This report describes the results of the North Dakota Onsite Case Review (OCR) for the North Central Human Services region, involving county social service agencies and the Division of Juvenile Services in Bottineau, Burke, McHenry, Mountrail, Pierce, Renville, or Ward counties and the portion of the Fort Berthold Indian Reservation located in Mountrail county served by MHA Children and Family Services. The Onsite Review was held November 5-9, 2018.
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Introduction

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

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

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

MEASURING PERFORMANCE
The period under review (PUR) was October 1, 2017 – date the case was reviewed, which was conducted during the week of November 5, 2018. Case files and interviews were utilized for the case review portion of the Onsite Review week and feedback from seven Stakeholder groups was received. The following report provides a description of the items and systemic factors, the results for the outcomes and items, and a summary of the region’s performance relative to the outcomes, items and systemic factors, and an initial analysis of the findings intended to inform ongoing CQI efforts. Comparison data from North Dakota’s September 2016 Federal CFSR will serve as a reference point throughout this report.

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

CHILD AND FAMILY OUTCOMES: SAFETY, PERMANENCY, WELL-BEING
The federal Onsite Review Instrument (OSRI) is utilized as the review instrument to capture information regarding child and family outcomes for foster care and in-home services. The newly revised OSRI was finalized by the Administration of Children & Families in July 2014 and updated in January 2016. A total of 6 cases were reviewed utilizing the OSRI.
INTRODUCTION

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

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

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

STAKEHOLDER FEEDBACK: CFSR SYSTEMIC FACTORS

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

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

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

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
January 25, 2019
North Central 2018 Onsite Review Summary Details

CASE FILES REVIEWS

Case Demographics

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

A review sample of three (3) Foster Care and three (3) In-Home Services cases were identified out of an overall sample of 231 Foster Care cases and 139 In-Home Services. Two (2) additional foster care and two (2) in-home services cases were identified as alternate cases in the event a case was eliminated during the review week. It should be noted that total case sample was to have involved eleven cases. However, a sufficient pool of case reviewers/QA Leads could not be secured. Available OCR Workforce members had the capacity to review six cases. No cases were eliminated during the review week. Demographic data below reflects information for the reviewed cases.

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**North Central OCR Case Sample by Case Type (n=6)**

- Foster Care: 50%
- In-Home Services: 50%

**North Central OCR Foster Care Case Sample by Agency Type (n=3)**

- County Social Services: 33%
- DJS: 67%
- Tribal Title IV-E: 0%
Ages of Children

In-Home Services case involved a total of six (6) children. Their ages ranged from 1 years, 2 months to 13 years, 1 month at the end of the PUR.

Seven (7) children were involved in foster care cases: (3) target children and other siblings from their home of removal. Their ages ranged from 2 years, 9 months to 16 years, 9 months at the end of the PUR. Ages for the target children ranged from 2 years, 9 months to 16 years, 9 months.

Race/Ethnicity of Children

Race of all children In-Home Services Cases (n=6) 100% White
The ethnicity for all the children in all case types was “Non-Hispanic”.

**Gender of Children**

<table>
<thead>
<tr>
<th>Category</th>
<th>Gender Distribution</th>
<th>Race Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Race of Target Children Foster Care Cases (n=3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White: 33%</td>
<td>American Indian: 67%</td>
<td></td>
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<tr>
<td>Race of all children Foster Care Cases (n=7)</td>
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<tr>
<td>White: 43%</td>
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<tr>
<td>Gender of In-Home Services Cases (n=6)</td>
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</tr>
<tr>
<td>Male: 67%</td>
<td>Female: 33%</td>
<td></td>
</tr>
<tr>
<td>Gender of all children Foster Care Cases (n=7)</td>
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<td></td>
</tr>
<tr>
<td>Male: 71%</td>
<td>Female: 29%</td>
<td></td>
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<tr>
<td>Gender of Target Children Foster Care Cases (n=3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male: 67%</td>
<td>Female: 33%</td>
<td></td>
</tr>
</tbody>
</table>

**Reason for Agency Involvement**

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

One of the hallmarks of the ND OCR is case related interviews. These interviews are conducted with key case participants, those directly involved in the provision or receipt of services in each case reviewed. Interviews are held either in person at the review site or by telephone. During the Onsite Review, 29 interviews held for the 6 cases included:

- 2 children/youths
- 7 Parents
  - 3 Mothers
  - 4 Fathers
- 11 Case managers (FC, In-Home Services, CPS)
- 1 Agency Supervisor
- 3 AASK Adoption staff (2 Adoption Workers; 1 Adoption Supervisor)
- 3 Foster Parents (non-relative foster parents)
- 2 “Other” providers (1 Grandmother/alternate caregiver, 1 Regional Representative)

STAKEHOLDER FEEDBACK

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

- Agency Administrators
- Agency Case Managers
- Legal
- Community
- Parents of children in foster care
- Foster caregivers
- Youth
For this Onsite Review, feedback was received through the form of online surveys for five of the above groups and in-person meetings for two of the groups.

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

Overall response rates for the surveys are as follows:

- **Agency Administrator Stakeholder Feedback Online Survey**
  - 16 participants received the survey and 9 completed responses were received
  - 56% response rate
- **Agency Case Managers Stakeholder Feedback Online Survey**
  - 42 participants received the survey and 17 completed responses were received
  - 40% response rate
- **Legal Stakeholder Feedback Online Survey**
  - 36 participants received the survey and 8 completed responses were received
  - 22% response rate
- **Community Stakeholder Feedback Online Survey**
  - 43 participants received the survey and 8 completed responses were received
  - 19% response rate
- **Parent Stakeholder Online Survey**
  - 5 surveys were completed via the mail. *Unable to determine how many parents in the region were provided information about this opportunity to determine a response rate.*

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

- **Youth Stakeholder Meeting:** 4 participants (*in-person*)
- **Foster Caregiver Stakeholder Meeting:** 3 participants (*1 in-person & 2 via conference call*)
Child and Family Outcomes

SAFETY PERFORMANCE

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

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

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

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

Key strengths noted related to performance on Item 1:

There were three accepted reports of child maltreatment involving four alleged child victims received by the agencies during the PUR. Types of alleged maltreatment included: Neglect (not including medical neglect), Emotional Maltreatment, and Medical Neglect. The priority category ascribed to each report was as follows: Category A (1) and Category C (2). The state’s established timeframes for category A and C cases requires initiation within 24 (a) or 72 (c) hours respectfully and face-to-face contact with the alleged victim(s) within 24 hours (a) or 14 calendar days (c). 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 some situations, the agency’s response exceeded state standards. Furthermore, strong collaboration between county agencies to address children’s safety was noted.

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

All applicable situations received a strength rating on this item. Although not specifically rated in this item, the review noted that in some situations there was not timely contact with the parents, so the parent was unaware of the maltreatment report. This may be an area of practice for which the region may wish to explore.
SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.

Key strengths related to overall performance on Safety Outcome 1:
The agency’s response to accepted reports of child maltreatment was observed to be a practice strength in the three applicable cases. Initiation and face-to-face contact with all alleged victims met or exceeded timeframes established by state statutes for all Category A and C reports (those requiring an initiation response within either 24 or 72 hours). Furthermore, face-to-face contact with alleged victims was made well-within the timeframes required by the state for all reports.

Key areas needing further exploration related to performance on Safety Outcome 1:
The review did not identify performance challenges specific to this outcome.

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

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

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

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

**CY18 NCHS OCR Results:** One case 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.

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</tr>
<tr>
<td>Area Needing Improvement</td>
<td>30.43%</td>
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**Key strengths noted related to performance on Item 2:**

In one situation applicable for assessment of this item, the agency made concerted efforts to provide or arrange for the family to protect the children and prevent their entry into foster care. The agency facilitated the family’s access to addiction assessments and treatments, including random UA testing and hair follicle testing for the children, and collaborating with a probation officer related to parental substance abuse and unsafe conditions in the home.

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

When rated an area needing improvement, concerted efforts were not made to provide appropriate safety-related services to children remaining in the home despite safety concerns being present. Consideration of all available safety services, along with delays in service delivery were noted in 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 NCHS OCR Results: Three cases were rated as a strength for Item 3 because the agency properly assessed all applicable individuals for risk and safety and appropriately addressed all identified concerns.

Key strengths noted related to performance on Item 3:

There were no maltreatment allegations about the family that were never formally reported or assessed through CPS nor were there any maltreatment allegations that received a ‘no services required’ finding despite evidence that would support a ‘services required’ finding in any of the 4 cases. The agency conducted an initial assessment that accurately assess all the risk and safety concerns in one applicable cases and ongoing assessments that accurately assessed all risk and safety concerns at critical case junctures occurred in three of the cases. When rated a strength, assessments were completed using formal and informal assessment efforts, including completion of the Family Assessment Instrument and 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 one of the three applicable cases. Additionally, there were no safety concerns pertaining to children in the family home that were not adequately or appropriately addressed by the agency in all applicable cases. Other practice strengths noted was that there were no concerns related to the safety of the target child in foster care during visitation with parent/family that was not adequately or appropriately addressed by the agency. Furthermore, there were no concerns for the target child’s safety in the foster home or placement facility that were not adequately or appropriately addressed by the agency in both foster care cases.
Key areas needing further examination related to performance on Item 3:

When rated an area needing improvement, evidence that a thorough and comprehensive assessment of all safety and risk was conducted either initially or on an ongoing basis was not found in three situations. When safety concerns were present, evidence that the agency developed an appropriate safety plan with the family and continually monitored the safety plan when needed was not found in one situation. Furthermore, when rated an area needing improvement, evidence that safety concerns for children in the family home were not adequately addressed by the agency was not found for one situation. Systemic challenges potentially impacting performance in this outcome noted were agency challenges with staff turnover and transferring cases from one worker to another.
SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

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

Key areas needing further examination related to performance on Safety Outcome 2:
Key areas for further examination noted in the review involve ensuring safety services are provided when safety concerns are present. Lapses in assessing safety/risk due to case transfers from one caseworker to another impacted performance and may be an area the region may wish to explore further.
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 NCHS OCR Results: All three 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:

All three target children had only one placement setting during the PUR. Results indicate the agency made concerted efforts to provide appropriate services and resources to facilitate placement stability. The placement setting supported the permanency plan for each youth. Furthermore, the current or most recent placement setting for each youth was stable at the time of the review.

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

This review did not identify any key areas needing further examination relative to item 4.
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 NCHS OCR Results: One case received a strength for Item 5 indicating that the permanency goal was appropriate for the child and was established in a timely manner.

Key strengths noted related to performance on Item 5:

In the foster care cases reviewed, one primary permanency goal was assessed as the permanency goals in effect during the PUR: Adoption (3). No concurrent goals were in effect for these cases during the PUR. Reviewers noted that in all cases, the target child’s permanency goals were specified in the case record. Permanency goals in effect during the PUR were established in a timely manner for one of the target children. Furthermore, the current case goal in effect during the PUR was appropriate to the child’s needs for permanency and to the circumstances of the case in each case. Parental rights for foster youth had been terminated prior to the PUR, thus ASFA timelines concerning the filing of a petition for termination of parental rights or documenting compelling reasons not to file were not applicable.

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.

Key

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<tr>
<th></th>
<th>Strength</th>
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<td>80%</td>
<td>20%</td>
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<tr>
<td>CY18 NCHS OCR n=3</td>
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</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 NCHS OCR Results:** One case received a strength for item 6 because the agency and courts made concerted efforts to achieve the permanency goal in a timely manner.

### Key strengths noted related to performance on Item 6:

Timely achievement of permanency was realized for the one case receiving a strength rating. Permanency through adoption for this young foster child was realized in approximately 20 months. Although parental rights were terminated prior to the PUR, the Agency and Court maintained vigilance until the adoption was finalized. The agency partnered with the adoption service provider and adoptive family for the timely completion of paperwork and home study along with the processing of the adoption assistance application and placement paperwork. The court supported a timely hearing for the finalization.

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

Based on the circumstances of the situation, timely achievement of permanency through adoption was not achieved or determined to be likely in the two cases rated an area needing improvement. Delays in petitioning for TPR or timely establishment of adoption as the goal may be contributing factors related to this performance. Furthermore, the lack of court efforts to order recommended services or delays created following the change of caseworkers were other contributing factors observed. The region may wish to conduct further exploration concerning this item to guide practice improvement efforts.
PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY IN THEIR LIVING SITUATIONS.

Key strengths related to performance on Permanency Outcome 1:
Placement stability was achieved for all target children reviewed. The review also revealed that the current permanency goals for one target child was established timely and remained appropriate throughout the PUR. Furthermore, one target child achieved permanency through adoption in a timely manner. Concerted efforts by the agency and courts to ensure the child experienced permanency and stability were noted in this situation.

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 through adoption was noted to impact performance relative to this outcome. Further examination relative to this item is needed to ascertain if deeper challenges exist within the region and to inform targeted improvement efforts.
CHILD AND FAMILY OUTCOMES

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

ITEM 7: PLACEMENT WITH SIBLINGS

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

CY18 NCHS OCR Results: All applicable cases received a strength indicating the agency made concerted efforts to place siblings together or separated the siblings due to the specific needs within the sibling group.

Key strengths related to performance on Item 7:

In one of the two cases, the target child was placed with all siblings who were also in care throughout the PUR. In the other case, there was a valid reason for the child’s separation from one of the siblings in care that existed the entire PUR. Efforts to keep those siblings connected was evident during the review as the condition necessitating separate placements continued throughout the PUR.

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

This was a strong area of practice for the region and the review did not identify any specific practice or systemic challenges related to Item 7.
CHILD AND FAMILY OUTCOMES

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

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

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

CY18 NCHS OCR Results: One applicable case was rated as a strength for Item 8.

<table>
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<th>% of Applicable Cases</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
</tr>
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</tr>
<tr>
<td>CY18 NCHS OCR n=1</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Key strengths related to performance on Item 8:

The typical pattern of visits between the target child and a sibling placed in a different setting was at least twice a month. The agency made concerted efforts to ensure these visits were sufficient to maintain and promote the continuity of the sibling relationship. This occurred through quality visits occurring in the target child’s home and community. Parental rights for all target children were terminated prior to the PUR. Thus, assessment of the visits between parents and children was not applicable in this review.

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

The review did not identify any specific practice or systemic challenges related to Item 8.

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

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

ITEM 9: PRESERVING CONNECTIONS

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

CY18 NCHS OCR Results: Two 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 the two applicable cases. Maintaining the target child in the same school and visits with siblings not in foster care and extended family were some of the methods noted. Sufficient inquiry was conducted to determine whether a child may be a member of, or eligible for membership in, a federally recognized Indian Tribe in all cases. ICWA was not found applicable in any of these situations during the PUR.

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

When rated an area needing improvement, the review did not find evidence that concerted efforts were made maintain the child’s important connections to maternal relatives. Contributing factors to this challenge were not specified and the region is encouraged to further explore practice to inform practice improvement efforts.
**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 NCHS OCR Results:** Two 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.

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**Key strengths related to performance on Item 10:**

Although no target children’s current or most recent placement was with relatives, the reviewed revealed that agency made efforts to consider maternal and/or paternal relatives prior to the PUR and placement with relatives during the PUR was not in the child’s best interest in two of the applicable situations. Furthermore, the agency made concerted efforts during the PUR to conduct a thorough relative search for maternal relatives in the one applicable situation.

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

When rated an area needing improvement, the agency did not make concerted efforts to identify and assess maternal relatives as placement options for the target child. Further examination relative to this item is needed to ascertain if deeper challenges exist within the region and inform practice improvement efforts.
**PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.**

**ITEM 11: RELATIONSHIP OF CHILD IN CARE WITH PARENTS**

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

**CY18 NCHS OCR Results:** There were no cases applicable for assessment of Item 11.

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**Key strengths related to performance on Item 11:**

There were no cases applicable for assessment of Item 11.

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

There were no cases applicable for assessment of Item 11.

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*For the purposes of the OSRI Items 8 & 11, "Parents" are defined as the parent from whom the child was removed and with whom the agency is working toward reunification.*
PERMANENCY OUTCOME 2*: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

Key strengths related to performance on Permanency Outcome 2:

Concerted efforts to preserve the continuity of family relationships and connections throughout the PUR were noted during this review. Agency efforts to place siblings together immediately was shown to be a strength. When siblings were not able to be placed together, their relationships were maintained through frequent and quality visits. Agency efforts also focused on encouraging and supporting the target child’s need to maintain important connections, particularly with school, peers, culture, and extended family. In all applicable cases, efforts to determine the child’s membership in, or eligibility for membership in, a federally recognized Indian Tribe were evident.

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

Concerted efforts to ensure comprehensive and thorough relative searches and maintaining connections for children placed as infants offer practice areas worthy of further examination within the region.

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

WELL-BEING PERFORMANCE

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

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

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

CY18 NCHS OCR Results: Two applicable 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.

Key strengths related to performance on Item 12:

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

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

Predominant challenges noted when sub-items were rated an area needing improvement involved the agency’s efforts to accurately and comprehensively assess the needs of children and parents on an ongoing basis as well as to provide appropriate services to meet the identified needs. Challenges were noted in both foster care and in-home services for sub-item 12A and for in-home services cases for sub-item 12B. Further exploration is warranted to better understand specific barriers to stronger performance for this item.

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

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

ITEM 12A: NEEDS AND SERVICES TO CHILD

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

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

Key strengths related to performance on Item 12A:

Assessing and addressing the target children’s needs was rated as strength in two cases on this sub-item. When a strength, evidence showed that the agency was consistently assessing the target child’s needs and ensuring services were provided to address needs. Services were appropriately matched to identified needs, such as a community play group to address social skill development and services to prepare the young children for adoption. Target youth over the age of 14 had their Independent Living skills assessed and appropriate services were provided, primarily by the therapeutic foster care services provider.

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

When rated an area needing improvement, indication that the agency conducted a comprehensive and accurate ongoing assessment of the all children’s needs was not evident. For some in-home case situations, evidence that the needs of all alternate care givers were assessed was not found. Furthermore, for target youth over age 16, the Independent Living Plan was not contained in the case file. It was reported that agencies often do not include this plan in the case record. In some situations, it was noted that the needs of the child were assessed and addressed due to the efforts of community providers and not specifically by the custodial agency. Challenges were noted for both case types (foster care and in-home services) within this sub-item. Further exploration is warranted to better understand specific barriers to stronger performance for this item.
CHILD AND FAMILY OUTCOMES

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

ITEM 12B: NEEDS AND SERVICES TO PARENTS

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

CY18 NCHS OCR Results: No case received a strength for item 12B indicating the agency made concerted efforts to assess the needs of applicable parents and provide services to address identified needs and accomplish case goals.

Key strengths related to performance on Item 12B:

Although no case received a strength rating for this sub-item, it should be noted that strong practice was noted within each case reviewed for certain aspects of this sub-item. Evidence was found that the agencies had assessed and addressed the needs of some mothers and fathers at some point during the PUR or the barrier to a strength rating was related to systemic challenges within the service array. When strong practice was noted, the agency ensured a comprehensive and accurate assessment of the parent’s needs, sometimes on a weekly basis.

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

When this sub-item was rated an area needing improvement, challenges were noted in accurate and comprehensive assessments of the needs of mothers (n=2) and fathers (n=2), despite their whereabouts being known to the agency. The review also did not find evidence that, during the entire PUR, appropriate services were provided to address all identified needs for mothers (n=2) and fathers (n=2). Systemic challenges observed impacting outcomes involved service array challenges to providing appropriate addiction services to parents and lapses in services when a case transitions from one worker to another.

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

Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs.

Item 12C: Needs and Services of Foster Parents

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

CY18 NCHS OCR Results: All applicable cases were rated a strength indicating the agency made concerted efforts to assess the needs of foster parents to support their ability to care for the target child and provided appropriate services for the identified needs.

Key strengths related to performance on Item 12C:

Foster Parents needs were assessed by the agency and appropriate services provided to address the identified needs throughout the PUR in each case. Regular and supportive communication and visits by the target child’s case manager were among the agency efforts attributed to the strength performance when assessing the needs and providing services to foster parents. Adoption service providers also supported the agency and families to assess and address the foster parent’s needs related to accomplishing the goal of adoption.

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

The review did not identify any specific practice or systemic challenges related to ratings for Item 12C in this review. The review did note, however, there was a strong reliance on partner agencies to complete needs assessments for foster parents. The region may pursue closer examination of practice in this area to ensure the custodial agency remains vigilant in their efforts to ensure foster parents needs are assessed and addressed.
**CHILD AND FAMILY OUTCOMES**

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

**ITEM 13: CHILD AND FAMILY INVOLVEMENT IN CASE PLANNING**

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

**CY18 NCHS OCR Results:** Two 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.

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**Key strengths related to performance on Item 13:**

Concerted efforts to actively involve the child was noted in one of two applicable situations and both parents were actively involved in case planning efforts in one of three applicable cases. The agency involved the child through participation in Child & Family Team meetings, during monthly visitations and networking with the private foster care agency worker. When rated a strength parents were engaged through participation in Child & Family Team meetings and phone calls, visits, e-mail interactions which occurred between the formal meetings. Some parents reported being able to express their thoughts and opinions and felt heard by the team; they knew their case plan. The agency engaged absent fathers in case planning when appropriate. It was noted that in cases not receiving a strength rating, strong practice was found during portions of service provision.

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

Evidence of concerted efforts on the part of the agency to actively involve children was not found in one applicable case. Additionally, evidence of concerted efforts to actively involve parents was not found in two applicable cases. Some parents were not aware of what their case plan or case plans were not specific and clearly defined. Involving parents in case planning at a developmental level individualized to their needs offers an area for the region to explore further as it relates to performance on this item.

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

Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs.

Item 14: Caseworker Visits With Child

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

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

Key strengths related to performance on Item 14:
When rated a strength, the typical pattern of visitation between worker and child(ren) during the period under review was found to be less than twice a month, but at least once a month. The established pattern of caseworker visits with these children was deemed of sufficient frequency to meet the needs of the children for both cases. Efforts to assess safety, permanency, and well-being needs at each visit, with most of the visits being conducted in the child's residence, during medical or therapy appointments, engaging the child in an age and developmentally appropriate manner, as well as seeing the child alone for a portion of the visits contributed to the high quality. Documentation of quality visits, even with very young children, was in the case record and affirmed through interviews.

Key areas needing further examination related to performance on Item 14:
When rated an area needing improvement, the quality of visitations between caseworker and children was not sufficient to promote achievement of the case goals. Visits were typically occurring monthly, however, the quality of these visits and focus on accomplishing case goals was not evident. Case documentation did not clearly reflect quality components (focusing on issues pertinent to case planning, location and length of the visits, etc.).
CHILD AND FAMILY OUTCOMES

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

ITEM 15: CASEWORKER VISITS WITH PARENTS*

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

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

Key strengths related to performance on Item 15:

When rated a strength, the typical pattern of visits between case manager and mother and father was at least once a month. The frequency and quality of those visits was sufficient to meet the needs of the case. Furthermore, the quality of visits between the caseworker and mother was seen as sufficient and meeting the needs of the case in another applicable situation. Contributing to high quality visits were efforts such as focusing on the needs of the children and family (i.e. mental health service needs, case planning needs, etc.), holding meetings in the home, office, or community locations offering adequate privacy. It should be noted that in some cases not receiving a strength rating, there was strong casework practice for frequent and quality visits with parents observed for a portion of the PUR.

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

When rated an area needing improvement, the typically pattern of visitation between case worker and the parent was monthly, yet this pattern of visitation was not sufficient to meet the needs of the case. Furthermore, consistent and quality visitation in these situations was not present. Challenges were primarily noted when there was a change in caseworkers for a family.

*For the purposes of the OSRI, “Parents” are defined more broadly for Items 12B, 13, 15 than for Items 8 & 11. The definition may vary for in-home services and foster care cases. Readers are encouraged to refer to the OSRI for specific definitions.
WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

Key strengths related to performance on Well-Being 1:

Concerted efforts to conduct comprehensive and accurate assessment of the child’s needs and provide appropriate services was noted in some cases. Robust practice related to ongoing assessments and service provision to foster parents to address their individual needs was seen in all foster care cases reviewed. Similar practice related to the assessment of and addressing the needs both mothers and fathers was noted within applicable cases, although as a whole these cases did not receive a strength rating. Efforts to actively engage the child and parents was seen in some applicable cases. Caseworker visits with children and parents were sufficiently frequent and of high quality in some cases. Agency efforts to adjust the frequency of those visits when situations demanded were noted. When this occurred, agency efforts to actively involve the child and parents was found.

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

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, reliance on private providers to assess needs and ensure services are delivered, 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.

It was noted that workforce turnover may be a contributing factor impacting performance in this, and other, outcomes. CPS and caseworker efforts for family engagement and relationship building was noted to be a strong practice area in some cases and may not be as readily apparent by a cursory review of the overall ratings.
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 NCHS OCR Results: One applicable case was 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.

Key strengths related to performance on Item 16:

The agency made concerted efforts to accurately assess the education needs of the children in one of two applicable cases. The agency engaged in concerted efforts to address the identified educational needs through appropriate services. Services included Early Intervention Assessment, Occupational, Physical and Speech therapy services, and a referral to Early Head Start. It was also noted that a target youth had their educational needs met through an Individual Education Plan (IEP) and adaptive services during the PUR.

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. It was noted that the agency relied on the foster parents and foster parent agency to assume much of this responsibility during the PUR.
WELL-BEING OUTCOME 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.

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

The agency made concerted efforts to accurately assess the target child’s educational needs throughout the PUR in the one applicable case for this outcome. Appropriate services were provided to address identified needs in both applicable situations.

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

The agency relied on a partner agency to assess the target child’s educational needs throughout the PUR.

Note: A “Partially Achieved” rating for this outcome is possible when one of the two rating questions contained in item 16 is answered “yes” but the other question is answered “no.”
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 NCHS OCR Results: Two cases were rated as a strength for this item indicating the agency addressed the physical health needs of the child, including dental needs of the child(ren).

Key strengths related to performance on Item 17:
The agency accurately assessed the children’s physical and dental health needs in four of five applicable cases. The agency also ensured that appropriate and timely services were provided to the children to address all identified physical health needs in three of five applicable cases. Services included (but not limited to): Health Tracks screenings, Immunizations as needed for most target children, Early Intervention services, medical procedures, and Occupational Therapy. The agency ensured appropriate services were provided to the children to address all identified dental health needs in two of four applicable cases. Dental services provided primarily involved regular dental examinations.

Key areas needing further examination related to performance on Item 17:
Evidence of agency efforts to provide appropriate oversight for medications was not found in one foster care situation. Agency efforts to accurately assess and address the children’s physical and/or dental health needs throughout the PUR was not found in three cases. Noted challenges included delays in dental examinations, a lack of providers able to provide dental services for children under the age of 3, a lack of documentation regarding the agency’s efforts to assess and monitor a foster child’s medical condition, and an Early Intervention screening that did not occur.
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 NCHS OCR Results: No case was rated a strength for Item 18.

Key strengths related to performance on Item 18:

Despite no case receiving an overall strength rating for this item, the agency provided appropriate services to address the children’s mental/behavioral health needs in one of the applicable cases. Examples of services employed to meet identified needs as applicable in the cases reviewed included formal mental health assessments, counseling services, residential treatment, and psychotropic medications. Comprehensive and accurate ongoing assessments of the children’s mental/behavioral needs occurred during a portion of the PUR.

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

The region and state are encouraged to review practices and policy related to providing appropriate prescription oversight for psychotropic medications, an area of practice found to be a challenge for this region. Ensuring children receive mental/behavioral assessments and are connected to appropriate services that are effective and appropriate to the identified needs of the child consistently throughout the PUR provides an additional area for further examination as the region seeks to strengthen performance related to this item.
WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.

Key strengths related to performance on Well-Being Outcome 3:
When rated substantially achieved, concerted agency efforts to ensure physical, dental and vision health needs of children were assessed and addressed was evident. The agency attended to the medical needs timely for children and there was strong use of early intervention services. Interviews and documentation revealed the agency supported children receiving assessments and needed services.

Key areas needing further examination related to performance on Well-Being Outcome 3:
Providing appropriate oversight of prescription medications related to the physical health and mental/behavioral health needs of foster youth is an area of focus for the region as it considers practice improvement efforts. Reliance on partner agencies and service array challenges may be contributing factors to the overall performance on this outcome the region may wish to consider when exploring practice improvement opportunities.
Stakeholder反馈 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 Diagram]

*Note: Parents were afforded a “Does not apply” option and one (3) parents chose that option for the second question in the table above.*

B. Questions asked of the Parents include the following [n=5]:

- **I have a clear understanding of what their family needed to accomplish before their case could be closed**
  - Strongly Agree (1); Agree (2); Disagree (1); Strongly Disagree (1); Does Not Apply (0)
- **My family’s case plan has information about the following items:**
  - A. My children’s placement:
    - Strongly Agree (1); Agree (1); Disagree (1); Strongly Disagree (1); Does Not Apply (1)
  - B. My child/ren’s school progress:
    - Strongly Agree (1); Agree (1); Disagree (1); Strongly Disagree (1); Does Not Apply (1)
  - C. My child/ren’s health progress:
    - Strongly Agree (1); Agree (2); Disagree (1); Strongly Disagree (1); Does Not Apply (0)
- **Please comment on anything else you’d like to share about your family’s case plan (optional):**
  - “I had one meeting and it was by phone and was pretty much ignored and they talked among themselves. Very disappointing.”
  - “My oldest daughter was never evaluated or taken to a Psychologist for false memories.”
C. Questions asked of the Foster caregivers include the following:

- Do you, in your role as caregiver for the foster child/youth, participate in meetings where case plans are created (also known as Child and Family Team meetings - CFT meetings)?
  - There was consensus they generally attend Child and Family Team meetings.

- If so, from your perspective, are case plans developed jointly with the children's parents?
  - There was consensus that yes, case plans are developed jointly with the children's parents from their perspective.

- Describe examples of how you have observed the agency try to involve the parents in the development of the plan
  - 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."

- As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
  - "Absolutely, yes" [all agreed]

D. Questions asked of the Youth include the following:

- What is your understanding of how the agency involved your parent(s) in the development of the plan?
  - Specific comments include:
    - "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.?
  - Participants indicated they were there. 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 attend all my meetings. They try to schedule them after school, sometimes during the school day."
  - All stated they knew their case goal.
How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

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

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

  ![Child and Family Team Meetings](n=22)

  - Strongly Agree: 68%
  - Agree: 27%
  - Disagree: 5%
  - Strongly Disagree: 0%

  *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](n=33)

  - The safety of each child in the family (n=33)
  - The family’s case plan (n=34)
  - The permanency goal for all children (n=33)

  - Strongly Agree: 39% 45%
  - Agree: 12% 35% 33%
  - Disagree: 3% 12% 6%
  - Strongly Disagree: 9% 9% 9%

  *Strongly Agree Agreement Disagree Strongly Disagree*

Note: Parents and Community members were afforded a “Do not Recall” option and two (2) respondents chose that response for the first question, one (1) respondent chose that response for the second question and two (2) respondents chose that option for the third question in the table above.

- Respondents who did not respond “Strongly Agree” were the asked: When topics relating to safety of all children in the family, family case plan tasks, or the permanency goal for all children in foster care at CFT Meetings does not occur, please briefly explain noted barriers. The following barriers were reported:
  - “If a foster child is adjudicated unruly, the safety of children in the home who are not in foster care may not be discussed.”
  - “When families disagree with the agency and vice versa on the best interest of the child.”
  - “Caseworkers don’t seem to understand their role is assessing for safety of all children not just the foster child. Or they choose not to assess?”
Parent respondents were asked: Briefly comment about your responses to the questions above (optional):

- "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"
- "The agency took it personally responsible to agree with the non-custodial parent and allowed that parent to coach my oldest daughter"
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.

![Permanency Hearings Chart]

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>Top rated barriers to initial permanency hearings (n=6)</th>
<th>Top rated barriers to subsequent permanency hearings (n=6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A continuance was needed</td>
<td>5</td>
</tr>
<tr>
<td>The Court’s calendar was full</td>
<td>4</td>
</tr>
<tr>
<td>The State’s Attorney’s Office was not able to submit the request in a timely fashion</td>
<td>1</td>
</tr>
<tr>
<td>Case Management staff was not able to submit the necessary paperwork to request the hearing</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
</tbody>
</table>

○ Other reason reported:
  ● "Respondent not being served"
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: TERMINATION OF PARENTAL RIGHTS

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

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

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

- Other methods reported:
  - “Rely upon social services keeping track”
  - “CFTM”
  - “Review at quarterly CFTM”
  - “Discussion at CFTM”

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)
Other barriers reported:

- “Exceptions are found”
- 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.”
- “All TPR’s were either accomplished in a timely fashion or a determination made that TPR was not appropriate under the facts of the case.”
- “Lack of services and the travel involved in a rural area hinder reunification”
- Sometimes it comes down to parents are given years of chances before the court will hear a TPR, which makes it hard for us to meet our timelines.”
- “Court date availability”
- “Judge’s feelings toward TPR extend the process”
- “Parents getting their services started after they have wasted 12 months”

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>FFY</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 (n=5):

- “Social services work hard to give a parent every chance they can before termination. Sometimes it carries out to long. Sometimes caseload mgmt don’t have time to get it done.”
- “This is usually due to the worker not filing the affidavit in a timely manner.”
- “Custodians are slow to get biological parents involved and motivated and often wait until the 15-month time requirement to begin doing any actual work towards the TPR. Custodians also refuse to file for a TPR when they clearly know the parents will not make any progress towards the goal of reunification. It seems they wait until the NEED to do something rather than when its right for that family or child.”
- “County workers fear of filling for TPR”
- “Strong Practices is the philosophy to try the least restrictive measures first before the termination of parental rights are considered.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: NOTICE OF HEARINGS AND REVIEWS TO CAREGIVERS

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

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

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

- What has been your experience receiving notice of upcoming reviews and hearings regarding foster children/youth for whom you provide care?
  - Most participants said it mostly comes from the caseworker. 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 GAL involvement was a bit awkward because they became involved out of the blue (didn’t know they were coming), probably because they’re short staffed.”
    - “The county worker keeps in good contact with us and in addition we get notice from the court directly as to what’s happening.”

- Does your experience match the experiences of other foster caregivers you know?
  - Participants stated “yes, I think it’s the same as with other foster parents” [others agreed]

- 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?
  - “For me it’s been detailed with the caseworker and she presents it. Honestly, I’ve never asked the question because she’s been able to handle that part of it.”
  - “We haven’t had to do that because we’ve expected an outcome and we do get a monthly report on everything that’s going on with the foster child. The social worker pretty much covered everything on our behalf.”

- 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?
  - “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 (n=24)

<table>
<thead>
<tr>
<th>Foster Parents</th>
<th>Pre-Adopt Parents</th>
<th>Relative Caregivers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every Time</td>
<td>Often</td>
<td>Sometimes</td>
</tr>
<tr>
<td>46%</td>
<td>50%</td>
<td>46%</td>
</tr>
<tr>
<td>38%</td>
<td>17%</td>
<td>38%</td>
</tr>
<tr>
<td>4%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>0%</td>
<td>0%</td>
<td>13%</td>
</tr>
<tr>
<td>13%</td>
<td>29%</td>
<td>13%</td>
</tr>
</tbody>
</table>

**Other reasons provided:**
- "I am not aware of any of the NOTICES not being given to foster caregivers in our county."
To the best of your knowledge, are the following caregivers of children in foster care in the agency given the RIGHT TO BE HEARD in any review or hearing held regarding the child?

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

- Other reasons provided:
  - “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:
  - No responses to this optional question were received.

<table>
<thead>
<tr>
<th>Judicial experiences with Foster Caregivers Right to be Heard (n=0)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster caregivers attend hearings and provide verbal input</td>
</tr>
<tr>
<td>when asked by the Court</td>
</tr>
<tr>
<td>Foster caregivers attend hearings but do not have</td>
</tr>
<tr>
<td>comments when asked by the Court</td>
</tr>
<tr>
<td>Foster caregivers provided written information for the</td>
</tr>
<tr>
<td>Court to consider during hearings</td>
</tr>
</tbody>
</table>

- Never  ■ Rarely  ■ Sometimes  ■ Often  ■ Every Time
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=12)
  o Before attending Child Welfare Certification Training: 7
  o While attending Child Welfare Certification Training: 7
  o After attending Child Welfare Certification Training: 1

• 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=7)
  o One response each for the following years: 2017, 2012, 2005
  o Two responses each for the following years: 2018, 2016

• 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 chart]

  - Training I receive(d) helped strengthen my ability to perform my duties in child welfare
  - Supervision I receive(d) helped strengthen my ability to perform my duties in child welfare

  - Please provide any additional comments regarding the initial training and support offered to you or other child welfare workers within the first year of employment: (n=6)
    o “I have received very limited training and the training that I have received was from my coworkers not a supervisor.”
    o “Most of the training that was helpful was provided by co-workers.”
    o “I am still attending Child Welfare training. The information I have learned thus far has been helpful.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

B. Agency Administrators were asked the following questions:

- To the best of your knowledge:

  * Initial Staff Training experiences as reported by Agency Administrators*

<table>
<thead>
<tr>
<th>Experience</th>
<th>Agency Administrators</th>
</tr>
</thead>
<tbody>
<tr>
<td>New child welfare workers complete the initial training within their first year of employment (n=9)</td>
<td>88% Every Time</td>
</tr>
<tr>
<td>How often are new child welfare workers in your agency assigned the responsibility of a full caseload prior to completely Child Welfare Certification training? (n=5)</td>
<td>70% Frequently</td>
</tr>
</tbody>
</table>

- 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 (n=2)*

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Agency Administrators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training availability</td>
<td>0% Rarely</td>
</tr>
<tr>
<td>Training canceled due to poor registration</td>
<td>100% Every Time</td>
</tr>
<tr>
<td>Date/time of training</td>
<td>100% Every Time</td>
</tr>
<tr>
<td>Caseload constraints, unable to release worker for...</td>
<td>100% Every Time</td>
</tr>
<tr>
<td>Other</td>
<td>100% Every Time</td>
</tr>
</tbody>
</table>

- Due to an error in the survey logic, respondents were unable to provide a comment.

- 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:

  * Initial staff training teaches skills and knowledge needed to perform duties (n=9)*

<table>
<thead>
<tr>
<th>Experience</th>
<th>Agency Administrators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial staff training teaches skills and knowledge needed to perform duties</td>
<td>100% Every Time</td>
</tr>
</tbody>
</table>
Respondents who did not answer “Every Time” to this question were asked: In your opinion, what gets in the way of child welfare workers getting all the needed skills and training needed to perform their duties from INITIAL trainings? Choose the most important reason:

- Other reason provided:
  - No other reasons provided.

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

- Other supports provided:
  - No other comments provided.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: ONGOING STAFF TRAINING

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

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

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

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

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

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

- Other reasons provided:
  - “Constant changes in how things are done. You get trained, start applying it, then it’s done different a few months later, or more is added to it.”
  - “No ongoing training available or workers don’t attend when it is.”
  - “Time”
  - “The trainings are the same over and over again”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS
STAFF AND PROVIDER TRAINING: FOSTER AND ADOPTIVE PARENT TRAINING

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

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

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

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

- **What training was initially available to you when you began providing foster/relative care/pre-adoptive care?** Responses include:
  - “PRIDE, 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.”
  - “I had CPI, trauma-focused care, etc. in addition to PRIDE 1st aid/CPR. It’s been a lot of training.”

- **Was the initial training of high quality to prepare you for your role as a foster caregiver?**
  - “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.”

- **What ongoing training is available?**
  - “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.”

- **Is there ongoing training of high quality and does it support you in your role as a foster caregiver?**
  - “Festivals of training are helpful”
  - “We get a lot of training”

- **Have you participated in, or are you aware of specialized training for adoption in your area? If so, is that training of high quality?**
  - All participants responded with a “No.” Several commented “If there is, I haven’t seen it yet. But it might just be where we are in the adoption process’ or “I don’t recall hearing about any available.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- What are the barriers, or what gets in the way, of receiving necessary training?
  
  o “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.”
  
  o “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.”
  
  o “Lack of childcare available sometimes, but they have coordinated with a local childcare center to assist during Share and Support. Also - our social worker has assisted us in finding other foster parents to watch the kids while we attend training.”

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

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

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

![Bar chart showing the percentage of respondents who believe ongoing training teaches skills and knowledge needed to perform duties.]

- Other reasons provided:
  
  ▪ “Scheduling conflicts, child care arrangements”
  ▪ “Increasingly difficult behaviors/needs of the children. Much like training for the case managers, training often focuses mostly on defining issues and
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Understanding their origins and far too little time on how to manage them with limited resources and supports.
  - “They get the information in training, but the carryover to real life situations is not always there. It’s as though they forget what they were told in training or think that love will fix everything.”
  - “Distance and travel, lack of training”

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

(Results displayed on the next page)
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 teaching needed skills and knowledge (n=7)

- Opportunities to practice the skills learned: 14%
- Topics are too general: 14%
- Presenters knowledge of the subject: 29%
- Training materials: 29%
- I’m not sure: 14%

Other reasons provided:
- No other reasons provided.
### Barriers to ongoing staff training to Residential Child Care staff teaching needed skills and knowledge (n=7)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Topics are too general</td>
<td>0%</td>
</tr>
<tr>
<td>Topics are too advanced</td>
<td>28%</td>
</tr>
<tr>
<td>I'm not sure</td>
<td>43%</td>
</tr>
<tr>
<td>No other reasons provided</td>
<td>29%</td>
</tr>
</tbody>
</table>

**Other reasons provided:**
- No other reasons provided.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

SERVICE ARRAY AND RESOURCE DEVELOPMENT: SERVICE ARRAY

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

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

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

A. Questions asked of Foster Caregivers:
   - Are services available to support the children placed with you? Do you receive the support you need to do the work you do with the children placed with you?
     o Specific comments received include:
       ▪ “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.” [others agreed]
       ▪ “The county caseworker has been helpful too, but the daily support comes from the therapeutic foster care worker.”
   - 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.
     o Specific comments received include:
       ▪ “Can’t think of anything” [Others agreed]
   - 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?
     o “No” [All in attendance]
   - 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 Helpful:
       ▪ “Services for education concerns – tutor made available to assist with this including financial help to cover the cost; Reading Clinic through Minot State University was helpful; special services available within the public school setting and they responded immediately to assess what services were needed; we’re seeing gains in the children because of those educational services.” [another agreed that school personnel are providing individual supports to their foster child which has resulted in academic success]
       ▪ “Great dental, vision, medical care who take time to understand the kids and talk to them.”
       ▪ “Therapy has been awesome too.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

o Missing (not working well):
  ▪ “Difficult to find medical doctors and therapists who take Medicaid – huge issue.”
  ▪ “Some therapists won’t let MA clients preschedule, which is difficult, too. We’re delaying some services until we switch to our insurance providers.”

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 “My caseworker keeps us up to date on appointments as needed. Physical health/dental health yearly, counseling monthly.”
  o “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 “Yes – I have appointments literally every week – yoga therapy, therapy/counseling, orthodontists, etc.”
  o “Yes – the services are helping me meet my goals” [All present]
• 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 Specific comments include:
    ▪ “No” [several in the room]
    ▪ “I know some people who do have restrictions who aren’t in foster care for various reasons, then some kids in foster care who can have more freedom than other teenagers would.”
    ▪ “The typical teenager doesn’t understand what it’s like.”
    ▪ “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.”
    ▪ “My foster parents make it feel like there’s not a difference, they treat me like their own kids.”
    ▪ “In foster kids you have more availability to get help – you’re more independent.”
    ▪ “It’s good that they’re strict with us because we’ve been through a lot. If they’re not strict with us we won’t succeed in life. They could always be there for us.” [another agreed]
• 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.?
  o “Yes” [most agreed while some stated they were just starting to receive IL services]
  o Specific comments include:
    ▪ “My foster parents are helping me with that now.”
    ▪ “I got some help at school and my foster parent is making sure that I’m okay once I turn 18.”
    ▪ “My foster parents taught me to put ½ my money into savings. I want to show them that I can be responsible to pay for things on my own like school fees, clothes.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- What was most helpful (IL service) and what would have made the service more beneficial?
  o Please see above responses. Time did not permit asking this specific question.
- Have you had an opportunity to talk to a counselor? If no, would you have liked to? If yes, was this helpful?
  o Time did not permit asking this specific question.
- What would help the agency’s ability to ensure that services children and family need are provided?
  o Specific comments include:
    ▪ “I live in a small community, so I think we need to have a center where you can get counseling, rehabilitation services.”
- 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?
  o “7”
  o “10” right now, in the past has been as low as a “1” based on what was going on at the moment”
  o “9”
- 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?
  o “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]
  o “I thought you’d ask if we have everything we need in foster care, like clothing, etc. Yes – I get everything I need.”
  o “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=5)

- My child/ren and family’s situation is considered by the agency when deciding what services are provided:
  (1) Strongly Agree; (2) Agree; (1) Disagree; (1) Strongly Disagree (0) Does Not Apply
- There are many services available in my area that can help families safely care for their children:
  (1) Strongly Agree; (2) Agree; (1) Disagree; (0) Strongly Disagree (1) Does Not Apply
- My family has access to services that address our needs and help me meet the case plan goals:
  (1) Strongly Agree; (2) Agree; (1) Disagree; (0) Strongly Disagree (1) Does Not Apply
  o Comments received:
    • “The services are all non-specific to completely made up of lies.”
    • “I feel like a broken record, but I have no clue, I was ignored... Maybe it’s because I’m in prison, is that why I don’t matter.”
    • “My worker was not very helpful. I at one time asked to case workers due to her rudeness.”
- Are there specific types of services you or your family need, or needed, but are not available in your area?
  (2) Yes (3) No
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Briefly comment on your responses to the statements above (Optional):
  - "I need services to help get to work and back home at least in the winter. But I was kindly offered them elsewhere."
  - "Felon friendly housing. Low-income child care."

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

Case Management: Respondent indicated:
- A: (2) Y (0) N (3) IDK
- B: (3) Y (2) N
- C: (1) Y (3) N (1) DNA

Intensive In-Home Therapy: Respondent indicated:
- A: (0) Y (2) N (3) IDK
- B: (1) Y (4) N
- C: (0) Y (3) N (2) DNA

Parent Aide: Respondent indicated:
- A: (1) Y (1) N (3) IDK
- B: (1) Y (4) N
- C: (1) Y (2) N (2) DNA

Parenting Classes: Respondent indicated:
- A: (3) Y (1) N (1) IDK
- B: (4) Y (1) N
- C: (2) Y (1) N (2) DNA

Addiction Services: Respondent indicated:
- A: (3) Y (0) N (2) IDK
- B: (3) Y (2) N
- C: (3) Y (1) N (1) DNA

Mental Health Services: Respondent indicated:
- A: (3) Y (0) N (2) IDK
- B: (0) Y (0) N
- C: (3) Y (1) N (1) DNA

Domestic Violence Services: Respondent indicated:
- A: (1) Y (2) N (2) IDK
- B: (2) Y (3) N
- C: (1) Y (1) N (3) DNA

Anger Management Treatment: Respondent indicated:
- A: (2) Y (0) N (3) IDK
- B: (2) Y (3) N
- C: (2) Y (1) N (2) DNA
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

Prime Time Child Care: Respondent indicated:
A: (1) Y (1) N (3) IDK
B: (1) Y (4) N
C: (1) Y (1) N (3) DNA

Transportation Assistance: Respondent indicated:
A: (2) Y (0) N (3) IDK
B: (1) Y (4) N
C: (1) Y (2) N (2) DNA

• Briefly comment about your responses to the services in the table above (optional):
  o "Services were too broad, and the agency couldn't hit the broad side of a barn."
  o "I don't know, I'm out of the loop apparently."
  o "Again, my worker was very bland."

• 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=5)
  (4) Yes (1) No

• Briefly comment on your responses to the statements above (Optional):
  o "The agency needs to separate from church and follow family’s religion instead of grandparents religion."
  o "Make sure that the case worker is not working against the parents and they aren’t rude to parents that are slower to learn."
  o "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?"
  o "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:

In your opinion, are child and family strengths and needs considered when determining services?

(14 Agency Workers) (9 Agency Administrators) (8 Community) (5 Legal)

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

- “Custodians are more worried about checking the boxes of appointments and dates rather than discussing what is really important. Oftentimes they appear to be just following a timeline in a policy manual rather than really considering what the needs of the family really are.”

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=35) The top three issues identified were the following:
  - Lack of mental health services [18 responses each]
  - Waiting lists for services [16 responses]
  - Lack of family engagement AND Lack of addiction services [14 responses each]
The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of families receiving services they need to keep their children safely at home? (n=35) The top three issues identified were the following:

- Lack of family engagement AND Waiting lists for services [16 responses each]
- Lack of mental health services [14 responses]
- Lack of addiction services [13 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=32) The top three issues identified were the following:

- Lack of mental health services [19 responses]
- Waiting list for services [18 responses each]
- Caseworker job demands AND Lack of supportive services (i.e. respite care, parent aide) [12 responses each]
The respondents who did not answer "Every Time" or "Not Sure" to the above question were then asked the follow up question, “What gets in the way of adoptive families and children whose adoptions have been finalized having the post-adoption services they need to maintain a permanent home/family? (n=23) The top three issues identified were the following:

- Lack of support services (i.e. respite care, parent aide) [16 responses]
- Caseworker job demands AND waiting lists for services [10 responses each]
- Lack of addiction services AND Lack of intensive in-home family therapy [7 responses each]

F. Other comments expressed by foster parents and community members not specifically related to other systemic factors:

- "Question back -- from county to county, agency to agency = what work is being done in sharing best practices? Seems there are definitely opportunities to make a difference there."
- "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."
- "Case Managers spend FAR TOO MUCH TIME IN FRONT OF THEIR COMPUTERS!! They are left with precious little time to spend with the kids, parents/family, foster parents and service providers."
- "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."
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- "Not requiring county workers to be social workers has resulted in a lowering of quality of services."
- "Something really needs to change in the custodial agencies. There should be more oversight and workers should be reported to the board for violations (which they are not)"
- "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 8-4:30 and have no ability to adjust their schedules to fit the needs of the family."
- "The availability of services from the Human Service Center is scant. Availability is based upon a "you come to us" mentality, instead of trying to serve the rural areas with regular "in person" availability. Rural North Dakota residents have become second class citizens to their "urban" neighbors. If you want service, come to Center. If you want counseling, come to the Center. Due to the lack of public transportation in the rural areas, it is harder (if not impossible) for some rural residents to get services. We MUST treat all of our residents the same, even if that means spending more monies on extending the Service Centers to the rural areas of our State."
- 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."
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS
SERVICE ARRAY AND RESOURCE DEVELOPMENT: INDIVIDUALIZING SERVICES

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

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

A. Questions asked of Foster Caregivers:
   • How individualized are the case plan for the children?
     o Specific comments include:
       ▪ “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 plans are very individualized – specific with everything the child needed and has been getting these services since arriving at our home (i.e. trauma-focused therapy, trauma-focused yoga, horseback riding, group therapy, etc.).”
   • Are the children’s needs being met with the services provided?
     o Specific comments include:
       ▪ “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.”
       ▪ “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.)?
     o Examples provided:
       ▪ Trauma-focused therapy, horseback riding/therapy, immediate response/collaboration amongst agencies to address needs

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?
     o All in attendance responded “Yes”.
   • Did you think these services were culturally appropriate and addressed any special needs of you or your family?
     o Specific comments include:
       ▪ “My foster parents brought me to a pow wow last summer – they do things I want to do if I’m interested in it, even if I’m not interested they want me to explore it just in case and it’s helped me learn new things” [another agreed]
       ▪ “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”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

• How did your worker help you understand what services you were going to receive?
  Specific comments include:
  ▪ “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.”

• Did any of the decisions about services change after talking with your worker?
  Specific comments include:
  ▪ “Yes” [others agreed]
  ▪ “Things got progressively better – partly due to me changing and they [my team] grew as well.” [Another agreed]
  ▪ “When I stopped being a brat, they started giving me more options once I became more mature.”

• 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.
  o Good
  ▪ “My foster parent and I are really close and say “I love you” to each other”
  ▪ “My foster parents and I have gotten really close, too. Tease, etc. I can see them in my future – I see them as my real parents and I care how they feel about me.”
  ▪ “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’]
  o 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]
  ▪ “My foster parents are repetitive, ask me how my day was and how I’m feeling”

• Were services available at times when you were able to attend? For example, did you have to miss school if you wanted to participate in a service, or were accommodations made whenever possible to meet your needs?
  ▪ “Yes, most of the time. But, I didn’t mind missing school when I had to” (all agreed)

H. Question asked of Parents (n=5) (Options for response included Strongly Agree, Agree, Disagree, Strongly Disagree, Does not Apply)

• The agency works with me to identify and offer services to help the unique needs of my family.
  (1) SA; (1) A; (2) D; (1) SD (0) DNA
The case managers I have worked with were available and respectful.

(1) SA; (1) A; (2) D; (1) 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=30)

  The top five issues identified were the following:
  - Lack of Native American foster homes, elders/mentors, caseworkers [16 responses]
  - Collaboration between Child Welfare, Behavioral Health, Developmental Disability, [13 responses]
  - Lack of services tailored to meet the needs of parents [11 responses]
  - Lack of culturally appropriate services [10 responses]
  - Lack of residential services for dually diagnosed children [4 responses]
  - Child’s distance from home/Tribe AND Lack of developmentally appropriate services for older youth [7 responses each]
How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

Feedback was sought from all seven Stakeholder Groups.

A. Youth were asked the following questions:
   - Now, thinking more generally, when you think of child and family services in your area, can you tell me one good thing that is happening and one thing you think really needs to be changed?
     - Time and discussion on other topics did not permit this question to be asked.
   - Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?
     - “No, not really”
   - 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?
     - “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.” [others agreed]

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

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

- I am not familiar with the APSR
- I know where to find a copy of the APSR on the Department’s website
- I have not been a part of meetings regarding development of the plan, but I have received communication about the CFSP
- I have been a part of statewide meetings where the plan has been developed

Awareness and Involvement with CFSP (n=37)

Awareness and Involvement with APSR (n=37)
Feedback on this systemic factor was sought from three groups: Foster Caregivers, Agency Case Managers indicating responsibilities Foster Care or CPS, and Community.

A. Foster Caregivers were asked the following question:
   - Are the state’s standards applied equally to all licensed foster home or child care institutions? Responses from the participants include the following comments:
     - “I think we’re very consistent for foster parent licensing” [all present]
     - “I think the county provides less training that what we receive through the therapeutic foster care provider”

B. Agency Workers and Community groups were asked the following questions:
   - Do you believe there is equal application of state standards when licensing foster care providers in North Dakota (ex: Licensed Foster Homes, Residential Child Care Facilities, Group Homes):
     - Please comment on your response (n=2):
       - “Not consistent.”
       - “Some residential facilities are there for the money not the children.”
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=1):
     - “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.”

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?

![Criminal Background Checks are being conducted](chart.png)

- Yes, 75%
- Sometimes, 25%

![Reported safety concern to custodial agency](chart.png)

- Yes, 78%
- No, 22%
If yes, do you believe the custodial agency’s response was sufficient to ensure the child’s safety?

<table>
<thead>
<tr>
<th>Agency response sufficient to address child’s safety (n=7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, 43%</td>
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<tr>
<td>No, 57%</td>
</tr>
</tbody>
</table>

Please comment on your response above (n=2):
- “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.”

C. Question asked of Community Stakeholders:
- Please indicate your level of agreement with the following statement regarding child welfare agencies in your region:

<table>
<thead>
<tr>
<th>The safety of foster youth considered in case planning (n=7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>29% Strongly Agree</td>
</tr>
</tbody>
</table>

Please comment on your response above (n=2):
- “County is too concerned about avoiding conflict then protecting children.”
- “Not all the time”
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?
     - “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.”
     - “For every new parent that comes to the air base community they get a welcome packet that includes the foster parent brochure (therapeutic foster care agency) – that’s how we got roped into it; we see tables up advertising for foster parents at various community events.”
   - Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
     - “Not really” [all agreed, participants did not see that there were many general recruitment efforts focused on these specific populations]

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

![Targeted Diligent Recruitment Efforts](image_url)
Are recruitment efforts sufficient to provide the number of licensed foster homes or adoptive homes to meet the region's needs?

- Yes: 67%
- No: 22%
- Not Sure: 11%

What could be done to increase the availability of foster and adoptive homes able to meet the needs of youth in foster care in your area? (n=13)

- “Regional Coalitions are just not enough”
- “Don’t know”
- “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.”
- “There just need to be more home-period. 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.”
- “Need more homes and places to put children temporarily”
- “More workers to do the job, not constantly being short-staffed”
- “More funding to get information out in rural areas about foster care”
- “Higher incentives for foster homes and more support to them”
- “I’m not sure”
- “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”
- “Pay the foster parents. It is cheaper than the Social Service System and more effective.”

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=0)
  - No responses received.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

Feedback on this systemic factor was sought from those indicating a role with processing Interstate Compact for the Placement of Children (ICPC) requests from: Agency Case Managers (n=2), Agency Administrators (6), and those indicating a role with AASK in the Community Survey (n=0).

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

- Delays in getting criminal background check results, 5, 24%
- Delays in family responding to licensing paperwork requirements, 7, 33%
- Delays in receiving other required background checks, references, etc., 2, 9%
- Delays for family to complete PRIDE, 4, 19%
- Delays in processing licensing approvals, 1, 5%
- Other, 2, 10%

Other reason provided:
- “There is not a designated ICPC worker and the demands must fit into a worker’s current caseload. It is unpredictable when an ICPC request may be received.”
- “Caseload numbers and staff turnover”
APPENDIX

Appendix

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

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

<table>
<thead>
<tr>
<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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<tbody>
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<td>82.35%</td>
<td>17.65%</td>
<td>n=48</td>
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<tr>
<td><strong>Outcome S1</strong></td>
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<td><strong>Item 2</strong></td>
<td>69.57%</td>
<td>30.43%</td>
<td>n=42</td>
<td></td>
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<tr>
<td><strong>Item 3</strong></td>
<td>73.85%</td>
<td>26.15%</td>
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<td><strong>Outcome S2</strong></td>
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<td><strong>Item 4</strong></td>
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<td>n=8</td>
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<td><strong>Item 6</strong></td>
<td>42.5%</td>
<td>57.5%</td>
<td>n=23</td>
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**Outcome WB2**

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APPENDIX

1.5 OCR Review Team Composition

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

The OCR Review Team is 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 reviews two cases during the Onsite Review. QA Leads for this Onsite Review included the CFS Administrator of the OCR (2 cases) and the OCR Manager (4 cases). Second Level Quality Assurance (SLQA) was provided by the OCR Manager for two (2) cases, the CFS Administrator of the OCR for three (3) cases and the Children and Family Services Center Director provided SLQA for one (1) case. During this review, a consultant with the Capacity Building Center for States observed the case review process.

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

The collaborative representation included:

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<td>Child Welfare professionals from Central Office, DHS</td>
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<td>Child Welfare professional from another County Social Service Agency</td>
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<tr>
<td>Child Welfare professional from a state stakeholder agency (i.e. DJS, Supreme Court)</td>
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<td>Child Welfare professional from community partner agency (i.e. GAL,)</td>
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<td>Retired child welfare professionals</td>
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Contact Information

For more information about this report, please contact

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ND OCR Manager
Tel 701/777-5971
Email tleanne.miller@UND.edu

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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