



# **NORTH DAKOTA CHILD & FAMILY SERVICES PLAN**

## **2013 Annual Progress and Services Report**

**TITLE IV-B SUB PART I**

**TITLE IV-B SUB PART II**

**CAPTA**

**CHAFEE ILP**

**October 1, 2012 – September 30, 2013**

**Issued by:**

**JACK DALRYMPLE, GOVERNOR**

**Administered by:**

**NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES**

**Children & Family Services Division**

**Shari Doe, Division Director**

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Jack Dalrymple, Governor  
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June 28, 2013

Ms. Marilyn Kennerson, Regional Administrator  
ACF, Children's Bureau, Region VIII  
999 18<sup>th</sup> Street  
South Terrace, Suite 499  
Denver, CO 80202

Dear Ms. Kennerson:

As the Executive Director of the North Dakota Department of Human Services, I am pleased to present to you the updates to the 2010-2014 Child and Family Services Plan and the Annual Progress and Services Report (APSR) for fiscal year 2013. The Child and Family Services Plan represents a consolidation of four state plans including Title IV-B Sub Part I, Title IV-B Sub Part II, the Child Abuse Prevention & Treatment Act, and the Chafee Foster Care Independence Act Program Plan.

Please note that the updates to our Program Improvement Plan (PIP) have been integrated into our Child and Family Services Plan. We are nearing the end of our work on the PIP and we anticipate that the five strategies, action steps and benchmarks, will be met as outlined in the plan.

North Dakota remains committed to providing quality services to achieve Safety, Permanency and Well-Being for vulnerable children who enter the child welfare system.

Sincerely,

A handwritten signature in black ink that reads "Maggie D. Anderson". The signature is fluid and cursive.

Maggie D. Anderson  
Executive Director

Enclosures

## I. BACKGROUND

### A. INTRODUCTION

The accompanying 2013 Annual Progress and Services Report (APSR) of the Child and Family Services Plan includes: IV-B Subparts I and II, the Child Abuse Prevention and Treatment Act Plan, and the Chafee Foster Care Independence Program Plan. This plan reflects activity through Federal Fiscal Year 2013.

### B. ADMINISTRATION OF THE PLAN

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

#### **Children and Family Services Division**

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

#### **County Social Service Boards**

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

#### **Regional Human Service Centers**

The eight Human Service Centers are located in the primary economic, medical and business centers of the state. The 1981 North Dakota Legislative Assembly created these regional human service centers. Each Human Service Center has a Regional Representative/Supervisor who serves as the liaison between the counties and the CFS

Division. These representatives provide direction and program supervision of child welfare services provided by the county social service agencies.

**✚ Target Populations**

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

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

**II. CHILDREN & FAMILY SERVICES DIVISION’S MISSION, VISION AND VALUES**

**A. MISSION STATEMENT**

“North Dakota Department of Human Services’ mission is to provide quality, efficient and effective human services which improve the lives of people.”

**B. VISION AND VALUES**

The Children & Family Services Division of the North Dakota Department of Human Services has adopted the Wraparound Practice Model as the case management model for the child welfare system. Our vision and values reflect the principles and beliefs of this model.

Therefore, the CFS Division affirms the following as our vision/values:

**✚ Unconditional commitment to working with families and children is provided**

- A commitment to never give up on helping children and families, while keeping children safe.
- Families are treated with respect, honesty and openness.
- The family’s language is utilized and jargon is avoided.
- Setbacks may reflect the changing needs of family members, not resistance.

**✚ The process is team driven**

- Partnering with other systems and natural supports of families helps bridge the complexity of the work.
- Families, children, natural supports, conventional supports and agencies are all part of the team.
- A multi system assessment is completed to provide the family with necessary resources.

- Collaboration between systems and team members is important in building and delivering effective services to families through the sharing of core values, beliefs and principles.
- The multi system approach provides shared risk with involved families.
- The team approach provides for an integrated system of care.

**+ Families are full and active partners and colleagues**

- Safety is paramount in all programs and systems; choices are made to ensure that children, families and communities are safe.
- The family's view is respected. Families are the experts with their own children.
- The expertise of the system is valuable when discussing "bottom lines" such as: legal mandates, court orders, negotiable and non-negotiable rules/policies etc. The system can let go of power and allow families to make decisions when safety is assured.
- Family members have clear voice and choice in the process. They are full members in all aspects of the planning, delivery, management and evaluation of services and supports.
  - Voice: The family is listened to, heard and valued. The skills and knowledge of the family members are essential to the change process.
  - Choice: Families are provided information on choice and identifying where choices exist and where there are limitations on choice. The outcomes of different choices are discussed.
- Wraparound is a joint decision making process with the family rather than "deciding for" the family.

**+ The Child and Family Team process focuses on strengths and competencies of families, not on deficiencies and problems**

- Services and supports are built on strengths that are unique to the family and child.
- Strengths discovery is central to getting to know the family.
- Strengths are utilized in addressing the safety needs of the child and family.
- Strengths are utilized in developing and implementing the care plan with the family.

**+ Care plans are outcome-based**

- The needs of all family members are identified and addressed in the care plan.
- Goals and tasks with measurable outcomes are established to address change rather than compliance.
- Family members are full partners in establishing care plans.
- The care plan is utilized across systems.
- The Wraparound Practice Model provides outcome oriented plans rather than compliance based plans.

**+ Services are culturally responsive.**

- Each family is culturally unique.
- Cultural diversity is valued and respected.
- Differences are valued as strengths.
- The impact of culture on Wraparound Practitioner and agencies is recognized and understood.

- ✚ **Services and care plans are individualized to meet the needs of children and families.**
  - Care plans are flexible in nature.
  - The family and children should have access to services they need.
  - Services and supports can be coordinated into one plan.
  
- ✚ **Resources and supports, both in and out of the family, are utilized for solutions.**
  - The family is key in identifying supports.
  - A balance of formal and informal, natural and conventional supports is utilized.
  - The community is recognized and respected as a key resource and support.
  
- ✚ **People are the greatest resource to one another.**
  - Family Engagement: The key to success in the child and family team process is building positive and strong relationships between the Wraparound Practitioner and the family members.

### **III. 2013 ANNUAL PROGRESS AND SERVICES REPORT**

#### **A. GOALS & OBJECTIVES**

North Dakota's Five-Year Child and Family Services Plan incorporates both the state's Program Improvement Plan (PIP) and four additional strategies that speak directly to the Division's mission, vision and values. Woven throughout is fidelity to North Dakota's Wraparound Practice Model.

**2013 UPDATE: We have completed the ND PIP as of June 30, 2013. Updates on those Objectives have been provided in the following table.**

GOALS	OBJECTIVES	MEASURES OF PROGRESS (TASK)	TIMELINE (YEAR)	2013 UPDATE
I. Strengthen the risk and safety assessment practice components of the Wraparound Practice Model to enhance safety outcomes across the child welfare service delivery system.	A. Develop and implement consistent policies for all child welfare programs, identifying critical decision points in the life of the case where a formal safety/risk assessment is required	A. Consistent policy is developed and implemented	A. Y 2 ✓	<b>A. Task was completed in Year 2.</b>
	B. Support supervisors as implementation agents of the ongoing assessment of safety and risk across the life of the case consistent with the Wraparound Practice Model.	B. Utilize TA from NRC on Organizational Improvement & NRC on Action for Child Protection; core supervisory work group is formed; a work plan is developed and implemented	B. Y3 ✓	<b>B. Task was completed in Year 2.</b>
II. Strengthen the child and family engagement practice components (direct and supervisory) of the Wraparound Practice Model to enhance permanency and well-being outcomes across the	A. Ensure regular and high quality case worker visits with children and youth in both foster care and in-home cases and with their parent(s)	A. Consistent policies developed and implemented; monthly reports are generated and disseminated; written guidance developed and disseminated	A. Y 2 ✓	<b>A. Task was completed in Year 2.</b>
	B. Improve involvement of non-custodial / absent parent / significant other / parent figure across foster care and in-home programs	B. Formal policy issuance; checklist tool developed and disseminated; child welfare certification training strengthened and child welfare staff is trained	B. Y 3 ✓	<b>B. The Child and Family Team Meeting Outline (tool for case managers in ensuring all areas are addressed at team meetings) is now available as a link on</b>

child welfare service delivery system.				FRAME. The PI's specific to family engagement and caseworker visits for foster care, in-home, and children's mental health were developed and disseminated in June 2011. The curriculum for child welfare certification has been updated. Per the Family Engagement TA plan, training was provided to child welfare supervisors, regional supervisors, and DJS supervisors in May 2012. Family engagement training for caseworkers will be held at the 2012 Children's Justice Symposium in July 2012. Additionally, a second round of the supervisory training on family engagement (for partner agencies) will occur in the fall of 2012. This task is completed.
	C. Develop post-certification skill-based modules regarding family engagement	C. TA consultation from NRC for Permanency & Family Connections and plan developed; training curricula developed and child welfare staff trained	C. Y 3 ✓	C. The NRC for Permanency & Family Connections and the NRC for In-Home Services assisted the CFS Division in developing a TA plan. The American Humane "The Work of the Coach" training for supervisors was chosen and the training was provided to county supervisors, regional supervisors, and DJS supervisors by Michelle Howard, M.S., LPC in May 2012. The second phase of training will be held in fall 2012 and the target audience will be partner agency supervisors. This task is completed.
	D. Support supervisors as change agents in the implementation of family engagement consistent with the Wraparound Practice Model	D. Utilize TA from NRC on Organizational Improvement; core supervisory work group is formed; a work plan is developed and implemented	D. Y 3 ✓	D. Task was completed in Year 2.
<b>III. Strengthen:</b> <b>a.</b> Child permanency practice components (direct and supervisory) of the Wraparound Practice model; and <b>b.</b> Intra-agency case practice to enhance permanency outcomes across the child welfare service delivery system.	A. Statewide and regional recruitment and retention plans ,that are consistent with the Wraparound Practice Model, will reflect increased efforts to recruit homes that are child specific and appropriate for sibling groups, older youth and Native Americans	A. TA consultation from NRC for the Recruitment & Retention of Foster & Adoptive Parents/Adopt US Kids; plan developed; funding announcement disseminated; training plan developed and training provided; and recruitment and retention plan implemented; TA from NRC on Organizational Improvement regarding measurement	A. Y 3 ✓	A. The NRC for Recruitment and Retention of Foster and Adoptive Parents/ Adopt Us Kids assisted the state in developing the recruitment and retention training plan. The CFS Division disseminated the funding announcement in June 2011. The training plan was developed and training was provided to 90% of the recruitment/retention staff, with a plan to share the training with the remaining 10% during the next coalition meeting. The state recruitment & retention plan is a compilation of the eight regional plans, which emphasize recruitment for sibling groups, Native American families, and families to foster/adopt older children. This task is completed.
	B. Improve the quality and consistency of Child & Family Team meetings to accurately establish case plan goals for children and youth, document	B. Written guidance is provided; training plan developed and training provided; ongoing reports from Regional Supervisors regarding Child & Family Team meetings	B. Y 2 ✓	B. The Child and Family Team Meeting Outline (written guidance) is available as a link in FRAME. The training on this tool was provided in May 2011. Diana

	and work toward the goals, and evaluate/monitor progress toward achieving permanency			Weber, CFSR Manager, continues to discuss aspects of child and family team meetings at each regional supervisor meeting. This task is completed.
	C. Support supervisors as implementation agents to increase the implementation and documentation of clear and timely permanency goals, consistent with the Wraparound Practice Model	C. Develop Wraparound Practice Model manual; utilize TA from NRCOI for plan development; core supervisory work group is formed; a work plan is developed and implemented	C. Y 3 ✓	C.Task was completed in Year 2.
IV. Use multiple sources of data to engage court partners in ongoing dialogue and county-specific strategies to achieve timely permanency goals for children in foster care.	A. Develop strategies for encouraging opportunities for the child's caregiver to have input into reviews or hearings with respect to the child	A. TA consultation from NRC on Legal & Judicial Issues, ABA, and NRC on Organizational Improvement; plan developed; report on collaboration with ND Supreme Court	A. Y 3 ✓	A. At the June 2012 Judicial Conference, the CFS Director arranged for Timothy Travis, NRC on Legal & Judicial Issues consultant, to train ND judges on engaging foster parents and caregivers in child welfare proceedings. This task is completed.
	B. Achieve timely permanency for children and youth in foster care	B. Analysis and report on data; target site identified and improvement plan developed and implemented; evaluation report completed and disseminated; TPR protocol developed; Assistant Attorney General hired to do this specialized work	B. Y 3 ✓	B.A pilot site for developing strategies on system improvement was identified, a group was convened, and a report on the findings and recommendations was disseminated to the field. This work was accomplished through the PIP Extension. The PIP Extension plan was amended to "secure a method of hire for a new AAG to do this specialized work." This was done, in negotiation with our federal partners, because DHS did not have a budget to hire a specialized litigator. The method secured will be an annual contract with an experienced civil litigator. Funding in the DHS budget has been identified in the 13-15 biennial budget for this purpose. This task is completed.
V. Develop collaborative approaches, both formal and informal, to address service array issues	A. Identify and address the barriers to accessing needed services for children and families and ensure that there is an array of essential services across the state to support individualized plans of care for children and their families	A. Assessment completed and information posted; meetings held quarterly with tribal directors	A. Y 2 ✓	A. The assessment is completed and the information was posted for a period of time. The Native American Training Institute (NATI) has links published on their website with local tribal customs, upcoming events, etc. The CFS director and NATI director co-facilitate quarterly meetings with tribal child welfare directors. This task is complete.
	B. Improve provision of adequate and appropriate mental health services to meet children's assessed needs	B. Evidence-based mental health screenings will be part of Health Tracks Screenings for foster children - training on screening instruments provided	B. Y 2 ✓	B.Task was completed in Year 2.
	C. Enhance the capacity of the system to provide individualized planning for children and families consistent with the Wraparound Practice Model	C. Utilize TA support from NRC on Organizational Improvement to develop a peer mentoring model; peer mentoring model developed and rollout completed	C. Y 3 ✓	C.A statewide group of county supervisors convenes quarterly in Bismarck. They received training on a peer mentoring model, "Learning Circles," in January 2012 and have implemented this model into their quarterly meetings. Pete Tunseth, CFS Training Center Director, provides TA to this group as needed. This task is

				completed.
	D. Increase capacity to fully meet the needs of Priority 1 and 2 youth	D. Report on budget request; plan developed and implemented	D. Y 2 ✓	D. Task was completed in Year 2.
VI. Work together with partners in the field regarding caseload standards	A. Meet with state partners to review current information related to caseload standards	A. Meetings have occurred and caseload standards are in place for all child welfare programs	A. Y 4 (Y 5)	A. The County Social Services Directors, at their March 2013 meeting, decided that a protocol for establishing caseload standards should be completed. This was assigned to the CFS Committee in which specific work groups were established. Work on this will continue in the bi-monthly meetings and through the use of sub-committees. Extended to Year 5.
	B. Determine a protocol for applying caseload standards in all CFS programs	B. Protocol for caseload standards is developed and applied	B. Y 5	A. Task will be addressed during the coming year. The aforementioned CFS Committee is currently working on this task.
VII. Strengthen relationships with tribal child welfare partners in the state to promote effective communication and enhance collaboration	A. Schedule quarterly meetings with tribal child welfare directors	A. Quarterly meetings are scheduled	A. Y 1 ✓	A. The tribal directors' group, SSNAP, has been meeting quarterly. Meetings have been very productive and well attended. This task is completed.
	B. Invite tribal child welfare staff to trainings and policy/plan-building meetings	B. Tribal child welfare staff are invited to trainings and meetings	B. Y 1 ✓	B. Tribal child welfare staff has been invited to CFS sponsored trainings (ex. Wraparound Certification, Parent Aide Training, CFS Conference) and will continue to be invited in the future. This task is completed.
	C. Continue to explore collaboration opportunities with Tribal partners	C. Collaboration opportunities are explored	C. Y 1 ✓	C. The CFS Division continues to look for collaborative opportunities. We have been involved with the Indian Affairs Commission on collaborations that will support best child welfare practice in the state (as a part of the Interim Health and Human Services Interim Committee on the ND State Legislature). This task is completed.
VIII. Continuous Quality Improvement to ensure safety, permanency and well-being across all stages of the child welfare service delivery system	A. The state will use CFSRs & Peer Reviews as QA review tools	A.1 Local CFSR reviews are taking place	A.1 Y 1 ✓	A.1 In the past year a total of 71 case reviews were completed throughout the state, with 17 of these being completed in the largest metropolitan area (Cass County). This task is completed.
		A.2 Peer Review process is launched	A.2 Y 2 ✓	A.2 Upon receipt of ACYF-CB-IM-12-07 issued 8/27/2012, the CFS Division began internal conversations on growing the current QA system in North Dakota. This system includes random draw case reviews in each region of the state annually. The case reviewers are often peers to the case managers, or county child welfare workers. Feedback from the CFSR Manager is provided immediately

				<p>following the reviews at the Exit Conference. Additionally, within two months of the review, a summary report and individual case instruments are mailed to those county agencies where cases were reviewed. If areas needing improvement were noted, counties are instructed to address practice improvements through the writing of a C-PIP (County Practice Improvement Plan). Due the cadre of reviewers used in this process, this has been viewed as a peer review process. However, the CFS Division is committed to expanding our QA process to include the functional components of CQI. Division staff have participated in regional webinars to glean from other states in Region VIII. The CFSR Manager and Infrastructure Administrator are committed to expanding child welfare CQI through the utilization of FRAME, data analysis and feedback to the field, and development of policy and procedures.</p>
	B. Annual review of CPS case files	B. Annual reviews are completed and results disseminated to the field	B. Y 1 ✓	<b>B. This task was completed in Year 1.</b>
<p><b>IX.</b> In response to the Governor's Healthy North Dakota Initiative, the CFS Division and its partners will develop and implement a Health Care</p>	<p>A. The Health Care Services Plan as outlined in the 2010-2014 CFSP will be implemented with support from the Healthy North Dakota Early Childhood Alliance (HNDECA) and the North Dakota Social Emotional Developmental Alliance (NDESDA)</p>	<p>A. Health Care Services Plan is implemented in the state</p>	<p>A. Y 5</p>	<p><b>A. Refer to the Health Services Plan section of this report.</b></p>

<p>Services Plan to ensure Foster Care children receive screening, assessment and treatment as appropriate for their physical, dental, and mental health.</p>	<p>B. The Treatment Collaborative for Traumatized Youth (TCTY) will be expanded in the state</p>	<p>C. TCTY is expanded</p>	<p>B. Y 2 ✓</p>	<p>B. TCTY continues to be expanded to provide evidence based treatment throughout the state. From July 1, 2011 – June 30, 2012 the TCTY trainings continued to be offered to Clinicians at the Human Service Center Staff on the evidence based treatment of Trauma Focused Cognitive Behavioral Therapy and Structured Psychotherapy for Adolescents Responding to Chronic Stress. In October 2011 TCTY added the evidence based treatment method of Alternative for Families: This is a one year learning collaborative on this cognitive – based therapy for Intensive In Home Therapists at the Human Service Centers. The Department of Human Services Division of Mental Health &amp; Substance Abuse continues to be committed to the ongoing expansion of this collaborative. This task is completed.</p>
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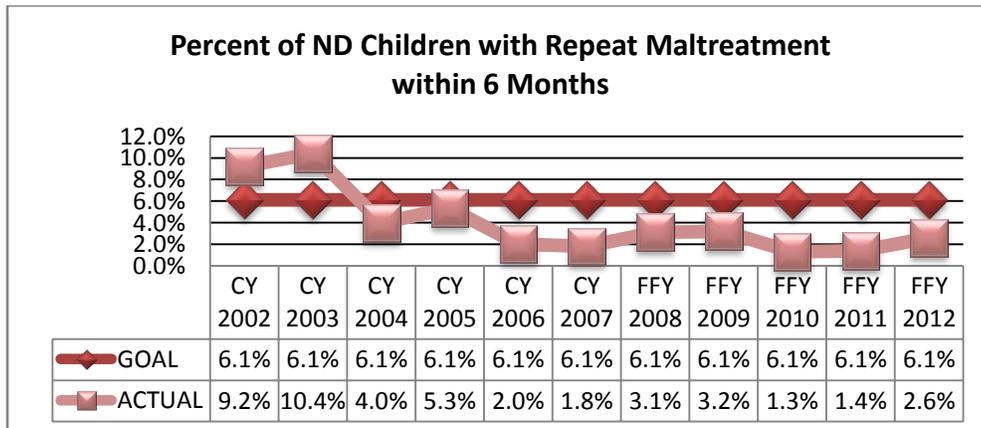
**B. FEDERAL MEASURES**

The CFS Division, with support from the ND DHS Decision Support Services Division, maintains data on each of the Federal Measures. Following are graphs showing the most recent data for each of these measures.

**Child Protection**

**FEDERAL MEASURE:** Of all children who were victims of child abuse and/or neglect (services required) during the first 6 months of the year, 6.1% or fewer children will have another services required report within 6 months of the first report.

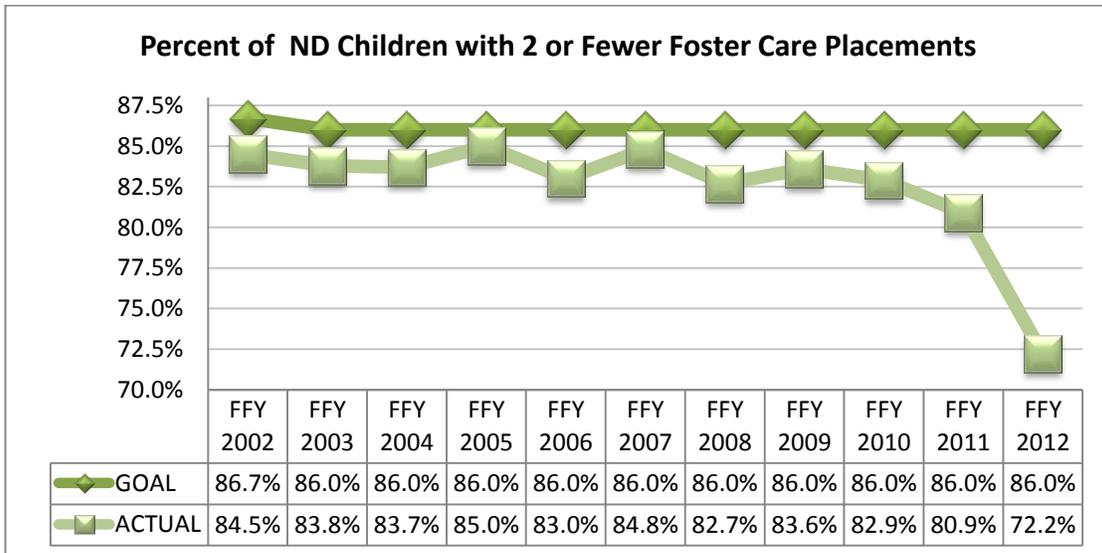
**2013 UPDATE:** In FFY 2012, 2.6% of North Dakota children had another services required report within 6 months of the first report.



**Foster Care**

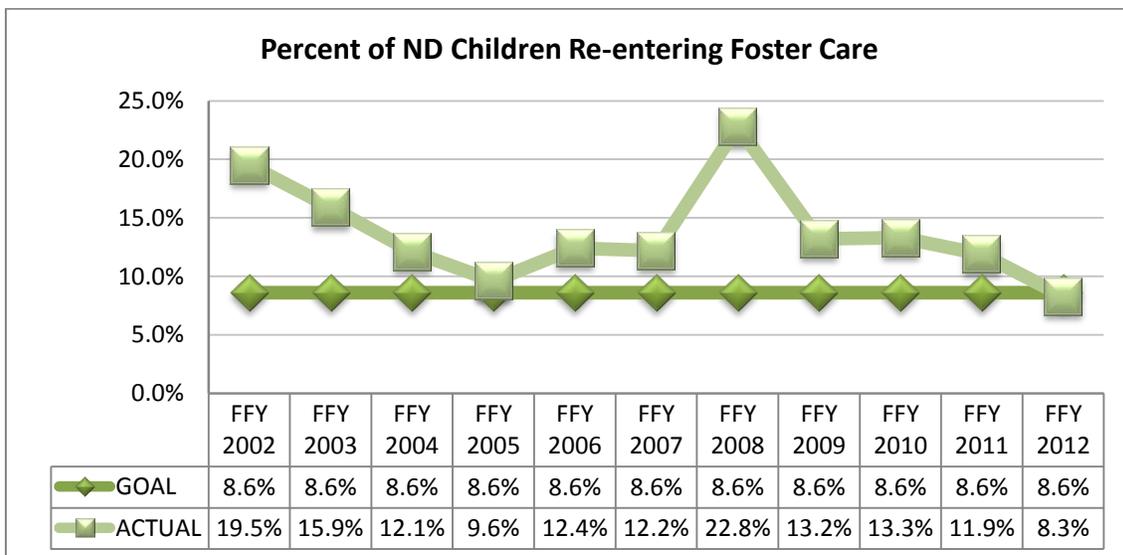
**FEDERAL MEASURE:** Of all children served in foster care during the 12 month target period who were in foster care for at least 8 days but less than 12 months, 86.7% will have two or fewer placement settings.

**2013 UPDATE:** In FFY 2012, 72.2% of North Dakota children in foster care less than 12 months had two or fewer placement settings.



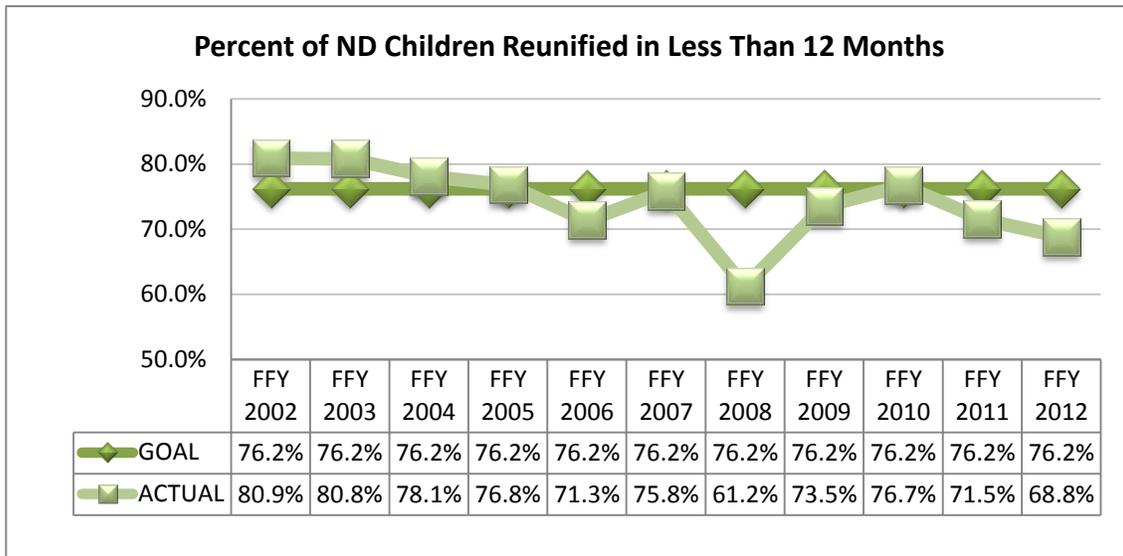
**FEDERAL MEASURE:** Of all children discharged from foster care to reunification in the 12-month period prior to the year shown, 8.6% or fewer will re-enter foster care in less than 12 months from the date of discharge.

**2013 UPDATE:** In FFY 2012, 8.3% of North Dakota children re-entered foster care within 12 months of a prior foster care placement.



**FEDERAL MEASURE:** Of all children who are reunified with their parents or caretakers at the time of discharge from foster care, 76.2% or more children will be reunified in less than 12 months from the time of the latest removal from home.

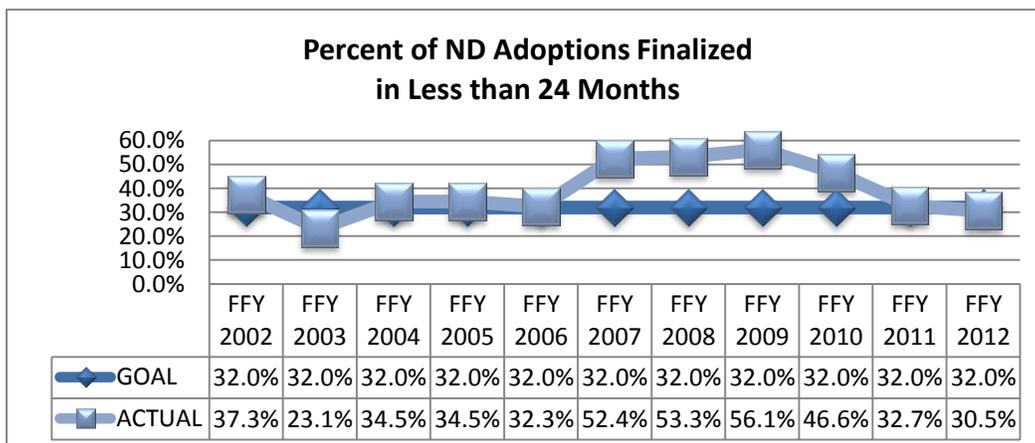
**2013 UPDATE:** In FFY 2012, 68.8% of North Dakota children were reunified in less than 12 months from the time of the latest removal from home.



**Adoption**

**FEDERAL MEASURE:** Of all children who exit foster care to a finalized adoption, 32% or more children will exit care in less than 24 months from the time of the latest removal from home.

**2013 UPDATE:** In FFY 2012, 30.5% of North Dakota children exited foster care to a finalized adoption within 24 months.



## C. SERVICE DESCRIPTIONS

In FFY 2010, North Dakota expended the federal funds entrusted to the state through the Title IV-B Subpart 1 & 2 for the following child welfare programs:

### + **Child Protection Services**

The North Dakota Department of Human Services – Children and Family Services Division is responsible for administering Child Protection Services (CPS). CPS protects the health and welfare of children by encouraging the reporting of children who are known to be or suspected of being abused or neglected. CPS provides adequate services for the protection and treatment of abused and neglected children and to protect them from further harm. CPS identifies the cause of children's deaths, where possible and identifies those circumstances that contribute to children's deaths. In doing so, CPS recommends changes in policy, practices, and law to prevent children's deaths.

- Child Fatality Review Panel (CFRP): The CFRP is required to meet at least semi-annually to review the deaths of all minors and to identify trends or patterns and systemic issues in regard to the deaths of minors. Typically, the CFRP meets quarterly. The CFRP is responsible for making recommendations for changes in policy, practices, and law to prevent children's deaths.

**2013 UPDATE:** The CFRP met quarterly to review the deaths of all minors occurring during the timeframe of this report. The Child Maltreatment Prevention Services Administrator facilitated these meetings in Bismarck. The Panel members are listed as part of the CAPTA Plan.

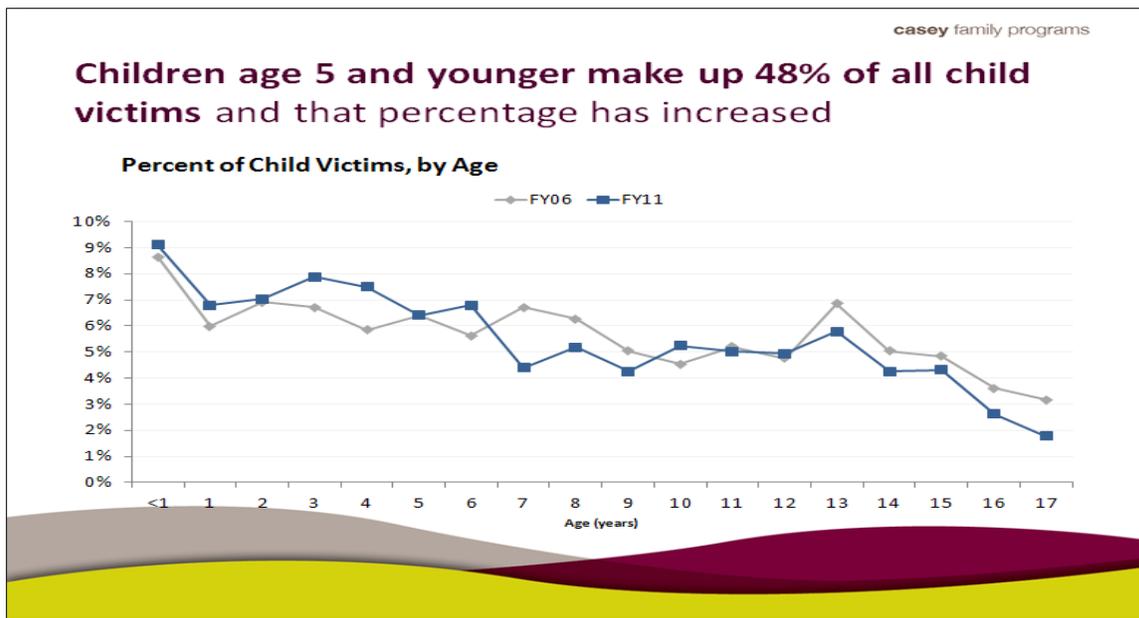
The North Dakota Child Fatality Review Panel receives death certificate information from the state's Vital Records Division of the ND State Health Department to initiate the process of child fatality review. As part of the review process, existing records are requested from law enforcement agencies, county coroners, and the State Medical Examiner's office. Child maltreatment death data is extracted from the state data system (FRAME) and reported to the National Child Abuse and Neglect System (NCANDS). Prior to submitting data to NCANDS, the FRAME data is reconciled with the CFRP data to ensure that all child maltreatment deaths are accounted for in the final submission.

In 2007, 41 child deaths were reviewed in-depth by the CFRP. These accounted for 40.6% of all child deaths in 2007. In 2008, 29 child deaths were reviewed in-depth, accounting for 34.9% of all child deaths that year. In 2009, 43 child deaths were reviewed in-depth, accounting for 45.3% of all child deaths that year. Child fatality data from 2010 to present is not yet available.

**2013 UPDATE:** The Child Fatality Review Panel has continued functioning as the state's designated existing entity serving in the capacity of a Citizen Review Panel in compliance with Sec. 106 (c) I B ii 2 b. 2 c 1 B i and ii of CAPTA. The CFRP previously served in this capacity from 1996 until 2006. The CFRP meets on a quarterly basis in fulfillment of the CAPTA requirement for Citizen Review Panels.

▪ **POPULATIONS AT GREATEST RISK OF MALTREATMENT:**

According to data analysis of NCANDS data provided by Casey Family Programs for FFY 2006 through FFY2011 (see below), children ages 5 and younger comprise the population at greatest risk for maltreatment. This is also reflected in NCANDS data for FFY 2012. Services are targeted to this population through referrals to Early Intervention programs for all children under age three, who are identified as victims of child maltreatment, Health Tracks Screening for all children entering foster care, and referral to county case management services for individualized child and family service plans.



✚ **Family Support Services**

In order to maintain the level of service and meet the needs in Family Support, the CFS Division analyzes available state and federal funds to determine the amount of Title IV-B, Subpart 2 funds needed for this program area. Because funding streams are braided, the percentages vary depending upon funds received from TANF and also the general funds appropriated by the North Dakota legislature. For FFY 2010, the CFS Division projects nearly 28% of IV-B, Subpart 2 funds will be allocated to Family Support services.

North Dakota will continue to provide Family Support services as follows:

- **The Nurturing Parent Program:** The North Dakota Nurturing Parent Programs are group-based programs in which both parents and their children participate. This field-tested and nationally recognized program provides a common learning experience and enhances positive interactions for parents and children. Nurturing Parent programs offer, “The Nurturing Program for Parents and Children Ages 5-12”, and “The Nurturing Parent Program for ages Birth to 5 Years”. The Nurturing Parenting Program is recognized by the SAMHSA

National Registry of Evidence-based Programs and Practices (NREPP) and by OJJDP's Model Programs Guide as a Promising Program.

**2013 UPDATE:** The Nurturing Parent Program (NPP) operated at 10 sites in 2012-2013. Evaluation of the program is based on participant completion of the Adult Adolescent Parenting Inventory (AAPI) pre-test and post-test. AAPI results indicated positive, practical, or educational differences in test constructs concerning:

- Expectations of children
- Parental empathy toward children
- Use of corporal punishment
- Parent-child family roles
- Children's power and independence

The full report for the Nurturing Parent Program is available upon request.

- Parent Resource Centers: Currently seven Parent Resource Centers (PRCs) are receiving grant awards of CBCAP dollars to fund specific parent support and education activities for the prevention of child abuse and neglect. PRCs contract to provide parenting education and in doing so they offer the following:
  - Parenting education designed to assist parents or primary caregivers to strengthen their knowledge and skills and enhance understanding and performance of positive parenting practices, which prevent child abuse and neglect and reduce primary risk factors: caregiver problems with mental health, substance abuse, family and community violence, and other negative conditions in the child and family's life situation
  - Meaningful involvement of parents in the development, operation, evaluation, and oversight of the funded programs;
  - Collaborative community activities specific to Child Abuse Prevention Month;
  - Identification and community needs for parent education and support, and strategies to address the identified needs;
  - Parent education outreach activities which include referrals to social services and community supports and participation in the Family Resource Center Network.

These seven centers are local, collaborative efforts providing opportunities for parents. Each PRC participates in the Family Resource Center Network coordinated through the Family Life Education Program, a partnership with North Dakota State University Extension Service. The Network provides for site visits, a peer review process and an evaluation component for the individual centers as well as for the Network.

**2013 UPDATE:** The Department of Human Services, the CFS Division, and the North Dakota State University Extension Service are mandated by statute (NDCC 50-06-06.10) to enter into an agreement to design a program to provide support for families and youth that specifically address:

- Child and youth development
- Parent education with an emphasis on parents as educators
- Human development

- Interpersonal relationships
- Family interaction and family systems
- Family economics
- Intergenerational issues
- Impact of societal changes on the family
- Coping skills
- Community networks and supports for families

Services are provided in seven of the eight state human service planning regions and efforts continue to gather resources that will allow for formation of a Parent Resource Center in the remaining region of the state.

The goal of the Family Life Education Program (FLEP) is to promote the family/parent resource center concept as a means of providing educational opportunities, information and support for individuals at all points within the family life cycle. The objectives are:

1. To promote the enhancement of the ND PRC Network; and
2. To coordinate and enhance the established ND PRC Network by providing resources, support and assistance to the parent resource centers across the state

- Family Support Services Peer-To-Peer Mentoring & Support Groups For Parents/Primary Caregivers:

Parent Resource Centers: The PRCs utilize parent involvement and parent to parent support by encouraging leadership and ownership of the classes and support groups in which they are involved. The Centers do this through parents facilitating the parent support groups, completing satisfaction surveys, choosing parenting topics that interest them, being a referral source to each other for parenting classes, contributing stories to parenting newsletters, and becoming representatives on the PRC's board. One PRC reported that by validating the parents' participation and contributions, they build self-esteem and confidence and therefore the parents are more likely to continue their active participation. An example of parent support is provided below:

*A parent resource center was providing a class on "Being a Teen Parent". A teen parent that had previously attended the parenting class volunteered to come to the class to answer questions and give support. It was a wonderful thing to see a young parent want to share their story and offer support to others.*

- Parent to Parent Support Services Program: The Parent to Parent Support Services Program continues to provide support and education to parents, organize activities for family training and parent support for children's mental health, assist in training service providers by providing the parent perspective on training topics and assist in the continuous quality improvement process for the children's system of care in North Dakota. The Parent to Parent Support Services continue to collaborate with other private nonprofit entities and use both paid and natural supports. Their goal is to have a statewide collaborative effort with multiple systems to

engage, train, educate, and support parents who have children with serious emotional disturbances.

**2013 UPDATE: The contract through the department for the Parent to Parent Support Services Program will end June 30, 2013. The provider is seeking other funding supports so these services can continue.**

- **Decision Making Process for Family Support Services:** In 2007, North Dakota consolidated the individual grants to local PRCs into one contract with the North Dakota State University Extension Service for Network coordination, training and technical assistance, and evaluation as well as salary and operating expenses for parent education/resource centers in seven of the state's eight planning regions. Although this number is presently reduced to six regions, currently there are efforts underway to support local communities and restore the seventh PRC. In addition, we plan to provide funding to the remaining region so that all eight regions have a Parent Resource Center in the Network this biennium.
- The contractual consolidation and support will be continued during SFY 2010.

Additionally, in North Dakota's most recent legislative session, the amount of state funding allocated to NDSU Extension Service for the support of PRCs was increased. Under the umbrella of the Family Life Education Program, this state funding has been "braided" with CBCAP dollars to provide greater stability and consistency for the Parent Education Network, enabling increased parent support and parent education services statewide. This enhanced collaboration with the North Dakota State University Extension Service is envisioned to enable more consistent programming, which meets criteria outlined for CBCAP Evidence-Based and Evidence –Informed Programs and Practices and CBCAP Annual Report Participant Numbers Guidelines. Additionally, strengthening the state-level collaboration will continue to provide access to training and technical assistance resources and bolster evaluation and data collection capacities of the local programs. This collaboration will also continue to facilitate broadening the Parent Education Network to include Resource Centers in the state that are not currently receiving funding under CBCAP, creating a greater and more consistent footprint of services across the state.

The criteria for funded local programs will be established based on the currently funded contracts. These contracts will require and assure the local resource center's agreements and capacities will meet the provisions established by the lead agency and those contained within this program instruction. This will include evidence-based/evidence-informed parenting education to address issues of child abuse and neglect, parent support groups, parent leadership, child abuse and prevention month activities, assessment of community needs, outreach, referral, network participation, evaluation and reporting requirements.

Statewide programs funded with CBCAP funds will focus on child abuse and neglect prevention activities and other programs or services as outlined within this application. The contract language is integrated into a state contract system (copies of contracts are available upon request).

**✚ Family Preservation Services and Time Limited Family Reunification Services**

North Dakota is committed to the continued use of both Federal and state funds to Family Preservation Services and Time-Limited Family Reunification Services. In order to maintain these services, the CFS Division analyzes available state and federal funds as a means of determining the amount of Title IV-B, Subpart 2 funds needed for these program areas. Because funding streams are braided, the percentages vary depending upon funds received from TANF and also the general funds appropriated by the North Dakota legislature.

**2013 UPDATE: The CFS Division expended 64% of IV-B, Subpart 2 funds for Family Preservation services and 15% for Time Limited Family Reunification services. The majority of Time Limited Family Reunification services are funded with federal TANF dollars and state general funds.**

The CFS Division provides an array of services designed to help families alleviate crises that could possibly lead to out of home placement of children; maintain the safety of children in their own homes; support families preparing to unify; and assist families in obtaining services and other supports necessary to address their multiple needs in a culturally sensitive manner. These services focus on family strengths and competency, safety and well-being of children, and are intense and time-limited. During FFY 2010 these services included the following:

- **Prime Time Child Care:** Prime Time Child Care provides temporary child care to children of families where child abuse and/or neglect have occurred or there is a risk of it occurring. It gives parents an opportunity to attend counseling, addiction treatment, or other needed services while their children are cared for in a licensed facility.

**2013 UPDATE: Services were funded in 22 counties assisting approximately 69 families.**

- **Respite Care:** Respite Care is temporary child care for families with disabled children, including chronically or terminally ill children, children with serious behavioral or emotional difficulties, and drug-affected children. This service is intended to provide care givers with periods of temporary relief from the pressures of caring for children.

**2013 UPDATE: Respite Care services were funded in one northwestern county through a state Memorandum of Agreement and in the past year this service was provided to 4 families. Three regional Human Service Centers (HSCs) also provided Respite Care services during the year and 79 families utilized this service. These three HSC programs were not funded with Title IV-B dollars.**

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

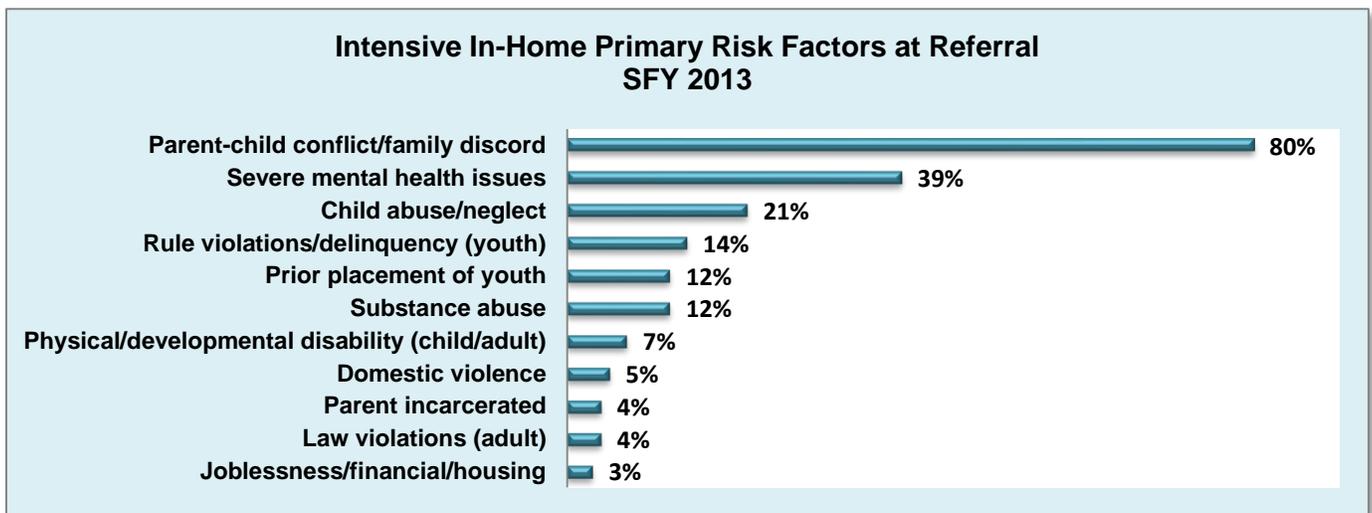
**2013 UPDATE: Parent aide services were funded by state Memorandum's of Agreement in 41 North Dakota counties. Parent aide services were provided to approximately 470 families this past year. Two regional Human Service Centers also**

provided Parent Aide services and they served 67 families in the past year. The two HSC programs were not funded with Title IV-B dollars.

- **Intensive In-Home:** The Intensive In-Home family therapy service was provided through a contract with The Village Family Service Center throughout North Dakota. Three regional Human Service Centers also provide Intensive In-Home family therapy services. These programs are not funded with Title IV-B Subpart 2.

**2013 UPDATE:** In SFY 2013 Intensive In-Home services were available through a contract with The Village Family Services Center in six of the eight North Dakota regions. Approximately 357 families with 687 children received Intensive In-Home services through this agency in the past year. Of the children at risk of being placed out of home, placement was prevented in 88.2% of these cases. County child protection/child welfare referred 42% of the cases. Most of the families served had an annual household income of \$40,000 or less. The Human Service Centers served an additional 80 families during SFY 2013 and these intensive in-home therapy programs covered the counties in the two additional regions. While the HSC programs often serve families involved in the child welfare system, they do not receive Title IV-B funds and therefore are not included in the data below.

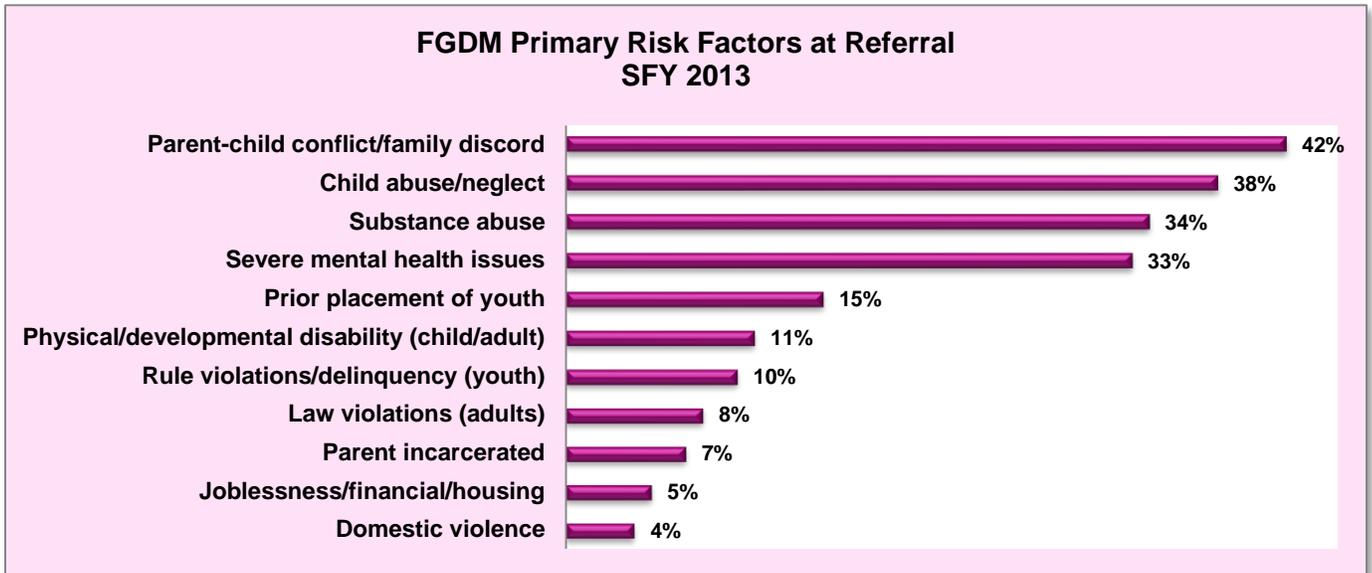
Following is a graph showing the primary risk factors reported at the time of referral for The Village’s Intensive In-Home cases for SFY 2013. Please note that more than one risk factor can be selected by the referral source.



- **Family Group Decision Making (FGDM):** The Family Group Decision Making process is utilized by families in order to prevent out-of-home placement of children and it involves bringing family members, conventional and nonconventional supports, and providers to the table in order to conference together in the development of a comprehensive plan. FGDM services are contracted through The Village Family Service Center.

**2013 UPDATE:** During SFY 2013 Family Group Decision Making services were available to every region in the state through a contract with The Village Family

**Services Center. In SFY 2013, services were provided to a total of 104 families. Approximately 80% of the referrals came from county child welfare agencies. Following is a graph showing the concerns/risk factors at the time of referral. Please note that more than one risk factor can be selected by the referral source.**

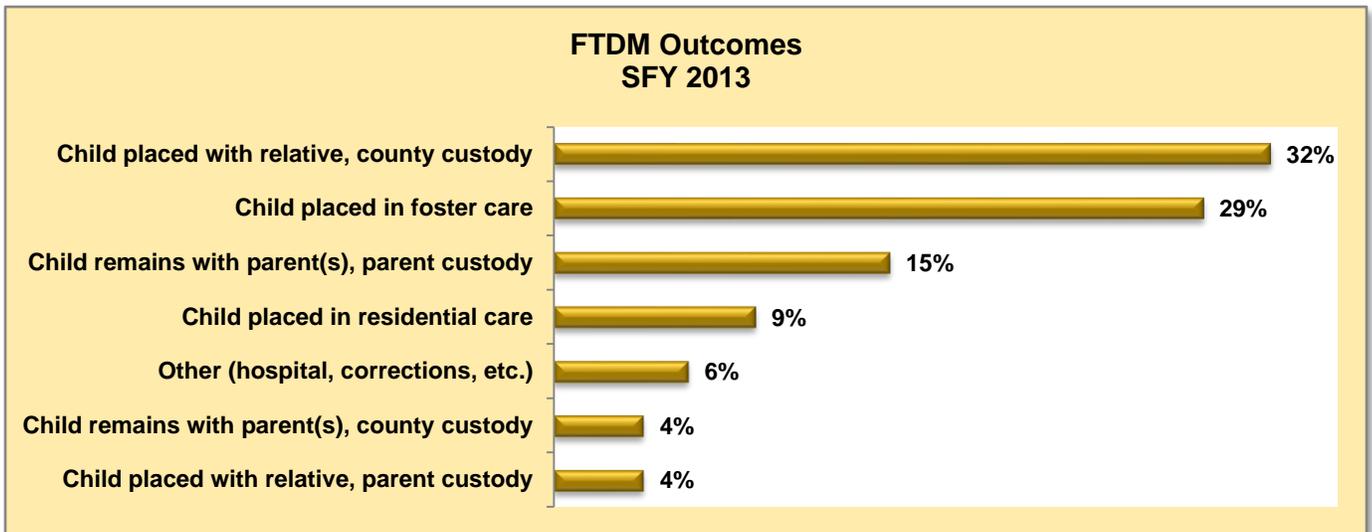


- The 2009 ND Legislative Assembly allocated funds to expand Family Preservation Services in the state by piloting a new, innovative practice. ND DHS chose the Family Team Decision Making (FTDM) process and the pilots began in Cass, Burleigh, and Morton Counties in the last year. FTDM is a facilitated team process which can include birth or adoptive parents, guardians, extended family members, youth, community members, service providers, child welfare staff and other caregivers. These meetings have only one purpose: to make critical decisions regarding the removal of children from their homes, changes in out-of-home placement, and reunification or placement into a permanent home. The goal of FTDM is to arrive at consensus regarding a placement decision to keep the child safe and ensure his or her best interest. The priorities of FTDM are to protect children, preserve or reunify families, and prevent placement disruption. FTDM services are contracted through The Village Family Service Center. Staff from The Village and counties received intense training by a Washington state FTDM trainer. Ongoing consultation with the trainer continues and another training session is planned at the upcoming CFS Conference in July. Data on FTDM is being collected and will be reported as part of the 2012 APSR.

**2013 UPDATE:** During SFY 2013 Family Team Decision Making (FTDM) services were available in Cass, Burleigh/Morton, and Grand Forks Counties through a contract with The Village Family Services Center. The service is a highly effective pilot that promotes the principles of the ND Wraparound Practice Model.

In SFY 2013 a total 108 FTDMs were held in the pilot sites. Over 73% of the FTDM referrals came from Child Protection Services. Just under 27% of the referrals came from Juvenile Court, the majority of those in Burleigh County. Following is a graph showing the outcome plans identified at the conclusion of the FTDMs. In 56% of the FTDMs, the child outcome was to be placed with a parent or relative and in 44% of the

FTDMs the child outcome was to be placed in foster care, congregate care, or other (hospital, corrections). Please refer to the following chart for the FTDM outcomes, by percentage, for SFY 2013. Please note more than one outcome may have been indicated if more than one target child was identified in the family.



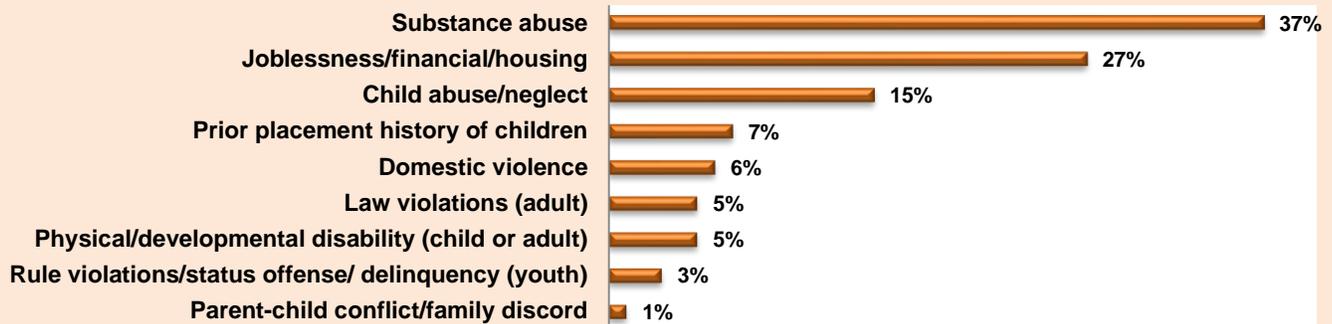
- Tribal Child Welfare Services: ND DHS contracts with tribal child welfare agencies in the state to provide Family Preservation services. The tribal agencies provide the non-federal match for the Title IV-B funding. Each agency was given the option to provide any or all of the Family Preservation services which include Wraparound case management, parent aide and/or intensive in-home family therapy.

**2013 UPDATE:** All four tribal child welfare agencies have service grants with ND DHS to provide Family Preservation services.

**Three Affiliated Tribes Social Services** contracted with ND DHS to provide Intensive In-Home and Parent Aide services to families on the Ft. Berthold Reservation. During SFY 2013 they served 61 families with 74 children. Services were referred by child protection services in 42% of the referrals and were court ordered in 36% of the referrals. Out of home placements were prevented in 79% of the families served.

Please refer to the following graph for the primary risk factors reported at the time of referral. Please note that more than one risk factor can be selected by the referral source.

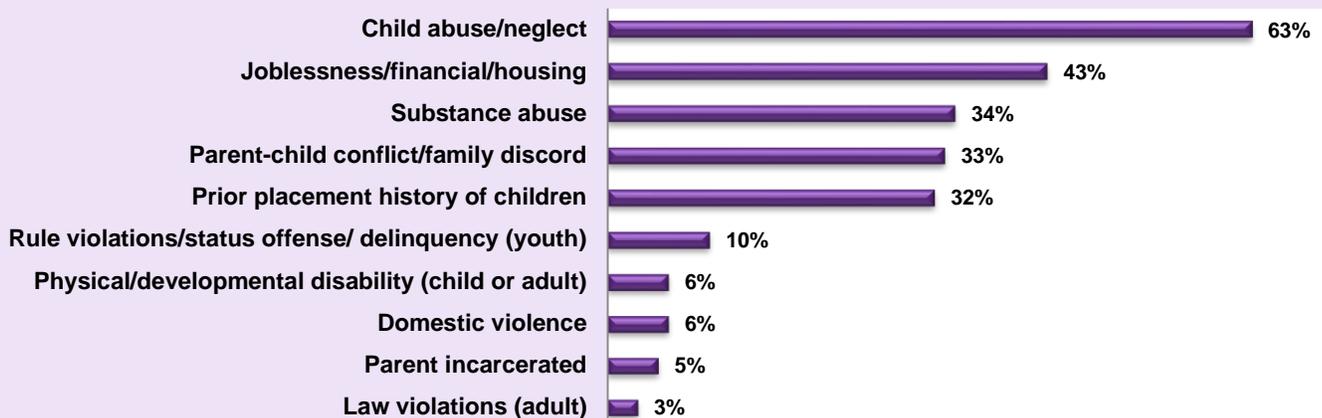
**Three Affiliated Tribal Social Services  
Primary Risk Factors at Referral - SFY 2013**



**Turtle Mountain Band of Chippewa Tribal Social Services** contracted with ND DHS to provide Wraparound case management and Parent Aide services to families residing on the Turtle Mountain Reservation. During SFY 2013 the agency provided Wraparound case management to 16 families with 41 children. Most of the referrals were received from within the agency. Placement was prevented in 95% of the cases. During SFY 2013 Turtle Mountain Tribal Social Services provided Parent Aide services to 14 families. All the referrals were received from within the agency. Out of home placements were prevented in 50% of the cases.

Refer to the graph below for the primary risk factors reported at the time of referral (data inclusive of both Wraparound and Parent Aide services). Please note that more than one risk factor can be selected by the referral source.

**Turtle Mountain Band of Chippewa Tribal Social Services  
Primary Risk Factors at Referral - SFY 2012**

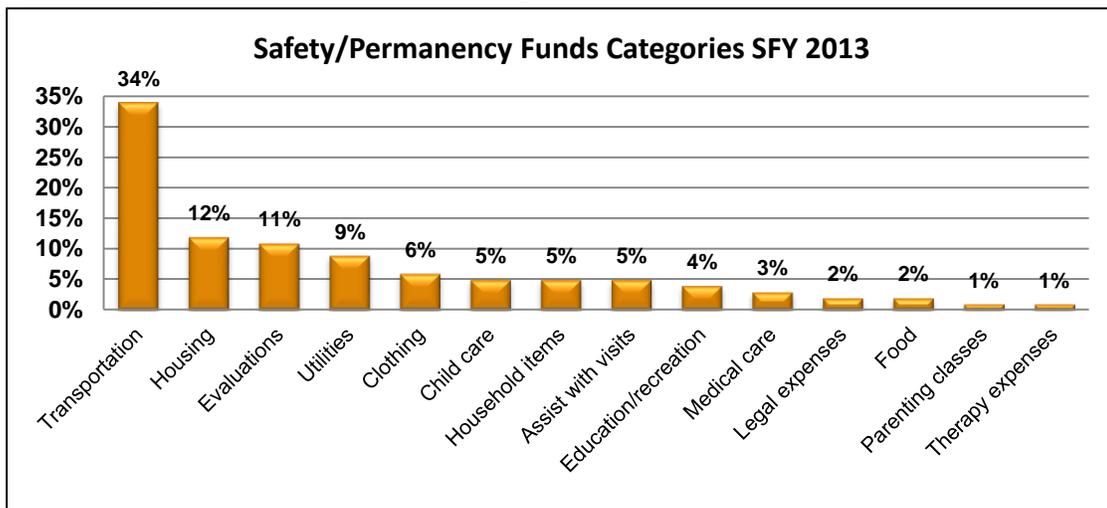


**Spirit Lake Tribal Social Services** contracted with ND DHS to provide Parent Aide services to children and families residing on the Spirit Lake Reservation. At the time of this writing their SFY 2013 data report was not available.

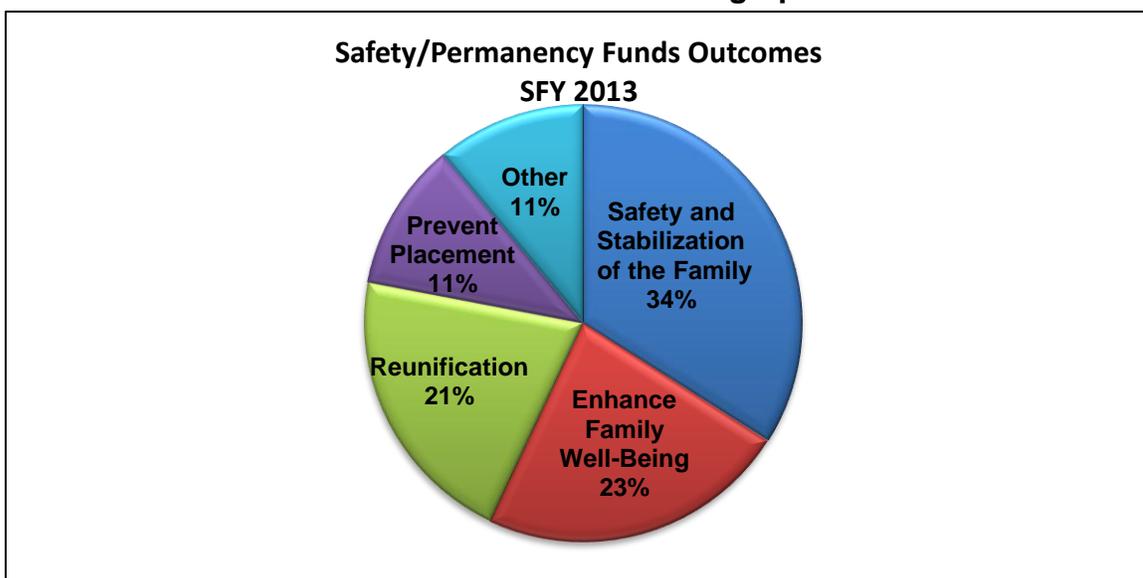
**Standing Rock Tribal Social Services** contracted with ND DHS to provide Parent Aide services to children residing on the North Dakota side of the Standing Rock Reservation. At the time of this writing their SFY 2013 data report was not available.

- **Safety/Permanency Funds:** Safety/Permanency Funds are distributed each biennium to the eight regions in North Dakota in proportion to child population rates. The funds are managed by the Regional Supervisors with oversight by the Family Preservation Administrator.

**2013 UPDATE:** During SFY 2013, Safety/Permanency Funds were provided to a total of approximately 970 families in all eight North Dakota Regions. Safety/Permanency Funds were approved for the following reasons:



Safety/Permanency Funds requests are tracked by the Family Preservation Administrator in order to determine trends and to explore frequency of permanency outcomes. The SFY 2013 data is referenced in the graph below.



▪ **TIME LIMITED FAMILY REUNIFICATION PEER-TO-PEER MENTORING & SUPPORT GROUPS FOR PARENTS/PRIMARY CAREGIVERS:**

- **Child and Family Team Process:** The ND Wraparound Practice Model provides for family voice and choice at the table during every stage of the family’s involvement in the child welfare system. Families participate in case planning and therefore have opportunity to share their views and preferences on plan goals and tasks, family visitations, and permanency decisions.

When children are placed in foster care, county agencies work together with parents and foster parents through the team process to ensure children have opportunity for consistent and quality visits with family members.

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

**2013 UPDATE: Efforts to provide mentoring and support to parents/primary caregivers continue as described above.**

 **Administrative Costs**

Administrative costs are determined by client eligibility for TANF Emergency Assistance. The IV-B, Subpart 2 funds are used for those clients who are not eligible for TANF. The amount spent varies monthly based on reports provided to the CFS Division by the county directors.

**2013 UPDATE: For FFY 2014, the CFS Division projects spending 10% of the IV-B, Subpart 2 funds for administrative costs.**

 **Foster Care Services**

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

to maintain a standard for the safety and well-being of the children in care. The CFS Division is also responsible for the review of all license assessments prior to issuing a license for care.

**2013 UPDATE:** In the continuing effort to ensure the safety and well-being of foster children, the CFS Division issued a policy clarification to the field surrounding the reporting of critical incidents and sentinel events. Critical incidents and sentinel events were further defined and clarified. Proper procedures and timelines for reporting and documentation were further clarified.

The CFS Division issued policy informing the field of their ability to utilize Child Support Enforcement Division's Federal Parent Locator Service (FPLS) to assist in the location of a foster child's parents and/or relatives. This was done with a desire to increase the placement of children with parents and/or relatives.

The CFS Division issued a policy update and new budget worksheet surrounding foster care transportation reimbursement. This policy and worksheet updated household income limits for the determination of eligibility for foster care transportation reimbursement.

The CFS Division issued policy clarifying voluntary agreements and court orders pertaining to 18+ continued foster care. This program went into effect on 1-1-12 in North Dakota, but policy clarification surrounding the noted areas was needed to ensure compliance with federal rule.

#### SERVICES TO CHILDREN UNDER THE AGE OF FIVE

##### **2013 UPDATE:**

- For foster children under the age of 5, AFCARS data for the last day of FY 2009 to FY 2012 showed a range of 24% to 28%.
- On September 30 of 2012, 27% of the children in foster care were under the age of five, an increase from 24% a year earlier.
- Last year's report indicated that, an estimated 37 foster children under 5 years of age are projected to be without a permanent family in FFY 2012 and in FFY 2013. A review of the same data for the time period of April 2012 – March 2013 showed that there was an average of 44 children in foster care with a termination of parental rights on both parents. An average of 40 of these children had a case goal of adoption and 4 had a case goal of reunification.
- Head Start is a close partner to child welfare (the Head Start Collaboration office is located in CFS), and discussions regarding the availability and use of Head Start and Early Head Start for young children in care have been ongoing. A plan was developed with stakeholders to increase awareness and understanding of the services available to foster children and their families provided by Head Start programs. As part of this plan, informational handout was developed and distributed at regular intervals to social service workers as well as foster parents. In addition, the above processes will take

place to facilitate a better understanding of any gaps in the delivery of services to foster children and their families by the Head Start programs.

- All children in Foster Care receive a Health Tracks screening, which include developmental and mental health assessments, as well as assessments for physical health needs.
  - **North Dakota Plan:**
    - We have just begun to track this group of children and more specific data analysis will be done in the next year to analyze demographics and characteristics of these children using AFCARS data and FRAME data, with particular emphasis on native youth in this age range in care. Casey Family Program resources will be used for this tracking process, as well as the assigned CFS data analyst. Data available through the ND Supreme Court Odyssey system will also be requested in order to give CFS a full snapshot of this age group in care. This collaboration will assist in assessing permanency issues for this group in the legal process, as well as analysis of entries and exits into care.
    - FRAME does allow us at present to track Head Start and Early Head Start enrollment for children in foster care. However, at present this field is not a required field in FRAME. Changes to the FRAME system requiring this to be a required field have not yet been completed. CFS will continue pursue this change. Once implement, the data will allow us to track the percentage of the foster care population using Head Start and Early Head Start services. We will also be able to identify areas where referrals are not being made with placements for this population and address this issue with a statewide and local plan/response.
    - Linda Rorman, the former Head Start Collaboration Administrator in CFS has joined and participated in discussions in several quarterly meetings with Regional Supervisors. Mark Schaeffer, the current Head Start Collaboration Office Administrator, will continue to work with the Adoption and Foster Care Task Force in the promotion of referrals to Head Start programs utilizing data which identifies areas where referrals are not been made. This discussion will include foster parents to determine their level of understanding of the process as well as possible barriers to them using the program.
    - By nature of the age and vulnerability of young children, the safety assessment guidelines already consider this factor in prioritizing a CPS referral. In addition, the CAPTA requirements will trigger a developmental referral for this age group; thus, if the child is placed into care as a result of a CPS incident, a developmental referral will automatically ensue per law and policy.
    - CFS will plan additional training at the 2013 CFS Conference in regard to meeting the developmental needs of young children in care for front-line child welfare staff and supervisors. A plenary session entitled “Understanding the Vulnerability of Young Children Exposed to Trauma and Stress” presented by Anne Gearity is planned. Additionally, two break out sessions are secured for this conference:

**“Development Repair for Young Children: Turning Ideas into Interventions that Support Resilience” by Anne Gearity and Infant Mental Health by Sonya Thorn.**

- **CFS and UNDCFSTC will work together with the ND Foster Parent Association to address training needs for foster parents in this area in the next year.**
- **CFS will work with the regional Human Service Centers (HSC), which provides services to young children with developmental delays, to assess their capacity to serve all foster children needing assessment and services to assure developmental progress. Regional HSC have an array of services available including developmental assessments and therapy for children in this age range.**
- **Child Welfare Data Snapshot: The trends in North Dakota foster care placements are shown on the “Child Welfare Data Snapshot.” This data is gathered annual by Decision Support Services in collaboration with the CFS Division.**

**2013 UPDATE: The 2011 Child Welfare Data Snapshot is located on the following two pages.**

## 2011 Child Welfare Data Snapshot

Children & Family Services Division, North Dakota Department of Human Services

600 E. Boulevard Avenue, Dept. 325, Bismarck, ND 58505-0250

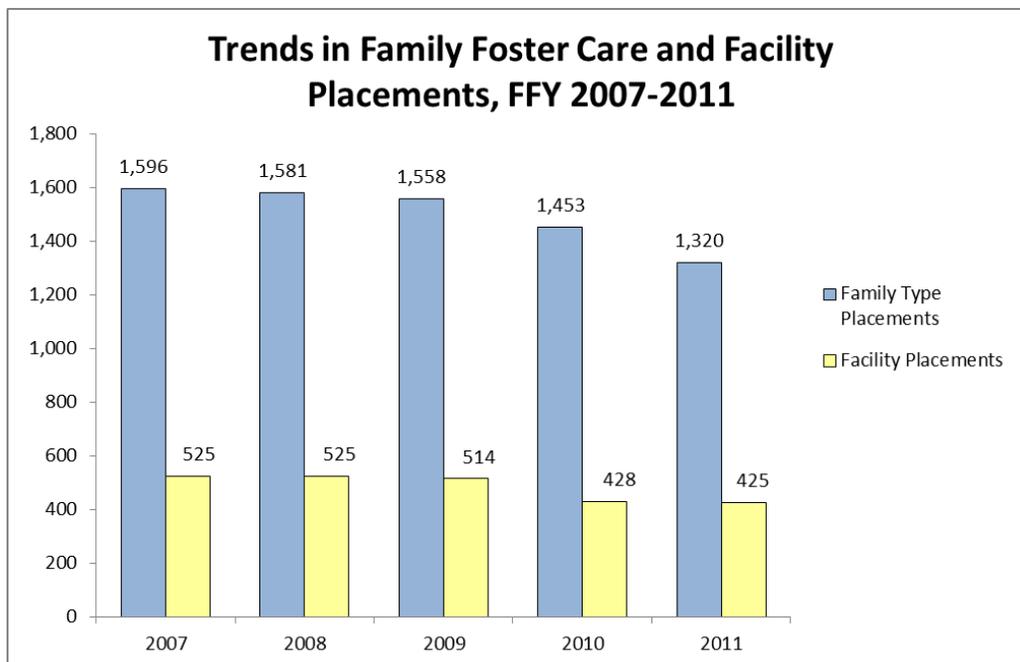
Phone: (701) 328-2316

### Children in Foster Care by Placement Type, FFY 2007-2011

Placement Type	2007	2008	2009	2010	2011	% Change 2007 to 2011
Pre-Adoptive Home	260	289	244	212	166	-36.2%
Relative Placement	400	303	309	204	187	-53.3%
Family Foster Care	718	689	691	735	721	0.4%
Trial Home Visit	218	300	314	302	246	12.8%
Group Home	85	72	58	36	41	-51.8%
Facility	440	453	456	392	384	-12.7%
Missing Data	31	28	34	31	17	-45.2%
<b>Total in Foster Care During FFY</b>	<b>2,152</b>	<b>2,134</b>	<b>2,106</b>	<b>1,912</b>	<b>1,762</b>	<b>-18.1%</b>
Discharged: On 18th birthday	58	54	76	51	35	-39.7%
Discharged: Older than 18	55	61	62	51	10	-81.8%
**Remaining in Care: 18 or older	28	27	31	37	27	-3.6%

AFCARS FFY 2007-2011

\*\*In Foster Care as of last day of FFY



AFCARS FFY 2007-2011

**Foster Care:**

- On the last day of the FFY (September 30, 2011), 1,107 children remained in foster care (includes tribal IV-E cases, DOCR-Division of Juvenile Services youth placed in foster care and pre-adoptive placements).
  - 31.9% (n=353) of these children were Native American.
  - 54.2% (n=600) of these children had a permanency goal of reunification.
  - The average age of these children was 10.1 years old. Age was calculated on the last day of the FFY.
- In October 2011, 48 foster youth were in out-of state placements (Residential Child Care Facilities-RCCF and Psychiatric Residential Treatment Facilities-PRTF). This was an increase in the number of youth in out-of-state placements since October 2010 (n=25).
- In September 2011, there were 485 licensed family foster homes and 312 licensed therapeutic family foster homes.

**Child Abuse and Neglect (FFY 2011):**

- 9,840 reports of suspected child abuse and neglect were received in 2011. Of these reports, 7,007 were in the jurisdiction of Child Protection Services (CPS) and met the criteria for a CPS assessment. These reports were assigned to 5,738 assessments. Multiple reports for the same case are included in a single CPS assessment.
- During the assessment process, some assessments are terminated because of new information related to the case or a change in jurisdiction.
  - During FFY 2011, a total of 3,798 full assessments were completed.
    - Full assessments increased 6.0% from 2007 (n=3,583) to 2011 (n=3,798).
  - During FFY 2011, there were a total of 1,787 Assessments Terminated in Progress.
    - Assessments Terminated in Progress increased 46.0% from 2007 (n=1,224) to 2011 (n=1,787).
- A decision of "Services Required" was made in 17.9% (n=678) of the 3,798 full assessments. These 678 assessments represent 1,295 children who were victims of child abuse and neglect and 818 caregivers who were the subjects of these assessments.

**Adoptions (FFY 2011):**

- There were 128 finalized public agency adoptions in 2011.
- 98.4% (n=126) of these were special needs (SN) adoptions (i.e., children who meet certain criteria related to greater challenges in securing adoptive families and therefore contributing to a lengthier stay in foster care).
  - Children are assigned a primary special need, but may meet multiple SN criteria also.
    - The primary basis for these SN adoptions were: 43.7% (n=55) had a diagnosed medical condition or mental, physical, or emotional disability, 36.5% (n=46) were members of sibling group placed together, 11.9% (n=15) were at high risk for a physical, emotional or mental disability, 4.8% (n=6) were 7 years or older, and 3.2% (n=4) was a member of a minority race.
  - 41.3% (n=52) of adopted children with special needs were Native American.
  - 73.0% (n=92) of the special needs adoptions involved family foster parents.

**Permanency Outcomes (Point-in-Time data):**

- 58 approved subsidized guardianships were in place in October 2011.
- On September 30, 2011, there were 135 children in the custody of the Department of Human Services with mother and father parental rights terminated.

**Chafee Foster Care Independence Program (October 1, 2010 – September 30, 2011):**

- In 2011, 371 youth participants were served in the Chafee Foster Care Independence Program.
  - 47.8% (n=177) of participants were current foster care youth.
    - 137 of 178 were Priority 1 youth (Likely to Age Out of Foster Care at age 18 or Greater)
    - 40 of 178 were Priority 2 youth (Not Likely to Age Out of Foster Care at age 18 or Greater)
  - 52.3% (n=194) of participants were Foster Care Alumni, youth who had exited or aged out of foster care.
- 59 Education and Training Vouchers were given to 45 participants (21 were first time recipients) to financially assist in furthering their education.

**✚ Adoption Services**

Pursuant to statute, the CFS Division is served notice of all adoptions that occur in the state of North Dakota. However, adoption services are provided by private providers within the state. The CFS Division facilitates a contract with a private provider to provide adoption services to children in foster care and the families who adopt them. The contracted agency accepts referrals from the county social service agency when the plan for a specific child is adopted (or there is a concurrent plan for adoption). The private agency then provides all adoption related services including child preparation and assessment, child specific recruitment, general family recruitment, family assessment and preparation, placement and post -placement services. The agency also assists families in applying for adoption assistance.

**2013 UPDATE: In FFY 2013, the CFS Division projects spending 20% of the Title IV-B, Subpart 2 funds for Adoption Promotion and Support.**

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

**2013 UPDATE: A 2013 request for proposal has been completed and the state again will contract with Catholic Charities ND (in collaboration with PATH ND) for adoption services for children in foster care and the families who adopt them for the 2013-15 biennium.**

**During the period of July 1, 2012 through May 31, 2013, the Adults Adopting Special Kids (AASK) program placed 96 children in adoptive placement (of those 2 children were tribal custody children placed due to the efforts of the AASK program) and finalized 107 adoptions. Of these final adoptions, 63 met timeliness criteria in that the adoption was finalized within 12 months of the termination of parental rights and 23 met the degree of difficulty criteria in that the children required additional recruitment efforts.**

- **Inter-Country Adoptions:** Children adopted from other countries qualify for adoption and post adoption services, as would any child who is a resident of the state. Adoption specialists provide information and referral services to families who inquire or present with a need. Family Preservation services are available to families who are at risk for out of home placement and can be accessed through the local county child welfare agency. Pursuant to PA 01-01, it is unlikely that foreign-born adopted children would qualify for adoption assistance, other than reimbursement of nonrecurring expenses for those few children who

may be designated as special needs and whose parent applies for such reimbursement prior to finalization of the adoption.

**2013 UPDATE:** There was one child from who was adopted from another country who entered into state custody for the purposes of foster care in FY. The initial adoption placement was made by an out of state child placement agency. The reason for the placement was the child's extensive mental health and behavioral needs that made it unsafe for her to remain in her adoptive home. The case plan for the child is to return to the home of her adoptive parents

- Adoption Incentive Payments: North Dakota anticipates receiving adoption incentive funds as reauthorized in PL 110-351. Incentive Funds will be used to fund North Dakota's special needs adoption collaborative, the AASK Program. Services provided by this program include recruitment, training and assessment of families, child preparation and placement, child-specific recruitment, and post placement follow up services. Should the state receive adoption incentive funds, consideration will be given to funneling those dollars to additional specific post adoption services; in particular, the provision of case management services in concert with the Wraparound practice model for those post finalization families who are in need of the service.

**2013 UPDATE:** The state has received \$13,929 for the FFY 2012 Adoption Incentive Award Program Year. Adoption incentive funds received by the state have generally been used for specific training initiatives for adoption workers and for funding training for adoptive parents. Because the future receipt of these funds is uncertain, it is difficult to build programs funded by this resource, hence, the funds are used for discrete training opportunities.

- Coordination with the Tribes (Adoption Program): The contracted adoption provider, AASK, works collaboratively with the North Dakota tribes when placing Native American children for adoption. AASK places children within the ICWA order of preference unless "good cause" has been established by the court to do otherwise, or the child's tribe has approved placement outside the ICWA order of preference.

AASK adoption specialists work with adoptive families to develop a cultural plan for all Native children being placed for adoption with non-Native families that is forwarded to the child's tribe when requesting their approval to place outside the order of preference.

Adoption services are provided to Turtle Mountain tribal child welfare through the AASK program, with a half-time adoption specialist located in the PATH ND office in Belcourt, ND. At the request of the three other North Dakota tribes and with prior approval of the Administrator of Adoption Services, the AASK program will provide adoption services to children in the custody of North Dakota tribes where the tribe has a plan for adoption.

The ND DHS services will provide adoption assistance in the form of Medical Assistance for families who are adopting child through a North Dakota tribe and the tribe is providing the monthly adoption subsidy (a 638 funded subsidy).

**2013 UPDATE: All Tribes are allowed to request adoption services be provided for those children in the custody of the Tribes who have a plan for adoption, by request to and approval of the Administrator of Adoption Services. AASK will then provide adoption assessment, referral for adoption subsidy, and other adoption services as requested by the Tribe.**

- ✚ **AFCARS Improvement Plan:** North Dakota has report element logic and data clean-up activities to address in relation to satisfying the AFCARS Improvement Plan. The plan was begun in 2003 and continues to present day.

**2013 UPDATE: Enhancements have been made to the AFCARS extraction logic and these revisions were applied to the 2013 a submission. North Dakota's AFCARS Improvement Plan continues with the effort to re-write the reporting logic.**

#### **D. CHILD AND FAMILY SERVICES CONTINUUM**

The CFS Division is responsible for program supervision and technical assistance for the delivery of public Child Welfare services. Due to rural nature of North Dakota, it is vital that the service continuum involves consistent and continued coordination and consultation with all of our partners. What follows are brief descriptions of those CFS Division programs not funded through IV-B Subpart I or Subpart II funds but considered integral to the continuum of care in North Dakota's child welfare system.

##### ✚ **TANF Kinship Care Program**

Kinship Care became a statewide program available to County Social Service Agencies and the Division of Juvenile Services in February 2005. TANF currently does not include tribal social service agencies in the Kinship Care program due to lack of funding.

**2013 UPDATE: An average of 24 families with 33 children received Kinship Care services in SFY 2013. This program has made it possible for families to receive TANF Kinship Care supportive services, as well as a TANF benefit, while relative children are in foster care. The program will continue to be available to all children in the care, custody and control of County Social Services, the Division of Juvenile Services, or the DHS Executive Office.**

##### ✚ **Refugee Services**

The Department of Human Services, and specifically the CFS Division, is the agency designated by the Governor to administer services for refugees arriving in the United States and into North Dakota. Federal funding is available to meet the needs of newly arriving refugee families and Unaccompanied Refugee Minor Youth. Primary resettlement sites are in Cass County, Grand Forks County, and Burleigh County.

**2013 UPDATE: ND DHS continues to administer and report on the Unaccompanied Refugee Minor (URM) Program and Refugee Medical Assistance (RMA) programming. The Office of Refugee Resettlement (ORR) funded programs for Wilson/Fish, Social**

Services, Targeted Formula Assistance, Preventive Health, and Refugee School Impact Grants all continue to be administered and reported on by LSS/ND.

The strong collaboration between the ND DHS and LSS/ND has been ongoing for many years and continues to include service provision in many areas to refugee populations.

- Refugee population: The number of new arrivals had been increasing annually over the last 4 years, ranging from 182 individuals up to 470 individuals. During this past reporting period the number of new arrivals dropped to 354 individuals.

**2013 UPDATE:** Newly arriving refugee numbers increased from 354 individuals in FFY 2011 to 421 individuals in FFY 12. These arrivals were placed primarily in Fargo/West Fargo, with lesser numbers being placed in Grand Forks and Bismarck. This increase in numbers was attributed to economic upturn across North Dakota, and the increased ability of the Fargo/West Fargo community infrastructure to absorb higher numbers of new arrivals. It is anticipated that very similar numbers will be realized at the end of FFY 2013. LSS/ND continues to contract for direct services with local providers utilizing federal funds made available through grant proposals to the ORR for this population. Services were provided in a culturally sensitive manner and utilizing multilingual staff whenever possible.

- The State Coordinator for Refugee Services continues to be employed by LSS/ND to oversee and assist in the coordination of efforts for the refugee population in North Dakota.

**2013 UPDATE:** ND DHS and LSS-ND have amended our current contract to enable LSS-ND to hire a State Refugee Health Coordinator. This position would be responsible for the overall coordination and reporting of health services available to refugees and new arrivals. The hiring of this contracted position has been delayed because of uncertainty surrounding ORR's ability to fund this approved need.

- Upon arrival to North Dakota, Unaccompanied Refugee Minor (URM) children continued to be placed into licensed foster care homes and were provided services through the resettlement agency. When appropriate, the resettlement agency applied for guardianship of these children and youth. The Department of Human Services continues to apply state standards and licensing processes for URM foster home licensure as per North Dakota Century Code 75-03-36. LSS-ND has also agreed to start accepting victims of human trafficking along with URM youth.
- Collaboration efforts continued to be a major function of the State Coordinator, joining together with state and local groups. Efforts included collaboration with local providers, volunteers, mentors, and local organizations in the joint activity to facilitate the rapid self-sufficiency and integration of newly arriving refugees into North Dakota as residents and integral members of their new communities.
- A collaborative effort between LSS/ND and ND DHS produced North Dakota's 2012 Refugee Services State Plan. This plan was reviewed and accepted/approved by the ORR in December of 2011.

- LSS/ND had its Licensed Child Placing Agency (LCPA) status reviewed and renewed by ND DHS in May of 2012 as required by NDAC 75-03-36-Licensing of Child-Placing Agencies. This is required by ND DHS in order for LSS/ND to continue to administer the Unaccompanied Refugee Minor (URM) foster care program. A 2 year license was granted to LSS-ND after that review and remains in effect.

#### **Early Childhood Services**

In the next five years, the Early Childhood Services (ECS) Program will continue to be administered through the CFS Division and will be responsible for overall child care licensing for Early Childhood Services in North Dakota including policy and rule development and proposing legislation. The ECS Administrator consults and collaborates with diverse groups of individuals, organizations, and foundations to meet the program requirements of the Child Care Development Fund block grant.

For the next biennium, the CFS Division will continue to contract with Child Care Resource and Referral (CCR&R) to provide child care information and referrals to parents. The CCR&R will also provide training and consultation for child care providers and potential child care providers on business practices, early childhood development, health and safety, emergency preparedness, and infant-toddler care-giving as part of the Growing Childcare Initiative, a statewide program designed to increase capacity and improve quality of childcare and to provide professional development support to the early childhood workforce.. The CCR&R work plan includes the responsibilities and deliverables (data and products) for each of their agencies. The CCR&R agency directors provide regular reports to the ECS Administrator based upon this detailed work plan.

**2013 UPDATE:** The CFS Division has completed a recent revision of the Administrative Rules for Early Childhood Services. The rules became effective January 1, 2013 and the CFS Division collaborated with Child Care Resource and Referral (CCR&R) to develop online trainings for child care providers on the new rules. The rules increase policy and training requirements for many of the providers in an effort to improve quality. The CFS Division continues to work with an advisory board of child care providers to identify needed changes in regulation.

Since 2009, North Dakota has piloted a Quality Rating and Improvement System (QRIS) in the state's largest county. Beginning July 1, 2013, the CFS Division will partner with CCR&R to implement the first two levels of the rating system statewide. The CFS Division will also be partnering with the Department of Public Instruction and the Early Childhood Education Council to continue work that has begun on the early childhood data system and early childhood assessment.

#### **Head Start – State Collaboration Office (HSSCO)**

The purpose of the Head Start – State Collaboration Office grant is to facilitate collaboration among Head Start and Early Head Start agencies and entities that carry out activities designed to benefit low-income children from birth to school entry and their families. The specific responsibilities of the Head Start –State Collaboration Office are detailed in Section 642B (a)(1) of the Head Start Act. Over the last sixteen years, the overall goals of the Head Start – State Collaboration Office have been:

- Assist in building early childhood systems and in continued access to comprehensive services and support for all children with low-income;
- Encourage widespread collaboration between Head Start and other appropriate programs, services, and initiatives and augment Head Start's capacity to be a partner on behalf of children and families with low-income and;
- Facilitate the involvement of Head Start in state policies, plans, processes and decisions affecting the Head Start and Early Head Start target population.

In addition, the Head Start – State Collaboration Office is charged with the requirements cited in the Improving Head Start for School Readiness Act of 2007 (P.L. 110-134), and based on the results of the most recent HSSCO Needs Assessment of the local grantees program staff and the development of the HSSCO Five Year Strategic Plan (see link [www.nd.gov/dhs/services/childfamily/headstart/resources.html](http://www.nd.gov/dhs/services/childfamily/headstart/resources.html)) which addresses the scope of work and the priorities outlined in the 2011 Head Start Collaboration Framework including:

- Fostering seamless transitions and long- term success of Head Start children by promoting continuity of services between the Head Start Child Development and Learning Framework and the North Dakota Early Learning Guidelines, including pre-kindergarten entry assessment and the development of interoperable data systems.
- Collaborating with institutions of higher education to promote professional development through education and credentialing programs for early childhood education and care providers and professionals.
- Coordinating activities with the State agency responsible for the State Child Care Development Block Grant program and the child care resource and referral to make full-working- day and full calendar year services available to children; to include Head Start Program Performance Standards in State efforts to develop Quality Rating and Improvement Systems (QRIS); and to support Head Start programs in participating in QRIS and in partnering with child care and early childhood systems at the local level.
- Supporting other Office of Head Start Regional priorities such as family and community partnerships; health, mental health and oral health initiatives; disabilities; support to military families; and other initiatives and areas identified by the Office of Head Start Regional Office.

## **E. COLLABORATION**

The CFS Division coordinates and collaborates with a number of public and private providers in carrying out the continuum of Child Welfare Services. Coordination and collaboration occurs in a variety of capacities, from day-to-day conversations, planned meetings on a regular basis, etc. For example, as we developed the Program Improvement Plan, we invited numerous public/private partners to the table. These partners included: Regional Human Service Centers, private/non-profit agencies, county social service agencies, tribal child welfare agencies, Division of Juvenile Services, State legislators, ND court representatives, Department of Public Instruction. The collaborations listed below illustrate the importance of the public/private partnerships in North

Dakota. We continue to find ways to collaborate with our state and federal partners and this list continues to grow as new relationships are developed. These partnerships include but are not limited to:

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

**2013 UPDATE: The Family Team Decision Making (FTDM) pilot was expanded to include Grand Forks County and remains in Burleigh and Cass Counties. The expansion was possible due this being a very cost effective service showing positive outcomes. The 2013 legislative assembly continued to fund FTDM at the current level. The counties utilizing FTDM continue to report this service has been very beneficial in supporting their work with families. It leads to earlier engagement and stronger teamwork between social workers and parents.**

**The Village Family Services Center (with support from the ND Department of Human Services – CFS Division) is in the second year of the Discretionary Grant through the Children’s Bureau entitled “Family Engagement for Native American Youth.” The intent of the project is to reduce the number of Native American children placed in state foster care throughout the state through the implementation of two family engagement processes: Family Team Decision Making (FTDM) as a front end intervention to reduce foster care placement rates, and Family Group Decision Making (FGDM) as an intervention to reunify children already in foster care. They serve seven counties with the highest rates of Native American children entering foster care (Ward County was added in the past year).**

- ✚ The University of North Dakota for training of foster and adoptive parents, child welfare social workers and system partners.
- ✚ Youthworks for shelter care has been developed and is utilized by the Bismarck/Mandan community as needed.

**2013 UPDATE:** North Dakota has varying levels of shelter care options. A non-profit agency, Youthworks, offers shelter care services in Central ND located and utilized by the Bismarck/Mandan communities. Three Residential Child Care Facilities (North Central ND in Minot, Western ND in Sentinel Butte, and Eastern ND in Fargo) offer shelter care services as part of their licensed program. The facilities reserve two to three beds within the facility structure for short term shelter care. In addition, each region continues to recruit family foster homes willing to provide shelter care to foster youth; the homes receive a monthly fiscal retainer to reserve a bed for shelter care purposes. These resources have been helpful to custodians as an immediate emergency placement option; additional shelter care opportunities continue to be conversations in North Dakota.

 PATH for Independent Living Services.

**2013 NEW:** The state Chafee IL Administrator continued to oversee the contract for CFCIP services with PATH ND. As part of collaboration at the state level; the Chafee IL Administrator would reach out to public agencies (County, Division of Juvenile Services, and Tribes) to provide data updates, Chafee IL contact information, and referral procedures. The Chafee IL Administrator participated on the state Transition to Independence Advisory Council, the state Transition Community of Practice Coalition, and assisted in planning the annual Youth Transition Conference facilitated by the ND Federations of Families Children's Mental Health nonprofit agency.

As part of collaboration at the regional level; PATH ND continued to provide quality services to eligible CFCIP youth ages 14 to 21 and eligible ETV youth until age 23. Chafee IL Coordinators communicate regularly with County Social Services, Division of Juvenile Services and Tribal case managers to partner in the effort to provide appropriate and needed services to youth. Chafee IL Coordinators participated in community coalitions, the Transition to Independence subcommittees as well as ongoing contact with Residential Child Care Facilities statewide to best meet the needs of eligible youth in North Dakota.

 Division of Juvenile Services, PATH and Mental Health and Substance Abuse Division for collaboration and implementation of the Wraparound process across systems.

**2013 UPDATE:** Family engagement training for supervisors and front line workers was held in October 2012 and April 2013. Attendees were from several North Dakota agencies including children's mental health, county social services, DJS, and contracted providers (AASK, PATH, The Village, Lutheran Social Services, etc.). This was similar to the training provided to child welfare supervisors in 2012, developed by American Humane, which emphasizes the importance of engaging noncustodial parents in the case planning process and service delivery as a means to obtain positive outcomes for children. The training is congruent with the ND Wraparound Practice Model.

- ✚ Prevent Child Abuse North Dakota for coordination and implementation of child abuse and neglect prevention activities (collaboration takes place through a contract to provide child abuse and neglect prevention activities, including Child Abuse Prevention Month activities each April, along with regular meetings of the Alliance for Children's Justice Task Force and Steering Committee, and regular contact by phone, e-mail and face-to-face meetings).

**2013 UPDATE: Prevent Child Abuse North Dakota was awarded a Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Grant. This grant will be used to implement the Health Families America model home visiting program in Rolette and Ramsey counties. Lutheran Social Services Healthy Families Program, Department of Human Services and the ND State Health Department will provide technical assistance and consultation to bring services to fruition. Programming is expected to begin in 2014.**

- ✚ Parent and Family Resource Centers for parenting education and parent mutual self-help groups for child abuse and neglect prevention (collaboration takes place through a contract with North Dakota State University Extension Service, regular meetings of the Parent Education Network and annual CBCAP grantees meeting, as well as through informal contacts with the Network Coordinator).

- ✚ Child Advocacy Centers (CACs) to assist in the assessments of child physical and sexual abuse. The Centers are located in three communities in North Dakota (soon to be four communities). The CAC Directors are member of the Children Justice Alliance and meet with this multi-disciplinary team quarterly.

**2013 UPDATE: The 2013 North Dakota Legislature appropriated and additional \$300,000 to the children advocacy centers in North Dakota. The additional funding will expand service hours and enhance services availability in more rural areas of the state.**

- ✚ State Treatment Collaborative for Traumatized Youth (TCTY) Project that includes physical participation for the education and support of parents/foster parents who care for traumatized children.
- ✚ Native American Training Institute (NATI) for training of child welfare case managers.
- ✚ North Homes, Inc., a therapeutic foster care provider (collaboration through state licensure oversight and review, case reviews for licensure and audit, ongoing meetings for discussion of issues, coalition attendance together, policy issuances from the department).

**2013 UPDATE: North Homes is no longer operating in North Dakota.**

- ✚ North Dakota State University (NDSU) Extension offices throughout the state for parent resource centers and parenting classes.
- ✚ Collaboration Workgroup – a group whose mission is to increase collaboration at the local level among the Child Support Enforcement, TANF, Medical Services, Children and Family Services, and Job Service programs in order to improve services to individuals served by those programs, and to increase performance within the state (monthly meetings of

administrators, seminars are offered to the field as well as annual reviews/reports on progress towards identified Action Plans).

- ✚ North Dakota Children’s Social Emotional Development Alliance (NDSEDA) - collaborative effort with system partners to promote awareness and understanding of health social and emotional well-being of individuals birth to 21 and their families (meet quarterly to make progress towards achieving priorities outlined on Strategic Plan).
- ✚ The CFS Division collaborates with the North Dakota Foster Adopt Parent Association on foster and adopt parent issues including programming and training. The CFS Director sits as a board member of the association, representing the state child welfare agency.
- ✚ The CFS Division has an established MOU with Lutheran Social Services-ND for administration of most refugee services in North Dakota.

**2013 UPDATE: NDDHS provided financial support to help offset costs for the “2013 Building Bridges Conference” in April. This annual conference brings awareness to issues surrounding refugee arrivals. This year’s conference was attended by more than 300 professionals and stakeholders.**

- ✚ A Constituent Stakeholder group is on the roster of the full CFSR review process. This gives our constituents a specific time and place to appear to deliver comments regarding the child welfare services provided in the region.

**2013 UPDATE: Constituent stakeholder meetings were held in Bismarck and Devils Lake during the 2012-2013 CFSRs this past year.**

- ✚ The CFS Division engaged with Casey Family Programs in a formal contract to accept dollars and technical assistance to address identified needs in the child welfare system in North Dakota. Specifically, the engagement will focus on building data-driven decision-making capacity, developing Family Team Decision-making data capacity, establishing Permanency Roundtables and analysis of county caseload and workload issues. The identified issues were cross-walked with the PIP and 2010-2014 ND Child and Family Services Plan goals so that we are aligned in regard to the child welfare practice model and vision for child welfare services and improvements in the coming years.

**2013 UPDATE: The CFS Division continues to contract with Casey Family Programs for funding and technical assistance to address identified needs in the child welfare system in North Dakota. Casey projects in 2013 include:**

- Expansion of Family Team Decision Making services to include Grand Forks County
- Jefferson Collaborative in Cass County, a project intended to improve conditions and outcomes for a neighborhood reporting a significant number of CPS reports and a high percentage of children in the 0 – 5 age group. The Jefferson Collaborative focuses on strategies, that could be replicated in any community, using existing programs and resources to create protective factors that improve child and family well-being

- **Crossover Youth Pilot Project in Burleigh/Morton counties, a framework for systems to use is delivering services to youth involved with both child welfare and juvenile justice systems.**

**Additional Collaborations:**

- ND Supreme Court on the Children’s Justice Symposium for North Dakota: CFS Division staff and the ND Supreme Court staff have begun planning and work on the second Symposium to be held in the summer of 2010. Emphasis will be on outreach to the law enforcement community and for those in the newly created role of parent coordinators in divorce and custody cases. Topics will include diversity issues, engaging families, and enhancing connections for children in care. This training event is planned semiannually; it will share the “flip” year of the semiannual CFS conference, a smaller conference with a long history planned for the child welfare community and hosted by the CFS Division. CFSTC is also involved in both of these events – they coordinate all the contracts and work with the trainers/presenters on the agenda.

**2013 UPDATE: The third biennial Children’s Justice Symposium was held July 23-26, 2012. The conference is a collaborative effort between the CFS Division – ND Department of Human Services and the ND Court Improvement Project. Highlights of this symposium include family engagement and engaging fathers, foster youth and education issues, and other child safety, permanency and well-being topics. Attendance was a multi-disciplinary group of approximately 400 participants.**

- County Social Service Agency Director Involvement: The CFS Division will continue to meet with a sub-group of County Directors on a quarterly basis to discuss issues related to services for children and families. The County Directors as a whole meet monthly. The CFS Director and other administrators will meet with this larger group as needed. Quarterly meetings with the Child Welfare supervisors of Wraparound Case Management will be scheduled. These meetings will continue to occur quarterly to discuss child welfare topics as appropriate. CFS Division staff are invited to attend these meetings upon request to provide technical assistance and policy updates.

**2013 UPDATE: These meetings continue on a quarterly basis. The agenda provides opportunities to address policy and practice related topics. The CFS Committee is co-chaired by the Cass County Social Services Director and the CFS Director.**

- Regional Representatives: The CFS Division staff will continue to meet with the Regional Representatives of County Social Service Programs, who provide technical assistance to the field, every other month to discuss program and policy issues and changes. On the off month, an Interactive Video Conferencing is scheduled. Information shared at the meetings have included, but are not limited to, CPS Manual, Wraparound Manual, FGDM, Kinship Care, Relative Search, Subsidized Guardianship, Background Checks, CFSR, Adoption, among others.
- County Supervisors: The CFS Division staff will continue to meet with the County Supervisors upon invitation to provide policy updates and technical assistance related to all of the child welfare programs as well as SPOC and the new FRAME system. Per the North Dakota PIP, the CFS Division plans to convene a group of county supervisors to function as

an advisory group in the development of a supervisory practice model in a concerted effort to implement a clear model of supervision that supports the Wraparound case management practice model.

**2013 UPDATE: The county supervisor meetings continue to be held quarterly with agenda opportunities to address practice issues and other identified issues that need discussion and resolution. County supervisor continue to set aside time at each meeting to convene learning circles. Topics have included: engaging absent parents; dealing with performance issues as a supervisor; using data for decision, etc. CFS Division staff attend the county supervisor meetings upon request to discuss policy and practice related issues.**

- **Court System:** The CFS Division staff will continue to work closely with the Court Improvement Project (the Director of the Division has a seat on the Court Improvement Committee) through the Supreme Court to improve communication with Judges, Court Administrators, State's Attorneys, Juvenile Court staff and tribal staff and to address systemic issues across the various systems. As indicated in many of the CFSR stakeholder meetings in the regional CFSR reviews, foster parents and social workers in some regions are concerned about the delay in the legal process or defects in the legal process for children who are in the custody of the County and or Department.

The North Dakota Supreme Court has a long history of consultation and coordination with the Department of Human Services and the tribes. The Court Improvement Committee/Project (CIP) was formed in 1998 and in 1999 was integrated with the ASFA Implementation Committee from CFS. The Director of CFS has served in the last as the chair of the data subcommittee for the CIP. Currently, the CFS Director serves as a member of the Training Subcommittee. Conversations have begun on the development of a shared data plan once both entities launch their new data systems and have access to data warehouses as part of those new systems for both entities. This past summer representatives from the ND Supreme Court and CFS (IT and administration from both entities) attended a Regional Training/Development session on collaboration and data sharing. A plan emerged from that session that includes processes to data from the new FRAME system with judges and court personnel, including a FRAME enhancement that will notify judges and court personnel when a child's placement setting changes.

The CFS director will continue to serve on the training committee of the ND Court Improvement Project. Plans are being made to sponsor two regional forums in the fall of 2009 to cover new legislation (regarding the Fostering Connections changes to state law) and other child welfare related issues. The targeted audience is the multi-disciplinary professionals working in child welfare or with child welfare-related cases.

**2013 UPDATE: The CFS Director continues to serve as an active member of the Court Improvement Committee and as a member of the Training and ICWA Subcommittees. The Child Welfare Infrastructure Administrator serves on the Data Analysis Subcommittee.**

- **Court Collaboration on Child Welfare Practice Issues:** ND DHS and the CFS Division will continue to collaborate with court partners on practice issues in the field. Frequently, we call together an ad-hoc “team” to discuss system, court order, or relationship issues in individual cases. We continue to cross-pollinate by inviting and attending “field staff” meetings with Juvenile Court or ND DHS personnel.

**2013 UPDATE:** The CFS Division met with the ND Supreme Court data analyst and other Supreme Court staff to discuss data issues across the two governmental entities and the possibility of data sharing and collaboration, particularly regarding Termination of Parental Rights cases and continuances in these cases. In addition, the CFS data analyst is also a member of the data sharing group and conversation at the invitation of the court. Both entities continue to share data and collaborate on date use and availability. FRAME provides electronic notice directly to Juvenile Court when children placed in care change placements to alert judges and juvenile court staff regarding the child’s placement. Efforts are being explored regarding sharing of AFCARS data in relation to children’s discharge reasons as this information is difficult for the Supreme Court data analysts to gather out of their Odyssey system.

The CFS Division remained active participants with the Court Improvement Committee during the past year. Regular updates regarding the CFSR and the ND PIP were provided at meetings. The CFS Division supported the efforts of a multi-disciplinary group in the Grand Forks community identified to conduct a pilot project to reduce the court time for termination of parental rights cases. A report of this effort’s findings was distributed by the CFS Director with plans to further review with the Court Improvement Committee and other statewide partners in July 2013.

We continue to collaborate with the Assistant State Court Administrator on CFSR issues, and he participates as a member of the CFSR team on Full CFSR Reviews (he doesn’t attend the case reviews-full reviews only). He has been very active in convening local court officials to address issues that come forward in the stakeholder meetings following the full reviews.

## **F. PROGRAM SUPPORT**

### **✚ INFORMATION ON CHILD WELFARE WORKFORCE:**

#### ▪ **Recruitment**

In North Dakota degrees and certifications are required for child welfare workers and other professionals responsible for the management of cases and child welfare staff. All county child welfare professionals must have a license to practice social work in North Dakota which requires a minimum of a Bachelor’s degree in Social Work.

CFS has a contract in place with the University of North Dakota Department of Social Work to support IV-E Stipend for graduate level and undergraduate social work students. Approximately 4-6 stipends will be given per year with the requirement that stipend students will attend Child Welfare Certification Training prior to completing their

academic work and will work in a child welfare capacity as “pay back” for the stipend received for their educational costs. This supports development and recruitment of a trained, skilled and educated workforce.

▪ Orientation/Training

Child Welfare Certification is required of all social workers employed by the counties, AASK, PATH, and some Tribal Social Service agencies. Child Welfare Certification is a four week training course (spread over a four month period). The training is provided by the Children and Family Services Training Center at the University of North Dakota. County Child Welfare Workers are required to complete the training within the first year of employment. The training is competency based program that incorporates in class, on-line, and practical field assignments.

▪ Demographics

((i.e. – do we have accessible information on current staff and recent hires? Examples follow))

- Level of Education
  - Bachelor of Social Work (BSW)
  - Title IV-E supported BSW
  - Master of Social Work (MSW)
  - Title IV-E supported MSW
  - Other degree
  
- Because North Dakota’s child welfare system is state supervised and county administered, data for the following is not kept at the department:
  - Years of child welfare experience or other related experience
  - Race/ethnicity
  - Caseloads
  - Staff turnover and vacancies to include, retirements, dismissals, lateral/promotional moves, and voluntary resignations
  - Supervisor-to-worker ratios
  
- Salary
  - Most counties in North Dakota choose to use the state’s salary range structure. Salary ranges vary based upon the social worker’s level of education and experience.
  
- Position types
  - Administrative assistant
  - Direct service (social workers, parent aides)
  - County supervisor
  - County director

▪ Ongoing Training

Training Center staff participate in quarterly Regional Supervisor meetings, County Supervisor meetings, Child Protection Task Force, Foster Adopt/Task Force, Recruitment and Retention Task Force, Independent Living Work, PIP Work Group and other committees as requested to discuss the on-going needs of the system. Direct feedback of

ongoing training needs is also solicited at every training session coordinated or sponsored by the Training Center or the CFS Division. The Training Center also receives feedback directly from workers, supervisors and administrators at the CFS Division.

▪ **Skill Development**

In Child Welfare Certification skill is measured through the completion of the assignments as well as through self-assessment of competencies assigned for each week of training.

The CFS Division, through a contract with the Children and Family Services Training Center (CFSTC) located at the University of North Dakota in Grand Forks, ND provides an array of trainings throughout the year, as described below.

**2013 UPDATE:** Please see **ATTACHMENT B** for the SFY 2014 CFSTC Training Plan.

✚ **Child Welfare Certification Training**

This program is a competency based training curriculum. The training is designed to meet certain goals specific to the responsibility of Child Protective Service Social Workers in response to reports of suspected child abuse and neglect and in the delivery of additional child welfare services to protect children and strengthen families. Specialized knowledge and a specialized set of skills are necessary for the social workers in this very important field.

**2013 UPDATE:** Child Welfare Certification Training was provided to 59 social workers in SFY 2013. Distribution of trainees: 40 county social workers, 6 Professional Association of Treatment Homes (PATH), 3 Adults Adopting Special Kids (AASK), 8 Tribal, 0 Human Service Center, and 1 student. Four of the participants were supervisors.

✚ **CFS Training Center Special Projects**

**2013 UPDATE:** For SFY 2012, the Children and Family Services Training Center (CFSTC) facilitated several special training projects that included:

- **PRIDE Model – Conducting a Mutual Family Assessment:** Offered one session and 7 case managers were trained (0% supervisors, 100% case workers).
- **Children’s Justice Symposium:** The North Dakota Children’s Justice Symposium was held in July 2012. There were 434 participants from the child welfare system. This multi-disciplinary conference is co-sponsored by the North Dakota supreme Court.
- **Children and Family Services Conference:** The Children and Family Services Conference is scheduled for July 22-25, 2013.
- **Parent Aide Training:** A one-week training for new parent aides or parent aide supervisors in the state. Fifteen parent aides were trained.
- **PRIDE Train-the-Trainer:** Thirteen additional people were trained as trainers during the fiscal year. Five of the new trainers were foster and/or adoptive parents, eight were social workers.

- **ND Foster Parent Conference: The 2012 North Dakota Foster and Adoptive Parent Conference was held in Fargo in October 2012. 230 people participated in the event.**

#### **Wraparound Certification Training**

Wraparound Certification Training continues to be a collaborative effort between the Division of Juvenile Services (DJS), Children's Mental Health, Federation of Families and PATH. It is a required training for all newly employed county case managers, children's mental health workers, DJS workers, and private partner agencies providing contracted services through the Department. The Wraparound case management practice model training is Week 2 of the Child Welfare Certification Training.

**2013 UPDATE: 62 participants completed Wraparound Certification Training this year. Distribution of trainees: 35 county social services, 5 Partnerships/Human Service Center Staff (children's mental health care coordinators), 8 Professional Association of Treatment Homes (PATH), 3 Adults Adopting Special Kids (AASK), 2 Village, 0 Lutheran Social Services, 2 DJS , and 7 Tribal. Five of these participants were supervisors.**

Wraparound Recertification: Certified Wraparound case managers are required to complete recertification biennially in order to continue practicing Wraparound case management in North Dakota and this requirement is fulfilled through attendance at an approved conference.

**2013 UPDATE: During SFY 2013, Wraparound Recertification trainings were offered at the following statewide conferences: North Dakota Family Based Services Association (NDFBSA) Conference, Children & Family Services Conference, and the annual Indian Child Welfare Conference. These conferences are primarily family-based and offer sessions pertinent to skill advancement in the practice of Wraparound case management as well as other child welfare, mental health, and juvenile justice issues. Other seminars were approved by the CFS Division if they met the requirements of recertification. During SFY 2013 over 111 public and private practitioners were recertified.**

#### **PRIDE Training**

The CFSTC provides and coordinates PRIDE Training. Foster PRIDE/Adopt PRIDE is a program for the pre-service training, assessment and selection of prospective foster parents and adoptive parents. This program is based on the philosophy that knowledgeable and skilled foster parents and adoptive parents are integral to providing quality family foster care and adoption services. They, like social workers, should be qualified, prepared, developed, selected and licensed or certified to work as members of a professional team whose goal is to protect and nurture children and strengthen families. The CFSTC helps coordinate all PRIDE activities in the state. It trains trainers, compensates regional trainers who provide the local training, and provides reimbursement to foster parents who attend the training. The foster parent's role in preparing youth for independent living was expanded upon this year. All foster parents will receive Independent Living resources at the PRIDE training.

**2013 UPDATE: As of this writing there are approximately 100 "active" trainers in the state. The CFSTC has maintained a total of the number of individuals (not the number of licensed families) who attended PRIDE pre-service training. These would include both**

foster and adoptive parents. During SFY 2013, 528 new foster/adoptive parents attended this training.

#### PATH Training

The CFS Training Center provides training for PATH ND Inc. (Professional Association of Treatment Homes), which includes the following:

- Crisis Prevention Institute Training: Treatment Foster Care in the state of North Dakota, as administered by PATH ND Inc., has adopted the Non-Violent Crisis Intervention model developed by the Crisis Prevention Institute (CPI) of Brookfield, Wisconsin. This program is a copyrighted proprietary model of therapeutic interventions. The overall goal of the CPI model is to intervene in a crisis situation in a way that provides for the care, welfare, safety, and security of all who are involved in the incident. The program clarifies the basic elements of a crisis and how a situation can escalate into a crisis. Proven strategies of de-escalation are identified and discussed within the context of having foster children in one's home.

All PATH foster parents and staff are required to attend a 12-hour session on Non-Violent Crisis Intervention presented by certified trainers in the CPI model. It is also a PATH requirement that all should attend an annual refresher course that reviews the major elements of the CPI model.

**2013 UPDATE: During SFY 2013, 116 participants attended this training.**

- Treatment Foster Care Training: PATH foster parents are required to complete the Treatment Foster Care Training within the first 18 months of licensure. This training consists of seventeen (18 hours of training on specific topic areas designed to address the special needs of children in treatment foster care. Areas covered during this training include but are not limited to:
  - Family engagement
  - Cultural diversity
  - Fostering Traumatized Youth and Children

This training was assessed annually for curriculum changes to ensure that the needs of the foster parents were being met efficiently. Three to six sessions are held annually.

**2013 UPDATE: During SFY 2013, 67 participants attended. PATH foster parents were also required to complete the PRIDE training with the first six months of licensure.**

- Additional Foster Parent Training: The CFSTC also coordinated foster parent training throughout the state. The Training Center met annually with the regions to put together a training plan to provide opportunities for foster parents. Information was gathered from foster parents (through survey) and social workers.

**2013UPDATE: During the period 04/01/12-03/31/13, 16 different training opportunities were held across the state with 204 foster parents attending.**

- County foster parents are required to complete 12 hours of annual training. Each agency was responsible for tracking the hours for their foster parents. The annual training was required for re-licensure.

**2013 UPDATE:** This training was completed in a number of ways:

- Opportunities coordinated and arranged through the CFS Training Center or by qualifying events in the community. The social services agency determined, for the most part, if the training was appropriate to meet the requirements. If there were questions about the appropriateness of training, the agency consulted with the CFSTC.
  - Foster parents could also receive 6 hours of annual training through independent study (books, videos, etc.). Any independent study had to be approved by the licensing agency and a report had to be submitted to the licensing agency and the CFSTC.
  - On-line training was considered independent study. A certificate of completion was submitted in lieu of a written report.
- PATH foster parents are required to have 30 hours of annual training.

**2013 UPDATE:** In SFY 2013, the CFSTC was instrumental in getting the training needs of PATH foster parents met.

- The CFSTC supports ongoing training in other ways as well.

**2013 UPDATE:**

**2013 SUPERVISOR TRAINING REPORT:** Training was provided to supervisors in a variety of ways during the year. Training was provided in May 2012 on “The Work of the Coach: Supervisors Helping to Engage the Non-Resident Father”. This training was provided in partnership with the American Humane Association. Fifty-nine supervisors participated in the training. This training was also developed through the use of the TTA network with the assistance of the National Resource Center for permanency and Family Connections and the national Resource Center for In-Home Services. The training was repeated in October 2012 with an additional 27 supervisors attending. Two-day training designed for new supervisors entitled “Essentials in Child Welfare Supervision” was held in October with 15 supervisors attending. Part two of the training was held in April 2013. (4 days total). Child Welfare Supervisors had other opportunities for training including a session in October 2012, “Generational Aspects of Management.” 30 supervisors attended the session. Finally, a session entitled “Advanced Training in Secondary Trauma for Supervisors” was held in February 2013 and 21 supervisors attended the training. This training was an addition to the training contract with Children and Family Services Training Center.

**NEW in 2013:** Children and Family Services Training Center, UND Department of Social Work, Initiates Secondary Trauma Prevention and Support Program for North Dakota Child Welfare System

In July of 2012 the CFS Division of the North Dakota Department of Human Services funded a proposal by the UND Children and Family Services Training Center,

Department of Social Work, to develop a program to address secondary trauma prevention and provide support to child welfare social workers, supervisors and administrators in North Dakota. The project was developed in consultation with former North Dakota resident and UND student, David Conrad. David is a nationally recognized expert in addressing secondary trauma in child welfare workers and is uniquely qualified to serve as our consultant. The Training Center has been providing training in secondary trauma during Child Welfare Certification (new worker training) since the fall of 2009, but this project expands these efforts. Not only does the funding permit the Training Center to continue to provide the introductory secondary trauma training workshops, but allows expansion to other areas of training including secondary trauma training for supervisors, educational support groups for supervisors and topic driven trauma and stress reduction sessions. Additionally, the project provides an avenue for individual consultation or group stress debriefing for individuals and counties exposed to critical events, such as a death of a child, or the cumulative effects of regular exposure to traumatic events. David Conrad began providing services to North Dakota child welfare agencies and workers in October of 2012. David has already delivered training to nearly 175 participants during that time. Live training events have already taken place in three different communities, but video conferencing, teleconferencing and web-based communication have also been utilized in fulfilling the goals of the project.

In SFY 2013, the CFSTC assisted county social service agencies and PATH in accessing other training opportunities by providing reimbursement for costs related to attending training including registration fees, lodging, meals, mileage, and child care expenses.

## **G. CONSULTATION AND COORDINATION WITH TRIBES**

The coordination and collaboration efforts with the tribes are listed below.

- ✚ Funding of administrative IV-E dollars to the tribes:
  - Pay IV-E foster care and state match for the IV-E eligible children living on the reservations;

**2013 UPDATE:** CFS is currently working with DHS's ITS and Fiscal staff to establish a method to draw down the federal *Tribal* IV-E FMAP reimbursement rate. Code changes are necessary to effect this change. It is anticipated these changes will be implemented by early 2014.

CFS conducted a Title IV-E casework and eligibility file review in Spirit Lake Tribal Social Services in May of 2013 as a follow-up to reinstatement of access to IV-E dollars by the Spirit Lake Nation. The review showed continued improvement within the IV-E tribal cases, and also reported areas that needed to continue to show improvement.

- Contract to provide IV-E training dollars to the Native American Training Institute;

**2013 UPDATE:** NATI continues to contract for IV-E claims consultations for the tribes. Tom Pomonis has since reduced the amount of time available to do this, so others with IV-E expertise have been contracted with to provide this service.

- The CFS Director serves as an advisory member on the board of the Native American Training Institute;
- CFS Division Staff serve on the planning committee for the annual Indian Child Welfare Conference and assist with funding;

**2013 UPDATE:** The Department of Human Services – CFS Division continued to provide fiscal support for the annual ICWA conference (which included various sessions on “ICWA 101” (Judge Thorne) and ICWA compliance in general, typically with a panel presentation and discussion. The SSNAP group (Strengthening State and Tribal Partnerships) also held a meeting during the ICWA conference that focused on ICWA compliance, with the assistance of resources from Casey Family Programs.

- Provide a performance-based contract for adoption services that include services to one of the reservations;

**2013 UPDATE:** All Tribes are allowed to request adoption services be provided for those children in the custody of the Tribes who have a plan for adoption, by request to and approval of the Administrator of Adoption Services. AASK will then provide adoption assessment, referral for adoption subsidy, and other adoption services as requested by the Tribe.

- The Department of Human Services has a IV-E Stipend program with the University of North Dakota. The stipend program is for persons committed to working in child welfare with the requirement of working in a IV-E eligible agency (tribal social service agency, county social services, division of juvenile services, etc.) after graduation;

**2013 UPDATE:** CFS Division has a contract in place with the UND-Department of Social Work to provide IV-E Stipends for students who are interested in working with children and families. In addition to building workforce, this stipend requires that participants attend the Child Welfare Certification training and work to “pay back” stipend dollars by working in rural or urban child welfare positions. In 2013, seven students received stipends through this contract. The UND-Department of Social Work proposed, and the CFS Division is considering, expanding the IV-E Stipend program to the Sitting Bull College on the Standing Rock Reservation. The stipends would be for social work students attending Sitting Bull College who are interested in working with children and families.

- Training, support, and consultation concerning cultural competency and ICWA;

**2013 UPDATE:** Through contract with the Department of Human Services, NATI has provided cultural competency services including foster parent training, a cultural resource service directory for the NATI website, and posted cultural resources guides for all the tribes (<http://nativeinstitute.org>)

Under the same contract, NATI also provided four regional sessions on cultural issues to both child welfare workers and to foster parents. NATI is also responsible in the contract to provide support and organizational planning for the quarterly Strengthening State and Native American Partnerships (SSNAP) meetings. SSNAP meetings were held quarterly with tribal child welfare directors, staff and CFS director and staff (with NATI facilitating). In this past year several were held in tribal communities and several were held in Bismarck. Meetings included information and data sharing on Casework Visits (required 30 day visits) from FRAME and other issues regarding IV-E requirements and service array planning and development.

A contract between the Department of Human Services and NATI will be continued throughout the 2013 – 15 biennium to include:

- Cultural competency services;
- Foster parent training;
- Maintenance of a cultural resource service directory on NATI website;
- Maintenance of cultural resource guides for all tribes;
- Support, planning and organization for SNAPP meetings.

In addition to these activities, the Department was actively involved in providing legal and case consultation and resources in ICWA cases to the field through the request of counties, court personnel and state's attorneys, and private child welfare providers.

- ✚ Inclusion of a tribal representative on the regional Child and Family Service Reviews to assist in looking at ICWA compliance.

**2013 UPDATE:** ICWA compliance was reviewed in every randomly drawn CFSR case where ICWA applied during the eight regional CFSR reviews around the state. As of May 2013 the CFS Division is completing a CFSR case review of tribal IV-E eligible child welfare cases in each of the four tribes. The CFS Division has completed case reviews of three North Dakota tribal social service agency cases at the time of this writing (Standing Rock Sioux Tribe, Spirit Lake Tribe, and Turtle Mountain Band of Chippewa). Prior to these case reviews, The CFS Division provided a day-long training on the CFSR instrument with the tribal social services agencies. The fourth tribal social services agency, Three Affiliated Tribes, will be trained the fall of 2013 in preparation for their case review in November. Completion of this training qualifies the attendees to serve as team reviewers for future CFSRs. In the past year, tribal child welfare representatives were not available to assist with the regional CFSR reviews. The size and demands of their caseloads continue to impact their ability to participate in this review activity.

- ✚ DHS provides service grants to all 4 reservations for Family Preservation Services (Wraparound case management, parent aide and/or intensive in-home services);

**2013 UPDATE: All four tribes had Family Preservation contracts in place (state general fund dollars) and actively used the dollars for Parent Aide activities and other activities to prevent placement of children in foster care and preserving family connections.**

- ✚ The CFS Division will exchange copies of the APSR. The annual reports are also published on the state website.

**2013 UPDATE: The CFS Division will provide electronic copies and links to the 2013 APSR to the tribal child welfare directors when we have a finalized submission. APSR will be reviewed and discussed at the fall SSNAP meeting (September 2013) with the four tribal child welfare directors and NATI staff.**

- ✚ The Regional IL Coordinators serve all counties in North Dakota; this includes youth involved and/or residing on one of the four tribal reservations. IL Coordinators work with the tribal reservation closest in proximity to educate IL youth on regional cultural events (pow-wows, classes, educational awareness, scholarships, etc.) In Region VII specifically, the IL Coordinators are employed by Sioux County Social Services providing direct access to Fort Yates tribal activities, events, programs, etc. In addition, Region III works closely with Turtle Mountain Reservation collaborating with the Tribal Scholarship Program and “Cultural Considerations of Native American Children in Foster Care” educational classes.

**2013 UPDATE: The state Chafee IL Administrator continued work with Chafee IL Coordinators to ensure that CFCIP and ETV benefits are made available to Native American youth (Title IV-E or 638) on the same basis as non-native foster care youth in North Dakota. In addition, the Chafee IL Administrator and Chafee IL Coordinators email information to the Tribal Directors as reminders of the program and contact updates as needed to ensure adequate referral opportunities are available. Chafee Independent Living was not a specific topic on the agenda at the STRENGTHENING STATE & NATIVE AMERICAN PARTNERSHIPS (SSNAP) state meetings this past year, however emailing information has been a sufficient and successful way of connecting with our Tribal partners.**

## **H. HEALTH CARE SERVICES**

The CFS Division staff has developed a Health Care Services Plan that builds on work already being done in the state through the Governor’s Healthy North Dakota initiative. The CFS Division’s plan embraces the efforts of statewide committees such as Healthy North Dakota Early Childhood Alliance (HNDECA) and North Dakota Social Emotional Developmental Alliance (NDSEDA). CFS Division staff sit on these committees and the members of each meet regularly to tackle the complex issues specific to the health care needs of our children. Updates on the CFS Division’s Health Care Services Plan can be found on the pages 54 - 57.

ND CFS DIVISION – HEALTH CARE SERVICES PLAN FFYs 2010-2014		
STRATEGIES	ACTION STEPS	2013 UPDATES
1. Develop a schedule for initial and follow up health screenings that meet reasonable standards of medical practice.	a. North Dakota will continue to use the Health Tracks Screenings process within the first 30 days of foster care placement.	a. The practice of scheduling Health Tracks Screenings within the first 30 days of foster care placement continues. <i>Action step is ongoing.</i>
	b. The CFS Division staff will review/update the policy concerning Health Tracks Screenings for foster children.	b. Policy is in place through the CFS Division that sufficiently addresses the provision of screenings for all children placed in care. Similar policies are in place through the Mental Health and Substance Abuse Division and Medical Services Division. <i>Action step completed in 2012.</i>
	c. The CFS Division staff will consult with the Head Start Collaboration Administrator regarding dental care for foster children.	c. The North Dakota Oral Health Strategic Plan and updates continue to be accessible at <a href="http://www.ndhealth.gov/oralhealth">http://www.ndhealth.gov/oralhealth</a> . The continued efforts of the Ronald McDonald Care Mobile (RMCM) assist in reducing the gap between needs and services for North Dakota children. Each quarter the RMCM visits between 8-10 sites averaging 500 patient visits serving over 200 children. As an example, in the third quarter of the past year the Care Mobile staff provided 1,962 dental services valued at \$94,883. The most recent update indicated that the majority of children served (72%) are uninsured, with 22% under Medicaid and six percent with private insurance. The Head Start State Collaboration Office Administrator serves on the RMCM Advisory Board and is a member of the North Dakota Oral Health Coalition, providing linkages between systems of care and educating partners on the needs of North Dakota's underserved children.
	d. The CFS Division Director will invite a representative from ND Medicaid to assist with the Health Tracks Screenings plan.	d. A representative from ND Medicaid worked closely with CFS Division staff and the Children's Mental Health administrator to develop a plan to ensure physical, dental and mental health assessments are routinely completed during Health Tracks Screenings. <i>Action step was completed in 2011.</i>
	e. CFS Division staff will develop a plan for health needs identification, monitoring and treatment through the Health Tracks Screenings.	e. NDSEDA, in partnership with ND Medicaid, provided training to all state Health Tracks Screeners in fall 2010. Training on specific evidence-based assessment instruments was provided as well as needs identification and treatment referral. The training was videotaped for future use. <i>Action step was completed in 2011.</i>
	f. The CFS Division staff, in collaboration with the Children's Mental Health Administrator, will gather information concerning any pilot projects occurring in North Dakota or neighboring states that are aimed at addressing mental health screenings for foster children.	f. Through the work of the ND Social Emotional Development Alliance, this was addressed in "e." See above for comments. <i>Action step was completed in 2011.</i>
	2. Determine how medical information will be updated and appropriately shared.	a. The CFS Division Director will invite a representative from ND Medicaid to assist with the development of the Health Care Services Plan.
b. The CFS Division staff will collaborate with health professionals regarding a Medical Passport Program designed to track foster children's medical care while they are in foster placement.		b. It has been determined that the "Health Exchange" provision of the Affordable Care Act will help NDDHS to accomplish this goal. This provision will be implemented as per Act by 1-1-14.
c. FRAME, as an electronic record, will maintain current medical information on all foster children. Physicians/psychiatrists will be included as team members so that they receive the plan of care updates.		c. Partnerships (children's mental health) and child welfare workers use FRAME as their management information system to include documentation of all youth medical information. The workers extend invitations to physicians and/or psychiatrists to attend team meetings. The workers ensure the medical personnel have updated care plans to include medical and emotional/behavioral health goals. <i>Action step was completed in 2011.</i>

<p>3. Develop a plan to ensure the continuity of health care services which may include establishing a medical home for every child in care.</p>	<p>a. Case workers will utilize both the Health Tracks Screenings and the Child &amp; Family Team Meetings as a means to review the continuity of health care services.</p>	<p>a. Caseworkers are utilizing Health Tracks Screenings and Child &amp; Family Team Meetings as a means to ensure continuity of health care services. The FRAME system is used to document these efforts. <i>Action step is ongoing.</i></p>
<p>4. Oversee prescription medications for all foster care children.</p>	<p>a. Case workers will review current prescription medications at the Child &amp; Family Team Meetings.</p>	<p>a. Partnerships (children’s mental health) and child welfare workers use FRAME as their management information system for documentation of prescription medications for all youth involved in the program, so it can be assessed ongoing at the Child &amp; Family Team meetings. The Child &amp; Family Team outline is a resource tool provided as a link in FRAME to assist case managers in covering all necessary information at the child and family team meetings. Medical information, including prescription medication updates, is one of the items tabbed in this outline. Regional Supervisors ensure all items on the outline are addressed at team meetings. <i>Action step was completed in 2012.</i></p>
	<p>b. Medication updates will be documented in the FRAME system.</p>	<p>b. Partnerships (children’s mental health) and child welfare workers use FRAME as their management information system for documentation of medication updates on all youth involved in the program. <i>Action step was completed in 2011.</i></p>
	<p>c. Physicians/psychiatrists will be included as team members and provided with care plans and updates to the care plan.</p>	<p>c. Partnerships (children’s mental health) and child welfare workers extend invitations to physicians and/or psychiatrists to attend team meetings and provide them with care plans/updates to the care plan. <i>Action step is ongoing.</i></p>
<p>5. Actively consult with and involve physicians or other appropriate medical or non-medical professionals in assessing the health and well-being of children in foster care and in determining appropriate medical treatment for the children.</p>	<p>a. Case workers will report consultations with medical personnel at the Child &amp; Family Team Meetings and will document updates in FRAME.</p>	<p>a. The Child and Family Team Meeting Outline has been disseminated to Regional Supervisors, County Supervisors, and workers to guide team meetings and ensure all areas are covered including the health and well-being of children. Partnerships (children’s mental health) and child welfare workers provide updates on medical consultations at team meetings and the updates are documented in FRAME. <i>Action step was completed in 2011.</i></p>
	<p>b. The CFS Division staff members and the Children’s Mental Health Administrator will participate on the Healthy North Dakota Early Childhood Alliance (HNDECA), a subgroup of the Governor’s Healthy North Dakota Initiative.</p>	<p>b. The Children’s Mental Health Administrator continues to attend and participate in the HNDECA meetings held quarterly. She reports updates to CFS Division staff in a timely manner. <i>This action step is ongoing.</i></p>
	<p>c. The North Dakota Children’s Social Emotional Development Alliance (NDEDA), along with HNDECA, will develop a MOA/MOU with Medicaid to ensure providers will offer Health Tracks Screenings, to include mental health screenings, to all children in care.</p>	<p>c. ND Medicaid developed and disseminated policy requiring that all children who receive a Health Tracks Screening will have an evidenced-based mental health screening completed. Therefore, an MOU was not needed. <i>Action step was completed in 2011.</i></p>
<p>6. The state will monitor and treat emotional trauma associated with a child’s maltreatment and removal from the home</p>	<p>a. The ND Department of Human Services will continue to support the provision of the Treatment Collaborative for Traumatized Youth through the regional human service centers.</p>	<p>a. The North Dakota Department of Human Services conducted a 6 month learning collaborative pilot project with the children’s mental health program (Partnerships) that provided training for all Partnership Care Coordinators on what a trauma is, how to recognize the symptomatology s of trauma and how to work with families and youth who have experienced traumatic events. In addition the Trauma Training will assist Partnerships staff in making appropriate referral for therapeutic services to HSC clinicians who have been trauma trained through the TCTY. Following an assessment of the outcomes from the six month learning collaborative pilot project with Partnerships, the department will take the next step towards providing Trauma Informed System of Care training to all human service employees. This statewide training will include a training specific to recognition of trauma and on how to administer the trauma screening instrument and referrals. The goal of the plan is that all clients at the HSC will be screened for Trauma with</p>

		appropriate referrals made when there are indicators of trauma.
	b. County social service agencies and DJS agencies will continue to refer children and youth as appropriate to the TF-CBT(Trauma Focused Cognitive Behavior Therapy) and SPARCS groups at the regional human service centers	b. The CFS Division and CMHSA continue to monitor the regional human service center data on referrals to TCTY and SPARCS.
	c. The ND Department of Human Services – CFS Division will explore options to provide necessary trauma informed care training to county social service agencies, DJS agencies, and contracted service providers.	c. In July 2012 the CMHSA initiated a 6-month Trauma Learning Collaborative pilot project with Partnerships care coordinators. The staff were provide training that included implementation of a screening tool, weekly consultation calls, and information on referring for treatment. The outcome of this pilot was that 71% of children screened had a trauma history and were referred for trauma specific treatment. The plan is to move forward to increase trauma awareness within ND DHS system of care to ensure all youth served have adequate screening and treatment.
	d. PATH (therapeutic foster care) staff and foster parents have received the Trauma Training through TCTY so they can address trauma issues with the children and youth they serve.	d. PATH will ensure ongoing trauma training for new staff and foster parents joining their agency.
7. Psychotropic medications for children in the foster care system will be monitored, protocols will be written, and a state plan will be developed and disseminated.	a. A workgroup with representation from CFS Division, Medical Services Division (MS), and Children’s Mental Health Division (CMHSA) will be convened.	a. Representative from the three Divisions attended the national convening on the topic, <i>Because Minds Matter Summit</i> , in August 2012 to gain further insight on the development of protocols concerning psychotropic medications and begin work on the state plan. The workgroup continues to take part in webinars on this topic organized and presented by the Children’s Bureau.
	b. Data will be gathered and analyzed.	b. Data has been gathered and analyzed surrounding the use of psychotropic medications among all foster children in ND comparing their use of psychotropic medications to non-foster children in ND. This data was also compared to national averages. Another data draw has been requested which has expanded the number of categories of psychotropic drugs that will be compared. The data will be stratified into a number of categories for purposes of comparison to determine prevalence, patterns, and areas of concern as a next step in the analysis. These include: type/category of drug, number/category of drug(s) prescribed to each recipient, provider prescribing the drug(s), prescribing provider’s specialty, number of drug recipients by county & number/types of drugs prescribed, age of child prescribed medications, and demographic information.
	c. The ND Administrative Code surrounding the consent and usage of psychotropic medications in residential facilities (PRTFs and RCCFs) will be reviewed and revised as necessary.	c. The ND Administrative Code has been reviewed and revised for residential facilities. The CFS Division is following the protocol for changing the ND Administrative Code. Revised rules will be implemented upon completion of this protocol.
	d. Protocols are written and disseminated to state and tribal child welfare providers.	d. Informational resources provided by the CB continue to be utilized in taking steps toward the formulation of specific protocols. Policy, training ideas, and consent forms have been gathered from other states to assist in North Dakota’s development of protocols and monitoring methods. Information that is gathered and the protocols developed are important steps in identifying patterns through which overuse

		or misuse can be proactively addressed.
	e. Training to the field will be provided.	e. The workgroup is considering options for training to the field surrounding awareness and treatment of trauma among youth in ways other than usage of psychotropic drugs including: "Trauma 101" training, Trauma Informed Child Welfare Certification training, create a series of online trauma courses to promote and sustain a trauma focused system of care, a session at the annual CFS Conference concerning how to increase the safe use of psychotropic medications.

**I. DISASTER PLAN**

The North Dakota Disaster Plan for foster families, foster/adopt families and children under the custody of a North Dakota public agency was revised in March 2009. The Disaster Plan ensures the safety, permanency and well-being of North Dakota's foster youth. Please refer to [ATTACHMENT C](#) to view the Disaster Plan.

**2013 Update:** North Dakota was prepared for the possibility of flooding by periodically reminding county social service and regional office workers about the protocol used in the event that foster parents would need to evacuate their home. An email was sent statewide providing the link to the Disaster Plan as well as an informational PDF that discusses preparing and responding to children concerning disasters. The flood did not occur so none of our family foster families were displaced.

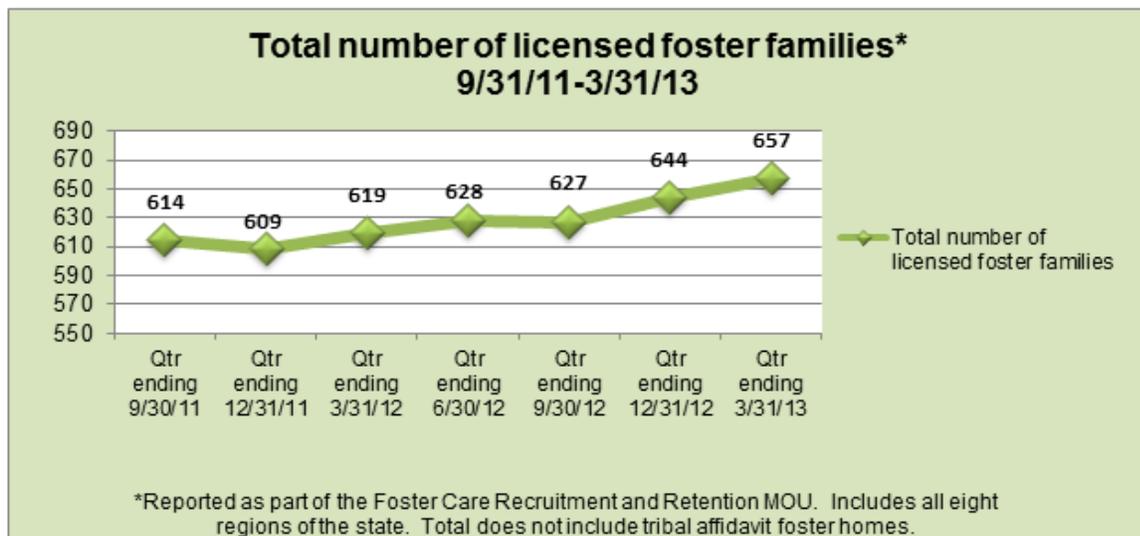
The Disaster Plan was updated to include the protocol for informing the North Dakota Court System of a change in address related to the evacuation of a foster youth. A master list of all displaced foster children and their location, compiled by the Foster Care Administer, will be sent to the Juvenile Court Director located in the region the disaster has occurred.

**J. FOSTER AND ADOPTIVE PARENT RECRUITMENT**

**2013 UPDATE:**

**Foster and Adoptive Parents Recruitment and Retention Efforts:**

Statistics as of 3/31/13 are noted on the following graph. These totals do not include tribal affidavit foster homes.



## Statewide Recruitment & Retention Task Force

The Statewide Recruitment & Retention Task Force met in August, 2012. Representation at the meeting included individuals from seven of the regional coalitions, AASK, Children & Family Services Training Center, PATH, foster parents and two tribes. This meeting was devoted to developing the following Statewide Recruitment and Retention Plan:

### FOSTER CARE & ADOPTION RECRUITMENT & RETENTION

#### STATE PLAN

**Goal 1: North Dakota Department of Human Services will provide funding statewide to support regional foster/adoption coalitions' recruitment and retention activities.**

**Strategy:**

1. NDDHS will develop a statewide recruitment and retention plan which will incorporate regional coalition plans.
  - a. A statewide recruitment and retention plan will be developed by August, 2012.
  - b. The statewide plan will be discussed with regional coalitions by August, 2012.
  - c. The statewide plan will incorporate regional plans in the 2013-15 biennium.
2. NDDHS will fund regional coalitions pursuant to an approved plan and Memorandum of Understanding.
  - a. A funding announcement will be sent to each regional coalition by July 1, 2013.
  - b. A request for funding, which includes a regional plan that addresses both general and targeted recruitment activities, will be submitted to NDDHS within 6 months of the funding announcement.
  - c. Proposals will be evaluated and funding will be offered based upon an approved regional plan within 30 days of receipt of the proposal.

**Outcome:**

1. Recruitment and retention activities related to foster care and adoption are financially supported by the state.

**Goal 2: North Dakota will increase the number of families that are willing to foster or adopt children who are in the state foster care system through general and targeted recruitment.**

**Strategy:**

1. Increase public awareness and educate the community on the need and benefits of providing foster care or adopting.
  - a. Join Foster Care Recruitment and Retention Task Force goals with local community agencies to provide information at any area wide events.
  - b. Create and disseminate foster care and adoption information and needs through mass media communication, social networking sites, or any other information delivery systems.
2. Target a portion of regional coalition funding specifically to recruit families for identified child populations.
  - a. Analyze data to identify specific child populations.
  - b. Develop specific recruitment strategies to meet the identified need.

**Outcomes:**

1. Children who are placed in foster care can remain within their home community.
2. Sibling groups can remain together while placed in foster care or adopted.
3. Resource homes are available to foster or adopt older youth or children with special needs.
4. Resource families represent the racial, cultural and ethnic characteristics of the regions foster and adopt population.

**Goal 3: North Dakota will retain the current number of families that are willing to provide foster care to children in the state foster care system.**

**Strategy:**

1. Foster parents will be provided with training, support and recognition.
  - a. Develop strategies to retain resource families based on the reasons that families choose to no longer provide foster care or adopt.

**Outcome: Foster parents will not terminate their foster care license due to the licensing agency's lack of support, insufficient training opportunities, or feeling of inadequacy.**

The Foster Care & Adoption Recruitment and Retention budget for the 2013-15 biennium was approved at the same level as the 2011-13 biennium. A notice of funding opportunities will be sent to the eight regional coalitions in mid-June. The amount available to each region was determined based on the approximate population of children by region and budget usage from the last biennium. Regional coalitions will be required to submit a "Request for Funding" which will outline both general and targeted recruitment activities as well as planned retention strategies. Regional data will be used to determine their needs and resources which will identify their targeted recruitment area.

**NEW in 2013:** Funding has been including in the UND Children and Family Services Training Center's contract to employ a part-time Foster/Adoptive home Recruitment and Retention specialist. This position will provide consultation to regional recruitment and retention coalitions; train recruitment and specialist across North Dakota; develop agendas for state-wide coalition meetings; research and report on best practice methods of recruitment and retention.

**K. MONTHLY CASEWORKER VISITS**

The North Dakota Foster Care Manual Chapter 624-05 was amended in May 2009 to reflect that monthly face to face case worker visits with all foster youth are required. It also notes that the majority of those visits must occur in the youth's primary residence. Each of the eight regions in the state has submitted a plan outlining how each of the counties within the regions is going to meet this requirement. These plans will be monitored and updated by the Regional Supervisors.

**2013 UPDATE:** The monthly "Foster Care Case Load Visitation Report" is once again being produced and disseminated to the field through the FRAME/COGNOS system by the state office on at least a quarterly basis. Individual agencies have access to these reports within FRAME/COGNOS at any given time if they want to check the status of case worker

visitations more frequently. There continues to be an ability to look at visitation statistics from an individual county/child specific level and not just from a state or regional level.

A “Foster Care Placement Report” has been created and is available within the FRAME/COGNOS system. The ability to run this “real time” report, gives all users the ability to determine where all foster youth are placed at any given time and collaborate more easily to ensure that monthly visitation are taking place for youth in foster care placement. This applies to youth placed at any level of care, both in state and out of state.

**✚ Outline for Achievement:**

- North Dakota will continue to provide on-going training for Regional Supervisors, County Supervisors, County Directors, the Division of Juvenile Services, Tribal and front line staff, emphasizing that all children in foster care must be visited every month primarily in their place of residence. The primary place of residence will include residential child care facilities, family care, therapeutic care, psychiatric care, residential treatment centers and the home of the parent/legal guardian of the child. Additionally, this will include all children placed out of state in a foster care setting. The visitation requirement will be specifically addressed with the foster care case workers in the Child Welfare Certification Program and through various educational conferences.

**2013 UPDATE:** Continued conversations and trainings have occurred with Regional Supervisors, county supervisors, county directors, tribes, and DJS surrounding the requirements and goals relating to monthly case worker visitation of all foster youth. These requirements and goals have also been addressed in various conferences and within the Child Welfare Certification Program. Statistics surrounding case worker visitation continue to be disseminated at these meetings. Approved allowances for collaborative visitations and techniques to ensure visitation are also discussed. There has been continued reinforcement that the content of the monthly visitation must address the safety, well-being and permanence of the youth in care, and that the content of these conversations must be documented in the FRAME system. The change in the way that the face to face visitations are calculated has also been relayed to the field. This change of “giving credit” for all completed visitations, and not excluding a case from the sample if a visit was missed has improved North Dakota’s over all compliance. The field has also been made aware that that standard of monthly visitation will increase to 95% for FFY 2014.

- By October 1, 2011, 90% of the children in foster care will be visited by the case workers on a monthly basis each and every full month they are in care, and the majority of those visits will occur in the residence of the child.
- In order to meet the 90% caseworker monthly visitation requirement, progressive goals have been established with increased compliance being divided evenly between FFYs 2009-2011. The goals are as follows: FFY 2009=39%, FFY 2010=65% and FFY 2011-90%.

**2013 UPDATE:** The goal for case worker visitation for FFY 2012 remained at 90% (i.e. the expectation was that 90% of youth in care would be seen each and every full month they were in care). As noted in the following chart as of April 30, 2013, 87% of youth in care were seen each and every full month that they were in care, with the majority of those

visits (79%) occurring in the youth’s primary place of residence. North Dakota did submit data for the complete 2012 fiscal year by December 15, 2012 as required. The result of that report for the time frame of 10-1-11 through 9-30-12 showed that 91% of all youth in foster care were seen each and every full month they were in care, with 81% of those visits taking place in the youth’s primary residence. North Dakota will continue to strive to ensure that all caseworker visitations are accurately recorded.

<b>REPORTING PERIOD 5/1/12- 4/30/13 TOTAL FOR ALL AGENCIES</b>		
CASE COUNT	1,682	
MONTHS IN FOSTER CARE	12,597	
VISIT MONTHS	10,968	
IN HOME VISIT MONTHS	8,670	
VISIT MONTHS CASE COUNT	10,968/12,597	87%
VISITS IN HOME MONTHS	8,670/10,968	79%
LEGEND		
<ul style="list-style-type: none"> <li>• CASE COUNT = total number of cases in care at least one full calendar month</li> <li>• MONTHS IN FOSTER CARE = number of full calendar months in care for cases included in the CASE COUNT</li> <li>• VISIT MONTHS = total number of months in which a visit occurred (subset of the MONTHS IN FOSTER CARE)</li> <li>• PERCENT = ratio of VISIT MONTHS CASE COUNT to the CASE COUNT</li> <li>• VISITS IN HOME MONTHS = total number of months in which an in-home visit occurred, out of the cases included in the VISIT MONTHS CASE COUNT</li> <li>• PERCENT = ratio of VISITS IN HOME MONTHS to the VISIT MONTHS</li> </ul>		

**2013 UPDATE – MONTHLY CASE WORKER VISITATION FORMULA GRANTS:** Monthly case worker visitation formula grants were, and are utilized to help agencies purchase laptop computers for their case workers. It is felt that enabling the workers to have a portable means to conduct and document the content of their case visitations will both save them time, and improve the quality of the visit/documentation. Some of the grant monies were/are utilized to help support the University of North Dakota Children and Family Services Training Center (UND CFSTC). Specifically, the required four week Child Welfare Certification program continues to focus on case worker training surrounding assessment and decision making concerning the safety, permanence and well-being of foster youth.

Continued use of the formula grants for this type of equipment and training in the next reporting period is likely. It is felt that providing this equipment and training will help to recruit, more thoroughly train and prepare case workers. Hopefully this will lead to increased retention of well trained and effective case workers.

#### L. QUALITY ASSURANCE SYSTEM

Evaluation, Technical Assistance, and Quality Assurance is accomplished through the CFS Division using a number of processes as detailed below. These processes will include state office personnel, Regional Supervisors (our programmatic supervisors in the field), county supervisors, county directors, and front-line staff. The CFS Division's QA plan is integrated and cross-walked between program, process and activity.

- ✚ Annual case file reviews are completed on CPS cases in every county by Regional Supervisors. Regional Supervisors use a standardized form to review cases based on compliance with law, policy and best practice standards; at the completion of the review the findings are made available to administrators and supervisors in the county agency and to the state office.

**2013 UPDATE: Regional Supervisors have continued quality assurance case reviews during this reporting period and provide a report of the review results to the CPS Program Administrator.**

- ✚ The CFS Division plans to continue the local CFSR process with the latest federal instrument. The cadre of reviewers comes from the ranks of peers, supervisory and administrative staff, experienced and retired staff, and partners from the court sector. Review findings will be used to inform statewide trends, address local practice issues, and build a training and TA agenda for the state.

**2013 UPDATE: From April 2012-March 2013 the CFS Division reviewed 71 cases, with 25% being in the largest metropolitan area (Cass County). In six regions the Division held "Case File Reviews" (i.e. case record review plus interviews with case managers/supervisors); and in the two remaining regions the Division held "Full Case Reviews" (i.e. case record review plus case manager interviews, client/family interviews, other service agency partner interviews, and eight Stakeholder meetings).**

In each of the regional CFSR's, the reviewers evaluated randomly drawn cases using the entire CFSR instrument (v. July 2008). Specific attention was directed to the ratings for items 4, 17, 18, 19, and 20 as these are the items being tracked per the results of the 2008 Federal CFSR. North Dakota reports outcomes quarterly to the Children's Bureau. Due to several winter storms causing postponements of two regional CFSRs, the "ND CFSR Annual Report" is not complete at the time of this writing. The regional CFSR schedule for April 2013-March 2014 is included as [ATTACHMENT D](#).

- ✚ The new Program Improvement Plan themes are included as part of the 2010-2014 CFS Plan. The 4 themes distilled from the findings of the federal review are: 1) Building On the Wraparound Practice Model; 2) Safety Planning; 3) Caseworker Contact & Quality Services for

Children & Their Families; and 4) Engaging Child Welfare Partners in System Change. The cross-cutting theme which is overarching for all four themes is the “Supervisor’s Role in Quality Services”. Planning for the PIP has been inclusive of CFS administrators, field staff, county workers, county directors, other child welfare partners, tribes, county commissioners, and state legislators.

**2013 UPDATE:** In the past year, North Dakota negotiated a one year PIP extension due to unprecedented environmental challenges that significantly impacted the state’s ability to complete one of the strategies and to meet the measures of improvement on the CFSR outcomes. The PIP extension period ends June 30, 2013 at which time the remaining strategy will be complete. The state will continue to report quarterly progress on data outcomes through September 30, 2014.

- ✚ The FRAME system has been designed to expedite the review process for the CFSR and also for random case selections for review. FRAME will also provide additional data to assist with the state’s QA process by providing data to identify trends, allowing data to be viewed and used between programs, and to assist with tracking and monitoring the state’s performance on federal data measures.

**2013 UPDATE:** The use of FRAME to access information in case reviews continues to be an effective resource in the state’s QA process.

- ✚ The CFS Division will use InfoLink software to monitor federal data measures based on AFCARS data. This software has the ability to compare data trends across time and place (for counties, regions, units, etc.). Training in the use of this data tool and availability of this data tool will be rolled out to the counties and regional staff and integrated into the CFSR local review process. Developers of this innovative software will integrate NCANDS data into the software package. When this function is available, this software will give us a comprehensive view of current trends (and past trend lines) within our child welfare system and give us an immediate read on comparisons with federal data standards.

**2013 UPDATE:** As reported in the 2011 APSR, InfoLink is no longer on track as a viable software tool based on the issues encountered in the development of FRAME reports in the Cognos environment. The CFS Division and ITS Division had a demonstration in May 2013 on the Results Oriented Management (ROM) software available through the University of Kansas. Efforts are underway to explore the acquisition of this type of software to enhance the state’s ability to access timely data.

- ✚ QA case reviews and specially requested case staffing are available at the request of county agencies or personnel, parents/relatives, county administrators, or Regional Supervisors. The content and/or process of these staffing or reviews are usually case-specific and often negotiated between the parties involved. At times, other stakeholders or partners may be brought into the process to participate in the review or staffing.
- ✚ Finally, because Regional Supervisors participate in/facilitate the Child and Family Team meetings, they serve in the capacity as an in-time QA reviewer when plans are built, and to address the needs of the child, parent and relative, foster/adopt parent in the team planning process.

## NEW in 2013: ASSESSMENT OF STATE'S CURRENT QA/CQI SYSTEM

The Informational Memorandum (IM) issued by the Administration for Children and Families on August 27, 2012 provided the state with information to establish and maintain a Continuous Quality Improvement (CQI) system. During this same time period, the CFS Division underwent reorganization and a new “Child Welfare Infrastructure Administrator” position was created. This position would assist the Division Director in the further evaluation and development of the state’s CQI system. This position was filled in December 2012.

Five essential components to a functioning CQI system were identified in the aforementioned IM. The CFS Division has begun the assessment of how North Dakota’s system achieves each of the five components. An overview of the state’s current system is found in the Quality Assurance section above. A brief summary on how the state meets each of the five components is included below:

**Fundamental Administrative Structure:** There is a statewide approach to QA applied through all regions. At the county level, supervisors have a role in reviewing casework and case files to ensure compliance and positive outcomes. Regional Supervisors, as described earlier, conduct case reviews of child protection assessments and report findings back to the worker and the CPS Administrator. Furthermore, the ND CFSR process is well established and applied consistently through all counties and regions in the state. There is an approved training process for all case reviewers and a guidebook is available for each reviewer. North Dakota’s CQI structure at the present time is strongly rooted with a solid CFSR process.

**Quality Data collection:** Quantitative data is largely collected through the state’s information systems, FRAME and CCWIPS. Data related to demographics and outcomes for each of the program area can be accessed through these systems. Qualitative data is collected largely through the state CFSR process of case reviews, stakeholder interviews, and focus groups. Reliance on survey information is mostly utilized through the CHAFEE program in relation to the NYTD survey. The Department of Human Services will also conduct regional focus groups or surveys as a method of gaining information on how services are being provided and gaps in services. The CFS Division has not fully developed a list of the qualitative and quantitative data utilized in a formal manner, yet reliance on available data is increasing. In the upcoming year, the CFS Division will gather this information and use the information gathered to aid further assessment of the state’s CQI program.

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

The CFS Division monitors existing federal requirements and guidelines and will pursue changes to FRAME to assist with federal reporting requirements. NCANDS data has been submitted in a timely fashion. Any irregularities or areas for which the state is unable to report are clearly identified and the state works with the Children's Bureau to address any questions. NYTD reporting submissions have been in compliance and timely. North Dakota is preparing for a NYTD review to be held in July 2013, which will provide an opportunity to gain insight into the strengths and challenges of the state's process for NYTD compliance.

An area of greatest challenge for the state becomes evident with the AFCARS reporting process. The state entered into an AFCARS Improvement Plan in 2003 and improvements continue. Complications in part have come from the changes in the FRAME and CCWIPS systems. Enhancements and modifications were completed and applied to the 2013A submission. However, through this process it was decided that changes to the Legacy system would not produce the desired results and a complete re-write of the reporting program was needed. Efforts are underway. A specific deadline is currently being negotiated with the Children's Bureau, yet it is anticipated the process should be completed no later than the 2014A submission.

The CFS Division, along with internal partners, developed workgroups to manage the state's reporting needs for NCANDS, AFCARS, and NYTD. A workgroup made up of the state's Information Technology Department (ITD), Information Technology Services (ITS), Decision Support Services (DSS), and program managers comprise the key members of the group. Groups meet throughout the year to review the state's reporting process, review the quality of data and coordinate efforts to improve areas where challenges are found. Prior to each submission, the reports are run and reviewed. Any data quality issues that can be fixed are addressed with the field and corrections. Areas which indicate a data quality issue in which policy or programming must be altered are discussed and workgroup members coordinate plans to remedy the identified problem.

The FRAME system became the system of record in late 2009. During the implementation phase, several challenges with the system were identified and a group has been working on system improvements since that time. The CFS Division meets with ITS, ITD, and DSS representatives through "FRAME Strategy Meetings" to address and prioritize the work orders. Opportunities to discuss the approach to training users and maintenance of the user manual are also discussed at these meetings. This is another avenue the state is using to address needs relative to quality data collection.

Finally, the CFS Division utilizes information gained through the many standing committees (Regional Supervisors, County Directors, County Supervisors, Court Improvement Project, Statewide Recruitment & Retention Task Force etc.) to monitor the state's achievements in relation to the systemic factors of the federal CFSR. Additionally, needs relative to training, the array of services available, recruitment and retention needs, etc. are monitored through the state's CFSR process and the input described above. The CFS Division anticipates that through a more thorough assessment of the state's CQI process modifications which is anticipated in the upcoming years, improvements will enhance the state's strengths in this area.

**Method for conducting ongoing case reviews:** This is one of the strongest areas for North Dakota. There is an established, ongoing case review component that includes reading case files, and interviewing parties involved in the case. The universe of cases includes children who are/were recently in foster care and children statewide who are/were served in their own homes. The universe includes children in ND's juvenile justice system that are in foster care. Upon further clarification of the universe sample, North Dakota began reviewing a Tribal IV-E foster care case for each of the four tribes. Three tribes have had cases reviewed through June 2013 and the fourth tribe is scheduled for a review in November 2013. One area of concern noted by all parties is that of the smaller sample size. For some counties and tribes, one case is often pulled. The CFS Division understands this concern yet is limited by the staffing and funding resources that would be needed to increase the sampling size.

**Analysis and Dissemination of Quality Data:** Results of the case reviews are shared locally, regionally, and statewide. The CFS Division has made available the administrative data to organizations such as Casey Family Programs and Kids Count to assist in analyzing and understanding the state's data. Improvements have been achieved in the state's FRAME system, allowing users at the local level to access certain data. Examples of reports available to the all users of the FRAME system includes reports such as the Worker/Child Visitation report for foster care and in-home cases, pending CPS assessments, Foster Care Placement Location by Worker or Provider report, Foster Care Placement Report, a report on children placed with unlicensed relatives and the reasons for not being licensed, and a Foster Care ICWA report. Supervisors, County Directors, and Regional Supervisors also have access to various CPS payment reports. Challenges remain, however, in the state's ability to have timely access to data which can help inform policy and practice outcomes. Challenges have ranged from ensuring the data was entered correctly, to identifying problems with the replication of data between the two systems, to having limited staff resources to manage the multiple demands. The workgroups described in the quality data section are often called upon to assist with data quality issues. The CFS Division is committed to sharing all available reports and data with the various stakeholders as will be described below.

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

Services Team, the Child Fatality Review Panel, and the ND Youth Leadership Board. Feedback from all these sources is critical as the Division seeks program and service enhancements throughout the state.

An example of how feedback and analysis of the outcomes data can lead to systems improvement can be found in a recent project in the Grand Forks region. Following the 2008 federal CFSR, a Program Improvement Plan (PIP) was developed and finalized 2010. The PIP included the following goal: “Court proceedings promote timely achievement of permanency for children.” The strategy that followed began with identifying a location to engage in a deeper analysis of the legal process to achieve timely permanency, develop an approach which could be replicated across the state and disseminate the findings. The Grand Forks region was identified as the region to complete this work. The region was identified through community and stakeholder input during statewide CFSR’s and outcome data gleaned during these processes, along with a reputation for collaborative working relationships.

Representatives from the State Attorney’s office, Grand Forks County Social Services, and the Northeast District Juvenile Court met on a monthly basis to review all pending termination of parental rights case. As a result of the combined efforts, the time from TPR filing to final order dropped to an average of 53 days between 6/13/12 – 12/31/12 as compared to an average of 161 days between 1/1/12 – 6/12/12.

This group viewed the findings very positively and offered the following recommendations for further advancement of the goal for timely permanence for children served in the child welfare system in North Dakota:

- Supported recommendations submitted to the Juvenile Policy Board of the Supreme Court to establish time standards for TPR cases: initial hearing held within 30 days of petition filing, trial held within 90-120 days from initial hearing, and the final disposition to be completed within 30 days of the trial date.
- Increased education opportunities for State Attorneys and Judges on matters related to child welfare. Efforts by the states’ Court Improvement Project will continue to address opportunities for judges. A recommendation was made to offer a presentation to the annual State Attorney’s conference which would focus on child welfare matters.
- Disseminate findings of this project to a wide array of stakeholders: Court Improvement Project, ND States Attorney Association, Juvenile District Courts, ND Association of Counties, North Dakota Association of County Social Service Directors (NDACSSD), DHS Regional Supervisor’s, Child Welfare County Supervisor’s Committee of the NDACSSD.
- The monthly meeting approach which offers an opportunity for strong communication and accountability is a model encouraged for all jurisdictions in North Dakota.
- Continued support and reminders from the Judges that termination of parental rights matters are a priority. Reminders for scheduling clerks that TPR hearings are a priority is encouraged.

- Utilizing data available through the Odyssey system to monitor timelines and process is also encouraged. Such data could track trends in the system and offer insight into stages of the process which could be changed in order to produce desired outcomes.

The efforts of this project will continue through the current year while the results are being disseminated and other jurisdictions across the state have the opportunity to assess and revise procedures. The CFS Division will continue to partner with the Court Improvement Project and Supreme Court.

Information to assist the state with a more comprehensive assessment of our CQI system was gathered through the NRCOI CQI System Assessment Approach webinar conducted by Peter Watson on April 11, 2013. As a result of the approach presented, the CFS Division has initiated conversations on conducting a similar assessment. The timing of this desired statewide CQI assessment has yet been determined. There are parallel discussions occurring regarding the planning needs for the next 5-year Children and Family Services plan. It is anticipated that a comprehensive assessment of the state's CQI system will be one of the goals identified in the next plan.

The CFS Division has not yet been decided if training or technical assistance would be needed from the CB resources or other partners.

#### **M. MANAGEMENT INFORMATION SYSTEM**

FRAME, a web-based application created to capture case management activities along with better data collection, was implemented in November 2009. The application has been set up to use drop down boxes in areas where we will be using the information for reports, data collection and possible longitudinal studies to better follow children through the child welfare system to see how their history affects their adulthood. We can capture data for the NCANDS and AFCARS reports out of FRAME allowing us to complete more elements of both reports and provide better data. The information from FRAME will be transferred to Cognos, which is the data warehouse for FRAME. From this application, North Dakota will be able to create reports in a variety of ways using the various fields from FRAME.

**2013 UPDATE:** FRAME continues as the state's management information system for Child Welfare and Children's Mental Health. The Comprehensive Child Welfare Information Program System (CCWIPS) operates within FRAME keeping the payments process, foster home licensing and adoption information. The CPS index registry is also integrated into the FRAME application. The CFS Management Team, Information Technology Services Division (ITS-DHS), Decision Support Services (DSS-DHS), and Information Technology Department (ITD) continue to meet regularly to discuss the statuses of various "fixes" and enhancements to the application.

**N. CAPTA**

**2013 UPDATE:** The Child Abuse Prevention and Treatment Act (CAPTA) report is submitted as a separate document.

**O. LICENSING WAIVERS**

The North Dakota Administrative Code (NDAC) 75-03-14 outlines family foster home licensing standards. CFS has drafted changes to this rule, which included the licensing waiver standards.

**2013 UPDATE:** The following changes were made to our CCWIPS system, effective December 1, 2010, to capture the number of relatives licensed whereby a waiver was granted (CCWIPS contains our provider licensing information).

1. Licensed relative? Yes/No
2. Waiver granted? Yes/No
3. List the licensing standard that is being waived?

Changes were made to FRAME (automated child welfare system) effective December 1, 2010, to gather information about foster youth who are placed in an unlicensed relative family foster home. A drop down box was added to the system to capture reasons why the relative is not licensed. The drop down box contains the following reasons:

1. Cannot meet the safety standards
2. Financially able to care for the child
3. Kinship care program
4. Other
5. Short-term placement
6. Training

If “Other” is chosen, a short description is required. A comments section is available if more detail is needed.

If a waiver is granted, the foster care license is specific to the relative foster child. Other unrelated foster children cannot be placed in this foster home that received the waiver.

Regional Supervisors of County Social Service Boards have the decision-making authority for all requested waivers and will provide the oversight for each waiver that is granted. The State Foster Care Administrator is available to assist Regional Supervisors, as needed, in making this determination.

The following numbers and percentages were taken on March 31, 2013 from the 2013A AFCARS report for the 213 children reported to be residing with relative providers:

- ✚ Number & percentage of children placed in licensed relative foster family homes:
  - **61 children (28.5%) were placed in licensed, relative foster family homes.**
- ✚ Number & percentage placed in unlicensed relative foster family homes:
  - **152 children (71.5%) were placed in unlicensed relative foster family homes.**

- ✚ Frequency of waivers:
  - **During this reporting period no waivers of non-safety related licensing standards were requested.**
  
- ✚ Types of non-safety licensing standards waived:
  - **N/A for this reporting period.**
  
- ✚ Assessment of how these waivers have affected children, including their safety, permanency and well-being:
  - **Waiving non-safety related licensing standards has increased the number of licensed family foster care providers. Foster youth are able to remain with family members with whom they already have established connections.**
  
- ✚ Reasons why relative homes may not be licensed despite authority to waive non-safety standards:
  - **Families are apprehensive of the home study outcome.**
  - **Relatives do not need financial assistance.**
  - **Families are reluctant to begin the home study process due to the amount of time it takes to complete the foster care home study.**
  - **Families are unwilling to take time off work to complete the PRIDE training.**
  - **Families apply for TANF benefits or are supported through the Foster Care Kinship Care Program.**
  - **It is anticipated that the youth will only be in foster care for a short period of time.**
  
- ✚ Actions the state plans to take, or is considering, to increase the percentage of relative fosters family homes:;
  - **Licensing agencies are encouraged to provide additional information to families regarding foster home licensure, positively portraying the benefits to the family, as well as fully explaining the agency's ability to waive non-safety related standards. Conversations continue to take place with regional, county and tribal personnel about waivers of non-safety related standards.**
  
- ✚ Suggestions the State has for administrative actions to increase licensed relative care.
  - **Disseminate updated policy and NDAC 75-03-14 when revised. This will further reinforce this option to the licensing agencies and further simplify the process for relatives to become licensed family foster homes.**

## **P. GRANT OPPORTUNITIES**

- ✚ **Family Connection Discretionary Grant:** As part of the ND DHS response to the CFSR review, the department is partnering with the Village Family Service Center to respond to the funding opportunity entitled Family Connection Discretionary Grants (grant number HHS-2009-ACF-AC&F-CF-0078). The Department of Human Services and the Village Family Service Center partnered together in 2006 to bring Family Group Decision Making to North Dakota through a grant funded by the Bush Foundation.

In responding to the federal RFP, we hope to enhance the FGDM program in three pilot sites (Cass, Ramsey, and Burleigh counties). We hope to present the model called Family Team Decision Making (FTDM) to the Child Protection units in these three pilot sites. Our ultimate goal is to give “front-end” service to kids and families within 72 hours after a child has been placed in foster care. We hope that our outcomes will show safety, permanency and well-being for children by reducing the risk of children being placed in out-of-home care through exploring connections through the family/kinship program.

**2013 UPDATE: FGDM is now offered statewide through state general funds, Title IV-B, and Casey Family Programs dollars. FTDM is offered as a pilot in three sites – Burleigh/Morton and Cass, and Grand Forks counties and is funded through state general funds and Casey Family Programs contract dollars.**

**At the time of this writing the CFS Division has no upcoming grant opportunities.**

## **Q. CFCIP/ETV**

This section offers an overview of the Chafee Foster Care Independence Program (CFCIP) and the Education Training Voucher program (ETV) for FFY 2011 as well as plans to meet the seven purposes of CFCIP and the ETV services for FFY 2012.

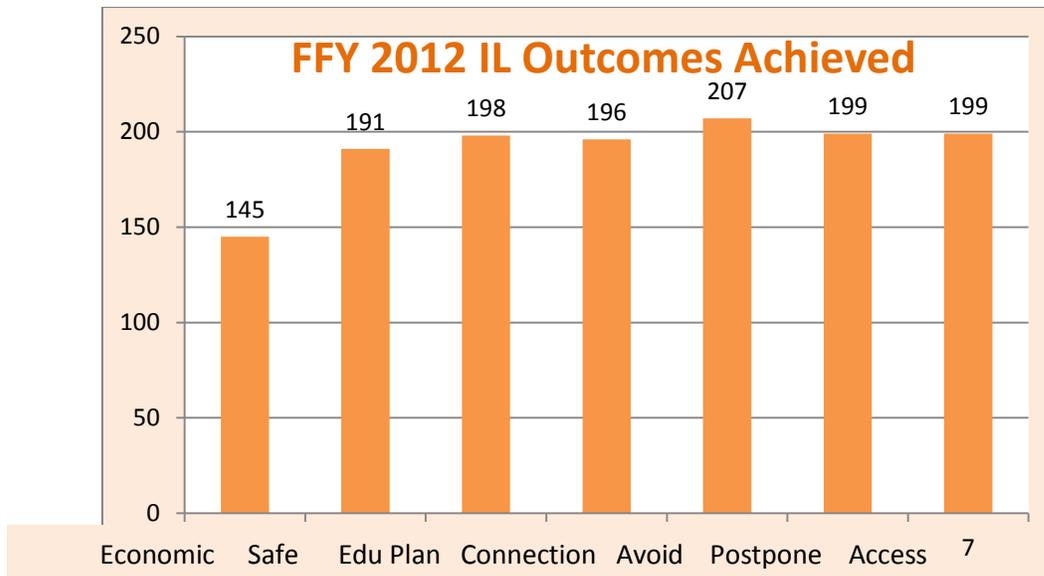
### **General Overview**

The North Dakota Department of Human Services, Child & Family Service Division administers the Chafee Foster Care Independence Program grant and supervises the Regional CFCIP and ETV Programs across the state.

North Dakota’s overall goal continues to be that every young adult who lived in foster care as a teenager will meet the following outcomes by age 21:

1. All youth leaving the foster care system shall have sufficient economic resources to meet their daily needs.
2. All youth leaving the foster care system shall have a safe and stable place to live.
3. All youth leaving the foster care system shall attain academic or vocational/educational goals that are in keeping with the youth’s abilities and interests.
4. All youth leaving the foster care system shall have a sense of connectedness to persons and community.
5. All youth leaving the foster care system shall avoid illegal/high risk behaviors.
6. All youth leaving the foster care system shall postpone parenthood until financially established and emotionally mature.
7. All youth leaving the foster care system shall have access to physical and mental health services.

**2013 UPDATE: North Dakota Children and Family Services Division created a ND Chafee Assessment in January 2011 to assist youth participants in the development of their individualized independent living plans. 213 assessments were completed October 1, 2011 – September 30, 2012 with youth participant’s ages 17 and greater. Outcome results may be viewed on the following graph:**



**CFCIP Assessment outcome results indicated that 68% (145) of youth felt they have sufficient economic resources available, 90% (191) felt they have a safe and stable place to live, 93% (198) have an achievable education plan in place, 92% (196) have permanent connection in the community, 97% (207) felt they have avoided illegal or high risk behaviors, 93% (199) have postponed parenthood, while 93% (199) felt they have the knowledge and skills to access physical and mental health services. North Dakota will continue to evaluate these outcomes and assist youth in building skills that will enable them to successfully transition to living independently.**

The “Comprehensive Independent Living Flow Chart” provides an overview of current programming to continue through 2014.

The updated flow chart can be found in [ATTACHMENT D](#).

North Dakota continued serving youth across the state ensuring that all political subdivisions in the eight regions and 53 counties were served by the CFCIP, including tribal youth and youth in custody of the Division of Juvenile Services. In North Dakota, all youth who are at least 14 years of age, are not yet 21 years of age, and who are or were in foster care after the age of 14 are eligible for components of CFCIP. In addition, all youth in foster care, age 16 and older, are required to have their independent living needs assessed.

**2013 UPDATE:** PATH ND is the CFCIP statewide provider; the Chafee IL Coordinators are located in six of the eight regional PATH offices statewide. Chafee Independent Living Coordinators deliver service to eligible current foster care youth and Foster Care Alumni statewide. The CFCIP does not have a case load standard at this time; caseloads for the Chafee IL Coordinators range from 25 to 45 open youth at one time.

The current CFCIP Regional Offices are as follows:

REGION		LOCATION OF IL COORDINATOR/S
I	NORTHWEST- Williston	Dickinson PATH office
II	NORTH CENTRAL – Minot	Minot PATH office
III	LAKE REGION – Devils Lake	Belcourt PATH Office (Turtle Mt Reservation)
IV	NORTHEAST - Grand Forks	Grand Forks PATH office
V	SOUTHEAST – Fargo	Fargo PATH office
VI	SOUTH CENTRAL – Jamestown	Fargo PATH office
VII	WEST CENTRAL – Bismarck	Bismarck PATH office
VIII	BADLANDS – Dickinson	Dickinson PATH office

**2013 UPDATE:** PATH ND provides statewide programming, follows federal and state CFCIP policy, completes an annual Quality Assurance Review conducted by the state Chafee IL Administrator, and enters all relevant CFCIP data into FRAME (ND data management system). The FRAME data management system has experienced many growing pains; however CFCIP is now retrieving more realistic and comprehensive data. Below is data reflecting CFCIP participation in ND comparing annual timeframes.

⊕ = This data was not recorded during the reporting timeframe. Further analysis and data collection began in FFY 2011.

FFY Totals	CFCIP Youth	Current Foster Care Youth	Foster Care Alumni	Priority 1 Youth Served	Priority 2 Youth Served	Native Americans Served	Notes
5/1/12 – 4/30/13	408	245	163	285	123	99	Current data to date
FFY 2012 Total	415	263	152	309	106	108	New Data to reflect full FFY
FFY 2011 Total	371	178	193	303	68	80	
FFY 2010 Totals	403	226	177	⊕	⊕	102	
FFY 2009 Totals	394	218	176	⊕	⊕	90	
FFY 2008 Totals	440	275	165	⊕	⊕	134	

✚ Planned Activities to Design, Conduct and/or Strengthen the 7 Purpose Areas

**Purpose #1: Help youth (who are likely to remain in foster care until 18 years of age) transition to self-sufficiency.**

**2013 UPDATE:** Chafee IL Coordinators attended Child and Family Team Meetings and worked collaboratively to support youth in becoming self-sufficient young adults. Chafee IL Coordinators worked closely with community partners and made referrals to needed services. Community partners include: Job Service, Job Corps, Adult Learning Centers, Housing Authorities, Community Action, Vocational Rehabilitation Services, Salvation Army, Youthworks and many other private organizations who provide resources for young adults. The state office collaborated with partners to create a Chafee Q & A document (dispensed November 2012) to assist partnering agencies in understanding the program and eligibility.

Chafee IL Coordinators reported engaging in these activities to help youth transition to self-sufficiency:

- Assisted custodial case managers in completing a foster care youth discharge checklist. This checklist was used to assist youth aging out of care to retrieve the necessary education, resources, and personal identification information (ID, SSN, Birth Certificate, etc) prior to their discharge.
- Assisted youth in developing an Independent Living plan. These are created on an individual basis and specific to the needs of the youth.
- Provided ongoing education through individual, group, and scheduled monthly youth meetings; encouraging group socialization and learning activities which included:
  - Career Exploration, Job Training, Safety and Drug Prevention, Physical and Mental Health Access, Safe Sex and Pregnancy Prevention programming, Hands on Banking Program, Dinner Club, Higher Education Exploration Day, Individual Development Accounts (IDA) savings program, FAFSA preparation, “Get Your Plate in Shape” nutrition classes, Money Smart workshops, tax preparation, substance abuse prevention, internet safety, etc.
- Foster Parent Involvement: PATH invited foster parents to monthly Share and Support meetings that addressed various topics throughout the year. CFCIP presented relevant information during those meetings. Also, Ready Set Fly booklets were provided to foster families to help identify topics to engage the youth in while living in their home.
- Residential Child Care Facilities: In ND, many facilities have a designated independent living skills building opportunity for residents. Chafee IL has partnered to offer various topics to residential youth and invited the youth to monthly meetings. One topic encouraged by Chafee IL Coordinators and used by facilities was the FDIC Financial Education Curriculum modules.

**FFY 2014 Plans:** Collaborate with partners to identify new programs and training opportunities for youth: Increase prevention information on pregnancy and parenthood, begin using the “I Can Do It!” a micropedia of living on your own training, etc. Create

and provide monthly tips for foster parents and placement providers on independent living skills. Continue to distribute the CFCIP brochure to encourage program participation. Continue to promote the use of the ND Youth Website.

**Purpose #2: Help youth receive the education, training, and services necessary to obtain employment.**

**2013 UPDATE:** Chafee IL Coordinators helped youth receive the education, training and services to obtain employment:

- Assisted youth in gathering information necessary for gaining employment (i.e. Social Security cards, birth certificates and driver's licenses).
- Assisted youth in presenting themselves appropriately when retrieving and submitting job applications.
- Provided youth access to various employment resources, interviewing tips, job fairs, Job Corps contacts, etc.
- Reminded youth that if a two or four year school is not their preference one could choose to attend the Hair Academy or other vocational school as an educational option.
- Adjusted to the ND Oil Boom. The Oil Boom has been an appealing trade for Foster Care Alumni; if an individual receives their welding certificate or trucking driver's license they are in a good position to get a well-paying job at 19 or 20 years old. Youth may have family or friends encouraging them to go work in the oil fields and not go to school to avoid the housing and finance barriers.

Chafee IL Coordinators maintained contact and relationships with representatives of regional Work Investment Act (WIA) programs offered through North Dakota Job Service and the TRIO program availability on college campuses. Chafee IL Coordinators continued to provide awareness of the ND Youth website <http://www.nd.gov/ndyouth/>, which offered direct access to youth interested in employment and education.

**FFY 2014 Plans:** Continue to offer direct access and assistance to youth interested in employment opportunities.

**Purpose #3: To help youth prepare for and enter post-secondary training and educational institutions.**

**2013 UPDATE:** The Chafee IL Coordinators helped youth in prepare for and enter post-secondary education and training:

- Assisted youth in developing their IL educational plan. Plans included communication with secondary educational counselors and support persons, planning for successful completion of secondary education/training, required applications, tests, and financial aid forms, as well as planning for support during post-secondary educational attendance including needs for housing, child care and tutoring.
- Maintained partnerships with local Job Corps, coordinated class schedules as needed with the public schools.
- Helped youth search for scholarships and grants.

- Offered one-on-one assistance to those who complete their high school diploma and/or GED to become eligible to engage in post-secondary education opportunities.
- Assisted youth in preparing for the ACT/SAT exams, applying for college, attending college tours, completing their FAFSA, and applying for the ETV.
- Assisted youth in completing their FAFSA (financial aid), paying ACT/SAT college application fees, and enrollment in TRIO; a college program that motivates and supports students from disadvantaged backgrounds to pursue a college degree.

The state Chafee IL Administrator and Chafee IL Coordinators:

- Discussed and expanded the ETV eligibility in ND. ND had a policy allowing youth to apply only if he/she met all federal eligibility + was in foster care for 12 months or more. The policy changed in October 2012 allowing a youth to apply regardless of their length of time in foster care with preference given to those in care for 12 months or greater.
- Provided awareness about the Education and Training Voucher (ETV) Program to foster care youth and statewide professionals assisting foster youth three times per year before the deadline to apply expired.
- Continued to work with the CFS UND Training Center who provided information about the ETV Program and CFCIP services into the Child Welfare Certification Training.

**FFY 2014 Plans:** Continue to market to all professionals working with eligible foster care youth the application deadlines and requirements for the ETV.

**Purpose #4:** To provide personal and emotional support to youth aging out of foster care, through mentors and the promotion of interactions with dedicated adults.

**2013 UPDATE:** Chafee IL Coordinators, case managers, foster parents, treatment staff, and other team members provided individualized support to youth to assist in the transition to self-sufficiency and independent living. A combined effort of Chafee IL Coordinators and custodial case managers work with youth to ensure emotional supports are in place for young people.

- Maintained professional relationships and supportive services from Chafee IL Coordinators and case management.
- Identified and documented five individuals on the Discharge Checklist; a family member, friend, church member, professional mentors who is matched up by an agency, etc.
- Provided information and training on healthy relationships.
- Offered youth monthly meetings for peer support.
- Provided a “Keep in Touch” book, which offered advice on staying connected to others.

The ND Youth Leadership Board meetings provided a supportive environment for youth to share information as well as develop peer mentoring relationships. The ND Youth Leadership Board transition from 24 to five members was successful and the

application process occurred again in May 2013 with seven youth being appointed to the Board effective June 1, 2013.

**FFY 2014 Plans:** Continue to seek mentoring opportunities in communities for all CFCIP youth. Continue to provide supportive professional contact with youth through face-to-face, email, and texting when appropriate.

**Purpose #5:** To provide financial, housing, counseling, employment, education, and other appropriate support and services to former foster care recipients between 18 and 21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for, and then making the transition from adolescence to adulthood.

**2013 UPDATE:** The CFCIP's primary focus is on foster youth age 16 and older identified as "likely to age out of care," as well as those who have aged out of care and become Foster Care Alumni. Based on priority, the Chafee IL Coordinators offered in-depth assistance to the neediest youth. The Chafee IL Coordinators provided information that emphasized where to get emotional, financial, vocational and educational support ongoing with a goal to maintain self-sufficiency and less dependence on community supports and services. Youth were provided:

- The Renting 101 guide book
- Coaching and role playing good communication skills and phone etiquette when working with professionals.
- Access to CFCIP flex funds and various community resources such as bus tickets, drivers test assistance, mentoring services, housing voucher applications, cell phone minutes or calling cards to assist in getting employment calls, etc.
- Invitations to CFCIP local meetings providing education and training opportunities for youth to gain additional knowledge and resources for self-sufficiency.
- A congratulations gift of \$50 gift card to youth who graduate from high school or receive their GED.

Affordable housing in North Dakota has become a significant dilemma for all residents. The housing crisis is an even greater concern for youth aging out of foster care to prepare for and for Foster Care Alumni to maintain. The ND Oil Boom (mostly Dickinson, Williston, Minot, and Bismarck areas) has led individuals and families to not afford the \$1000 to \$1300 monthly rent for a one bedroom or efficiency apartment; while a two or three bedroom apartment could cost \$1500 to \$2500 per month. Chafee IL Coordinators worked with local Housing Authorities to write Housing and Urban Development Family Unification Vouchers (FUP) grants. The FUP grants have been accepted and in use in Grand Forks and Fargo, but are needed statewide. Another layer to this problem is if the Housing Vouchers are provided to an individual, there are a limited number of adequate housing units available for individuals and families to rent. Fortunately, campers and tents have become fewer and fewer over the last 18 months as Minot and Dickinson have built a number of hotels; majority are "extended stay

units” available for rent. This has helped, but does not offer stability that a young person needs to maintain sufficiency, permanency, or ongoing safety.

**FFY 2014 Plans:** Continue to be involved in statewide conversations regarding affordable housing. Continue providing assessments to identify areas of need for youth participants and providing resource development in relation to the seven CFCIP North Dakota Outcomes.

**Purpose #6:** To make available vouchers for education and training, including post-secondary training and education, to youth who have aged out of foster care.

**2013 UPDATES:** The North Dakota Educational and Training Voucher (ETV) Program provided financial assistance to help eligible youth make the transition to self-sufficiency and receive the education, training and services necessary to obtain employment. ND CFCIP expanded the ETV eligibility to encourage additional youth applicants. ND had a policy allowing youth to apply only if he/she met all federal eligibility + was in foster care for 12 months or greater. The policy changed in October 2012 allowing a youth to apply regardless of their length of time in foster care with preference given to those in care for 12 months or greater.

Chafee IL Coordinators assisted youth in completing necessary ETV paperwork and financial aid requests. The Chafee IL Administrator received all applications and determined eligibility for ETV awards. Each youth awarded an ETV was issued an award letter and the ETV check was sent to their educational institution for the identified semester needs.

CFCIP programming provided awareness to statewide professionals and youth about the Education and Training Voucher (ETV) Program eligibility and application deadlines throughout the year.

**FFY 2014 Plans:** Continue to provide ongoing awareness of the ETV programming to eligible youth and partnering agencies. Continue to market eligibility and application deadlines for the ETV.

**Purpose #7:** To provide services to youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption.

**2013 UPDATE:** CFCIP is designed to serve youth who are current or former foster care youth. CFCIP remains available to the former foster youth in a kinship guardianship arrangement or who have been adopted on the same basis. The Chafee IL Administrator collaborates with partnering agencies to ensure they have the eligibility guidelines for youth to receive CFCIP and ETV programming if adopted or in kinship guardianship. The Chafee IL Administrator continues membership and attendance at the Foster Care Adoption Task Force to collaboratively address youth-related issues including kinship guardianship, adoption, ETV, and CFCIP goals. The Chafee IL

Administrator forwards information to the CFS Adoption Manager to forward correspondence to adoption workers regarding CFCIP and ETV.

**FFY 2014 Plans:** Increase connection with the ND AASK Adoption program as a regular and direct contact from the Chafee IL Administrator to ensure youth are provided assistance to and awareness of CFCIP benefits.

 General Reporting Requirements Related to the CFCIP Seven Purposes

- **2013 UPDATE on Coordinated Services:** ND Children and Family Services Division collaborated with PATH ND as the contracted provider to deliver CFCIP services statewide. ND DHS, PATH ND, Chafee IL Coordinators collaborate with public agencies (county, tribal, and DJS) and many private/nonprofit agencies including Job Service, Housing Authorities, Human Service Agencies, School Districts, Vocational Rehabilitation Services, Career Options, Community Action, and more. Partnering with various community organizations is the largest strength of the program. After community connections have been made, Chafee IL Coordinators teach youth how to navigate the many program systems effectively. This form of teaching “how to” rather than “doing it for” sends a consistent message and gets better results. Our ND CFCIP goal and mission is to ensure that youth involved in the foster care system receive services and support which will enable them to successfully transition to living independently. In addition, the Regional Human Service Centers across ND have the Transition to Independence (TIP) program specific to transitioned aged youth. This professional partnership continues to grow as TIP can serve young people until the age of 24; there is a natural progression and transition that occurs from CFCIP to TIP prior to turning age 21.
- **2013 UPDATE on Training:** CFCIP engages in quarterly meetings in Bismarck, ND for Chafee IL Coordinators, ND Youth Leadership Board members, and most recently invited the IL Coordinator from the Unaccompanied Refugee Minor Program (URM) to join in the quarterly meetings. The URM IL Coordinator is funded separately, but does try to mirror the requirements of CFCIP when applicable for the URM program. The URM IL program has found the quarterly meetings helpful in providing quality services to URM foster youth in ND. Each quarter, training topics are organized in conjunction with the Chafee IL Administrator and the CFS UND Training Center training representative. This last year quarterly training topics included: Vocational Rehabilitation state overview, Medical Assistance state overview, CFCIP policy refresher and updates, etc.

This past year, specific training opportunities included:

- Wrap Around Certification Training (Various dates) - For any new CFCIP Chafee IL Coordinator in conjunction with child welfare workers statewide.
- ND Indian Child Welfare Act Conference in Mandan ND (February 2012) – the Chafee IL Administrator and one Chafee IL Coordinator attended to gain insight on cultural services and partnering efforts.

- **PATHWAYS National Conference in New Orleans LA (June 2012) – ND CFCIP had five participants; Chafee IL Administrator and four Chafee IL Coordinators attend. A number of independent living topics were presented during those three days.**
  - **Youth Transition Conference in Bismarck (June 2012) – The Chafee IL Administrator assisted in planning and working at the conference; one Chafee IL Coordinator and five foster youth attend. The conference trained on leadership, self-advocacy, career exploration and team building.**
  - **Children’s Justice Symposium (July 2012) – CFCIP was asked to organize youth participation for a conference Education Panel Discussion. This panel was completed as a general session at the conference where three youth discussed their educational experiences while in foster care; specific to the strengths and challenges of being in the system. The youth then updated the field on where they were in achieving their education plan.**
  - **NYTD Federal Meeting in Washington DC (August 2012) – ND was allowed to invite one youth member to join in the national meeting along with three members of the ND NYTD Team. There were various elements of training for the youth and professionals specific to NYTD implementation. This was the first time our ND Youth Representative had ever flown on a plane and her first visit to Washington, DC; she was extremely appreciative of the opportunity.**
  - **Daniel Memorial National Conference in Atlanta GA (September 2012) – ND CFCIP had three Chafee IL Coordinators attend receiving a variety of independent living topic presentations during those three days.**
  - **Foster Parent Annual Training (October 2012) – The Chafee IL Administrator was asked to present for a 90 minute break out session for this conference on CFCIP, what IL activities foster parents can engage in with young people in their home, how to help young people become self-sufficient, as well as educate the foster parents on the 18+ Continued Care program in North Dakota.**
  - **The CFS Training Center (ongoing) – was provided Child Welfare Certification training to social workers; one segment of this training is Chafee Independent Living and the importance of youth transitioning to independence.**
  - **PRIDE training (ongoing) – was offered to foster parents providing information about preparing youth for transition and how to build independent living skills while the youth is in the foster home or facility.**
  - **Youth Training (ongoing) – was offered locally for the youth on various topics related to independent living skill building.**
- **2013 UPDATE on Youth Involvement in State Agency Efforts: North Dakota continues to replicate the Federal CFSR Process as part of a Program Improvement Plan. Youth Stakeholder meetings were conducted during full CFSR Reviews in ND; two locations per year. Youth Stakeholder meetings were held in Devils Lake and Bismarck. Youth participants had the opportunity to share with state staff their perspective of what has gone well in foster care and what areas could be improved.**

The North Dakota Federation of Families Mental Health Transitions Conference requested Youth Leaders to help organize and run the two day summer conference; two CFCIP youth participated as 2012 Conference Youth Leaders.

The National Youth in Transition Database federal meeting requested the participation of one youth representative from each state. ND proudly invited one Foster Care Alumni / ND Youth Leadership Board member who represented North Dakota very well and engaged with her peers to support NYTD programming.

The ND Youth Leadership Board assisted the five members in building leadership skills, engaging in mentoring roles, conference panels, local and state efforts to better the child welfare system by creating a ND Foster Youth Handbook and to further assist in the National Youth in Transitions Database federal effort.

- **2013 UPDATE on Medical Assistance:** The Medicaid Expansion discussions are still under development in ND as federal guidance is awaited in this area. North Dakota will be working to establish policy which will allow for the implementation of MA services delivery for eligible youth to age 26. In the last year, a lower number than expected of Foster Care Alumni accessed Medicaid, even when they were eligible for the program. Youth have indicated that they do not understand the re-determination process, which complicates their ability to reapply for Medical Assistance once they age out of foster care. The Chafee IL Coordinators have continued to work to help youth understand the Medicaid redetermination process and provide information and assistance to access this program ongoing.
- **2013 UPDATE on Native American Youth:** North Dakota provided information to ensure Native American youth had fair and equitable access to all CFCIP services across the state. North Dakota partnered with Standing Rock Sioux Tribe (Fort Yates), Spirit Lake (Devils Lake) Turtle Mountain Band of Chippewa (Belcourt), and Three Affiliated Tribes (New Town) to encourage CFCIP participation. Staff turnover within the Tribes have offered delays in referrals, however CFCIP has made an ongoing effort to provide updated contact information and referral procedures for CFCIP. Region III (Belcourt and Devils Lake) have the most significant involvement with Tribal Social Services and has done a nice job of merging and molding a successful partnership to offer services to all eligible youth in North Dakota.

Chafee IL Coordinators worked with Native American youth to ensure that enrollment in their designated Tribe was complete, and assisted youth to complete the Tribal Certificate with enrollment number applications, receive a tribal enrollment card and Certificate of Degree of Indian Blood (CDIB). Native American youth were also provided contact information for their Tribal office, local social service offices, as well as the Higher Education office of his/her Tribe. Chafee IL Coordinators have offered culturally sensitive Independent Living programming to all CFCIP participants.

The Chafee IL Administrator continues to work with Chafee IL Coordinators to ensure that CFCIP and ETV benefits are made available to Native American youth (Title IV-E or 638 funded youth) on the same basis as non-native foster care youth in North Dakota.

- **2013 UPDATE on Trust Fund:** North Dakota does not have a trust fund nor are there plans to initiate a trust fund.
- **2013 UPDATE on National Youth in Transition Database (NYTD):** North Dakota implemented the NYTD requirements on October 1, 2010 capturing data relevant to the served and baseline populations. A ND NYTD Work Group was developed with representative professionals from Information & Technology, Decision Support Services, Children and Family Services, and Fiscal. The Chafee IL Administrator is the ND NYTD Lead and does oversee the NYTD efforts statewide.

The served population statistics were collected by county social service foster care case managers, Division of Juveniles Service case managers, Chafee IL Coordinators, and Partnership Care Coordinators to gain the most insight about independent living services received by youth already established within our FRAME (data management) application.

The baseline population surveys were very successful in North Dakota. From October 1, 2010 to September 30, 2011 (97% surveyed). The Chafee IL Administrator worked directly with case managers providing a survey packet, instructions, a \$10 gift card for youth incentive upon completion, and reminder emails along the way. FFY 2013 began the effort to locate and track those baseline youth as follow-up survey youth. The tracking of young people has been the largest challenge for North Dakota; continued brainstorming and planning continues to best support the tracking of eligible survey youth.

During FFY 2012, no outcomes survey collection was completed per federal regulations. All federal data provided was on served population independent living service delivery.

North Dakota was asked if we would participate in a Federal NYTD Review, this will occur in July 2013. The Chafee IL Administrator will continue to work with the NYTD Work Group to identify the best and most successful ways to comply with NYTD federal regulations and complete the tracking of survey youth.

#### Education and Training Voucher Program

In compliance with P.L. 110-351, The North Dakota Education and Training Voucher (ETV) Program provided post-secondary education financial assistance to help eligible youth make the transition to self-sufficiency and receive the education necessary to obtain employment.

**NEW: Youth meeting the following criteria will be considered for an Education and Training Voucher Award.**

1. Youth who “aged out of foster care”, were discharged on or after their 18<sup>th</sup> birthday, or continue in 18+ Continued Care past their 18<sup>th</sup> birthday, and who have not reached their 21<sup>st</sup> birthday at the time of application.
2. Youth who were adopted or entered kinship guardianship from foster care after age 16, but have not reached their 21<sup>st</sup> birthday.
3. Youth participating in the ETV Program on their 21<sup>st</sup> birthday can remain eligible until they turn age 23, as long as they are enrolled and making satisfactory

- progress toward completing their post-secondary education or training program.
4. Youth who are United States Citizens or qualified non-citizens.
  5. Youth who are, or will be enrolled into a program at an accredited or pre-accredited college, university, technical or vocational school.
  6. Youth who agree to be an active participant in the Chafee Independent Living Program while they are receiving ETV funding.
  7. ETV award preference will be given to youth who were in foster care for twelve months or greater.

The ETV Program is administered by ND Department of Human Services Child and Family Services directly supervised by the State Independent Living Administrator. The IL Administrator continues to review ETV applications assuring recipients are in compliance with Chafee ETV Federal conditions and then determines the amount of the ETV awards. The ETV award amounts are determined through final review and audit of the application including the youth's Federal financial aid resources, the educational institution's Cost of Attendance, along with other documents required for complete application submission. The State IL Administrator ensures that the Federal assistance does not exceed the total cost of attendance as well as avoids duplication of Federal benefits. Youth are notified through a written letter from the state IL Administrator of their ETV award and the ETV voucher amount is sent directly to their educational institution.

**2013 UPDATE:** Eligible North Dakota youth are educated on the process and given one-on-one assistance in completing college applications, financial aid, and the ETV application. Chafee IL Coordinators spend a great deal of time reviewing with the youth their education plan and providing resources to assist young people in making the choice to pursue post-secondary education or training opportunities. ETV awards in the past two years have been declining; a reflection of the data indicates that three applicants would have received the ETV award, but chose to withdraw from school before the ETV award was issued to the school. Two applicants submitted paperwork for the ETV, but were not eligible as financial aid/scholarships covered the cost of attendance, while three additional youth on academic probation were unable to reapply until they went to school one semester (without the ETV) to increase their grade point average. In addition to those eight applicants, an assumption would be the transition of Chafee IL Coordinators led to a decrease in applicants. Chafee IL Coordinators have experienced turnover in three regions (III, V, VII); it takes time for professionals in the role to learn the program incentives and to build a rapport with young people. CFCIP has identified that without a rapport, clients do not actively embrace all CFCIP opportunities.

There are concerns regarding maximum issuance of the ETV awards. North Dakota has not utilized all of the federal monies for ETV awards in the past. In an effort to spend all allocated funds, North Dakota expanded the ETV eligibility to encourage additional youth applicants. ND had a policy allowing youth to apply only if he/she met all federal eligibility and was in foster care for 12 months or greater. The policy changed in October 2012 allowing a youth to apply regardless of their length of time in foster care with preference given to those in care for 12 months or greater. This policy change did provide the opportunity to apply for the ETV to three new applicants.

Data Review	2007	2008	2009	2010	2011	2012	2013
<b>ETV's Awarded</b>	37	55	54	58	59	51	35
<b>Individuals Served</b>	31	37	38	42	45	41	28
<b>New Recipients</b>	22	21	20	25	21	21	19
<b>*URM Youth ETVs</b>				1	6	12	5

*\*URM means Unaccompanied Refugee Minor youth who are not paid for out of ND ETV funds, but who follow the same application procedures for academic financial support through the URM budget.*

**R. STATISTICAL AND SUPPORTING INFORMATION**

**✚ Timely Home Studies Reporting and Data**

Since the enactment of The Safe and Timely Interstate Placement of Foster Children Act of 2006 (P.L. 109-239), the CFS Division has made every effort to follow the guidelines related to the federal law. The ICPC Deputy Compact Administrators for Foster Care and Adoption instituted the guidelines for timely home studies whether North Dakota was the receiving or sending state.

Soon after the public law was enacted, it became evident that the CFS Division's child welfare data system did not have the capability to track the frequency of requests for an extension to complete timely home studies, why the request for an extension was needed, and how the extension resulted in the resolution of the issues that made it necessary to request the extension.

The CFS Division had been focusing on building a more "user friendly" Child Welfare Data System (FRAME) and began that process around the time that P.L. 109-239 was enacted. This process involved the time and commitment of several staff from the CFS Division as well as our IT business consultants and took precedence over developing a data system specific to The Safe and Timely Interstate Placement of Foster Children Act. At this time the CFS Division is in the final stages of development of FRAME and is in the process of rolling it out statewide and training all users. One of the capabilities is that FRAME has been built so that enhancement can be added to get other types of data not already built into the system.

In late June 2009 the CFS Division Director, along with the ICPC Deputy Compact Administrators for foster care and adoption, and ITS business analysts met to assess the feasibility of adding an enhancement to FRAME regarding timely home studies reporting. This enhancement would enable ICPC staff to generate reports to Congress that are required by law. The IT unit will move forward and develop an interim access database to begin to gather the required data until the enhancement to FRAME can be completed. The goal is to have the enhancement completed by June 30, 2010.

**2013 UPDATE:** The CFS Division completed the process of building a more "user friendly" child welfare data system (FRAME). There is a continued commitment from the CFS Division, as well as our ITS business consultants, to add an enhancement to FRAME to obtain information specific to the Safe and Timely Interstate placement of Foster Children Act. Until this enhancement can be added, an interim excel database to

gather information was developed and is being used by the ICPC Deputy Compact Administrators for foster care and adoption.

**✚ Juvenile Justice Transfers**

A point in time case count was requested from the Division of Juvenile Services that reflects the number of youth under the care of the state child protection system who were transferred into the custody of the state juvenile justice system.

**2013 UPDATE:** Following is the point in time DJS case count taken on June 1, 2013. Overall DJS cases are slightly higher from June 1, 2012 at which time they had a case count of 186. The case transfers across the state have also increased from a year ago, at which time the data showed 24 cases transferred from Social Services to DJS (16.5%).

DJS OFFICE	6/1/2013 CASE COUNT	# TRANSFERRED FROM SOCIAL SERVICES TO DJS	% TRANSFERRED FROM SOCIAL SERVICES TO DJS
Williston	7	4	57%
Minot	20	7	35%
Devils Lake	27	4	14.8%
Grand Forks	20	3	15%
Fargo	40	1	2.5%
Jamestown	12	2	16%
Bismarck	60	10	16%
Dickinson	8	1	12.5%
<b>TOTAL</b>	<b>194</b>	<b>32</b>	<b>Average: 16.5%</b>
West	95	22	23%
East	99	10	10%

**S. PAYMENT LIMITATIONS**

**2013 UPDATE:** Please refer to the CFS-101 documents on pages XXXXX.

In reference to the CFS-101, Part I, during FFY 2005 and FFY 2013 North Dakota did not spend any Title IV-B, Subpart 1 funds in child care, foster care maintenance, or adoption assistance payments.

In reference to the CFS-101, Part I, no state funds expended for foster care maintenance payments in FFY 2005 or FFY 2013 were used to match for title IV-B subpart 1 programs.

In reference to the CFS-101, Part II, for FFY 2014 it is projected North Dakota will spend a minimum of 20% of the Title IV-B, Subpart 2 PSSF grant funds in each of the four service categories: prevention and support services (family support), crisis intervention (family preservation), time limited family reunification services, and adoption promotion and support services.

State and local expenditure amounts for the title IV-B, Subpart 2 for FY 2011 for comparison with the State's 1992 base year amount can be found in the Maintenance of Efforts report located on the next page.

**T. MAINTENANCE OF EFFORT**

MAINTENANCE OF EFFORT							
BREAKDOWN OF PROGRAMS INCLUDED IN CHILDREN AND FAMILY SERVICES							
GRANT CATEGORIES FOR 1991-1993 BIENNIUM AND 2013-2015 BIENNIUM							
Cost Center	Program	13-15 Budget	State/Local	Federal	91-93 Budget	State/Local	Federal
<b>OUT-OF-HOME CARE GRANTS</b>							
4135	Independent Living Program	822,971	24,573	798,398	275,535	60,000	215,535
4137	Independent-Educ & Trng Prgm	235,030	0	235,030	450,740	0	450,740
4262	SED Out-Of-Home Care	0	0	0	63,906	44,734	19,172
4263	Foster Care - IV-E	20,988,395	11,143,512	9,844,883	5,073,433	1,212,468	3,860,965
4265	Foster Care - Regular	42,839,173	13,836,297	29,002,876	8,842,319	8,626,279	216,040
4266	Foster Care - Services	1,149,332	586,085	563,247	681,596	681,596	0
4270	Foster Care - Specialized Family	0	0	0	369,206	362,469	6,737
4270	Subsidized Guardianship	710,220	177,555	532,665	0	0	0
4272	Foster Care - Therapeutic	4,955,989	2,442,381	2,513,608	1,442,749	1,416,780	25,969
4273	Foster Care - Shelter Care Services	75,115	75,115	0	163,946	70,000	93,946
4286	Foster Care-Services-IMD	1,787,642	1,621,313	166,329			
4287	Wraparound-TCM for IMD	62,105	54,417	7,688			
		73,625,972	29,961,248	43,664,724	17,363,430	12,474,326	4,889,104
<b>ADOPTION SERVICES GRANTS</b>							
4119	Special Needs Adoption	0	0	0	316,667	105,000	211,667
4268	Subsidized Adoption - FM	18,542,218	9,221,073	9,321,145	564,157	99,189	464,968
4269	Subsidized Adoption - Regular	5,806,291	5,806,291	0	307,485	277,449	30,036
	<b>Total Adoption Services Grants</b>	24,348,509	15,027,364	9,321,145	1,188,309	481,638	706,671
<b>FAMILY SUPPORT SERVICES GRANTS</b>							
4117	Adoption & Unwed Parents - Admin.	0	0	0	70,000	17,753	52,247
4126	Tribal ECC Program	251,448	0	251,448	0	0	0
4134	Wraparound Case Management	2,997,796	675,246	2,322,550	0	0	0
	Dependent Care - DPI				60,000	0	60,000
4282	Juvenile Crisis Intrvtn Prgm	200,000	0	200,000			
4139	Tribal Social Services	873,864	0	873,864	515,658	377,773	137,885
4143	Juvenile Services - Case Management	707,891	0	707,891	200,000	0	200,000
4144	Tribal Permanency Planning	600,000	600,000	0	400,000	25,000	375,000
4149	Quality Improvement	0	0	0	240,375	0	240,375
4150	Crossroads Program	0	0	0	150,000	0	150,000
4153	Refugee Assistance - Social Services	1,244,110	0	1,244,110	0	0	0
4249	Early Childhood	773,081	142,964	630,117	0	0	0
4250	Early Childhood Resource & Referral	5,867,399	3,316,221	2,551,178	0	0	0
4251	Outpatient Counseling	0	0	0	45,460	45,460	0
4254	County Reimb. - Child Abuse Standards	6,889,404	2,141,698	4,747,706	2,530,754	749,074	1,781,680
4255	County Reimb. - Prime Time Day Care	117,100	19,907	97,193	480,529	228,889	251,640
4256	County Reimb. - Parent Aid	1,838,879	501,532	1,337,347	1,387,066	787,066	600,000
4257	Wraparound Targeted Case Management	0	0	0			
	NA Day Treatment	0	0	0	631,490	194,916	436,574
4258	Healthy Families	750,000	750,000	0	0		
4260	Respite Care	12,000	0	12,000	76,230	0	76,230
4267	Foster Care - Training	1,890,392	859,952	1,030,440	0	0	0
4271	Foster Care - Intensive In-Home Services	0	0	0	1,484,828	902,093	582,735
4277	Foster Care - Intensive In-Home Services (Medicaid)	1,184,046	589,773	594,273			
4274	Foster Care Recruitment	165,045	41,295	123,750			
	<b>Total Family Support Services Grants</b>	26,362,455	9,638,588	16,723,867	8,272,390	3,328,024	4,944,366
<b>GRAND TOTAL - GRANTS</b>		<b>124,336,936</b>	<b>54,627,200</b>	<b>69,709,736</b>	<b>26,824,129</b>	<b>16,283,988</b>	<b>10,540,141</b>

**U. ANNUAL BUDGET REQUEST**

Please refer to pages 89-91 for the following documents:

- ✚ CFS-101, Part I: Annual Budget Request for Title IV-B, Subpart 1 & 2 Funds, CAPTA, CFCIP and ETV

- ✚ CFS-101, Part II: Annual Estimated Expenditure Summary of Child and Family Services
- ✚ CFS-101, Part III: Annual Expenditures for Title IV-B, Subpart 1 & 2, CFCIP and ETV for FFY 2010

# North Dakota CFSP Annual Progress & Services Report | 2013

CFS-101, Part I  
 U. S. Department of Health and Human Services  
 Administration for Children and Families

Attachment B  
 OMB Approval #0980-0047  
 Approved through October 31, 2014

**CFS-101, Part I: Annual Budget Request for Title IV-B, Subpart 1 & 2 Funds, CAPTA, CFCIP, and ETV**  
 Fiscal Year 2014, October 1, 2013 through September 30, 2014

<b>1. State or Indian Tribal Organization (ITO): NORTH DAKOTA</b>		<b>2. EIN:45-0309764</b>
<b>3. Address: North Dakota Department of Human Services 600 East Boulevard Avenue 58505-0250</b>		<b>4. Submission:</b> [ X ] New [ ] Revision
<b>5. Total estimated title IV-B Subpart 1, Child Welfare Services (CWS) Funds</b>		471,022
a) Total administration (not to exceed 10% of title IV-B Subpart 1 estimated allotment)		47,102
<b>6. Total estimated title IV-B Subpart 2, Provides Safe and Stable Families (PSSF) Funds. This amount should equal the sum of lines a - f.</b>		467,245
a) Total Family Preservation Services		116,811
b) Total Family Support Services		102,794
c) Total Time-Limited Family Reunification Services		107,466
d) Total Adoption Promotion and Support Services		93,449
e) Total for Other Service Related Activities (e.g. planning)		0
f) Total administration (FOR STATES ONLY; not to exceed 10% of title IV-Bsubpart 2 estimated allotment)		46,725
<b>7. Total estimated Monthly Caseworker Visit (MCV) Funds (FOR STATES ONLY)</b>		29,518
a) Total administration (FOR STATES ONLY; not to exceed 10% of estimated MCV allotment)		2,952
<b>8. Re-allotment of title IV-B subparts 1 &amp; 2 funds for States and Indian Tribal Organizations:</b>		
a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the following programs: CWS \$ _____, PSSF \$ _____, and/or MCV(States only)\$ _____.		
b) If additional funds become available to States and ITOs, specify the amount of additional funds the States or Tribes requesting: CWS \$ _____, PSSF \$ _____, and/or MCV(States only)\$ _____.		
<b>9. Child Abuse Prevention and Treatment Act (CAPTA) State Grant (no State match required): Estimated Amount plus additional allocation, as available. (FOR STATES ONLY)</b>		97,749
<b>10. Estimated Chafee Foster Care Independence Program (CFCIP) funds</b>		500,000
a) Indicate the amount of State's or Tribe's allotment to be spent on room and board for eligible youth (not to exceed 30% of CFCIP allotment)		0
<b>11. Estimated Education and Training Voucher (ETV) funds</b>		119,049
<b>12. Re-allotment of CFCIP and ETV Program Funds:</b>		
a) Indicate the amount of the State's or Tribe's allotment that will not be required to carry out CFCIP Program		\$ _____
b) Indicate the amount of the State's or Tribe's allotment that will not be required to carry out ETV Program		\$ _____
c) If additional funds become available to States or Tribes, specify the amount of additional funds the State or Tribe is requesting for CFCIP Program		\$ _____
d) If additional funds become available to States or Tribes, specify the amount of additional funds the State or Tribe is requesting for ETV Program		\$ _____
<b>13. Certification by State Agency and/or Indian Tribal Organization.</b>		
The State agency or Indian Tribe submits the above estimates and request for funds under title IV-B, subpart 1 and/or 2, of the Social Security Act, CAPTA State Grant, CFCIP and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the Children's Bureau.		
Signature and Title of State/Tribal Agency Official		Signature and Title of Central Office Official
 Sharon Cae Director		

**CFS-101 Part II: Annual Estimated Expenditure Summary of Child and Family Services**

State or Indian Tribal Organization ( ITO) NORTH DAKOTA For FFY OCTOBER 1 ,2013 TO SEPTEMBER 30, 2014

SERVICES/ACTIVITIES	TITLE IV-B			(d)	(e)	(f)	(g)	(h)	(i)		(j)	(k)
	(a) Subpart I- CWS	(b) Subpart II- PSSF	(c) Subpart II- MCV *	CAPTA*	CFCIP	ETV	TITLE IV- E	STATE, LOCAL, & DONATED FUNDS	Individuals	Families	POPULATION TO BE SERVED	GEOG. AREA TO BE SERVED
1.) PREVENTION & SUPPORT SERVICES (FAMILY SUPPORT)	174,024	102,794						89,158	128,793	3,258	Reports of Abuse & Neglect	STATEWIDE/ RESERVATION
2.) PROTECTIVE SERVICES				92,862					3,827	11,054		STATEWIDE
3.) CRISIS INTERVENTION (FAMILY PRESERVATION)	150,626	116,811						128,083		3,241	Crisis/Risk of FC	STATEWIDE/ RESERVATION
4.) TIME-LIMITED FAMILY REUNIFICATION SERVICES		107,466						31,150		210	All Eligible Children	STATEWIDE/ RESERVATION
5.) ADOPTION PROMOTION AND SUPPORT SERVICES		93,449						7,787		62	All Eligible Children	STATEWIDE/ RESERVATION
6.) FOR OTHER SERVICE RELATED ACTIVITIES (e.g. planning)												
7.) FOSTER CARE MAINTENANCE:												
(a) FOSTER FAMILY & RELATIVE FOSTER CARE							2,948,933	4,838,068	633		All Eligible Children	STATEWIDE/ RESERVATION
(b) GROUP/INST CARE							2,155,215	6,306,607	243		All Eligible Children	STATEWIDE
8.) ADOPTION SUBSIDY PMTS.							4,020,171	6,851,621	1,110		All Eligible Children	STATEWIDE
9.) GUARDIANSHIP ASSIST. PMTS.	99,271								45		All Eligible Children	STATEWIDE
10.) INDEPENDENT LIVING SERVICES					500,000			125,000	408		All Eligible Children	STATEWIDE/ RESERVATION
11.) EDUCATION AND TRAINING VOUCHERS						119,049		29,379	51		All Eligible Children	STATEWIDE/ RESERVATION
12.) ADMINISTRATIVE COSTS	47,102	36,445					7,006,983	7,028,758				
13.) STAFF & EXTERNAL PARTNERS TRAINING		10,280		4,887			108,373	37,837				
14.) FOSTER PARENT RECRUITMENT & TRAINING							162,559	54,186				
15.) ADOPTIVE PARENT RECRUITMENT & TRAINING							231,412	77,137				
16.) CHILD CARE RELATED TO EMPLOYMENT/TRAINING												
17.) CASEWORKER RETENTION, RECRUITMENT & TRAINING			29,518					-				
18.) TOTAL	471,022	467,245	29,518	97,749	500,000	119,049	16,633,646	25,604,771				

\* States Only, Indian Tribes are not required to include information on these programs

**CFS-101, PART III: Annual Expenditures for Title IV-B, Subparts 1 and 2, Chafee Foster Care Independence (CFCIP) and Education And Training Voucher (ETV) :  
 Fiscal Year 2011: October 1, 2010 through September 30, 2011**

1. State or Indian Tribal Organization (ITO): NORTH DAKOTA		2. EIN: 45-0309764		3. Address: North Dakota Department of Human Services 600 East Boulevard Avenue Bismarck, ND 58505-0250			
4. Submission: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revision							
Description of Funds	Estimated Expenditures	Actual Expenditures	Number served		Population served	Geographic area served	
			Individuals	Families			
5. Total title IV-B, subpart 1 funds	549,713	513,380					
a) Total Administrative Costs (not to exceed 10% of title IV-B, subpart 1 total allotment)	247,795	39,949					
6. Total title IV-B, subpart 2 funds (This amount should equal the sum of lines a - f.)	493,628	516,617					
a) Family Preservation Services	187,580	371,453					
b) Family Support Services	128,343	36,833					
c) Time-Limited Family Reunification Services	123,407	75,373					
d) Adoption Promotion and Support Services	39,490	23,597					
e) Other Service Related Activities (e.g. planning)	\$	\$					
f) Administrative Costs (FOR STATES: not to exceed 10% of total title IV-B, subpart 2 allotment after October 1, 2007)	14,808	9,361					
7. Total Monthly Caseworker Visit Funds (STATE ONLY)	31,163	31,163					
a) Administrative Costs (not to exceed 10% of MCV allotment)							
8. Total Chafee Foster Care Independence Program (CFCIP) funds	500,000	500,000					
a) Indicate the amount of allotment spent on room and board for eligible youth (not to exceed 30% of CFCIP allotment)	\$	\$					
9. Total Education and Training Voucher (ETV) funds	119,464	62,426					
10. Certification by State Agency or Indian Tribal Organization (ITO). The State agency or ITO agrees that expenditures were made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the Children's Bureau.							
Signature and Title of State/Tribal Agency Official		Date		Signature and Title of Central Office Official		Date	
Sharon Au, Director		6/27/13					

## **V. ASSURANCES**

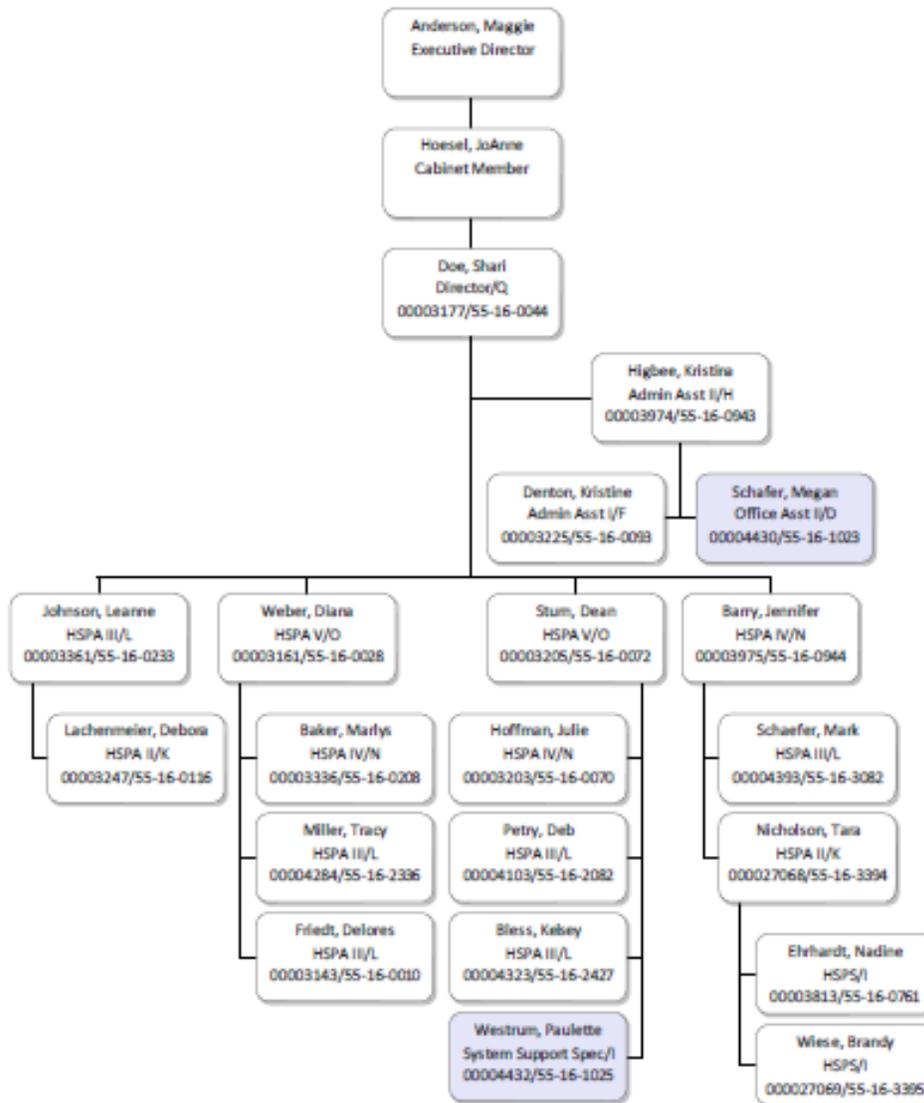
All required Assurances have been signed by the Governor of North Dakota and submitted in prior APSRs.

## **W. ATTACHMENTS**

- ✚ ATTACHMENT A:** CFS Division Organizational Chart (p. 93)
- ✚ ATTACHMENT B:** UND CFSTC Training Plan (pp. 94-101)
- ✚ ATTACHMENT C:** Disaster Plan (pp. 102-111)
- ✚ ATTACHMENT D:** CFSR Review Schedule APR 2013 – MAR 2014 (p.112)
- ✚ ATTACHMENT E:** Annual Reporting of State Education and Training Vouchers Awarded (p.113)
- ✚ ATTACHMENT F:** Comprehensive IL Program Flow Chart (p. 114)

ATTACHMENT A

ND Department of Human Services  
Children & Family Services



Revised 6/6/13

**THE DEPARTMENT OF HUMAN SERVICES  
CHILDREN AND FAMILY SERVICES TRAINING CENTER  
WORK PLAN**

July 1, 2013 - June 30, 2014

The work plan expectations of the Children and Family Services Training Center (CFSTC) are:

All CFSTC activity will relate to the Work Plan. Division and/or CFSTC staff will propose amendments to the work plan with final approval by the Management Team. Quarterly reports on the activity related to each item in the work plan are made by the 15<sup>th</sup> of October, January, April and August.

All the work of every Training Center staff member paid through the Division funds will be directly related to the work plan.

- A. The CFSTC Director will attend field staff meetings of the Children and Family Services (CFS) Division (otherwise referred to in the Work Plan as “Division”).
- B. The CFSTC Director and staff will develop child welfare training connections with other child welfare related state training centers and National Resource Centers.
- C. CFSTC staff will be proactive in recommending to the Division methods, products and materials that will strengthen and improve the training of child welfare staff.
- D. The Division’s approval of staff hired at CFSTC will be required. Division staff may take part in the interviews of prospective staff. For the position of the Director of the CFSTC, the Division shall participate in the interviews.
- E. The selection of any trainer to carry out foster care, child welfare certification training, Independent Living training, Wraparound Recertification or any other training under this work plan shall be a joint decision between the Division and CFSTC.
- F. CFSTC staff will record and retain records on child welfare social workers who participant in trainings facilitated or organized through the Training Center or Division.
- G. The Division (CFS Management Team) will hold a quarterly meeting (in-person or via phone) with CFSTC in October, January, April and June to update and communicate on the progress of the work plan.

**I. CHILD WELFARE CERTIFICATION TRAINING (CWCT)**

Two complete sessions of CWCT will be completed in this contract year using the developed curriculum, unless determined otherwise by the Division and CFSTC.

Each session will include no more than 25 participants, giving priority to county child welfare social service workers and other child welfare workers in the private sector (AASK, PATH, Tribal Social Services). The lodging costs, meal costs and all training costs will be included. The only cost PATH, AASK, Tribes or counties will be asked to provide is travel to the training

site. Reimbursing for any costs to others will be done only with approval from CFS Director or designee. CFSTC will:

- A. Send a prospective attendees list to the CFS Director prior to confirmation of acceptance to the training.
- B. Evaluate the training and the curriculum through trainee evaluations, ongoing staff meetings, and consultation with Division program administrators. Provide a summary of the evaluations to the Division within 45 days after the final unit of each session. Debrief about the Training Session with the Division Management Team upon completion of the evaluation summary.
- C. After each of the two full sessions, provide Division Director the names of social workers who did not complete the certification program due to attendance issues or incomplete assignments. An update of child welfare certification participants, those that have completed and those that are in the process of completing will be included in the quarterly report.
- D. By January 15, 2014, compile the names of all staff that have completed the certification training with the name of the agency where the staff person was working at the time of the certification. Provide the list to the Division's Director.
- E. Adjustments to the training will be made to maintain consistency with any policy adjustments. Adjustments will be documented in the CFSTC quarterly reports and meetings.
- F. CFSTC will review the training curriculum of Week I of Child Welfare Certification with the Child Protective Services Administrator by September 1, 2013 and implement changes by Fall 2014 session.
- G. CFSTC will meet with CFS Staff to plan how to integrate Trauma Informed Practice into Child Welfare Certification. This will be done in partnership with the Administrator for Children's Mental Health by January 1, 2014.
- H. CFSTC will meet with CFS Staff to determine the most efficient way to deliver FRAME training to the field by February 1, 2014.

## II. FOSTER/ADOPTIVE PARENT TRAINING

CFSTC will:

- A. Plan and provide the necessary budgetary support to include materials, trainers, mileage, childcare, food and lodging, and other anticipated costs for foster parent training.
- B. Evaluate the training delivery and the curriculum through trainee evaluations, ongoing staff meetings, and consultation with the Foster Care and Adoption Administrators.

C. Conduct one PRIDE “Train the Trainer”, if needed, and participate in PRIDE curriculum training in selected sites as negotiated with Foster Care and Adoption Administrators.

D. Based on requests from the field and in consultation with CFS, conduct a PRIDE Pre-Service Training session over the Interactive Video Network as requested by foster care licensing agencies and AASK.

E. Provide various training supports to local foster parent training activities in selected sites as negotiated with Foster Care and Adoption Administrators. These activities include:

1. Reimburse foster parents and social workers for attending the PRIDE sessions.
2. Reimburse foster parents for up to twelve hours of annual training for travel, per diem, and childcare expenses.
3. Provide technical assistance regarding training and resources to social workers conducting local foster/adopt parent training.
4. Provide training upon request of regional supervisors, and foster care administrator, on specialized topics to foster parent groups (taking budget constraints into consideration). Build an evaluation component into these training events and submit a summary of the evaluation to the Foster Care Administrator.
5. Seek advice from regional and county staff on foster parent training needs annually.

F. Subcontract with individuals and teams to provide PRIDE training across the state. Teams should have representation of foster care, adoption workers and foster/adopt parents.

G. Serve on the PRIDE National Advisory Committee.

H. Work with the North Dakota Foster/Adopt Parent Association and partners to facilitate an annual joint “foster parent” conference.

I. Coordinate, deliver, and evaluate regional trainings for foster/adopt parents throughout the Work Plan year. Joint planning for the trainings will be facilitated by the Training Center with county social service agencies, PATH of North Dakota and AASK.

Serve as a member of the Recruitment/Retention state task force. Serve as a member of the Foster Care/Adopt Task Force.

L. Maintain formal connections with the National PRIDE CWLA membership. CFS Division work with CFSTC to evaluate and discuss issues that arise. CFS will maintain the membership/use fee for this requirement.

### III. FOSTERING COMMUNICATIONS NEWSLETTERS

CFSTC will write and publish a foster care/adoption newsletter three times during the contract period. The newsletter will be distributed to foster care providers including foster and adoption family homes, residential facilities, public and private human service agencies, county social service offices and regional foster care supervisors in the state.

- A. Write, edit and produce Fostering Communications six times annually, and distribute the newsletter.
- B. Review foster care and adoption literature and various publications for ideas and stories for development and/or reprinting in “Foster Communications”.
- C. Provide newsletter draft copy for Foster Care Administrator or designee’s review and comment prior to publication.
- E. CFSTC will distribute the newsletter electronically.
- F. Explore the possibility of delivering an electronic newsletter geared toward social workers and case management issues related foster care and/or adoption.

### IV. THERAPEUTIC FOSTER CARE

- A. The Foster Care Administrator (or designee), the Director of CFSTC, and the Executive Director of North Dakota PATH (or designee), will meet to review the Therapeutic Foster Care training delivery process and activities by January 1, 2014.
- B. CFSTC will coordinate, deliver and evaluate the Treatment Foster Care training curriculum in partnership with PATH Therapeutic Foster Care providers. Four initial training sessions will be offered during the Work Plan year. The curriculum will be evaluated for the appropriateness of the content by January 1, 2014, with the PATH Education Committee.
- C. CFSTC will implement changes in the Treatment Foster Care curriculum by October 1, 2014.
- D. Deliver five session of the Non-Violent Crisis Intervention Training to new ND PATH Therapeutic Foster Care foster parents.
- F. Reimburse PATH therapeutic foster parents for training expenses as outlined in the CFSTC reimbursement guidelines.
- G. Participate in the PATH Education Committee.

**V. CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP)**

CFSTC will:

- A. Attend CFCIP Quarterly Independent Living meetings and trainings as requested.
- B. With the assistance of Division staff, provide education/training to custodians, foster parents, RTC and RCCF facility staff, etc. as needed.
- C. CFSTC will provide/coordinate training for IL Coordinators at the request of the IL Administrator.

**VII. CHILD CARE LICENSOR TRAINING**

CFSTC will facilitate the delivery of the developed curriculum on licensing Early Childhood Services facilities by assisting with registration and logistics, in consultation with the Administrator of Early Childhood Services, as requested and for no more than two events over the work plan year.

**VIII. RESOURCES LIBRARY**

CFSTC holds a library of resources available for use for training purposes, educational development, and skill building of individuals in, and related to, human service agencies. CFSTC will:

- A. Maintain resources materials and library holdings to lend to human service personnel.
- B. Review, evaluate, and recommend films, videos, and printed materials to the Division program administrators for additions to the resource material library. Any resources purchased with contract funds should first be reviewed with the Division Director.
- C. Maintain online bibliography.

**IX. WRAPAROUND CASE MANAGEMENT PRACTICE MODEL**

CFSTC will assist with the implementation of the Wraparound case management practice for delivery to children and their families. CFSTC will:

- A. Facilitate logistics for one additional week of Wraparound Certification training, annually, if needed (based on registrations).
- B. Review the Wraparound training curriculum with CFSR manager and make changes in curriculum to support policy by January 1, 2014.

**X. GENERAL TRAINING ACTIVITIES & SPECIAL PROJECTS**

In addition to the above-mentioned activities, CFSTC may be involved in other training activities that directly support or compliment these aforementioned activities. For these additional various training activities; each request will be evaluated in accordance with all current activities, contract scope of service, availability of funds and must be approved by the Division Designee prior to implementation.

The following training activities are expectations for CFSTC for this Work Plan period:

- A. Make payment for in-state and out-of-state travel, registration fees and per diem expenses for foster parents, county social workers, regional supervisors and Division staff upon approval of the Division Director.
- B. Serve as a member of the CPS Task Force, which meets at least quarterly during the contract period.
- C. Attend out-of-state and in-state training conferences as requested by the Division Director or Designee.
- D. Serve on other Task Forces and initiatives at the request of the Division Director or Designee.
- E. Serve as a member of the Alliance for Children’s Justice.
- F. Participate in CFSR activities as requested by CFS Director, recognizing there will be negotiations regarding available staff time in order to participate.
- H. Continue developing, with Division staff, electronic methods and options for delivery of child welfare training.
- I. Participate, with CFS program staff, in determining the criteria for Wraparound certification for CPS social workers who completed certification training prior to 2006. Facilitate the certification process for these social workers by assisting to identify those who will need to be certified, identifying potential resources for initial certification and providing technical assistance to complete the initial certification.
- J. Facilitate the youth stakeholder meeting for the regional CFS Reviews throughout the work plan year.
- K. CFSTC staff will participate when requested and when calls are scheduled, via conference phone, in the debriefing of the stakeholder comments.
- L. Continuously update the CFSTC web site for training and resource information.
- M. Conduct up to two PRIDE Mutual Family Assessment Training sessions during the work plan period, if needed. This training will include training on general licensing requirements.
- N. Analyze the use of the Adoption Competency Curriculum for AASK workers in conjunction with AASK Director and the State Adoption Administrator to determine the

areas of duplication between the curriculum and CWCT. CFSTC will provide recommendations for future training structure and deliver by September 1, 2013.

O. Provide ongoing consultation to the county supervisor group on the Peer Mentoring Model (use of Learning Circles in Peer Mentoring).

P. Will work with CFS Division to develop and deliver training on foster parent recruitment and retention. Training will be delivered at the annual statewide Recruitment and Retention Coalition.

Q. Will explore options for pre-service and ongoing training for Kinship Care providers.

R. CFSTC will coordinate an annual training for supervisors, in consultation with CFS and as requested by the County Supervisors group.

S. Deliver up to two Family Assessment Instrument (SSRA) refresher training sessions for partner agencies/child welfare agency as requested by CFS Director.

## **XI. OTHER TRAINING, TASKS, & PROJECTS**

CFSTC will:

A. Notify the CFS Administrator of any request from regional, county, or private agency staff for training on North Dakota child welfare policy and procedures in order to make joint decision on response to request.

B. Schedule and conduct Initial Parent Aide training for new parents aides annually. This training will occur only if there are at least 6 or more individuals needing to receive the training.

C. Provide coordination for an annual CFS Conference or Children's Justice Symposium, along with CFS Division staff.

D. CFSTC staff will meet with the Native American Training Institute twice yearly to facilitate integration of training session/schedules, collaboration and coordination of training activities and resources and to explore opportunities for enhanced collaboration.

E. CFSTC will participate in the "training consortium" established by the ND Supreme Court to deliver multi-disciplinary child welfare training in the state.

F. CFSTC will coordinate a "forensic interviewing" training with the National Children's Advocacy Center. The focus of this training will be determined by communication with the CPS Administrator.

G. Manage, with David Conrad, the Secondary Trauma training and support program for child welfare workers in North Dakota.

H. The Training Center will employ a Foster/Adoptive home Recruitment and Retention specialist who will assist in the following responsibilities:

1. Training recruitment and retention specialists across North Dakota.
2. Assist in developing recruitment and retention materials.
3. Provide consultation to the regional recruitment and retention coalitions in North Dakota.
4. Participate in the State Recruitment and Retention Coalition and work with the CFS Division to develop agendas for the Coalition Meetings.
5. Assist in writing the state recruitment and retention plan.
6. Assist, as requested by CFS, in reviewing regional recruitment and retention plans.

ATTACHMENT C



**DISASTER PLAN**

(Revised May, 2013)

## Background

North Dakota has developed and implemented a Disaster Preparedness Plan to better facilitate services to foster families, foster/adopt families and children under the custody of a North Dakota public agency. Creating a comprehensive and effective plan is of great importance for two reasons. First, North Dakota will be fulfilling federal mandates; second, and most important, it ensures the safety, permanency, and well being of our youth. Natural and home-made disasters come in many forms and may dramatically overwhelm North Dakota's current welfare services service system.

## **Emergency Preparedness**

The North Dakota Plan will include meeting the following criteria:

1. Identify, locate and continue availability of service for children under the custody of a North Dakota public agency who are displaced or adversely affected by a disaster.
2. Respond to new child welfare cases in areas adversely affected by a disaster.
3. Remain in communication with caseworkers and other essential child welfare personnel who are displaced because of the disaster.
4. Preserve essential program records, coordinate services, and share information with other states.

## **Types of Disasters**

1. Total or partial destruction of the North Dakota State Capitol building.
2. A disaster that would impact our outlying facilities or foster homes, such as: floods, tornado's, high winds, power loss, winter and summer storms, to name a few.
3. A disaster that would destroy all or some level of the Comprehensive Child Welfare Information and Payment System (CCWIPS).

## **Disaster Preparedness Guideline**

1. The identification and location process of children and foster or foster/adopt families who may be displaced.
2. Communication protocols for state and local area emergency plans.
3. Training for state, regional, and county professionals.

## **Identification and Location**

Children and Family Services (CFS) has established a system for gathering and providing information on foster families and foster/adopt families. Effective January 2, 2009, all foster parents and foster/adopt parents must outline evacuation plans that consider primary and secondary planning. At the time of licensing and relicensing,

applicants will disclose their disaster/evacuation plan which is made part of the 'licensing file'. A copy of the plan is then forwarded to CFS where the information is input into the "Q" drive at the North Dakota State Capitol. The "Q" drive allows access to any State employee, which includes the regional human service centers. Any individual who has access to the "Q" drive can:

1. Edit information in the database to ensure accuracy and up-to-date information; and
2. Run a query to the database which will readily sort families by
  - a. County
  - b. City
  - c. Name

Foster parents and foster/adopt parents are given an "Emergency North Dakota Foster Care Call In" card at the time of licensure or re-licensure. This card describes who to email or who to call in case of a disaster. The department has established a CFS email address and two designated telephone numbers (one is toll-free) as ways in which to report a disaster. The following message has been placed on the two designated telephone numbers:

*You have reached the Children & Family Services Division of the North Dakota Department of Human Services. If you are a foster parent or foster/adoptive parent that has been displaced as a result of a disaster, please leave your telephone number and current address, as well as the name of the foster child or children that are currently with you. We will contact you as soon as possible.*

If a disaster has occurred in any region of the state, CFS staff will immediately follow up on all voice messages left or emails received. Depending upon the extent of the disaster, CFS staff is prepared to provide weekend staff coverage.

Group and residential child care facilities are also required to have written plans and procedures for meeting disasters and emergencies. Staff members must be informed of these plans and procedures, as well as youth who are placed in these facilities. Procedures shall be reviewed with youth at admission and every two months thereafter, Fire evacuation drills are also performed on a regular basis.

A special topic of discussion during the 2009 facilities' compliance review will be disaster and emergency plans.

The Comprehensive Child Welfare Information and Payment System (CCWIPS) contains placement information on all children in foster care. This system can be accessed by county, region, and state employees. Although there are limits as to what information counties have access to, regional supervisors can view all cases within their regional responsibility. CFS has access to every case entered into CCWIPS. If the State Capitol is experiencing a disaster, this information is also available to the two CCWIPS Helpdesks which are located in Williston and Minot.

**Example:**

If the city of Grand Forks, ND (and/or surrounding areas) were to succumb to a flood, the documentation and location of foster families can be accessed by any other regional office, or by the State Office. Information is available as to the foster parent's primary and secondary evacuation plan, including emergency contact information.

Foster or foster/adopt youth placed in the region can be tracked through CCWIPS. A report can be generated through this system which will outline the placement resource for all children within this county and/or region.

**Communication:**

The CFS director, or designee, will work in tandem with the human service center regional supervisors to develop processes that are specific to each region so as to respond to the disaster utilizing the appropriate services in that particular region/area. Regional and state child welfare offices partner with the following state agencies: Department of Health (utilizing the COOP plan), Department of Agriculture, Department of Public Instruction, Environmental Quality Departments, Department of Justice and the Department of Corrections and Rehabilitation, Disaster and Emergency Services, Military Affairs, Labor and Industry Departments, Department of Commerce, Department of Revenue and Department of Transportation, the Red Cross, Salvation Army, local, state and regional disaster directors, Homeland Security and other private and professional agencies and associations.

No one can predict when and where a disaster may strike. It is even more difficult to plan for every scenario to produce the best possible outcome to get through such tragic events. However, we have a basic flow chart of communication and contacts that may be helpful in the event of a disaster.

1. The regional office is the primary connection between the local social service agencies and the state office. Each regional office has a list of foster youth in their region, as well as emergency procedures/evacuation plans for identified service providers in their region. Regional supervisors in the human service center are the direct connection between the state office and local staff in a disaster situation.

In the event that the human service center is also affected by the disaster, the neighboring regional human service center has agreed to act as a backup. They will provide available services to foster families and/or foster children who have become displaced.

2. The Department of Health will be preparing and sending out press releases regarding the disaster. There is a website available to provide emergency information to foster care providers.
3. Child Protection Services will continue to deliver services through the local agency, with backup support from other North Dakota regions or counties. The established crisis on-call process will remain in place, under the direction of the State Child Protection Administrator.

### **North Dakota Court System**

If a disaster has occurred in any region of North Dakota involving foster children under the jurisdiction of the North Dakota Court System, a protocol between the North Dakota Department of Human Services and the North Dakota Court System has been developed. A master list of all displaced foster children and their location, compiled by the Foster Care Administrator, will be sent to the Juvenile Court Director located in the region the disaster has occurred.

### **Training**

Training for state, local, and county offices includes training the trainer, training on line and specifying a team/individual to train state, county and local offices in disaster preparedness. Training is ongoing and updated when necessary. All CFS staff has access to the Disaster Plan which is posted on the department's website. This information will also be disseminated at the time of a new hire at CFS. CFS will participate with regional offices in mock drills to better prepare for a disaster.

### **Records Preservation**

Permanent archived adoption records are stored either on microfiche (prior to 1990) or in electronic storage. Electronic records are on the state's server system which is backed up daily and stored off-site. Servers are in a secure location and access is monitored.

### **State Office Function**

CFS will continue to observe all mandates regarding state and federal requirements, including report completion, grant management and information system oversight.

Critical incident stress debriefing will be offered. Should the disaster leave personnel requiring assistance in coping with the tragedy, personnel will be offered counseling.

A strategic plan will be developed should CFS administration determine that staff and essential services from another area needs to be dispatched to the disaster affected region, or if services are being utilized inappropriately.

## **Disaster Follow-Up**

The ability of the stakeholders to carry out the disaster plan will be evaluated, as well as CFS's ability to obtain assistance from designated partners. Utilization of CFS's toll free telephone number and division email address will be reviewed.

Administration will review all information available stemming from the disaster. An assigned team will determine if policies and/or the disaster plan needs to be revised or if new policies need to be written, to adequately address future disasters.

## **Addenda**

- Letter to Foster/Adopt Parents requesting an evacuation plan
- Family Evacuation Disaster Plan
- Emergency Card

TO: Foster/Adopt Parents

FROM: Lutheran Social Services  
County Social Services Directors  
Catholic Charities North Dakota  
Tribal Social Services  
PATH Regional Directors

Because of a change in the federal law, all states must have a comprehensive disaster preparedness plan. We are asking you to complete the attached evacuation plan for your home and return in the enclosed envelope by November 30, 2007.

Each plan should include a first and second choice for evacuation.

Please be specific and include telephone numbers (land lines and cell phone numbers), names and addresses when developing your plan.

Thank you again. We couldn't do this without you.

NORTH DAKOTA  
DEPARTMENT OF HUMAN SERVICES

**FAMILY EVACUATION DISASTER PLAN**

Foster/Adopt Family Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email \_\_\_\_\_

This document contains my relocation plan in the event that I am required to leave my home address due to a natural disaster or catastrophic event.

**If I need to evacuate my home, I would relocate to:**

FIRST CHOICE, WITHIN THE SAME COMMUNITY: (name, address, phone number, cell number, other contact information – email, etc.)

\_\_\_\_\_  
\_\_\_\_\_

SECOND CHOICE, WITHIN THE SAME COMMUNITY: (name, address, phone number, cell number, other contact information – email, etc.)

\_\_\_\_\_  
\_\_\_\_\_

FIRST CHOICE, OUT OF REGION: (name, address, phone number, cell number, other contact information – email, etc.)

\_\_\_\_\_  
\_\_\_\_\_

SECOND CHOICE, OUT OF REGION: (address, phone number, cell number, other contact information – email, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Contact information for the person with whom I will be in touch in case of an emergency, and who the agency can contact if necessary: (e.g., family member or friend, living outside of the immediate area) (address, phone #, cell phone #, other) \_\_\_\_\_

I understand that there are critical items I am urged to take with me when we evacuate. These may include:

- Agency contact information (e.g. agency emergency contact number)

- My foster child's information (e.g. prescriptions, recent medical reports, physicians name and contact information, immunization history)

I understand that in the event that I must evacuate my home, I am required to report my location to the legal custodian, licensing agent or the North Dakota Department of Human Services. To contact the North Dakota Department of Human Services, I can call 1-800-245-3736 (toll free in-state), 701-328-3591, or email my location to [dhscfs@nd.gov](mailto:dhscfs@nd.gov).

I understand that if any of the information included in this plan changes, I am to update the legal custodian, licensing agent or the North Dakota Department of Human Services within 14 days of the change.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

# NORTH DAKOTA FOSTER CARE/ADOPT CALL IN

In the event that you must evacuate your foster/adopt home, please call or e-mail your location to the legal custodian or licensing agency at

\_\_\_\_\_,  
or, the

ND DEPARTMENT OF HUMAN SERVICES

1-800-245-3736

CHILDREN AND FAMILY SERVICES

701-328-3541

[dhscfs@nd.gov](mailto:dhscfs@nd.gov)

ATTACHMENT D

**North Dakota CFSR Schedule**  
 April 2013-March 2014  
 73 cases will be reviewed

**April – June 2013** **18 CASES**

REVIEW TYPE	REGION	DATE	CASE DRAW PERIOD	PERIOD UNDER REVIEW	# OF CASES	PROGRAM ADMIN REP
Case File Review	Bismarck	May 21-23, 2013	5/1/12 - 2/28/13	5/1/12 - 5/21/13	7 1 SR*	Dean
Case File Review	Devils Lake	Jun 11-13, 2013	6/1/12 - 3/31/13	6/1/12 - 6/11/13	4 1 SL** 1 TM***	Mariys
Case File Review	Cass County	TBD	6/1/12 - 3/31/13	6/1/12 - 6/11/13	4	---

\* Standing Rock Tribal SS    \*\* Spirit Lake Tribal SS    \*\*\* Turtle Mtn Tribal SS

**July – September 2013** **18 CASES**

REVIEW TYPE	REGION	DATE	CASE DRAW PERIOD	PERIOD UNDER REVIEW	# OF CASES	PROGRAM ADMIN REP
Case File Review	Grand Forks	Aug 13-15, 2013	8/1/12 - 5/31/13	8/1/12 - 8/13/13	6	Julie
Case File Review	Fargo	Sep 17-19, 2013	9/1/12 - 6/30/13	9/1/12 - 9/17/13	8	Dean
Case File Review	Cass County	TBD	9/1/12 - 6/30/12	9/1/12 - 9/17/13	4	---

**October – December 2013** **18 CASES**

REVIEW TYPE	REGION	DATE	CASE DRAW PERIOD	PERIOD UNDER REVIEW	# OF CASES	PROGRAM ADMIN REP
Case File Review	Dickinson	Oct 15-17, 2013	10/1/12 - 7/31/13	10/1/12 - 10/15/13	8	Mariys
Full Review	Williston	Nov 12-14, 2013	11/1/12 - 8/31/13	11/1/12 - 11/12/13	5 1 TAT*	Shari
Case File Review	Cass County	TBD	11/1/12 - 8/31/13	11/1/12 - 11/12/13	4	---

\* Three Affiliated Tribes Tribal Social Services

**January – March 2014** **17 CASES**

REVIEW TYPE	REGION	DATE	CASE DRAW PERIOD	PERIOD UNDER REVIEW	# OF CASES	PROGRAM ADMIN REP
Case File Review	Minot	Jan 14-16, 2014	1/1/13 - 10/31/14	1/1/13 - 1/14/14	8	Julie
Full Review	Jamestown	Feb 11-13, 2014	2/1/13 - 11/30/14	2/1/13 - 2/11/14	6	Shari
Case File Review	Cass County	TBD	2/1/13 - 11/30/14	2/1/13 - 2/11/14	3	---

**PLEASE NOTE:** "Case File" review means a review of the case file plus case manager interviews. "Full Case" review means the case file review plus case manager interviews, client/family interviews, other service agency partner interviews, and stakeholder meetings.

(Rev. 3/15/13)

## Annual Reporting of State Education and Training Vouchers Awarded

Name of State: **North Dakota**

	Total ETVs Awarded	Number of New ETVs
Final Number: <b>2011-2012 School Year</b> (July 1, 2011 to June 30, 2012)	51	21
<b>2012-2013 School Year*</b> (July 1, 2012 to June 30, 2013)	35	19

Comments:

*See the ETV section on page 82 of this report*

\*In some cases this might be an estimated number since the APSR is due June 30, 2013.

ATTACHMENT F

North Dakota Chafee Foster Care Independence Program

