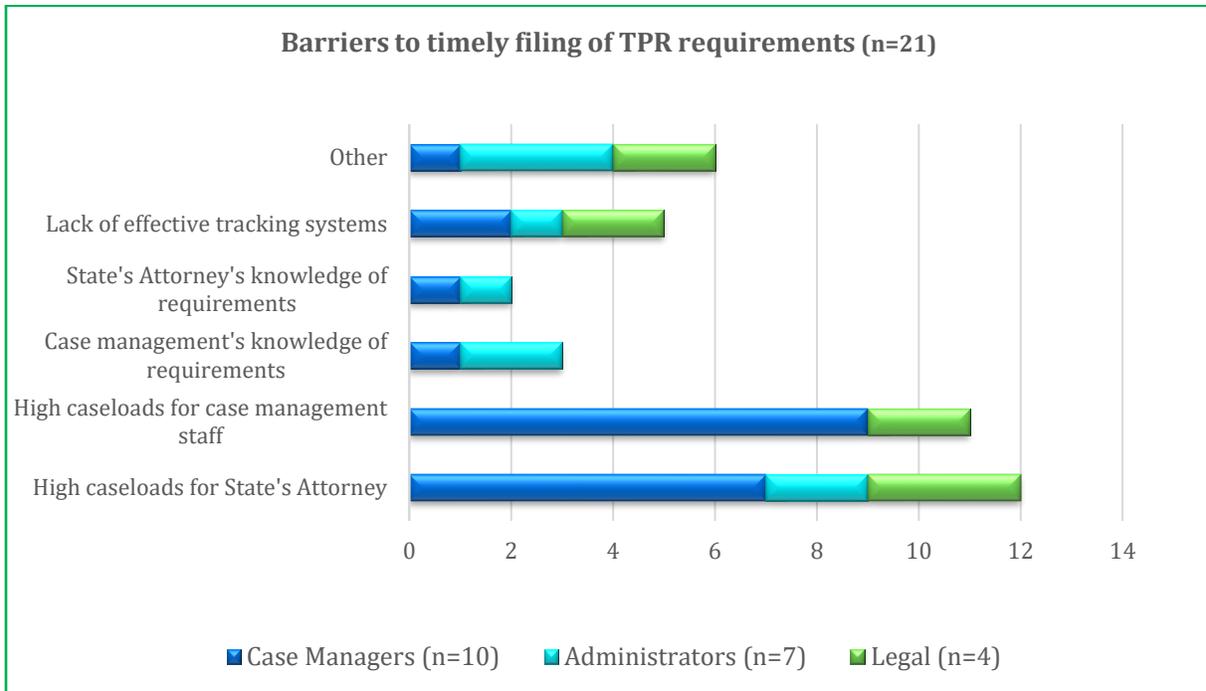
- A. How does your agency ensure that the filing of termination of parental rights occurs within the required provisions (e.g., the child has been in foster care for 15 of the most recent 22 months; the parent has committed a serious offense such as killing another child, or an exception is present, 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:
 - “Mapping and individual supervision”
 - “Discussed in supervision meetings with supervisor; just doing my own tracking as well”
 - “Assess permanency planning at quarterly meetings. At one year of case, determine through supervisor staffing and child welfare staffing any compelling reasons not to file or to file for TPR”
 - “I don’t know, the social workers take care of this”
 - “I’m not sure”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- 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:



- Other barriers reported:
 - "This is not an area of concern in our county"
 - "Judges do not abide by federal regulations"
 - "None... but wouldn't allow me to go past screen without checking a box"
 - "No barriers"
 - "I don't totally agree there are barriers, but if I had to mark something caseload would be it"
 - "I'm not sure"
- 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)

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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=28):

- ""ICWA""
- "There are not enough caseworkers for the amount of cases."
- "This is not something that I do in my role"
- "Caseworkers have high caseloads and are unable to do things in a timely fashion. In some of the smaller counties, the caseworkers are not as knowledgeable about process. Also, the judges can not approve the TPR request."
- "In some of the areas, it can be difficult to do this because of the caseloads of the caseworkers. Also, in most cases, families are given every opportunity to reunify with their child/children and this can make the process longer."
- "Demands on workers"
- "Too much time is given to allow parents 4th, 5th, and 6th chances"
- "Caseworkers caseload, giving multiple chances to birth family, because the child is doing well in foster care and bio parents are bugging the caseworker- it falls off their radar (don't rock the boat)"
- "I feel TPR is accessed far too soon without truly giving the parents the support and attention they deserve to work towards reunification. From my experience the minute the child is removed from the home a mountain is placed in front of the family with a "good luck" mentality as if they want the parent to fail."
- "Large caseloads, Complicated family situations"
- "Poor case management, lack of documentation about the areas of concerns and parents follow through with service recommendations. Oftentimes case managers are not documenting information to support a termination until they file a petition. Children have already been sitting in the system too long at this point and practicing in this manner holds kids in the system longer than needed. Oftentimes it appears that the parents have all the rights and the needs of the children and their trauma is secondary to the goal of reunification. The need for true concurrent planning is crucial and not happening! Oftentimes they wait to research familial options until the TPR is filed. This work needs to be done concurrently on consecutively after parents do not meet the goals of the family plan. Twofold; this may help to motivate parents during the entire process instead of motivating them once the TPR has been filed. Additionally, if you do have a parent who is disengaged it does not prolong the amount of time children are spending in foster care as the alternative plan would be ready to implement at any given time and kids would not have to wait out the concurrent plan process as well once they have waited for their parents to follow through with a plan that has not happened."
- "Transfer from case worker to case worker seems to start the process all over again and lengthens it significantly!!"
- "Large caseloads"
- "Most barriers include allowing too many or too lengthy practices. Of course, we all want what is best for the family; however, foster care seems to provide far too many chances for birth parents, rather than looking at the needs of the child. Children who are in the "system" for 660 days are often hard to place for adoption or reunify without services following the

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- family. Other barriers include the lengthy process of court system and social worker caseloads."
- "I think the biggest barrier is the caseworker's caseloads. The cases these days appear way more intense as kids have greater mental health needs. The other barrier is getting families scheduled in to therapy type services; there aren't enough providers for the current demand."
 - "We have noted that there is a large difference between TPR filings in cases but do not understand why."
 - "Emphasis on physical and neglect issues versus psychological issues with youth."
 - "No comment"
 - "Case worker failure to follow up with the courts in a timely manner; Case worker impeding the placement of children with family members willing and able to assume care"
 - "Case Workers impression of need for TPR"
 - "I believe there are potentially numerous issues for this challenge. There are large caseloads for CPS workers that can impact the ability to ensure timely filing requirements for termination. I suspect the ability to file and schedule with the courts in a timely manner may be an issue as well. It is possible the courts are struggling with an increase in court appearances that make scheduling difficult as well. There are also potential barriers with consistent family follow through with members of the family who are involved."
 - "Lack of quality staff supervision and support. Case workers are afraid to speak against parent."
 - "Timely referrals to appropriate services that meet the needs of the family. Availability of those needed resources."
 - "Unsure, but could guess SAO time and attention to juvenile cases"
 - "Not aware/unsure"
 - "The vast majority of petitions for TPR following adjudication of deprivation are filed in a timely manner. The barriers I have heard about typically seem to involve staff shortages in the State's Attorney's office and I believe some of that has been addressed recently also."
 - "I have nothing to add"
 - "Goal of reunification"

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:

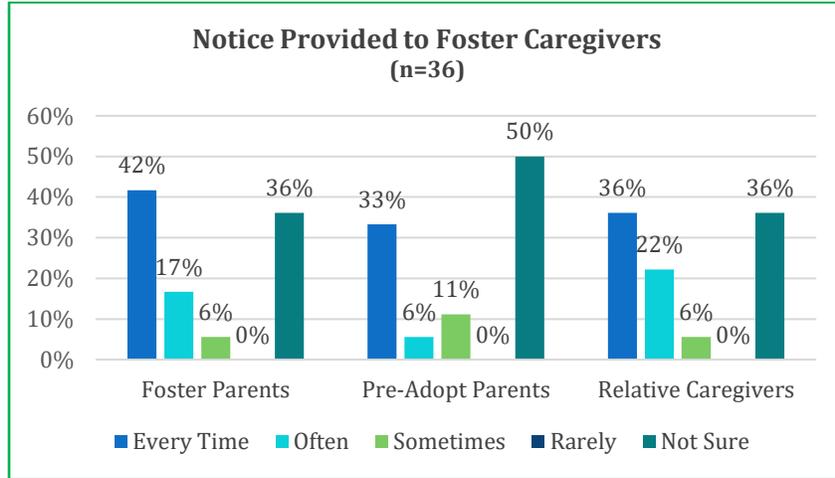
- **What has been your experience receiving notice of upcoming reviews and hearings regarding foster children/youth for whom you provide care?**
 - Most participants said it has been inconsistent. A specific comment includes:
 - “We got the letter a day after the hearing was schedule”
- **Does your experience match the experiences of other foster caregivers you know?**
 - Time and discussion on other items did not permit this specific question to be asked.
- **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?**
 - “We were told we didn’t have the option to share our opinion in person but could submit something in writing.”
 - “We were told the judge doesn’t look fondly on foster parents attending the hearings”
 - “The agency and state’s attorney told me not to bring anything to court”
 - “I’ve been told not to go”
 - “I asked the caseworker about my right to be heard and the caseworker told me not to go, but that I could write something”
 - “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?**
 - “They have a lot of paperwork to do and sometimes it gets overlooked by the caseworker”
 - “There’s a power and control issue between the regional reps and the caseworkers. They act more as supervisors to the workers than they should be. They’re the deciding factor of the case even though they don’t know the case. They set the tone for the case.”
 - “State’s attorney shuts it down every time”
 - “We had evidence of abuse that we wanted to share and were told no by the state’s attorney”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

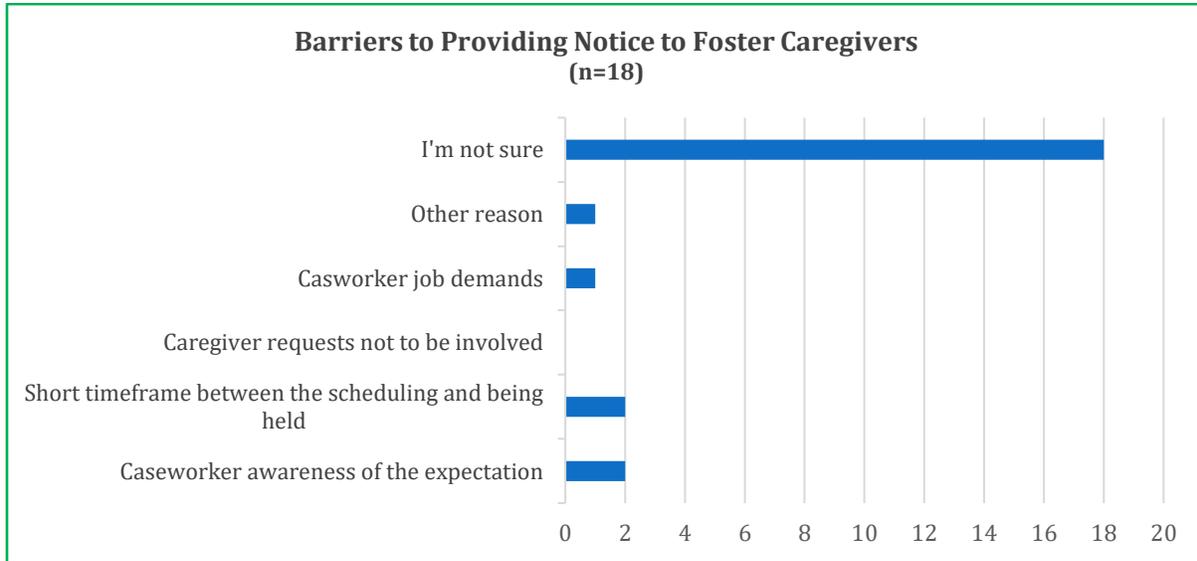
B. Stakeholders taking the online survey were asked the questions below:

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?"



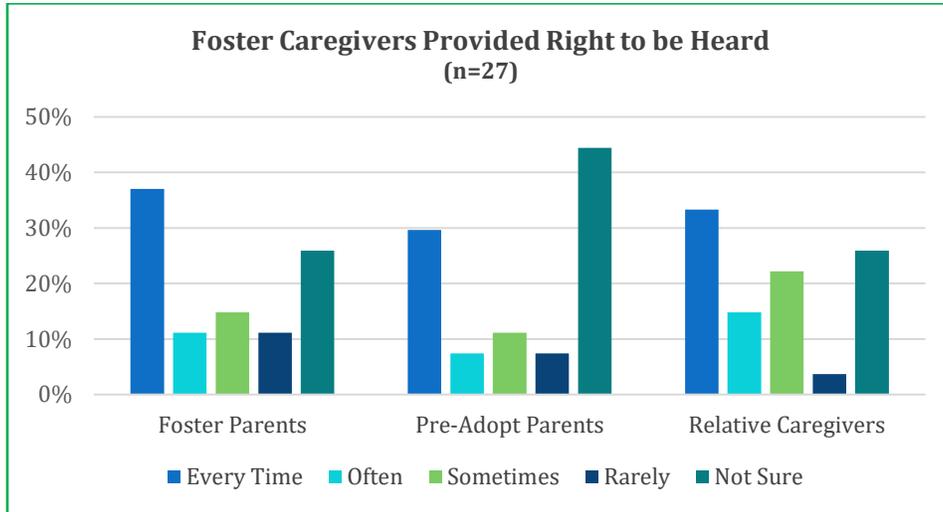
- If respondents did not respond to all three categories as "Every Time", respondents were asked to enter the most important barrier noted.



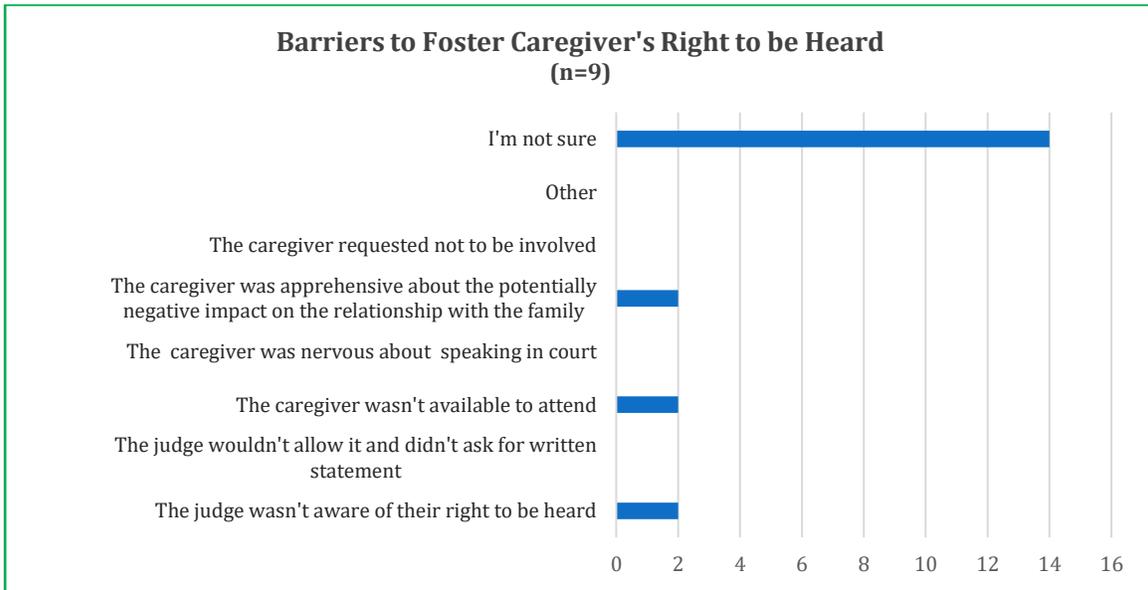
- Other reasons provided:
 - "Sometimes it's not always clear who has the responsibility of notifying (case managers, Guardian Ad Litem, the court) so others may think someone else is doing it"

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:

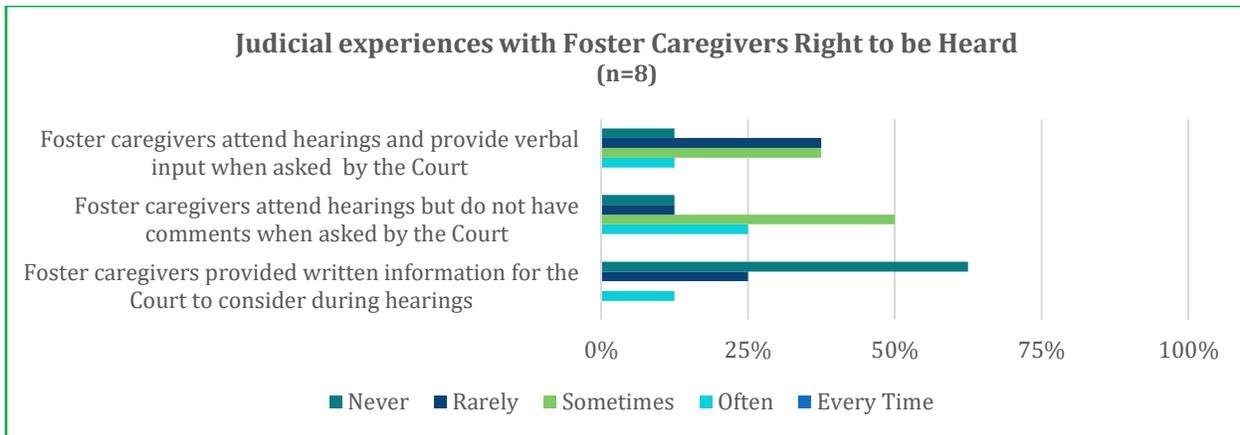


- Other reasons provided:
 - No other reasons were provided.

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

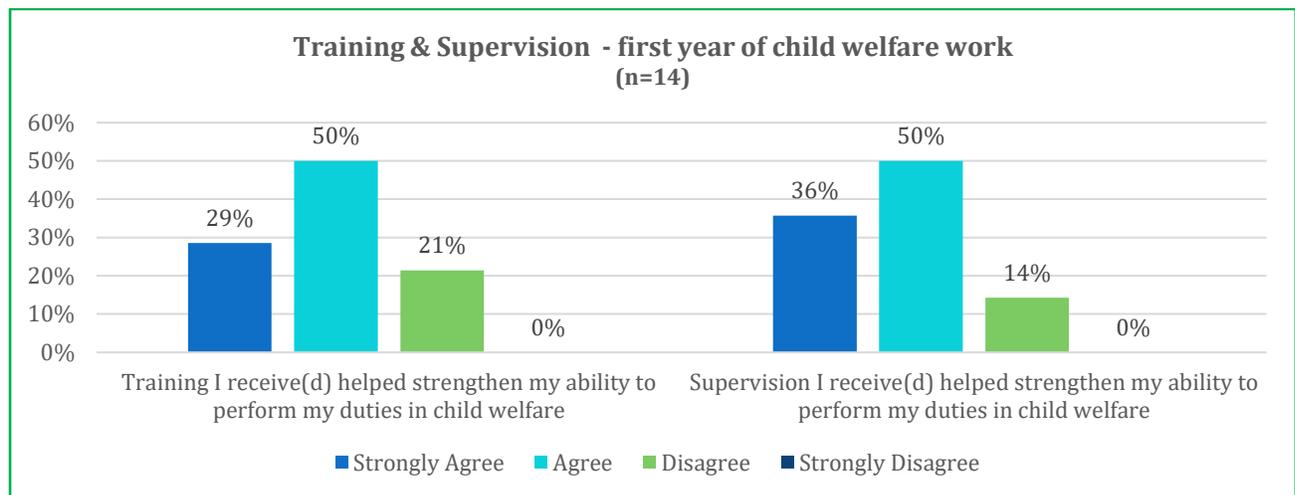
How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions?

"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:

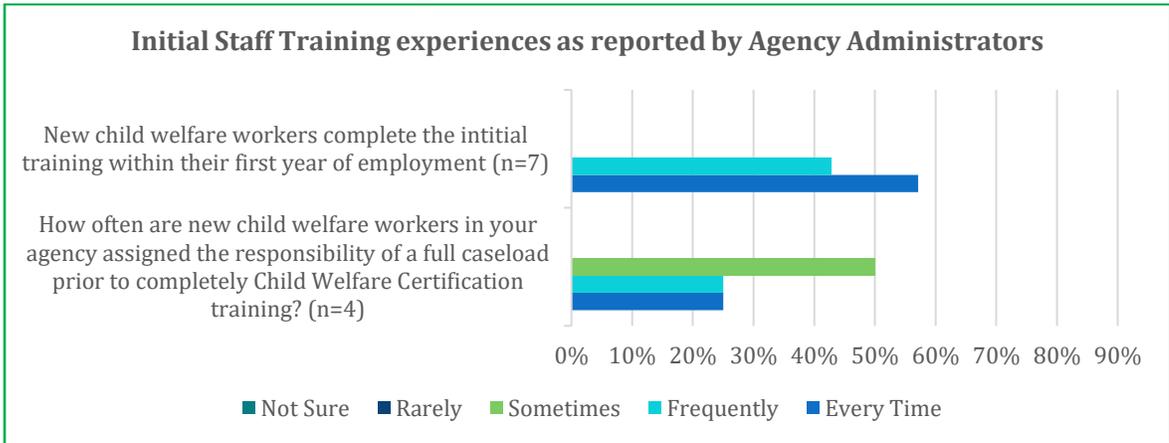
- When you were first hired as a child welfare worker, were you assigned the responsibility of a full caseload (n=15)
 - Before attending Child Welfare Certification Training: 6
 - While attending Child Welfare Certification Training: 7
 - After attending Child Welfare Certification Training: 2
- If 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=6)
 - One response each for the following years: 2005, 2006, 2009, 2011, 2012, 2013
- 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)
 - "It would have been helpful to go through Child Welfare Training following my being hired. I held temporary positions for the first year, until my position for Foster Care Case Manager and Licensor could be approved. It was after almost a year of me interning/working that I was able to attend child welfare training."
 - "The supervision I received was "it's in your manual" or more current a supervisor who doesn't know policy at all"
 - "I have been in child welfare for 25 years. The Federal requirements were significantly different then."

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "The supervision provided better training for the day to day interactions with clients and decision making regarding assessments; training strengthened my ability to understand and apply policy"
 - "Training information is not consistent across staff and nearly not enough is provided."
- B. Agency Administrators were asked the following questions:
- **To the best of your knowledge:**

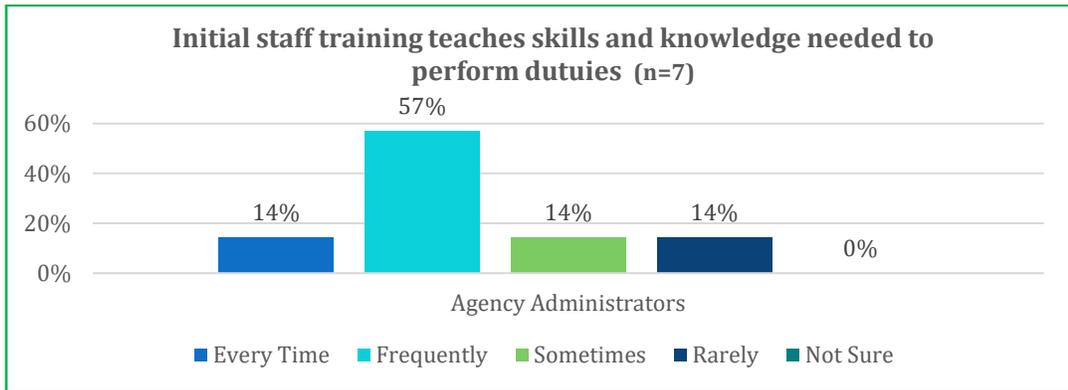


- Respondents who did not answer "Every Time" to the question of new child welfare workers completing training in the first year of employment were asked: **In your opinion, what gets in the way of all new child welfare workers completing the required training within their first year of employment? Please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

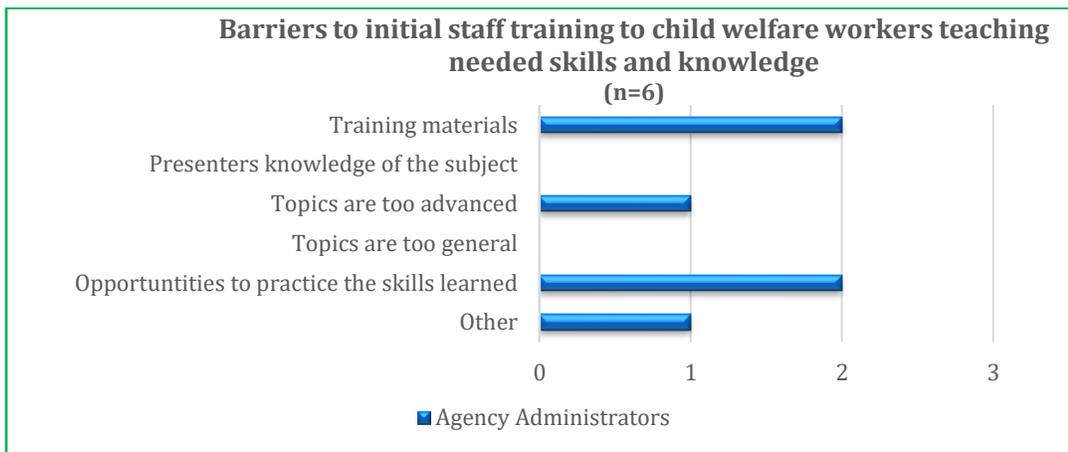


- **To the best of your knowledge, does the initial training provided to child welfare workers teach the skills and knowledge needed for them to carry out their duties in child welfare:** (results on next page)

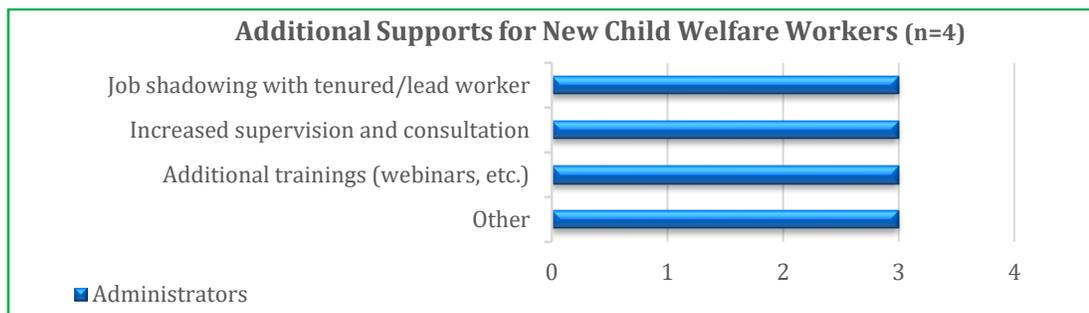
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS



- Respondents who did not answer “Every Time” to this question were asked: **In your opinion, what gets in the way of 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:
 - “Location, time and distance needed to be in Grand Forks....some technology needs to be considered”
- **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:
 - “We have implemented an onboarding process”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: ONGOING STAFF TRAINING

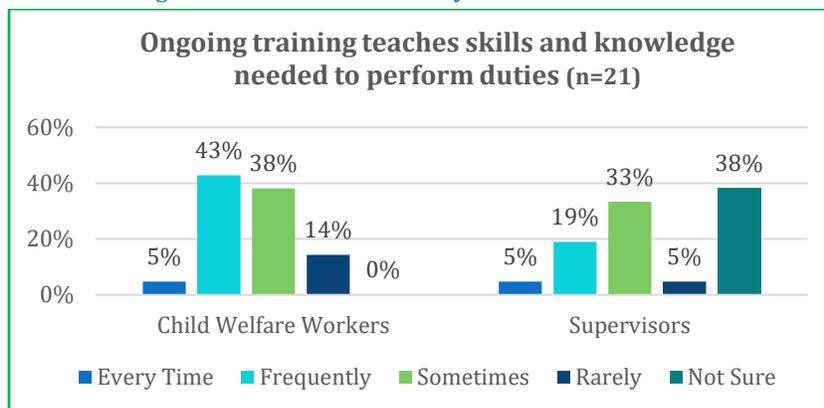
How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

"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.

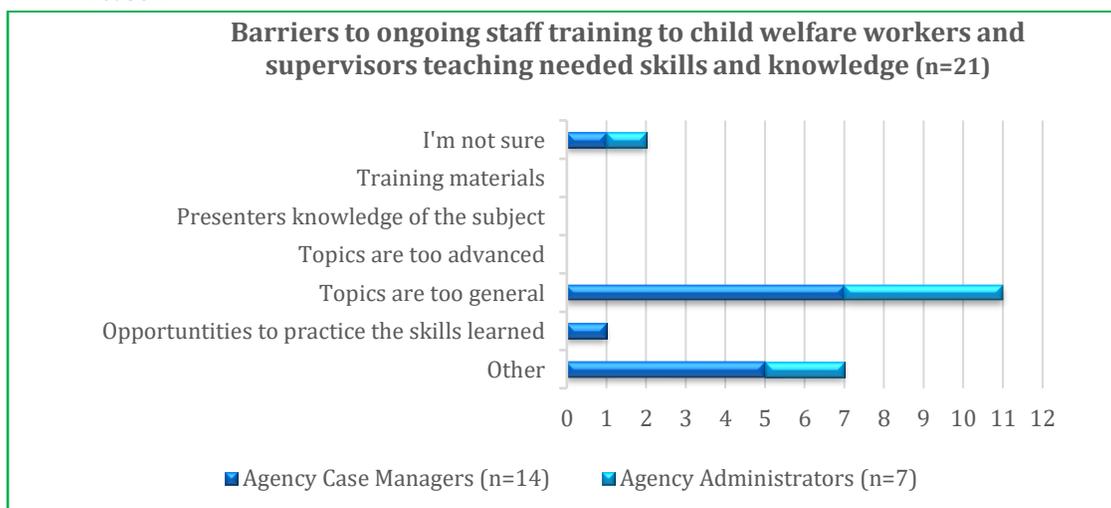
"Staff," for purposes of assessing this item, also includes direct supervisors of all contracted and non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent 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:
 - “More specific trainings for supervisors would be beneficial. Also, an option for reviewing portions of the child welfare training may be helpful for some.”
 - “Everyday tasks are demanding – hard to get away to training”
 - “Training topics are often repetitive and focus on knowledge; lacking in new best practices and safety/care planning assessments and tools which helps drive our work.”
 - “Lack of funding”
 - “Distraction and stress from caseload needs while out of the office, or caseload needs making it feel too challenging to leave the office for trainings.”
 - “Our agency does not provide funding to allow workers to attend ongoing training that is specific to our job duties”
 - “There is no budget for trainings, no opportunities for workers to attend advance trainings to learn new skills or approaches. IF workers are able to attend training, there is no mechanism to assure workers are implementing what they learn instead of falling back into old habits.”

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.

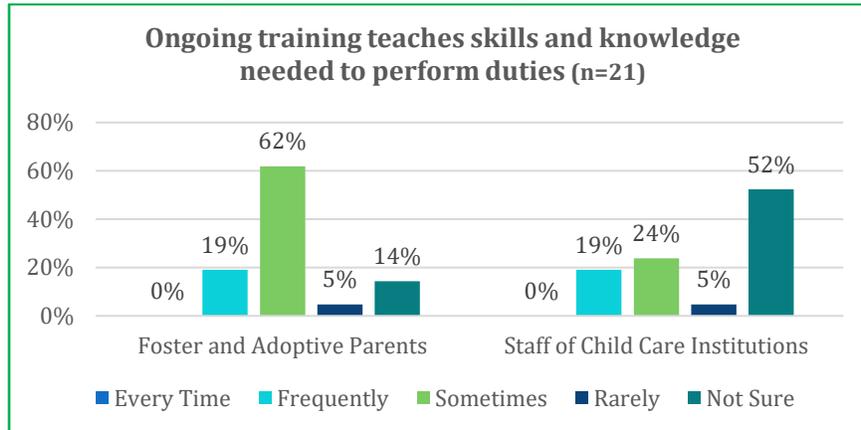
- A. Foster Caregivers were asked the following questions during the Stakeholder’s Meeting:
- **What training was initially available to you when you began providing foster/relative care/pre-adoptive care?** Responses include:
 - “PRIDE training” (all agreed)
 - “I was told I had to wait 5 months to get into training because it was ‘lake season’ and people don’t want to teach in the summer”
 - **Was the initial training of high quality to prepare you for your role as a foster caregiver?**
 - “No [many people] – information is good but not all correct and in no way does it prepare you for being a foster parent.”
 - “Very dated videos.”
 - “Trainers seemed to want to get it over with because they were exhausted with their other responsibilities.”
 - A participant shared concerns about not finding the new PRIDE helpful – there are updated videos – but sitting in front of a TV in a room with others wasn’t a helpful learning experience for them. The exact quote was not captured.
 - **What ongoing training is available?**
 - ““Yes/No – we don’t hear about many”
 - “I was surprised about [the lack of] ongoing training opportunities, or support groups for foster parents”
 - **Is there ongoing training of high quality and does it support you in your role as a foster caregiver?**
 - “Trauma training was helpful”
 - “In two years only have seen one ongoing training available”
 - “I’m not told about trainings, just found about one in our area that would be helpful, and heard that there are scholarships available, but wasn’t told about it by the agency”
 - Some participants were aware of a support group on the 1st Monday of the month but many didn’t know about it and exact comments were not captured.
 - **Have you participated in, or are you aware of specialized training for adoption in your area? If so, is that training of high quality?**
 - Due to discussion on other questions, this specific question was not asked of the group.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

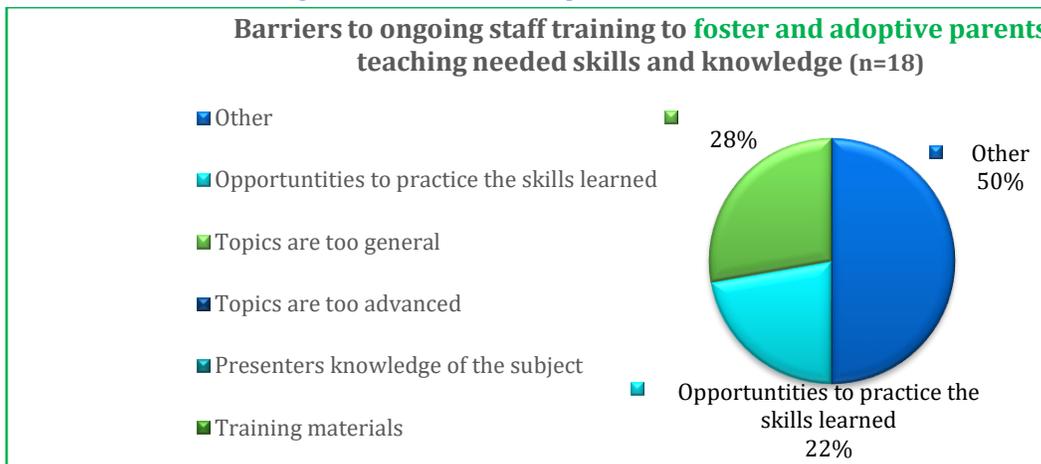
- What are the barriers, or what gets in the way, of receiving necessary training?
 - “Child care isn’t offered so I can get to training”
 - “The time of day training is offered”

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?



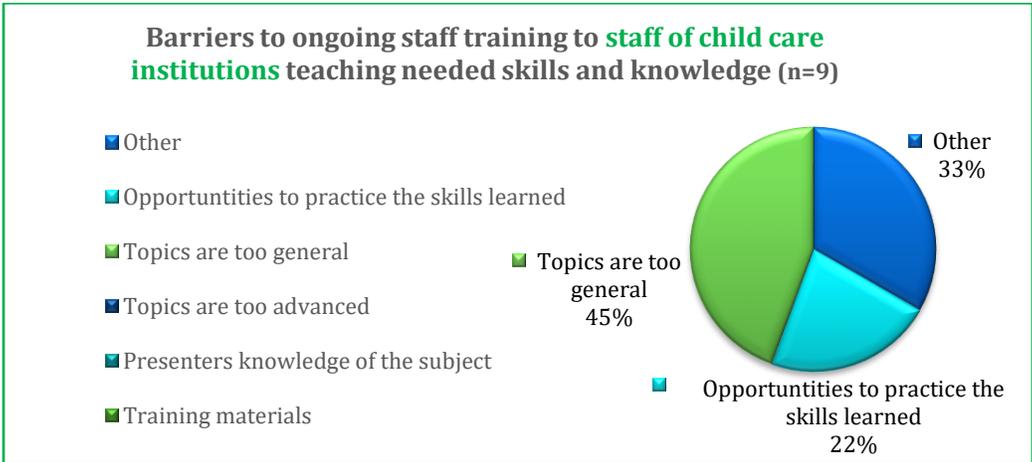
- Respondents who did not answer “Every Time” to this question were asked: **In your opinion, what gets in the way of trainings to foster and adoptive parents or staff of child care institutions getting all the needed skills and training needed to perform their duties from ONGOING trainings? Choose the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



- Other reasons provided:
 - “More opportunities and web-based opportunities I believe would be beneficial.”
 - “Too fast paced and job responsibilities get in the way of the embedding of skills process”
 - “I don’t think that most foster parents are given realistic information about what fostering is really like, starting at the licensing process.”
 - “Some foster or adoptive parents come in to child care or training with preconceived ideas of what is best and often struggle when trainers challenge their thinking.”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "Scheduling and location limitations for families are a barrier for many families."
- "Time, funding"
- "Access to childcare to attend trainings? I am not certain as I don't work directly with foster parents."
- "Difficult for foster parents to get away from fostering to attend training, as well as the new respite requiring licensed homes makes that barrier even more difficult"
- "The lack of knowledge that they need additional training"

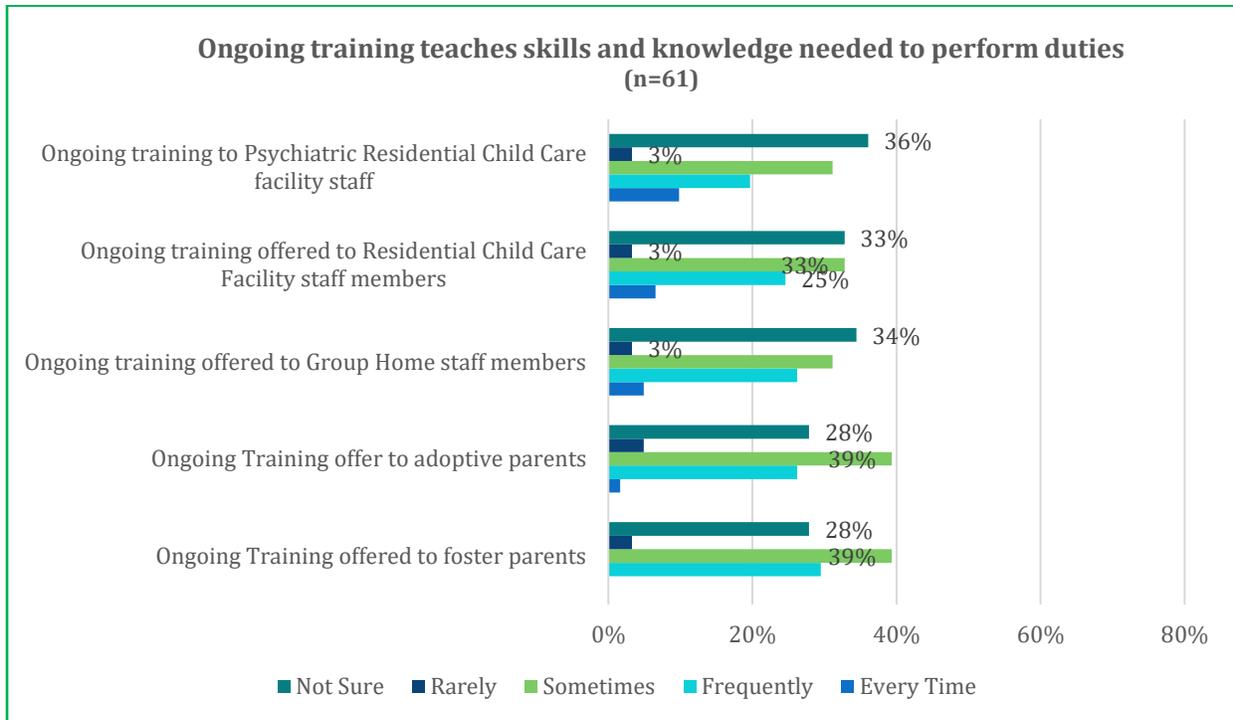


- Other reason provided:
 - "Retention of workforce leading to consistent re-training"
 - "Time"
 - "I don't know"

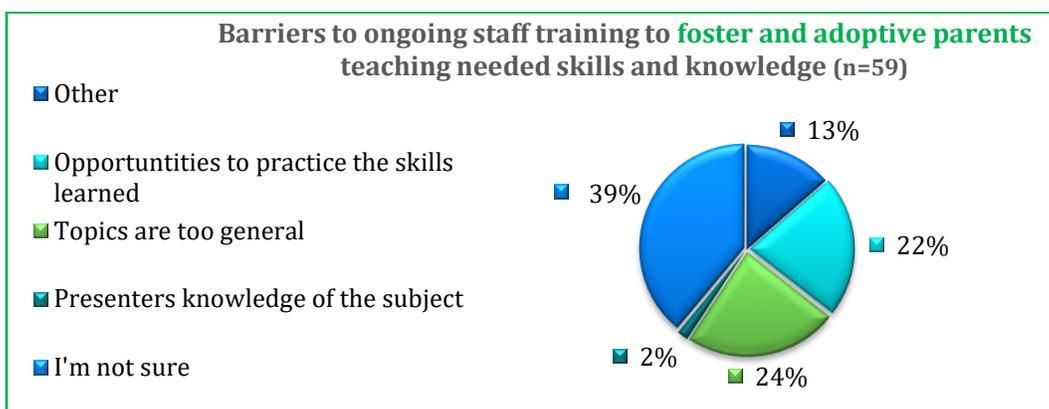
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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?



- 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:*

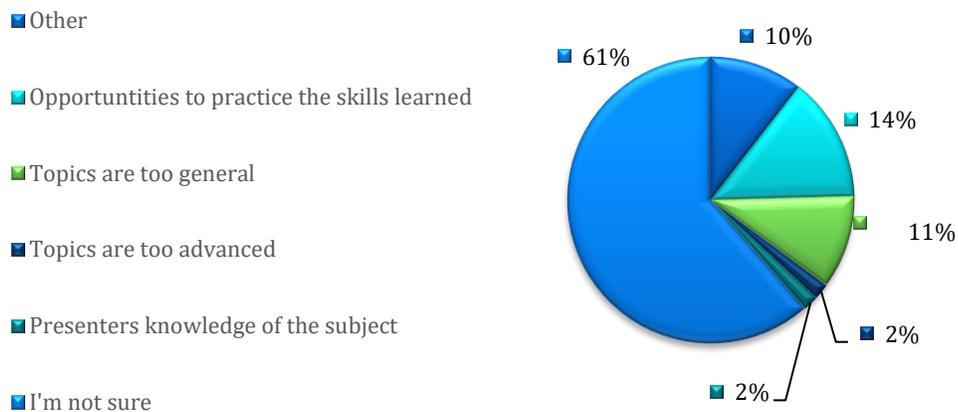


- Other reasons provided:
 - “The child put in placement has such severe needs even with training it can be difficult for the foster parents”
 - “Being able to put the tools learned into real situations”
 - “Foster parents' time commitments with other children in the home and other activities required of them”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "Lack of interest"
- "There isn't enough funding to provide the appropriate trainings for these families"
- "Life's demands, the information making sense to implement, and lack of topic information presented"
- "No room for flexibility - one training regime for all, especially for initial licensing. Not everyone learns the same / has the same background. Class work is intentionally targeted for the slowest learners"
- "Barriers of physical time or mental space to attend a training, process the information, and apply the strategies"

Barriers to ongoing staff training to Residential Child Care staff teaching needed skills and knowledge (n=57)



- Other reasons provided:
 - "Staff turnover"
 - "Staff turnover and the need to retrain staff to the point they are proficient at using the skills needed"
 - "You rely on that agency too much to provide training, so competency varies a great deal"
 - "Financial issues, lack of professional staff"
 - "Not enough funding; these agencies have limited budgets to send staff to appropriate trainings. Most staff "learn on the job" and this is not in the client's best interest. While working with kids with behavioral issues, staff may be triggering behavioral issues and not realize it due to lack of training"
 - "Respite and in-home support providers are often looking for a job and not a career. I often wonder if they understand their importance in serving individuals"

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 as providers, they did not feel there was much support to them to support their work with the foster youth. Specific comments received include:
 - “If you notice something and you’re concerned, they don’t address it”
 - “It’s really hard to get the kids into services. As a foster parent you’re constantly pushing to get them help but it takes a long time”
 - “Conflict of interest to have an agency with their own in-house therapist who has a vested interest in maintaining clients and will refuse to switch the children to another therapist when it’s not going well”
 - “I’ve had to consistently pursue to get the services my kiddos need”
 - “I don’t know if I can continue to do this because of the damage it’s done to my family, and how I’m treated” [another person agreed]
 - “I feel very unappreciated”
 - “We’re disposable. Seems like our county has major issues. The system is broken, but the kids still need us”
 - “I think they communicate expectations one way, but they want something different (i.e. treat the child like they’re my own, but then they don’t want us to get attached)”
 - “If caseworkers have opportunities to debrief and decompress, why aren’t there opportunities for the foster parents to do that?”
 - “I’ve had workers come to my house and talk about/complain about all they have to do, but don’t they think we have just as much?”
- 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:
 - “Trying to find child care and respite is impossible, especially if you live in a rural area.”
 - “I need respite because I have a high need child in my home and it’s only provided for limited amounts of time (2 days per month)” *Others said there aren’t really hard and fast rules about respite and if you feel you need more time you can certainly request.

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “We have to find our own respite”
 - “I think it’s a lot of work to have to go through the whole PRIDE training just to provide respite. That needs to be changed.”
 - 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?
 - Most agreed transportation has been available from the agency, yet concerns were expressed. Specific comments include:
 - “Transportation to assist with getting children to visits is provided.”
 - “The children don’t know the drivers/vehicles and it retraumatizes them. I was told I have to send the children with these strangers, even though they’re scared and crying”
 - 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:
 - Many concerns were expressed during this meeting and a specific ‘helpful’ service was not clearly identified.
 - Missing (not working well):
 - ““We need a Mentor/Natural Support program for foster parents – we need a neutral advocate, especially when a 960 is filed on a foster parent”
 - ” Everything is catered to the parents.
 - “The parents are offered money to get what they need like car repairs, education, etc. – that doesn’t teach them – it enables rather than helps them”
 - “I think caseworkers are extremely overworked and underpaid and it would make more sense to pay them more, and invest in the children who have been harmed, rather than the parents”
 - “I think there should be a cap on the number of kids on the caseworker’s caseload”
- 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”[all agreed]
 - “I wasn’t receiving medical services for a while because parents wouldn’t allow them to get what I needed. Once custody changed [to the county] I got what I needed.”
 - 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?
 - All agreed the restrictions were not typical.
 - Specific comments include:
 - “There’s more restrictions than there are for ‘normal’ teens”
 - “Can’t go to a school dance, because not easy to get permission from the social worker in time to attend (they’re so busy)”
 - “Can’t go to Sky Zone, or go on any trampolines”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Most kids will hang out with their friends and sometimes we can’t do that because they need to talk to the worker about that”
- “I believe you should be able to get your driver’s license, at least, because it’s hard to get around. The bus doesn’t go everywhere we need to go”
- “Sometimes you have to explain to your friends why you can’t do stuff”
- “If we aren’t allowed to do anything how are we supposed to learn from our mistakes?”
- 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]
 - School, PATH IL services, social worker and foster parents were the providers identified by the youth in attendance.
- What was most helpful (IL service) and what would have made the service more beneficial?
 - Specific comments received:
 - “Getting a driver’s license so I could get to work”
 - “How to apply for college and scholarships:
- 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. All found it helpful and meeting their needs. Specific comments include:
 - “Going to therapy is really good”
 - “You can share what’s going on, can be open about it and express yourself”
- What would help the agency’s ability to ensure that services children and family need are provided?
 - Specific comments include:
 - “Faster communication” [others agreed]
 - “I think the social workers should communicate more with the kids”
- 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?
 - “10 – she’s a mother figure to me. She’s got my back”
 - “10”
- 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?
 - Two county case managers and a therapist received honorable mention from the youth in attendance.
- C. Questions asked of Parents (n=8)
 - My child/ren and family’s situation is considered by the agency when deciding what services are provided:
(2) Strongly Agree; (5) Agree; (0) Disagree; (1) Strongly Disagree (0) Does Not Apply
 - There are many services available in my area that can help families safely care for their children:
(1) Strongly Agree; (6) Agree; (0) Disagree; (1) Strongly Disagree (0) Does Not Apply

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- My family has access to services that address our needs and help me meet the case plan goals:
(0) Strongly Agree; (7) Agree; (0) Disagree; (1) Strongly Disagree (0) Does Not Apply
 - Comments received:
 - “A step by step plan on paper would be great”
 - “Don’t know anything about this”
 - “Nobody listens to me. They say they understand, but they don’t care”
- Are there specific types of services you or your family need, or needed, but are not available in your area?
(3) Yes (5) No
- Briefly comment on your responses to the statements above (Optional):
 - “Finding a place to rent and the difficulty I have because of my record, and I realize it’s my fault to have this record but it what it is and it’s in the past. And I’m trying to move on”
- 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 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: (6) Y (2) N (0) IDK

B: (7) Y (1) N

C: (3) Y (0) N (5) DNA

Intensive In-Home Therapy: Respondents indicated:

A: (2) Y (4) N (2) IDK

B: (1) Y (7) N

C: (1) Y (0) N (7) DNA

Parent Aide: Respondents indicated:

A: (1) Y (4) N (3) IDK

B: (1) Y (7) N

C: (1) Y (0) N (7) DNA

Parenting Classes: Respondents indicated:

A: (3) Y (5) N (0) IDK

B: (3) Y (5) N

C: (1) Y (0) N (7) DNA

Addiction Services: Respondents indicated:

A: (4) Y (3) N (1) IDK

B: (4) Y (4) N

C: (2) Y (0) N (6) DNA

Mental Health Services: Respondents indicated:

A: (4) Y (3) N (1) IDK

B: (3) Y (5) N

C: (0) Y (2) N (6) DNA

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Domestic Violence Services: Respondents indicated:

A: (1) Y (6) N (1) IDK
 B: (1) Y (7) N
 C: (1) Y (0) N (7) DNA

Anger Management Treatment: Respondents indicated:

A: (3) Y (4) N (2) IDK
 B: (2) Y (6) N
 C: (2) Y (0) N (7) DNA

Prime Time Child Care: Respondents indicated:

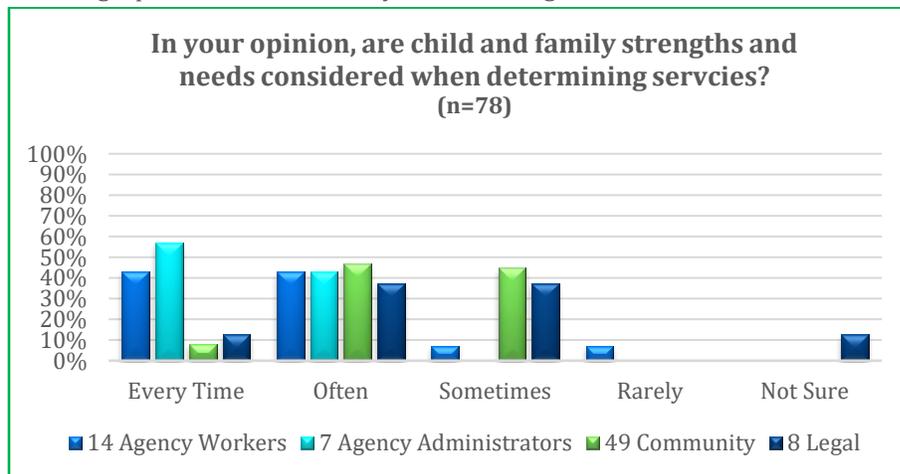
A: (1) Y (5) N (2) IDK
 B: (1) Y (7) N
 C: (1) Y (0) N (7) DNA

Transportation Assistance: Respondents indicated:

A: (3) Y (4) N (1) IDK
 B: (2) Y (6) N
 C: (2) Y (0) N (6) DNA

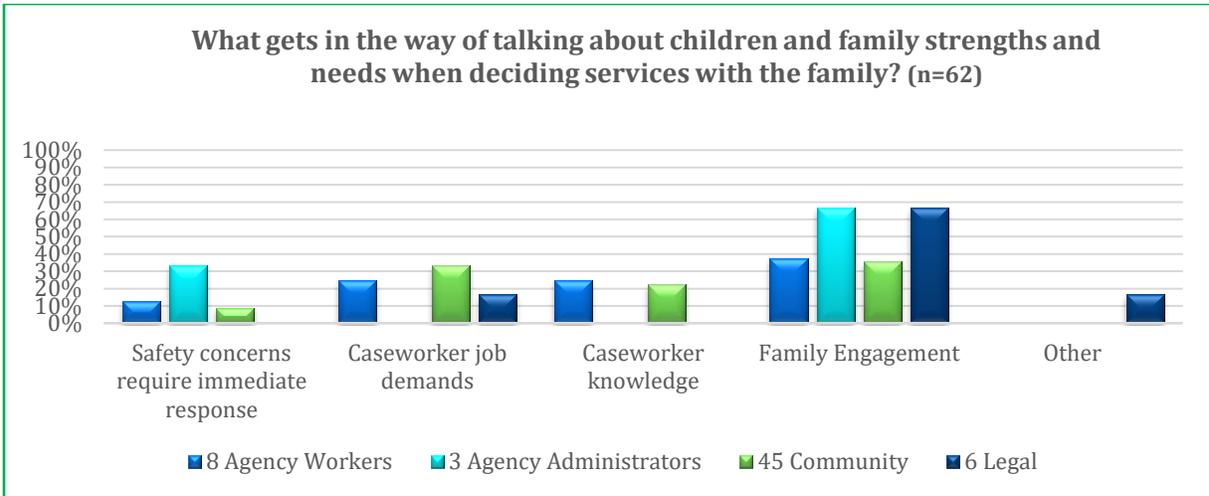
- Briefly comment about your responses to the services in the table above (optional):
 - No responses received
- Is there anything else that you can think of that would help your local agency provide services that would better able to meet the needs of families in your area?? (n=2)
 - (3) Yes (5) No
- Briefly comment on your responses to the statements above (Optional):
 - “Our (adopted) son needed extensive individual services and has been in Denver, Co. for 2 years”
 - “Would like someone to sit down with us about this child support, so I don’t lose my house”
 - “When a child is placed back in the home after placement, keep child on DJS for at least 6 months to ensure it is a change that will stick”

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



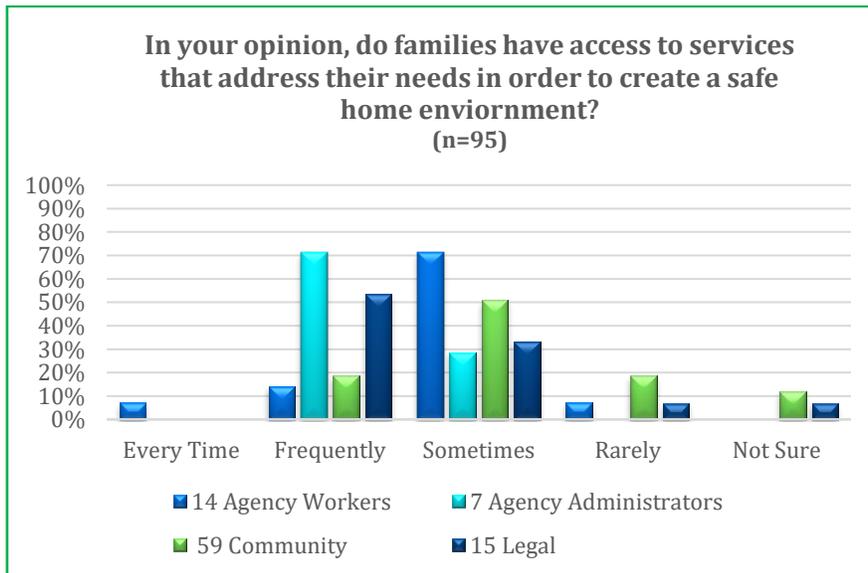
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- 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:



- Other Reasons:
 - “Caseworkers seem to want the parents to get all of their issues behind them before they can see their children or have even a chance to get them back. This is unfair to parents.”

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

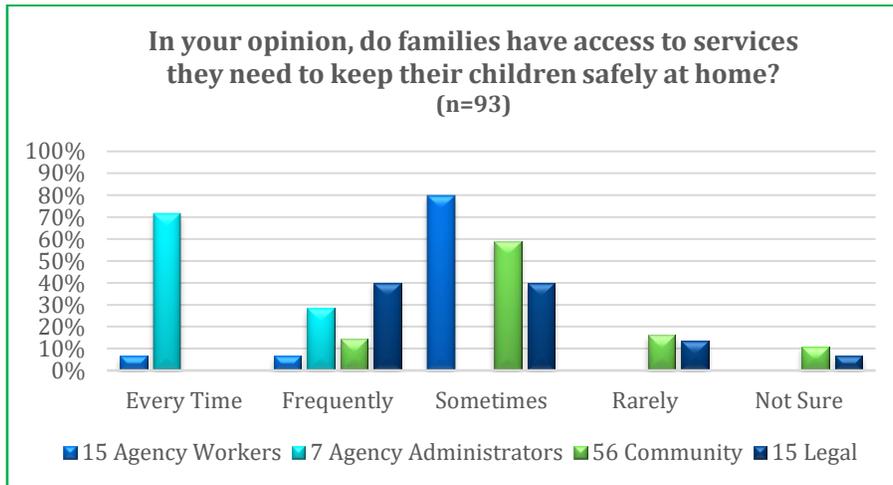


- The respondents who did not answer “Every Time” or “Not Sure” to the above were then asked the follow-up question, “What gets in the way of families receiving services need to

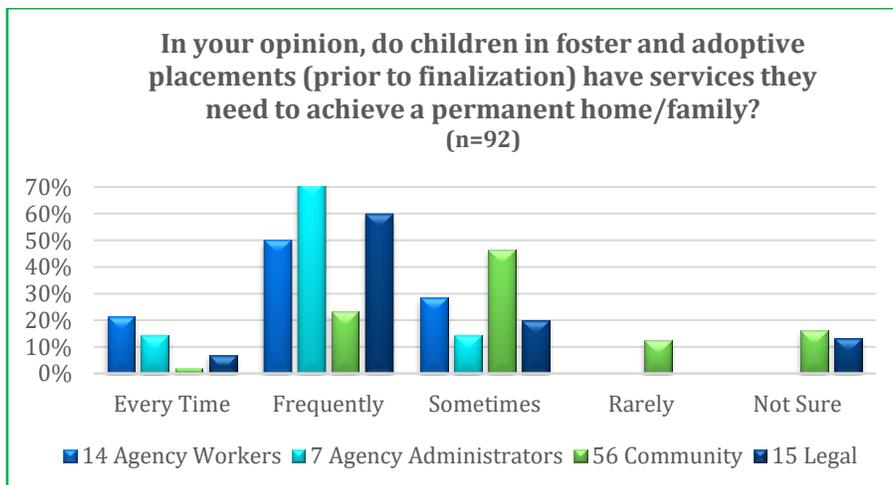
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

create a safe home environment?” (n=86) The top three issues identified were the following:

- Lack of family engagement (44 responses)
- Lack of mental health services (34 responses)
- Lack of funding for treatment (32 responses)



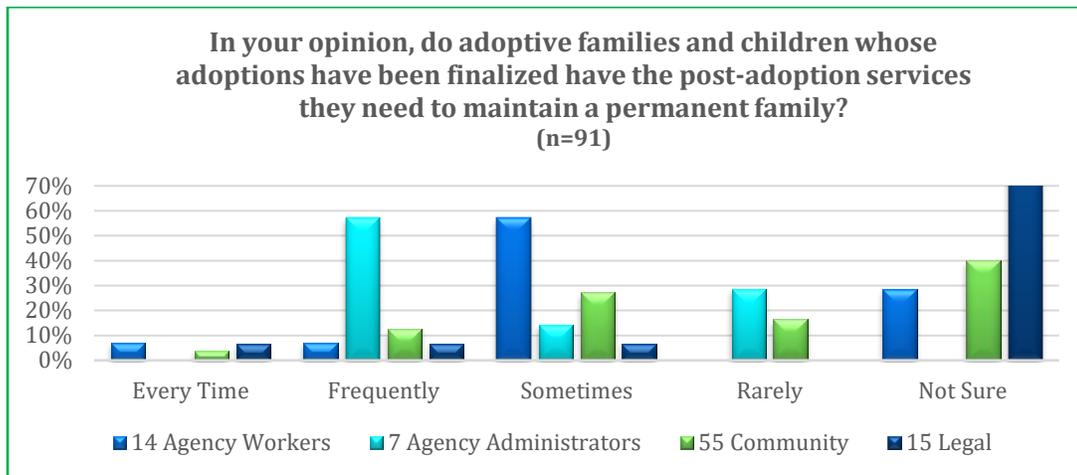
- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “[What gets in the way of families receiving services they need to keep their children safely at home?](#) (n=84) The top three issues identified were the following:
 - Caseworker knowledge (39 responses)
 - Lack of mental health services (35 responses)
 - Waiting lists for services (33 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=74) The top three issues identified were the following:

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Lack of mental health services (33 responses each)
- Lack of supportive services (i.e. respite care, parent aide) AND Waiting lists for services (31 responses each)
- Caseworker job demands (26 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 maintain a permanent home/family?](#)” (n=58) The top three issues identified were the following:
 - Lack of support services (i.e. respite care, parent aide) (36 responses)
 - Lack of family engagement (20 responses)
 - Caseworker job demands AND Waiting lists for services (19 responses each)
- F. Other comments expressed by foster parents and community members not specifically related to other systemic factors:
- Additional comments received during the Foster Caregiver Stakeholder Meeting:
 - “I’ve been told because I live in a rural area I won’t get many calls for placement because the caseworker doesn’t want to drive out of town”
 - “If you inconvenience the caseworker, you’re flagged. I had to go to counseling and get medication because of the damage done in my home from the workers. I don’t think getting labeled and talked down to is ok. It’s been an absolute nightmare”
 - “When I call the caseworkers, I don’t get called back for two days or more.”
 - “I was told by other foster parents to be careful and behave or I’ll get blackballed by the county” [others agreed]
 - “I need help to maintain a high need child and have been screaming for help and no one is hearing me. When I stand up to be the child’s advocate, you’re being shot down and treated like crap” [others agreed]
 - “They [county agency] want you to be an advocate for the child only to a certain point. You can’t go too far with it”

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- “We were told to stand down or they’ll pull my license when I tried to advocate for the child in my home”
 - “Kids were yanked out of our home, which isn’t good for the children, right?”
 - “I brought forth a name of family who may be an option as an adoptive home and was told it’s not my job to find adoptive homes, or advocate for the child”
 - “There doesn’t seem to be a partnership with the foster parents, many of whom are very experienced, and what we say is not considered. It got very, very frustrating. Then I see billboards saying that they need foster parents, and I think – we have foster parents, you just can’t keep them because of how they’re treated”
 - “I hear from everyone that does foster care, but nobody wants to speak up because they’re scared of what will happen if they say what’s happening.”
 - “We’re treated like we’re the ones who’ve mistreated these children”
 - “We have to be quiet because if they pull our license a child who’s been in our home for a long period of time will have to move to another home”
 - “It’s a broken system. The caseworkers are trying to good and I think their hands are tied too”
 - “The caseworkers have large caseloads, so I understand they’re swamped”
 - “I understand where the caseworkers are coming from, but every day I’m fighting for this kid and I don’t need them coming to me and saying, ‘poor me...’ I fight every day”
 - “What happens, in reality, is totally different than what we learn in training. We are told we are valued and important members of the team, but that’s not how it is”
 - “Too much tip-toeing around what the parents need and no attention to the children”
 - “What we understood to be child protection services has turned into parent protection services”
 - “You walk on eggshells”
 - “You can’t treat that foster child like your own, they can’t do the normal stuff. Can’t go to a friend’s house unless they’ve been background checked, can’t drive, etc.”
 - “If a 960 is filed on me, my worker disappears. If I had something happen with insurance, I at least have a representative who works with me and helps me understand what happens next. A neutral party who can help guide us”
- Via email, the following additional comment was received from an individual identifying as a foster parent:
 - “I have seen many issues arise over my time in being a part of a family who opens their home to kids in need. These kids and their foster families have had their voices taken away because of a lack of priority in giving these kids the best life they can have. Caseworkers have too many cases and they cannot put their full effort into making a better life for these kids. These

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children get labeled with “problems” that could be taken care of if they had a consistent and stable environment. Unfortunately, more problems have occurred because caseworkers have cared more about the foster families and not the actual well-being of the foster child.”

- Additional comments received from the Community online survey:
 - “More funding needs to be made available for outside services to meet the needs of the kids and families involved with social services”
 - “County Social Services does the best that they can, but the needs and intensity of the family has increased significantly, while their caseload remains the same. Often times, they are just trying to stay afloat and/or are just putting out fires instead of investing time/energy into reunification or permanency”
 - “There is no doubt that funding is the main root of the problem when it comes to meeting the needs of children in the child welfare system. State of ND needs to update state laws and work more closely with insurance agencies to get more services covered. I would highly recommend the state of ND to consult with MN regarding Rule 79 Targeted Case Management Services. We have too many families with intense mental health needs (trauma, addictions, high ACE scores...). There are not enough Target Case Management Services to serve the children in ND. There are also not enough mental health services in ND therefore demand is high, which then it takes longer for families to tap into services. Transportation is another barrier for families. Mental Health Day Treatment programs should be located in school settings with appropriate clinical supervision. If our children are not mentally healthy, they will not be able to retain information learned at school. Too many kids are experiencing trauma in the home and it's hard for them to focus at school. A lot of the times, it's the parent's crises that spill over and affect the children. Cost of living is too high, so we have parents who have to work, but don't have appropriate daycare options and leave their children unattended. The state of ND really needs to work on restructuring from the top down; should really consult with MN. MN's system is not perfect either, but they have a much better structure in place. If the state of ND really invested time and money into re-vamping mental health services, then our communities can hopefully become more healthy, which then spills over to decreased utilization of police, ambulance, and medical facilities.”
 - “Several of the questions asked for ranking of responses - but did not allow for responses other than those that were provided”
 - “Hopefully this survey will be utilized to make necessary changes in the child Welfare system”
 - “It is sad and frustrating to hear Case Workers say there is nothing they can do to prevent a child returning home, after PRTF level of care, because the child was not removed due to CPS issues. There are times when parents are not involved in their child's treatment and don't have the necessary skills

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and supports to help their child, yet the child is sent home. I'm tired of the "shoulder shrug" by case workers."

- "I would like to see the case workers have more training in the area of Infant Mental Health esp. concerning attachment and reattachment"

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:

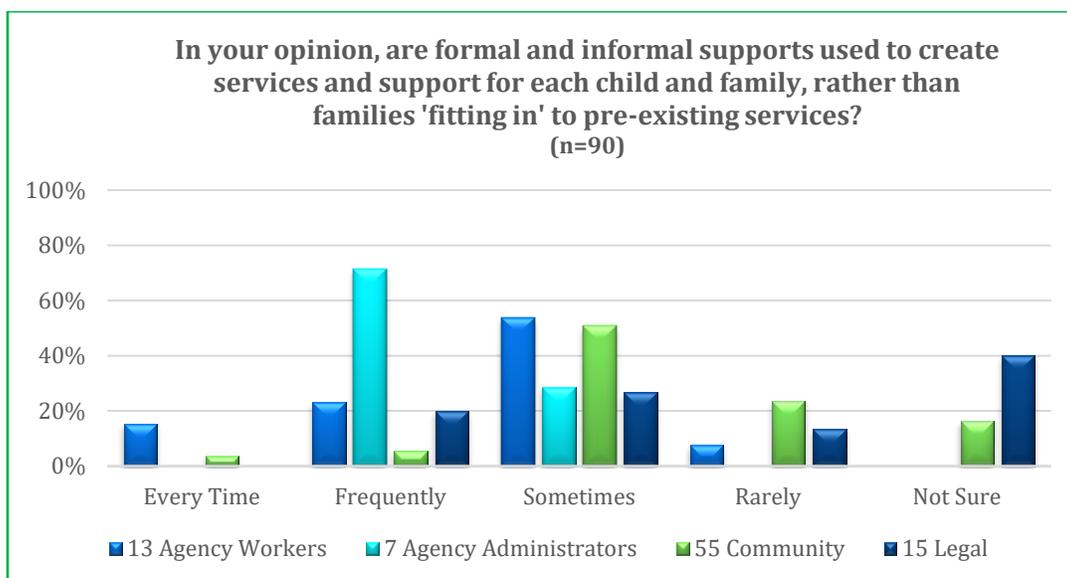
- **How individualized are the case plan for the children?**
 - Specific comments include:
 - “No, I don’t think so. They’re individualized to what the parent needs, not the kids” [all agreed]
 - “The only time the child is ever brought up is asking me how the child is doing, then the rest of the meeting is about the parents.”
- **Are the children’s needs being met with the services provided?**
 - Due to conversation on other questions and items, this specific question was not asked.
- **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.)?**
 - Due to conversation on other questions and items, this specific question was not asked.

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?**
 - The consensus was yes, they are receiving the right services.
- **Did you think these services were culturally appropriate and addressed any special needs of you or your family?**
 - The consensus was youth thought services were culturally appropriate.
- **How did your worker help you understand what services you were going to receive?**
 - Specific comments include:
 - “She’d go through a paper with me, like an evaluation, that discussed my rights and cultural needs, to make sure I got the right services” [another agreed]
 - “My worker just told me what services I was going to get but didn’t explain why.”
- **Did any of the decisions about services change after talking with your worker?**
 - “I didn’t want to go to residential and one day she put me in there and I didn’t know I was going to go there. Hard to trust her after that”
 - “I was supposed to reunite with family, but it changed, and I didn’t help make that decision.”
 - “There’s a certain family member I wanted to see but wasn’t able to; wasn’t my decision either”

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- 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
 - “Therapy with my siblings; family therapy; individual therapy; had to move away for a while but when I returned they made sure I could go back to the same therapist”
 - Improve
 - “When the parents aren’t working on things and still want parental rights they should take the rights away rather than waiting for years. That was a lot of work on me”
 - “Communication between me and the team – they know what’s going on but I’m the last one to know and it’s my life they’re talking about”
 - 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?
 - “Yes, always made sure I wouldn’t miss school. If it was during school, made sure it was during study hall”
- H. Question asked of Parents (n=8) (*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.
 - (1) SA; (5) A; (2) D; (0) SD (0) DNA
 - The case managers I have worked with were available and respectful.
 - (4) SA; (4) A; (0) D; (0) SD (0) DNA
- 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

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

create services and supports that are developmentally and culturally appropriate? (n=72)

The top five issues identified were the following:

- Lack of Native American foster homes, elders/mentors, caseworkers (33 responses)
- Services tailored to meet the needs of parents [30 responses]
- Collaboration between Child Welfare, Behavioral Health, Developmental Disability, [22 responses]
- Lack of culturally appropriate services (20 responses)
- Understanding of child development [19 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?
 - Going well:
 - “Families getting better after being in therapy, getting smarter and knowing things they didn’t know before”
 - Needs to be changed:
 - “We don’t have enough foster homes – wanted to sign myself in to foster care after age 18, but there wasn’t a home available for me”
- Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?
 - “No” (All agreed)
- 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?
 - “Sit down and talk to us, more opportunities like this”
 - “Consider letting us have more freedom – we’re giving them feedback on how we’re doing, living by their rules – they should learn from that and it should change things”
 - “If they had meetings like this, they should also have meetings letting us know how things are going to change”
 - “Sometimes I feel like I’m talking but no one is listening to me. Leaves us wondering if you actually heard us or not?”

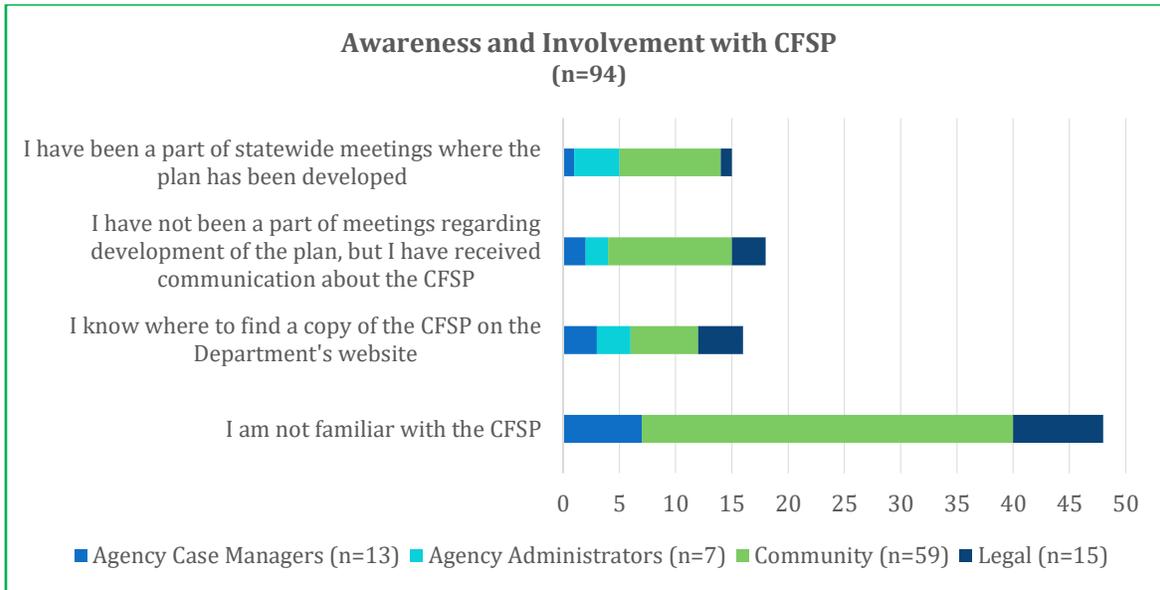
B. Foster Caregivers were asked the following questions:

- 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.

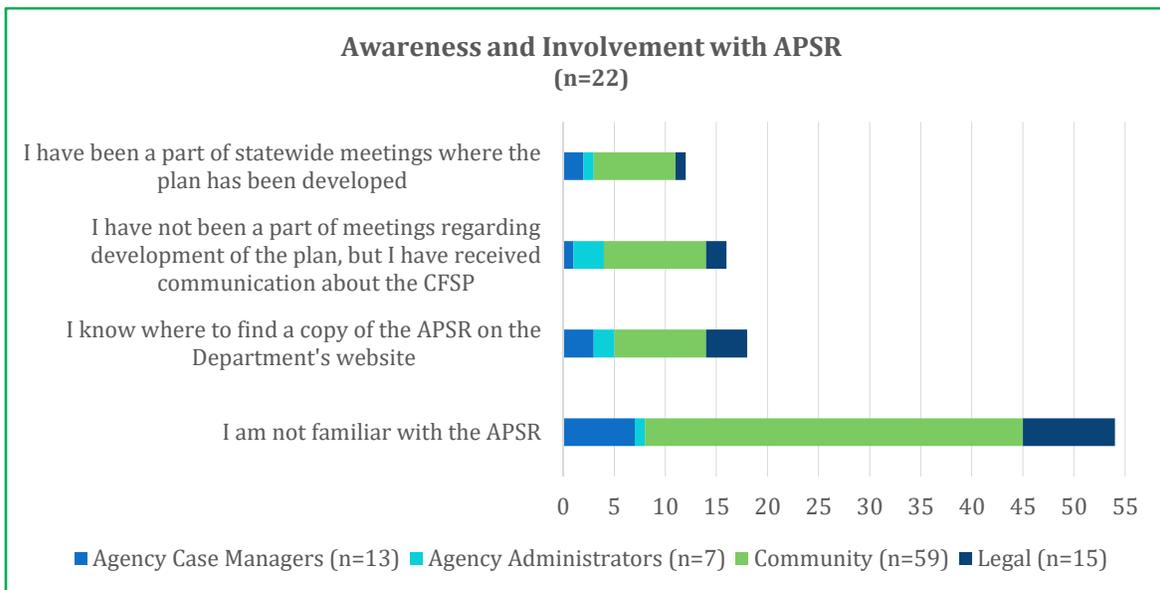
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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):



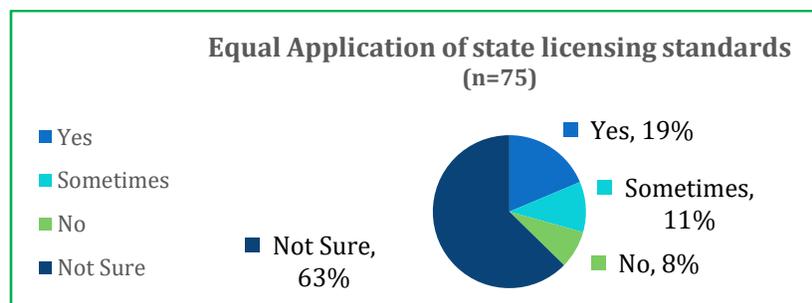
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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 don't know" [others agreed]
 - "There's no way of gauging that"
- 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=5):**
 - "This is not something that pertains to my role with the agency"
 - "The county licenser worker does a poor job. She tells some families information, but does not tell everyone. She also tells a lot of false information which causes anxiety and/or false hope to families"
 - "Low numbers of families seem to reduce requirement to be a foster family."
 - "Some concerns about the cleanliness of foster homes as opposed to group facilities."
 - "Personally observed multiple instances of bias in the process"

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

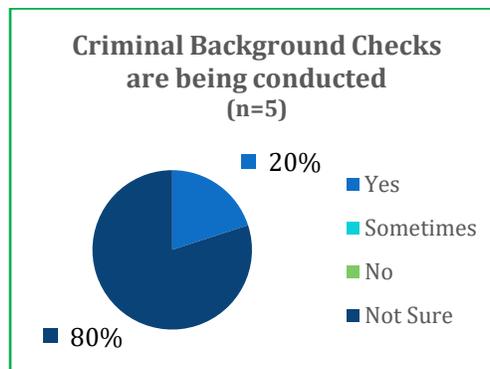
FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION: REQUIREMENTS FOR CRIMINAL BACKGROUND CHECKS

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:

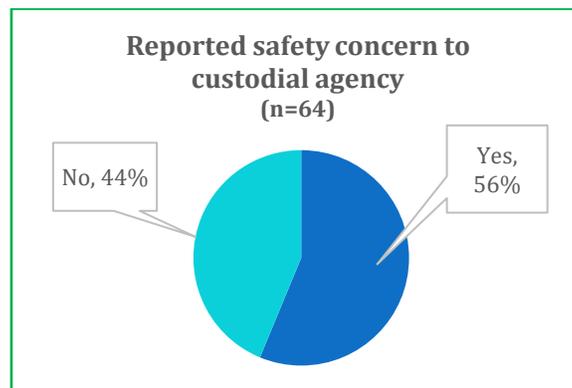
- From your experience, are the required criminal background checks being conducted for foster parents, adoptive parents, and staff in child care facilities?



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

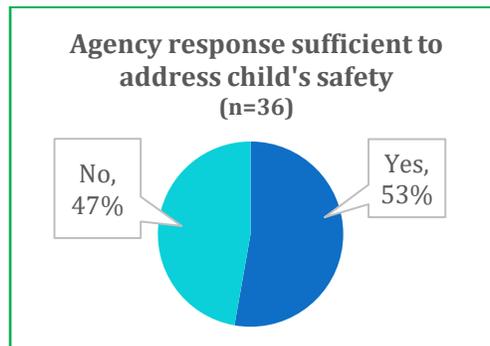
B. Questions asked of both groups:

- 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?

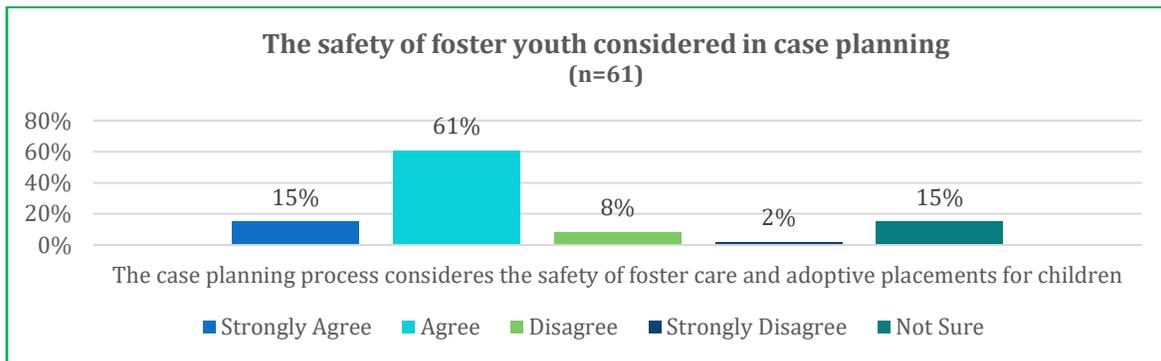


- Please comment on your response above(n=9):
 - "Unfortunately, I believe they were placed in a residential placement instead of exploring appropriate in-home resources prior to the placement. A more proactive approach would assist in maintaining the current foster home placement if community-based resources were accessed prior to a crisis."
 - "They did not move them, because there wasn't another home for the children to go to. Or, it "isn't bad enough" to remove them from the foster home. The requirements to remove a child from a foster home is more strict than taking them out of the bio home."
 - "The regional supervisors opinions are drastically different from each other. There is not much consistency. (Ex: Some will allow children to move to a new home as a foster placement before going into adoption placement, others will not. Some approve Sky Zone, some do not. Some approve hunter safety classes, some do not.)"
 - "The foster home was investigated more, and child was moved to another home."
 - "Often times the custodial agency has to be pushed into doing something for the child."
 - "I am uncertain of this as I closed the case afterwards."
 - "The county has stated that they have 90 {days} to do background checks and assess the safety of an emergency placement AFTER the child is placed there. Even when being told the home is not safe from knowledge or other family members or community partners they have still chosen to place with unsafe family/kinship."
 - "Case worker agreed with our concerns but did not address them."
 - "Again, often informed about the shortage of available foster home placements or blame is placed on the youth rather than looking for options or problem solving. "

C. Question asked of Community Stakeholders:

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

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS



- Please comment on your response above (n=12):
 - "This is not a part of my role within the agency, I do not have contact with CPS"
 - "I believe that this happens most of the time however due to limited resources we do see times where it is not occurring, or children are not placed in the best environment to support their needs"
 - "Case plans goals are never discussed in CFTM. Never. At least not in the SE region."
 - "Case planning process should be truthful in the length of time the child will be fostered"
 - "I agree that we eventually get there, but unfortunately sometimes this comes at the expense of the youth"
 - "They do I believe for the most part"
 - "I think that these things are considered but maybe not as realistically as needed "
 - "I want to agree, but I see many children put through the "system" by being in foster care for months and years on end allowing the parents to make multiple mistakes against the primary plan for reunification with no penalty other than the child gets stuck in the system."
 - "It appears as if there is such a shortage of foster homes that kids are placed with relatives too quickly with very questionable backgrounds. With these quick placements, it appears as if the child never had a good start in his/her foster home due to safety reasons."
 - "There could be more influence of treatment providers on developing case plans for youth."
 - "At times due to lack of FP, issues are over looked"
 - "Define safety. Emotional , physical, educational??"

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?

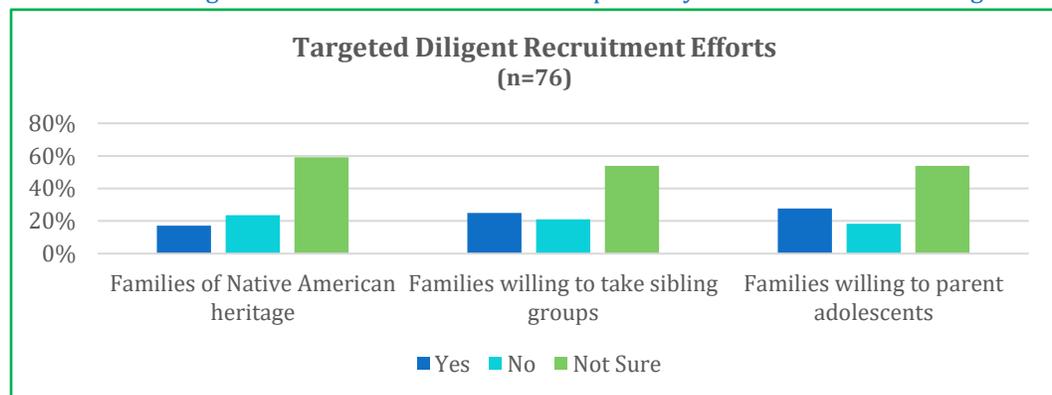
Feedback on this systemic factor was sought from three groups: Foster Caregivers, Agency Case Managers reporting a role with Foster Care or CPS responsibilities, and Community.

A. Foster Caregivers were asked the following questions:

- Are there diligent efforts to recruit foster parents in this region?
 - “A lot of advertising, but not seeing the county recruiting”
 - “They lie in those commercials because they say foster parents don’t have to be perfect, but if you do something a little out of line, you’re in trouble”
 - “Retention is an issue – we feel disposable and unappreciated” [others agreed]
 - “I think we could handle some of the pressures that fall on us if at the end of the day the children are safe.”
 - “I’ve been written up for letting my children do normal childhood activities such as riding bikes, swimming, roller blading, etc.”
 - “The foster parent handbook is unbelievable. You can’t treat them like a normal kid because of all the rules.”
- Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
 - Discussion on other topics did not permit time for this question.

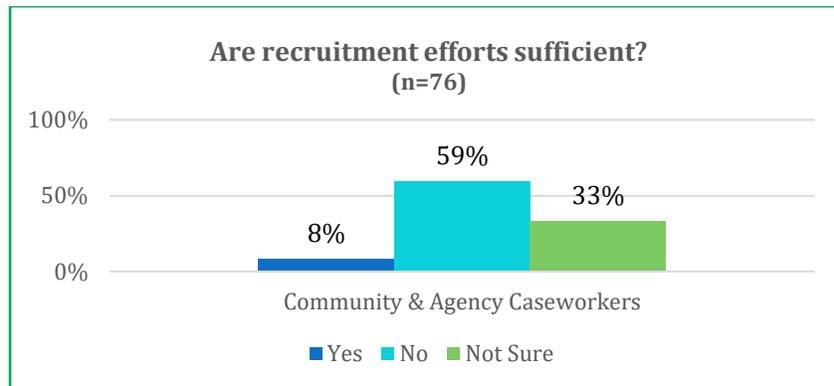
B. Questions asked of Agency Case Managers reporting job responsibilities in Foster Care or CPS, Legal and Community participants:

- 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=40)
 - "Educating the community more- as well as more advertisement and recruitment -- fundraisers, meet and greets, radio/ tv advertisements, flyers, billboards"
 - "Further training and assistance meeting with the mental health and behavioral needs of the child placed in care"
 - "The financial and time demands on family is too great. Having the county worker provide transportation or increasing support is essential!"
 - "Increased reimbursements"
 - "There is virtually no advertisement regarding the need of more foster & adoptive families. Also, there needs to be more funds for Post Adoptive services and better respite programs. The current Post Adopt program tries so hard, but they are limited because they lack funds, therefore lack the ability to provide respite."
 - "Add more home support and training"
 - "I am not sure, but youth are often sitting in higher levels of care just waiting for a foster home that is willing to take them. And then a lot of time when they are placed the youth has 1 or 2 incidents and then they are asked to leave. Foster Homes need to be willing to "keep" the youth and work through some of the behaviors in the homes. Many youth have never been in a home setting and have no idea how to function in a home and will often sabotage placements. As a parent you don't get to give up on your child Foster Parents shouldn't be able to give up as easily either. We need homes that are willing to take the more difficult youth, but the Foster Home Case Manager and programs need to be able to provide the support to those homes. Becoming a Foster Home is also difficult and very cumbersome. I understand it is important to ensure safety in a home, but if we are willing to send youth into their biological home without making sure their furnace has been inspected in the last 3 years is it realistic to ask families that are willing to take kids to do this and at their own expense. It would be nice if foster care contracted with companies that would be willing to do it at least at a reduced cost."

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "Pay foster and adoptive parents money for trainings, allow on-line or alternative methods for trainings, provide a stipend for purchase of required needs in a foster/adoptive home that are not required in a "normal" home"
- "Providing more information to potential foster parents about the child; and reimbursement"
- "Faster licensing timeframe and more staff to do it. In one county, it takes months before the licensing worker can get out to your house to start the process, and people give up."
- "Many families do not want to work with local county agencies, so that becomes a barrier for families' willingness to be a foster/adoptive family."
- "Decrease staff turnover, Staff who are strong communicators, Keep communication child-centered"
- "I have heard from foster parents that there are not enough placement options for children in the system. Therefore, when someone agrees to take a child for the short term they have been misled regarding the time the child will need care. This gives the foster homes within the area a distrust of the relationship, and I have heard of several people quitting all together. I'm not sure how this can be fixed, but it is a real problem."
- "Systemically we chase foster parents away with our failed attempt to use the wraparound process in true fashion as it was meant to be used. We do not partner with families and encourage foster and biological families to engage with one another we separate them and try to control the communication between them. We do not support foster families, we create barriers to their ability to care for children and place undue burdens on them financially. County caseloads are too high, and workers are not able to support foster families and not able to support one another."
- "Many people choose not to get licensed because of the training requirements not being conducive to people's schedules"
- "Hold more meetings within local groups and churches identifying needs."
- "Outreaches to educate families about at-risk youth"
- "One license to accommodate foster care and adoption, too many steps for foster parents or Kinship providers to become adoptive parents"
- "I think the state/county needs a formal Emergency Shelter for short term placements. I also believe that a "home" run by the state/county could help meet needs. When we "convince" a foster home to take in kids, i.e. they take more kids than they really want or feel comfortable with, or they take an age they may not want or feel comfortable with, we are just setting things up to fail. I believe a family environment is best for most kids, but there are times when a "center" or "group home" would be more than appropriate."
- "More training to deal with difficult behaviors"
- "More staff and resources to recruit and then license homes. We often have a wait list."
- "Smaller caseloads for workers working multiple programs. When the CPS and foster care caseloads are high, there is not as much time available for recruitment."
- "Increase of community awareness of needs, better funding"

STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "Additional funding for increased percentage FTE to focus on recruitment and licensing. Case managers have little extra time/energy to focus on recruitment efforts in addition to meeting the needs of everyone on their case load already."
 - "More support for foster and adoptive homes"
 - "Advertise or present to local churches or something. The need is very high"
 - "Support while youth is in the home is part of the problem, families seem too quick to give up on youth when they do find a home"
 - "Increased education and training opportunities for trained foster families "
 - "Increase public awareness on social media as one possibility"
 - "Allow the foster parents to have adequate pay and resources (connecting to other professionals, services, social workers, trainings, etc.) as well as taking care of the families you have."
 - "Reimbursement rates for foster families need to increase. No one is in this field to make money, but there are so many additional ongoing costs for foster kids I think it would lessen the financial stress on foster families. I know money is an issue with budgeting, but realistically I think this is a big deal."
 - "More ongoing support for foster families."
 - "Additional advertising and information provided on incentives of doing so."
 - "Putting a cap on how many foster care placements a home/ family can have at 1 time. High needs kids are being placed in large homes and that child as well as any other child placement is affected especially if the others in the home are children with needs not as high as one."
 - "The process for screening and licensing foster / adoptive homes is overly cumbersome, open to abuse, subject to personal bias of the person completing the screening, and not clearly defined. As it stands, each county and private entity is allowed to expound upon the state guidelines for licensing, adding additional burdens upon the family attempting to become licensed (i.e. requiring fire marshal surveys of the residence; mandating the in-home inspections occur between the hours of 8a and 5p)"
 - "Viewing/Valuing FP as professional team member and providing commensurate financial comp."
 - "I don't know that there is a way to solve this issue. I have not seen active recruitment efforts in this community for quite some time. It is difficult to manage this issue due to the high need for foster and adoptive homes. I think that recruitment efforts at the workplace or churches could be beneficial."
 - ""Case workers with knowledge, skills, and ability to provide honest support and supervision."
 - "Not sure"
 - "Greater education of the community about the needs, responsibilities, and commitments of adoptive/foster families."
- 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.](#)
 - No participants responded to this question.

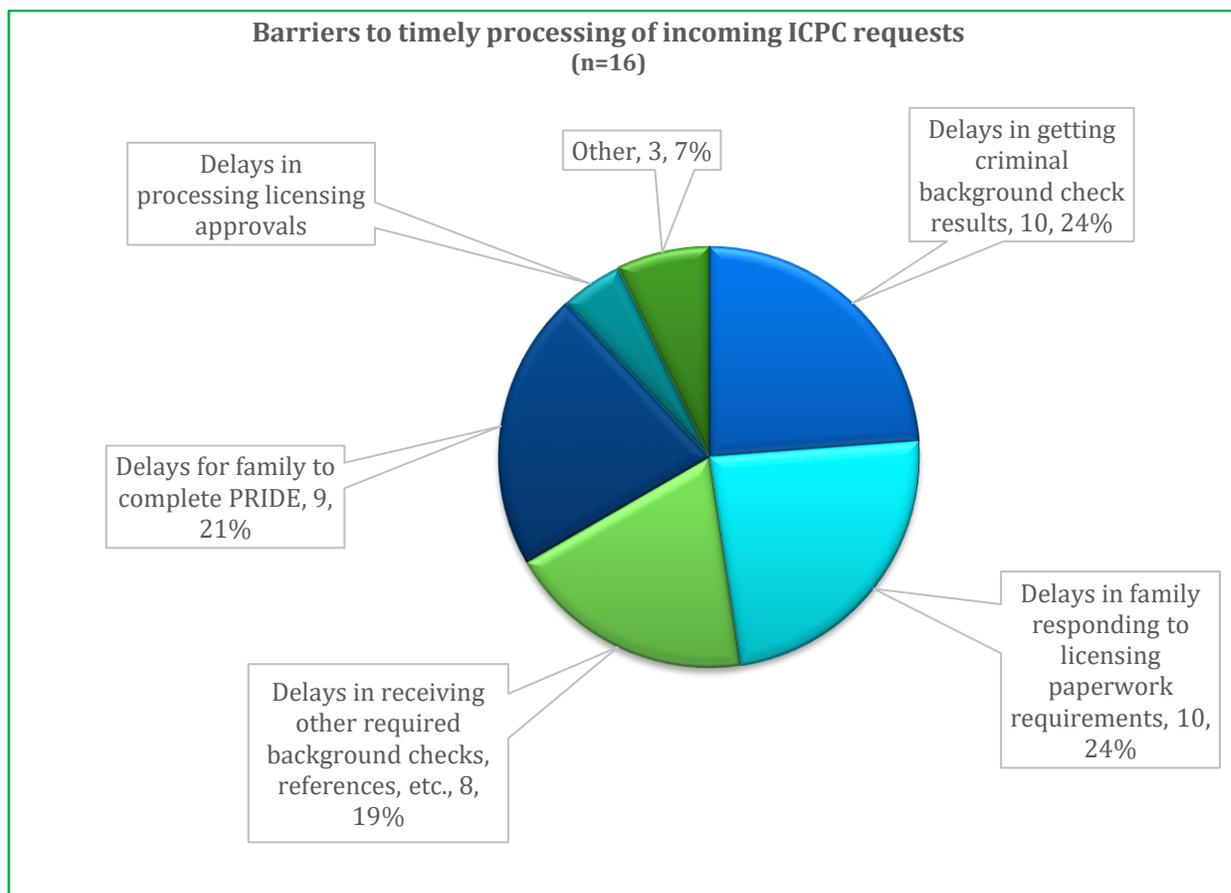
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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=7), Agency Administrators (6), and those indicating a role with AASK in the Community Survey (n=3).

- 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:
 - “Lack of communication between the counties and family members”
 - “Our regular caseloads are too high. Taking on additional home studies creates a backlog”
 - “Caseworker high caseload”

APPENDIX

Appendix

- 1.1 R3 Federal CFSR State Rating Summary Report, September 2016
- 1.2 R3 Federal CFSR Metro (Fargo) Site Rating Summary Report, September 2016
- 1.3 CY18 SE OCR Site Rating Summary Report, September 2018
- 1.4 CY18 SE OCR Site Rating Summary Report, September 2018: In-Home Services Breakdown
- 1.5 CY18 SE OCR Site Rating Summary Report, September 2018: Foster-Care Services Breakdown
- 1.6 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 R3 Cass Site, (Fargo), September 2016

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	77.78% n=7	22.22% n=2	n=18					
Outcome S1				77.77% n=7		22.22% n=2	n=18	n=9
Item 2	71.43% n=5	28.57% n=2	n=20					
Item 3	77.78% n=21	22.22% n=6						
Outcome S2				77.78% n=21	3.7% n=1	18.52% n=5		n=27
Item 4	90% n=18	10% n=2	n=0					
Item 5	80% n=16	20% n=4	n=0					
Item 6	40% n=8	60% n=12	n=0					
Outcome P1				40% n=8	55% n=11	5% n=1	n=0	n=20
Item 7	72.73% n=8	27.27% n=3	n=9					
Item 8	73.33% n=11	26.67% n=4	n=5					
Item 9	80% n=16	20% n=4	n=0					
Item 10	76.47% n=13	23.53% n=4	n=3					
Item 11	61.54% n=8	38.46% n=5	n=7					
Outcome P2				65% n=13	30% n=6	5% n=1	n=0	n=20
Item 12	48.15% n=13	51.85% n=14						
Sub-Item 12a	74.07% n=20	25.93% n=7						
Sub-Item 12b	45% n=9	55% n=11	n=7					
Sub-Item 12c	70.59% n=12	29.41% n=5	n=10					
Item 13	54.17% n=13	45.83% n=11	n=3					
Item 14	74.07% n=20	25.93% n=7						
Item 15	45% n=9	55% n=11	n=7					
Outcome WB1				44.44% n=12	40.74% n=11	14.81% n=4		n=27
Item 16	94.12% n=16	5.88% n=1	n=10					
Outcome WB2				94.12% n=16	5.88% n=1	0% n=0	n=10	n=17
Item 17	86.36% n=19	13.64% n=3	n=5					
Item 18	100% n=17	0% n=0	n=10					
Outcome WB3				87.5% n=21	8.33% n=2	4.17% n=1	n=3	n=24

APPENDIX

1.3 Case Rating Summary – ND OCR SOUTHEAST, September 2018: All Cases

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	100% n=4	0% n=0	n=8					
Outcome S1				100% n=4		% n=0	n=8	n=4
Item 2	80% n=4	20% n=1	n=7					
Item 3	100% n=12	0% n=0						
Outcome S2				91.67% n=11	8.33% n=1	0% n=0		n=12
Item 4	90% n=9	10% n=1	n=0					
Item 5	90% n=9	10% n=1	n=0					
Item 6	60% n=6	40% n=4	n=0					
Outcome P1				50% n=5	50% n=5	0% n=0	n=0	n=10
Item 7	100% n=4	0% n=0	n=6					
Item 8	100% n=7	0% n=0	n=3					
Item 9	77.78% n=7	22.22% n=2	n=1					
Item 10	100% n=7	0% n=0	n=3					
Item 11	100% n=6	0% n=0	n=4					
Outcome P2				100% n=10	0% n=0	0% n=0	n=0	n=10
Item 12	75% n=9	25% n=3						
Sub-Item 12a	91.67% n=11	8.33% n=1						
Sub-Item 12b	66.67% n=6	33.33% n=3	n=3					
Sub-Item 12c	100% n=7	0% n=0	n=3					
Item 13	77.78% n=7	22.22% n=2	n=3					
Item 14	100% n=12	0% n=0						
Item 15	66.67% n=6	33.33% n=3	n=3					
Outcome WB1				75% n=9	25% n=3	0% n=0		n=12
Item 16	100% n=7	0% n=0	n=5					
Outcome WB2				100% n=7	0% n=0	0% n=0	n=5	n=7
Item 17	75% n=9	25% n=3	n=0					
Item 18	100% n=7	0% n=0	n=5					
Outcome WB3				75% n=9	8.33% n=1	16.67% n=2	n=0	n=12

APPENDIX

1.4 Case Rating Summary – ND OCR SOUTHEAST, September 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=1	0% n=0	n=1					
Outcome S1				100% n=1		0% n=0	n=1	n=1
Item 2	100% n=2	0% n=0	n=0					
Item 3	100% n=2	0% n=0						
Outcome S2				100% n=2	0% n=0	0% n=0		n=2
Item 12	100% n=2	0% n=0						
Sub-Item 12a	100% n=2	0% n=0						
Sub-Item 12b	100% n=2	0% n=0	n=0					
Sub-Item 12c	0% n=0	0% n=0	n=2					
Item 13	100% n=2	0% n=0	n=0					
Item 14	100% n=2	0% n=0						
Item 15	100% n=2	0% n=0	n=0					
Outcome WB1				100% n=2	0% n=0	0% n=0	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=2	0% n=0	n=0					
Item 18	100% n=1	0% n=0	n=1					
Outcome WB3				100% n=2	0% n=0	0% n=0	n=0	n=2

APPENDIX

1.5 Case Rating Summary – ND OCR SOUTHEAST, September 2018: Foster Care Services Breakdown

Item or Outcome #	Strength	ANI	NA	Substantially Achieved	Partially Achieved	Not Achieved	Not Applicable	Applicable Cases
Item 1	100% n=3	0% n=0	n=7					
Outcome S1				100% n=3		0% n=0	n=7	n=3
Item 2	66.67% n=2	33.33% n=1	n=7					
Item 3	100% n=10	0% n=0						
Outcome S2				90% n=9	10% n=1	0% n=0		n=10
Item 4	90% n=9	10% n=1	n=0					
Item 5	90% n=9	10% n=1	n=0					
Item 6	60% n=6	40% n=4	n=0					
Outcome P1				50% n=5	50% n=5	0% n=0	n=0	n=10
Item 7	100% n=4	0% n=0	n=6					
Item 8	100% n=7	0% n=0	n=3					
Item 9	77.78% n=7	22.22% n=2	n=1					
Item 10	100% n=7	0% n=0	n=3					
Item 11	100% n=6	0% n=0	n=4					
Outcome P2				100% n=10	0% n=0	0% n=0	n=0	n=10
Item 12	70% n=7	30% n=3						
Sub-Item 12a	90% n=9	10% n=1						
Sub-Item 12b	57.14% n=4	42.86% n=3	n=3					
Sub-Item 12c	100% n=7	0% n=0	n=3					
Item 13	71.43% n=5	28.57% n=2	n=3					
Item 14	100% n=10	0% n=0						
Item 15	57.14% n=4	42.86% n=3	n=3					
Outcome WB1				70% n=7	30% n=3	0% n=0		n=10
Item 16	100% n=7	0% n=0	n=3					
Outcome WB2				100% n=7	0% n=0	0% n=0	n=3	n=7
Item 17	70% n=7	30% n=3	n=0					
Item 18	100% n=6	0% n=0	n=4					
Outcome WB3				70% n=7	10% n=1	20% n=2	n=0	n=10

APPENDIX

1.6 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 (3 cases), a retired child welfare professional (3 cases), a Private Non-Profit professional (3 cases), and a representative of the Children's Bureau (4 cases). Second Level Quality Assurance (SLQA) was provided by the OCR Manager for nine (9) cases. The Children and Family Services Center Director provided SLQA for three (3) cases. One case was eliminated from the sample and did not undergo SLQA.

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 SEHSC ONSITE REVIEW	
Child Welfare professionals from other county social service, DJS agencies	2
Child Welfare professionals from Central Office, DHS	5
Child Welfare professional from the Children's Bureau	1
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	4

CONTACT INFORMATION

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