This report describes the results of the North Dakota Onsite Case Review (OCR) for the South Central region, involving county social service agencies and the Division of Juvenile Services in Foster, Eddy, Wells, Griggs, Stutsman, Barnes, Logan, LaMoure or Dickey counties. The Onsite Review was held August 13-17, 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 July 1, 2017 – date the case was reviewed, which was conducted during the week of August 13, 2018. Case files and interviews were utilized for the case review portion of the Onsite Review week and feedback from seven Stakeholder groups was received. The following report provides a description of the items and systemic factors, the results for the outcomes and items, and a summary of the region’s performance relative to the outcomes, items and systemic factors, and an initial analysis of the findings intended to inform ongoing CQI efforts. Comparison data from North Dakota’s September 2016 Federal CFSR will serve as a reference point throughout this report.

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

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

The federal Onsite Review Instrument (OSRI) is utilized as the review instrument to capture information regarding child and family outcomes for foster care and in-home services. The newly revised OSRI was finalized by the Administration of Children & Families in July 2014 and updated in January 2016. A total of 5 cases were reviewed utilizing the OSRI.
INTRODUCTION

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

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

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

STAKEHOLDER FEEDBACK: CFSR SYSTEMIC FACTORS

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

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

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

T. Leanne Miller, MSSW, LCSW
ND OCR Manager
October 19, 2018
CASE FILES REVIEWS

Case Demographics

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

A review sample of three (3) Foster Care and two (2) In-Home Services cases were identified out of an overall sample of 115 Foster Care cases and 55 In-Home Services. Two (2) additional foster care and in-home services cases were identified as alternate cases in the event a case was eliminated during the review week. No case was eliminated during the review week and the alternate cases were not utilized.

### South Central OCR Case Sample by Case Type (n=5)

- Foster Care: 3, 60%
- In-Home Services: 2, 40%

### South Central OCR Foster Care Case Sample by Agency Type (n=3)

- County Social Services, 100%
Ages of Children

In-Home Services case involved a total of seven (7) children. Their ages ranged from 3 months to 5 years 8 months at the end of the PUR. Six (6) children were involved in foster care cases (3 target children and other siblings from their home of removal). Their ages ranged from 5 yr. 6 months to 18 yrs. 6 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. Neglect (not including medical) was the primary reason for agency involvement in the foster care cases sampled. Reasons for agency involvement for in-home services were equally distributed between domestic violence and neglect (not including medical) in the child’s home as noted below.

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, 30 interviews held for the 5 cases included:

- 3 children/youth
- 6 Parents
  - 3 Mothers
  - 3 Fathers
- 6 Case managers (FC, In-Home Services, CPS)
- 1 Supervisor
- 8 Foster Parents (1 relative & 7 non-relative foster parents)
- 6 “Other” providers (1 residential treatment provider staff, 2 Adoption Workers, 1 GAL, 1 Tribal ICWA Representative, 1 Alternate Relative Caregiver)
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**
  - 13 participants received the survey and 8 completed responses were received
  - 62% response rate
- **Agency Case Managers Stakeholder Feedback Online Survey**
  - 24 participants received the survey and 5 completed responses were received
  - 21% response rate
- **Legal Stakeholder Feedback Online Survey**
  - 26 participants received the survey and 4 completed responses were received
  - 15% response rate
- **Community Stakeholder Feedback Online Survey**
  - 40 participants received the survey via email and 6 completed responses were received
  - 15% response rate
- **Parent Stakeholder Online Survey**
  - Two surveys were completed online. *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:** 6 participants (*5 in-person; 1 joined via conference call*)
- **Foster Caregiver Stakeholder Meeting:** 6 participants in person
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 SC OCR Results: One case received a strength for item 1 meaning that investigations (i.e. CPS Assessments) were initiated in a timely manner, and face-to-face contact with the alleged victim was made within the established time frame for half of the applicable cases.

Key strengths noted related to performance on Item 1:
There were four accepted reports of child maltreatment involving four alleged child victims received by the agencies during the PUR. These reports involved four distinct allegations in the one applicable case. Types of alleged maltreatment included: Neglect (not including medical neglect). The priority category ascribed to each report was as follows: Category A (0); Category B (0); and Category C (4). The state’s established timeframes for category C cases requires initiation within 72 hours and face-to-face contact with the alleged victim(s) within 14 days. The agency initiated their response timely in all four reports received and the face-to-face contact with alleged victims occurred within the 14 calendar days required in state regulations. In three of the reports, the agency’s response exceeded state standards by ensuring face-to-face contact was completed within 1 day of the report.

Key areas needing further examination related to performance on Item 1:
This review did not identify any key areas needing further examination relative to Item 1.
SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.

**Key strengths related to overall performance on Safety Outcome 1:**

The agency’s’ response to accepted reports of child maltreatment was observed to be a practice strength in the one applicable case. Initiation and face-to-face contact with all alleged victims met or exceeded timeframes established by state statutes for all Category C reports (those requiring an initiation response within 72 hours). Furthermore, face-to-face contact with alleged victims was made well-within the fourteen days required by the state all reports.

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

This review did not identify any key areas needing further examination relative to Outcome 1.

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

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

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

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

CY18 SC OCR Results: One applicable case achieved a strength rating for this item indicating the agency made concerted efforts to provide services to the family to prevent the children’s entry into foster care or re-entry after a reunification whenever possible and appropriate.

Key strengths noted related to performance on Item 2:

In the one situation applicable for assessment of this item, the agency made concerted efforts to provide or arrange for the family to protect the children and prevent their entry into foster care. The agency facilitated the family’s access to intensive in-home case management and Parent Aide services to address unsafe conditions in the home and lack of food available. The agency also assisted the family to access other community resources to assist with household items and support the children remaining with their family.

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

This review did not identify any key areas needing further examination relative to Item 2.
CHILD AND FAMILY OUTCOMES

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

ITEM 3: RISK AND SAFETY ASSESSMENT AND MANAGEMENT

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

CY18 SC OCR Results: Four of the five cases were rated as a strength for Item 3 because the agency properly assessed all applicable individuals for risk and safety and appropriately addressed all identified concerns.

Key strengths noted related to performance on Item 3:

There were no maltreatment allegations about the family that were never formally reported or assessed through CPS nor were there any maltreatment allegations that received a ‘no services required’ finding despite evidence that would support a ‘services required’ finding in any of the 12 cases. The agency conducted an initial assessment that accurately assess all the risk and safety concerns in both applicable cases and ongoing assessments that accurately assessed all risk and safety concerns at critical case junctures occurred in 4 of the 5 cases. Assessments were completed using formal and informal assessment efforts, including completion of the Family Assessment Instrument and monthly caseworker visits. When safety concerns were present, the agency developed an appropriate safety plan with the family and continually monitored the safety plan as needed, including monitoring family engagement in safety-related services in 1 of the 2 applicable cases. Additionally, there were no safety concerns pertaining to children in the family home that were not adequately or appropriately addressed by the agency in all applicable cases. Other practice strengths noted was that there were no concerns related to the safety of the target child in foster care during visitation with parent/family that was not adequately or appropriately addressed by the agency. This was seen in two 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 three foster care cases.
CH​ILD AND FAMILY OUTCOMES

Key areas needing further examination related to performance on Item 3:

When this item was rated an area needing improvement, accurate ongoing assessments of all safety and risk concerns at critical junctures of the case (i.e. prior to trial home visits, case closure, etc.) was not evident in 1 of the 5 cases. Concerns regarding the appropriateness of the safety plan or monitoring efforts of the agency was present in 1 of 5 applicable cases.
SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

Key strengths related to performance on Safety Outcome 2:

Safety services to the family were provided immediately to remediate safety concerns and support the children remaining in the home. Evidence of strong initial and/or ongoing assessment of safety and risk was evident in many cases. There was a thorough and appropriate consideration of the individual concerns existing within the family, caseworker’s use of formal and informal assessments through collateral contacts, visitations with the target child, and foster parents/providers in many cases. 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:

Accurate ongoing assessments of safety and risks were not evident in all cases. Insufficient contact to ensure safety/risk was adequately assessed or addressed was noted to be a contributing factor. Developing appropriate safety plans with the family that address safety concerns for children may be an area of practice 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 SC OCR Results: All three 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.

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<td>CY18 SC OCR n=3</td>
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Key strengths noted related to performance on Item 4:

Although no target child had only one placement setting during the PUR, the placement changes that occurred during the PUR were planned by the agency in an effort to meet the needs of the children and achieve the child’s case goals. During the PUR, two of the target youths had two placement settings and one youth had three placement settings. Results indicate the agency made concerted efforts to provide appropriate services and resources to facilitate placement stability. Furthermore, the current or most recent placement setting for each of the target youths were stable at the time of the review. 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:

This review did not identify any key areas needing further examination relative to Item 4.
CHILD AND FAMILY OUTCOMES

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

ITEM 5: PERMANENCY GOAL FOR CHILD

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

CY18 SC OCR Results: Three cases received a strength for Item 5 indicating that the permanency goal was appropriate for the child and was established in a timely manner.

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<td>Area Needing Improvement</td>
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Key strengths noted related to performance on Item 5:

In the foster care cases reviewed, three primary and concurrent permanency goals were assessed as the permanency goals in effect during the PUR: Reunification (1); Adoption (2); Guardianship (2); Other Planned Permanent Living Arrangement (0). Current permanency goals for the applicable cases included: Adoption only (2) and Guardianship only (1). Reviewers noted that in all cases, the target child’s permanency goals were specified in the case record. All permanency goals in effect during the PUR were established in a timely manner for one of the cases reviewed. In all three applicable cases, case goals in effect during the PUR were appropriate to the child’s needs for permanency and to the circumstances of the case. The agency either filed or joined a termination of parental rights petition in a timely manner prior to the PUR in both applicable situations.

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 two cases. Practice concerns noted when the establishment of timely and appropriate permanency goals did not occur 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 to strengthen outcomes in this area.

An additional ‘systemic’ issue was noted during the review despite the basic requirement of case permanency goals being in the case file was achieved. There was some difficulty discerning when the permanency goals were established and what goals were in effect at a given time. Information in FRAME and the case record/interviews was not consistent or easily trackable in some cases. This is an area the region may wish to explore further.
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 SC OCR Results: One case received a strength for item 6 because the agency and courts made concerted efforts to achieve the permanency goal in a timely manner.

Key strengths noted related to performance on Item 6:
Timely achievement of permanency was realized for the one case in which the target child had been discharged from foster care. The target child was able to exit foster care to a permanency goal of Guardianship within 8 months. Efforts by the agency to utilize early concurrent planning and the court’s ability to move the case forward in this situation were cited as contributing factors to ensuring timely permanency. Timely Interstate Compact for the Placement of Children (ICPC) services was also found to support timely permanency for this youth.

Key areas needing further examination related to performance on Item 6:
During the PUR, the agency and court did not make concerted efforts to achieve permanency in a timely manner for two cases involving the permanency goal of adoption. Factors attributed to delayed permanency include: delayed implementation of concurrent planning, court challenges (prolonged termination of parental rights proceedings, continuation of annual reviews despite youth remaining in care for long periods of time, etc.), and adoption service provider challenges (time to complete adoption home studies, delaying recruitment for youth until after TPR, etc.). Systemic challenges within the service array at the agency and court level were noted to impact this item and further analysis is warranted.

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

Key strengths related to performance on Permanency Outcome 1:

Target children experienced placement stability in their placement settings during the PUR. When changes were necessary, these were planned and, in an effort, to help the child achieve case goals. All current permanency goals for the target children were found to be appropriate to the case situation. Timely achievement of a Guardianship goal was realized for one youth.

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. Systemic/service array challenges for the courts (including the States Attorney’s office) and the agency were found to adversely impact performance in this outcome. Furthermore, delays in the adoption process were also noted to impact performance in this outcome. Further examination by the region in this area could inform practice improvement efforts.
CHILD AND FAMILY OUTCOMES

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

ITEM 7: PLACEMENT WITH SIBLINGS

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

CY18 SC OCR Results: Two 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 the two applicable cases, the target child was placed with all siblings who were also in care throughout the PUR. In both cases, agency efforts focused on keeping these siblings together and all permanency planning and recruitment efforts ensured the siblings remained in the same home. Both situations involved sibling groups of 2 children.

Key areas needing further examination related to performance on Item 7:
This review did not identify any key areas needing further examination relative 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 SC OCR Results: One applicable case was 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 parent (mother) were frequent and of high quality. Fathers and other siblings in care were not applicable in this review. Although the frequency was less than once a month, concerted efforts on the part of the agency to pursue visitation times and location based on the safety and permanency needs of the children were evident. The agency was vigilant in their approach to visitation and did not stop considering the visitation needs of the child to maintain a relationship with mother.

Key areas needing further examination related to performance on Item 8:
This review did not identify any key areas needing further examination relative 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 SC 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.

Key strengths related to performance on Item 9:
Concerted efforts were made to maintain the child’s important connections (for example, neighborhood, community, faith, language, extended family members including siblings who are not in foster care, Tribe, school, and/or friends) in all three applicable cases. Sufficient inquiry was conducted to determine whether a child may be a member of, or eligible for membership in, a federally recognized Indian Tribe in all cases. In two applicable cases this did not occur as the target children were not subject to the Indian Child Welfare Act (ICWA) provisions (they were in the custody of their own Tribe). ICWA did apply in one situation and in that case, the agency was found to have provided the Tribe timely notification of its right to intervene and place the child in foster care in accordance with ICWA’s placement preferences.

Key areas needing further examination related to performance on Item 9:
This review did not identify any key areas needing further examination relative to Item 9.
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 SC OCR Results: Three applicable 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 child was placed with relatives during the entire PUR and evidence suggested the placement was stable and appropriate to meet the child’s needs. 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. At times, relatives had been evaluated and, in the files selected, ruled out for safety reasons or by their own request. 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 review did not identify any key areas needing further examination relative to Item 10.
**CHILD AND FAMILY OUTCOMES**

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

**ITEM 11: RELATIONSHIP OF CHILD IN CARE WITH PARENTS*  
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 SC OCR Results:** One applicable case was 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 parent was evident the one applicable case. 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. Foster caregiver was also available to provide mentoring to the parent. No fathers were applicable for assessment of this item for this review.

**Key areas needing further examination related to performance on Item 11:**
This review did not identify any specific practice or systemic challenges related to Item 11.

*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.

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. Siblings were placed in care together. The agency made concerted efforts to support mother/child and offer opportunities to strengthen their relationship in the one applicable case. Agency efforts also focused on encouraging and supporting the target child’s need to maintain important connections, particularly with culture, school, peers and extended family during the PUR. In all applicable cases, efforts to determine the child’s membership in, or eligibility for membership in, a federally recognized Indian Tribe were evident. Relative searches of both maternal and paternal relatives were completed as appropriate to the child’s circumstances during the PUR.

Key areas needing further examination related to performance on Permanency Outcome 2:
This review did not identify any specific practice or systemic challenges related to Permanency Outcome 2 ratings during the PUR. The region is encouraged to consider further exploring practice relative to ensuring search of paternal relatives. Information from the review suggests this may be a practice concern in some cases which the overall ratings would not reveal.

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

WELL-BEING PERFORMANCE

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

Item 12: Needs and Services of Child, Parents*, and Foster Parents

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

CY18 SC OCR Results: Three of five 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 children, parents and foster parents were appropriately matched to the identified needs in many cases. Strong practice related to ongoing assessments and service provision to foster parents was found in this review.

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

Predominant challenges noted when sub-items were rated an area needing improvement involved the agency’s efforts to accurately and comprehensively assess the needs of children and parents on an ongoing basis as well as to provide appropriate services to meet the identified needs to parents.

*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 SC OCR Results:** Four of the five were rated as a strength for Item 12A because the agency properly assessed and addressed the needs for the applicable children during the PUR.

### Key strengths related to performance on Item 12A:

Assessing and addressing the target children’s needs was rated as strength in four of the five cases on this sub-item. When a strength, evidence showed that needs were assessed initially and on an ongoing basis during caseworker visits and team meetings. Services appropriately matched to identified needs, such as adoption preparation services, services to strengthen the relationship between non-custodial/non-residential parents, and trauma-informed intensive in-home family therapy. Social skill development was a need of several target children during this review and use of community resources, such as dance, music, church activities were utilized. When needed, assistance with transportation was provided to support participation in these services. Target children over the age of 14 had their Independent Living skills assessed and appropriate services were provided. Independent Living Plans for youth 16 and older were in the case files.

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

When rated an area needing improvement, the agency did not conduct comprehensive and ongoing assessments of the target child’s needs. One aspect of this assessment of the child’s needs, for in-home services cases, include the assessment of needs of all alternate caregivers as it relates to their ability to care for the child(ren) in their home. Evidence of the quality, accuracy, and comprehensiveness of the ongoing assessment of the child’s needs was not found one case impacting the performance for 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 SC OCR Results:** One of three 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.

![Chart showing Item 12B results](image)

**Key strengths related to performance on Item 12B:**

The agency conducted formal or information initial and/or ongoing comprehensive assessments that accurately assessed the mother’s needs and provided appropriate services to address identified needs in one of three cases. When rated 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 financial assistance through Temporary Assistance to Needy Families (TANF) and Social Security, along with transportation assistance. Parents for whom parental rights were terminated prior to the PUR 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 accurate and comprehensive assessments of the needs of mothers and fathers, despite their whereabouts being known to the agency. Evidence was not found of comprehensive and ongoing assessments for all applicable parents’ needs. The review also did not find evidence that, during the entire PUR, appropriate services were provided to address all identified needs for parents, particularly those participating in in-home case management services.

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

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

**Item 12C: Needs and Services of Foster Parents**

**Purpose of Assessment:** To determine whether, during the PUR, the agency made concerted efforts to assess the needs of 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 SC OCR Results:** All three 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.

<table>
<thead>
<tr>
<th>% of Applicable Cases</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
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</tr>
<tr>
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</tr>
</tbody>
</table>

**Key strengths related to performance on Item 12C:**

Foster Parents needs were assessed by the agency and appropriate services provided to address the identified needs throughout the PUR in all three applicable cases. Regular and supportive communication and visits by the target child’s case manager were among the agency efforts attributed to the strength performance when assessing the needs and providing services to foster parents. Agency efforts to match the needs of target children with the strengths and skill set of foster parents', to assist with transportation, respite, and counseling were practices found in those cases receiving a strength rating. 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:**

This review did not identify any specific practice or systemic challenges related to sub-item 12C.
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 SC OCR Results: Four of 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.

<table>
<thead>
<tr>
<th>% of Applicable Cases</th>
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<tr>
<td>Area Needing Improvement</td>
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Key strengths related to performance on Item 13:
Concerted efforts to actively involve the child in case planning efforts was noted in all three applicable cases. Evidence was found of the concerted efforts of the agency to actively involve the mother in the case planning process for two of the three applicable cases and evidence was found of the concerted efforts of the agency to actively involve the father in the case planning process in one of the two applicable cases. The agency involved the children through participation in Child & Family Team meetings when appropriate. There were several younger target children or children with developmental needs and efforts to involve the children outside of the formal meetings and with developmental appropriate language was evident. Older youth were actively involved in the process and the review suggests they were active participants in the case planning process. When rated a strength parents were engaged through participation in Child & Family Team meetings and phone calls, visits, e-mail interactions which occurred between the formal meetings. Parents for whom parental rights were terminated prior to the PUR are not applicable for assessment of this item.

Key areas needing further examination related to performance on Item 13:
Evidence of concerted efforts on the part of the agency to actively involve the parents was not found in one applicable case and was the contributing factors to the ‘area needing improvement’ rating for this item.

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

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

ITEM 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 SC 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 less than once a week, but at least twice a month in two cases and less than twice a month, but at least once a month in two cases. The pattern of caseworker visits with the child was deemed of sufficient frequency to meet the needs of the child in these four situations. 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.

Key areas needing further examination related to performance on Item 14:
The typical pattern of visits between the caseworker and the child(ren) during the PUR was less than once a month and this pattern was not sufficient to meet the needs of the child. Consistency with quality visits was compromised due to this pattern of visitation.

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<tr>
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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 SC OCR Results: Two 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.

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<th>Strength</th>
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<td>CY18 SC OCR n=3</td>
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</table>

Key strengths related to performance on Item 15:

Visits between case managers for mothers were held at least twice a month in one situation and at least once a month in the other applicable situation. Two cases reflected that the quality of visits between the caseworker and the mother was sufficient to meet the needs of the case. Visits between case managers and fathers were applicable in two of the case situations and the frequency and quality of caseworker visitation with the father was sufficient to meet the needs of the case in one situation. Contributing to high quality visits were efforts such as focusing on the needs of the immediate children and family (i.e. housing, employment, mental health 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 are not applicable for assessment of this item.

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

Caseworker contact with a non-custodial father did not occur nor were visits with the mother of sufficient frequency or quality in one case. The father’s location was known to the agency, yet the agency did not make concerted efforts to make frequent or quality visits sufficient to meet the needs of the cases. Agency efforts for more frequent visits with mother were challenged due to not always knowing her whereabouts, yet when visits did occur, evidence of quality visits was not found to be consistent throughout the PUR.
WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

Key strengths related to performance on Well-Being 1:

Strong practice related to ongoing assessments and service provision to children to address their individual needs was seen in most cases. Caseworker visits with children were sufficiently frequent and of high quality, contributing to children being actively involved in case planning. Frequent and quality visits with parents, particularly with mothers, were seen in many cases.

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

Agency engagement with non-custodial but present fathers is a practice area for further examination. A lack of frequent and quality visits with children and parents in some cases also contributed to challenges that may warrant further examination impacting this outcome. Lastly, the region is encouraged to further examine practice as it relates to assessing the needs of all alternate caregivers when utilized for in-home services case management services.
**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 SC OCR Results:** Three 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.

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<thead>
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<th>80.00%</th>
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<tbody>
<tr>
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<td></td>
<td></td>
<td>2.17%</td>
<td></td>
</tr>
<tr>
<td>Area Needing Improvement</td>
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**Key strengths related to performance on Item 16:**

Efforts of the agency to address the educational needs of foster youth through the course of case planning activities included regular contact and coordination between the agency, school, parents, 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. Examples of services provided include: modified curriculum, and resource room supports. Supporting the family to meet the educational needs of the children were not a reason for agency involvement in the in-home services cases and were not applicable for assessment of this item during the review.

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

This review did not identify any key areas needing further examination relative to Item 16.
CHILD AND FAMILY OUTCOMES

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

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

Strong efforts on behalf of caseworkers to ensure foster 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 key areas needing further examination relative to Well-Being Outcome 2.

Note: A “Partially Achieved” rating for this outcome is possible when one of the two rating questions contained in item 16 is answered “yes” but the other question is answered “no”.

Well-Being Outcome 2

<table>
<thead>
<tr>
<th>% of Applicable Cases</th>
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<td>0%</td>
<td>0%</td>
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Well-Being Outcome 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.
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 SC OCR Results:** Four 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).

<table>
<thead>
<tr>
<th>% of Applicable Cases</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
</tr>
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<td>100.00%</td>
<td>85.71%</td>
<td>14.29%</td>
</tr>
<tr>
<td>0.00%</td>
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<td>0%</td>
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**Key strengths related to performance on Item 17:**

The agency accurately assessed the children’s physical health needs in all four applicable cases and accurately assessed the children’s dental health care needs in six of eight applicable situations. The agency provided appropriate oversight of prescription medications for the physical health issues of the target child in foster care in one applicable situation. Furthermore, the agency ensured that appropriate services were provided to the children to address all identified physical health needs in all three applicable cases. Services included (but not limited to): Health Tracks screenings, Immunizations as needed, vision examinations, Early Intervention services. None of the foster youth required medications to address their physical/dental health needs during the PUR. The agency ensured appropriate services were provided to the children to address all identified dental health needs in all three applicable cases.

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

This review did not identify any key areas needing further examination relative to Item 17.
CHILD AND FAMILY OUTCOMES

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

**Item 18: Mental/Behavioral Health of the Child**

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

**CY18 SC OCR Results:** Four 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.

---

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

The agency conducted an accurate assessment of the children’s mental/behavioral health needs in all four applicable cases. The agency provided appropriate services to match these needs in three of the cases. Two cases included prescriptions for psychotropic medication during the PUR, and the agency provided appropriate oversight of these medications. Assessments were conducted through informal and formal assessments by the agency case manager or through formal assessments provided by community providers. Examples of services employed to meet identified needs include formal mental health assessments, counseling services, medication monitoring, and agency case manager interactions with service providers to monitor the effectiveness of services.

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

This review did not identify any key areas needing further examination relative to Item 18.
**CHILD AND FAMILY OUTCOMES**

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

![Well-Being Outcome 3 Graph]

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<tr>
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</tr>
<tr>
<td>Not Achieved</td>
<td>6.90%</td>
<td>0%</td>
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</table>

**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 and addressed was evident in this review for all four reviewed cases. The agency accurately assessed the children’s mental/behavioral health needs for all four applicable children. Appropriate mental/behavioral health services were provided timely in the three applicable cases, including the provision of appropriate oversight of psychotropic medication for the two applicable cases.

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

This review did not identify any key areas needing further examination relative to Well-Being Outcome 3.
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:

B. Questions asked of the Parents include the following [n=2]:

- I have a clear understanding of what their family needed to accomplish before their case could be closed
  Strongly Agree (0); Agree (1); Disagree (1); Strongly Disagree (2); Does Not Apply (0)

- My family’s case plan has information about the following items:
  B. My child/ren’s school progress [2] Strongly Disagree
  C. My child/ren’s health progress [2] Strongly Disagree

- Please comment on anything else you’d like to share about your family’s case plan (optional):

  "I never one was able to express my feelings pertaining to the care plan with the county. The director was very unprofessional"

  "Meetings where held however after meetings the social services employees would create their own care plans without any input from GAL, parents, foster parents, or foster children and would mail out the care plans once staff created their own and refuse to go over what was in the care plans they created.(have emails from director of social services showing how care plans were created without any family input and just being sent out via mail). The County Social Services held a team meeting with family, GAL, and foster parents included,
HOWEVER, never once in the meeting did we talk about goals, school progress, current health situations, issues pertaining to visitations, nor would the case manager and director of social services listen to any feelings or issues that were arising while children were in foster care.

C. Questions asked of the Foster caregivers include the following:
   - Do you, in your role as caregiver for the foster child/youth, participate in meetings where case plans are created (also known as Child and Family Team meetings - CFT meetings)?
     - There was consensus that yes, they do.
   - If so, from your perspective, are case plans developed jointly with the children’s parents?
     - Specific comments shared were:
       - “About half the time the parents don’t show”
       - “The agencies more or less come up with the plan and bring it to the team meeting and ask if the team agrees with it or not [others agreed this is how it works]; The plans can change but you have to be pretty strong about why you think something needs to change; parents will bring up changes and the caseworkers will implement changes if parents can prove themselves (caseworkers stand behind what they’ve written)”
   - Describe examples of how you have observed the agency try to involve the parents in the development of the plan
     - “Parents no-show and the caseworkers try to reach out to them even just before the meeting to get them to join “
     - “I think it’s intimidating for parents to come, they often don’t have it together and feel they have to defend themselves – doesn’t seem like the parents are involved very much but the county will listen to them and encourage them to attend and participate”
   - As an observer and participant in these meetings, do you think the parents have opportunity to participate equally in the process?
     - There was consensus that yes, parents are as involved as they want to be.

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?
     - There was consensus that yes, the agency has tried to involve their parents. Specific comments include:
       - “Parents were involved as much as I wanted them to be, during first month I didn’t want contact at all – my case worker respected my wishes, so would keep them updated separately
       - “Mom not a part of the team meetings, she hasn’t been at meetings (lives in another state) – we don’t really talk to her anymore”
   - How have you worked on the development of your case plan? Follow up questions: Were you invited to CFT meetings? Were meetings held at times you were able to attend without missing school, etc.?
     - Many participants indicated they had to be there. Specific comments include:
       - “If I couldn’t be there I could call in, but there were only so many I could miss by calling in – they really didn’t plan them around a time that was convenient for me”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “Mostly discussed planning during the meetings” (others agreed)
- “I was always really involved in the plan and my social worker was really good about communicating any changes with me”
- “Yes [I was involved in developing it] both in team meetings and during visits”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS
CASE REVIEW SYSTEM: PERIODIC REVIEWS

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

Feedback regarding written case plans was sought from five Stakeholder groups: Agency 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:

  ![Chart showing CFT meeting scheduling]

  - At CFT Meetings, the following topics are addressed:

    ![Chart showing CFT meeting topics]

    - 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:
      - “Lack of trust between system and family, often a conflict between what did and did not occur”
      - “DJS court orders authorize treatment and rehabilitation for the identified child. It is outside the scope of our practice to assess other youth in the home”
      - “Time constraints can be a barrier, as well as topics of discussion getting off-track”
      - “Sometimes, it’s hard to note progress on tasks due to family not participating in case planning”
      - “N/A”

Note: An additional clarifying comment was received on the survey related to this systemic factor:

- “In the survey I indicated that I have participated in “team meetings”. I do not do that in my current position as judge. I did that as a state’s attorney prior to being a judge.”
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=3)</th>
<th>Top rated Barriers to Subsequent Permanency Hearings (n=3)</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>
</tr>
<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>&quot;Only having court once a month and trying to find a judge to hear our case.&quot;</td>
<td></td>
</tr>
</tbody>
</table>

- Timely INITIAL permanency hearings are occurring for EVERY child in foster care
- Timely permanency hearings are occurring for EVERY child remaining in foster care at least every 12 months
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS
CASE REVIEW SYSTEM: TERMINATION OF PARENTAL RIGHTS

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

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

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

- Other methods reported:
  - “Not sure how each county works”
  - “Not involved in this process”
  - “N/A”
  - “The court hearings and dates are discussed at CFT meetings which triggers discussion regarding filing of TPR’s at appropriate times. Typically our agency, files at 12 months or earlier rather than 15 months unless reunification is imminent.”
  - “Haven’t done any TPR’s”
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:
  - “Not involved in the TPR process”
  - “Our TPR’s have always been filed timely and the court calendar has allowed them to be heard timely. Documentation of compelling reasons has occurred at the Permanency Hearing unless the TPR has already been filed at that time.”
  - “Haven’t done TPR”
  - “Not on the priority list with our State’s Attorney. We file affidavits and they sit for over a year at the SA office.”
  - “I have not experienced this issue as I’ve always file TPR timely.”
  - “None that I am aware of”

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

<table>
<thead>
<tr>
<th>FFY</th>
<th>TPR Petition filed within 660 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>68% (n=128)</td>
</tr>
<tr>
<td>2014</td>
<td>71% (n=87)</td>
</tr>
<tr>
<td>2013</td>
<td>76% (n=87)</td>
</tr>
</tbody>
</table>
Based on your experience with child welfare partners in your jurisdiction, please comment on strong practices or barriers that impact the ability to ensure timely filing of TPRs when appropriate to do so (n=3):

- “In my experience TPRs are filed within 660 in nearly all cases”
- “From my limited involvement it seems as though is more emphasis placed on the parents’ rights and offering them multiple opportunities to improve and meet goals rather than looking at the child’s overall well-being. There are lots of people that are parents that should not be allowed that privilege.”
- “High caseloads of workers seem to impede on timely filing”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

CASE REVIEW SYSTEM: NOTICE OF HEARINGS AND REVIEWS TO CAREGIVERS

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

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

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

- **What has been your experience receiving notice of upcoming reviews and hearings regarding foster children/youth for whom you provide care?**
  
  - There were mixed experiences among participants. Specific comments include:
    - “We actually got a call from the court that we were to have our child in court in 5 minutes, and we had no idea the child had a hearing that day”
    - “We’ve never gotten notice for some children, others in our care we have received notices”
    - “We’ve had them think they’ve provided notice, but we haven’t received anything, but for the most part we’re notified pretty good”
    - “We’ve gotten all of our notices”
    - “We haven’t gotten all of our notices”

- **Does your experience match the experiences of other foster caregivers you know?**
  
  - There was consensus that the participants had the sense from other foster parents that maybe notices are provided sometimes, but not all the time.

- **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?**
  
  - “No – we’re not involved in the court process”
  - “Sometimes we’ve been contacted by the GAL but that’s not consistent either”
    
  - “We’ve been in court a couple times to see what was going on but was offered the opportunity to provide input”
  - “We’re told we can attend if we want to but have been told we’ll just sit there”
  - “We’ve been sometimes but we don’t get called on to share anything”

- **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?**
  
  - “We had a child go to court and we never saw her again – nobody was happy that day, not even the county”
  - “The children will leave at the drop of a hat after court sometimes”
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?"

![Graph showing Notice Provided to Foster Caregivers](n=16)

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

![Graph showing Barriers to Providing Notice to Foster Caregivers](n=7)

- Other reasons provided:
  - No other reasons were offered
To the best of your knowledge, are the following caregivers of children in foster care in the agency given the RIGHT TO BE HEARD in any review or hearing held regarding the child?

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

- Other reasons provided:
  - No other reasons were provided.
C. Judges and Judicial Referees were asked the following questions:

- Please respond to the questions below based on your experiences with foster parents, pre-adopter 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

<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>0%</td>
<td>25%</td>
<td>50%</td>
<td>75%</td>
<td>100%</td>
</tr>
<tr>
<td>Foster caregivers attend hearings but do not have comments when asked by the Court</td>
<td>0%</td>
<td>25%</td>
<td>50%</td>
<td>75%</td>
<td>100%</td>
</tr>
<tr>
<td>Foster caregivers provided written information for the Court to consider during hearings</td>
<td>0%</td>
<td>25%</td>
<td>50%</td>
<td>75%</td>
<td>100%</td>
</tr>
</tbody>
</table>
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=5)**
  - Before attending Child Welfare Certification Training: 4
  - While attending Child Welfare Certification Training: 1
  - After attending Child Welfare Certification Training: 0

- **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: 2016 (x2), 2017 (x2)

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

  ![Training & Supervision - first year of child welfare work](chart)

<table>
<thead>
<tr>
<th>Training I receive(d) helped strengthen my ability to perform my duties in child welfare</th>
<th>Supervision I receive(d) helped strengthen my ability to perform my duties in child welfare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>Agree</td>
</tr>
<tr>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>20%</td>
<td>40%</td>
</tr>
</tbody>
</table>

- 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=5)
  - “I had no trained knowledgeable supervisor. I was left to my own devices before and after training”
  - “Our agency doesn’t appear to have a standardized plan as far as training a new employee which I believe would be beneficial. It just appeared quite unorganized. Adequate supervision and opportunities are provided”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

B. Agency Administrators were asked the following questions:

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

  - Initial Staff Training experiences as reported by Agency Administrators

    - New child welfare workers complete the initial training within their first year of employment (n=8)
    - How often are new child welfare workers in your agency assigned the responsibility of a full caseload prior to completely Child Welfare Certification training? (n=6)

  - 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=0)

  - To the best of your knowledge, does the initial training provided to child welfare workers teach the skills and knowledge needed for them to carry out their duties in child welfare:

  - Initial staff training teaches skills and knowledge needed to perform duties (n=8)
Respondents who did not answer “Every Time” to this question were asked: In your opinion, what gets in the way of child welfare workers getting all the needed skills and training needed to perform their duties from INITIAL trainings? Choose the most important reason:

- Other reason provided:
  - “N/A”
  - “None. Child Welfare training is excellent. The only concern is that it is not offered often enough for new workers. Sometimes with a long wait to get in, agencies are forced to have to do less than comprehensive training so that workers can start cases prior to getting into child welfare training”
  - “All the policies, laws, requirements”

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

- Other supports provided:
  - “Prior to Child Welfare training, SWers are typically given “easier” cases, starting with in-home cases to learn the basics and progressing to foster care. Typically, new workers have fewer cases as well while they are learning”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: ONGOING STAFF TRAINING

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

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

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

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

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

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:

Other reasons provided:
- “I don’t think there are enough opportunities”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

STAFF AND PROVIDER TRAINING: FOSTER AND ADOPTIVE PARENT TRAINING

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

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

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

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

- **What training was initially available to you when you began providing foster/relative care/pre-adoptive care?** Responses include:
  - “PRIDE training” (all agreed)
- **Was the initial training of high quality to prepare you for your role as a foster caregiver?**
  - “So-so – it’s a lot of information to absorb” (consensus of group)
  - “The new PRIDE training – seems like there was more of a push to come alongside [the child’s] parents, which was really hard for the foster parents to consider at that point because they’re perhaps looking at things from the child’s view – wondering how they can be foster to parents AND mentor their [the child’s] parents”
- **What ongoing training is available?**
  - “The conference they have once a year – lots of training all at once with sessions that fit our needs plus we get to meet with other foster parents”
  - “Not familiar with the regional trainings through the CFS Training Center”
  - “We usually do all our training online – foster parent college and they are interesting”
  - “Doesn’t seem like there’s a lot of in-person trainings in this area anymore – would like the option of in-person training again”
  - “Part of in-person training is to network with other foster parents, you feel more connected that way”
  - “The county has done a picnic once a year and that is really good [other counties have started doing this too] – don’t do trainings at those, but used to, which was nice”
  - “Our county has a Christmas party each year for the foster parents and kids and it included training with childcare provided (the training wasn’t high quality, though)”
- **Is there ongoing training of high quality and does it support you in your role as a foster caregiver?**
  - Discussion from the group on the previous question indicated the ongoing training offered was necessarily of high quality. Due to time, this specific question was not asked. General discussion about online trainings attended by participants met the need but did not provide opportunity to network. A blend of online and in-person trainings would be seen as a need.
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Have you participated in, or are you aware of specialized training for adoption in your area? If so, is that training of high quality?
  - “Never heard of anything” (others agreed, other than the initial training but not anything specialized)

- What are the barriers, or what gets in the way, of receiving necessary training?
  - “Time”
  - “Staffing/people to do it”
  - “Money”
  - “Where to have it”
  - “Distance/transportation for some people would be a barrier”

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

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

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

Other reasons provided:
- “Driving time and distance to trainings is an issue for rural foster parents”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “They are busy and have a lot on their plate. They may not have a child at the time that has the issue they are being trained for”
- “Online training versus in person”

### Barriers to ongoing staff training to staff of child care institutions teaching needed skills and knowledge (n=7)

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

- Other reason provided:
  - “Unsure of their training”
  - “Young inexperienced staff, lack of pay reduces qualified applicants”
  - “I have no idea”

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

### Ongoing training teaches skills and knowledge needed to perform duties (n=5)

<table>
<thead>
<tr>
<th>Ongoing Training</th>
<th>0%</th>
<th>20%</th>
<th>40%</th>
<th>60%</th>
<th>80%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing training to Psychiatric Residential Child Care facility staff</td>
<td>Not Sure</td>
<td>Rarely</td>
<td>Sometimes</td>
<td>Frequently</td>
<td>Every Time</td>
</tr>
<tr>
<td>Ongoing training offered to Residential Child Care Facility staff members</td>
<td>7%</td>
<td>30%</td>
<td>26%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing training offered to Group Home staff members</td>
<td>20%</td>
<td></td>
<td>80%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing Training offer to adoptive parents</td>
<td></td>
<td>40%</td>
<td>60%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing Training offered to foster parents</td>
<td></td>
<td>40%</td>
<td>60%</td>
<td></td>
<td></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 residential group home staff getting all the needed skills and training needed to perform their duties from ONGOING trainings? Choose the most important reason:

Barriers to ongoing staff training to foster and adoptive parents teaching needed skills and knowledge (n=5)

- Opportunities to practice the skills learned
- I’m not sure (40%)
- Topics are too general
- Topics are too advanced
- Presenters knowledge of the subject
- Training materials
- I’m not sure

Other reasons provided:
- No “Other reasons” were offered.

Barriers to ongoing staff training to Residential Child Care staff teaching needed skills and knowledge (n=5)

- Opportunities to practice the skills learned (20%)
- I’m not sure (60%)
- Topics are too general
- Topics are too advanced
- Presenters knowledge of the subject
- Training materials
- I’m not sure

Other reasons provided:
- “I think that the turnover of staff is a huge issue that causes many problems. They don’t realize how complex the problems of the children are”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

SERVICE ARRAY AND RESOURCE DEVELOPMENT: SERVICE ARRAY

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

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

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

A. Questions asked of Foster Caregivers:
   - Are services available to support the children placed with you? Do you receive the support you need to do the work you do with the children placed with you?
     - Specific comments received include:
       ▪ “Yes, for me – I have respite and strong family support, but I’ve heard from other people that it’s hard to get respite”
       ▪ “I think finding respite is a barrier for some kids because they don’t know the family and they become anxious being in another home; I think our family should be able to watch the kids, but they can’t anymore”
       ▪ “It’s hard to find someone to do respite care – we were given names to call (depends on your worker whether or not we have to find our own respite or not)”
   - 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.
     - Specific comments received include:
       ▪ “Medical (dental, vision, general medical) – we take them to all their appointments; most said it’s easy to find providers; one said it’s difficult, particularly with special medical needs because it required out of state providers, which is a barrier with ND Medicaid”
       ▪ “Mental Health – easy to find, not a long waiting list; we found a trauma therapist in another community that’s been awesome (we transport to the appointments)”
   - 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?
     - Specific comments include:
       ▪ “No – we just transport them – works better because they’re in our care and we know what’s going on with them, we prefer it that way”
       ▪ “Our caseworker will take them to appointments if we’re not able to”
   - 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?
     - Helpful:
       ▪ “Mental health – have been helpful, willing to drive a distance to get them there because they help the children”
“Basic needs are met, but the sense of belonging for the children is what they need most”

- Missing:
  - “Addiction services for teens aren’t really available”
  - “Diapers are really expensive and for the county rate, it doesn’t really meet the cost – they are eligible for WIC so they get formula, but not diapers or clothes”
  - “It’s a distance to get to services, which are typically 8am-5pm, have to take ½ day off work to get them to services, find a place for the other children to go in the meantime, and we don’t get reimbursement for fuel care”

B. Questions asked of Youth (n=6):

- Did you receive all the services you needed to meet your goals (i.e. Mental/behavioral health needs/physical/dental, etc.)?
  o “Yes” [all agreed]

- 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 Most agreed the restrictions were not typical.
  o Specific comments include:
    - “Curfew”
    - “Staying at friends’ houses – a whole process to get it approved, background checks, checking out the house, etc.”
    - “Driving”
      a. A couple of the youth were able to get their licenses while in foster care
      b. “At first, they said ‘no’ to getting a permit or license, but now I can get my permit but to get the license my foster parents have to take me into their insurance”
      c. “I had to get my own insurance”

- Have you received Independent Living Services? If no, were you offered the opportunity and declined? If yes, who provided the IL Services, i.e. PATH’s IL program, custodial agency, facility, foster parents, all the above, etc.?
  o “Yes” [all but one who was too young for the PATH IL program]
  o PATH IL was the provider identified by the youth in attendance

- What was most helpful (IL service) and what would have made the service more beneficial?
  o Specific comments received:
    - “I already had most of the stuff they would have provided”
    - There were no comments offered on what would have made the services more beneficial

- Have you had an opportunity to talk to a counselor? If no, would you have liked to? If yes, was this helpful?
  o The consensus of the group was yes, the opportunity was provided. Some found it helpful, others didn’t. Specific comments include:
    - “It wasn’t helpful at all, didn’t help one little bit – was forced to go”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- “I’ve had two counselors; first one didn’t help me, I have a different counselor now and it’s helping me”
- “The first few months in foster care got put into a group thing, didn’t really get anything from it; then went to a facility and got help there with counseling”
- “I’ve had a few counselors and none of them really helped; I didn’t put forth the effort and they didn’t edge me on to work; went to treatment last year and that therapist really helped me”

• What would help the agency’s ability to ensure that services children and family need are provided?
  o Specific comments include:
    ▪ “Make sure we have a good social worker (always there for you, talk about anything, tell things don’t feel like telling foster parents, really cool)”
    ▪ “My social worker is pretty chill – she’s young and it’s like we’re sisters; she’s understanding and recognizes we have a voice too, and that we have plan and know where we want to be; be there for us
    ▪ “My social worker sucks – terrible at job – doesn’t get things done, it’s always last minute”
    ▪ “I like our worker, can be slow with some things, if I have court coming up, I’m not told about it; doesn’t answer my phone calls and is sometimes slow in getting back to me”
    ▪ “Have been transferred to another worker, and that’s hard”
    ▪ “Communication is a big thing – there was such a lack of communication between agencies, and communication agencies and my parents – it was really a struggle”
    ▪ “Awareness of the policies”

• 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 “8-9”
  o “10 for caseworker”
  o “8½ - 9½”
  o “7”
  o ‘6-7”

• Is there anything else you thought would be asked that wasn’t or anything else you would like to share about the services you have received from your custodial agency?
  o Most of the group said “no”
  o One youth expressed frustration with a service provider and felt this individual should be fired.

C. Questions asked of Parents (n=2)

• My child/ren and family’s situation is considered by the agency when deciding what services are provided:
  (1) Strongly Agree; (0) Agree; (0) Disagree; (2) Strongly Disagree (0) Does Not Apply

• There are many services available in my area that can help families safely care for their children:
  (0) Strongly Agree; (0) Agree; (0) Disagree; (2) Strongly Disagree (0) Does Not Apply
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- My family has access to services that address our needs and help me meet the case plan goals:
  (0) Strongly Agree; (0) Agree; (0) Disagree; (2) Strongly Disagree (0) Does Not Apply
    - Comments received:
      - “Not once did the county listen to my wants and needs as a parent”
      - “The County social services never once listed to parents opinions on deciding what services needs to be provided. In fact all communication was thru email and never once was a phone call ever made to parents”
      - “The county NEVER worked with me. Very un satisfied”
      - “I wish I could sit down and show someone our care plan that was created, because they were not goal directed and never once did the County Social Services ask to identify any needs my family may need. I lived 40 miles away from my children in foster care and never once did social services employees offer to help pay for gas or transportation to get to biweekly visits to see my children (which was a big hardship every week)”

- Are there specific types of services you or your family need, or needed, but are not available in your area?
  (2) Yes (0) No

- Briefly comment on your responses to the statements above (Optional):
  - “More assistance with parenting evals”
  - “Help with transportation to get to visits, help finding counseling services in my town, a parenting eval was ordered if I could find a place under $325, however a parenting eval is not covered under Medicaid as Medicaid say it’s not a “medical necessity” and costs close to $3000 and social services refused to pay the high cost of the evaluation, so it never got done. Which was a BIG hold up on the return of my children because no one would pay for the eval social services stated had to be done”

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

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

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

  Parent Aide: Respondents indicated:
  A: (0) Y  (1) N  (0) IDK
### STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

B: (0) Y  (2) N
C: (0) Y  (0) N  (2) DNA

**Parenting Classes:** Respondents indicated:
- A: (0) Y  (1) N  (1) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

**Addiction Services:** Respondents indicated:
- A: (2) Y  (0) N  (0) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

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

**Domestic Violence Services:** Respondents indicated:
- A: (0) Y  (1) N  (1) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

**Anger Management Treatment:** Respondents indicated:
- A: (0) Y  (1) N  (1) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

**Prime Time Child Care:** Respondents indicated:
- A: (1) Y  (1) N  (0) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

**Transportation Assistance:** Respondents indicated:
- A: (1) Y  (1) N  (0) IDK
- B: (0) Y  (2) N
- C: (0) Y  (0) N  (2) DNA

- Briefly comment about your responses to the services in the table above (optional):
  - “More parenting evals”
  - “I was very unhappy with how the County CPS acted when my children needed child care while in foster care. The foster parent was told by the director of social services that she would have to take 3 weeks off of work while my son had surgery because the daycare wouldn’t take him for 3 weeks after surgery. On days the childcare facility was closed, social services said it was the foster parents responsibly to find daycare and pay for drop in daycare out of foster moms own pocket. Foster parent spent hundreds of dollars out of her pocket on 5 kids for childcare. Foster mom also spent hundreds of dollars out of her own pocket for clothes because the county director told her that their agency is on a tight budget and couldn’t afford clothing allowances for 5 children. I needed help with transportation for visits as i drove 80 miles round trip bi weekly and was told they social services doesn’t have a program to help with transportation assistance. My case worker
emailed me saying drug treatment was mandatory, however there was not any court order saying such orders and never once did my case worker explore my options for treatment or offer me different places that offer classes in town. I was told many times by the director; "your children wont be coming home" however the court returned them home because social services was failing to provide any services at the time we went to court."

- Is there anything else that you can think of that would help your local agency provide services that would better able to meet the needs of families in your area?? (n=2)
  
   (2) Yes (0) No
- Briefly comment on your responses to the statements above (Optional):
  
   o "The county wanted to just terminate rights without helping parents. They are terrible"
  
   o "The County social services does not make family care plans goal directed and does not seek input from children or families. The GAL does not take time to visit with families and is always at social services gathering information. The GAL never once visited my children or spoke to them about their concerns until I filed a complaint with the GAL bored. Social services was not there to help when they took my children 3 different times in a year and a half, which is why each time my children were returned within 6 months because either the judge found NO deprivation or the judge found social services was failing to offer any services anymore"

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=9)

- Other Reasons:
  - No “Other Reasons” provided

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=22)

- 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=21) The top three issues identified were the following:
  - Lack of mental health services (16 responses)
  - Lack of addiction services (10 responses)
  - Lack of Intensive In-Home Family Therapy services (9 responses)
The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of families receiving services they need to keep their children safely at home? (n=21) The top three issues identified were the following:

- Lack of mental health services (14 responses)
- Lack of addiction services (11 responses)
- Lack of family engagement (10 responses)

The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of children in foster and adoptive placements (prior to finalization) receiving the services they need to achieve a permanent home/family? (n=18) The top three issues identified were the following:

- Lack of supportive services (i.e. respite care, parent aide) AND Lack of mental health services (9 responses each)
- Lack of mental health services AND Waiting lists for services (8 responses each)
- Lack of Intensive In-Home Family Therapy services (5 responses)
The respondents who did not answer “Every Time” or “Not Sure” to the above question were then asked the follow up question, “What gets in the way of adoptive families and children whose adoptions have been finalized having the post-adoption services they need to maintain a permanent home/family? (n=17) The top three issues identified were the following:

- Lack of mental health services AND Lack of support services (i.e. respite care, parent aide) (8 responses each)
- Lack of Intensive In-Home Family Therapy services AND Lack of supportive services (i.e. respite care, parent aide) (7 responses each)
- Funding for treatment (4 responses)

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

- No other comments received that are not otherwise reflected in this report.
How well is the service array and resource development system functioning statewide to ensure that the services in the Array of Services systemic factor can be individualized to meet the unique needs of children and families served by the agency?

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

A. Questions asked of Foster Caregivers:

- **How individualized are the case plan for the children?**
  
  o Specific comments include:
    
    ▪ “Not always = for the cases we’ve had, the children have had many needs and sometimes it’s the parents’ rights over the child’s rights”
    
    ▪ “What the kids need is for the parents to get their act together and love their kids and how do you do that? All the kids’ basic needs are being met but what about the love and belonging by their parents?”
    
    ▪ “Some kids go for visits, then don’t see parents for months at a time because they are inconsistent and they don’t see how disruptive it is to the child, how it affects their personality and their entire lives; people need to know and learn how it affects their children”
  
  o Follow-up Question: Do plans affect the child’s need for permanency?
    
    ▪ “It takes a long time to get there; state of ND gives parents too many chances; takes over a year to get a TPR; they’re messing with the child’s head more than anything”
    
    ▪ “Takes a long time for things to happen and get to permanency ”

- **Are the children’s needs being met with the services provided?**
  
  o Specific comments include:
    
    ▪ “Need for permanency isn’t being met timely – falls back on the state, not the county – the state’s attorney is backed up, judges are backed up too”
    
    ▪ “It takes over a year to get to court and we hear ‘they’re in a foster home, what does it matter?’”
    
    ▪ “Maybe the judges need to go thru the training, so they understand what it’s like for the kids to be in foster care”
    
    ▪ “No stability for the kids because they don’t know if they’re coming or going with their living situation, and how many times they go back home, then re-enter foster care”

  o A follow-up question was asked of the group: Are services getting to the situation or the presenting problem (i.e. if the issues are neglect/dirty house, they get a prescribed service that everyone gets, or are they individualized?)
    
    ▪ “I think they adjust it to each case [others agree]”

- **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.)?”**
"No, not really" (for several in the group).

“For Native American children, the social worker took the kids to pow wows so they could experience their culture.”

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?**
  - The consensus was yes, they are receiving the right services.

- **Did you think these services were culturally appropriate and addressed any special needs of you or your family?**
  - There was a mixed response to this question from the group. Some participants felt that yes, services were culturally appropriate whereas others responded with a ‘no’.
  - Specific comments include:
    - “Yes and no; they really tried to push faith on us but I didn’t have a preference and it was against our family upbringing”
    - “In another foster home they were super Christian and I had to pray before everything I ate, had to pray for at least 3 minutes before bed, and had to memorize the whole Bible – religion was forced on me and made it a punishment to memorize the Bible; my foster family now is a lot better”

- **How did your worker help you understand what services you were going to receive?**
  - The general response received from the group was that “they told me in the child and family team meeting or at home visits.”
  - Specific comments include:
    - “Told us what we were going to receive”
    - “I wasn’t really told until it was close to me aging out; custodial worker didn’t really tell me about stuff, it was another agency who told me what was available”

- **Did any of the decisions about services change after talking with your worker?**
  - “I just followed along with what they said because I had no idea”
  - “No, but I was okay with it”

- **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**
    - “Therapist checks in with foster parents which has been good”
    - “My social worker was very involved in my life and worked well with me”
  - **Improve**
    - “Something happened at a friend’s house and wanted me to testify against someone – agency worker still wanted me to testify in front of that person even though I’m a minor”
    - “Confusion with workers not knowing or understanding policies”
    - “AASK workers need to do a better job; don’t like certain employees, but the current worker is actually pretty good”

- **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?**
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- Although this specific question did not get asked of the group, discussion within other items reflect that most of the youth were able to attend their child and family team meetings.

H. Question asked of Parents (n=3) *(Options for response included Strongly Agree, Agree, Disagree, Strongly Disagree, Does not Apply)*

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

I. Questions asked of Agency Case Managers, Agency Administrators, Legal and Community:

- The respondents who did not answer “Every Time” to the above question were then asked the follow up question, “What gets in the way of formal and informal support being used to create services and supports that are developmentally and culturally appropriate? (n=19)

  The top five issues identified were the following: *(6 responses listed due to tie)*
  - Services tailored to meet the needs of parents [9 responses]
  - Collaboration between Child Welfare, Behavioral Health, Developmental Disability, [9 responses]
  - Child’s distance from home/Tribe [6 responses]
  - Understanding of child development [6 responses]
  - Lack of developmentally appropriate services for younger children (i.e. 5 years old and under) [4 responses]
  - Lack of developmentally appropriate services for older children [4 responses]
How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

Feedback was sought from all seven Stakeholder Groups.

A. Youth were asked the following questions:
   - Now, thinking more generally, when you think of child and family services in your area, can you tell me one good thing that is happening and one thing you think really needs to be changed?
     - Time did not permit this question to be asked
   - Are you aware of any opportunities for foster youth to be involved in statewide efforts to provide child welfare services?
     - “No” (several in group shared this response)
     - “Yes, the ND Youth Board, where a group of youth who advocate for foster children around the state of ND listening to what they want or need changed,“
   - 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?
     - “Lower age limit on [attending] court – when I was 12 I couldn’t go to court and I really wanted to”
     - “Conferences for foster parents – youth could accompany them to these and have sessions to discuss things both youth and foster parents need to know”

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

- Which statement below reflects your involvement in the meetings held every five years to develop the state’s five-year plan for child welfare services, known as the “IV-B” or “CFSP – Children and Services Plan”:

  - 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=22)

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

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

Awareness and Involvement with APSR (n=22)
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 they are because everyone has to follow the same guidelines” [others agreed]

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=10)](chart)

   - Please comment on your response (n=3):
     - “I don’t deal with foster care in my capacity”
     - “Inconsistency in applying state required services and client admissions”
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

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

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

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

A. Question asked of Legal Stakeholders:
   • From your experience, are the required criminal background checks being conducted for foster parents, adoptive parents, and staff in child care facilities?
     - Criminal Background Checks are being conducted
       - Sometimes 100%

     • Please comment on your response above (n=0):
       o None received

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
       - Yes, 60%
       - No, 40%
STAKEHOLDER FEEDBACK ON SYSTEMIC FACTORS

- If yes, do you believe the custodial agency’s response was sufficient to ensure the child’s safety?
  
  ![Agency response sufficient to address child's safety](n=3)
  
  - Please comment on your response above:
    - “I do think that the custodial agency’s hands are tied in some cases. Removing a child from a ‘bad’ home and placing them in a ‘questionable’ foster care setting is not unheard of.”

C. Question asked of Community Stakeholders:

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

  ![The safety of foster youth considered in case planning](n=5)

  - Please comment on your response above:
    - “I believe every effort is made to be sure that children will be safe when placed with family or in foster care”
    - “This may vary on a case by case basis”
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?
     - “Yes – I’ve volunteered for different events; it’s hard to get out there and target the right people at these events, though”
   - Do efforts focus on the need for homes to parent older children? Sibling Groups? Families with Native American heritage?
     - “No, just general recruitment”
     - A follow-up question was asked: What about the retention of foster parents?
       - “Ours try to keep us but sometimes you feel like you get the worst-case scenario of kids and you get burned out”
       - “We tell them we’re going to be done but they tell us we can’t quit (laughter)”
       - “They make sure we don’t get burned out, give us a break”
       - “We really need more foster parents”

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

   ![Targeted Diligent Recruitment Efforts](chart)

<table>
<thead>
<tr>
<th>Targeted Diligent Recruitment Efforts (n=10)</th>
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<tbody>
<tr>
<td>Families of Native American heritage</td>
</tr>
<tr>
<td>Families willing to take sibling groups</td>
</tr>
<tr>
<td>Families willing to parent adolescents</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
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<tr>
<td>Not Sure</td>
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</table>
Are recruitment efforts sufficient to provide the number of licensed foster homes or adoptive homes to meet the region's needs?

- Advertise and get the word out about what foster parents are/do
- Community Outreach
- Needs of children in FC have increased and payment as well as safety to the other children in the home are an issue I believe. FC needs a revamp and the judicial end of FC needs to be looked at in all areas.
- Making the need for foster homes more known
- I feel very strongly that the family dynamics have become so complicated that foster parents become very quickly overwhelmed with all the issues that the children present with. I don’t know how to solve that issue – there is so much ‘baggage’ these kids carry around that it’s overwhelming

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?

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=3), Agency Administrators (5), and those indicating a role with AASK in the Community Survey (n=0).

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

- Delays in getting criminal background check results, 7, 32%
- Delays for family to respond to licensing paperwork requirements, 4, 18%
- Delays in receiving other required background checks, references, etc., 6, 27%
- Delays in processing licensing approvals
- Other, 1, 5%

Other reason provided:
- “Huge delays from the state the children are coming to ND from”
APPENDIX

Appendix

1.1 R3 Federal CFSR State Rating Summary Report, September 2016
1.2 CY18 SC OCR Site Rating Summary Report, August 2018
1.3 CY18 SC OCR Site Rating Summary Report, August 2018: In-Home Services Breakdown
1.4 CY18 SC OCR Site Rating Summary Report, August 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

<table>
<thead>
<tr>
<th>Item or Outcome #</th>
<th>Strength</th>
<th>ANI</th>
<th>NA</th>
<th>Substantially Achieved</th>
<th>Partially Achieved</th>
<th>Not Achieved</th>
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<td>Item 1</td>
<td>82.35% n=14</td>
<td>17.65% n=3</td>
<td>n=48</td>
<td></td>
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<tr>
<td>Outcome S1</td>
<td>82.35% n=14</td>
<td>17.65% n=3</td>
<td>n=48</td>
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<td>Item 2</td>
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<td>Outcome S2</td>
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1.5 OCR Review Team Composition

Statewide child welfare partners provide the primary source of recruitment for the OCR Workforce. Participation and involvement from local agencies and statewide partners in the OCR Workforce 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. Two cases in this review had a review team of three reviewers. QA Leads for this Onsite Review included the CFS Administrator of the OCR (2 cases) and a retired child welfare professional (3 cases). Second Level Quality Assurance (SLQA) was provided by the OCR Manager for three cases. The Children and Family Services Center Director provided SLQA for two cases.

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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<th>ND OCR REVIEW TEAM COMPOSITION FOR SCHSC ONSITE REVIEW</th>
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<td>Child Welfare professionals from other county social service, DJS agencies</td>
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<td>Child Welfare professionals from Central Office, DHS</td>
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<td>Private Non-Profit/University partners (AASK, Dakota Boys &amp; Girls Ranch, PATH ND, Inc., UND’s Children Family Services Training Center, etc.)</td>
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<td>Retired child welfare professionals</td>
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Contact Information

For more information about this report, please contact

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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