This report summarizes the results of the eight regional case reviews conducted through the North Dakota Onsite Case Review (OCR) process during Calendar Year 2018.
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INTRODUCTION

Introduction

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

The overarching purpose of the reviews is to support practice improvement to strengthen the state child welfare system’s ability to achieve its’ vision of “Safe Children, Strong Families”. The ND Onsite Case Review (OCR) supports the state’s partnership with the Children’s Bureau and the Federal CFSR Process. The Onsite Reviews conducted during 2018 were intended to provide baseline data for the Round 3 Federal CFSR Program Improvement Plan (PIP). The Children’s Bureau provided secondary oversight to approximately 50% of cases for seven of the eight reviews. No ratings were changed as a result of the feedback. A primary ‘lesson learned’ through the secondary oversight process was the need to strengthen rationale statements to more clearly support the rating provided. North Dakota continues to negotiate with the Children’s Bureau regarding a PIP and a finalized plan has not yet been approved as of this writing. Therefore, this year’s data will provide context data to support statewide improvement efforts.

The OCR promotes the identification of case practices and systemic functioning which strengthen the safety, permanency and well-being of children and families served through the state’s child welfare system. Performance outcomes indicate areas of casework practice or systemic functioning which either support strong outcomes or require further CQI efforts.

MEASURING PERFORMANCE
A specified period under review (PUR) was identified for each case reviewed and represents the window of time for which practice was assessed. Case files and key case participant interviews were utilized for the case review portion of the Onsite Review week and feedback from seven Stakeholder groups was received at each regional review. The following report provides a description of the items and systemic factors, the results for the outcomes and items, a summary of the state’s performance relative to the outcomes, items and systemic factors, and a brief overview of statewide findings intended to inform ongoing CQI efforts. A final report of each regional OCR is available on the Children and Family Services Training Center website (http://www1.und.edu/centers/children-and-family-services-training-center) to assist the reader in understanding regional differences. Comparison data from North Dakota’s September 2016 Federal CFSR will serve as a reference point when considering the Child and Family Outcomes.

North Dakota is divided into eight service regions as shown in the map below:
The CY2018 case reviews were held in accordance with the following schedule:

<table>
<thead>
<tr>
<th>REGION</th>
<th>DATE</th>
<th>PUR</th>
<th>NUMBER OF CASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast- 4</td>
<td>January 22-26, 2018</td>
<td>1/17/17 – Date case reviewed</td>
<td>10 (8 FC; 2 IH)</td>
</tr>
<tr>
<td>Grand Forks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lake Region – 3</td>
<td>February 12-16, 2018</td>
<td>1/17/17-Date case reviewed</td>
<td>9 (7 FC; 2 IH)</td>
</tr>
<tr>
<td>Devils Lake</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northwest – 1</td>
<td>April 16-20, 2018</td>
<td>4/17/17 – Date case reviewed</td>
<td>6 (4 FC; 2 IH)</td>
</tr>
<tr>
<td>Williston</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Central – 7</td>
<td>May 14-18, 2018</td>
<td>4/17/17 – Date case reviewed</td>
<td>12 (7 FC; 5 IH)</td>
</tr>
<tr>
<td>Bismarck</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Central – 6</td>
<td>August 13-17, 2018</td>
<td>7/17/17 – Date case reviewed</td>
<td>5 (3 FC; 2 IH)</td>
</tr>
<tr>
<td>Jamestown</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southeast – 5</td>
<td>September 17-21, 2018</td>
<td>7/17/17 – Date case reviewed</td>
<td>12 (10 FC; 2 IH)</td>
</tr>
<tr>
<td>Fargo</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Badlands – 8</td>
<td>October 22-26, 2018</td>
<td>10/17/17 – Date case reviewed</td>
<td>4 (2 FC; 2 IH)</td>
</tr>
<tr>
<td>Dickinson</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>North Central – 2</td>
<td>November 5-9, 2018</td>
<td>10/17/17 – Date case reviewed</td>
<td>6 (3 FC; 3 IH)</td>
</tr>
<tr>
<td>Minot</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL CASES REVIEWED</strong></td>
<td></td>
<td></td>
<td>64 (44 FC; 20 IH)</td>
</tr>
</tbody>
</table>

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

The federal Onsite Review Instrument (OSRI) was utilized to capture information regarding child and family outcomes for foster care and in-home services. The revised OSRI was finalized by the Administration of Children & Families on July 2014 and updated in January 2016.

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

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

Agencies having a case reviewed received a copy of the entire OSRI for the applicable case(s).
STAKEHOLDER FEEDBACK: CFSR SYSTEMIC FACTORS

The systemic factors refer to seven systems operating within the state that have the capacity, if well-functioning, to promote child safety, permanency, and well-being outcomes. The systemic factors, comprising title IV-B and IV-E plan requirements, are: Statewide Information System (i.e. FRAME, CCWIPS); Case Review System (Child & Family Team Meetings, TPRs, etc.); Quality Assurance System (CQI & OCR); Staff and Provider Training (including foster-adoptive parents and facility staff); Service Array and Resource Development, Agency Responsiveness to the Community; and Foster and Adoptive Parent Licensing, Recruitment and Retention.

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

The ND OCR monitored ongoing functioning of the systemic factors through Stakeholder feedback during onsite case review week activities. Systemic factors for which feedback was sought was determined through negotiations with the Children and Family Services Division of the North Dakota Department of Human Services. This report will provide themes received from Stakeholders yet will not replicate the depth that is found in the individual regional reports. Identifying information of individuals, families, and agencies has been replaced with a general description to respect the confidentiality of information shared.

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
February 15, 2019
CASE FILES REVIEWS

Case Demographics

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

A cumulative review sample of forty-four (44) foster care and twenty (20) in-home services cases were identified out of an overall sample of 1,994 foster care cases and 611 in-home services cases. In the event a case was eliminated during the review week, each review site prepared alternate cases. Four sites experienced the need to move to an alternate case in five situations. The primary reason for the elimination was due to the inability to secure an interview with a key case participant. The findings in this report represent data on all cases reviewed.

Demographics of agency type for foster care cases

![CY 18 ND OCR Foster Care Case Sample by Agency Type (n=44)](image)
Demographics of children involved in in-home services cases

Ages of All Children
In-Home Services Cases
(n=54)

- Ages 14+
- Ages 1 - 4
- Ages 5 - 7
- Ages 8 - 10
- Ages 11 - 13
- Under age 1

Race of Children
In-Home Services Cases
(n=54)

- American Indian
- Unknown
- White

Ethnicity of Children
In-Home Services Cases
(n=54)

- Hispanic
- Non-Hispanic

Gender of Children
In-Home Services Cases
(n=54)

- Male
- Female

Demographics of children involved in foster care cases

Ages of All Children
Foster Care Cases
(n=113)

- Ages 14+
- Ages 1 - 4
- Ages 5 - 7
- Ages 8 - 10
- Ages 11 - 13

Ages of Target Children
Foster Care Cases
(n=44)

- Ages 14+
- Ages 1 - 4
- Ages 5 - 7
- Ages 8 - 10
- Ages 11 - 13
Reason for Agency Involvement

Reasons for agency involvement at the time the case was opened for services are identified through the course of the case review. As many reasons as were applicable to a case are selected. Substance abuse by parents and neglect (not including medical) were the primary reasons for agency involvement in both case types of the cases reviewed. Additional reasons for agency involvement are noted in the following chart:

(Note: “Other” includes inadequate supervision, housing needs, and parental incarceration)
One of the hallmarks of the ND OCR is case related interviews. These interviews are conducted with key case participants, (i.e. those directly involved in the provision or receipt of services in each case reviewed). Interviews are held either in person at the review site or by telephone. During the CY18 Onsite Reviews, 313 interviews held for the 64 cases included:

- 32 children/youths
- 71 parents
  - 41 mothers
  - 30 fathers
- 95 case managers (foster care [County, DJS, Tribal], in-home services, child protection services)
- 11 agency supervisors
- 10 Adults Adopting Special Kids (AASK) adoption staff (9 workers; 1 supervisor)
- 50 foster parents (21 relatives & 29 non-relatives)
- 44 “other” providers (alternate caregivers, guardians ad litem, therapists, regional representatives, residential facility staff, ICWA representatives, relatives speaking to key case participants’ perspectives, etc.)

**STAKEHOLDER FEEDBACK**

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

- Agency administrators
- Agency case managers
- Legal
2018 ONSITE REVIEW SUMMARY DETAILS

- Community
- Parents of children in foster care
- Foster caregivers
- Youth

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

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

Cumulative response rates for the surveys are as follows:

- Agency Administrator Stakeholder Feedback Online Survey
  - 221 participants received the survey and 66 completed responses were received
  - 30% response rate
- Agency Case Managers Stakeholder Feedback Online Survey
  - 257 participants received the survey and 105 completed responses were received
  - 41% response rate
- Legal Stakeholder Feedback Online Survey
  - 289 participants received the survey and 62 completed responses were received
  - 21% response rate
- Community Stakeholder Feedback Online Survey
  - 833 participants received the survey and 137 completed responses were received
  - 16% response rate
- Parent Stakeholder Online Survey
  - 18 surveys were completed online or via the mail.
  - Unable to determine how many parents were provided information about this opportunity to determine a response rate.

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

- Youth stakeholder meeting: 32 participants
- Foster caregiver stakeholder meeting: 60 participants
SAFETY PERFORMANCE

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

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

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

CY18 OCR Results: Twenty-one (21) cases received a strength for item 1 meaning that investigations (i.e. CPS Assessments) were initiated in a timely manner, and face-to-face contact with the alleged victim was made within the established timeframe for applicable cases.

FC – 85% of 13 cases rated a Strength; IH - 71% of 14 cases rated a Strength

Key strengths noted related to performance on Item 1:
When rated a strength, the agency initiated their response timely in all reports received and the face-to-face contact with alleged victims occurred within the timeframes required in state regulations. In many situations, the agency’s response exceeded state standards for face-to-face contact occurring within the timeframes set forth in state law. Furthermore, strong collaboration between county agencies to address children’s safety was noted in many regions.

Key areas needing further examination related to performance on Item 1:
The agency’s efforts to initiate their response to a report of child maltreatment was not timely in four separate situations. There were also six situations in which face-to-face contact with all alleged victims occurred outside the state’s established timeframes. In most situations, workload and workforce challenges were identified as a contributing factor.
SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT

FC – 85% of 13 cases Substantially achieved; IH – 71% of 14 cases Substantially Achieved

Key strengths related to overall performance on Safety Outcome 1:

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

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

The agency’s efforts to initiate a response to an accepted maltreatment report was found to be outside established timeframes in four situations and face-to-face contact with all alleged victims within a report was not completed timely in another six situations. These situations involved Category “B” or “C” reports.
**ITEM 2: SERVICES TO FAMILY TO PROTECT CHILD(REN) IN THE HOME AND PREVENT REMOVAL OR RE-ENTRY INTO FOSTER CARE**

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

**CY18 OCR Results:** Twelve (12) cases achieved a strength rating for this item indicating the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification whenever possible and appropriate.

**FC – 70% of 10 cases rated as a Strength; IH – 71% of 7 cases rated as a Strength**

**Key strengths noted related to performance on Item 2:**

Agencies made concerted efforts to provide or arrange for the family to protect the children and prevent their entry into foster care. Example of services provided to address the safety of children in the home and/or prevent (re)entry into foster care included: immediate substance abuse assessments and treatments (including random UA testing and hair follicle testing for the children), parent aide, intensive in-home family therapy and intensive in-home case management services. In five applicable situations, the agency was unable to make concerted efforts to prevent the child’s removal and placement into foster care because immediate removal was necessary to ensure the child’s safety.

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

When rated an area needing improvement, concerted efforts were not made to provide appropriate safety-related services to children remaining in the home despite safety concerns being present. In some cases, there were concerns that all safety issues were not fully assessed or that all available safety services were fully considered. Delays in service delivery were also noted in some affected cases.
CHILD AND FAMILY OUTCOMES

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

ITEM 3: RISK AND SAFETY ASSESSMENT AND MANAGEMENT

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

CY18 OCR Results: Forty-six (46) cases were rated as a strength for Item 3 because the agency properly assessed all applicable individuals for risk and safety and appropriately addressed all identified concerns.

Key strengths noted related to performance on Item 3:
The agency conducted an initial assessment that accurately assessed all the risk and safety concerns in 19 applicable cases and ongoing assessments that accurately assessed all risk and safety concerns at critical case junctures occurred in 48 of the cases. When rated a strength, assessments were completed using formal and informal assessment efforts, including completion of the Family Assessment Instrument, vigilant monitoring of safety during monthly caseworker visits, and discussion of safety concerns at Child and Family Team Meetings. When safety concerns were present, the agency developed an appropriate safety plan with the family and continually monitored the safety plan as needed, including monitoring family engagement in safety-related services in 13 applicable cases. Additionally, all safety concerns pertaining to children in the family home were adequately or appropriately addressed by the agency in 22 of 27 applicable cases. Other practice strengths noted was that the safety of the target child in foster care during visitation with parent/family that was adequately or appropriately addressed by the agency in 32 of 33 foster care cases. Furthermore, any concerns for the target child’s safety in the foster home or placement facility were adequately or appropriately addressed by the agency in 42 of 44 foster care cases.

Key areas needing further examination related to performance on Item 3:
When rated an area needing improvement, evidence was not found that a thorough and comprehensive assessment of all safety and risk was conducted either initially or on an ongoing basis. For five situations in which safety concerns were present, it was not evident that the agency developed an appropriate safety plan with the family or continually monitored
CHILD AND FAMILY OUTCOMES

the safety plan. Furthermore, evidence that safety concerns for children in the family home was adequately addressed by the agency was not found for one situation. Systemic challenges potentially impacting performance in this outcome were agency challenges with staff turnover and transferring cases from one worker to another.
CHILD AND FAMILY OUTCOMES

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

FC – 77% of 44 cases Substantially achieved; IH – 55% of 20 cases Substantially Achieved

Key strengths related to performance on Safety Outcome 2:
When Substantially Achieved, safety services to the family were provided immediately to remediate safety concerns and support the children remaining in the home. Evidence of strong initial and/or ongoing assessment of safety/risk and safety planning to address safety concerns was evident in many cases. There was a thorough and appropriate consideration of the individual concerns existing within the family, caseworker’s use of formal and informal assessments through collateral contacts, visitations with the target child, safety discussions at Child and Family Team Meetings, and communication with foster parents/providers as means to accomplish safety/risk assessments. There were no safety or risk concerns to the target child in foster care during visitation or in their placement setting for 42 of the 44 target youth during this review.

Key areas needing further examination related to performance on Safety Outcome 2:
Key areas for further examination noted in the review involved not providing timely safety services when safety concerns were present. Other contributing factors found in some cases: safety and risk assessments not routinely including all the children in the family (when appropriate); ongoing assessments of safety and risk were not always done at important junctures in the case, such as when the case was closed for services; concerns that safety and risk assessments were not always comprehensive; and, concerns that safety plans were not adequate or monitored appropriately given the circumstances of the case. A few cases experienced significant delays in transitioning cases from CPS to in-home services.
**CHILD AND FAMILY OUTCOMES**

**PERMANENCY PERFORMANCE**

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

**ITEM 4: STABILITY OF FOSTER CARE PLACEMENT**

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

**CY18 OCR Results:** Forty (40) cases received a strength for item 4. In these cases, the child either remained in a stable placement throughout the PUR or until they were discharged from foster care or had another placement which better met the child’s case goals.

**Key strengths noted related to performance on Item 4:**

In all foster care cases reviewed, 35 target children had only one placement setting, 6 target children had two placement settings, and 3 target children had 3 or more placement settings during the PUR. These 44 target children experienced a total of 57 placement settings during the PUR (26 non-relative foster care, 15 relative foster care, 8 residential setting, and 8 pre-adoptive home). Of the nine (9) youth experiencing a placement move, the placement change was planned by the agency in an effort to achieve the child’s case goals or meet the needs of the child in 5 of the situations. Furthermore, the current or most recent placement setting for 43 youth was stable at the time of the review. Results indicate the agency made concerted efforts to provide appropriate services and resources to facilitate placement stability in most situations throughout the state.

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

Results indicate 4 target youth experienced placement moves that were not specifically planned by the agency in an effort to achieve case goals or meet the needs of the child and 1 target youth’s placement was not stable at the time of the review. Contributing factors to these challenges appear to be associated with the agency’s ability to assess the needs of the caregiver and children in unplanned or emergency placements.
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS

ITEM 5: PERMANENCY GOAL FOR CHILD

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

CY18 OCR Results: Twenty-seven (27) cases received a strength for Item 5 indicating that the permanency goal was appropriate for the child and was established in a timely manner.

Key strengths noted related to performance on Item 5:
Permanency goals in effect during the PUR were established in a timely manner for 74% of cases and the permanency goals were appropriate to the child’s needs and circumstances in 79% of cases. Throughout the PUR, 59 permanency goals were assessed: Reunification (26); Guardianship (5); Adoption (25); and Other Planned Permanent Living Arrangement (3). Furthermore, the agency either filed or joined a termination of parental rights petition in a timely manner or an exception applied for 96% of 23 applicable cases.

Key areas needing further examination related to performance on Item 5:
The timely establishment of permanency goals based on the circumstances of the case was found to be the presenting concern when rated an area needing improvement. While many situations involved the adoption permanency goal not being established in a timely manner, there were also several situations in which the goal of reunification remained an active goal in the case despite no active plans or indication reunification was likely.

<table>
<thead>
<tr>
<th>Item 5</th>
<th>Percentage of Applicable Cases</th>
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<tbody>
<tr>
<td>2016 Federal Review (n=40)</td>
<td>80% 20%</td>
</tr>
<tr>
<td>CY18 Statewide (n=43)</td>
<td>63% 37%</td>
</tr>
<tr>
<td>CY18 NW Region (n=4)</td>
<td>25% 75%</td>
</tr>
<tr>
<td>CY18 NC Region (n=3)</td>
<td>33% 67%</td>
</tr>
<tr>
<td>CY18 LR Region (n=7)</td>
<td>71% 29%</td>
</tr>
<tr>
<td>CY18 NE Region (n=8)</td>
<td>75% 25%</td>
</tr>
<tr>
<td>CY18 SE Region (n=10)</td>
<td>90% 10%</td>
</tr>
<tr>
<td>CY18 SC Region (n=3)</td>
<td>33% 67%</td>
</tr>
<tr>
<td>CY18 WC Region (n=6)</td>
<td>50% 50%</td>
</tr>
<tr>
<td>CY18 BL Region (n=2)</td>
<td>50% 50%</td>
</tr>
</tbody>
</table>
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS

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

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

CY18 OCR Results: Twenty-one (21) cases received a strength for item 6 because the agency and courts made concerted efforts to achieve the permanency goal in a timely manner.

Key strengths noted related to performance on Item 6:

Concerted efforts by the agencies and courts towards timely achievement of permanency goals were seen in: 79% of cases with a plan of reunification; 50% of cases with a plan of guardianship; 20% of cases with a plan of adoption; and 100% of the children with a goal of OPPLA who were placed in a permanent living arrangement (note: permanency goal totals may not equal the number of cases because some cases have 2 permanency goals).

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

The lack of concerted efforts to achieve the goal of adoption for children in a timely manner impacted most cases with this identified permanency goal. Factors noted include: delays in filing for TPR in a timely manner; court related delays (e.g., hearings and decisions) and most notably, delays related to adoption services provision (e.g., adoption agency staffing resources, adoption paperwork process, time to completed adoption home study, etc.). Lack of effective concurrent planning was also noted as a contributing factor in cases where more than one permanency goal was identified.
CHILD AND FAMILY OUTCOMES

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS

Key strengths related to performance on Permanency Outcome 1:
Placement stability was achieved for target children in 91% of the cases reviewed. Permanency goals for the target child were established timely and remained appropriate throughout the PUR in 63% of the cases reviewed. Furthermore, permanency was achieved for target children through concerted efforts by the agency and courts in 48% of the cases reviewed.

Key areas needing further examination related to performance on Permanency Outcome 1:
Delays in both the establishment of appropriate and timely permanency goals (based on the circumstances of the case) and achievement of permanency, primarily through adoption, were factors noted to impact performance relative to this outcome.
CHILD AND FAMILY OUTCOMES

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

ITEM 7: PLACEMENT WITH SIBLINGS

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

CY18 OCR Results: Twenty-two (22) cases received a strength indicating the agency made concerted efforts to place siblings together or separated the siblings due to the specific needs within the sibling group.

Key strengths related to performance on Item 7:

The target youth was placed with all siblings in 52% of the applicable cases. When all siblings could not be placed together, a valid reason for the sibling separation existed in 91% of the applicable cases (10 of 11). Overall, this was a strong area of practice within the state and focus to ensure siblings were placed together in foster care when possible was evident.

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

In the one case rated an Area Needing Improvement, a large sibling group was separated into three separate homes because one or two foster families able to care for sibling groups were not available. Similar resource challenges were shared by Stakeholders during the reviews but did not impact reviewed cases. Readers are encouraged to review data regarding the Diligent Recruitment of Foster and Adoptive Homes systemic factor for more information.
CHILD AND FAMILY OUTCOMES

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

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

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

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

CY18 OCR Results: Twenty-seven (27) cases were rated as a strength for Item 8 indicating that the agency ensured that the visits between the child and his/her siblings and/or parents were of sufficient frequency and quality to maintain the relationship.

Key strengths related to performance on Item 8:

The agency made concerted efforts to ensure frequency and quality of visits sufficient to maintain and support continuity of the relationship with each group of applicable cases as follows: Mothers > 91%; fathers > 79%; and siblings in foster care, not placed together > 100%. Evidence of creativity in the location and frequency of visits occurring in the target child’s home and community were noted.

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

In cases rated an Area Needing Improvement, the challenges were primarily associated with insufficient efforts to engage parents (mothers and fathers), and scheduling challenges for parents when the agency utilized a community visitation center.
CHILD AND FAMILY OUTCOMES

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

ITEM 9: PRESERVING CONNECTIONS

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

CY18 OCR Results: Thirty-five (35) cases received a strength for item 9 because the agency made concerted efforts to maintain the child’s significant prior connections.

Key strengths related to performance on Item 9:

Concerted efforts were made to maintain the child’s important connections (for example, neighborhood, community, faith, language, extended family members including siblings who are not in foster care, Tribe, school, and/or friends) in 88% of all applicable cases. Maintaining the target child in the same school and visits with siblings not in foster care and extended family were some of the methods noted. Sufficient inquiry was conducted to determine whether a child may be a member of, or eligible for membership in, a federally recognized Indian Tribe in 95% of the cases. In 100% of the applicable cases (n=10), Tribes were provided timely notification concerning court proceedings. In 90% of the applicable cases, children were placed in foster care in accordance with ICWA placement preferences or concerted efforts were made to do so.

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

When rated an Area Needing Improvement, most cases involved a lack of concerted efforts to maintain the child’s important connections to extended family (maternal, paternal, siblings not in care, etc.). In another situation, evidence that concerted efforts to place in accordance with ICWA placement preferences was not found.
CHILD AND FAMILY OUTCOMES

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

ITEM 10: RELATIVE PLACEMENT

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

CY18 OCR Results: Thirty-five (35) cases were rated as a strength for Item 10. In these cases, the agency made concerted efforts to identify and place the child with appropriate relatives.

Key strengths related to performance on Item 10:

The target child’s current, or most recent, placement was with a relative in 41% of 39 applicable cases. In 100% of relative placement cases, the child’s placement with a relative was considered stable and appropriate to his/her needs.

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

When rated an Area Needing Improvement, the agency did not make concerted efforts to identify, locate, inform, and/or evaluate relatives. This was especially evident in situations where the target child entered foster care at a very young age. In half of the cases that received an ANI, concerted efforts were not made to identify, locate, information and/or evaluate maternal relatives. One situation did not reflect similar efforts to consider paternal relatives and another situation did not reflect efforts to consider either maternal or paternal relatives.
CHILD AND FAMILY OUTCOMES

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

ITEM 11: RELATIONSHIP OF CHILD IN CARE WITH PARENTS*

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

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

CY18 OCR Results: Twenty-two (22) cases were rated as a strength for item 11 indicating the agency made concerted efforts to strengthen the parent/child relationship through activities beyond arranging visits.

Key strengths related to performance on Item 11:

Concerted efforts were made to promote, support, and otherwise maintain a positive, nurturing relationship between the child in foster care and his or her mother in 91% of 23 applicable cases. Similar efforts were seen to support a positive, nurturing relationship between the child in foster care and his or her father in 79% of 14 applicable cases. Examples of efforts noted include the agency engaging parent’s participation in medical appointments, school activities, FaceTime/Skype contacts, family therapy, and/or mentoring by the foster caregiver.

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

When rated an Area Needing Improvement, the concerns were associated with insufficient efforts to engage parents or provide opportunities to participate in activities intended to strengthen the parent/child relationship through efforts other than visitation. An isolated situation involved the lack of clear documentation in the case record indicating contact between the child in foster care and their parents was not in the child’s best interest.
PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN

Key strengths related to performance on Permanency Outcome 2:
Children in foster care were placed together with other siblings in care, or a valid reason why they could not be together existed throughout the PUR, in 96% of the applicable 22 cases. Agency efforts to support visitation between the child in foster care and their parent(s) or other siblings in care placed separately was a strength in 90% of the applicable 27 cases. Concerted efforts to preserve connections for target children were noted in 85% of the 35 applicable cases. It was noted that in all applicable cases (n=10), the Tribe was provided timely notification of its right to intervene in the court proceeding for the applicable children. The target child’s placement with, or consideration of, relatives was rated a strength in 90% of the applicable 35 cases. Furthermore, agency efforts to support the target child’s relationship with their parents through efforts other than visitation was rated a strength in 88% of the 22 applicable cases.

Key areas needing further examination related to performance on Permanency Outcome 2:
Concerted efforts to ensure parents are engaged in activities designed to strengthen their relationship with the child in foster care, concerted efforts to conduct comprehensive and thorough relative searches, and maintaining connections for children placed as infants offer practice areas worthy of further examination.
CHILD AND FAMILY OUTCOMES

WELL-BEING PERFORMANCE

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

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

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

CY18 OCR Results: Thirty-eight (38) cases were rated a strength for Item 12 because the agency made concerted efforts to accurately and comprehensively assess the needs of the child, parents, and foster parents and provided the appropriate services to meet the needs of all the family.

**FC – 68% of 44 cases rated as a Strength; IH – 40% of 20 cases rated as a Strength**

Key strengths related to performance on Item 12:

Concerted efforts noted in cases receiving a strength rating often included the use of ongoing formal and informal assessments, including use of the Family Assessment Instrument, regular Child and Family Team meetings and caseworker visits.

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

Predominant challenges noted when sub-items were rated an Area Needing Improvement involved the agency’s efforts to accurately and comprehensively assess the needs on an ongoing basis as well as to provide appropriate services to meet the identified needs. These challenges were noted in both foster care and in-home services.
WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS

ITEM 12A: NEEDS AND SERVICES TO CHILD

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

CY18 OCR Results: Fifty-two (52) cases were rated as a strength for Item 12A because the agency properly assessed and addressed the needs for the applicable children during the PUR.

FC – 89% of 44 cases rated as a Strength; IH – 65% of 20 cases rated as a Strength

Key strengths related to performance on Item 12A:
The agency conducted formal or informal initial and/or ongoing comprehensive assessments that accurately assessed the child’s needs of 84% of 64 cases. Appropriate services were provided to meet the child’s needs in 86% of the 57 cases.

Key Areas needing further examination related to performance on Item 12A:
When rated an area needing improvement, indication that the agency conducted a comprehensive and accurate ongoing assessment of the children’s needs was not evident. For some in-home case situations, evidence was not found that the agency assessed the needs of all alternate care givers or considered the needs of all children in the home. Furthermore, for target youth over age 16, the Independent Living Plan was not contained in some case files.
CHILD AND FAMILY OUTCOMES

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

ITEM 12B: NEEDS AND SERVICES TO PARENTS

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

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

CY18 OCR Results: Twenty-eight (28) cases received a strength for item 12B indicating the agency made concerted efforts to assess the needs of applicable parents and provide services to address identified needs and accomplish case goals.

FC – 69% of 29 cases rated as a Strength; IH – 40% of 20 cases rated as a Strength

Key strengths related to performance on Item 12B:

Concerted efforts were made both to assess and address the needs of mothers in 71% of 48 cases (76% of 29 foster care cases and 63% for 19 in-home services cases). Similar efforts were noted to address the needs of fathers in 55% of 38 cases (70% of 23 foster care cases and 33% of in-home services cases).

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

The agency did not conduct a formal or information initial and/or ongoing comprehensive assessment that accurately assessed the mother’s needs in 15% of 48 cases (14% of 29 foster care cases and 15% of 19 in-home services cases). Similar challenges for fathers were noted in 60% of 38 cases (26% of 23 foster care cases and 60% of in-home services cases). Appropriate services were not provided to meet the mother’s needs in 29% of 48 cases (24% of 29 foster care cases and 37% of 19 in-home services cases). Appropriate services were not provided to meet the father’s needs in 43% of 37 cases (30% of 23 foster care cases and 64% of 14 in-home services cases). A general pattern of concern within all case types about the quality of assessments to inform/identify service provision emerged. At times, systemic service array barriers impacted an agency’s ability to ensure appropriate services were provided, especially when a parent was dealing with substance abuse issues.
CHILD AND FAMILY OUTCOMES

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

ITEM 12C: NEEDS AND SERVICES OF FOSTER PARENTS

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

CY18 OCR Results: Thirty-three (33) foster care cases were rated a strength indicating the agency made concerted efforts to assess the needs of foster parents to support their ability to care for the target child and provided appropriate services for the identified needs.

### Item 12C

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Percentages may not total to 100% due to rounding

Key strengths related to performance on Item 12C:

The agency adequately assessed the needs of the foster or pre-adoptive parents related to caring for the children in their care on an ongoing basis in 85% of 40 cases. The agency provided appropriate services to foster and pre-adoptive parents related to caring for the children in their care in 82% of 38 cases.

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

A central theme within cases rated an Area Needing improvement did not emerge. Observed challenges ranged from foster parents not receiving initial support or information at the onset of a placement or foster parents not having their needs assessed on a regular basis following initial placement. Some foster parents did not receive appropriate services to meet identified needs, such as in the case of transportation assistance.
CHILD AND FAMILY OUTCOMES

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

ITEM 13: CHILD AND FAMILY INVOLVEMENT IN CASE PLANNING

“Parents” are defined more broadly for Item 13 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.

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

CY18 OCR Results: Thirty-nine (39) cases were rated as a strength for Item 13 indicating the agency adequately involved developmentally-appropriate children and all parents in the case planning process.

FC – 76% of 37 cases rated as a Strength; IH – 55% of 20 cases rated as a Strength

Key strengths related to performance on Item 13:

Concerted efforts to actively involve the child in the case planning process was noted in 75% of 36 cases (84% of 25 foster care cases and 55% of 11 in-home services cases). Similar efforts were noted to involve the child’s mother in the case planning process for 90% of 48 cases (97% of 29 foster care cases and 79% of 19 in-home services cases) Fathers were actively involved in the case planning process by the agency for 65% of 37 cases (74% of 23 foster care cases and 50% of 14 in-home services cases).

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

In general, performance challenges for this item include a lack of involving fathers in case planning, particularly for non-custodial fathers and for in-home services cases. Additionally, challenges were noted when the agency did not involve all children in the case planning process, especially for in-home services cases. In a few of the cases reviewed, the case was rated an Area Needing Improvement because no member of the family appeared to be adequately involved in the case planning process.
CHILD AND FAMILY OUTCOMES

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

ITEM 14: CASEWORKER VISITS WITH CHILD

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

CY18 OCR Results: Forty-nine (49) cases were rated as a strength for item 14. In each of these cases, the caseworker had visits with the child that were of sufficient frequency and quality to meet the needs of the child and promote achievement of case goals.

FC – 84% of 44 cases rated as a Strength; IH – 60% of 20 cases rated as a Strength

Key strengths related to performance on Item 14:

67% of the visits between the case manager and child(ren) in the 64 cases occurred at least one times per month and 19% of the visits occurred at least twice a month. There were no cases reviewed in which the caseworker had no face-to-face contact with the child during the PUR. The typical pattern of visits between the caseworker and the child(ren) was sufficient to meet their needs in 86% of the cases (98% of the 44 foster care cases and 60% of the 20 in-home services cases). Quality visitation occurred in 83% of the 64 cases (84% of the foster care cases and in 80% of the in-home services cases)

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

Concerns noted in IH cases rated an Area Needing Improvement primarily involved caseworkers not having face-to-face contact with all the children in the home. Concerns about the quality of caseworker visits with children across foster care and in-home services cases were associated with the following factors: not visiting with children individually/alone/apart from caretakers, not conducting face-to-face visits with children in the home environment or primarily in public locations. Concerns noted in items 3, 12, 17 and 18 are often associated with low-quality caseworker visits.
CHILD AND FAMILY OUTCOMES

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

ITEM 15: CASEWORKER VISITS WITH PARENTS

“Parents” are defined more broadly for Item 15 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.

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

CY18 OCR Results: Thirty-three (33) cases were rated as a strength for Item 15 because the agency conducted visits with the parents that were of sufficient frequency and quality to promote the achievement of case goals.

Key strengths related to performance on Item 15:

They typical pattern of visits between the case worker and mother occurring at least once a month or more was noted for 68% of the 48 cases. The typical pattern of visits between the caseworker and father occurring at least one a month or more was noted for 49% of the 37 cases. Agency efforts to ensure both the frequency and quality of caseworker visitation with the mother was sufficient to meet the needs of the case was rated a strength in 77% of 48 cases (79% of 29 foster care cases and 74% of 19 in-home services cases). Similar efforts by the agency to ensure frequent and quality visitation with the father was sufficient to meet the needs of the case was rated a strength in 62% of the 37 cases (65% of 23 foster care cases and 57% of 14 in-home services cases).

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

When rated an area needing improvement, the typical pattern of visitation between caseworker and the mother occurring less than once a month was noted in 27% of the 48 cases and 4% of mothers never had a visit. The typical pattern of visitation between caseworker and father occurring less than once a month was noted in 27% of the 37 cases and 24% of fathers never had a visit. Oftentimes challenges occurred with the non-custodial parent. Inconsistencies in practice across and within agencies was noted in many cases impacting this item.
FC – 61% of 44 cases rated Substantially Achieved; IH – 40% of 20 cases rated Substantially Achieved

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Percentages may not total to 100% due to rounding

Key strengths related to performance on Well-Being 1:

Agency efforts to assess and address the needs of the child, parents, and foster parents was rated a strength in 59% of the 64 cases. The strongest contribution to Item 12 was related to the agency’s efforts to assess and address the needs of the foster parents (83% of 44 cases). Child and family involvement in case planning was achieved as a strength for 68% of the 57 cases. Caseworker Visits with Child was rated a strength in 77% of the 64 cases and caseworker visits with parents was rated a strength for 67% of the cases.

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

Challenges were noted in both foster care and in-home services related to performance on Well-Being Outcome 1. Observed contributing factors included inconsistent service provisions within cases, lapse in visits with children and parents due to transitions from one caseworker to another and service array barriers impacting the agency’s ability to provide appropriate services to parents.
CHILD AND FAMILY OUTCOMES

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

ITEM 16: EDUCATIONAL NEEDS OF THE CHILD

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

CY18 OCR Results: Thirty-five (35) case were rated as a strength for Item 16. In this case, the agency assessed and provided appropriate services to meet the educational needs of the child(ren) in the course of case planning.

FC – 91% of 35 cases rated as a Strength; IH – 100% of 3 cases rated as a Strength

Key strengths related to performance on Item 16:
The agency made concerted efforts to accurately assess the education needs of the children in 95% of 38 cases (94% of 35 foster care cases and 100% of 3 in-home services cases). The agency engaged in concerted efforts to address the identified educational needs through appropriate services in 93% of 29 cases (92% of 26 foster care cases and 100% of in-home services cases). In many cases individualized educational plans (IEPs), early intervention assessments, occupational, physical and speech therapy services, and Early Head Start were utilized throughout the PUR. Effective communication/coordination of efforts between schools, agency, foster care staff and foster parents, children/youth, and parents was evident.

Key areas needing further examination related to performance on Item 16:
When rated an Area Needing Improvement, evidence that the agency made concerted efforts to assess the target youth’s education needs during case planning was not found in some foster care situations. Agency reliance on foster parents and the foster parent agency to assume much of this responsibility during the PUR was noted as a common concern.
Key strengths related to performance on Well-Being Outcome 2:

The agency made concerted efforts to accurately assess children’s educational needs throughout the PUR in 94% of the 38 cases. Appropriate services were provided to address identified needs in 93% of 29 cases. Strong casework practice and collaborative partnerships within communities was evident during the reviews.

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

When rated an area needing improvement, concerns focused on agency efforts to assess the ongoing educational need of foster youth through case planning.
CHILD AND FAMILY OUTCOMES

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

ITEM 17: PHYSICAL HEALTH OF THE CHILD

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

CY18 OCR Results: Forty-four (44) cases were rated as a strength for this item indicating the agency addressed the physical health needs of the child, including dental needs of the child(ren).

FC – 75% of 44 cases rated as a Strength; IH – 92% of 12 cases rated as a Strength

Key strengths related to performance on Item 17:

The agency accurately assessed the children’s physical health needs in 93% of the 56 cases and accurately assessed the children’s dental health needs in 94% of the 48 cases. The agency also ensured that appropriate and timely services were provided to the children to address all identified physical health needs in 83% of 48 cases. Services often included (but not limited to): Health Tracks screenings, Immunizations, Early Intervention services, medical procedures, Physical and Occupational Therapy. The agency ensured appropriate services were provided to the children to address all identified dental health needs in 88% of 42 cases. Dental services provided primarily involved regular dental examinations along with some orthodontia services. The agency provided appropriate oversight of prescription medications for the physical health issues of the target child in foster care for 77% of the 13 cases.

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

Noted challenges included delays in dental examinations, a lack of providers able to provide dental services for children under the age of 3, and a lack of documentation regarding the agency’s efforts to assess and monitor a foster child’s medical condition.
CHILD AND FAMILY OUTCOMES

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

ITEM 18: MENTAL/BEHAVIORAL HEALTH OF THE CHILD

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

CY18 OCR Results: Twenty-six (26) cases were rated a strength for Item 18 revealing the agency assessed and provided (or was providing) appropriate services to meet the mental and behavioral health needs of the child.

FC – 78% of 27 cases rated as a Strength; IH – 56% of 9 cases rated as a Strength

Key strengths related to performance on Item 18:

The agency accurately assessed the children’s mental/behavioral health needs in 83% of 36 cases. Appropriate services were provided to the children to address all identified mental/behavioral health needs in 72% of 32 cases. Appropriate oversight of prescription medications for the mental/behavioral health issues of the target child in foster care was provided to 78% of 9 cases.

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

When cases were rated an Area Needing Improvement, there was a general pattern of a lack of comprehensive assessments or a lack of services/significant delays in service provision to address the identified mental/behavioral health needs. Inconsistent practice within cases during the PUR was also noted.
CHILD AND FAMILY OUTCOMES

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

FC – 64% of 44 cases rated Substantially Achieved; IH – 71% of 17 cases rated Substantially Achieved

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

When rated substantially achieved, concerted agency efforts to ensure physical, dental and vision health needs of children were assessed and addressed was achieved in 44 of 56 cases (75% of 33 foster care cases; 91% of 12 in-home services cases). Concerted efforts to ensure the mental/behavioral health needs of children were appropriately assessed and addressed was achieved in 72% of 36 cases (78% of 27 foster care cases and 56% of 9 in-home services cases).

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

A general concern noted in cases rated Partially Achieved or Not Achieved involved challenges related to the provision of appropriate oversight of prescription medications related to the physical health and/or mental/behavioral health needs of foster youth. Other concerns noted involved not conducting a comprehensive assessment of needs or delays to providing appropriate services often related to service array challenges.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

Stakeholder feedback on Systemic Factors

CASE REVIEW SYSTEM: WRITTEN CASE PLANS

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

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

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

![Written Case Plans](chart)

Note: Parents were afforded a “Does not apply” option and one (1) parent chose that option for the first question and (9) parents chose that option for the second question in the table above.

B. Questions asked of the Parents include the following [n=21]:

- **I have a clear understanding of what their family needed to accomplish before their case could be closed**
  - Strongly Agree (6); Agree (7); Disagree (5); Strongly Disagree (3); Does Not Apply (0)
- **My family’s case plan has information about the following items:**
  - A. My children’s placement:
    - Strongly Agree (7); Agree (8); Disagree (2); Strongly Disagree (3); Does Not Apply (1)
  - B. My child/ren’s school progress:
    - Strongly Agree (5); Agree (8); Disagree (2); Strongly Disagree (4); Does Not Apply (2)
  - C. My child/ren’s health progress:
    - Strongly Agree (7); Agree (9); Disagree (1); Strongly Disagree (4); Does Not Apply (0)
- **Please comment on anything else you’d like to share about your family’s case plan (optional):**
  - Seven comments were received. Comments ranged from expressing frustration with the case planning process (“very disappointing”) to expressing appreciation (“I appreciate the help I have been getting so far”).

C. Questions asked of the Foster caregivers include the following:

- **Do you, in your role as caregiver for the foster child/youth, participate in meetings where case plans are created (also known as Child and Family Team meetings - CFT meetings)?**
  - There was consensus among groups that they generally attend Child and Family Team meetings.
• If so, from your perspective, are case plans developed jointly with the children’s parents?
  o There was consensus that yes, case plans are developed jointly with the children’s parents from their perspective. Additional comments added that it may depend on case manager or agency. At times, comments were made reflective that some case plans were developed by the agency and then shared with the parents at the meeting.

• Describe examples of how you have observed the agency try to involve the parents in the development of the plan
  o Common examples shared include:
    ▪ “The parent is involved at every meeting, even by phone, if not able to be there in person.”
    ▪ “The parent was aware of all that was going on until the TPR occurred; efforts made by the agency to make sure everybody was included – bio parents, tribe, etc. and that they knew what the plan was.”
    ▪ Caregivers have seen the agency send out “letters to parents (Lots of correspondence), not sure what the agency gets back in return.”

• As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
  o There was consensus among group that yes, parents are as involved as they want to be.
  o A couple specific comments include:
    ▪ “The parents have more rights than the kids. I get frustrated with their non-participation. They may say they want their kids, but will they do what they need to do?”
    ▪ “Sometimes, parents are intimidated and don’t want to speak but they (caseworkers) make efforts to pull them in.”

D. Questions asked of the Youth include the following:
• What is your understanding of how the agency involved your parent(s) in the development of the plan?
  o There was consensus among most participants that the agency involved parents through team meetings in person or on the phone. Some parents were no longer involved as parental rights had been terminated.
  o A couple specific comments include:
    ▪ “My caseworker let us know what my parent needs to do to stabilize. My parent was involved in making these decisions, too.”
    ▪ “One of my parents was involved, got letters and when in jail could participate by phone, gave input, but couldn’t get to choose what happened to me, the whole team did. One of my parents wasn’t involved.”

• How have you worked on the development of your case plan? Follow up questions: Were you invited to CFT meetings? Were meetings held at times you were able to attend without missing school, etc.?
  o Participants indicated they were invited to CFT meeting and involved in some way.
  o A few specific comments include:
    ▪ “My caseworker is really flexible with her time - she works around schedules and has been successful to be part of a phone call meeting – I always feel a part of the development of the plan.”
    ▪ “My caseworker is similar. I usually attend in person, sometimes by phone during the school day. My school are willing to participate too.”
    ▪ “I was able to give input and talk about what I wanted”
    ▪ “held at times I could attend”
    ▪ “In the beginning when in placement I didn’t have much choice, but I do now.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERIODIC REVIEWS

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

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

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

  ![Child and Family Team Meetings (n=149) Graph]

  - CFT’s are scheduled and held at least every 3 months

- At CFT Meetings, the following topics are addressed:

  ![Child and Family Team Meetings: Topics Graph]

  - The safety of each child in the family (n=281)
  - The family’s case plan (n=282)
  - The permanency goal for all children (n=277)

  Note: Parents and Community members were afforded a “Do not Recall” option and three (3) respondents chose that response for the first question, two (2) respondents chose that response for the second question and seven (7) respondents chose that option for the third question in the table above.

- Respondents who did not respond “Strongly Agree” were asked: When topics relating to safety of all children in the family, family case plan tasks, or the permanency goal for all children in foster care at CFT Meetings does not occur, please briefly explain noted barriers. The following comments represent statewide themes regarding reported barriers:
  - “If a foster child is adjudicated unruly, the safety of children in the home who are not in foster care may not be discussed.”
  - “Lack of parental involvement and difficulties engaging parents.”
  - “Safety issues aren’t addressed in detail – many reviewing goals, tasks”
  - “Time constraints can be a barrier, as well as topics of discussion getting off track”
  - “Focus is on child in foster care but maybe sibling is still in home”
Parent respondents were asked: Briefly comment about your responses to the questions above (optional). The following represent statewide themes from received comments:

- “Again, I was almost completely excluded from the meeting, so I have no clue”
- “They understood my current situation and are willing to work with me”
- “Children are considered, but support of resources for a mother are not. I have done all I've done without support from them.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERMANENCY HEARINGS

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

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>Top rated barriers to initial permanency hearings (n=62)</th>
<th>Top rated barriers to subsequent permanency hearings (n=68)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A continuance was needed</td>
<td>45</td>
<td>44</td>
</tr>
<tr>
<td>The Court’s calendar was full</td>
<td>32</td>
<td>29</td>
</tr>
<tr>
<td>The State’s Attorney’s Office was not able to submit the request in a timely fashion</td>
<td>24</td>
<td>23</td>
</tr>
<tr>
<td>Case Management staff was not able to submit the necessary paperwork to request the hearing</td>
<td>18</td>
<td>18</td>
</tr>
<tr>
<td>Other “themes”</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>“Respondent not served”</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>“Court Scheduling conflicts”</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>“not following the rules”</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>“ICWA requirements such as needing a QEW needing to testify…”</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

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

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

- The following represent themes from the “Other methods” reported:
  - “Discussion at CFTM”
  - “Discussion during supervision meetings”
  - “DJS does not often discuss TPR due to child’s age and wishes when under our custody”
  - “Tribe is using Suspension of Parental Rights, not Termination of Parental Rights”
  - “Combination of the above is used”

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

- “The parents may decide to work services in a last-ditch effort to get their children back. This may extend efforts of the caseworker beyond the suggested time frame for filing a TPR.”
- “Lack of services and the travel involved in a rural area hinder reunification”
- “Court date availability”
- “Judge's feelings toward TPR extend the process”
- “We don’t do TPR’s”
- “They are filed too often and too fast in my opinion”
- “Not a priority in our county”

C. Statewide data from the Supreme Court indicate the state experiences challenges to ensure filing requirements for termination of parental rights occurs timely for all children in foster care (as reported in the 2016 Round 3 CFSR Statewide Assessment Report, found on the Department's website):

<table>
<thead>
<tr>
<th>Year</th>
<th>TPR Petition Filed within 660 Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>68% (n=128)</td>
</tr>
<tr>
<td>2014</td>
<td>71% (n=87)</td>
</tr>
<tr>
<td>2013</td>
<td>76% (n=87)</td>
</tr>
</tbody>
</table>

Based on your experience with child welfare partners in your jurisdiction, please comment on strong practices or barriers that impact the ability to ensure timely filing of TPRs when appropriate to do so. 64 responses were received statewide and the themes contained are represented by the statements below:

- “Social services work hard to give a parent every chance they can before termination. Sometimes it carries out to long. Sometimes caseload management don’t have time to get it done.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “This is usually due to the worker not filing the affidavit in a timely manner.”
- “ICWA”
- “County workers fear of filling for TPR”
- “Large caseloads, complicated family situations”
- “Petitions aren’t filed timely and then when filed court dates are too far out”
How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

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

A. Foster Caregivers were asked the following questions regarding their experiences:
   - **What has been your experience receiving notice of upcoming reviews and hearings regarding foster children/youth for whom you provide care?**
     - Most participants said the notice primarily comes from the caseworker but there was great variance among participants on how soon they received the notice. Specific comments include:
       - “Usually from our county worker we get a heads-up even before the actual notice comes out – we’re well looped-in.”
       - “The county worker keeps in good contact with us and in addition we get notice from the court directly as to what’s happening”
       - “What are you talking about? We don’t receive paper notices anymore.”
       - “It depends on the worker; some do, and some do not”
   - **Does your experience match the experiences of other foster caregivers you know?**
     - Many participants stated “yes, I think it’s the same as with other foster parents” A few participants weren’t sure if their own experienced was similar to others.
   - **What has been your experience providing information or being heard during a review/hearing? Have you been able to provide information to the Court during these proceedings, either in person or in writing?**
     - Many participants did not have experience being heard during a review/hearing. Some had experience in providing written feedback. The following comments were often heard throughout the state:
       - “Mixed bag as to whether we’re recognized by the Court, aren’t often invited to provide input.”
       - “I’ve been subpoenaed before”
       - “I asked the caseworker about my right to be heard and the caseworker told me not to go, but that I could send something in writing.”
       - “I’ve been invited to attend but never to provide input”
   - **What gets in the way of the agency and court ensuring foster caregivers are notified of, and have a right to be heard, in any review hearing held in respect to the foster child in their care?**
     - Common themes expressed in the meetings include:
       - “I was told it’s not the caseworker but an administrative person who sends out the notice.”
       - “The caseworkers are so overworked they don’t have time”
       - “State’s attorneys shut it down”
       - “Not sure”

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

*Legal Stakeholder’s note: Judges and Judicial Referees were not asked questions in this section.*
• "To the best of your knowledge, are the following caregivers of children in foster care in the agency given NOTICE of any review or hearing held regarding the child?"

### Notice Provided to Foster Caregivers

<table>
<thead>
<tr>
<th>Category</th>
<th>Foster Parents</th>
<th>Pre-Adopt Parents</th>
<th>Relative Caregivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every Time</td>
<td>52%</td>
<td>43%</td>
<td>50%</td>
</tr>
<tr>
<td>Often</td>
<td>24%</td>
<td>12%</td>
<td>24%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>18%</td>
<td>6%</td>
<td>5%</td>
</tr>
<tr>
<td>Rarely</td>
<td>4%</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>Not Sure</td>
<td>2%</td>
<td>2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

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

### Barriers to Providing Notice to Foster Caregivers

- I’m not sure
- Other reason
- Caseworker job demands
- Caregiver requests not to be involved
- Short timeframe between the scheduling and being held
- Caseworker awareness of the expectation

○ Themes generated from ‘Other reasons’ provided:
  - “I am not aware of any of the NOTICES not being given to foster caregivers in our county”
  - “Not always clear who has the responsibility to provide notice”
To the best of your knowledge, are the following caregivers of children in foster care in the agency given the RIGHT TO BE HEARD in any review or hearing held regarding the child?

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

Not all respondents were able to provide ‘Other reasons’ due to a glitch in the survey program. However, themes from the received comments are reflected in the following statements:

- The county has a recent history of telling foster and adoptive parents not to attend hearings - the judge says thanks for being foster parents and at hearing, but no one else usually addresses them.
- Judge rarely asks them questions
C. Judges and Judicial Referees were asked the following questions:

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

- Please share any comments on how our child welfare system could strengthen or support foster caregivers in their right to be heard during reviews or hearings involving the foster child(ren) in their care:
  - One response to this optional question was received:
    - “Caregivers attend the hearing but rarely comment”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: INITIAL STAFF TRAINING

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

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

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

A. Questions asked of Agency Case Managers:

• When you were first hired as a child welfare worker, were you assigned the responsibility of a full caseload (n=93)
  ○ Before attending Child Welfare Certification Training: 36 (39%)
  ○ While attending Child Welfare Certification Training: 38 (41%)
  ○ After attending Child Welfare Certification Training: 19 (20%)

• If you were assigned the responsibility of a full caseload BEFORE attending Child Welfare Certification Training, in what year were you hired as a child welfare worker: (n=36)
  ○ Two responses each for the following years: 2005, 2006, 2011, 2013, 2014, 2018
  ○ Three responses each for the following year: 2012
  ○ Six responses each for the following year: 2016
  ○ Eight responses for the following year: 2017

• Please consider your first year of employment in child welfare and indicate your level of agreement with the following statements:

   Training & Supervision - first year of child welfare work (n=91)

   - 24% Strongly Agree, 58% Agree, 15% Disagree, 2% Strongly Disagree
   - 34% Strongly Agree, 45% Agree, 13% Disagree, 8% Strongly Disagree

• Please provide any additional comments regarding the initial training and support offered to you or other child welfare workers within the first year of employment. Thirty comments were received, and the following statements reflect the general themes:
  ○ “I have received very limited training and the training that I have received was from my coworkers not a supervisor.”
  ○ “Most of the training that was helpful was provided by co-workers.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Training information is not consistent across staff and nearly not enough is provided”
- “The supervision I received was “it’s in your manual” or more current a supervisor who doesn’t know policy at all”
- “I have an incredible supervisor—she is just super busy”

B. Agency Administrators were asked the following questions:

- **To the best of your knowledge:**

  - ![Initial Staff Training experiences as reported by Agency Administrators](image)

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

    - ![Barriers to Completing Initial Staff Training within first year](image)

    - Due to an error in the survey logic, respondents were unable to provide comments.
To the best of your knowledge, does the initial training provided to child welfare workers teach the skills and knowledge needed for them to carry out their duties in child welfare:

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

- What additional supports are provided to new child welfare workers within the first year of employment to strengthen their skills and knowledge needed to perform their duties (check all that apply): results displayed on the next page
Other supports provided:

- “DJS has a training module in place for all new hires that offer a wide array of training in the first year, including the Child Welfare training.”
- “We have implemented an onboarding process.”
- “Prior to child welfare training, Social Workers are typically given "easier" cases, starting with in-home cases to learn the basics and progressing to foster care. Typically, new workers have fewer cases as well while they are learning.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: ONGOING STAFF TRAINING

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

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

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

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

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

![Ongoing training teaches skills and knowledge needed to perform duties](chart)

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

![Barriers to ongoing staff training](chart)

○ Themes from the ‘Other reasons’ provided are reflected in the comments below:

  • "Caseloads are high and trying to plan to take off while attending a conference is tough. If they can attend, many times they are still having to step out and take phone calls. Budget cuts across the state has limited travel budgets for County and State workers.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “The trainings are the same over and over again”
- “No training available for supervisors to get what is needed for good supervision”
- “Every area in the state do things differently and have different philosophies.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: FOSTER AND ADOPTIVE PARENT TRAINING

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

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

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

A. Foster Caregivers were asked the following questions during the Stakeholder’s Meeting:

- What training was initially available to you when you began providing foster/relative care/pre-adoptive care?
  
  All groups commented that PRIDE was the initial training available. A few specific responses include:
  
  o “PRIDE, First Aid/CPR, after we had placements we got trauma-centered care training through the private provider. Wish we could’ve gotten it sooner. I can see huge value in any foster parent getting that training. PRIDE gave me a gist of what I was in for but didn’t really prepare me for what foster parenting would be like.”
  
  o “First placement was relative care and I was provided absolutely nothing – no training, no support from the case worker, and it was a meth baby. There was no respite care, there was no one to contact with questions. We had to find help on our own.”

- Was the initial training of high quality to prepare you for your role as a foster caregiver?
  
  o There was a range of response. A few specific comments include:
    
    ▪ “yes, it was” to “it’s a lot of fluff – they don’t tell you all you need to know, like what not to do”
    
    ▪ “PRIDE was ok – gave me the basics but didn’t prep me for the child behaviors I would encounter and if I hadn’t had other resources available I probably wouldn’t have been able to stick with it.”
    
    ▪ “There is a lot of training on ‘This is what happened to get your kids to this place’ but nothing on ‘What do we do now?’.”

- What ongoing training is available?
  
  o There was a range of response. A sample of the comments include:
    
    ▪ “CFSTC training festivals”
    
    ▪ “Monthly Share and Support with other foster families which sometimes provides training”
    
    ▪ “Webinars available all the time”
    
    ▪ “Standard required ongoing training regarding fire safety/medication safety”
    
    ▪ “We like that we get credit for applicable training available thru private therapeutic foster care agency that pertinent to the needs of our foster children” [everyone agreed]
    
    ▪ “We get notice of a lot of trainings available which is very helpful – some awesome opportunities to attend conferences, too.”
    
    ▪ “We don’t get notice of any trainings in our area”

- Is there ongoing training of high quality and does it support you in your role as a foster caregiver?
  
  o There was a range of response. A sample of the comments include:
    
    ▪ “Festivals of training are helpful”
    
    ▪ “We get a lot of training”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “I’m not told about trainings, just found out about one in our area that would be helpful, and heard that there are scholarships available, but wasn’t told about it by the agency”
- Have you participated in, or are you aware of specialized training for adoption in your area? If so, is that training of high quality?
  - Most participants responded with a “No.” Several commented “If there is, I haven’t seen it yet. But it might just be where we ae in the adoption process” or “I don’t recall hearing about any available”.
- What are the barriers, or what gets in the way, of receiving necessary training?
  - There was a range of response. A sample of the comments include:
    - “Lack of childcare”
    - “The time of day/week training is offered”
    - “Who is my support?”
    - “Some required trainings only available once annually and some may not be able to get to them, which is an obstacle for some people. I think if there were some opportunities for online training that would be helpful.”
    - “There are trainings available in the larger community, but not so much in rural areas. I’ve been told they are trying to train additional staff to provide more trainers available to us.”

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

Ongoing training teaches skills and knowledge needed to perform duties (n=147)

<table>
<thead>
<tr>
<th></th>
<th>Foster and Adoptive Parents</th>
<th>Staff of Child Care Institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every Time</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Frequently</td>
<td>33%</td>
<td>24%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>22%</td>
<td>16%</td>
</tr>
<tr>
<td>Rarely</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Not Sure</td>
<td>3%</td>
<td>3%</td>
</tr>
</tbody>
</table>

Barriers to ongoing staff training to foster and adoptive parents teaching needed skills and knowledge (n=105)

- Opportunities to practice the skills learned
- Topics are too general
- Topics are too advanced
- Presenters knowledge of the subject
- Training materials

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

- Themes from the ‘Other reasons’ provided are reflected in the following comments:
  - “Scheduling conflicts, child care arrangements”
  - “Distance and travel, lack of training”
  - “Not enough trainings in our area”
  - “More opportunities and web-based opportunities I believe would be beneficial”
  - “Increasingly difficult behaviors/needs of the children. Much like training for the case managers, training often focuses mostly on defining issues and understanding their origins and far too little time on how to manage them w/ limited resources and supports.”

- Themes from the ‘Other reasons’ provided are reflected in the following comments:
  - “Retention of workforce leading to consistent re-training”
  - “Funding”
  - “Training not provided frequent enough”

C. Community Stakeholders were asked the following questions:

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

Ongoing training teaches skills and knowledge needed to perform duties
(n=129)
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

### Barriers to ongoing staff training to foster and adoptive parents

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Opportunities to practice the skills learned</td>
<td>38%</td>
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<tr>
<td>Topics are too general</td>
<td>22%</td>
</tr>
<tr>
<td>Topics are too advanced</td>
<td>19%</td>
</tr>
<tr>
<td>Presenters knowledge of the subject</td>
<td>2%</td>
</tr>
<tr>
<td>Training materials</td>
<td>2%</td>
</tr>
<tr>
<td>I’m not sure</td>
<td>14%</td>
</tr>
</tbody>
</table>

Themes from the ‘Other reasons’ provided are reflected in the following comments:
- “Foster parents’ time commitments with other children in the home and other activities required of them,”
- “Barriers of physical time or mental space to attend a training, process the information, and apply the strategies.”

### Barriers to ongoing staff training to Residential Child Care staff

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunities to practice the skills learned</td>
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</tr>
<tr>
<td>Topics are too general</td>
<td>10%</td>
</tr>
<tr>
<td>Topics are too advanced</td>
<td>2%</td>
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<tr>
<td>Presenters knowledge of the subject</td>
<td>2%</td>
</tr>
<tr>
<td>Training materials</td>
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</tr>
<tr>
<td>I’m not sure</td>
<td>60%</td>
</tr>
<tr>
<td>Other</td>
<td>13%</td>
</tr>
</tbody>
</table>

Themes from the ‘Other reasons’ provided are reflected in the following comments:
- “Turnover of staff and not being trained before working.”
- “Time. It is very difficult to get direct care staff to training sessions. Most places provide significant training in-house and via online training courses. While this training is good and can be extensive, being able to go off-site and attend training with others that perform similar work is very difficult because the facility needs to be staffed 24/7. Speaking specifically about PRTF’s it would be great if we could find or develop a baseline competency curriculum that all staff would need to complete within a certain timeframe.”
- “Funding”
How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (CFSP)?

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

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

A. Questions asked of Foster Caregivers:

- **Are services available to support the children placed with you? Do you receive the support you need to do the work you do with the children placed with you?**
  - Responses were mixed with “yes” and “no”. Themes from the responses received are reflected in the following comments:
    - “Therapeutic foster care workers - We definitely had the right people involved right away to support us with the children – a supportive case worker and involved supervisor too – great services! Couldn’t have been more blessed with the support I received. They’re available 24-7 for us.”
    - “The county caseworker has been helpful too, but the daily support comes from the therapeutic foster care worker.”
    - “It’s really hard to get the kids into services. As a foster parent you’re constantly pushing to get them help but it takes a long time.”
    - “For what’s available – yes, but there isn’t a lot available.”
    - “I think finding respite is a barrier for some kids because they don’t know the family and the become anxious in another home; I think our family should be able to watch the kids, but they can’t anymore.”
    - “If I have a behavior issue with a kid in care, can’t we help each other figure it out and share our experiences?”
    - “Mental health services – depends on the agency as to the communication/feedback loop.”

- **Are there specific services you feel you need to support you in your ability to provide care for your foster that is/are NOT available? Please give examples.**
  - Themes from the responses received are reflected in the following comments:
    - “Respite” [There was a resounding consensus among most groups that a significant service that is needed/not available is the need for respite services for families, especially addressing the needs of large sibling groups.]
    - “Lack of child care for children in foster care” [Many participants shared the significant out-of-pocket costs families must expend for day care and the delays in which often accompany their reimbursements.]
    - “Experts in drug-exposed babies to help us understand what to expect or how to provide care.”
    - “I believe we need a mentorship program for foster parents.”

- **Has anyone experienced challenges getting the child to services they need due to distance or other transportation problems? Did you receive the support you needed?**
  - Some participants expressed significant challenges with transportation services while the majority of participants did not express transportation concerns for their county.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Can you identify a service in your area that is particularly helpful for families in your area, or a service that is particularly helpful as you provide care for your foster child? Can you identify a specific service that is missing in your area?
  
  o Themes from the responses received are reflected in the following comments:
    
    ▪ Helpful:
      
      o “Services for education concerns ….. we’re seeing gains in the children because of those educational services.” [several others agreed that school personnel are providing individual supports to their foster child which has resulted in academic success]
      
      o “Great dental, vision, medical care who take time to understand the kids and talk to them.”
      
      o “Parent Aide – ours works with the parents and has been fantastic with them”
      
      ▪ Missing (not working well):
        
        o “Difficult to find medical doctors, and therapists who take Medicaid – huge issue.”
        
        o “Difficult to find dentists willing to take Medicaid or serve young children”
        
        o “Some therapists won’t let MA clients preschedule, which is difficult, too. We’re delaying some services until we switch to our insurance providers.”
        
        o “Everything is catered to the parents”
        
        o “Supportive services to foster parents to work through challenges with their foster child, and timely reimbursements”
        
        o “We need a Mentor/Natural Support program for foster parents.”

B. Questions asked of Youth:

- Did you receive all the services you needed to meet your goals (i.e. Mental/behavioral health needs/physical/dental, etc.)?
  
  o Themes from the responses received are reflected in the following comments:
    
    ▪ “My caseworker keeps us up to date on appointments as needed. Physical health/dental health yearly, counseling monthly.”
    
    ▪ “I’m getting the services I need – the foster home is stable, clean, structured how I need to function. They keep it under control.”
    
  o Although not a statewide theme, there were pockets of comments reflecting not as strong performance for this question. (i.e. “Not really, but my caseworker doesn’t do anything about it”)

- While you are in foster care, do you feel the restrictions or limitations on the things you can do are typical for teens? If you feel there are more restrictions in foster care, what are some examples?
  
  o Themes from the responses received are reflected in the following comments:
    
    ▪ “No” [consensus throughout all groups]
    
    ▪ “Most kids will hang out with their friends and sometimes we can’t do that because they need to talk to the worker about that.”
    
    ▪ “I believe we should be able to get your driver’s license, at least, because it’s hard to get around. The bus doesn’t go everywhere we need to go.”
    
    ▪ “Having to know where you’re at, at all times; knowing all our friends; who we have contact with; less freedom which can keep us safer than other kids.”
    
    ▪ “If we aren’t allowed to do anything how are we supposed to learn from our mistakes?”
    
    ▪ “In foster kids you have more availability to get help – you’re more independent.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Have you received Independent Living Services? If no, were you offered the opportunity and declined? If yes, who provided the IL Services, i.e. PATH’s IL program, custodial agency, facility, foster parents, all the above, etc.?
  - Most participants said “yes” while some stated they were just starting to receive IL services. School personnel, IL Coordinators, social workers, and foster parents were the providers most identified by the participants.

- What was most helpful (IL service) and what would have made the service more beneficial?
  - The most helpful services reported:
    - “Getting a driver’s license so I could get to work.”
    - “How to apply for college and scholarships.”
    - “Budgeting”
  - The least helpful services reported:
    - Participants did not identify a service which was not helpful. One comment summed it up as: “IL services are one of the most reliable things about foster care.”

- Have you had an opportunity to talk to a counselor? If no, would you have liked to? If yes, was this helpful?
  - All participants acknowledged they have had the opportunity to talk to a counselor. However, there was a range of feedback received regarding how beneficial therapy is or is not. The following comments reflect the sentiments expressed:
    - “Yes, I have the best therapist in the world”
    - “Yes, I guess it’s been helpful. I’m not a big fan of therapy.”
    - “It wasn’t helpful at all, didn’t help one little bit -was forced to go”

- What would help the agency’s ability to ensure that services children and family need are provided?
  - Themes from the responses received are reflected in the following comments:
    - “I live in a small community, so I think we need to have a center where you can get counseling, rehabilitation services.”
    - “Better foster parent screening and training”
    - “Make sure we have a good social worker (always there for you, talk about anything, tell things you don’t feel like telling foster parents, really cool)”
    - “Communication is a big thing – there was such a lack of communication between agencies, and my parents – it was really a struggle.”
    - “My county should have more time together with the kids they’re taking care of, instead of like 10 minutes a month.”
    - “If there is something bad going on, there should be a way to fix the problem instead of just keep moving me and moving me and moving me. They should quit moving people because it does affect you in the long run.”

- On a scale of 1 -10, with 10 being the highest, how would you rate the services you have received from your custodial agency while in foster care?
  - Responses to this question ranged across the state. A few on each end of the spectrum (“1” or “10”) whereas the majority of the responses fell somewhere in the middle (“5” to “8”). Many youths commented that it would be dependent on what time period of their involvement with the agency as many have had a range of experiences and not always reflective of their current situation.

- Is there anything else you thought would be asked that wasn’t or anything else you would like to share about the services you have received from your custodial agency?
"I thought you were going to ask how many case managers I’ve ever had. I’ve had 4. [Others also talked about currently having multiple case managers now, from various agencies, for various reasons]

“When there’s something wrong and the child does everything they don’t take care of it because the child didn’t say it verbally because they’re scared. Need to pay more attention to the child. Instead of just saying they’re being bad and need to go into treatment, understand what’s behind the behavior.”

“I don’t think there should be a money limit on the clothes that we need because we grow so much.”

C. Questions asked of Parents (n=21)

- My child/ren and family’s situation is considered by the agency when deciding what services are provided:
  (4) Strongly Agree; (10) Agree; (2) Disagree; (4) Strongly Disagree (1) Does Not Apply

- There are many services available in my area that can help families safely care for their children:
  (3) Strongly Agree; (13) Agree; (1) Disagree; (3) Strongly Disagree (1) Not Sure

- My family has access to services that address our needs and help me meet the case plan goals:
  (2) Strongly Agree; (13) Agree; (2) Disagree; (3) Strongly Disagree (1) Not Sure

  Themes from the comments received are reflected in the following comments:
  - “The services are all non-specific to completely made up of lies.”
  - "A step by step plan on paper would be helpful."
  - "My worker was not very helpful. I at one time asked to case workers due to her rudeness.”
  - “Children are considered, but support of resources for a mother are not. I have done all I’ve done without support from them.”
  - “Case manager and team are always available”

- Are there specific types of services you or your family need, or needed, but are not available in your area?
  (9) Yes (21) No

- Briefly comment on your responses to the statements above (Optional):
  Themes from the comments received are reflected in the following comments:
  - “More assistance with parenting evals”
  - "Felon friendly housing. Low-income child care."
  - "Help with transportation"

Parents were provided a list of services (Case Management Services, Intensive In-Home Therapy, Parent Aide, Addiction Services, Mental Health Services, Domestic Violence Treatment, Anger Management Treatment, Prime Time Child Care and Transportation Assistance) and asked: (A) Was it a service you felt you or a family member needed, (B) Was this a service offered to you and your family, and (C) If you participated in the service, do you feel it is helping, or helped, improve your parenting? (Results on the next page)
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

<table>
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<tr>
<th>Service</th>
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<th>I don’t know about this service</th>
<th>Yes</th>
<th>No</th>
<th>Yes</th>
<th>No</th>
<th>Does Not Apply</th>
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<tbody>
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<td>4</td>
<td>16</td>
<td>5</td>
<td>9</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Intensive In-Home Therapy</td>
<td>4</td>
<td>10</td>
<td>7</td>
<td>3</td>
<td>18</td>
<td>2</td>
<td>5</td>
<td>14</td>
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<tr>
<td>Parent Aide</td>
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<td>9</td>
<td>7</td>
<td>7</td>
<td>14</td>
<td>6</td>
<td>3</td>
<td>12</td>
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<tr>
<td>Parenting Classes</td>
<td>9</td>
<td>10</td>
<td>2</td>
<td>10</td>
<td>11</td>
<td>6</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>Addiction Services</td>
<td>12</td>
<td>6</td>
<td>3</td>
<td>9</td>
<td>12</td>
<td>8</td>
<td>2</td>
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</tr>
<tr>
<td>Mental Health Services</td>
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<td>3</td>
<td>4</td>
<td>10</td>
<td>11</td>
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<td>5</td>
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<td>Domestic Violence Treatment</td>
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<td>4</td>
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<td>Anger Management Treatment</td>
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<td>5</td>
<td>6</td>
<td>15</td>
<td>6</td>
<td>2</td>
<td>13</td>
</tr>
<tr>
<td>Prime Time Child Care</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>3</td>
<td>18</td>
<td>3</td>
<td>2</td>
<td>16</td>
</tr>
<tr>
<td>Transportation Assistance</td>
<td>10</td>
<td>5</td>
<td>6</td>
<td>5</td>
<td>16</td>
<td>5</td>
<td>3</td>
<td>13</td>
</tr>
</tbody>
</table>

- Briefly comment about your responses to the services in the table above (optional):
  - Themes from the responses received are reflected in the following comments:
    - "Services were too broad, and the agency couldn't hit the broad side of a barn."
    - "They tell you what’s required but do not direct or assist you to those services and some counties don’t have the option of certain services."
- Is there anything else that you can think of that would help your local agency provide services that would better able to meet the needs of families in your area? (n=21) (9) Yes (12) No
- Briefly comment on your responses to the statements above (Optional):
  - Themes from the responses received are reflected in the following comments:
    - "Make sure that the case worker is not working against the parents and they aren't rude to parents that are slower to learn."
    - "I think they should treat inmates with respect. No one is willing to treat me as an equal. How am I supposed to do better?"
    - "I think as each individual of families should put in what they think they especially need."
D. Questions asked of Agency Case Managers, Agency Administrators, Community, and Legal partners who reported being a part of child and family team meetings:

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

E. Questions asked of Agency Case Managers, Agency Administrators, Community, and all in Legal group:
• The respondents who did not answer “Every Time” or “Not Sure” to the above were then asked the follow-up question, “What gets in the way of families receiving services need to create a safe home environment?” (n=291) The top three issues identified were the following:
  - Lack of mental health services [137 responses]
  - Lack of addiction services [123 responses]
  - Lack of family engagement [120 responses]

• The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of families receiving services they need to keep their children safely at home?” (n=291) The top three issues identified were the following:
  - Lack of family engagement [135 responses]
  - Lack of mental health services [121 responses]
  - Lack of addiction services [114 responses]
The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow-up question, “What gets in the way of children in foster and adoptive placements (prior to finalization) receiving the services they need to achieve a permanent home/family? (n=220) The top three issues identified were the following:
  - Lack of mental health services [125 responses]
  - Waiting list for services [113 responses]
  - Lack of supportive services (i.e. respite care, parent aide) [98 responses]

The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow-up question, “What gets in the way of adoptive families and children whose adoptions have been finalized having the post-adoption services they need to maintain a permanent family? (n=182) The top three issues identified were the following:
  - Lack of support services (i.e. respite care, parent aide) [115 responses]
  - Waiting lists for services [76 responses]
  - Lack of mental health services [70 responses]
F. Numerous additional comments were expressed by all stakeholders. Readers are encouraged to reference each regional report for specifics, yet themes are represented in the comments listed below:

- "Services are available to families in rural areas. However, with time off from work and school and inclement weather it is difficult to access the appropriate services. If more services were available in the small communities it would greatly increase participation."
- "Intensive In-Home is a very valuable service for families in crisis. The families I serve are a large distance from in-office mental health services and often have unreliable transportation, no driver’s license, or cannot afford the cost. There has been quite a wait list for intensive in-home and families get assigned sometimes months after the initial crisis and then have less motivation to participate in the service."
- "Work schedules of parents, foster parents etc. should be an option that prevents services from occurring. Oil field workers as are other workers unable to access many services due to their schedules."
- "Not requiring county workers to be social workers has resulted in a lowering of quality of services."
- "It is unfortunate that the caseload of social services per social worker makes a difference in some of the more timely cases. The purpose of the system is sometimes lost in time as time goes by. I don’t work with anyone that does this intentionally it is not enough hours in the day of a social worker. Unfortunate situation."
- "The case workers seem slow at getting things done. They state a lack of time as their reasoning. However, it seems that they try to make families tailor to their work schedules of M-F 8-430 and have no ability to adjust their schedules to fit the needs of the family."
- "GAL’s – I’ve seen mine only one in nine years”
- "Our region lacks supports for addiction and mental health, which makes it very difficult to be able to reduce risk in those categories ESPECIALLY in the rural areas."

The following comment received is most appropriate to SF 25 (Quality Assurance System), but that SF is not detailed separately. Therefore, the comment is in this section of the Final Report:

- "Overall, this survey did not allow the opportunity to appropriate give feedback regarding the OCR process. It rather reviewed my current knowledge and barriers to providing services. I was disappointed in the lack of organization throughout this review. Instructions were often unclear and not appropriately communicated to case workers. There was a small window for me to prepare my case for the OCR review due to the lack of communication and lack of clarity in the instructions given to us. In the future, I hope these issues are addressed as I feel it affected the outcome of the OCR review. In addition, all documents that were sent to case managers were sent in PDF form causing us to take up more of our time to retype the information sent to us that needed to be forwarded to the families. In addition, the pre-drafted documents sent to us did not include language that was not intelligible to many of our clients. Also, going forward with future reviews, I believe it should be the responsibility of the OCR team to contact families regarding the review to clarify details and remove the worker bias from the equation of the interview process. Overall, I hope to see improvements in the OCR process in the future."
How well is the service array and resource development system functioning statewide to ensure that the services in the Array of Services systemic factor can be individualized to meet the unique needs of children and families served by the agency?

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

A. Questions asked of Foster Caregivers:

- **How individualized are the case plan for the children?**
  - Themes from the received feedback are reflected in the following comments:
    - “No, I don’t think so. They’re individualized to what the parent needs, not the kids”
    - “Very much tailored to all the children in foster care – unique needs addressed for each child – everybody did their best to meet the needs, but not getting more than what they need so they wouldn’t feel overinvolved in services.”
    - “The care plans are way too long – 40-50 objectives and the mom is lower functioning and they expect her to do it all. I’m overwhelmed for them – where do you start? Now I know why the parents give up.”

- **Are the children’s needs being met with the services provided?**
  - Themes from the received feedback are reflected in the following comments:
    - “Yes, we work the plans heavily – team members share ideas for services to support the children and being creative/willing to try new things. We are down to practically no services because the children are doing so well now.”
    - “Need for permanency isn’t being met timely – falls back on the state, not the county – the state’s attorney is backed up, judges are backed up too.”
    - “As much as they possibly can to assess and address the needs with appropriate services”

- **Can you provide an example of how the agency (of your foster youth) in the last year adjusted a case plan or service to meet the specific need of the child (religious, cultural, language, special needs, etc.)?**
  - Some of the examples shared are reflected in the following comments:
    - “Trauma-focused therapy, horseback riding/therapy”
    - “It’s nice that the parents can FaceTime with their children – mom can read stories or sing songs so that helps.”
    - “For Native American children, the social worker took the kids to pow wows, so they could experience their culture.”

G. Questions asked of Youth:

- **Do you feel the services you and your family receive (d) are (have been) the right services for your family?**
  - Most in attendance responded “Yes” but this was not universal. See below for more details.

- **Did you think these services were culturally appropriate and addressed any special needs of you or your family?**
  - Themes received from the feedback are reflected in the following comments:
    - “My foster parent lets me participate in Native American ceremonies – foster parent is Native American also, and teaches me about lots of cultural things – both Native American and white”
    - “Yes and no, they really tried to push faith on us, but I didn’t have a preference and it was against my family upbringing,”
“More like every single kid gets the same services and if they don’t respond to what’s given they get thrown into placement.”

- **How did your worker help you understand what services you were going to receive?**
  - Themes from received feedback are reflected in the following comments:
    - “The team meetings – she broke it down at every meeting, so we wouldn’t be overwhelmed, so we’d feel better about it.”
    - “My worker didn’t do that for me – they helped me try to understand, but every time I went to a meeting I didn’t really put myself into the meetings because I’d get upset or emotional; but this agency [treatment foster care] is helping me understand better now.”
    - “She didn’t”
    - “Usually through visits with the caseworker”

- **Did any of the decisions about services change after talking with your worker?**
  - There were mixed experiences shared. A few of the specific comments include:
    - “Things got progressively better – partly due to me changing and they (my team) grew as well.”
    - “Communication is bad -things change and I’m not told”
    - “No, I did get to talk about it, but it didn’t change the decision”

- **When you think about the services you and your family have received from the agency, please share an example of one good experience and one that needs to be improved.** Various responses are shared below:
  - **Good**
    - “My foster parent and I are really close and say “I love you“ to each other”
    - “My therapist checks in with foster parents which has been good.”
    - “I really think the services really help because without them I wouldn’t be who I am right now” [others agreed – ‘I wouldn’t be here right now’; ‘I wouldn’t be as successful as I am now’]
  - **Improve**
    - “CPS workers were rude and I hated how they talked to me – I cried when they took me from my parent because she told me I wasn’t going to be with my parent anymore, could have been more respectful and sympathetic and explained things to me [another agreed]; we’re told not to get into cars with strangers but we had to go with them; more information being passed along between workers, foster families, and us - better communication.” [Others agreed]
    - “Confusion with workers and not knowing or understanding policy”
    - “Communication between me and the team – they know what’s going on but I’m the last to know and it’s my life they are talking about.”

- **Were services available at times when you were able to attend?** For example, did you have to miss school if you wanted to participate in a service, or were accommodations made whenever possible to meet your needs?
  - The most common response heard was “Yes, most of the time. But, I didn’t mind missing school when I had to”

**H. Question asked of Parents (n=21)** *(Options for response included Strongly Agree, Agree, Disagree, Strongly Disagree, Not Sure or Does Not Apply)*

- **The agency works with me to identify and offer services to help the unique needs of my family.**
  - (3) SA; (8) A; (5) D; (5) SD (0) NS
- **The case managers I have worked with were available and respectful.**
  - (8) SA; (5) A; (4) D; (4) SD (0) DNA
I. Questions asked of Agency Case Managers, Agency Administrators, Legal and Community:

- The respondents who did not answer “Every Time” to the above question were then asked the follow up question, “What gets in the way of formal and informal supports being used to create services and supports that are developmentally and culturally appropriate? (n=246) The top five issues identified were the following:
  - Lack of Native American foster homes, elders/mentors, caseworkers [117 responses]
  - Lack of services tailored to meet the needs of parents [97 responses]
  - Collaboration between Child Welfare, Behavioral Health, Developmental Disability, [89 responses]
  - Lack of culturally appropriate services [69 responses]
  - Lack of residential services for dually diagnosed children [65 responses]
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

Feedback was sought from all seven Stakeholder Groups.

A. Youth were asked the following questions:
   • **Now, thinking more generally, when you think of child and family services in your area, can you tell me one good thing that is happening and one thing you think really needs to be changed?**
     o Examples of “Good” things happening are reflected in the following comments:
       ▪ “Families getting better after being in therapy, getting smarter and knowing things they didn’t know before.”
       ▪ “I like my caseworker”
       ▪ “Stuff like this where we actually have a chance to talk about how things are going”
     o Examples of things youths believe need to be changed are reflected in the following comments:
       ▪ “We don’t have enough foster homes – wanted to sign myself in to foster care after age 18, but there wasn’t a home available for me.”
       ▪ “Better communication - still am not able to get my driver’s license – just as strict.”
       ▪ “I think there should be a support group for foster care kids like foster parents have share and support.”
   • **Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?**
     o Most participants were unaware of opportunities. In a few locations, however, youth mentioned awareness of the ND Youth Board.
   • **What can the system do to gather more input from youth as it develops and reviews the plan the state agency has for serving children and families?**
     o Themes from feedback received are reflected in the comments below:
       ▪ “We need more groups like this. I don’t think some know about this and don’t have the chance to participate in groups like this.”
       ▪ “Groups for kids in foster care who can do activities together, and even with those who aren’t in foster care, so they can succeed too – so we can save them, too. Help them out so they don’t have to go to foster care.”
       ▪ “Listen”

B. Foster Caregivers were asked the following questions:
   • **Have you, or anyone you know, been involved in a “IV-B Planning” meeting – a meeting to work on the state’s five-year plan, also called the Children and Family Services Plan (CFSP)?**
     o There was a universal “No” response.
   • **Have you, or anyone you know, been a part of a meeting to review the annual progress of the state’s IV-B plan, known as the Annual Progress and Services Report (APSR)?**
     o There was a universal “No” response.
· Do you know where to find the state’s plan and annual reports on the Department’s website?
  · There was a universal “No” response. Some participants indicated they could probably search the internet to find it.

C. Agency Case Managers, Agency Administrators, Legal and Community Stakeholders were asked the following questions and could check up to two responses within each question:
· Which statement below reflects your involvement in the meetings held every five years to develop the state’s five-year plan for child welfare services, known as the “IV-B” or “CFSP – Children and Services Plan”:

 Awareness and Involvement with CFSP
 (n=321)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agency Case Managers (n=87)</th>
<th>Agency Administrators (n=59)</th>
<th>Community (n=127)</th>
<th>Legal (n=48)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have been a part of statewide meetings where the plan has been developed</td>
<td>3</td>
<td>17</td>
<td>14</td>
<td>4</td>
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<tr>
<td>I have not been a part of meetings regarding development of the plan, but I have received communication about the CFSP</td>
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<tr>
<td>I know where to find a copy of the CFSP on the Department’s website</td>
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<tr>
<td>I am not familiar with the CFSP</td>
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<td>12</td>
<td>66</td>
<td>26</td>
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</tbody>
</table>

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

 Awareness and Involvement with APSR
 (n=320)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agency Case Managers (n=87)</th>
<th>Agency Administrators (n=58)</th>
<th>Community (n=127)</th>
<th>Legal (n=48)</th>
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<td>23</td>
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<tr>
<td>I know where to find a copy of the APSR on the Department’s website</td>
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<td>13</td>
<td>24</td>
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<tr>
<td>I am not familiar with the APSR</td>
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<td>15</td>
<td>73</td>
<td>27</td>
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</table>
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

A. Foster Caregivers were asked the following question:

- Are the state’s standards applied equally to all licensed foster home or child care institutions?

  Most participants spoke primarily to licensing of foster homes, as most commented they were unfamiliar with the licensing process for child care institutions. Themes from the feedback received is reflected in the following comments:
  
  - “I think we’re very consistent for foster parent licensing”
  - “There’s no way to gauge that”
  - “I don’t know”

B. Agency Workers and Community groups were asked the following questions:

- Do you believe there is equal application of state standards when licensing foster care providers in North Dakota (ex: Licensed Foster Homes, Residential Child Care Facilities, Group Homes):

- Please comment on your response: A range of responses were received. A sampling of such comments is listed below:

  - “Not consistent.”
  - “Some residential facilities are there for the money not the children.”
  - “Some licensors ask more in depth questions that what is required, to gain a better understanding of a family’s dynamics, strengths, weaknesses, etc.”
  - “There are issues in group/residential facilities that are not addressed that are not tolerated in foster home placements.”
  - “Personally, observed multiple instances of bias in the process”
  - “No appeal process for RCCF - PRTF 960s”
  - “This is hard to say as one generally isn’t greatly aware of the licensing issues/process of other entities. Significant staff turnover at the state level related to PRTF licensure has made consistency and general knowledge of licensure issues and accreditation issues difficult to maintain from one person to the next. Consistency of knowledgeable state level personnel is required if providers are to reach their full potential as trust is critical when looking for guidance etc.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

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

A. Question asked of Legal Stakeholders:
   - From your experience, are the required criminal background checks being conducted for foster parents, adoptive parents, and staff in child care facilities?

   - Please comment on your response above (n=2):
     - “Unfortunately, I see situations where a home is necessary, and the criminal check is not done right away and then with the caseload of a social worker the criminal check gets delayed.”
     - “No involvement with this”

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

   - Reported safety concern to custodial agency (n=142)
     - Yes, 53%
     - No, 47%
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

* Agency response sufficient to address child’s safety *(n=75)*

- Yes, 56%
- No, 44%

- Please comment on your response above:
  - Several comments were received. Themes from the feedback received is reflected in the following comments:
    - “Custodial agency completely disregarded the concerns and returned children to an unsafe condition. They are now back in foster care and their parents have voluntarily terminated under the work of a competent custodian in another region.”
    - “Sometimes we have different information and I encourage Social Services to review that information. Again, caseloads can delay this.”
    - “I do think that the custodial agency’s hands are tied in some cases. Removing a child from a "bad" home and placing them in a "questionable" foster care setting is not unheard of.”
    - “The situation was addressed and corrected”
    - “There are times when the response was sufficient, times when it was not. It depends on their view/bias of the family.”

C. Question asked of Community Stakeholders:

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

  - The safety of foster youth considered in case planning *(n=131)*

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>57%</td>
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<tr>
<td>18%</td>
<td>Agree</td>
</tr>
<tr>
<td>9%</td>
<td>Disagree</td>
</tr>
<tr>
<td>3%</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>12%</td>
<td>Not Sure</td>
</tr>
</tbody>
</table>

- Please comment on your response above:
  - Several comments were received. Themes from the feedback received is reflected in the following comments:
    - “Not all the time”
    - “I believe every effort is made to be sure that children will be safe when placed with family or in foster care.”
    - “I think this is true for the most part but a lot of times the placement is chosen because it is the only option”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

A. Foster Caregivers were asked the following questions:
   - Are there diligent efforts to recruit foster parents in this region?
   o Themes from the feedback received are represented in the following comments:
     - “From an agency standpoint, yes (therapeutic foster care agency), but I think we as foster parents can better educate others, mentor others, etc. which would cause a lot more people to step up to be foster parents, and also help with retention of foster parents, too.”
     - “They have posters up” and “I hear it on the radio”
     - “How about retain?”
   - Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
   o Themes from the feedback received are represented in the following comments:
     - “Not really” [many participants did not see that there were many recruitment efforts focused on these specific populations]
     - “First think people hear is the negativity about having Native American kids and ICWA – that stuff turns people off”
     - “People want little kids they can adopt. Nobody wants teenagers”

B. Questions asked of Agency Case Managers reporting job responsibilities in Foster Care or CPS, Legal and Community participants:
   - Is there diligent recruitment of foster and adoptive families in your area for the following:

[Graph showing targeted diligent recruitment efforts]
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

- What could be done to increase the availability of foster and adoptive homes able to meet the needs of youth in foster care in your area?

  o Themes from the feedback received are represented in the following comments:
    - “Regional Coalitions ae just not enough”
    - “We need more active efforts in all recruiting and retention activities. More information needs to be disseminated and should be done through several different types of media. There should be more incentives to becoming foster and adoptive homes. There needs to be more education in regard to what homes do, provide and the types of children that will be in the homes.”
    - “It is very difficult for workers to recruit and license homes when they have license day cares, and do case management etc.”
    - “Our area has very few foster homes. In the case of emergency removal, I would not even have anywhere to take a child. We desperately need recruitment in our area. We need information to go out to potential families that makes this sound like a reasonable undertaking.”
    - “One license to accommodate foster care and adoption, too many steps for foster parents or Kinship parents to become adoptive parents”
    - “Need more homes and places to put children temporarily”
    - “More funding to get information out in rural areas about foster care”
    - “Higher incentives for foster homes and more support to them”
    - “More training to work with kids who have experienced trauma and helping parents understand how these kids are going to behave”
    - “Treat the current foster parents better”

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

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

  o One response was received:
    - “Unsure”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

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

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

Barriers to timely processing of incoming ICPC requests (n=71)

- Delays in getting criminal background check results, 40, 25%
- Delays in family responding to licensing paperwork requirements, 42, 26%
- Delays in receiving other required background checks, references, etc., 31, 19%
- Delays for family to complete PRIDE, 32, 20%
- Delays in processing licensing approvals, 4, 2%
- Other, 13, 8%

Themes from the ‘Other reason’ provided are reflected the following statements:

- “Caseload numbers and staff turnover”
- “Lack of communication between counties and families”
- “Delays from the other states children are coming into North Dakota from”
- “Background checks are major sources of delay and PRIDE is only offered twice a year in our region.”
APPENDIX

Appendix

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

**ND R3 All Sites (Grand Forks, Fargo, Bismarck/Mandan), September 2016**

<table>
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<th>Item or Outcome #</th>
<th>Strength</th>
<th>ANI</th>
<th>NA</th>
<th>Substantially Achieved</th>
<th>Partially Achieved</th>
<th>Not Achieved</th>
<th>Not Applicable</th>
<th>Applicable Cases</th>
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<td>17.65% n=3</td>
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### 1.2 Case Rating Summary – ND OCR Statewide, CY18: All Cases

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<th>Not Applicable</th>
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<td><strong>Outcome S1</strong></td>
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1.5 OCR Review Team Composition

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

The OCR Review Team is generally comprised of two OCR Reviewers with a designated Quality Assurance (QA) Lead. All OCR Review Team members must undergo a certification training to become familiar with the Onsite Case Review Instrument and case review process. Each ‘review team’ review generally reviewed two cases during the Onsite Review. Second Level Quality Assurance (SLQA) was provided by the OCR Manager, the CFS Administrator of the OCR, or the Children and Family Services Center Director.

Review Team members were either a paid ‘consultant’ for the Children and Family Services Training Center or participate as part of their regular job duties as authorized by their agency of hire. Most individuals participated in one review while others were able to participate in several reviews.

The collaborative representation for the CY18 OCR Workforce (Reviewers and QA Leads) included:

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Contact Information

For more information about this report, please contact

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
Tel 701/777-5971
Email tleanne.miller@UND.edu

UND Children and Family Services Center
Pete Tunseth, Director
Northern Plains Center for Behavioral Research
400 Oxford St. Stop 7090
Grand Forks, ND 58202-7090
Tel 701/777-3442
Fax 701/777-0789
http://und.edu/centers/children-and-family-services-training-center/

North Dakota Department of Human Services, Children and Family Services Division
Diana Weber, Well-Being Administrator and Administrator of the OCR
600 E. Blvd. Ave., Dept. 325
Bismarck, ND 58505-0250
Tel 701/328-2316
Fax 701/328-3538
http://www.nd.gov/dhs/services/childfamily/index.html