



## House Bill 1012

House Appropriations | Human Resources Division  
*Representative Jon Nelson, Chairman*

### Children and Family Services

*Rethinking Child Welfare in North Dakota*

NORTH  
**Dakota**  
Be Legendary.™

Human Services

# CHILDREN AND FAMILY SERVICES

## Program Purpose

The purpose of the Children and Family Services division is to help families who are struggling avoid disruption by having access to the help they need to build stability and well-being together.



# CHILDREN AND FAMILY SERVICES

## What we do

### Safety

- Child protective services
- Child fatality review panel
- State Child protection team
- Parent Resource Centers
- Alliance for Children's Justice

### Permanency

- Foster Care
- Adoption
- Guardianships
- Interstate compacts for the placement of children
- Unaccompanied minor services
- Independent living services
- Licensing for QRTPs and LCPAs

### Well-being

- Family preservation services
- Intensive In-home therapy
- Nurturing Parent programs
- Healthy Families
- Parent aides
- In-home case management
- Respite care
- Family centered engagement
- Early childhood services
- Child care licensing

# CHILDREN AND FAMILY SERVICES

In ND child welfare services are delivered by local, state, tribal and private providers using both federal and state funds

## Dept of Human Services

- **Human Service Centers**
  - Crisis teams
  - Intensive In-home services (therapy & treatment, skills training, behavior mod)
  - Targeted case management
- **Children & Family Services**
  - Training and coaching of field staff
  - Oversee quality service delivery
  - Administration of policy

## Private Human Service Providers

- Safe shelter for crisis
- Human trafficking supports and safe beds
- Unaccompanied minor services
- Foster homes, including therapeutic
- Targeted case management

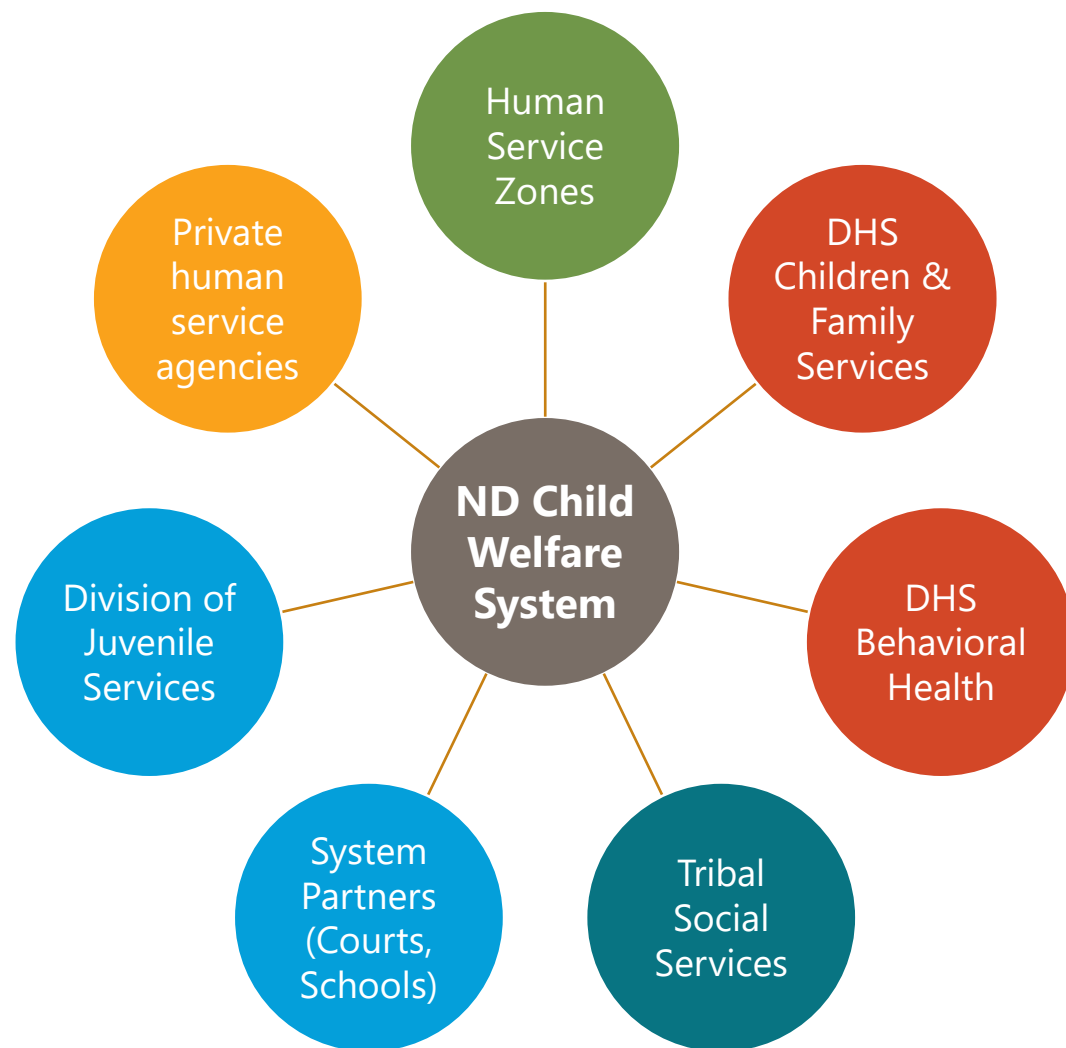
## Tribal Social Services

- FRAME entry and foster eligibility determinations
- Joint practice model and ICWA training
- Native American Training Institute supports (training, billing, svc delivery)
- New FMAP service contracting
- IV-E agreements boost access to funding

## Human Service Zones

- Assess present and impending danger
- Safety planning
- Case management
- Assess and build parent capacities
- Provide safe supports for children and families
- Refer and broker services needed for families
- In home supports
- Parent aides
- License foster homes
- Intake for child abuse and neglect reports

# The Child Welfare System in North Dakota includes both public and private sector partners



The mission of the child welfare system in North Dakota

**Safe Children  
Strong Families**



## What's driving us

- Abuse and neglect related to substance abuse in families
- Increasing challenging behaviors in K-3
- Adolescent suicides
- Inconsistencies in child protection practices
- Delays in completion of child safety assessments
- Clear return on investments made early



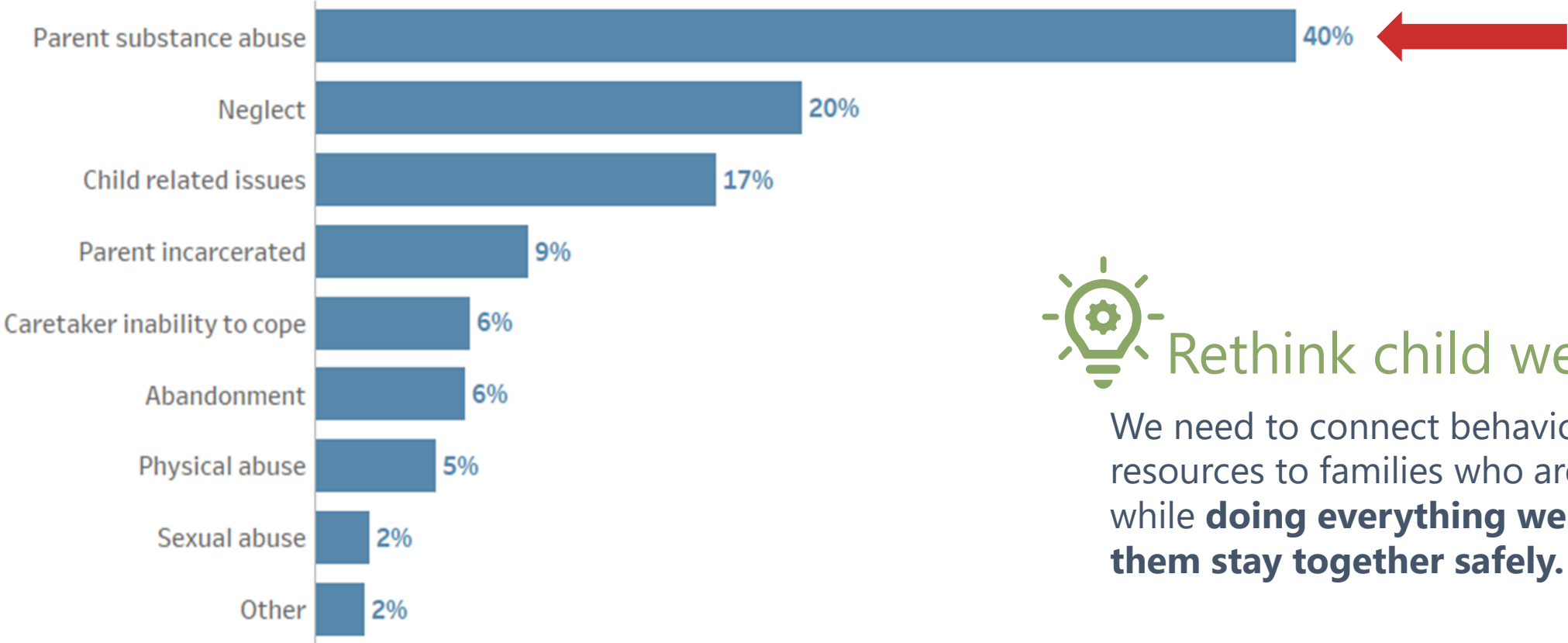
“Everyone would agree that children should not be exposed to abuse or neglect.

“The process of being removed from one’s home and placed in foster care has consequences as well and can have negative effects that last a lifetime.”

# Substance abuse and unaddressed mental health needs are major de-stabilizing forces in families

## Removal reasons

Percent of children entering care for each removal reason, FY2019



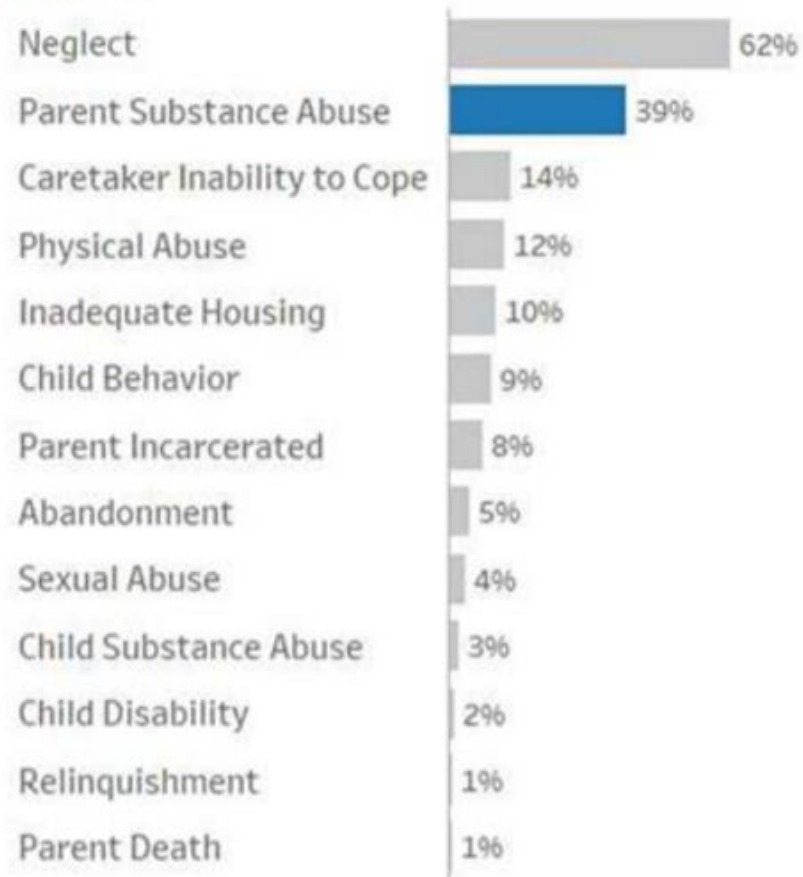
## Rethink child welfare

We need to connect behavioral health resources to families who are struggling while **doing everything we can to help them stay together safely.**

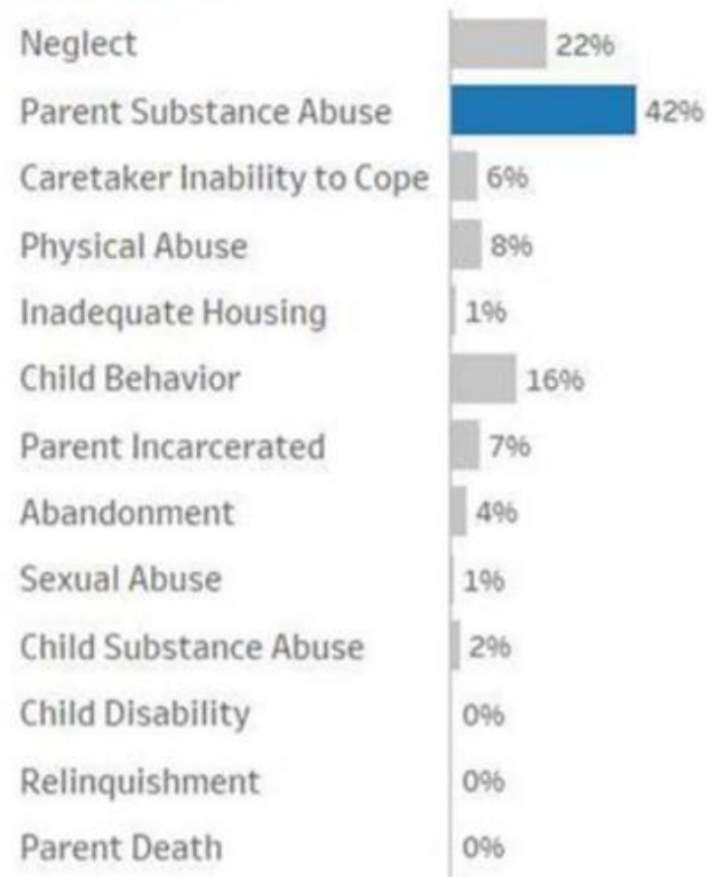


# Parental Substance Abuse and Child Behavior are cited more often as reasons for removal in North Dakota than in the U.S.

## National



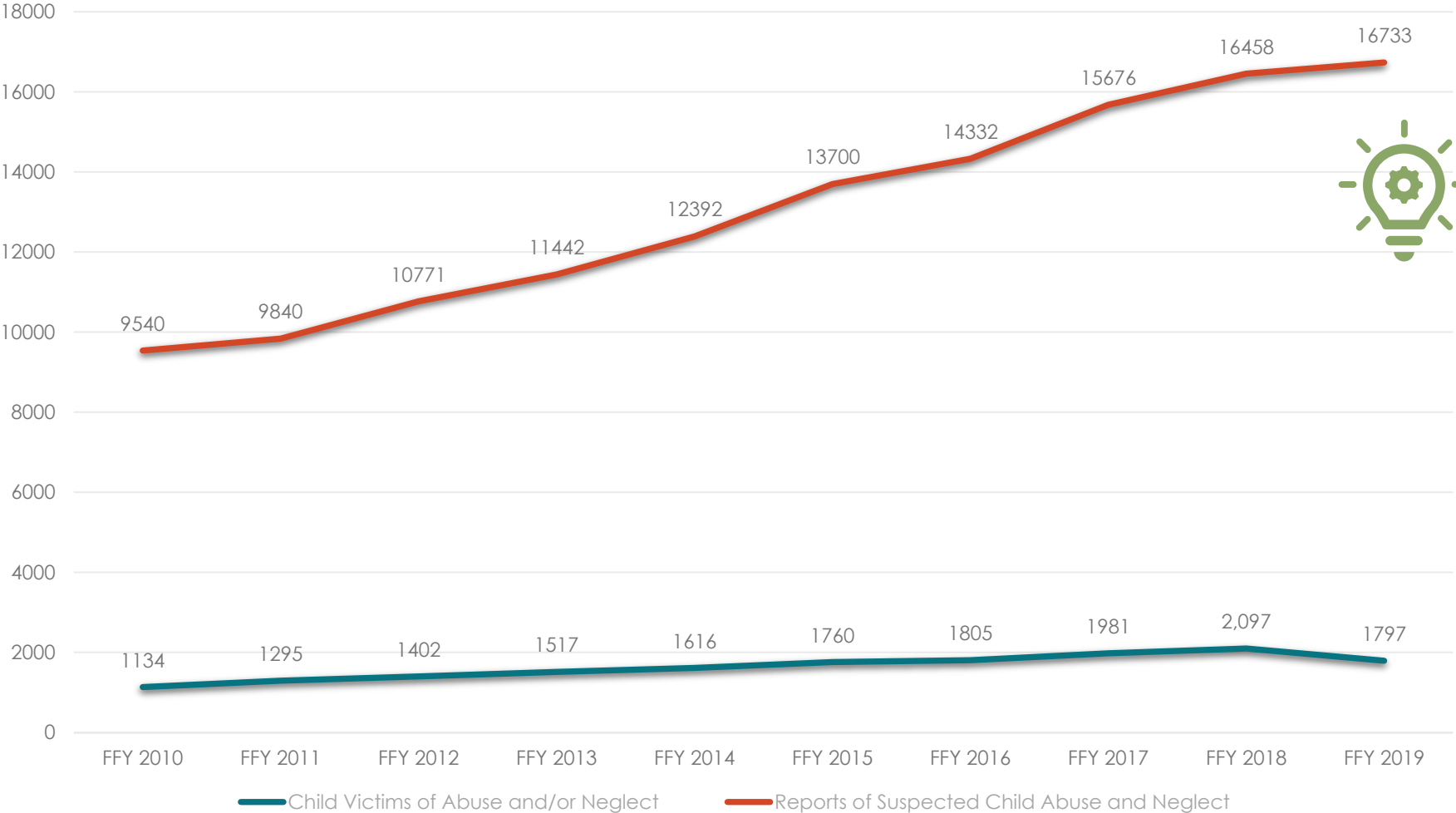
## North Dakota



Data source: FFY 2017 state-submitted AFCARS data. Denotes percent of children entering foster care for each removal reason; multiple reasons may be selected for a single child.

# 10-12 percent of child abuse/neglect calls are ultimately substantiated as abuse/neglect

Numbers of Reports and Substantiated Reports of Child Abuse and Neglect  
FFY 2010 - FFY 2019



## Rethink child welfare

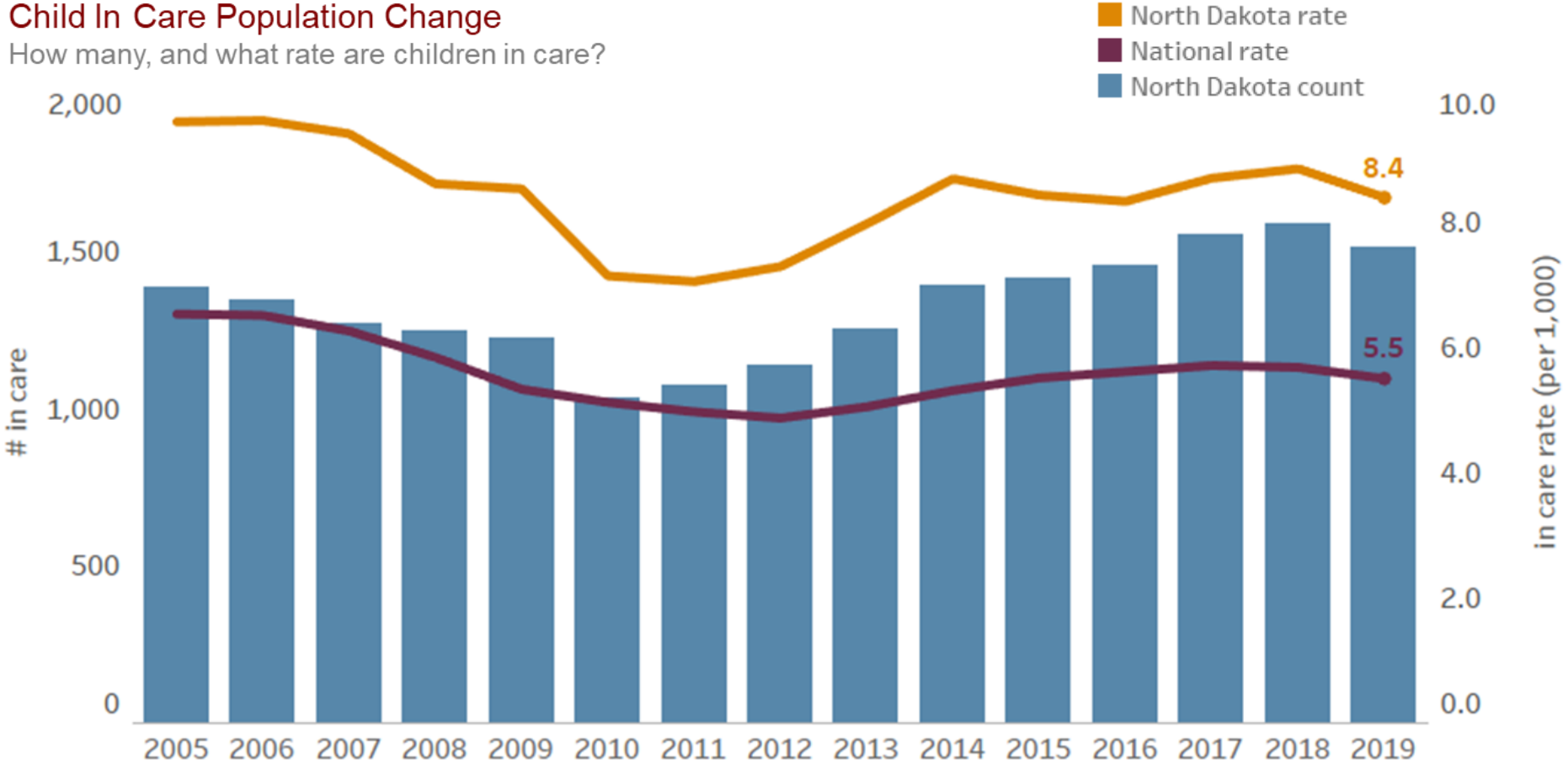
People who call to report a suspicion of abuse or neglect are seeing something that causes them to be concerned about a child's (and their family's) well-being.

**We need a different response for those often valid concerns.**

# The rates at which children are placed in foster care is 52 percent higher in North Dakota than in the U.S. overall

## Child In Care Population Change

How many, and what rate are children in care?



Rethink child welfare

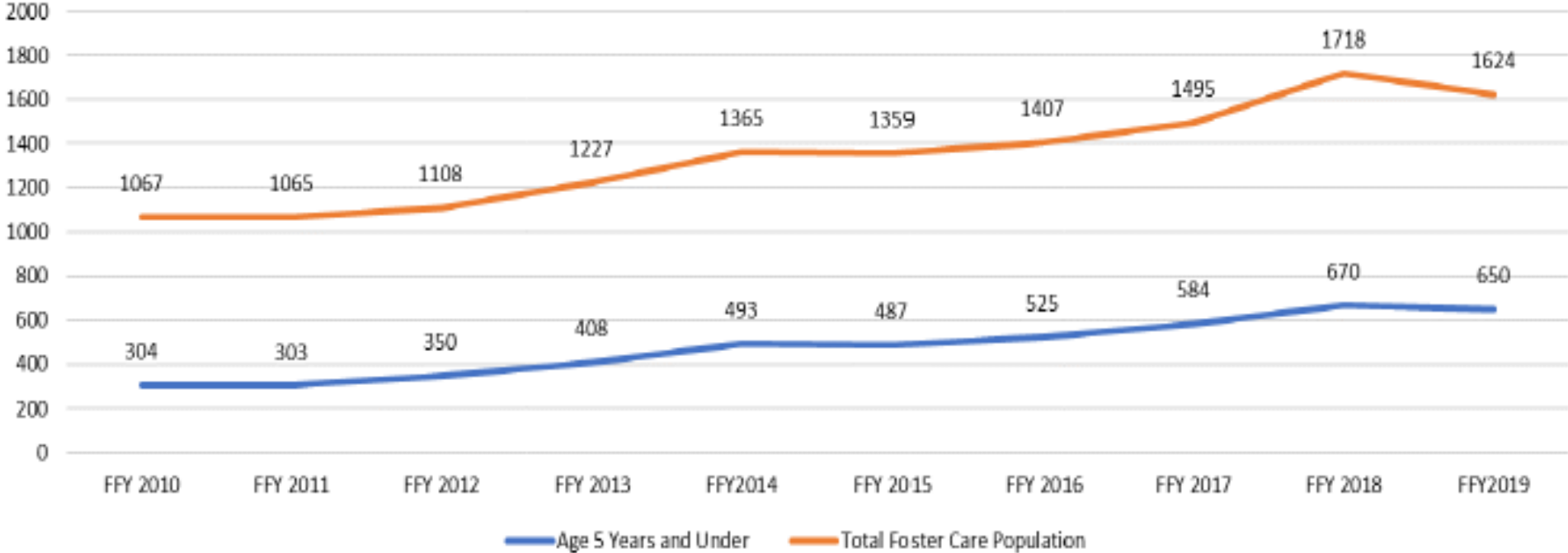


We need to shift resources from removal to family strengthening and preservation.

# The percentage of children in foster care under age 5 has risen steadily from 28% to 40% since 2010

## The number of children in foster care in ND has risen by 52% over the last 10 years

ND Foster Care census and those age 54 years and under, FFY 2010-2019

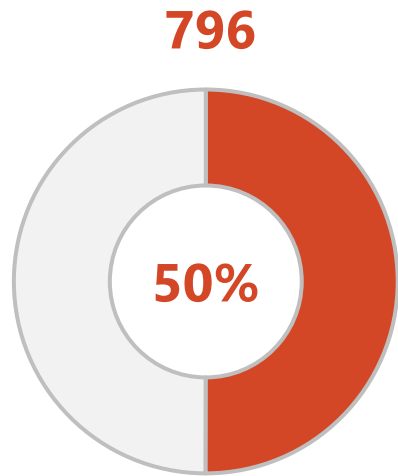


Rethink  
child welfare

Early interventions with young families are they key to reducing foster care placement for the youngest children.

# CHILDREN & FAMILY SERVICES

## Foster Care in ND – 2020 Snapshot



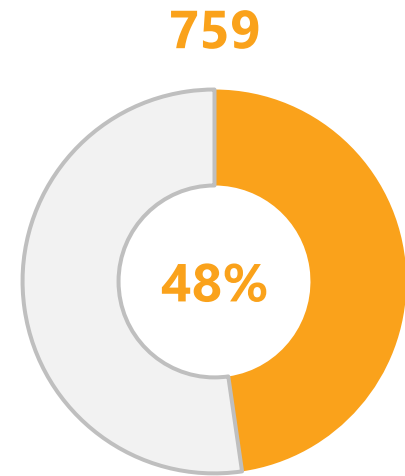
### 1 in 2 age 0-7

Half of the 1,591 children in foster care in North Dakota are age 7 or younger. (2020)

34%

### Intense level of care

Of the 189 kids receiving therapeutic foster care in 2020, 65 (34%) were younger than 7 years old.



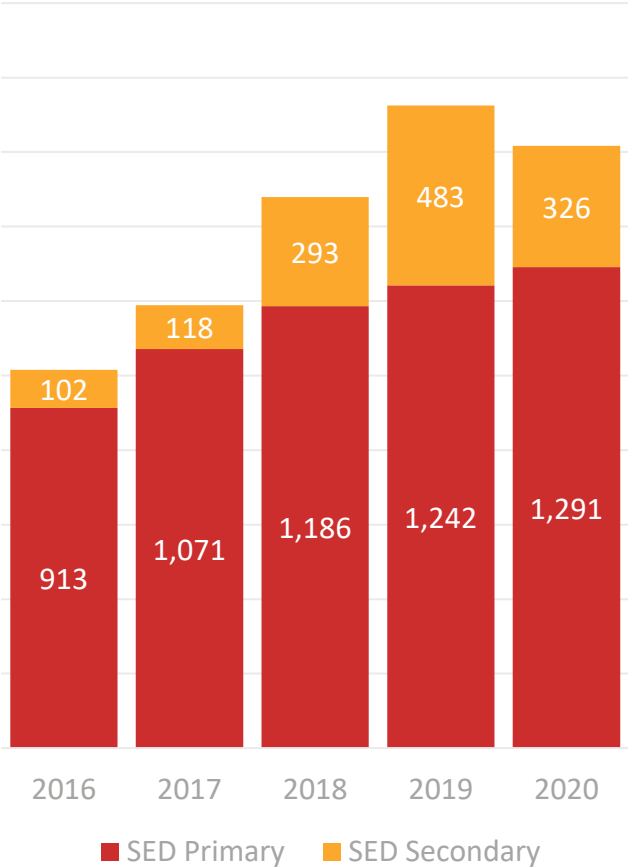
### 5x more likely

Native American children make up 48% of the total number of children in foster care in ND (759 of 1,591).

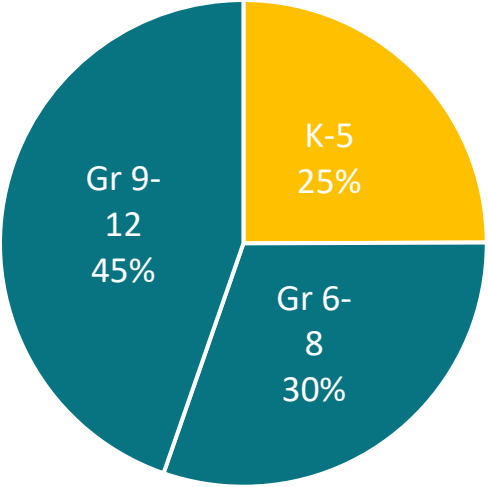
Native American children make up 8.7% of kids under age 18 in ND.

# Trends in services for emotional disturbance, age of incidents and rates of chronic absence point to increasing behavioral health needs for kids and families

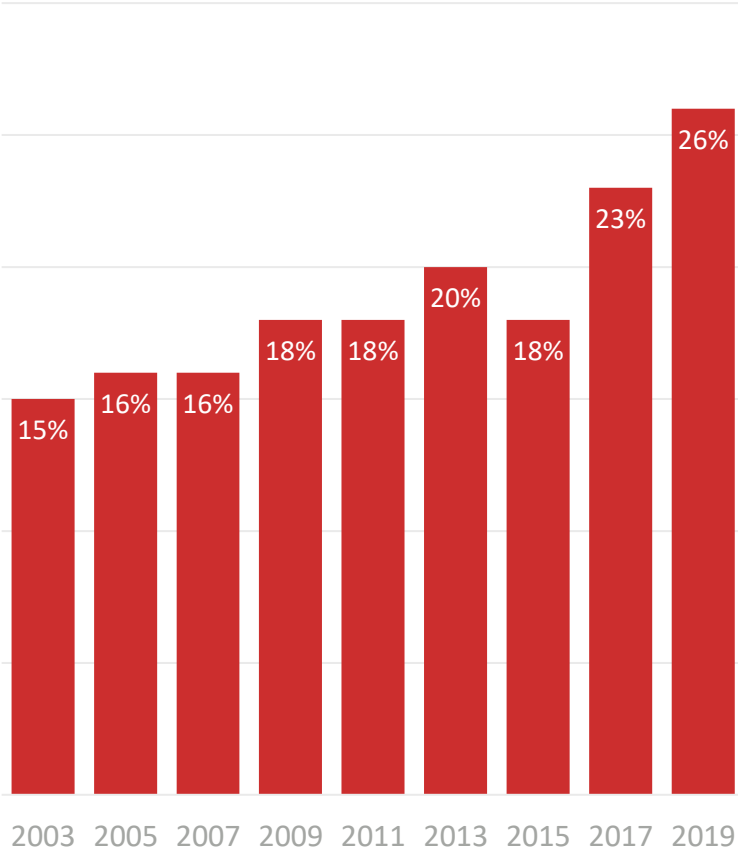
Students receiving services for “emotional disturbance” in Grades K-12



“Incidents” in school setting by grade level (2019-20 school year)



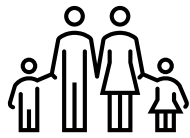
4<sup>th</sup> graders counted as chronically absent by academic year



Rethink child welfare  
 Supporting behavioral health needs in families will can prevent disruptions at home and in school.



# DHS 2021-2025 KEY PRIORITIES



## Strong Stable Families

- Maintain family connections
- Improve stability and prevent crises
- Promote and support recovery and well-being



## Early Childhood Experiences

- Support workforce needs with improved access to childcare
- Help kids realize their potential with top quality early experiences
- Align programs for maximum return on investment



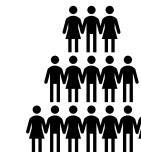
## Services Closer to Home

- Create pathways that help people access the right service at the right time
- Engage proactively with providers to expand access to services



## Efficiency Through Redesign

- Embrace process redesign to find efficiencies in our work
- Leverage technology to support greater efficiency, quality and customer service



## High-Performing Team

- Develop a One DHS Team culture
- Engage team with opportunities for learning and development
- Implement fiscal scorecard to drive efficiency and effectiveness

## Reinforce the Foundations of Well-being

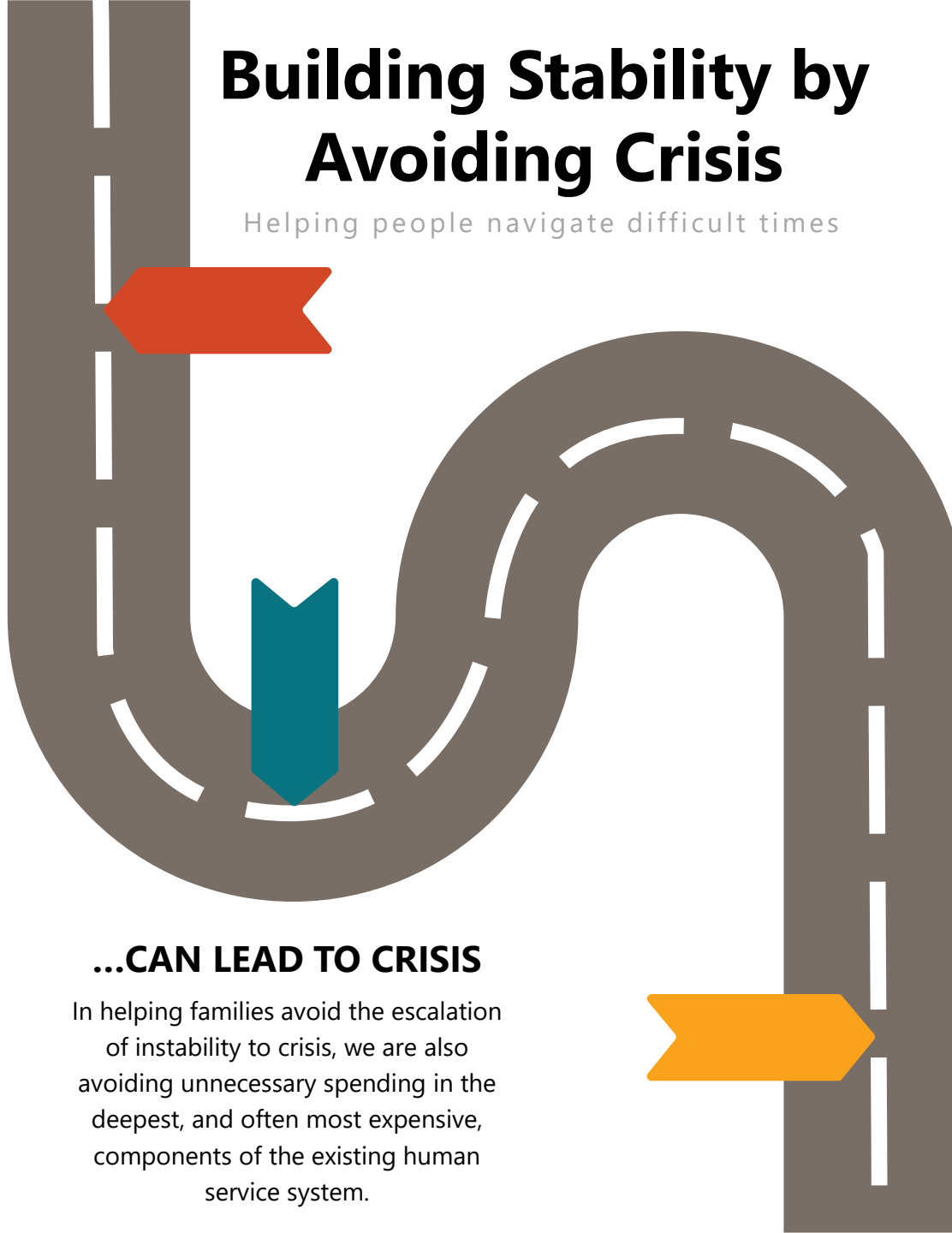
Economic Health | Behavioral Health | Physical Health

# Building Stability by Avoiding Crisis

Helping people navigate difficult times

## DISRUPTION

When families experience disruption, their ability to be a fully engaged, productive member of the community and the workforce is compromised.



## ...CAN LEAD TO CRISIS

In helping families avoid the escalation of instability to crisis, we are also avoiding unnecessary spending in the deepest, and often most expensive, components of the existing human service system.

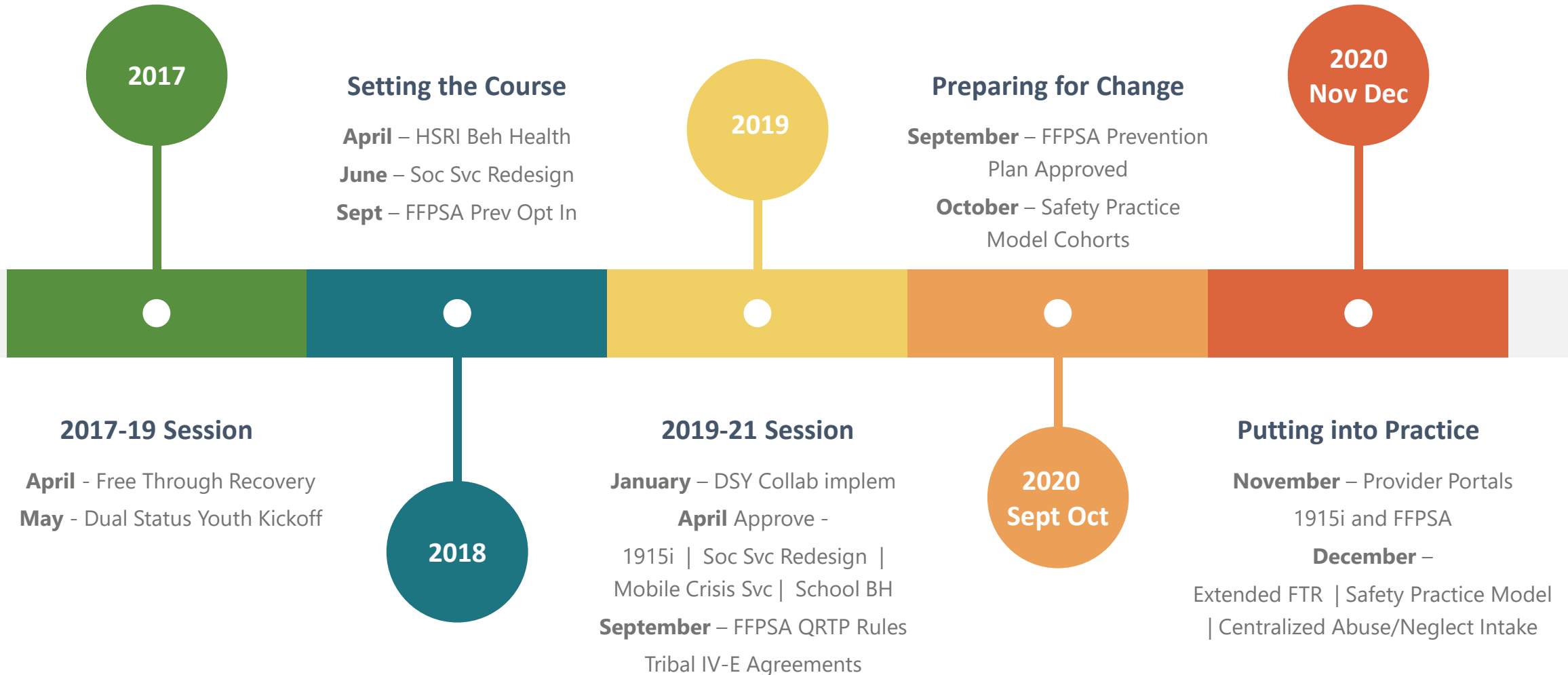
## SERVICES SUPPORT STABILITY

Intervening early will both save money and strengthen families. It will allow us to reserve deep end services for the times when they are truly needed, and help people avoid deepening their journey into crisis by diverting from institutions, keeping families together, and helping and sure that people have a place to call home.



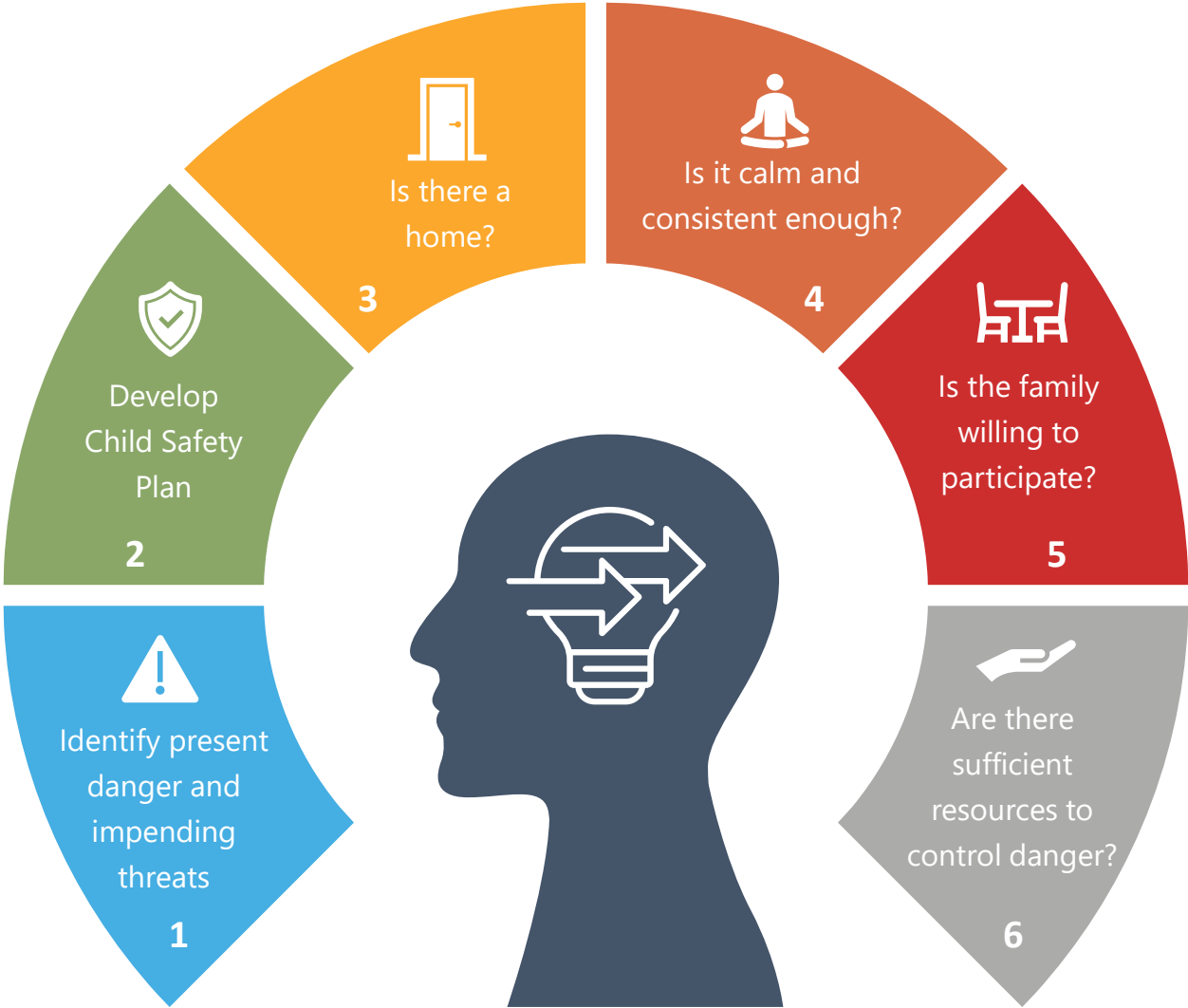
# Our Journey Toward Building Stronger Families

Redefining Child Safety and Wellbeing through a Two-Gen Lens



# Understanding Child Safety

When can a child remain safely at home and when is removal necessary



**Safety Plan**  
Determination looks at 3, 4, 5, and 6

**If ALL YES**  
Child can remain in home with necessary supports in place

**If any are NO**  
Child safety is not assured, so removal is necessary



# Safe Child

---

A child is safe if:

- ✓ No threats of danger exists within the family, **or**
- ✓ The parent/caregivers possess sufficient protective capacity to manage any threats, **or**
- ✓ The child is not vulnerable to the existing danger.

*ND Safety Framework Practice Model Resource Guide, November 2020*

# Vulnerability

---

Refers to a child's capacity for self-protection.

Factors include assessment of several aspects of a child's capacity:

- ✓ Age
- ✓ Physical or Mental Disability
- ✓ Provocative Behaviors
- ✓ Powerless, defenseless, non-assertive
- ✓ Illness
- ✓ Invisible to other adults

Safety is an issue only when there is a vulnerable child in a family.

*ND Safety Framework Practice Model Resource Guide, November 2020*



“North Dakota’s Child Welfare System is focusing on efforts to **ensure availability and access** to a broad, flexible array of **effective community-based services and supports**

for children and their families

that address their emotional, social, educational and physical needs,

including traditional and nontraditional services as well as natural and informal supports.”

*ND 2020-2024 Title IV-E  
Prevention Services and  
Programs Plan*

## Children considered a “Candidate for Foster Care”

Have access to



## Evidence-based Prevention Services

Under 18 years of age	Significant interference or limitations of the child’s functioning in home, school or community	Child is pregnant or parenting a child(ren)	Siblings in foster care
Inadequate supervision based on family and youth circumstances	Currently involved in 2 or more community services or agencies	DSM diagnosis for emotional, behavioral, or mental health disorder	Child whose adoption or guardianship arrangement is at risk of disruption
Prior out of home placement	Reunification has occurred	Difficulties are interfering or limiting achievement or maintenance in 1 or more developmentally appropriate skills	Parent/custodian/guardian has limited capacity to meet educational, medical, safety or basic needs of child due to parental need*

**In home parent skill-based programs**

**Mental health programs**

**Substance abuse prevention and treatment**

\*Parental inability to meet needs of child could be due to parent(s)’ behavioral health, incarceration, physical or intellectual disability, debilitating or life-threatening medical needs, homelessness or substandard living conditions, verbalization of no longer wanting their child, or substance exposed newborns.

# Meet Jayce.



# Meet Jayce's family.

Age 9

Mom noticed Jayce wasn't himself. His teachers noticed too.

Acting out in school. Aggressive. Defiant. Sullen. Tipped over a desk in the classroom.

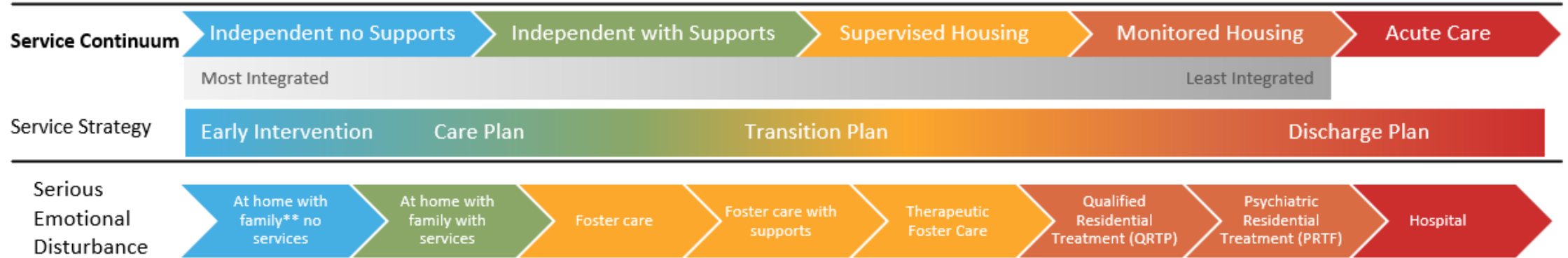
He lives at home with his mom, dad and little brother.

Jayce's school called in an abuse/neglect report.

- Mom, dad and brother (age 4)
- Both mom and dad work full time. Mom is a cashier. Dad works for a farmer.
- They don't qualify for Medicaid. They have a basic insurance package through the exchange.
- Tensions at home are escalating. Jayce's dad is becoming increasingly frustrated and has turned to alcohol in an unhealthy way to cope with Jayce's behavior.

# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions

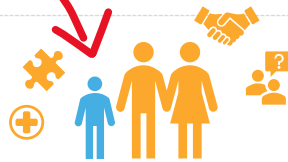
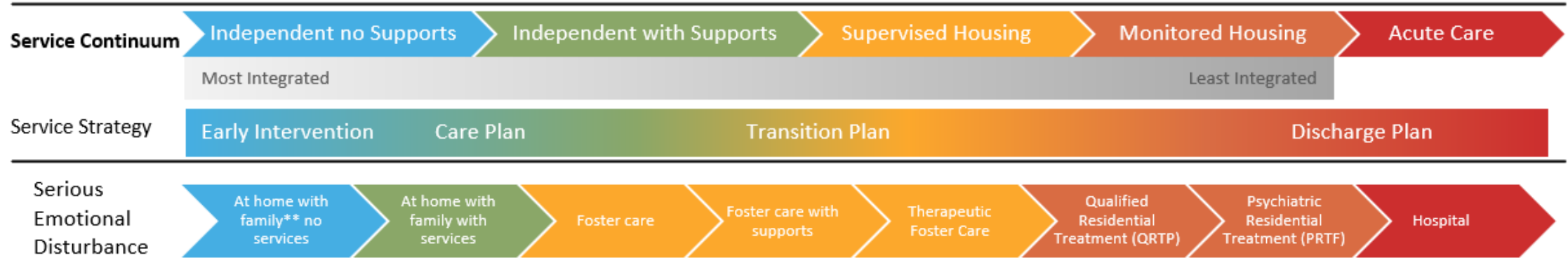


**Crisis**



# What does it mean to serve a family together rather than apart?

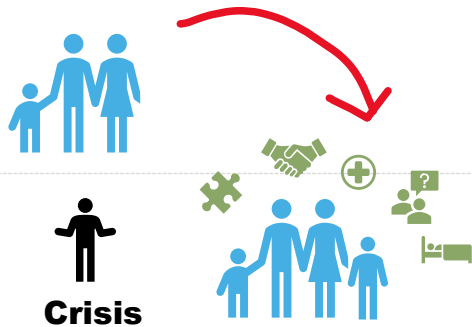
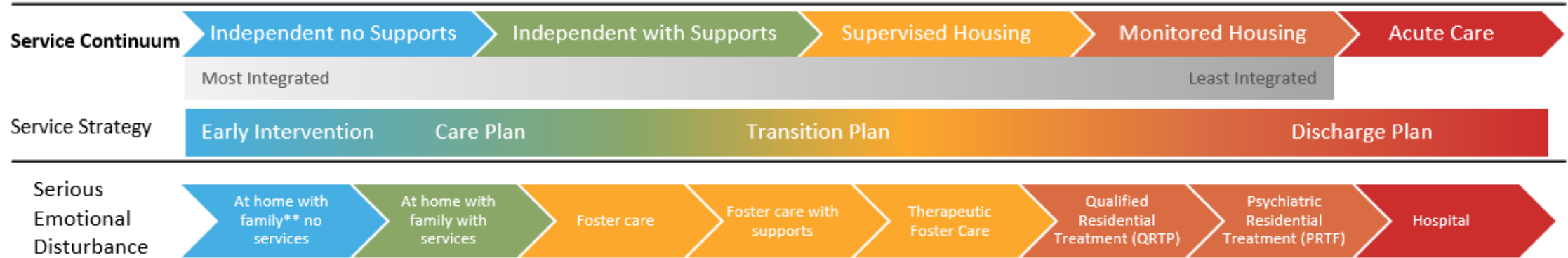
Understanding how systems can help children and families avoid crisis-level disruptions



**BEFORE FFPSA**  
Provide helping services to child while in foster care using federal IV-E funds

# What does it mean to serve a family together rather than apart?

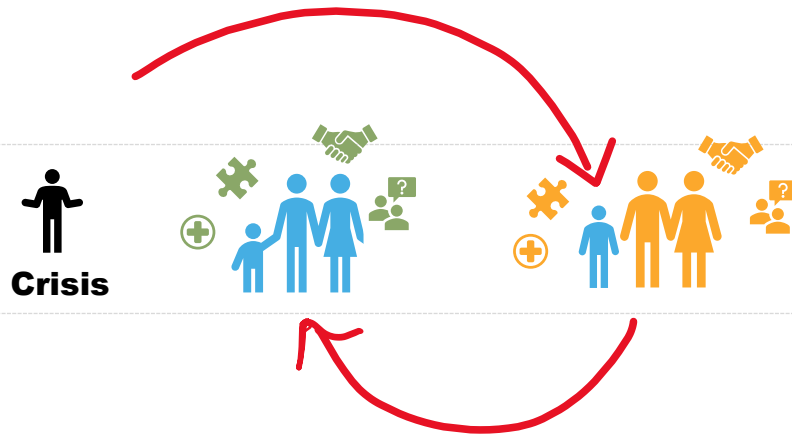
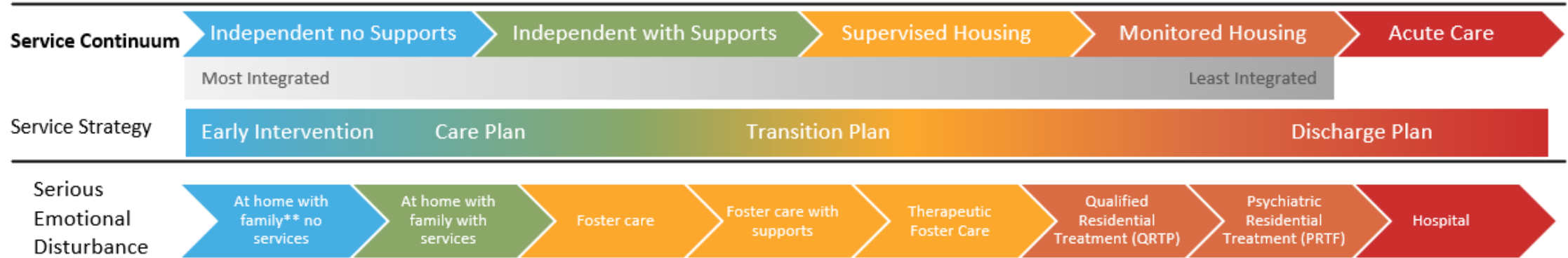
Understanding how systems can help children and families avoid crisis-level disruptions



**AFTER FFPSA**  
Provide helping services to family while they are together, using federal IV-E funds

# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions



**ALTERNATE -  
AFTER FFPSA**  
Provide helping services to child while in foster care AND to family using federal IV-E funds, shortening the time the family is apart

# Meet Kevin, Brenda & Brandon



Kevin (43) and Brenda (42) live in a small home in Rolla with their son Brandon (6)

Kevin works for a local builder full time. Brenda is a paraprofessional at the elementary school.

Kevin suffers from depression and has been drinking a lot. Brenda has been diagnosed with an anxiety disorder.

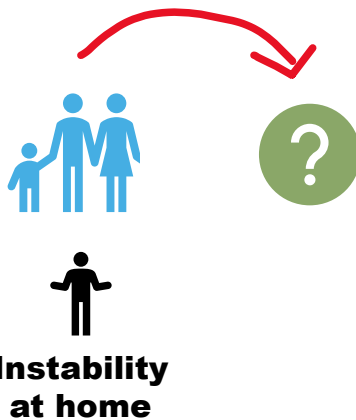
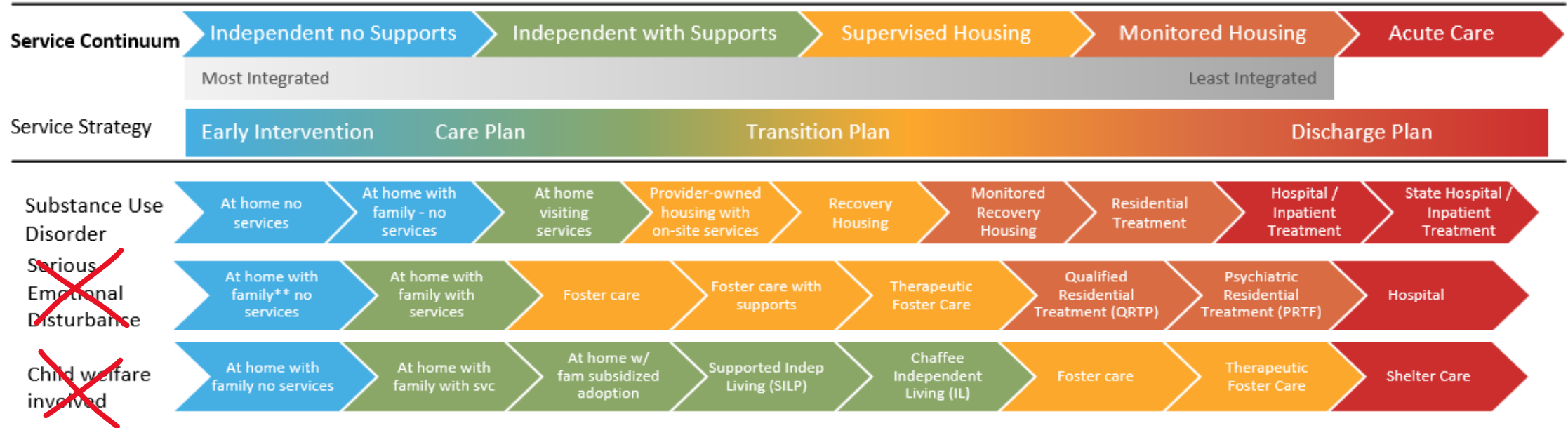
Brandon attends first grade. The year started off well but he's been more withdrawn in class as the year has gone on.

When they're getting hours at work, they can usually make ends meet. Money has been tight lately.

Tensions at home are rising.

# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions

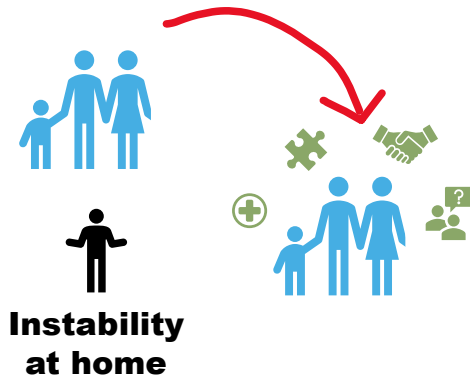
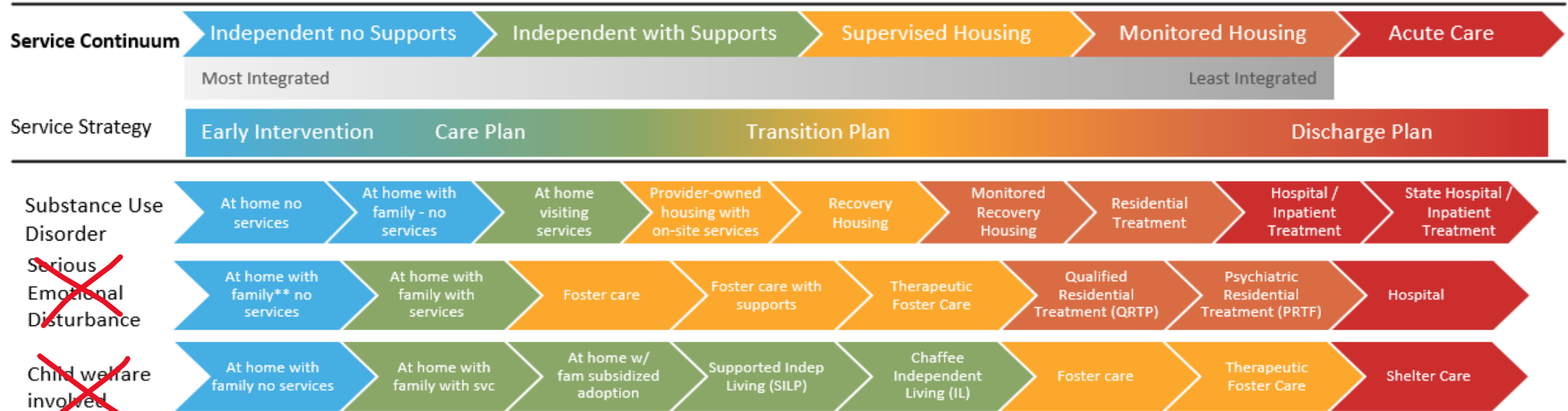


## BEFORE FFPSA

Parents could access mental health or substance abuse services through their **insurance** or their **own resources**; **no** intervention with child welfare (Title IV-E) **resources UNTIL** a report of **abuse or neglect** is filed

# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions



## AFTER FFPSA

**Family** can **access** mental health and substance abuse services for mom and dad **through Title IV-E**

Why? Parents' mental health and substance abuse issues are causing instability in the home, which means the child could be a candidate for foster care if things escalate further

# Meet Sarah & Leah



Sarah (19) and her daughter Leah (1) live in a small efficiency apartment in Grand Forks.

She works part-time as a front desk receptionist for a local hair salon.

She received a scholarship to take classes online at night to earn her associate degree in medical transcription.

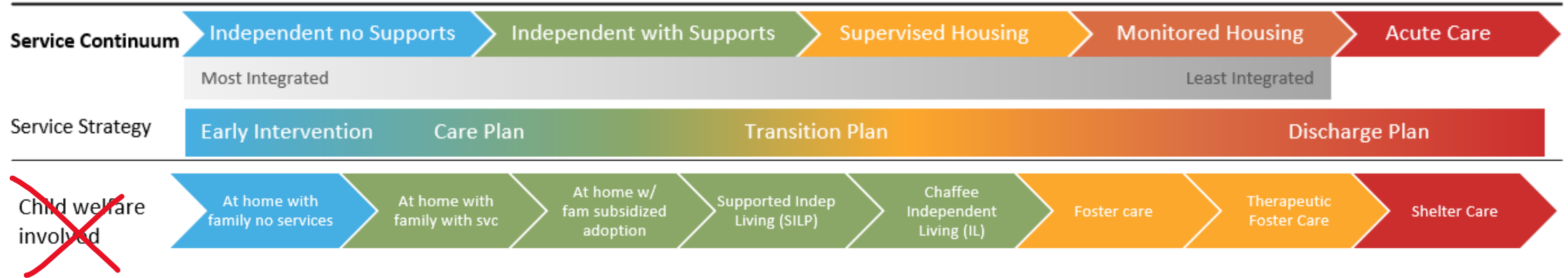
Sarah is almost always late with rent. Her hours at work went down. She hasn't been able to pay the last two months.

Sarah's neighbor watches Leah while she's at work.

Sarah doesn't have a car. She receives SNAP and Leah has health coverage through CHIP. Sarah has coverage through Medicaid Expansion.

# How can we help stabilize a family?

Understanding how systems can help children and families avoid crisis-level disruptions



**Crisis**

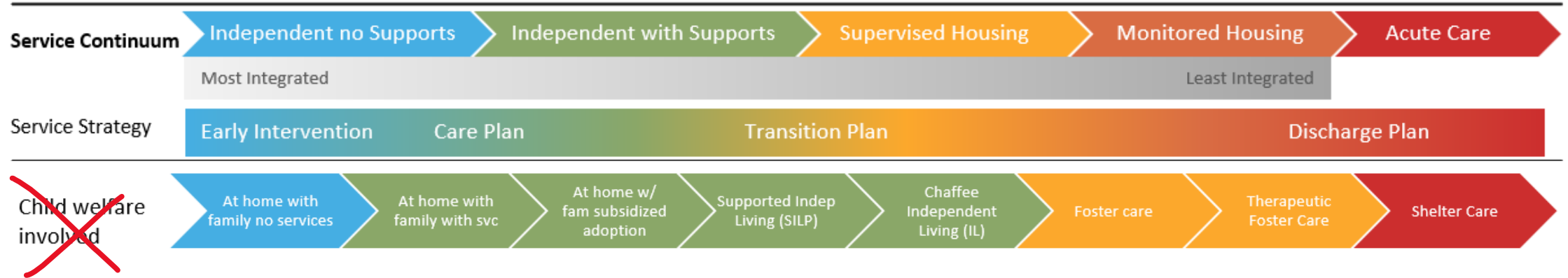
## BEFORE FFPSA

Sarah would be eligible to participate in a parent skill-building program if a privately funded slot is available in her community.



# How can we help stabilize a family?

Understanding how systems can help children and families avoid crisis-level disruptions



## AFTER FFPSA

Because Sarah is at risk of losing her housing, she would be eligible to receive parent skill-building services from a IV-E funded provider.

# Meet Taylor.



Taylor is 15.

She lives with a foster family.

She has been in the custody of a Human Service Zone for 15 months.

Taylor's behavior has been erratic and risky. She is drinking, smoking marijuana, has run away from school and home, and has been cited by the police 3 times.

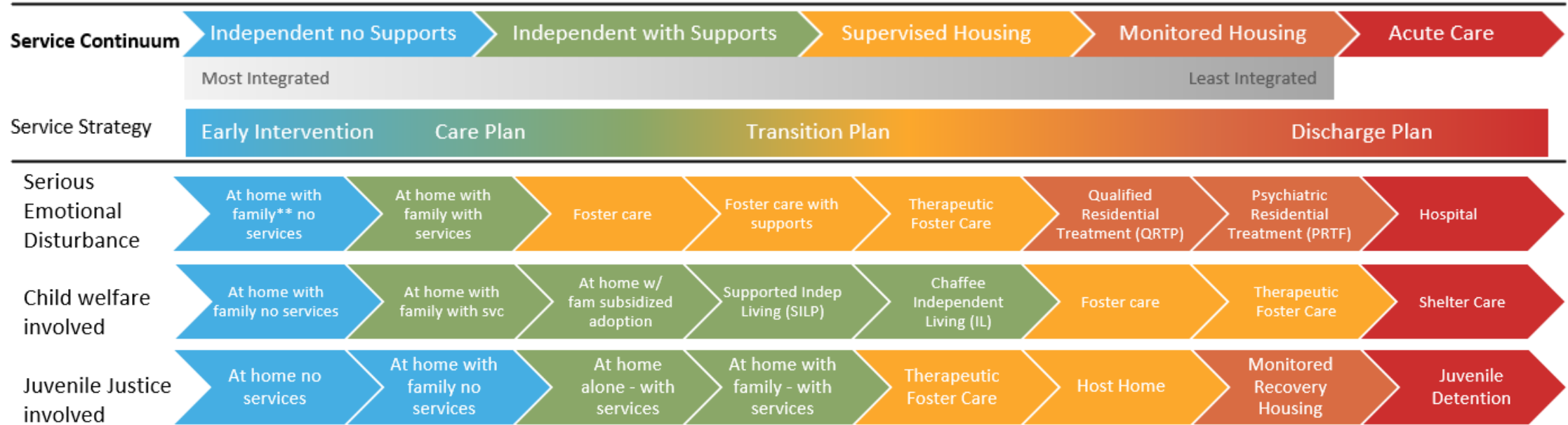
Taylor has been hospitalized twice in the last 3 months for suicidal ideation.

She's not doing well at school or at home.

Her guardian requested an emergency placement at a Qualified Residential Treatment Program (QRTP).

# What does it mean to deliver services closer to home?

Understanding how systems can help children and families avoid crisis-level disruptions



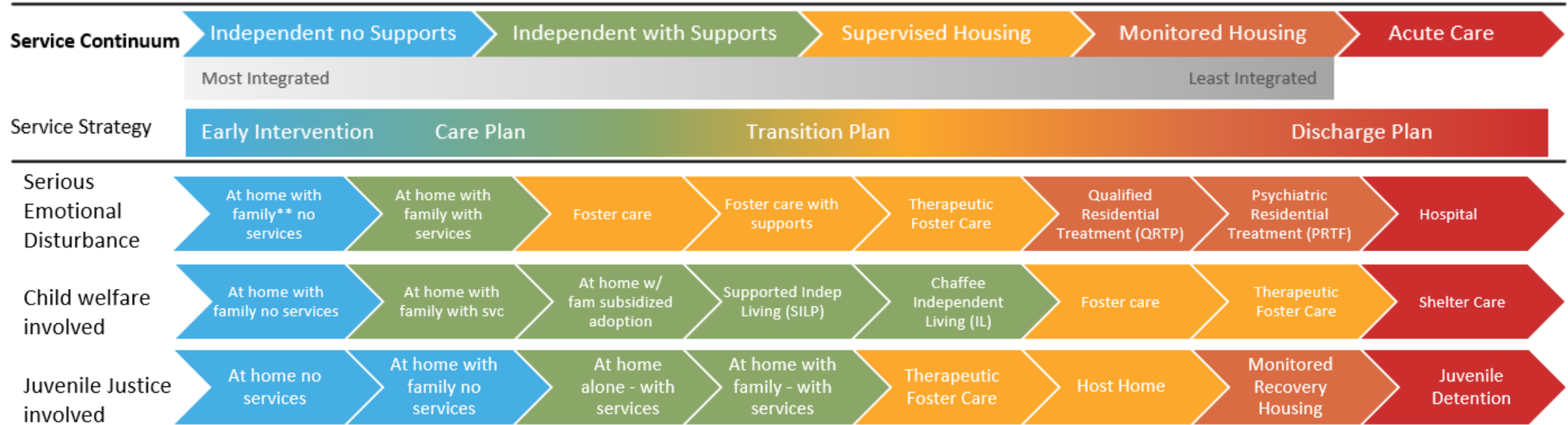
**Crisis**

## CRISIS

Taylor has been removed from her birth home, has mental health and substance use issues, and has been involved with law enforcement. She is in crisis.

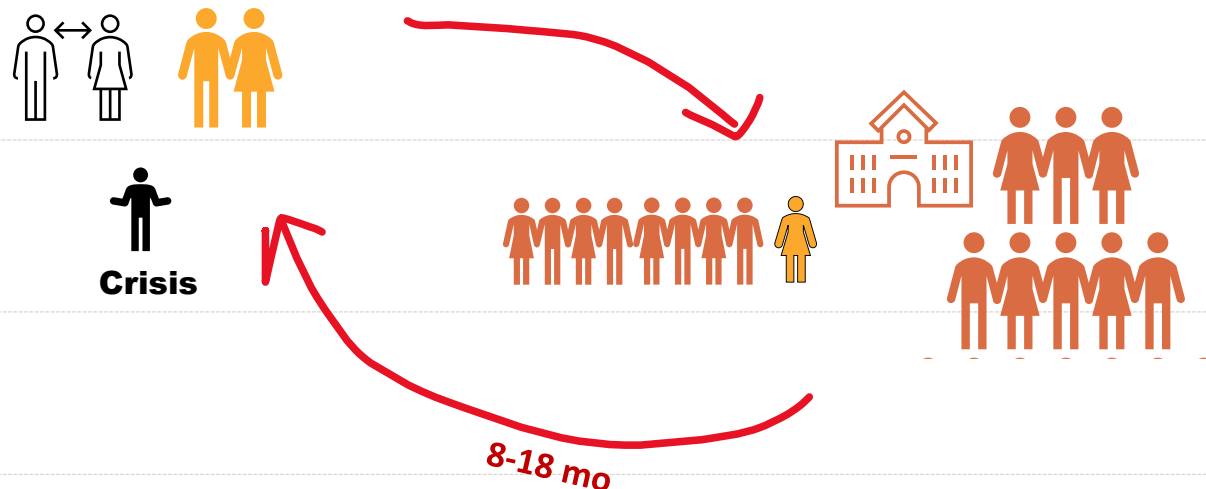
# What does it mean to deliver services in most integrated setting?

Understanding how systems can help children and families avoid crisis-level disruptions



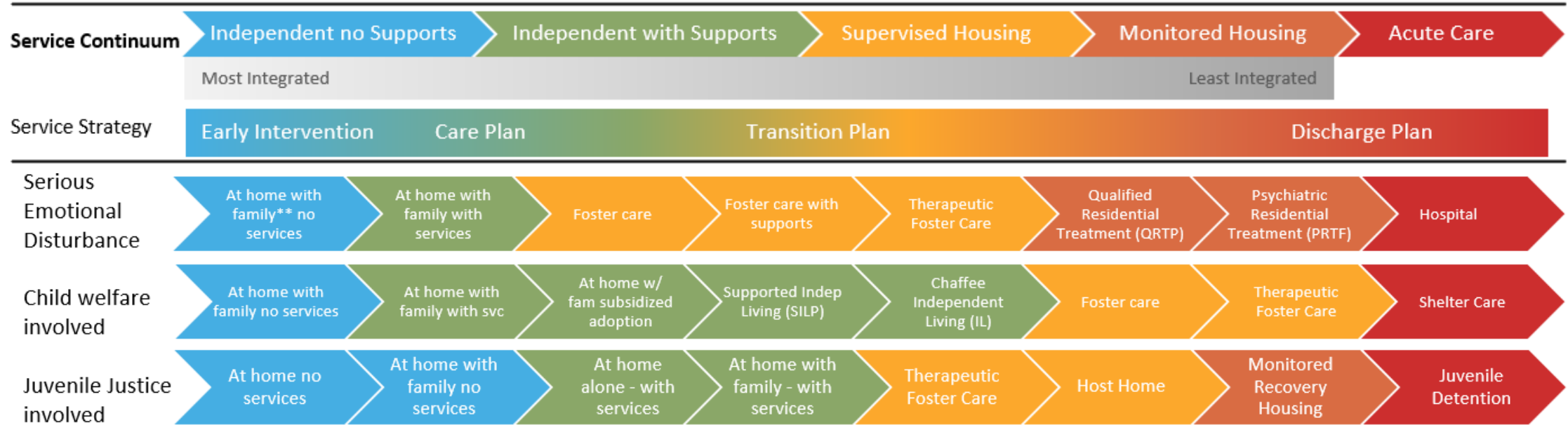
## BEFORE FFPSA

Taylor's emergency placement at the QRTP would end when the QRTP indicated that treatment was complete, at which point she would be sent back to her foster home.



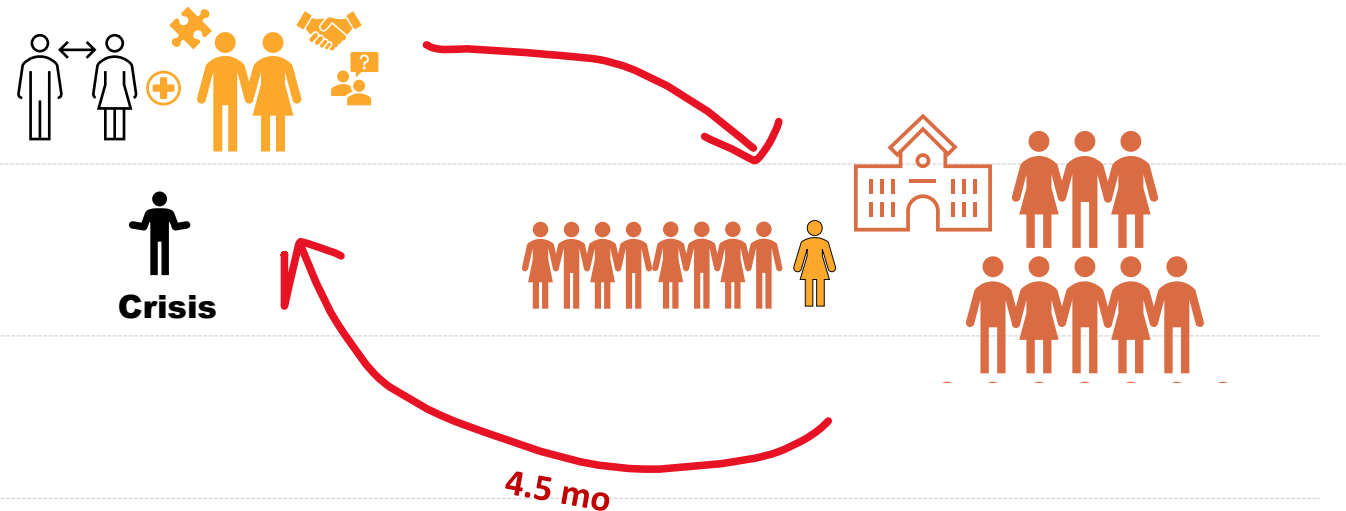
# What does it mean to deliver services in most integrated setting?

Understanding how systems can help children and families avoid crisis-level disruptions



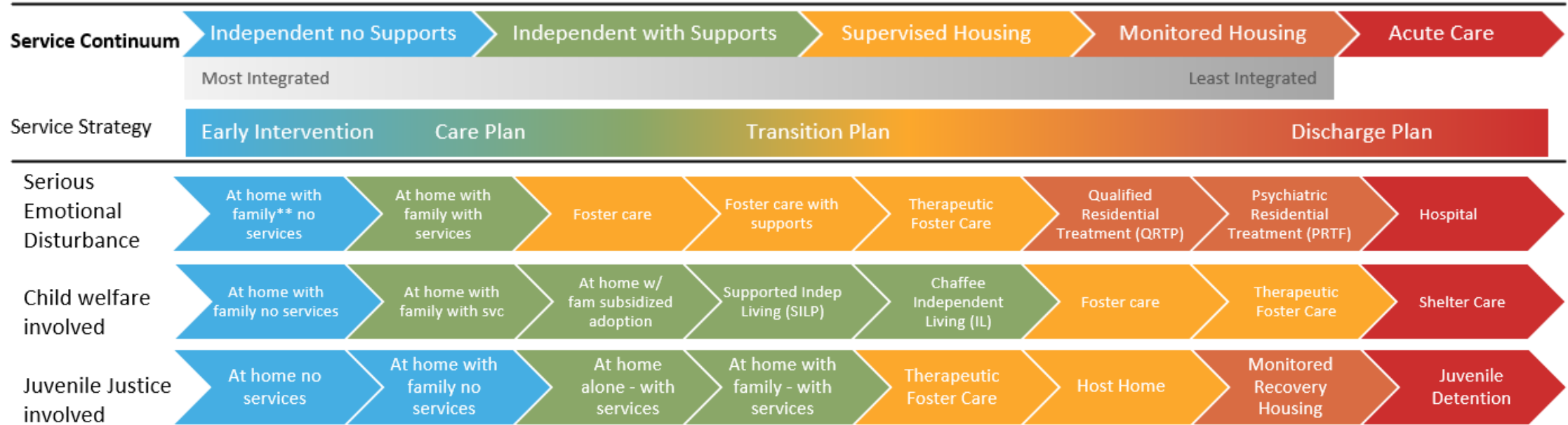
## AFTER FFPSA

An independent assessor evaluates the level of care Taylor needs at placement and every 3 months after. Once it is determined that she doesn't need an institutional level of care, she will return home to complete treatment.



# What does it mean to deliver services in most integrated setting?

Understanding how systems can help children and families avoid crisis-level disruptions



## PERMANENCY

Taylor's case manager does a family search. Her aunt steps in and provides kin care. They pursue formal guardianship through the courts and Taylor moves out of foster care and out of "systems" involvement. If they need help to get through tough times, they will still be eligible under FFPSA.

# Meet Samuel.



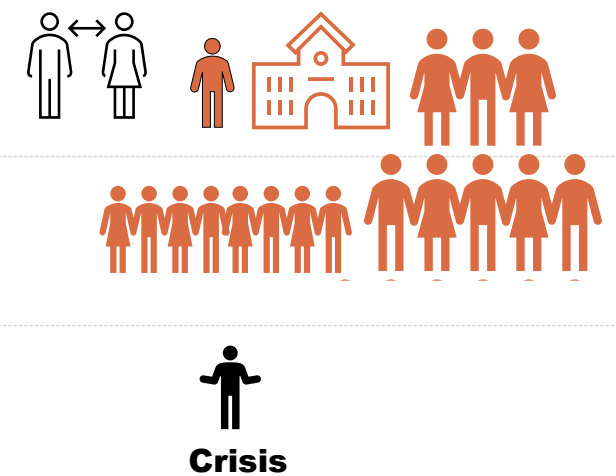
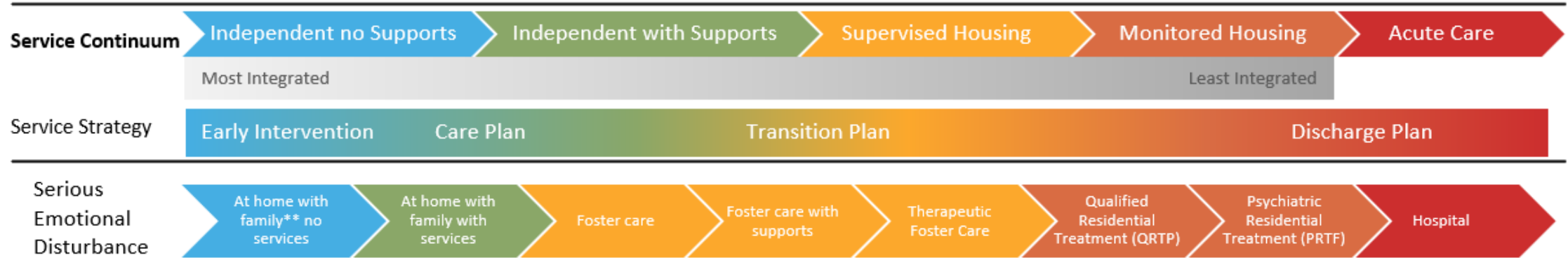
Samuel is 13.

Samuel was removed from his parental home because of sexual abuse and was placed in a QRTP as an emergency placement.

He is legally in the custody of the Human Service Zone.

# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions



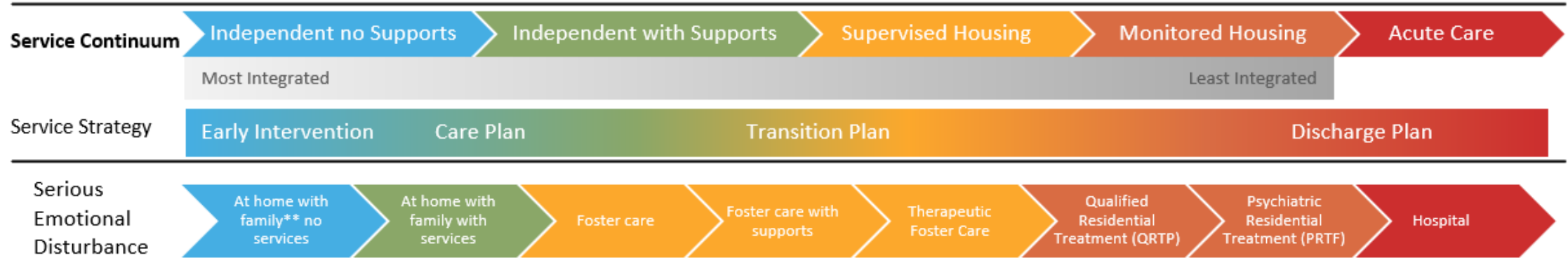
## BEFORE FFPSA

Samuel's emergency placement at the QRTP would end when the QRTP indicated that treatment was complete, at which point he would be sent to a foster home identified by the custodian.



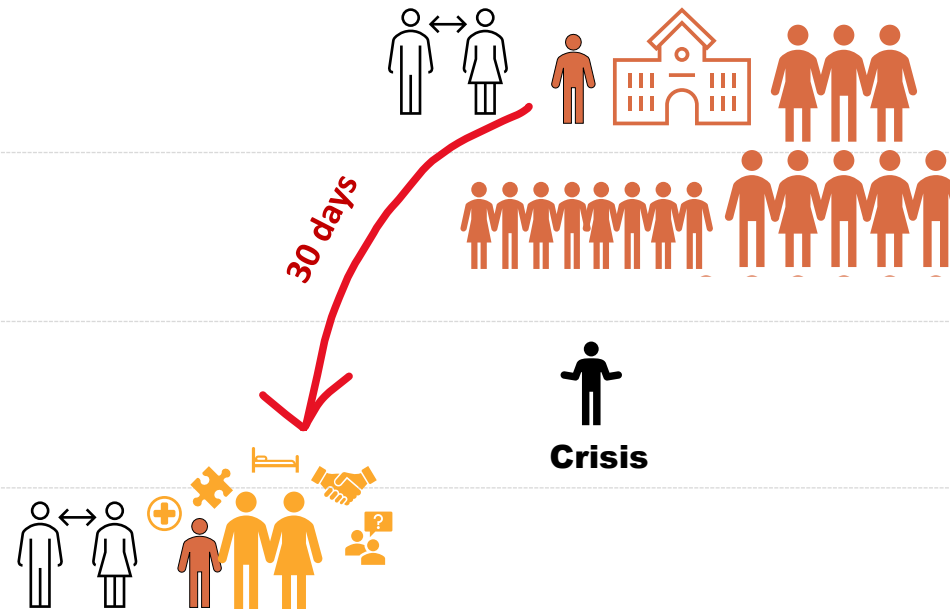
# What does it mean to serve a family together rather than apart?

Understanding how systems can help children and families avoid crisis-level disruptions



## AFTER FFPSA

After having an assessment of level of care needed, it was determined that Samuel's emergency placement at the QRTP would end after 30 days. Custodian identified foster family to facilitate transition after emergency stabilization.





## Our goals

- Reduce Foster Care Numbers
- Reduce Institutional Placements
- Reduce Out of State Placements
- Reduce Substance Abuse as Abuse/Neglect factor
- Increase Kids receiving evidence-based supports
- Reduce severity of school-based behaviors

# CHILDREN AND FAMILY SERVICES

## Overview of Budget Changes

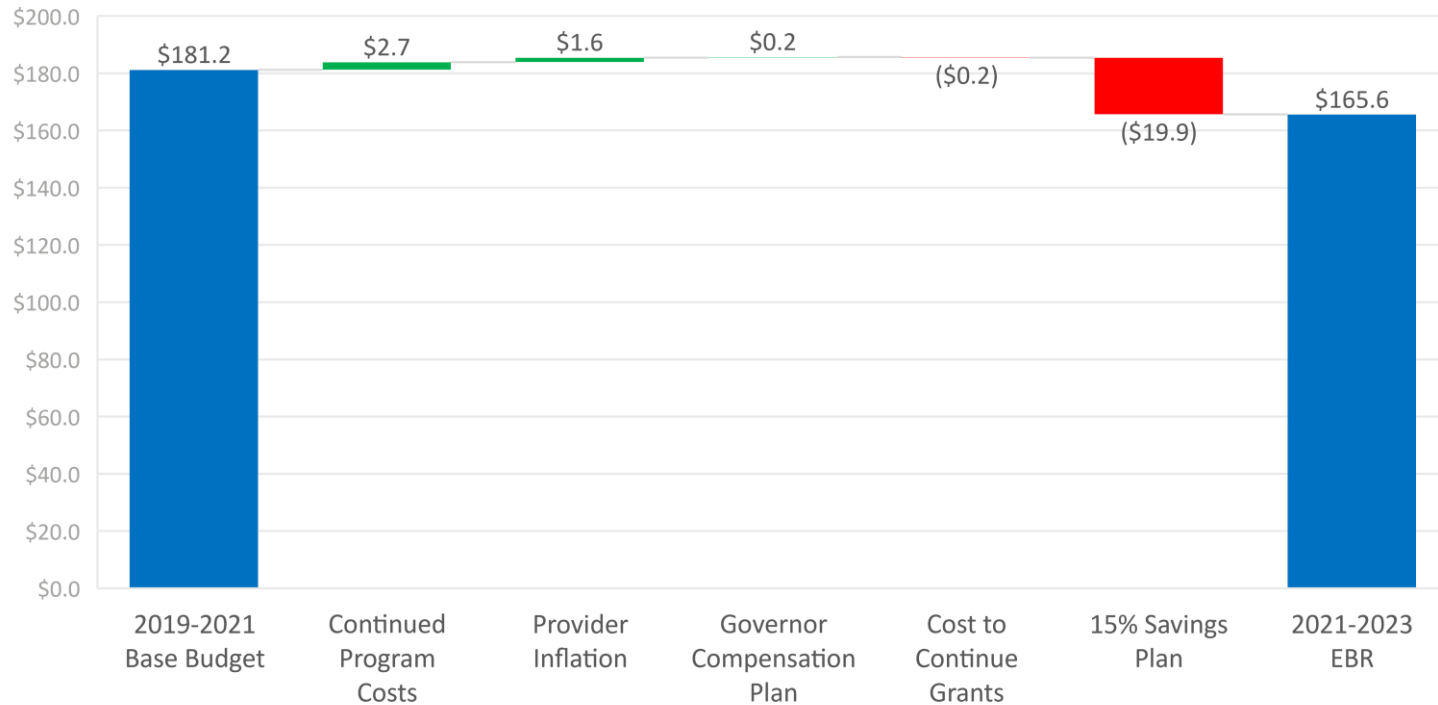
Description	2019-2021 Budget	Increase/ (Decrease)	2021-2023 Executive Budget
<b>Salaries and Benefits</b>	8,346,639	153,632	8,500,271
<b>Operating</b>	6,531,727	396,770	6,928,497
<b>Grants</b>	166,292,675	(16,083,723)	150,208,952
<b>Total</b>	181,171,041	(15,533,321)	165,637,720
<b>General Fund</b>	87,651,918	(15,698,254)	71,953,664
<b>Federal Funds</b>	88,707,220	1,028,817	89,736,037
<b>Other Funds</b>	4,811,903	(863,884)	3,948,019
<b>Total</b>	181,171,041	(15,533,321)	165,637,720
<b>Full Time Equivalent (FTE)</b>	41.60	0	41.60

# CHILDREN AND FAMILY SERVICES

## Overview of Budget Changes – Total Budget

Children & Family Services Total Funds

■ Increase ■ Decrease ■ Total



### 15% Savings Plan

- Foster Care (\$14.9) million
- Uniform TCM Rates (\$2.4) million
- Eligibility Efficiencies (\$2.2) million
- Contract Adjustments (\$0.4) million

### Continued Program Costs

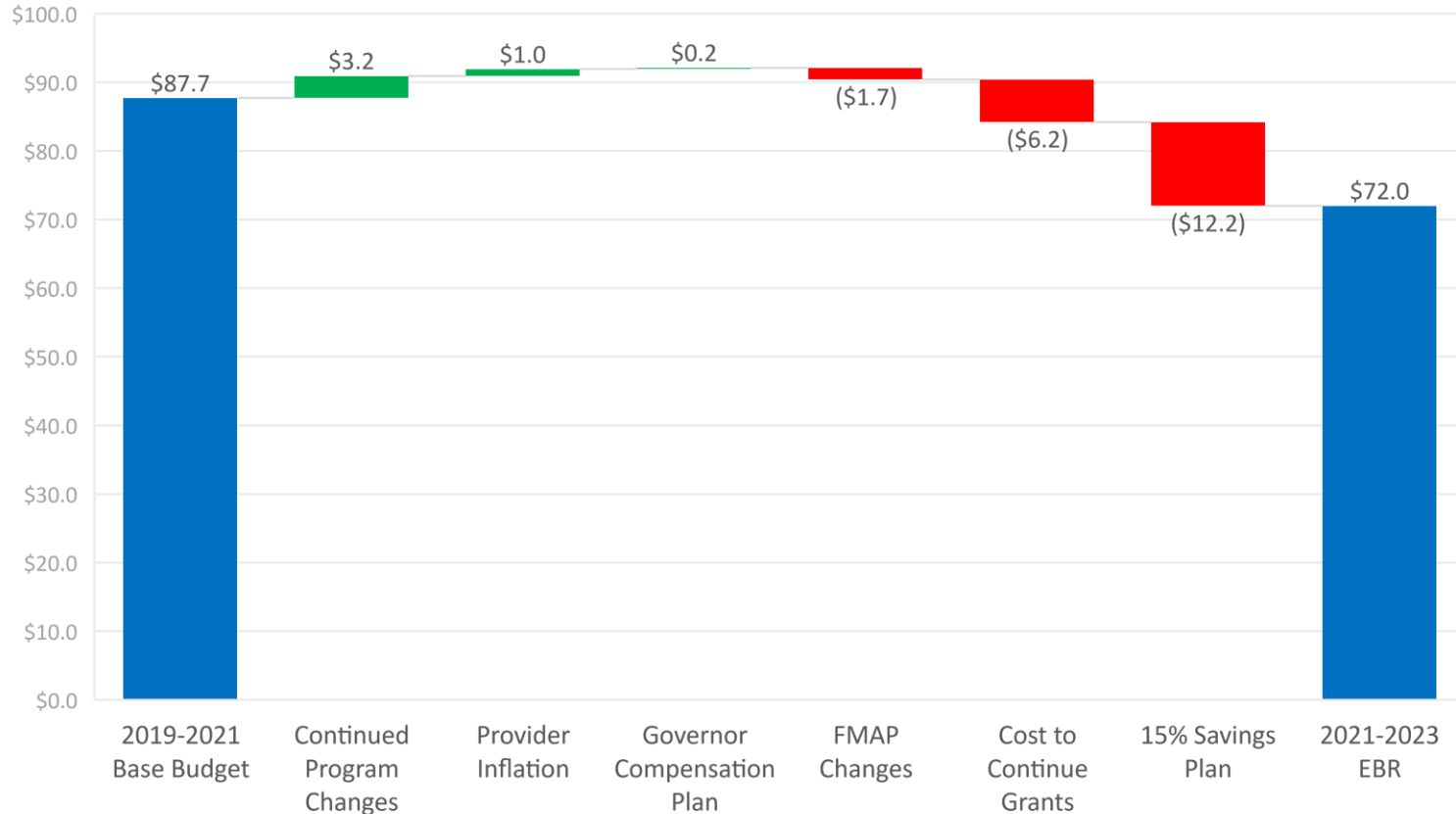
- Tribal Agreements \$2.6 million
- Special Needs Adoption \$0.7 million
- Other cost changes (\$0.6) million

# CHILDREN AND FAMILY SERVICES

## Overview of Budget Changes – General Fund

Children and Family Services General Fund

■ Increase ■ Decrease ■ Total



### 15% Savings Plan

- Foster Care (\$9.7) million
- Uniform TCM Rates (\$1.1) million
- Eligibility Efficiencies (\$1.1) million
- Contract Adjustments (\$0.3) million

### Continued Program Costs

- Tribal Agreements \$2.6 million
- Other cost changes \$0.6 million



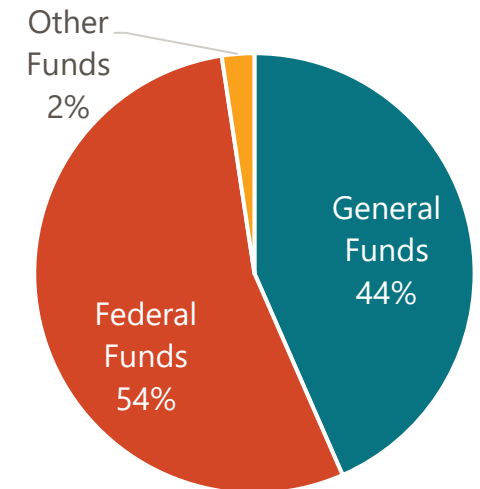
# CFS 21/23 Budget Summary

**19-21 Budget** **\$181,171,041**

**21-23 Budget (exec)** **\$165,637,720**

41.6 FTEs; no change in FTEs projected; \$15.5 million decrease in total budget (7% of reduction is from federal funds)

- Reduce foster care and residential placements, accomplished in part by investing in evidence-based parent skill building and mental health services to families
- Implement equity in payments for services to families (QRTP, subsidized adoption, targeted case mgmt.)
- Investment in early childhood integrated data system
- Replacement of child welfare technology platform



# DEPARTMENT OF HUMAN SERVICES

Quality services, Proven results, Closer to home

- 1 Base decisions on **quality, efficiency**, and **effectiveness**.

**Find success** in a resource-constrained environment.

Make **reductions** in some areas **and** **investments** in others to optimize outcomes.
- 2 The state has **enough treatment beds**. Investing in **earlier interventions** can help **avoid crisis**.

Right service. Right place. Right time.

Serving people in **lowest level of care necessary** will return **better outcomes**.

To deliver services closer to home, **all** have to be **willing to change** how they do business – DHS can't do this alone.
- 3 How we **pay** for services should be **fair** and **equitable** across systems.

**Inequity** in rates **affects** people's ability to **access** services - providers often prioritize more lucrative payment opportunities

Demonstrate value to taxpayers. **Value** equals **high quality cost efficient care**.

# CHILDREN AND FAMILY SERVICES

## Replacement of FRAME/CCWIPS

### **BUDGET AMOUNT**

\$30,000,000

\$15 M general fund  
\$15 M federal funds

### **PURPOSE**

Develop and deploy system to manage child protection, foster care, in-home supports to families, and adoption

Supports administrative efficiencies, retirement of mainframe, and requirements for continued federal program compliance







## Contact Information

Cory Pedersen, Director  
Children & Family Services Division  
600 E Boulevard Ave,  
3<sup>rd</sup> Floor, Judicial Wing  
Bismarck, ND 58505

Phone: 701-328-3587

E-mail: [ctpedersen@nd.gov](mailto:ctpedersen@nd.gov)

