This report describes the results of the North Dakota Onsite Case Review (OCR) for the Northwest region, involving county social service agencies from Divide, McKenzie and Williams, as well as the Division of Juvenile Services, MHA Nation Child and Family Services. The Onsite Review was held April 16-20, 2018.
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INTRODUCTION

Introduction

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

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

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

MEASURING PERFORMANCE
The period under review (PUR) was April 1, 2017 – date the case was reviewed, which was conducted during the week of April 16, 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 brief 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 the 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 a number of 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.

TheChildren’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 Northwest Human Service Center Region.

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
June 26, 2018
Northwest 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.

A review sample of four (4) Foster Care and two (2) In-Home Services cases were identified out of an overall sample of 179 Foster Care cases and 63 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. During the course of the Onsite Review week, no cases were eliminated from the sample and the alternate cases were not reviewed.

Ages of Children

**Northwest OCR Case Sample by Case Type**

- Foster Care: 4, 67%
- In-Home Services: 2, 33%

**Northwest OCR FC Case Sample by Agency Type**

- DJS: 0
- Tribal Title IV-E: 0
- County Social Services: 4

**Ages of Children In-Home Services Cases**

- Ages 8-10: 11%
- Ages 11-13: 22%
- Ages 14+: 22%
- Under age 1: 11%

**Ages of Children Foster Care Cases**

- Ages 8-10: 34%
- Ages 11-13: 11%
- Ages 14+: 22%
- Under age 1: 11%
In-home Services case involved a total of four (4) children. Their ages ranged from 9 years 1 month to 15 yrs. 9 months at the end of the PUR. Nine (9) children were involved in foster care cases (5 target children and other siblings from their home of removal). Their ages ranged from 0 yrs. 10 months to 18 yrs. 0 months at the end of the PUR.

Race/Ethnicity of Children

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

Gender of Children

Reason for Agency Involvement

Reasons for agency involvement at the time the case was opened for services are identified through the course of the case review. As many reasons as were applicable to a case are selected. Substance Abuse by parent was the primary reason for agency involvement in the foster care cases sampled. The ‘Other” reason cited in one case involved parents becoming incarcerated. Reasons for agency involvement for in-home services was equally distributed between emotional maltreatment and domestic violence in the child’s home as noted 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, 36 interviews held for the 6 cases included:

- 5 children/youth
- 8 Parents
  - 4 Mothers
  - 4 Fathers
- 8 Case managers (FC, In-Home Services, CPS)
- 2 Supervisors
- 1 AASK Adoption worker
- 7 Foster Parents (1 relative & 6 non-relative foster parents)
- 5 “Other” providers (4 GAL, 1 Therapist)

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**
  - 11 participants received the survey and 8 completed responses were received
  - 73% response rate

- **Agency Case Managers Stakeholder Feedback Online Survey**
  - 29 participants received the survey and 13 completed responses were received
  - 59% response rate
  
  Note: The Agency Case Manager survey was erroneously sent to the wrong region on 4/9/18. NWHSC regional case managers received the survey late in the afternoon on 4/17/18. Survey’s returned prior to that time were deleted and were not factored into the above response rate.

- **Legal Stakeholder Feedback Online Survey**
  - 23 participants received the survey and 3 completed responses were received
  - 13% response rate

- **Community Stakeholder Feedback Online Survey**
  - 49 participants received the survey and 5 completed responses were received
  - 10% response rate

- **Parent Stakeholder Online Survey**
  - No surveys were returned. *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:** 1 participant *(in-person)*
- **Foster Caregiver Stakeholder Meeting:** 4 participants *(none joined via conference call)*
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 NW OCR Results: Both applicable cases received a strength for item 1 meaning that investigations were initiated in a timely manner, and face-to-face contact with the alleged victim was made within the established time frame for half of the applicable cases.

Key strengths noted related to performance on Item 1:

There were three accepted reports of child maltreatment involving three alleged child victims received by the agencies during the PUR. These reports involved three distinct allegations in the two applicable case. Types of alleged maltreatment included: Neglect (not including medical neglect), Substance abuse by parent(s), and Emotional Maltreatment. The priority category ascribed to each report was as follows: Category A (0); Category B (0); and Category C (3). In both situations, the agency initiated their response to the reports and made face-to-face contact with alleged victims all on the same date the report was received. The state’s established timeframes for category C cases requires initiation within 72 hours and face-to-face visit with the alleged victim within 14 days, thus the agencies’ responses to these reports exceeded expectations.

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

No practice concerns relating to Item 1 were noted during this review.
SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.

**“Partially Achieving” Safety Outcome 1 is not possible for this outcome, thus is not reflected in this table.**

Key strengths related to overall performance on Safety Outcome 1:

In both applicable cases the agencies’ response to reports of child maltreatment was observed to be a practice strength. Initiation and face-to-face contact with all alleged victims exceeded timeframes established by state statutes.

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

No practice concerns relating to Safety Outcome 1 were noted during this review.
**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 NW OCR Results:** The one applicable case reviewed achieved a strength rating for this item indicating the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification whenever possible and appropriate.

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

One case was applicable for assessment of this item as a target child entered foster care during the PUR due to safety reasons. The agency was unable to provide safety services to prevent this removal due to the emergency nature of the situation. The target child’s placement into foster was necessary to ensure the child’s safety.

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

This review did not identify any specific practice or systemic challenges related to Item 2.
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 NW OCR Results: Four of the six cases were rated as a strength for Item 3 because the agency properly assessed all applicable individuals for risk and safety and appropriately addressed all identified concerns.

Key strengths noted related to performance on Item 3:
The review found evidence that formal and informal assessments of safety and risk were being conducted and the documentation supported high quality assessments occurring in several cases. Safety and risk was routinely assessed by the agencies as part of caseworker visits and use of the Family Assessment Instrument. 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. This was seen in all four applicable situations. Furthermore, there were no concerns for the target child’s safety in the foster home or placement facility that were not adequately or appropriately addressed by the agency in all four applicable cases.

Key areas needing further examination related to performance on Item 3:
When this item was rated an area needing improvement, thorough and accurate ongoing assessments of all safety and risk concerns at critical junctures of the case (i.e. case closure) was not evident. This was true for both in-home services cases. Further exploration to determine if this is a larger practice concern may be warranted.
**CHILD AND FAMILY OUTCOMES**

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

### Key strengths related to performance on Safety Outcome 2:

Safety services to the family were not possible as the target child’s placement into foster care was of an emergency nature and necessary to ensure their safety. Furthermore, evidence of strong initial and/or ongoing assessment of safety and risk was evident. There was a thorough and appropriate consideration of the individual concerns existing within the family, caseworker’s use of formal and informal assessments through collateral contacts, visitations with the target child, and foster parents/providers. 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:

The agencies are encouraged to examine practices related to providing ongoing assessments of safety and risk at critical junctures in the case (i.e. case closure), especially for families receiving in-home services. Ensuring an accurate and comprehensive assessment of all the risks and safety concerns within a family is an additional practice area worthy of further exploration.
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 NW OCR Results: Three of the four applicable cases received a strength for item 4. In each of these cases, the child either remained in a stable placement throughout the PUR or until they were discharged from foster care, or had another placement which better met the child’s case goals.

Key strengths noted related to performance on Item 4:

Three of the four target children had only one placement setting during the PUR. Furthermore, the target child’s current or most recent placement setting was stable in all four cases. Support provided to the placement resource throughout the PUR by the assigned case manager was found to be a factor contributing to the stability of the placement setting.

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

When rated an area needing improvement, multiple placement moves (4) within a four-month foster care episode indicated the lack of stability for the target child in the foster placement setting. Not all moves were consistent with the case goals nor to meet the needs of the child. Systemic challenges related more than one agency being involved may be an area to consider when exploring challenges related to performance on this item.
CHILD AND FAMILY OUTCOMES

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

ITEM 5: PERMANENCY GOAL FOR CHILD

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

CY18 NW 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 four applicable cases, seven (7) primary and concurrent permanency goals were assessed as the permanency goals in effect during the PUR: Reunification (3); Adoption (2); Guardianship (1); Other Planned Permanent Living Arrangement (1). Current permanency goals for the four applicable cases included: Adoption only (1); OPPLA only (1); Reunification and Guardianship (1); Reunification and Adoption (1). Reviewers noted that in all cases, the target child’s permanency goals were specified in the case record. When rated a strength, it was noted that the agency established goals early in the case and considered the individual circumstances to identify an appropriate goal. Additionally, in three of the four cases, the permanency goals that were in effect during the PUR were established in a timely manner.

Key areas needing further examination related to performance on Item 5:
Permanency goals in effect during the PUR were not established in a timely manner in one case. Additionally, there was only one of the four cases reviewed in which reviewers noted that the permanency goals in effect during the PUR were appropriate to the child’s needs for permanency and to the circumstances of the case. Practice concerns noted regarding the establishment of timely and appropriate permanency goals primarily involved reunification goals being kept in place too long. The region is encouraged to further examine efforts related to the effective use of concurrent planning and timeframes surrounding the need to file a petition for termination of parental rights to strengthen outcomes in this area.
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 NW OCR Results: Two applicable cases received a strength for item 6 because the agency and courts made concerted efforts to achieve the permanency goal in a timely manner.

Key strengths noted related to performance on Item 6:

Timely achievement of permanency was realized for two of the four cases. The permanency goals for these cases involved Guardianship and Other Planned Permanent Living Arrangement. Efforts by the agency and courts noted which made this achievement possible included: early identification of relative placement options, regular child and family team meetings with focused discussions surrounding permanency goals, and close communication between the agencies and courts.

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

Achieving permanency in a timely manner for foster children/youth with the goal of adoption proved to be the primary struggle which directly impacted overall performance on this item. Agency and Court efforts to keep the case moving along to permanency was found to be the shared challenge. Delays related to the adoption process itself, the lack of concerted efforts to secure timely and appropriate termination of parental rights, and how the Agencies and Courts could support steady and forward progress may be areas for further examination to bolster performance on this item.

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<th>Year</th>
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<th>Area Needing Improvement</th>
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<td>42.5%</td>
<td>57.5%</td>
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<tr>
<td>CY18 NW OCR n=4</td>
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<td>50%</td>
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</table>

Item 6
CHILD AND FAMILY OUTCOMES

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

Key strengths related to performance on Permanency Outcome 1:

There was a strong commitment by the agency to support foster parents which contributed to placement stability for many cases reviewed. Strong performance by the agency to ensure appropriate permanency goals were in place for cases was observed with the timely establishment of those goals in most of the cases. Permanency was achieved timely in half of the cases reviewed.

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

A larger systemic challenge related to timely permanency for children when adoption becomes the goal remains a challenge for this region and is the primary factor which impacts the overall rating for this outcome. Turnover in the adoption workforce and delays in the adoption process was noted to impact performance in this outcome. The use of generic court orders with check boxes that did not contain supporting documentation was noted in some cases making it difficult to ascertain the extent of concerted efforts by the court to support timely achievement of the permanency goal. Overall, agency AND court efforts to keep the case moving along to permanency for cases involving an adoption goal was noted to influence performance on this outcome in this review.
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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 NW 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 cases, there was a valid reason for the child’s separation from siblings in care that existed the entire PUR. Efforts to keep those siblings not placed together connected were evident during the review as the condition necessitating separate placements continued throughout the PUR. The use of relative placement resources in both these situations contributed to the strong performance in placing siblings together.

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

Key strengths related to performance on Item 8:
This review found evidence of concerted efforts on the part of the agency to ensure visitation between the target child and their parents and other siblings in foster care were frequent and of high quality. Themes observed included flexibility in location and times for visits and adapting the visitation schedule based on the safety and permanency needs of the children. Efforts to reassess the visitation schedule between target child and parent was noted in at least case in which visitations progressed from supervised visits in the office to unsupervised visits in the parental home. Concerted efforts by the agency to assist the target child, sibling and parent to process circumstances specific to their situation during visitations was noted in at least one case.

Key areas needing further examination related to performance on Item 8:
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 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 NW OCR Results: All three applicable cases received a strength for item 9 because the agency made concerted efforts to maintain the child’s significant prior connections.

<table>
<thead>
<tr>
<th>% of Applicable Cases</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016 Federal Review n=39</td>
<td>84.62%</td>
<td>15.38%</td>
</tr>
<tr>
<td>CY18 NW OCR n=3</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Key strengths related to performance on Item 9:

Strong casework practice to preserve and maintain children’s significant connections was seen during this review. Relative involvement was seen as an area of practice which supported children in foster care maintaining connections with extended family. Most of the time, efforts included maternal and paternal relatives. In all applicable cases, efforts to make a sufficient inquiry regarding the child’s connection to a federally recognized Indian Tribe was found to be a consistently strong practice. ICWA did not apply to any of the reviewed cases.

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

The review did not identify any specific practice or systemic challenges related to Item 9.
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 NW OCR Results: All four cases were rated as a strength for Item 10. In each of these cases, the agency made concerted efforts to identify and place the child with appropriate relatives.

Key strengths related to performance on Item 10:

One target youth was placed with relatives during the entire PUR. When this item was rated a strength and the target child was not placed with a relative, documentation in the case file and interviews reflected the agency’s efforts to conduct maternal and paternal relative searches. Relatives had been evaluated and, in the files selected, ruled out for safety reasons. In other situations, the agency conducted a sufficient relative search of maternal and paternal relatives prior to the PUR and all known possible options were appropriately ruled out.

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

This was a strong area of practice for the region and the review did not identify any specific practice or systemic challenges related to Item 10.
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 NW OCR Results: All three applicable cases were rated as a strength for Item 11 indicating the agency made concerted efforts to strengthen the parent/child relationship through activities beyond arranging visits.

Key strengths related to performance on Item 11:

Concerted efforts on the part of the agency to strengthen the relationship of the child in care with his/her parents was evident all three applicable cases. Efforts noted to contribute to this performance included providing opportunities for the parents to participate in medical appointments, school and special community activities, as well as participation in family therapy. The agency assisted with transportation for the parents when this was identified as a potential barrier.

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

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 11.
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. The two practice areas noted to have the strongest performance in this review included efforts to place siblings together and efforts to preserve and maintain significant connections. In many situations, siblings were placed together. When siblings were placed separately, the agency worked ensured the siblings had opportunity to remain connected. In all applicable cases (3), efforts to determine the child’s membership in, or eligibility for membership in, a federally recognized Indian Tribe were evident. Strong agency efforts for strengthen the parent’s relationship with their child through activities other than visitation were also noted, such as involvement in school activities, medical appointments, and therapeutic or mentoring activities.

Key areas needing further examination related to performance on Permanency Outcome 2:
While no cases received an “Area Needing Improvement” rating in this Permanency Outcome, information gleaned by reviewers during interviews indicate the agencies may wish to further explore efforts ensure both maternal and paternal relatives are equally considered when conducting relative search efforts.
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 NW OCR Results: Four of the six applicable cases were rated as a strength for Item 12 because the agency made concerted efforts to accurately and comprehensively assess the needs of the child, parents, and foster parents and provided the appropriate services to meet the needs of all the family.

Key strengths related to performance on Item 12:

In many situations, the agency made concerted efforts to assess and address the child’s, parent’s and foster parent’s needs and ensure they received services necessary to achieve the case goals and adequately address the issues relevant to agency involvement in all four foster care cases. Efforts included the use of initial or ongoing formal and informal assessments, including use of the Family Assessment Instrument, regular caseworker visits or documented concerted and consistent efforts to locate and engage parents in at least one applicable situation. Services to parents and foster parents were appropriately matched to the identified needs. Strong practice related to ongoing assessments and service provision to children was noted.

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

Efforts to assess and provide appropriate services to meet the identified needs of a parent were the predominant challenges noted when sub-items were rated an area needing improvement for in-home services. The region is encouraged to consider practice related to utilizing a trauma informed approach to the assessment and addressing of all the child’s needs as the lack of this particular effort was a contributing factor when rated an area needing improvement.

*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.

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 NW OCR Results: Five of the six 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 target children’s needs and providing services was notably strong as five of the six cases received a strength rating on this sub-item. When a strength, evidence that needs were assessed primarily through formal and informal efforts during caseworker visits and team meetings. Services were appropriately matched to identified needs, such as adoption preparation services, independent living services, services to strengthen the relationship between non-custodial/non-residential parents, and trauma based counseling. The presence of Independent Living plans being located in the file for target children aged 16 years old or older were found during the review.

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

Challenges related to adequately assessing how trauma impacts children’s social interactions and relationships needs contributed to the ‘area needing improvement’ rating for this sub-item. Trauma informed mental/behavior health care is addressed in item 18, yet ensuring children received trauma-informed services to match all their needs (social skill development, for example) impacted performance on this sub-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 NW OCR Results: Three of the five applicable cases received a strength for item 12B indicating the agency made concerted efforts to assess the needs of applicable parents and provide services to address identified needs and accomplish case goals.

Key strengths related to performance on Item 12B:

Assessing applicable parents’ needs and providing services was notably strong in foster care services cases, as all cases received a strength rating on this sub-item. When a strength, evidence that needs were assessed through formal and informal methods were seen, including formal psychiatric evaluations and parental capacity evaluations. Services provided involved addiction related evaluation, treatment, and after care services. Individual therapy services were provided to parents, along with medication management when needed. Developmentally appropriate discipline strategies, referrals for economic assistance, parenting classes and transportation were services that were provided as applicable to individual family situations. At times, this sub-item was a strength as a result of the concerted efforts to engage parents despite the parent’s decision to not participate in services. Consistent, diligent, and respectfully relentless would further describe the efforts on the part of the agency in those situations. Parents for whom parental rights were terminated prior to the PUR or were not located by the agency despite concerted efforts throughout the PUR are not applicable for assessment of this sub item.

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

When this sub-item was rated an area needing improvement, challenges were equally noted in the area of accurate and comprehensive assessments of the needs of custodial caregivers and non-residential fathers. Additionally, addressing all identified needs for the parents, especially when issues related to domestic violence and substance abuse are present, is an area for deeper exploration. Findings also suggest the agency’s ability to provide needed services to parents might be strengthened through court-ordered services or supervision orders by the juvenile court.
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 NW OCR Results: All four 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:

Regular and supportive communication and visits were attributed to the strength performance when assessing the needs and providing services to foster parents. Agency coordination with the treatment foster care provider, help with transportation, respite, and assisting with financial needs were practices found in those cases receiving a strength rating. The Enhanced Maintenance Payments (EMPs) provided to foster families was also attributed to a resource which supported the family’s ability to meet the unique needs of their foster child. Agency efforts to assess and address the needs of foster parents were attributed to supporting stable placements of their foster children.

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

The case review findings reflect strong practice for this sub-item and no practice considerations were noted in the files reviewed. The region is encouraged to consider the feedback noted in the systemic factors section of this report as the information reflects additional experiences and perspectives which may offer opportunities to strengthen practice pertinent to services to support foster caregivers.
CHILD AND FAMILY OUTCOMES

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

ITEM 13: CHILD AND FAMILY INVOLVEMENT IN CASE PLANNING

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

CY18 NW OCR Results: Three of the five applicable cases were rated as a strength for Item 13 indicating the agency adequately involved developmentally-appropriate children and all parents in the case planning process.

Key strengths related to performance on Item 13:

Concerted efforts to actively involve the child and mother in case planning was noted in three of the applicable cases. Evidence was found of the concerted efforts of the agency to actively involve the father in the case planning process in two of the three cases. The agency involved the children through participation in Child & Family Team meetings, as well as discussing issues with them during monthly visits in an age and developmentally appropriate manner. When rated a strength, mother and fathers were engaged through participation in Child & Family Team meetings and phone calls, visits, e-mail interactions which occurred between the formal meetings. Parents for whom parental rights were terminated prior to the PUR or were not located by the agency despite concerted efforts throughout the PUR are not applicable for assessment of this item.

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

Efforts to involve and engage school-age children and teen youth in in-home services situations warrant further exploration. The lack of concerted efforts to engage these children in case planning was found to be the contributing factor to both cases rated an area needing improvement. Agency efforts to include a mother and non-custodial father was the practice area found to contribute toward the area needing improvement rating for this item. The last practice area for regional consideration is related to the process of developing case plans. There was indication that the case planning process involved presenting a case plan to a family as opposed to finding evidence that the case plan was developed with the family.
**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 NW OCR Results:** Four cases were rated as a strength for item 14. In each of these cases, the caseworker had visits with the child that were of sufficient frequency and quality to meet the needs of the child and promote achievement of case goals.

**Key strengths related to performance on Item 14:**

The typical pattern of visitation between worker and child(ren) during the period under review was found to be at least once a month which was of sufficient frequency to meet the needs of the child in four of the six applicable 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 found in these visits.

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

Quality caseworker visits with all children which are sufficient to address their needs up until the point of case closure is a generalized practice concern seen in the two cases rated an area needing improvement. This was noted for in-home services cases during this review. The region may wish to consider how performance on this item may impact performance on item 13 and identify practice improvement efforts which would strengthen outcomes for both items.
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 NW OCR Results: The five applicable cases were rated as a strength for Item 15 because the agency conducted visits with the parents that were of sufficient frequency and quality to promote the achievement of case goals.

Key strengths related to performance on Item 15:

Visits between case managers for mothers were typically held at least once a month and were found to be of high quality. When less than monthly visits were held, evidence was found of concerted efforts on the part of the agency to locate or engage the mother to meet with the case manager through other means since face-to-face visits were not possible. Visits between case managers and fathers was applicable in three of the case situations and these visits were seen as sufficient to meet the needs of the case through the quality visits that did occur. Contributing to high quality visits were efforts such as focusing on the needs of the children and family (i.e. housing, employment, service needs), holding meetings in the home, office, or community locations offering adequate privacy, and addressing legal needs of the parents. Supplemental efforts between visits through phone calls, emails, texts, were also noted to present in cases receiving a strength rating. Parents for whom parental rights were terminated prior to the PUR or were not located by the agency despite concerted efforts throughout the PUR are not applicable for assessment of this item.

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

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 15.
CHILD AND FAMILY OUTCOMES

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

Key strengths related to performance on Well-Being 1:

Caseworker visits with parents, especially mothers, contributed to the region’s strong performance. Assessment and service provided to foster parents was also seen to meet the expressed needs in all four cases and contributed to stable placements for children. Strong engagement skills with children was seen in the foster care cases. Effective use of informal assessments through caseworker visitations was noted to be a strong practice impacting this outcome.

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

The following are the practice areas the region may wish to examine to better understand performance relative to this outcome: how trauma-related needs of children are assessed and addressed beyond the mental/behavior health realm; ensuring concerted efforts to actively involve the children in case planning; and, ensuring quality caseworker visits with children.
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 NW OCR Results: All four applicable cases were rated as a strength for Item 16. In each case, the agency assessed and provided appropriate services to meet the educational needs of the child(ren) in the course of case planning.

Key strengths related to performance on Item 16:

Efforts of the agency to address the educational needs of children through the course of case planning activities included regular contact and coordination between the agency, school, foster parent, and when age-appropriate, the youth. Some of the children participated in an Individual Education Plan (IEP) and evidence was found of regular efforts by the agency to monitor educational progress. For foster youth who did not have identified needs, the agency monitored school progress through coordination with the school and foster parents. For a target child expected to graduate in May 2018, the agency assured the youth had met the graduation requirements and coordinated other pre-graduation tasks.

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

This review did not identify any specific practice or systemic challenges related to Item 16.
WELL-BEING OUTCOME 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.

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

Continued strong educational outcomes was noted in this review. Strong efforts on behalf of caseworkers to ensure children’s educational needs were assessed and addressed through the course of case planning were observed.

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

This review did not identify any specific practice or systemic challenges related to Well-Being Outcome 2.
**CHILD AND FAMILY OUTCOMES**

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

**ITEM 17: PHYSICAL HEALTH OF THE CHILD**

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

**CY18 NW OCR Results:** Three of the five applicable 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).

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**Key strengths related to performance on Item 17:**

The agency accurately assess the children's physical health needs in all five (5) applicable cases and accurately assessed the children’s dental health care needs in all four (4) applicable situations. The agency provided appropriate oversight of prescription medications for the physical health issues of the target child in foster care in both applicable situations. Furthermore, the agency ensured that appropriate services were provided to the children to address all identified physical health needs in 3 of the 4 applicable cases. In some situations, extensive efforts of the agency were made in order to meet the complex and multiple physical health issues of the child. The agency ensure that appropriate services were provided to the children to address all identified dental health needs in one of the three applicable cases.

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

Practice challenges noted in the situations which did not receive a strength rating involved the service array difficulty of not having enough dental providers willing to accept Medicaid within the region. Furthermore, it was noted one of the agencies delayed addressing the physical and dental health needs of the target child until the child was placed with the permanent placement option. Despite the absence of a serious medical issue, this action hindered the child receiving timely annual check-ups.
**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 NW OCR Results:** Three of five applicable cases were rated a strength for Item 18 revealing the agency assessed and provided (or was providing) appropriate service needs to meet the mental and behavioral needs of the child.

<table>
<thead>
<tr>
<th></th>
<th>2016 Federal Review n=49</th>
<th>CY18 NW OCR n=5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strength</strong></td>
<td>85.71%</td>
<td>60%</td>
</tr>
<tr>
<td><strong>Area Needing Improvement</strong></td>
<td>14.29%</td>
<td>40%</td>
</tr>
</tbody>
</table>

**Key strengths related to performance on Item 18:**

The agency conducted an accurate assessment of the children's mental/behavioral health needs in four of the five applicable cases. The agency provided appropriate services to match these needs in two of the cases. Appropriate oversight of prescribed medications was provided by the agency for the one youth for whom this was applicable. Assessments were conducted through informal and formal assessments by the agency case manager or through formal assessments provided by community providers. Services employed to meet identified needs as applicable in the case reviewed included individual therapy, family therapy, drug awareness programming, medication monitoring, neuropsychiatric evaluations, Child Advocacy Interview, and supports from the school counselor. Consistent consideration of the child’s mental/behavioral needs through case planning efforts was evident in cases rated a strength.

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

A predominate concern noted in cases rated an area needing improvement involve the agency’s incomplete assessment of the effects of past traumas experienced by the children in screening or other efforts to assess children’s behavioral/mental health needs. The lack of concerted efforts on the part of the agency to ensure appropriate services are being provided to the children to meet their needs was noted to be a factor in one case. Systemic barriers related to hesitation of the school to provide in-school supports, such as counseling, or juvenile court issuing a supervision order or court ordered services were noted to impact the performance relative to this item.
CHILD AND FAMILY OUTCOMES

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

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

Concerted agency efforts to ensure physical, dental and vision health needs of children are assessed was evident in this review for all applicable children. Appropriate oversight of prescription medication was provided when this was a need for the target foster child. The agency provided appropriate services to address the identified physical, dental, mental/behavioral health needs in many of the reviewed cases.

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

Not all physical and dental health needs were addressed timely which impacted performance. Delays were attributed to a lack of dental providers willing to accept Medical Assistance and decisions to wait to address non-emergent needs until the child’s move to a permanent placement setting. Yet, the agency’s challenges to meet the behavioral/mental health needs of children served provided the greatest practice/service array challenge during this review. Agency efforts to conduct trauma screenings or address the trauma-related needs of youth may provide direction as the region analyzes performance in this outcome. Noted systemic barriers with the school and courts were factors that also influenced the ratings for this outcome.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

Stakeholder feedback on Systemic Factors

CASE REVIEW SYSTEM: WRITTEN CASE PLANS

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

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

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

![Written Case Plans](chart)

Additional information learned from the parent respondent to the survey regarding written case plans, indicate that the parents’ child(ren) were too young for involvement in the case plan.

B. Questions asked of the Parents include the following: Note: No responses were received from parents for this survey opportunity.

- I have a clear understanding of what their family needed to accomplish before their case could be closed
- My family’s case plan has information about the following items:
  A. My children’s placement []
  B. My child/ren’s school progress []
  C. My child/ren’s health progress []
- Please comment on anything else you’d like to share about your family’s case plan (optional):

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 general consensus that yes, they do.
  - The group also asked the following follow up questions:
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

1. Question asked: Can meetings ever be rescheduled if the child can’t attend, or we can’t attend? Interviewers responded that it may depend on the circumstances of the case, but in general, meetings might be able to be rescheduled or the team member unable to report could have their feedback represented on their behalf (in written or verbal form).

2. What if the child has been in my home for a while but I haven’t been notified of a team meeting being scheduled? The participant was encouraged to speak with their child’s case manager, supervisor or the regional representative.

   • If so, from your perspective, are case plans developed jointly with the children’s parents?
     o In some cases. As a more general trend, the participants indicated a tendency for the agency to inform the parents on what needed to occur. Specific observations include:
       1. “It appeared the plan was reunification but don’t know if it was discussed or assumed. To me it seems like the worker has already has decided what needs to happen for the child to return home – a compliance list provided by the social worker at the team meeting. In every case we’ve had, though, the issue is parental substance abuse so maybe that means the list is going to be similar?”
       2. “It doesn’t seem the parent has been involved, but the parents in our cases haven’t had the ability to participate [due to their needs or refusal]”
       3. Foster parent’s impression of the caseworker has been: “Here’s the kid. I don’t really wanna hear from you.”

   • Describe examples of how you have observed the agency try to involve the parents in the development of the plan
     o Based on the conversation to the questions above and time constraints, this group was not able to revisit this specific question.

   • As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
     o Based on the conversation to the questions above and time constraints, this group was not able to revisit this specific question.

D. Questions asked of the Youth include the following:

   • What is your understanding of how the agency involved your parent(s) in the development of the plan?
     o “Parent attends by phone (lives out of state)”

   • How have you worked on the development of your case plan?
     o “Yes – I attend team meetings. I pretty much run the meetings. Usually miss last period of the day to attend them.”
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:

  ![Bar Chart](chart1.png)

  - Child and Family Team Meetings (n=20)

- At CFT Meetings, the following topics are addressed:

  ![Bar Chart](chart2.png)

  - Child and Family Team Meetings: Topics (n=27)

- Respondents who did not respond “Strongly Agree” were asked: When topics relating to safety of all children in the family, family case plan tasks, or the permanency goal for all children in foster care at CFT Meetings does not occur, please briefly explain noted barriers. The following barriers were reported:
  - “Defined tasks are not directly addressed in some counties. Care plans may be provided but not directly discussed.”
  - “Parents no-show for CFT”
  - “Lack of parental involvement and difficulties engaging parents”
  - “Discussed in prior meetings and no changes have been made or tasks remain the same. It is reviewed with the family during monthly parent/worker contacts”
  - “Parental involvement”
  - “Incarceration, continued substance abuse, continued DV”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Parents becoming escalated that the CFT is not able to discuss these topics due to the parents actions or aggravation”
- “Lack of information or unclear direction from supervision”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: PERMANENCY HEARINGS

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

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

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

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

<table>
<thead>
<tr>
<th>Top rated barriers to initial permanency hearings (N=9)</th>
<th>top rated Barriers to Subsequent Permanency Hearings (n=10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A continuance was needed</td>
<td></td>
</tr>
<tr>
<td>The Court’s calendar was full</td>
<td></td>
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<tr>
<td>The State’s Attorney’s Office was not able to submit the request in a timely fashion</td>
<td></td>
</tr>
<tr>
<td>Case Management staff was not able to submit the necessary paperwork to request the hearing</td>
<td></td>
</tr>
<tr>
<td>Other*</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>6</td>
<td>6</td>
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<tr>
<td>4</td>
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<td>0</td>
<td>1</td>
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<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
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:

<table>
<thead>
<tr>
<th>Method</th>
<th>Case Managers (n=11)</th>
<th>Administrators (n=8)</th>
<th>Legal (n=1)</th>
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</thead>
<tbody>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Our agency does not have a standardized method</td>
<td></td>
<td></td>
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<tr>
<td>Collaborative meetings between agency and local partners</td>
<td></td>
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<tr>
<td>Internal tracking method</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>FRAME alerts</td>
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<td></td>
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</tbody>
</table>

• Other methods reported:
  o “Court order template for permanency hearing has the compelling reasons language/option”
  o “Our County is small enough that it is easy to remember which ones need to be done and when”
  o “Utilization of CFT meeting time frames”

B. What are the barriers that specifically affect your agency’s ability to ensure that filing of TPR proceedings occurs in accordance with the required provisions for each child in foster care? Please select up to 3 reasons from the list below:
• Other barriers reported:
  o “Not sure”
  o “Parents doing the bare minimum right before TPR is to be filed then not continuing to work”
  o “May not be the high case load of the state’s attorney but the ability to get it on the docket as well as state’s attorney follow up. Case manager getting the required paperwork and documentation to the state’s attorney’s office.”
  o “Our tribe is using ‘Permanent Suspension of parental rights’, not TPR”
  o “Parents not beginning their case plan in a timely manner”
  o “Lack of follow through of State’s Attorney”
  o “Supervisor’s not providing clear direction or changing their minds on case/TPR decision”

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>
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</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=4):
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “I think there are some caseworkers who are afraid of the TPR process and so avoid this. They also fear telling families about the secondary plan and working toward that plan when parents get angry about the plan. I think that the long waits for court dates in the past have hindered responsiveness to permanency for children.”
- “Lack of case workers, large case worker caseloads, caseworkers following protocol”
- “Reunification remains the goal when there is a glimmer of hope for change”
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?
     o “I usually get these”
     o “Not always timely, but I do see them”
     o “It says in there that I have the right to attend. I usually inquire if they’d like us to attend, or if it’s safe for us to attend.”
   • Does your experience match the experiences of other foster caregivers you know?
     o “Due to time and discussion on other topics, did not have the opportunity to address this specific question”
   • 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?
     o Experiences were mixed. One participant noted that they have not provided information in writing but acknowledged the written notice says they could. None of the participants shared an experience of providing information during a review/hearing.
     o Discussion was help regarding general court questions, the Indian Child Welfare Act and its role in foster care cases, and how the OCR process and federal Child and Family Services Review (CFSR) process examines and reviews the data to improve services.
   • 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?
     o “Due to time and discussion on other topics, did not have the opportunity to address this specific question”

B. Stakeholders taking the online survey were asked the questions below:
   *Legal Stakeholder’s note: Judges and Judicial Referees were not asked questions in this section.*
   • “To the best of your knowledge, are the following caregivers of children in foster care in the agency given NOTICE of any review or hearing held regarding the child?”
• If respondents did not respond to all three categories as “Every Time”, respondents were asked to enter the most important barrier noted.

<table>
<thead>
<tr>
<th>Notice Provided to Foster Caregivers (n=23)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Parents</td>
</tr>
<tr>
<td>Every Time</td>
</tr>
<tr>
<td>78%</td>
</tr>
<tr>
<td>17%</td>
</tr>
<tr>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Barriers to Providing Notice to Foster Caregivers (n=12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I'm not sure</td>
</tr>
<tr>
<td>Other reason</td>
</tr>
<tr>
<td>Caseworker job demands</td>
</tr>
<tr>
<td>Caregiver requests not to be involved</td>
</tr>
<tr>
<td>Short timeframe between the scheduling and being held</td>
</tr>
<tr>
<td>Caseworker awareness of the expectation</td>
</tr>
</tbody>
</table>

• Other reasons provided:
  • “Courts did not inform them”

• 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:

- The judge wasn’t aware of their right to be heard
- The caregiver requested not to be involved
- The caregiver was apprehensive about the potentially negative impact on the relationship with the family
- The caregiver was nervous about speaking in court
- The judge wouldn’t allow it and didn’t ask for written statement
- The judge wasn’t aware of their right to be heard

Other reasons provided:

- “They may have written a letter to the court or do not attend the hearing. There may be an agreement and testimony is not needed at that time.”
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.

---

**Judicial experiences with Foster Caregivers Right to be Heard**

(n=0)

<table>
<thead>
<tr>
<th>Experience</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Every Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster caregivers attend hearings and provide verbal input when asked by the Court</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foster caregivers attend hearings but do not have comments when asked by the Court</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foster caregivers provided written information for the Court to consider during hearings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

0% 25% 50% 75% 100%
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=16)
  - Before attending Child Welfare Certification Training: 5
  - While attending Child Welfare Certification Training: 4
  - After attending Child Welfare Certification Training: 7
- 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=4)
  - One response each for the following years: 2010, 2016, 2016, 2017
- Please consider your first year of employment in child welfare and indicate your level of agreement with the following statements:

![Training & Supervision - first year of child welfare work (n=16)](image)

- 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=4)
  - "Overall training is lacking in our agency, for the training that is provided there is no room to process or implement with high caseloads and lack of adequate/helpful supervision."
B. Agency Administrators were asked the following questions:

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

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

  - How often are new child welfare workers in your agency assigned the responsibility of a full caseload prior to completing Child Welfare Certification training? (n=5)
    - Never: 20%
    - Rarely: 40%
    - Sometimes: 30%
    - Frequently: 10%
    - Every Time: 0%
  
  - New child welfare workers complete the initial training within their first year of employment (n=8)
    - Never: 50%
    - Rarely: 30%
    - Sometimes: 20%
    - Frequently: 0%
    - Every Time: 0%

- 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=3)](diagram)

  - Training availability: 3
  - Training canceled due to poor registration: 3
  - Date/time of training: 1
  - Caseload constraints, unable to release worker for training: 1
  - Other: 0

*Due to error in survey, respondents were not able to provide their ‘other’ barrier.

- **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):**
• 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:

![Bar Chart](Image 1)

**Initial staff training teaches skills and knowledge needed to perform duties (n=8)**

- Every Time: 75%
- Frequently: 13%
- Sometimes: 13%
- Rarely: 0%
- Not Sure: 0%

![Bar Chart](Image 2)

**Additional Supports for New Child Welfare Workers (n=5)**

- Job shadowing with tenured/lead worker: 4
- Increased supervision and consultation: 4
- Additional trainings (webinars, etc.): 3
- Other: 1

![Bar Chart](Image 3)

**Barriers to initial staff training to child welfare workers teaching needed skills and knowledge (n=7)**

- Training materials: 3
- Presenters knowledge of the subject: 2
- Topics are too advanced: 2
- Topics are too general: 2
- Opportunities to practice the skills: 2
- Other: 1

- Other reason provided:
  - “There can be differences in the county across the state. Also sometimes presenters don’t have working knowledge. For example of CFTs.”

![Bar Chart](Image 4)
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:

![Graph showing Ongoing training teaches skills and knowledge needed to perform duties](image)

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:

![Graph showing Barriers to ongoing staff training](image)
• Other reasons provided:
  o “A great deal of the training opportunities are located in the eastern portion of the state. Determining who and how many can attend is reviewed for budgeting as well as licensing requirements.”
  o “The ongoing training is generally offered at a large setting such as the April and July conferences. There is a couple hours available to cover a specific topic. This is time to provide some basic knowledge and understanding but not the time to become skilled in the topic.”
  o “Distance to travel for ongoing trainings requires being out of the office for several days.”
  o “Not enough trainings in our area”
How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

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

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

A. Foster Caregivers were asked the following questions during the Stakeholder’s Meeting:
   - **What training was initially available to you when you began providing foster/relative care/pre-adoptive care?** Responses include:
     - “PRIDE training” (all agreed)
   - **Was the initial training of high quality to prepare you for your role as a foster caregiver?**
     - The general consensus was yes, it was.
   - **What ongoing training is available?**
     - Limited ongoing training was available for those participating in this meeting.
     - “Seems none available here, nearest is in a community 100 miles away. So we typically do on-line training, but it’s difficult to get the face-to-face hours in.”
   - **Is there ongoing training of high quality and does it support you in your role as a foster caregiver?**
     - Online training, when able to participate, was of high quality, supporting their role as a foster caregiver. One participant shared about a training for working with children with special needs that was particularly helpful (Nurtured Heart 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?**
     - Responses were mixed. Specific comments include:
       - “No”
       - “Went to one, but it was more questions and answers”
       - “PRIDE training has excellent information on adoption.”
   - **What are the barriers, or what gets in the way, of receiving necessary training?**
     - “Time”
     - “Not available in our local community”
     - “Childcare”
     - “The county did try to put together a monthly training meeting, but nobody attended”
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?

<table>
<thead>
<tr>
<th>Ongoing training teaches skills and knowledge needed to perform duties (n=24)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster and Adoptive Parents</td>
</tr>
<tr>
<td>Every Time</td>
</tr>
<tr>
<td>Frequently</td>
</tr>
<tr>
<td>Sometimes</td>
</tr>
<tr>
<td>Rarely</td>
</tr>
<tr>
<td>Not Sure</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 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:

<table>
<thead>
<tr>
<th>Barriers to ongoing staff training to foster and adoptive parents teaching needed skills and knowledge (n=18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Opportunities to practice the skills learned</td>
</tr>
<tr>
<td>Topics are too general</td>
</tr>
<tr>
<td>Topics are too advanced</td>
</tr>
<tr>
<td>Presenters knowledge of the subject</td>
</tr>
<tr>
<td>Training materials</td>
</tr>
</tbody>
</table>

Other reasons provided:

- “Lack of options for training for them to go to or that will work with their schedules”
- “Not enough trainings in our area”
- “Child Care”
- “Child care and the availability of trainings in this region”
- “Trainings are rarely offered in Region 1. Travel is required for everything and foster parents resent that issue.”
- “Limited opportunities in the region where the foster parent lives. Very difficult for the foster parents to schedule an out of area training with all the other responsibilities they have as parents/foster parents”
C. Community Stakeholders were asked the following questions:

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

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

- “There are not a lot of training opportunities in our area for foster parents. Foster parents need more training to best meet the needs of the children they serve. Adoptive parents require VERY minimal training, they are often idealistic about adoption and do not have the training or resources to meet the needs of children adopted from foster care and as a result a number of adoptions fail.”
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 Responses were mixed between “yes” and “no”. Participants clarified that emergency health care is accessible here and they receive excellent care. However, services to support mental and behavioral health or other services for children and families were not readily available.

   • **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 Participants described specifics about certain services that were not available in the region; Specific comments include:
       ▪ “Lack of child care for children in foster care” Participants shared the significant out-of-pocket costs families must expend for day care and the delays in which often accompany their reimbursements.
       ▪ “Assistance raising teenagers – have asked for help and advice but my questions go unanswered. It would be nice if the caseworker would just be present and back us up by saying what we’re saying, and supporting our expectations.”
       ▪ “I feel I get criticized a lot. I don’t feel we’re getting the help we need to take care of the children in our care.”
       ▪ “The social worker hung up on me last week and now won’t return my calls. We need help.”
       ▪ “No medical care for specific types of concerns – have to go to Fargo to get to a specialist.”

   • **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 Challenges have been experienced by participants in this area. Specific comments include:
       ▪ “We are expected to do the transportation and cover all the costs”
       ▪ “Completing the Medicaid noon-emergent transportation paperwork took me 6 months and was very complicated. Remittance takes a while, too. It gets very expensive.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Can you identify a service in your area that is particularly helpful for families in your area, or a service that is particularly helpful as you provide care for your foster child? Can you identify a specific service that is missing in your area?
  
  Due to time and discussion on other items, this specific question was not able to be asked.
  
  Yet, pulling on themes addressed during the meeting, the following services were summarized by the interviewers:

  o Helpful:
    - Generalized medical care for children, including emergency care
    - Schools were a source of support for families

  o Missing:
    - Financial support for foster parents and timely reimbursements (clothing, day care, transportation, etc.)
    - Supportive services to foster caregivers to work through challenges with their foster child
    - Day care, day care reimbursements

B. Questions as of Youth (n=5):

- Did you receive all the services you needed to meet your goals (i.e. Mental/behavioral health needs/physical/dental, etc.)?
  
  o “I guess, yes.” Examples include: doctor, dentist, chiropractor

- 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 “Not typical.” “More restrictions: curfew is at 9pm, phone has a curfew, pay for my own phone, have driver’s license (I had it before coming into foster care) but can’t have friends in my car. I do have a job, though.”

- 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 “Some services - learned about taxes, assisted with phone bill, there’s an amount of money they can spend per year on us but they don’t really spend it. Foster parents mostly provided the help.”

- What was most helpful (IL service) and what would have made the service more beneficial?
  
  o “Overall, IL services have been beneficial – could help more financially. We’re young adults, hard to find jobs, so it’d be helpful if they could help financially.”

- Have you had an opportunity to talk to a counselor? If no, would you have liked to? If yes, was this helpful?
  
  o “Yes, I guess it was helpful. Not really a big fan of therapy.”

- What would help the agency’s ability to ensure that services children and family need are provided?
  
  o “Maybe check in a little more”

- 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 “4 or 5”

- 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?
C. Questions asked of Parents (n=0)

- My child(ren) and family’s situation is considered by the agency when deciding what services are provided: No responses received
- There are many services available in my area that can help families safely care for their children: No responses received
- My family has access to services that address our needs and help me meet the case plan goals: No responses received
- Are there specific types of services you or your family need, or needed, but are not available in your area? No responses received
- 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: Was it a service you felt you or a family member needed, Was this a service offered to you and your family, and If you participated in the service, do you feel it is helping, or helped, improve your parenting? No responses received
- Is there anything else that you can think of that would help your local agency provide services that would better able to meet the needs of families in your area?? No responses received

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

- The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question on the next page:
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

What gets in the way of talking about children and family strengths and needs when deciding services with the family? (n=17)

- Safety concerns require immediate response
- Caseworker job demands
- Caseworker knowledge
- Family Engagement
- Other

o Other Reasons:
  - “It’s a combination of all”

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

In your opinion, do families have access to services that address their needs in order to create a safe home environment? (n=30)

- Every Time
- Frequently
- Sometimes
- Rarely
- Not Sure

- 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=28) The top three issues identified were the following:
  - Lack of addiction services
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Family Engagement
- Lack of mental health services (tied with Family Engagement)

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=28) The top three issues identified were the following:
  - Lack of addiction services
  - Lack of mental health services
  - Lack of family engagement

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=24) The top three issues identified were the following:
  - Lack of mental health services
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Lack of addiction services
- Family engagement

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=16) The top three issues identified were the following:
  - Lack of mental health services
  - Lack of support services (i.e. respite care, parent aide)
  - Family engagement, lack of addiction services, and waiting lists for services tied for third ranking order

F. Other comments expressed by foster parents and community members not specifically related to other systemic factors:
  - “Services are limited in this region and there are long waiting lists”
  - “There are several fantastic foster case managers at Williams County however there are several case managers who are not as involved, have personal issues that impact the work they do, do not communicate with community partners or foster parents and do not seem to care about the well-being of the children they work with. There are also concerns with McKenzie County, their case workers do not appear to make decisions independently, the supervisor appears to micromanage everything and appears to be overly controlling. It is difficult to get paperwork at times from McKenzie County decisions are made without consulting team members or foster parents and communication with them is difficult.”
  - “Sometimes I’m not sure I can continue to provide foster care because it’s so expensive.”
  - “Our licensed lapsed, we didn’t know it had lapsed and we had to re-do all the paperwork and pay the costs to get re-licensed”
  - “Nobody tells us about finances and how/when we will get reimbursed. We made it work but I had to educate myself on how all this works.”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Child care costs – day care providers want to be paid weekly, but state only reimburses monthly. We’d be out $1,300 of our personal money before getting reimbursed.”

- “Children coming to our home with just the clothes on their backs and no reimbursement to the foster family for making sure the child is clothed, and are told the clothing budget has already been expended by a previous family so no money left to reimburse – has happened several times.”

- “They should make it easier economically for people to do foster care.”
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?**
     - The general consensus was that no, plans don’t really address the needs of the children. It was stated by several participants that the plan addresses the needs of the parents.
   - **Are the children’s needs being met with the services provided?**
     - Due to time constraints and discussion on other items, this specific question was not asked of the group.
   - **Can you provide an example of how the agency (of your foster youth) in the last year adjusted a case plan or service to meet the specific need of the child (religious, cultural, language, special needs, etc.)?**
     - Due to time constraints and discussion on other items, this specific question was not asked of the group.

G. Questions asked of Youth (n=5):
   - **Do you feel the services you and your family receive (d) are (have been) the right services for your family?**
     - “No. My social worker never helps them (foster parents) with any questions they have, don’t reimburse them financially.” When asked, the participant had no sense about services to parents since parents live out of state.
   - **Did you think these services were culturally appropriate and addressed any special needs of you or your family?**
     - “Not really. Social Services doesn’t do much at all.”
   - **How did your worker help you understand what services you were going to receive?**
     - “My worker didn’t help me understand.”
   - **Did any of the decisions about services change after talking with your worker?**
     - “No. I did get to talk about it but it didn’t change the decision.”
   - **When you think about the services you and your family have received from the agency, please share an example of one good experience and one that needs to be improved.**
     - **Good**
       - “Can’t think of anything good. A lot of it needs to be improved – more involved, social worker pretty much makes all the rules but isn’t around to enforce them, don’t help my foster parents.”
     - **Improve**
       - No specific response provided
   - **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?**
H. Question asked of Parents (n=0)  *(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.
  - No response received.
- The case managers I have worked with were available and respectful.
  - No responses received.

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=24) The top five issues identified were the following:
  - Native American foster home, elders/mentors, caseworkers availability
  - Services tailored to meet the needs of parents
  - Culturally appropriate services availability
  - Residential services for dually diagnosed children availability
  - Collaboration between Child Welfare, Behavioral Health, Developmental Disability, and Tribes and Child’s distance from home/Tribe tied for this fifth ranking spot.

An additional comment was received from the Community Stakeholder Feedback Survey that may be most applicable to this systemic factor:

“It does not appear that there are timely and frequent enough family/community partnership meetings for each family involved in the child welfare system and the foster care system. They are not done at the scale needed to prevent out of home placement or to expedite permanency.”
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?
     - Good
       - “Decent job helping kids find foster homes”
     - Needs to be changed
       - “Need to be more involved with the kids and foster parents”
   - Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?
     - “No”
   - 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?
     - “Be more involved”

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. Many agreed that they could probably find it through Google or some other internet search engine.

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

- I am not familiar with the CFSP
- I know where to find a copy of the CFSP 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=30)

- Agency Case Managers (n=14)
- Agency Administrators (n=8)
- Community (n=5)
- Legal (n=3)

- 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 APSR
- I have been a part of statewide meetings where the plan has been developed

Awareness and Involvement with APSR (n=30)

- Agency Case Managers (n=14)
- Agency Administrators (n=8)
- Community (n=5)
- Legal (n=3)
How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

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

A. Foster Caregivers were asked the following question:
   - Are the state’s standards applied equally to all licensed foster home or child care institutions? Responses from the participants include the following comments:
     - “I think it’s the same for the foster families I know”
     - “I wouldn’t know if it’s applied differently in other homes, but probably”
     - “Licensing process is great - appreciate the requirements which are geared towards safety for the children and the families, and the licensing worker is amazing.”
     - All participants had no information about child care institutions.

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):

   ![Equal Application of state licensing standards (n=19)](attachment:image)

   - Please comment on your response (n=4):
     - “Not a licensor”
     - “It’s a very subjective process”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

Feedback for this systemic factor was sought from two groups: Community members and Legal Stakeholders indicating a role as Defense Attorney, Guardian Ad Litem, and Juvenile Court Officers (n=6).

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?

   ![Criminal Background Checks are being conducted](n=2)

   • Please comment on your response above:
     o No responses were received for this optional question.

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

   ![Reported safety concern to custodial agency](n=7)

   • If yes, do you believe the custodial agency’s response was sufficient to ensure the child’s safety?
C. Question asked of Community Stakeholders:

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

- The case planning process considers the safety of foster care and adoptive placements for children:
  - Strongly Agree: 60%
  - Agree: 20%
  - Disagree: 0%
  - Strongly Disagree: 0%
  - Not Sure: 20%

Please comment on your response above:

- "For the majority of the cases I agree with this statement, however there have been a number of times when children are reunified when the parent has not completed all care planning tasks that would have helped the child and family do well and the child has had to come back into care or been in danger due to lack of care plan completion."
- "I have seen that there is such a need to it is not uncommon to have to override safety issues for placements and there are times when foster home care is questionable or there are mental health concerns on the part of the foster parent and children continue to be placed with them."
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?
     - “I think so”
     - “Yes”
     - “We see ads, billboards, people promoting it at community events”
   - Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
     - Participants agreed it is harder for people to take teenagers. They also agreed there is a need for more homes that will take teenagers, yet participants were uncertain as areas of specific focus with the recruitment efforts.

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

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

![Are recruitment efforts sufficient? (n=21)](chart)

- 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?
  - “The recruitment team needs to have a plan, meet on a consistent basis and participate in more activities and events throughout the course of the year. I also think that more support needs to be provided to foster parents to help retain the foster parents that are currently licensed. Several case managers are great at supporting foster parents but some are provide no support, do not communicate with the foster parents and no not provide information the foster parents or parents need in order to do the best work possible.”
  - “Greater education, support and follow up of those already licensed foster care homes, collaboration and information to local churches, dissemination of information in local business, etc.”
  - “Unknown”
  - “The effort is being made to license foster homes, but the demand for placements have increased”
  - “Support the foster parents that we do have, actually recruit in smaller specific targeted populations”
  - “More people in the area willing to be foster parents”
  - “More outreach”
  - “More individuals need to be willing to be foster parents”
  - “More individuals willing to commit to become foster parents”
  - “More active efforts to educate the community on the needs for foster parents in our region”
  - “Foster homes are filled as soon as license is approved so continues to be the shortage of foster homes even with active recruitment efforts”

C. Question asked of Agency Case Managers indicating a role with licensing foster care licensing:
- Because you have indicated you have responsibility for the licensing of foster homes in your agency, please briefly comment on how your local recruitment effort is informed by the ND Foster and Adoptive Parent Recruitment plan.
  - No participants responded to this question.
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=4), 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 processing licensing approvals
- Delays for family to complete PRIDE
- Delays in receiving other required background checks, references, etc.
- Delays in getting criminal background check results
- Delays in family responding to licensing paperwork requirements
- Other

Other reason provided:
- “Unsure”
- “Not Sure”
- “It’s been a while since we’ve done one but case worker limited time has been a barrier”
- “Caseloads. Scheduling with families. High needs of child.”
APPENDIX

Appendix

1.1 R3 Federal CFSR State Rating Summary Report, September 2016
1.2 CY18 NW OCR Site Rating Summary Report, April 2018
1.3 CY18 NW OCR Site Rating Summary Report, April 2018: In-Home Services Breakdown
1.4 CY18 NW OCR Site Rating Summary Report, April 2018: Foster-Care Services Breakdown
1.5 ND OCR Review Team Composition
### 1.1 Case Rating Summary – ND R3 All Sites (Grand Forks, Fargo, Bismarck/Mandan), September 2016

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- **Sub-Item 12a**: 70.77% n=46
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- **Sub-Item 12c**: 73.33% n=22
- **Outcome WB1**: 44.62% n=29
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### 1.3 Case Rating Summary – ND OCR NORTHWEST, April 2018: In-Home Services Breakdown

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Item 16
Outcome WB2
Item 17
Item 18
Outcome WB3

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1.5 OCR Review Team Composition

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

The OCR Review Team is comprised of two OCR Reviewers with a designated Quality Assurance (QA) Lead. All OCR Review Team members must undergo a certification training to become familiar with the Onsite Case Review Instrument and case review process. Each ‘review team’ review generally reviews two cases during the Onsite Review. For the NWHS regional Onsite Review, one QA Lead was responsible for three cases. As this review was only the third review conducted under the revised process, additional supports were offered to the QA Leads from the OCR Manager and CFS Administrator of the OCR.

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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Contact Information

For more information about this report, please contact

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

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

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