

Child and Family Services Review Round 3 Program Improvement Plan

State/Territory: North Dakota

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Reporting Schedule and Format: North Dakota will implement the Program Improvement Plan (PIP) statewide, with specific project rollouts specified in each table below. Each strategy will be implemented and then begin measurement in the quarters of the PIP period indicated in each table below. North Dakota will report progress and outcomes on a quarterly basis by submitting an update of key strategies and activities within 60 days of each quarter end date.

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SECTION I: INTRODUCTION

In 2016, the Children's Bureau, in collaboration with the North Dakota Department of Human Services' Children and Family Services Division, conducted the Child and Family Services Review (CFSR). A statewide assessment was prepared by North Dakota and submitted to the Children's Bureau on July 15, 2016. During the week of September 12, 2016, a traditional CFSR review was completed at Cass, Grand Forks, and Burleigh-Morton counties.

The CFSR found North Dakota to be out of substantial conformity with six of seven outcomes and five of seven systemic factors. In response to the federal review, North Dakota is charged with creating a Program Improvement Plan (PIP) that addresses areas not in substantial conformity.

North Dakota engaged in analysis to determine the root cause for the issues identified in the CFSR. This work revealed five major factors impacting the system and include the following:

1. Lack of an operating Continuous Quality Improvement (CQI) system that has the capacity to collect and analyze case work practice data.

North Dakota has not had a CQI process in place. It has struggled to develop and maintain a functioning quality assurance process. While North Dakota's child welfare information system – known as FRAME – has been in place since 2009, its functionality is cumbersome and limited. Coupled with no formal processes to routinely gather and analyze system data, it has been difficult to identify strategies and activities that will have the greatest impact. North Dakota recognizes that gathering data to inform system change and practice adaptations is critical to improving outcomes for children.

Compounding the difficulties caused by a lack of a CQI system is the fact that the counties administer independent service delivery systems. While the Division is charged with overseeing the public child welfare system, it has very little leverage with the counties. This contributes to the inconsistency of practice identified in the 2016 CFSR. North Dakota recognizes that engaging with the counties to collaboratively work towards consistent and effective child welfare practice is the only way to implement and sustain system change and create ongoing continuous quality improvement within systems.

2. Inconsistent case work practice due to excessive workforce turnover and increases in the ratio of case workers to supervisor.

During the 2016 CFSR, the struggle with practice consistency was apparent. North Dakota believes that excessive workforce turnover and increases in the ratio of case workers to supervisor are contributing factors to inconsistent practice. Outcomes for families and children are impacted on many levels when less experienced workers and unprepared supervisors struggle to provide services.

One noted area of challenge related to this is the lack of consistency in completing ongoing needs assessments with children and families. North Dakota adopted the Family Assessment Instrument (FAI) as its primary assessment tool in 2009. CFS conducted a survey in February 2019 of county foster care workers, county in-home services workers, and Division of Juvenile Services foster care workers regarding the use of needs assessment tools. The number of years of experience in their current position ranged from 0 years to 23 years with a mean of 7 years. Their caseload ranged from 1 – 20 cases with a mean of 10 cases. Results indicated inconsistent use of the FAI. Just under 43% of respondents found the FAI *Somewhat Useful* (Likert Scale: Not Useful, Somewhat Useful, Very Useful) while 21.28% found it *Not Useful* when assessing the needs of children and families. Just over

13% of respondents reported they never use the FAI to guide development of the care plan goals and tasks. Nearly 60% of respondents reported they didn't re-evaluate needs on a quarterly basis and only 13% reported discussing the results of the assessment with their supervisor on a regular basis.

Similarly, North Dakota surveyed county social services and Division of Juvenile Services supervisory staff during the same timeframe as noted above. The number of years of experience in their current position ranged from 1 years to 35 years with a mean of 10 years. The number of people supervised ranged from 1 – 19 individuals with a mean of 6. When asked how often they coached or mentored staff in needs assessment practices, respondents indicated:

- Daily = 30.29%
- Weekly = 35.71%
- Monthly = 17.86%
- Quarterly = 7.14%

Just over 59% of respondents found the FAI *Somewhat Useful* (Likert Scale: Not Useful, Somewhat Useful, Very Useful) while 3.7% found it *Not Useful* when assessing the needs of children and families. Just under 7% of respondents reported they never use the FAI to guide development of the care plan goals and tasks.

3. Widely varying degrees of child and family engagement.

Another issue identified in the 2016 federal CFSR that North Dakota believes necessary to address is related to child and family engagement. Further, as part of the quality work, research was conducted that identified caseworker visits with parents, in particular absent parents, as a major root cause for North Dakota's poor outcomes relating to engagement practices. North Dakota acknowledges that child and family engagement is a critical component of good practice and that challenges with engagement efforts impacted a number of 2016 CFSR outcomes (Safety 2 – Children are maintained in their homes whenever possible and appropriate; Permanency 1 – Children have permanency and stability in their living situations; Permanency 2 – Continuity of family relationships and connections is preserved for children; and Well-Being 1 – Families have enhanced capacity to provide for their children's needs).

4. Limited engagement with court system leading to permanency issues.

The federal CFSR process identified Permanency Outcome 1 as a practice challenge requiring further exploration. Most significant was achieving timely permanency for children in foster care (Item 6). North Dakota recognizes that the courts play a critical role in permanency achievement and that there is a need to better collaborate with courts, state attorneys and other legal partners. Historically, CFS and county social service agencies have struggled to fully engage with the legal system.

5. Limited ability to recruit and retain who meet the needs of the children they serve and who reflect the ethnic and racial diversity of children served by the foster care program.

CFSR findings indicate that North Dakota does not have an efficient data management system to collect foster and adopt provider demographics: Race, ethnicity, marital, LGBTQ status, etc. Currently, foster parent data analysis is a manual process complicating documentation of recruitment efforts. North Dakota is impressed with the overall number of licensed foster homes; however, the utilization of the licensed provider homes remains at 65%. The rationale for the lower utilization includes child demographics compared to provider desire, child needs, child access to services, provider geographic location, and provider sabbatical. North Dakota is confident that recruiting

within our already established pool of providers may assist with engaging licensed providers to best meet the placement needs of children.

Child behaviors are known to be a primary reason why children are placed in a higher level of care such as a residential/congregate care, as such behaviors are perceived as unmanageable in a family setting. Interstate Compact data (collected each month) indicates roughly 55 North Dakota youth are placed out of state in a licensed facility due to aggressive, sexually acting out, and/or low functioning child behaviors. North Dakota has worked with licensed Residential Child Care Facility (RCCF) providers to decrease residential beds, which in turn has maintained the need to seek out of state placement options and recruit North Dakota specialized family foster homes as a viable placement option. The North Dakota residential facility capacity has decreased from 288 beds in 2012 to 164 in March 2018, an overall decrease of 124 licensed beds statewide. As North Dakota foster care numbers continue to increase, facility placements have decreased, and out of state placements have maintained over time, the state is confident locating and engaging licensed family providers to meet the higher needs of children in placement. This will be achieved through implementing the strategies identified in Goal 5.

SECTION 2: PIP GOALS, STRATEGIES, & KEY ACTIVITIES

Overarching Goal 1: Design and implement a Continuous Quality Improvement process to identify the strengths and needs of the service delivery system; monitor and evaluate the system changes to positively impact outcomes for children and families (Item 25).

The key activities outlined in the Goal 1 strategies will expand North Dakota's ability to carry out a consistent and reliable Onsite Case Review process (Strategy 1.1) and ensure statewide stakeholder involvement in the CQI process (Strategy 1.2). To facilitate the collection and analysis of data, North Dakota will integrate CQI processes into practice. This will include:

1. Formalizing an Onsite Case Review (OCR) process;
2. Developing a statewide understanding of Theory of Constraints, the chosen CQI process;
3. Developing communication and feedback loops to inform practice and agency initiatives.

Theory of Constraints (TOC) is a methodology for identifying the most important limiting factor (i.e. constraint) that stands in the way of achieving a goal and then systematically improving that constraint until it is no longer the limiting factor. Combined with a focus on systems thinking, TOC can transform operations within an organization or system.

The primary focus of TOC is to identify the constraints, believe there is hidden capacity and apply the "rules of flow" to measure the work output and the quality of work.

A TOC implementation schedule for other CFS programs, including in-home services and quality assurance (OCR) in 2019 and foster care in 2020, has been developed with the goal to complete all CFS programs by the end of 2020.

Strategy 1.1: Following the 2016 CFSR, North Dakota embarked on a redesign of the case review process, named the Onsite Case Review (OCR). This effort was accomplished through a contract between DHS-CFS and the University of North Dakota-CFS Training Center. Policies and procedures were finalized in 2017 and the state began convening onsite case reviews and stakeholder surveys/meetings in January 2018. This continued throughout 2018, and each of the eight ND regions participated in an onsite review. Following each onsite review, the OCR manager sent a final report to regional agencies to highlight the findings from reviewed cases and feedback received from Stakeholders. The vision included onsite post-OCR work using CQI principles with regional agencies to review the final report findings, along with other regional data, so that each region had sufficient information to identify practice improvement opportunities. However, due to lack of staff resources at CFS, this follow-up regional CQI process did not get implemented. As a result, the OCRs were received as a 'compliance audit' by regional and local agencies, because they did not perceive the OCR as informing practice or positively impacting their work.

Due to CFS's inability to implement the regional CQI process, the OCRs were suspended. Concurrent with this challenge, DHS adopted the Theory of Constraints (TOC) as its CQI process for child welfare (see narrative prior to Strategy 1.2 for a detailed description). It was decided by DHS and CFS leadership that the OCR process would be reviewed and redesigned through the TOC process. Additionally, North Dakota is currently undergoing a legislative session. One significant bill introduced, and subsequently passed by the Senate, includes a quality assurance unit separate from the CFS Division. If this bill passes the full legislature, it will impact CFS's plans to implement a revised OCR process.

STRATEGY 1.1: STATEWIDE ONSITE CASE REVIEW PROCESS

Implement a statewide case review process by completing a review of randomly sampled foster care and in-home services cases in each North Dakota region once per year to evaluate safety, permanency, and well-being outcomes. Implement a process to gather stakeholder input related to Systemic Factor Item functioning in each North Dakota region once per year.

Key Activities	Timeline
1.1a. Terms and conditions of the contract between North Dakota Department of Human Services and the UND Children and Family Services Training Center will be renegotiated or an RFP will be issued for a new vendor.	Implement Date: Q2 & Ongoing
1.1b. Apply Theory of Constraints to the OCR process to ensure standard work, quality, efficiency and timeliness.	Implement Date: Q6 & Ongoing

Strategy 1.2: North Dakota believes that a fully functioning statewide Continuous Quality Improvement process will provide it with strategies to more effectively address child welfare practice concerns and establish ongoing protocols for checks and balances within the system. North Dakota has chosen the Theory of Constraints (TOC) as the model for a statewide CQI process across all divisions within the North Dakota Department of Human Services.

Currently, North Dakota is engaged in a quality improvement project using TOC within Child Protective Services. Key stakeholders came together to redesign Child Protective Services (CPS) to provide individuals and families the right service at the right time, at the right frequency and intensity.

Three goals were identified as part of the CPS redesign project:

1. Reduce the time it takes to complete a CPS assessment.
2. Conduct a face to face meeting with the identified child within 3 days.
3. Conduct complete casework 100% of the time, only passing on completed casework.

Current North Dakota statute requires that CPS assessments are completed within 62 days. Regretfully, this was only occurring 48% of the time during a 12-month assessment period. The CPS redesign Pilot Project targets are:

- 50% of CPS assessments completed at 25 days
- 75% of CPS assessments completed at 35 days
- 95% of CPS assessments completed at 62 days

Preliminary pilot project data shows progress including:

- 89% of the cases were closed with 62 days (baseline was 40.8%)
- 56% of the 499 closed cases were closed within 25 days (baseline was 7.35%)
- 89% of CPS workers met face-to-face with the identified child within three days of the report, sooner if imminent concerns were identified
- Pilot regions have, in some cases, unlocked hidden capacity, increasing access to services and transferring staff from administrative work to direct client services

This project is a prime example of a quality improvement process in action resulting in improved outcomes for children. A Transformation Manager has come on staff at DHS with the expressed role of leading the Theory of Constraints work as well as facilitating other large-scale projects within the

agency. Developing a statewide culture of Theory of Constraints as the chosen CQI process is a venture intended to produce measures that support lasting positive change.

STRATEGY 1.2: STATEWIDE CQI SYSTEM

Create a Theory of Constraints (TOC) Administrative Team to guide the quality improvement efforts and recommend and support practice improvements and quality services that promote the achievement of safety, permanency, and well-being outcomes for children and families beyond the CFSR and PIP.

Key Activities	Timeline
1.2a. The TOC Administrative Team will engage in ongoing consultation and collaboration at least quarterly to review and evaluate the progress of the PIP strategies and Children and Family Service Plan goals and recommend program adjustments to allow for successful completion of the requirements.	Implement Date: Q2 & Ongoing
1.2b. Subcommittees of the TOC Administrative Team will be created to focus on specific areas of practice. Subcommittees will review data, research issues, and provide recommendations to the full Administrative Team.	Implement Date: Q2 & Ongoing
1.2c. The TOC Administrative Team will use the feedback from the subcommittees to monitor and measure achievement of practice improvements. CFS administrators will use the TOC Administrative Team recommendations to report out on PIP measurements and progress towards CFSP goals.	Implement Date: Q2 & Ongoing
1.2d. The Transformation Manager will convene child welfare staff from each region to review OCR outcomes specific to their region. Working collaboratively with all players, (county, state, private partners) the regions will create timely and actionable practice improvement plans, that align with their TOC system plans, within 6 months following the region's OCR.	Implement Date: Q2 & Ongoing
1.2e. A TOC instructional manual will be developed with input from the TOC Administrative Team, subcommittees and other stakeholders to institutionalize a fully functioning ND system of quality assurance, using TOC.	Implement Date: Q4

Overarching Goal 2: Ensure safety for children and well-being for children and families by improving caseworker's skills and engaging the court to increase family engagement, thoroughly assessing and addressing identified risk and safety factors and providing services quickly and effectively. (Safety Outcome 2, Well-Being Outcome 1, Systemic Factor Items 20, 26, 27, 29, 30).

Strategy 2.1: Strong supervision is a cornerstone of good child welfare practice and strengthening supervisory skills was selected as a top priority by North Dakota stakeholders involved with the 2015-2019 Children and Family Service Plan development. North Dakota believes that by giving supervisors tools, strategies and policies to strengthen worker/supervisor engagement and guide the practice work will lead to improved practice. It has been noted through feedback from Stakeholders that there was a disconnect between child welfare certification training and the transfer of this learning to support fidelity to the Wraparound Practice Model.

North Dakota analyzed several data sources to determine the root cause of inconsistent case work practice. Data from the University of North Dakota's Children and Family Services Training Center's (CFSTC) evaluations and the 2008 2nd Round Federal CFSR found that supervisor training was needed to fully implement and maintain the fidelity to the Wraparound Practice Model. This was carried forward through the 2016 Federal CFSR, when North Dakota was found to be not in substantial conformity with both Item 26 - Staff and Provider Training and Item 27 - Ongoing Staff and Provider Training. Stakeholder meetings with agency supervisors during the 2016 CFSR revealed that the training offered to supervisors did not prepare them to carry out their duties. Locations of available training were not conducive to statewide participation. Additionally, supervisor training opportunities were viewed as uneven as many supervisors noted they could not attend due to the lack of available training dollars.

North Dakota administered a statewide survey as part of the 2016 CFSR Statewide Assessment. Under Item 29 – Service Array, respondents were asked questions related to services that (1) assess the strengths and needs of children and families and determine other service needs, (2) address the needs of families in addition to individual children in order to create a safe home environment; (3) enable children to remain safely with their parents when reasonable, and (4) help children in foster and adoptive placements achieve permanency. Respondents who answered either 'sometimes' or 'rarely' to these questions were asked a follow-up question that read, "What gets in the way of families receiving these services?" One of the most frequently selected reasons was the lack of family engagement.

To address these concerns, North Dakota has contracted with the CFSTC to provide supervisor training focusing on the Wraparound Practice Model (Strategy 2.1). This training includes quality safety and risk assessments; quality caseworker engagement with children/parents/families; and supervisory skills that facilitate coaching and making practice adjustments to ensure safety while meeting the service needs of children and families. These training efforts will be followed up with assessments of skills application in the field as part of the case review process.

In addition, North Dakota is implementing the Theory of Constraints, our chosen CQI process, that will focus on monitoring the implementation of the Wraparound Practice Model. The Wraparound Practice Model includes principles such as quality risk and safety assessments, quality caseworker contacts with children, parents/family; all identified as areas needing improvement during the 2019 CFSR. The state believes that, as they develop a culture of Theory of Constraints, the process will inform supervisory practice and caseworker application of the Wraparound Practice Model.

One of the cornerstones of Theory of Constraints is building standard work with the goal of increasing efficiency, consistency and quality. As part of the CPS redesign pilot project, the team developed the

standard work for all pilot counties in the following areas: intake/initial report, safety plans, CPS assessment, supervisor staffing, determination, and notification. Standard work is monitored through CPS supervision. As Theory of Constraints is implemented across child welfare programs, standard work will be developed and monitored.

Additionally, through Theory of Constraints the CPS redesign pilot was able to identify a best practice supervisor to staff ratio of 1:6. The pilot team was able to achieve this by eliminating county boundaries so there is no wrong door for a family in need, sharing resources, and identifying the hidden capacity of staff. As the CPS redesign moves forward into three new North Dakota regions the redesign team has still maintained the 1:6 supervisor ratio.

STRATEGY 2.1: SUPERVISOR TRAINING PROGRAM Implementing intensive safety-informed supervision to ensure comprehensive risk and safety assessments and high-quality case worker visits with children and families.	
Key Activities	Timeline
2.1a. Implement CPS Supervision Assessment Model.	Implement Date: Q1 & Ongoing
2.1b. Develop safety focused supervision model for ongoing case management.	Implement Date: Q1 & Ongoing
2.1c. Develop training for safety focused supervision model for ongoing case management.	Implement Date: Q1 & Ongoing
2.1d. Train supervisors on safety focused supervision model for ongoing case management.	Implement Date: Q1 & Ongoing
2.1e. Implement safety focused supervision model for ongoing case management.	Implement Date: Q4
2.1f. Develop assessment tool to measure the fidelity to the safety focused supervision model.	Implement Date: Q4
2.1g. Assess for fidelity to the safety focused supervision model to ensure that the model is being implemented as intended.	Implement Date: Q4
2.1h. Develop a train the trainer model for identifying high level supervisors who can mentor and train other supervisors.	Implement Date: Q6
2.1i. Train all supervisors on TOC and engage supervisors with their specific program's TOC process.	Implement Date: Q6

Strategy 2.2: Longstanding state law requires a referral to the juvenile court for all cases where child abuse and neglect are confirmed. It was identified that this was an open-ended practice and that by closing the communication loop between the county and the court, caseworkers would have a tool to encourage family participation in protective services and the court would have necessary information to support or ensure follow through with services. Caseworkers are accountable to the courts for providing services and reporting progress quarterly.

Through ongoing conversations with the CPS Task Force (comprised of county, regional and state staff as well as private providers) and discussion with the CPS subgroup of the CQI Academy, a strategy was identified to address these issues. A pilot was implemented in the South Central and Southwest Judicial Districts which includes 17 counties in southwest and south-central North Dakota. In the pilot areas, each Services Required finding is sent to juvenile court. The court then makes a record of the finding and sends a letter to both the caseworker and the parents. This letter notifies the parties of the receipt of the findings, requests updates on progress, encourages participation in services offered and requests a notification of final outcome. The process gives the caseworkers a tool to encourage family participation in services and the court the necessary information to support or ensure follow through with services. Caseworkers are accountable to the courts for providing services and reporting progress quarterly.

STRATEGY 2.2: JOINT COLLABORATION BETWEEN COUNTIES AND JUVENILE COURT

Increase family engagement through collaboration between the counties and juvenile which makes services required findings part of the court record, holds caseworkers accountable to the court and encourages family participation.

Key Activities	Timeline
2.2a. Continue implementation of the current pilot project in the Southwest and South Central Judicial Districts (17 counties).	Implement Date: Q1 & Ongoing
2.2b. Track data on family engagement in case plans by: <ul style="list-style-type: none"> • Comparing previous number of cases that move to TPR with cases that move to TPR during the pilot period; and • Surveying parents and child welfare staff to determine if the new process encourages parent engagement in services and increases accountability. 	Implement Date: Q3
2.2c. The TOC Administrative Team and the CIP Taskforce will review quarterly data and make practice recommendations based on the data.	Implement Date: Q3
2.2d. After a year of evaluation of the pilot, the protocol will be finalized and implemented statewide.	Implement Date: Q4
2.2e. Training will be conducted to ensure the protocol is implemented with fidelity.	Implement Date: Q4
2.2.f. Data will be monitored by the TOC Administrative Team and CIP to ensure the protocol has been effectively implemented and is producing the intended outcomes.	Implement Date: Q4

Strategy 2.3: It was identified in the 2016 CFSR that the timeliness of transferring cases from the CPS assessment to the in-home services stage of service delivery was also a practice concern. It was noted that there was a lack of ongoing risk and safety assessments during the case transition period, and related delays in providing needed services to children and families. Feedback from the juvenile court confirmed that there was a lack of understanding in the field related to the purpose of notifying the court regarding confirmed cases of child abuse and neglect. Through ongoing conversations with the CPS Task Force (comprised of county, regional and state staff as well as private providers) and discussion with the CPS subgroup of the CQI Academy, an opportunity was identified whereby

existing mechanisms could be developed into a practice communications loop to facilitate greater engagement in protective services and quarterly follow up with the court. The effectiveness will be measured through outcomes on Well-Being 1 as well as Stakeholder feedback from the courts to inform practice adaptations. Additionally, new fields are being added into the statewide case record system (FRAME) to provide data that shows whether the time between completion of the CPS assessment and initiation of protective services is shortening.

The 2016 CFSR revealed in 58% of the applicable in-home services cases reviewed the agency did not make concerted efforts to provide services to the family to prevent children’s entry into foster care. North Dakota took a closer look at this finding and discovered considerable time delays between the child protection services case decision of ‘Services Required’ and the initiation of in-home services or referrals to other services. A survey was developed and distributed to child welfare field staff, county supervisors and county directors to examine the causes for the delay in the provision of services. The survey received 138 responses; 70% of respondents indicated the referral for in-home services originates from the CPS worker; 69% indicated the average time frame for in home case assignment is seven days and the primary barrier to providing in home case management was the family’s refusal to engage (41%). In addition, the survey results indicated the field was lacking guidance regarding roles and responsibilities of those making and accepting the referrals in addition to timelines for referral, case assignment and case initiation. Furthermore, the child welfare data system lacked the ability to track the referrals and case initiation of in-home services.

STRATEGY 2.3: CPS TO IN-HOME SERVICES TIMELINESS

Develop systems, using Theory of Constraints, that will decrease the amount of time from CPS assessment to the start of in-home services.

Key Activities	Timeline
2.3a. Collaborate with county and regional stakeholders to analyze the CPS assessment process using Theory of Constraint and identify bottlenecks that are preventing timely closure of CPS cases and implementation of in-home services.	Implement Date: Q1
2.3b. Implement, in collaboration with county and regional stakeholders, new protocols for CPS assessments statewide to decrease the amount of time to close a case and transfer to in-home services.	Implement Date: Q2
2.3c. Apply TOC to in-home services to assure a timely handoff from CPS to in-home service delivery.	Implement Date: Q4

Strategy 2.4: North Dakota 2016 CFSR findings indicate – for Item 12B – 33% of foster care cases and 68% of in-home services cases were ANI for assessing the needs and ensuring services to parents. Additionally, in-home services case findings indicate that all children in the home were not assessed and services were not provided to address their needs throughout the life of the case.

North Dakota recognizes the lack of consistency in completing quality assessments of parents and all children to address the key issues of safety, permanency, and wellbeing. The key activities outlined in Strategy 2.4 will highlight areas where the state can embrace consistency and tracking of quality assessments. While a tool has been provided to the workforce, there is opportunity to strengthen the tool to support ongoing quality and consistent practice to best meet the needs of children and families.

STRATEGY 2.4: NEEDS ASSESSMENT GUIDANCE AND POLICY

Develop guidance to incorporate needs assessment for children, parents, and foster parents throughout the life of the case.

Key Activities	Timeline
2.4a. Identify and implement an evidenced based assessment tool (such as CANS) into child welfare practice to replace the currently utilized 21-factor Family Services Assessment Instrument.	Implement Date: Q2
2.4b. Pilot the evidenced based needs assessment in three child welfare areas of the state; PATH as a private provider working with children in foster care, a larger County and the Division of Juvenile Services.	Implement Date: Q2
2.4c. Provide training and technical assistance to Regional Representatives, county supervisors, and county child welfare case managers through regularly (bi-monthly) scheduled state-wide conference calls.	Implement Date: Q3
2.4d. Modify the current monthly face-to-face contacts checklist to include a needs assessment for children, parents and foster parents to be included in policy.	Implement Date: Q3
2.4e. Modify the current quarterly child and family team meeting checklist to include a needs assessment including feedback from all parties (children, families, foster parent, and case manager).	Implement Date: Q3 & Ongoing
2.4f. Supervisor to review face-to-face checklist and family team meeting checklists and provide feedback to case workers to further practice improvement.	Implement Date: Q4 & Ongoing

Overarching Goal 3: *Realign the service delivery system to engage and empower families earlier in the case to improve outcomes and inform practice (Safety Outcome 2, Permanency Outcome 1, and Permanency Outcome 2).*

Strategy 3.1: North Dakota acknowledges the rates of children entering foster care has increased over the last several years. Between FFY 2012 and FFY 2018, there was a 41% increase in the number of children entering the foster care system. It is believed that early engagement with families, at the onset of the case (i.e. when a child maltreatment report is received, or a child is at imminent risk of being removed), can positively impact this trend. Such a strategy to support early engagement should also include extended family as a potential placement resource so that the trauma to the child is lessened. Collaboration with community resources, along with the family, can support a successful plan for the child.

The 2016 CFSR findings demonstrate practice challenges related to safety and risk assessment and management as well as engaging parents in needs assessment and service provision. Additionally, North Dakota has, per capita, one of the highest rates of children placed in congregate care. AFCARS data shows that North Dakota ranks 11th – and 60% over the national average – for rates in congregate care. It is important to note that juvenile justice youth are included in our child welfare population (dual status youth), which increases congregate care placement rates. Therefore, dual status youth must to be considered in front-end engagement strategies.

North Dakota has a history of implementing family engagement and informed child welfare decision making strategies, including Family Group Conferences and Family Team Decision Making Meetings. North Dakota has contracted with the Village Family Services Center to provide facilitation services for various family meetings that have occurred in numerous counties throughout the state since 2005.

North Dakota launched the Family Centered Engagement (FCE) Initiative in the fall of 2018 (Strategy 3.1). The FCE Initiative is a front-end engagement strategy designed to create participatory and inclusive processes that bring together those with relationships to the children and those who are service providers to improve child welfare decision making and outcomes for children who are removed, children at risk of removal and children/youth involved in both the child welfare and juvenile justice systems (i.e. dual status youth).

The goals of the FCE Initiative are to:

- Reduce the number of children entering foster care;
- Increase the number of children remaining safely in their own homes; and
- For those children who are removed, increase the number placed with relatives/kin

North Dakota intends to implement the FCE Initiative statewide but will phase in implementation. FCE implementation began with a select number of counties. The FCE committee identified the initial counties by analyzing multiple county specific data reports including: the number of services required determinations, the number of youth entering foster care (per capita), the number of CPS reports received and by category, dual status youth, and provider capacity. A readiness assessment was completed with the initial counties to determine those willing to be early adopters and partners in this initiative. The Phase 1 counties are Burleigh, Dakota Central (4 rural counties in central ND), Grand Forks, and Stutsman. The Phase 2 counties are Barnes, Walsh, Ward, and Lakes Social Services District (2 counties in northeast ND). This phased-in approach will increase the likelihood that North Dakota can demonstrate a larger impact and have enough experiences and data to modify the FCE Initiative before expanding to additional counties. The intent is to have the service available statewide, resources permitting.

There are three populations of children eligible for an FCE meeting:

1. Children at risk of removal
2. Children who experienced an emergency removal
3. Dual status youth who are not in care, are at risk of removal, and are currently involved in both the child welfare and juvenile justice systems.

Cases that are criminal in nature (ex. sexual abuse or serious physical abuse) by a caregiver are not eligible to receive an FCE meeting currently.

North Dakota will closely monitor and evaluate FCE rollout through regularly scheduled conference calls with stakeholders, identifying barriers and modifying the model as needed, and collecting data on each FCE meeting.

North Dakota has partnered with other child serving systems to address the high number of dual status youth through the Dual Status Youth Initiative (DSYI). Dual status youth (DSY) are children and adolescents who come into contact with both the child welfare and juvenile justice (delinquency) systems. Research suggests that DSY have experienced complex trauma – typically repeated or prolonged trauma within family or caregiver relationships – at significantly higher rates than other youth. Perhaps not surprisingly then, child maltreatment or neglect has been shown to increase

likelihood of arrest as a juvenile (a 59% increase) and arrest as an adult (a 28% increase). Maltreated children also tend to be younger at first arrest, commit more offenses, and experience more frequent arrests – all factors associated with “persistence” of offending into adulthood. In the short term, DSY are removed from their homes more frequently than other youth, are detained more frequently and stay in detention for longer periods of time. Long-term outcomes related to education, employment, self-sufficiency and reliance on public systems are similarly troubling. To compound matters, child welfare and delinquency systems are typically not designed to coordinate, share relevant information, or collaborate to ensure delivery of needed services or supports to DSY or their families.

Several important findings have emerged from North Dakota’s analysis of data regarding the state’s DSY including:

- North Dakota’s DSY are young; in the sample accessed, 76% were 14 years old or younger upon first arrest.
- A significant number of these youth were in out of home placement or facilities at the time of arrest (17%). A significant number of the charges (38%) arose in school settings.
- Behavioral health concerns are prevalent among these youth and their families - 62% of DSY cases had substance abuse as a parental need; 30% of these parents had kids with an identified drug and alcohol need as well.
- 69% of DSY had parents who were previously arrested or had recent incarceration.
- Native American youth were significantly overrepresented in this population, confirming a need for collaboration to address these disparities.

Using a guiding framework from the Robert Kennedy Foundation, North Dakota’s system leaders, staff, and community stakeholders worked through a four-phase process including: 1) Preparation and mobilization; 2) Systemic analysis (including data collection and analysis, resource and practice analysis, and policy/legal analysis); 3) Development of action strategies; and 4) Planning for implementation and evaluation. A trio of committees met regularly throughout the course of a year to gather data and develop a detailed cross-system map of how each system independently interacts with DSY and how these systems do – and do not – coordinate those interactions. An Executive Committee comprised of key system leaders, stakeholders, and constituents managed the work of the committees, identified desired outcomes, and developed action strategies to address gaps in dual status policy or practice.

In examining the systems serving these youth and the current policies and practices affecting DSY, the North Dakota team made several key findings, including:

- In general (and like many states), North Dakota’s data systems don’t “talk” to one another, creating challenges in identifying DSY and obstacles to sharing relevant information;
- Some community member and practitioners believe that youth must be “charged” in order to access services and/or that juvenile justice system involvement opens up access to more services or creates more leverage with families and DSY to access these services;
- At the same time, there are widespread concerns about a lack of resources (especially behavioral health services) in many areas of the state, often the most rural;
- Out of home placement may be overused due to an immediate need to resolve a crisis and a lack of alternate resources. Placements may be made on the availability of “an open bed” and not well-suited to youth/family needs. In particular, it can be very difficult for North Dakota practitioners to find treatment placements for high need youth, and foster home placements are generally lacking; and

- At times one system may refrain from becoming involved with a youth or family because practitioners see that the other system is already involved. There can be a tendency to battle over who “has to” serve the youth.

Based upon these findings, North Dakota’s DSYI generated a set of policy and practice recommendations. One such practice recommendation is a front-end engagement strategy named the Multi-Disciplinary Team (MDT), which closely mirrors the FCE meeting process, for statewide implementation so that counties who do not currently have FCE available can convene MDT meetings for dual status youth. An evaluation component has been included with this strategy so that the effectiveness in improving outcomes for DSY can be monitored, as well as ensuring fidelity to the model. Additionally, data will track the use of out of home placements and addressing factors which may give rise to any overuse/ineffective use of those interventions.

STRATEGY 3.1: FAMILY CENTERED ENGAGEMENT IMPLEMENTATION Implement Family Centered Engagement (FCE) in collaboration with Dual Status Youth Initiative (DSYI) statewide to engage families in the development of case plans, facilitate the sharing of information and resources, and reduce foster care placement rates.	
Key Activities	Timeline
3.1a. Fully implement Family Centered Engagement to include: <ul style="list-style-type: none"> • Implement the model of practice in the identified counties • Ongoing monitoring and evaluation to measure fidelity, outcomes and trends • Continue staged rollout to additional counties 	Implement Date: Q1
3.1b. Engage in the work of the DSYI by implementing standardized, cross-system practices to include: <ul style="list-style-type: none"> • Identification of dual status youth • Information sharing to inform decision-making processes (i.e. services required disposition) • Implementation of multi-disciplinary team processes (MDT) to assess, plan, and manage multi-system cases • Evaluation of DSYI protocol to monitor effectiveness in improving outcomes for dual status youth 	Implement Date: Q1

Strategy 3.2: In both in-home services and foster care cases, the 2016 CFSR results showed significant challenges in comprehensively assessing the needs of parents on an ongoing basis and providing appropriate services to parents. As part of the Well-Being subgroup of the CQI Academy, data was analyzed specifically related to caseworker visits with parents (Item 15) to determine the root cause for case practice challenges. Additional data analysis was completed by CFS related to Sub-item 12B and Item 13. Through the analysis it was learned most Areas Needing Improvement (ANIs) for these Items were the result of the lack of engagement with absent (nonresident) parents, regardless of gender. See data results in the table below.

ABSENT PARENT ENGAGEMENT			
Item	Parent type	Applicable Cases	Percentage ANI
12B Caseworker visits with parents	Absent Mother	10	50%
	Absent Father	21	62%
13 Child & family involvement in case planning	Absent Mother	10	40%
	Absent Father	20	65%
15 Caseworker visits with parents	Absent Mother	10	50%
	Absent Father	21	62%

ND R3 CFSR data

The subgroup identified the target population for intervention as caseworkers and noted the following contributed to their challenges: High caseloads, increased responsibilities, increased complexity of cases, geographic challenges (i.e. distance, lack of transportation etc.), inconsistent practice and supervision, inexperienced workers, limited engagement skills, and philosophy of the workers as to the worth/value of the absent parent.

Also, the CPS subgroup of the CQI Academy developed and administered a statewide survey that identified current practice, average timeframes, and informed on reasonable expectations for case transfer from CPS to in-home services. Results of the survey indicate agency personnel have no clear policy to guide the transfer of cases from CPS to in-home services. Most respondents (94%) stated they refer the case to in-home services following a Services Required finding and 51% of those respondents complete the referral within seven days.

In Strategy 3.2, North Dakota included key activities specific to engagement with absent parents, rather than specifically with fathers. The engagement of an absent parent is a Wraparound Practice Model principle. Also concerning is that there is currently no in-home services policy to require engaging the absent parent in services. It is anticipated that policy development, including guidance on case transfer from CPS to in-home services, and training to the policy, will positively impact practice related to absent parent engagement. This will be measured through the OCR Well-Being Outcome 1 data (Sub-item 12B and Items 13 & 15) and through the in-home services caseworker-parent visitation report in FRAME.

STRATEGY 3.2: ABSENT (NONRESIDENT) PARENT ENGAGEMENT IN SERVICES

Implement workflow improvements, policy supports, and technical assistance to the workforce that promote engagement with absent (nonresident) parents.

Key Activities	Timeline
3.2a. Collaborate with the in-home services case managers and supervisors to establish in-home services policy timeframes and requirements for initiating contact with the absent parents during the CPS assessment and/or following a Services Required disposition during the pilot program.	Implement Date: Q3
3.2b. Develop and incorporate into policy and training a flow chart of critical activities and outcomes following a Services Required disposition in order to provide in-home services case managers and supervisors a visual depiction of the process and timeframes.	Implement Date: Q3

3.2c. For both in-home services and foster care case management, develop and implement training for regional representatives, county supervisors, and county case managers related to the knowledge and skills needed to effectively engage families in risk, safety and well-being assessments and reassessments.	Implement Date: Q3
3.2d. Provide ongoing technical assistance to regional representatives, county supervisors, and county case managers through core principle conference calls specific to foster care case management, in-home services, and IV-E eligibility.	Implement Date: Q4
3.2e. Monitor and evaluate the practice of family engagement through TOC Administrative Team to determine if the intervention is resulting in improved outcomes.	Implement Date: Q6
3.2f Apply TOC to in-home services and foster care case management to identify constraints to engaging absent parents. Develop the appropriate workflow and system to overcome the primary constraint.	Implement Date: Q6

Overarching Goal 4: *North Dakota will experience increased achievement of timely permanency (Permanency Outcome 1 and Systemic Factor Item 23).*

The 2016 CFSR findings indicate barriers and challenges in North Dakota of placement disruptions, minimal use of guardianships and delays in filing a termination of parental rights (TPR), and resulting delays to permanency achievement. The key activities in Goal 4 build on the proven success North Dakota has had through an existing collaborative partnership with the North Dakota Court Improvement Project (CIP). Historically, North Dakota has struggled to fully engage in communication with state’s attorneys (SA’s), judges, and other court partners. In the past two years, North Dakota has gained momentum in building relationships with the legal community. These relationships are further strengthened by the re-establishment of North Dakota CIP. North Dakota CIP was discontinued in 2017, which resulted in the state creating other avenues to address ongoing court-related issues through quarterly meetings with Juvenile Court Directors. In December 2018, the North Dakota Supreme Court was awarded a new CIP federal grant. Working in partnership with the North Dakota Supreme Court will provide insight into the ongoing monitoring and enforcement of child welfare court proceedings, ensuring appropriate court action occurs, while policy and practice changes are implemented to improve outcomes for children and families.

Strategy 4.1: The Permanency subgroup of the CQI Academy reviewed permanency achievement and termination of parental rights (TPR) timeliness. The subgroup completed a study capturing data specific to TPR timeliness in five regions of the state. These regions were selected as nearly 70% of the TPR cases reviewed during Round 3 CFSR were from the five jurisdictions. CFSR findings stated TPR finalization was a challenge. In the subgroup study, 71 (66%) of the 108 TPR cases in FFY 2016 were reviewed. Study findings summary:

- Quantitative data reviewed showed the number of days ranged greatly from when an affidavit was submitted to the SA’s office and when the SA filed the petition to the court. Filing delays were noted when the SA was tasked with varied court cases: 1 – 33 days when a SA was assigned to child welfare cases exclusively versus 18 – 656 days when the SA was engaged in a variety of court proceedings and not assigned solely to child welfare.

- Qualitative data collected via interview responses from county case managers and county SA’s indicated:
 - Training of the North Dakota child welfare court process was lacking and SA’s tasks were varied with only a few counties hiring a SA dedicated solely to child welfare cases.
 - Staff turnover (case management, SA’s, and judges) presented obstacles for new employees learning the expectations of their jurisdiction, building relationships, and progressing with permanency achievement.
 - Gaps in interpreting the 450/660 day federal regulation and the need for further understanding in preparing affidavits.
 - Grand Forks Finding: Delays in filing TPR petitions by the SA were due to the amount of information and documentation the SA’s office was requesting. While reviewing the Grand Forks cases it became evident an increased volume of documentation from the child welfare worker was required by the SA before filing a petition. It was noted that the “outline” requested by the SA’s was lengthy and time consuming, often with an expectation to provide information that was already in the case file.
 - Stark County Finding: Delays in filing TPR petitions by the SA was due to the SA’s office only taking one termination of parental rights case forward at a time; delaying the initiation of a petition until the current TPR was finalized.

North Dakota will continue to utilize the stakeholder meeting currently operating in Grand Forks and will expand by implementing this collaborative structure in Stark County. ND CIP and Permanency subgroup of the TOC Administrative Team will co-facilitate discussions, engage local stakeholders (county and regional child welfare staff, SA’s, Juvenile Court, judicial court officers), and achieve the goals to analyze historical data, identify, evaluate and address current challenges and determine future implementation needs for timely permanency achievement. Facilitation of ongoing stakeholder meetings will serve as a process to ensure challenges to TPR case filings are adequately evaluated to greatly decrease the time to permanency in Grand Forks and Stark Counties, with replication of the best practices to be implemented statewide.

STRATEGY 4.1: TPR AND TIMELY PERMANENCY

Implement strategies to improve the termination of parental rights (TPR) process in identified areas of the state, which will increase achievement of timely permanency.

Key Activities	Timeline
<p>4.1a. Implement stakeholder meetings specific to Grand Forks and Stark Counties, to review and revise practice guidelines to ensure timely filing of termination of parental rights (TPR) cases.</p> <ul style="list-style-type: none"> • Review specific TPR data, with a group of stakeholders, including the CFS Permanency Administrator, CIP Coordinator, Juvenile Court Coordinator, Juvenile Court Director, County Director, State’s Attorney (SA’s), Judicial Officer and State Court Administrator from each of the areas to: <ul style="list-style-type: none"> ○ Review time between affidavit filing and petition filing for TPR ○ Review time between TPR filing and final TPR order ○ Identify barriers and how to address those barriers ○ Evaluate the barriers to TPR and how to make necessary adjustments. • Projected results of stakeholder meetings will include: <ul style="list-style-type: none"> ○ Requests for change in requirements regarding information gathered by county social workers for submission to SA’s. 	<p>Implement Date: Q2</p>

<ul style="list-style-type: none"> ○ Request for SA’s to receive joint access to child welfare files; ○ Ongoing facilitated calls to SA’s office to assess caseload concerns; and ○ Request additional staff for SA’s office to assist with caseload backlog. <p>4.1b. The CIP Coordinator will monitor quarterly TPR timeliness specific to Grand Forks and Stark County to conduct an ongoing evaluation of county worker and SA’s process. Evaluation will be shared with the CIP Task Force for statewide review and implementation.</p>	<p>Implement Date: Q3</p>
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Strategy 4.2: North Dakota has limited ability to extract data from its management information system (FRAME), which makes it difficult to review and analyze trends and barriers on an ongoing basis. A data dashboard would offer systemic support by using a definable tracking system allowing North Dakota the ability to monitor permanency data and compare specific quantitative data measures to qualitative information received by child welfare professionals. In addition to analyzing permanency achievement, North Dakota will review placement stability of children in care. Strategy 4.2 will utilize statewide data through a collaborative structure, where child welfare and court personnel meet regularly to review data trends defining systemic strengths and challenges. North Dakota will integrate the efforts of the organizational structure (TOC Administrative Team and CIP Task Force) to review data trends to inform practice and create policy change.

STRATEGY 4.2: INSTITUTE A COLLABOARTIVE CONSULTATION STRUCTURE Utilize collaborative organizational structures (TOC Administrative Team and CIP Task Force) to inform practice specific to the achievement of timely permanency.	
Key Activities	Timeline
<p>4.2a. Utilize the North Dakota TOC Administrative Team to improve permanency outcomes by creating a statewide permanency data dashboard to collect data specific to:</p> <ul style="list-style-type: none"> • Entries and Exits; • Placement stability; • Permanency goal achievement; and • TPR timeliness data. 	<p>Implement Date: Q2</p>
<p>4.2b. Collaborate with ND Court Improvement Project (CIP) to create a statewide Juvenile Court data dashboard to collect data specific to:</p> <ul style="list-style-type: none"> • Time to first permanency hearing; • Time to subsequent permanency hearings; and • TPR timeliness data. 	<p>Implement Date: Q2</p>
<p>4.2c. Engage with ND CIP Task Force to review data from both dashboards and inform stakeholders of noted permanency trends:</p> <ul style="list-style-type: none"> • Participate in quarterly meetings inclusive of regional administrators (Judges, SA’s, Juvenile Court Directors, County workforce, Department of Human Services, Division of Juvenile Services, Tribes, etc.) • Gather feedback from stakeholders regarding identified permanency data strengths and challenges; 	<p>Implement Date: Q2</p>

<ul style="list-style-type: none"> • Implement practice and policy changes; and • Monitor and evaluate the intervention efforts to determine the impact of permanency achievement. <p>4.2d. Provide training to North Dakota SA’s, Judicial Officers, Juvenile Court, Indigent Defense, and child welfare case managers and supervisors to better understand the importance of timely permanency by offering training specific to:</p> <ul style="list-style-type: none"> • The process of ND Child welfare court proceedings; • The impact of delayed permanency; • Best practice and strategies to improve outcomes; • Trauma informed child welfare practice; • Engaging in active and reasonable efforts; and • ND ICWA compliance. 	<p>Implement Date: Q5</p>
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Strategy 4.3: Permanency timeliness has been a challenge in North Dakota. An alarming issue identified by North Dakota is the number of children in care for a short period of time. Permanency achievement is timely in these cases; however, the out of home placement may not have been necessary. North Dakota will reduce the number of children placed out of home for less than 90 days by evaluating the short-stayer data. AFCARS data indicated that 20% of foster care cases (n=239) exit within 90 days and 38% (n=91) of the 20% were in foster care less than seven days. The entries and exits in this short duration are primarily occurring in Regions 2 (Minot) and 7 (Bismarck). It is projected North Dakota will see improvements in short-stayer data now that the Family Centered Engagement (FCE) efforts have been implemented in select areas of the state including two counties in Region 7 (Burleigh and Dakota Central). As FCE is evaluated and implemented in more areas of the state, greater success in reducing inappropriate out-of-home placements will occur. In addition, North Dakota can review out-of-home placements in collaboration with the Dual Status Youth Initiative (DSYI), working to improve multi-disciplinary policies and practices. The DSYI went live January 1, 2019 whereby a multidisciplinary team (MDT) meeting occurs with the child and family to develop a placement plan to prevent further movement into the system. This process is explained in the Strategy 3.1 narrative above. Qualitative research conducted by the DSYI with case managers indicated that out of home placements, primarily residential placements, are based on the availability of “an open bed” rather than specifically meeting the child’s needs. The collaborative DSYI effort will allow North Dakota to better analyze if out-of-home placements are overused due to an immediate need to resolve a crisis or a lack of alternate resources, while revisioning co-system engagement with families.

<p align="center">STRATEGY 4.3: REDUCE THE USE OF OUT OF HOME PLACEMENT Reduce the use of out of home placements to improve outcomes for children and families.</p>	
Key Activities	Timeline
<p>4.3a. Evaluate out of home placements specific to short stayers;</p> <ul style="list-style-type: none"> • Collect data for children placed in care less than 90 days; • Analyze trends; • Evaluate initiation of Family Centered Engagement (FCE) into regions with an increased number of short stayer cases; and • Implement practice and policy changes to reduce the use of out of home placements by 10 %. 	<p>Implement Date: Q1</p>
<p>4.3b. Collaborate with the Dual Status Youth Initiative (DSYI) to:</p>	<p>Implement Date: Q1</p>

<ul style="list-style-type: none"> • Examine the use of out of home placement as it applies to DSYI; • Engage families in the Multi-Disciplinary Team structure to pool resources, while ensuring services are provided to meet the needs of children and families; • Identify gaps in resource availability; • Develop strategies to address factors contributing to the over use or inappropriate use of out of home placements; and • Increase successful completion of goals and tasks associated with permanency plan. <p>4.3d. Assess DSYI evaluation findings to determine if those practices can enhance statewide child welfare practice.</p>	<p>Implementation Date: Q5</p>
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Strategy 4.4: The CFSR findings indicated the goal of guardianship was not represented in any foster care cases reviewed. The North Dakota management information system (FRAME) supports the finding that guardianships are underutilized. FFY 2016 data on FRAME permanency goals indicates there were 2,400 children in North Dakota foster care. Of those children 60% (1,473) had a goal of reunification, while 3% (75) had a goal of guardianship. FFY 2017 data on FRAME permanency goals show a slight increase. Out of the 2,508 children in foster care 64% (1,595) had a goal of reunification and 4% (88) had a goal of guardianship, which maintained at 4% in FFY 2018. North Dakota completed a review of guardianships with regional representatives and child welfare case managers. This qualitative data indicates there are barriers to guardianship, including:

- Access to the program (i.e. eligibility based on age of child, length of time in care, amount of reimbursement, etc.);
- Reimbursement through state general funds, approved through the legislative process, have been capped; and
- North Dakota’s lack of participation in the federal Guardianship Assistance Program (GAP) reduces federal funding for additional resources to support the permanency option.

Given the underutilization of the guardianship goal and the noted challenges above, North Dakota participated on the Supreme Court Guardianship Task Force as a representative of child welfare cases. Through the effort, guardianship law was amended and presented as Senate Bill 2072 and Senate Bill 2073 during the 2019 legislative session. In addition, continued collaboration between North Dakota CIP and foster care case management will occur to ensure the permanency goal of guardianship is established when appropriate. Strategy 4.4 will increase opportunities to access the North Dakota subsidized guardianship program allowing more children to achieve timely permanency.

<p style="text-align: center;">STRATEGY 4.4: SUBSIDIZED GUARDIANSHIP PROGRAM EXPANSION</p> <p style="text-align: center;">Increase availability of guardianship subsidies to support permanency timeliness for foster children.</p>	
Key Activities	Timeline
<p>4.4a. Increase access to the subsidized guardianship program reimbursed through state general funds.</p> <ul style="list-style-type: none"> • Expand the current state cap from 60 to 90 to receive monthly subsidy payments. • Propose updates to the Tribal Title IV-E Agreement to include guardianship subsidy as an option for any eligible child in tribal custody, regardless of the child’s eligibility determination. 	<p>Implement Date: Q1</p>

<p>4.4b. Submit an IV-E Plan Amendment for the Federal Guardianship Assistance Program (GAP) to expand access to fiscal options to increase guardianship subsidies.</p>	<p>Implement Date: Q8</p>
<p>4.4c. Collaborate with available resources to support relatives with pursuing and sustaining subsidized guardianships:</p> <ul style="list-style-type: none"> • Post-Adopt/Guardianship Services • Kinship Navigator Program 	<p>Implementation Date: Q1</p>
<p>4.4d. Engage in communication and education efforts with the courts and child welfare staff to ensure subsidized guardianship is known and utilized as a viable permanency option.</p>	<p>Implementation Date: Q3</p>

Overarching Goal 5: Strengthen and reframe the statewide foster and adoptive parent diligent recruitment plan to support the recruitment of families who meet the needs of the children they serve and who reflect the ethnic and racial diversity of children served by the foster care program (Permanency Outcome 1, Systemic Factor Items 35 & 36).

The recruitment and retention of licensed family foster homes in North Dakota has increased over time. As of January 2019, 1,015 family foster homes were licensed; an increase of 169 providers since July 2017 (start of our state biennium). However, recruitment and retention of families to provide foster care for children is a constant challenge as North Dakota faces the need to ensure placement resources are available to meet the needs of the children, that services for the child and family are located near their home of reunification, and the necessary immediate supports are available to providers when emergent needs for children in placement arise.

North Dakota will engage in the TOC process on the current recruitment and retention plan to successfully recruit and retain from our established pool of providers, identify new providers, and meet the placement needs of children with significant behavioral challenges by offering specialized training and support to foster homes. Accomplishing the key activities within Goal 5 will support providers in providing placement stability of children in care, achieving timely permanency (Service Array; Permanency 1), and increasing the number of Native American family foster and pre-adoptive homes so that the diversity and needs of children in placement are supported.

Strategy 5.1: The needs of the child drive the best placement option. North Dakota struggles to locate families willing to meet the intense behavioral challenges surfacing today. Even though North Dakota is impressed with the overall number of licensed foster homes, the utilization of the licensed homes remains at 65%. The rationale for the lower utilization includes child demographics compared to provider desire, child needs, child access to services in the community of the provider, and ongoing provider sabbaticals. This Strategy will allow for an enhanced statewide recruitment and retention plan to recruit specialized family foster and pre-adoptive homes that can meet specific child behavior needs. The number of children with a termination of parental rights whose case is free for adoption is at an all-time high (n=290) as of January 2019. The number of children awaiting an adoptive home must be addressed and the strategies below highlight how North Dakota will reduce the number of waiting children.

Child behaviors are known to be a primary reason why children are placed in higher level congregate care. Historically, family foster and adoptive homes have noted that such behaviors are unmanageable in a family setting and without increased supports and services being provided to the home, caring for these significant needs is not possible. January 2019 Interstate Compact data indicated roughly 20

North Dakota youth are placed out of state in residential facilities due to aggressive, sexually acting out, and/or low functioning aggressive behaviors. This is a recent decrease of nearly 30 out of state placements since March 2018. North Dakota has been working with in-state licensed Residential Child Care Facility (RCCF) providers to decrease residential beds, which has resulted in a decrease from 288 beds in 2012 to 162 in January 2019. The decrease of 126 licensed RCCF beds assists in preparation for the conversion of RCCF providers into Qualified Residential Treatment providers (QRTP) effective October 1, 2019 due to Family First Prevention Services Act (FFPSA) legislation. The residential beds will decrease further as not all North Dakota RCCF's are pursuing QRTP, which in turn requires further recruitment of specialized family foster homes. North Dakota is confident engaging licensed family providers to meet the higher needs of children in placement is achievable when engaging in the key activities below.

STRATEGY 5.1: RECRUITMENT AND RETENTION

Enhance statewide recruitment and retention efforts to increase the number of specific and specialized family foster and adoptive homes, as well as locate relative placement options so that the diversity and needs of children in placement are supported.

Key Activities	Timeline
<p>5.1a. Collaborate with NDDHS Social Service Redesign efforts to implement the theory of constraints to redesign the recruitment and retention state plan; which will:</p> <ul style="list-style-type: none"> • Centralize inquiries, • Efficiently and effectively engage prospective families, and • Review the licensing process, paperwork and forms 	Implement Date: Q4
<p>5.1b. Collaborate with current foster adopt providers and relative caregivers, as well as, recruit prospective providers to meet the ongoing needs of foster children by partnering with the UND CFSTC Fostering Communications (six-month newsletter), engaging with providers via an annual letter of correspondence from NDDHS, as well as maintaining ongoing communication with ND Youth Leadership Board, Foster Parent Associations and Recruitment/Retention Coalitions to:</p> <ul style="list-style-type: none"> • Provide education and awareness regarding specific populations in need of placement: <ul style="list-style-type: none"> ○ Sibling groups ○ Native American children ○ Children awaiting adoptive placement • Provide education to and training opportunities for providers specific to primary child behaviors: <ul style="list-style-type: none"> ○ Aggressive behaviors ○ Sexual acting out ○ Lower functioning children 	Implement Date: Q2
<p>5.1c. Increase awareness of available resources for relative caregivers and licensed providers to assist in meeting the needs of children with specific behaviors. Child welfare workers will:</p> <ul style="list-style-type: none"> • Review child needs at Child and Family Team meetings, acknowledging excess maintenance payment options, and 	Implement Date: Q2

5.2b. Reduce the average wait time by 10% for adoptive home studies to increase the number of adoptive homes for foster children who have a termination of parental rights. AASK will track timeliness data quarterly and report to CFS.	
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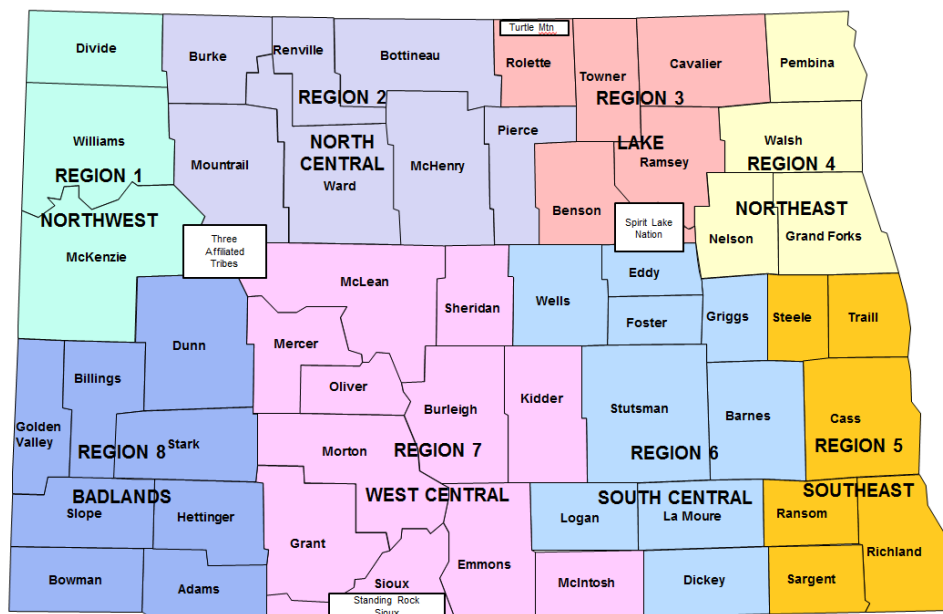
Strategy 5.3: North Dakota has a high percent (39%) of Native American children in foster care. Most family demographics providing foster care in North Dakota are Caucasian providers, which limits opportunity to place Native American children in culturally appropriate homes. FFY 2016, the North Dakota Courts ICWA Compliance audit indicated placement preference was followed in 28% of ICWA hearings, which was isolated to select areas (Burleigh, Cass and Grand Forks) of the state. Fifty-nine percent of the ICWA hearings did not follow ICWA placement preference for the foster child. The remaining 13% were not applicable placements due to the location of the child at the time of the hearing (residential, hospital, etc.). The North Dakota Court Improvement Program and the North Dakota ICWA State Partnership Grant efforts will continue to monitor the data associated with ICWA cases to ensure improved compliance of placement preference. North Dakota will remain active as a participant of the ICWA State Design Team and a co-facilitator of the foster care Affinity Group efforts to review and plan to accommodate Native American disproportionality and care needs. North Dakota licensing standards permit each Tribe to seek approval from the North Dakota Department of Human Services for a foster home via the Tribal Affidavit licensure process. It is known this collaborative effort has not led to the required number of homes to meet the needs of Native children in care. In addition, North Dakota engaged in national technical assistance to recruit and retain Native families to support foster care placements, the historical effort was extensive, yet did not gain the momentum expected by all parties. North Dakota recognizes the best recruitment strategy is provider-to-provider relationship; the Tribes are working diligently on the reservation to recruit families while the county and therapeutic foster care agencies are working to establish Native homes on and off the reservation. Another strategy to assist with this goal was to engage in a legislative request to update the North Dakota Century Code Chapter 50-11 specific to North Dakota tribes licensing homes on or near the reservation, this updated law drafted in partnership with North Dakota Indian Affairs, four Tribal Social Services offices, and Native American Training Institute is expected to enhance relationships and connections to Native families.

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Heather Traynor	ND Supreme Court	CIP Administrator
Pete Tunseth	CFS Training Center-UND	Training Director
Kelli Ulberg	Behavioral Health Division	Children's Mental Health Administrator
Traci Van Beek	Grand Forks County Social Services	Foster Care Supervisor
Diana Weber	CFS Central Office	Well-Being Administrator
Kyle Vorachek	CFS Central Office	ICPC Administrator
CQI ACADEMY – NORTH DAKOTA STAKEHOLDERS INVITED / DECLINED PARTICIPATION		
NAME	AGENCY	ROLE
Tami Chrest	Burke County Social Services	Director
Ronya Hoblit	Native American Training Institute	Interim Director
Kelly Jensen	Bottineau County Social Services	Director
Linda Kadlec	Lake Region Human Service Center	Regional Representative
Ina Olson	Turtle Mountain Child Welfare	Director
Melanie Sage	University of North Dakota	Assistant Professor/CW Researcher
Jeff Stenseth	Behavioral Health Field Services	Statewide Clinics Director
Kayla Weston	Chaffee Youth Board	Foster Care Alumni
Monique Wisness	McKenzie County Social Services	Child Welfare Supervisor

CHILDREN & FAMILY SERVICES DIVISION
 ND R3 CFSR PIP Measurement Plan Summary Document
 November 7, 2017

INTRODUCTION

North Dakota is a state supervised, county administered child welfare system divided into eight regions with 53 counties (see regional map below). North Dakota has four federally recognized tribes with Tribal Title IV-E agreements with the state. ND DHS has a Memorandum of Understanding with the Division of Juvenile Services (DJS) for Title IV-E foster care services. ND DHS contracts with a private agency (Adults Adopting Special Kids, or AASK) to provide case management services to children in adoptive placement not yet finalized. In-home services are part of the service array within the county social services agencies.



In the past, the Children and Family Services Division (CFS) devoted .75 FTE to the ND Onsite Case Review (OCR) process (formerly the ND CFSR process). Due to workload increases and adjustments in administrative duties, the time dedicated to the OCR was reduced to .3 FTE in 2017. The CFS Division director, along with members of ND DHS executive management, determined that in order to manage the ND OCR going forward, the work would need to be shared through a contract with a state university. A contract was finalized with the University of North Dakota's Children and Family Services Training Center (CFSTC) in March 2017 and will continue through North Dakota's 2017-2019 biennium (July 1, 2017-June 30, 2019) and beyond. Through this contract, the ND OCR is a collaborative venture between the CFSTC and CFS. CFS and CFSTC is currently developing and preparing the new ND OCR. The ND OCR will commence at the onset of calendar year 2018 (January 2018). The ND OCR will be a primary but not exclusive component of the state's Continuous Quality Improvement (CQI) efforts.

It is North Dakota's intention that the ND OCR will provide the data necessary during the R3 PIP Measurement Period. Furthermore, it is the state's intention to use a prospective method to establish the baseline and improvement goals if the state's PIP can be approved before January 2019. If that cannot happen, a retrospective method will be utilized. Attachments to this summary document will serve as further reference material as noted below:

- **ATTACHMENT A:** ND R3 CFSR Site Selection document
- **ATTACHMENT B:** ND Foster Care and In-Home Services Caseload FRAME Data for the 2017A AFCARS Time Period
- **ATTACHMENT C:** *Preliminary* Program Improvement Plan (PIP) Measurement Plan Goal Worksheet

KEY PROVISIONS OF ND OCR

- **Case Review Instrument:** ND will utilize the Federal R3 Onsite Review Instrument (OSRI) for all case reviews. ND intends to partner with JBS International for use of the Online Management System (OMS) to enter and document all case reviews conducted.
- **Period under Review (PUR):** ND will utilize a rolling quarter PUR timeframe. The beginning of the sampling period will mark the beginning of the PUR. All cases will be pulled from the state's child welfare information system (FRAME) based on an open case for the applicable case type (foster care or in-home services).
- **Federal CFSR Procedures Manual:** The Federal CFSR Procedures Manual will be referenced and incorporated into the ND OCR. For example, case ratings will be applied consistent with federal guidance and the FAQ page on the www.cfsrportal.acf.hhs.gov website will be utilized throughout the reviews. Key provisions of the state's procedure guide will directly follow those found in the federal manual, such as guidance regarding conflict of interest and addressing safety concerns identified in case under review, etc.
- **Case Elimination Criteria:** The state will follow the case elimination criteria as found in chapter 4 of the Federal Procedures Manual and Chapter 4 of the ND OCR Procedures Manual. It is the state's intent to be mindful that an overrepresentation of an individual worker, Tribal Title IV-E cases, or DJS cases does not impact the final foster care case sample. The state will use the actual percentage of Tribal Title IV-E and DJS cases in the statewide foster care population as the benchmark to determine overrepresentation in the final sample. The following case elimination criteria will be used:
 - An in-home services case open for fewer than 45 consecutive days during the period under review
 - An in-home services case in which any child in the family was in foster care for more than 24 hours during the period under review
 - A foster care case open fewer than 24 hours during the period under review, which starts at the beginning of the sampling period and ends when the case is reviewed
 - A foster care case in which the child was on a trial home visit (placement at home) during the entire period under review
 - A foster care case that was closed according to agency policy before the sample period begins, resulting in no state responsibility for the case
 - A case open for subsidized adoption or guardianship payment only and not otherwise inclusive of a child in foster care or open for in-home services during

the period under review

- A case in which the target child reached the age of majority as defined by state law (18 years old in most states) before the period under review
- A case in which the child is or was in the placement and care responsibility of another state, and the state being reviewed is providing supervision through an Interstate Compact for the Placement of Children agreement
- A case appearing multiple times in the sample, such as a case that involves siblings in foster care in separate cases or an in-home services case that was opened more than one time during a sampling period
- A foster care case in which the child's adoption or guardianship was finalized before the period under review and the child is no longer in foster care
- A case in which the child was placed for the entire period under review in a locked juvenile facility or other placement that does not meet the federal definition of foster care at 45 CFR § 1355.20
- A case in which selection would result in overrepresentation of a single child welfare agency staff because two cases from the caseload of that worker have already been selected
- A case in which selection would result in overrepresentation of DJS or Tribal Title IV-E foster care cases
 - The overall percentage of such cases within the foster care population will determine the reference point for overrepresentation. For example, Tribal Title IV-E custody children represented 10% of the overall state's foster care population from 4/1/16 – 9/30/16. The OCR would seek to review no more than 10% Tribal Title IV-E cases statewide. This equates to no more than 2 such cases in any one regional OCR.

Case eliminations will be tracked using a Case Elimination Worksheet. This worksheet will be made available upon Children's Bureau request.

- **Case Related Interviews:** Case related interviews will be conducted with key participants on each IH/FC case with children in the home (target child in FC cases), parents, foster parents, and caseworkers per the CFSR Procedures Manual. Face-to-face interviews will be preferred and telephone interviews will offer an approved alternative. At this time, case file reviews will be held in one location within the region.
- **Confidentiality:** All OCR Workforce members will sign a Confidentiality Statement for each onsite review to acknowledge their understanding of the confidentiality for child welfare records and information.
- **Conflict of Interest:** All individuals participating at an OCR onsite review will sign a Conflict of Interest Statement attesting that he/she has:
 - (1) Never been directly or indirectly involved in casework activities related to this case or any of the family participants in this case;

- (2) Not participated in decisions related to this case or any of the family participants in this case;
- (3) No personal interest in this case or any of the family participants in this case; and
- (4) No direct professional involvement with the case or family participants under review.

A Conflict of Interest form is required for each case reviewed. The OCR Manager will resolve any questions or concerns when a conflict of interest arises.

- **Safety Considerations:** When during the course of the case file review and/or key participant interviews, the reviewers become concerned regarding a child's safety, the assigned QA Lead will ensure that the review team knows to immediately report child safety concerns first to the Local Site Coordinator who works directly with the responsible local agency. The QA Lead will inform the OCR Manager of the concern.
- **Reviewer Pool:** ND plans to train all case reviewers and quality assurance (QA) staff as outlined in the federal procedure manual. 2 case reviewers will be utilized on an individual case under review and at this time the state anticipates a 1:2 or 1:3 ratio for QA leads. Reviewers will be recruited from the state's child welfare system and stakeholder populations.
- **QA:** Each case will have 2 levels of QA. Level one will be conducted by the QA leads paired with review teams. The OCR Manager from CFS Training Center-UND and the Well-Being Administrator have been identified as the two individuals to perform Second Level QA functions.
- **Secondary Oversight:** ND plans to work closely with the Children's Bureau regarding their involvement in secondary oversight during the PIP measurement period. The exact number of cases to be identified for secondary oversight is still under negotiation. No concerns have been identified regarding this aspect of the process. It is anticipated secondary oversight will include ongoing consultation with the CB to ensure protocols to inform on case elimination, accurate application of the OSRI, and conflict of interest guidelines are followed.
- **Case Review Rotation:** To accomplish a statewide review, it is ND's intention to schedule a total of 8 onsite reviews each year, one for each human service center region. ND plans to follow the established scheduled rotation of reviews until the end of the PIP. The case review rotation is provided on page 6. The CY 2018 OCR schedule is provided on page 7.
- **Case Sampling Plan:** ND will utilize a process similar to that of the R3 CFSR. The final site selection document attached can be referenced for more details. It is noteworthy to mention that while North Dakota does not have Differential or Alternative Response and case sampling will continue to only involve foster-care and in-home services cases, 2017 legislation has authorized the development of an alternative response CPS assessment for substance-exposed newborns. ND understands this new CPS approach to be consistent with existing CPS assessment cases and as such will not rise to the level of a

new in-home services category. Casework practice will be subject to review if applicable to an individual foster care or in-home services case. Policy is being developed and it is unknown if or when this new process will impact the OCR process. The state will remain vigilant in this regard.

ND proposes to use a rolling quarterly random sample of cases selected from each regional human service center region. Data indicate that the state's largest metro area, Cass County, represents the majority of foster care and an equal amount of eligible in-home services cases in their respective region (Region 5). See Table 1 for regional summary caseload data. ND will consider Region 5 as the 'largest metro region' and no further breakdown of the cases will be needed.

Table1. FC & IH Caseload Data by Region (October 1, 2016-March 31, 2017)

Overall regional breakdown & largest metro (SE includes Cass)	Region	FC (65% of the caseload) n=47				IH (35% of the caseload) n=25				Combined		# Cases for Review	Selected # Cases for Review
		Number	Percentage	# Cases for Review	Selected # Cases for Review	Number	Percentage	# Cases for Review	Selected # Cases for Review	Number	Percentage		
Region 1	157	8.37%	3.93	4	53	9.41%	2.35	2	210	8.61%	6.83	6	
Region 2	212	11.30%	5.31	5	144	25.58%	6.39	6	356	14.60%	10.69	11	
Region 3	281	14.98%	7.04	7	26	4.62%	1.15	2	307	12.59%	8.76	9	
Region 4	328	17.48%	8.22	8	53	9.41%	2.35	2	381	15.62%	11.47	10	
Region 5 (not Cass)	61				16				77				
Cass Only	324				26				350				
Region 5 (Largest Metro)	385	20.52%	9.65	10	42	7.46%	1.87	3	427	17.51%	11.88	13	
Region 6	116	6.18%	2.91	3	51	9.06%	2.26	2	167	6.85%	5.48	5	
Region 7	284	15.14%	7.12	7	122	21.67%	5.42	5	406	16.65%	11.44	12	
Region 8	113	6.02%	2.83	3	72	12.79%	3.20	3	185	7.59%	5.45	6	
	1876	100%	47	47	563	100%	25	25	2439	100%	72	72	
Foster Care Numbers By Custodian										Statewide FC Proportion		77%	
Agency Totals % of Pop										Statewide In Home Proportion		23%	
County/State	1565	83%											
DJS	84	4%											
Tribal	214	11%											
Error records	13	1%											

ND seeks to establish a slightly different ratio of foster care to in-home services cases in the case sample. Instead of the traditional 60/40 split, ND proposes a 65/35 split. The state has determined that available resources support the proposed case sample size of 72.

Foster Care cases and in-home services cases will be randomly selected from the state's foster care population with an open case in the state's information system (FRAME). ND has one category of in-home services cases, those in which a county social services agency provides case management services to families where children have not been placed in foster care. ND's research analyst will conduct the randomization of cases using the RANUNI function to assign a random number to each case. No further stratification will be utilized in the case sampling process.

- **PIP Measurement Periods and Reporting Frequency:** ND has structured the OCRs as quarterly periods of the calendar year. Therefore, ND will report case review data on a quarterly basis, within 45 days following the end of the quarter. For example, for the quarter ending March 31, 2019 the PIP measurement report will be submitted to the Children’s Bureau no later than May 15, 2019.

ND OCR Case Review Rotation

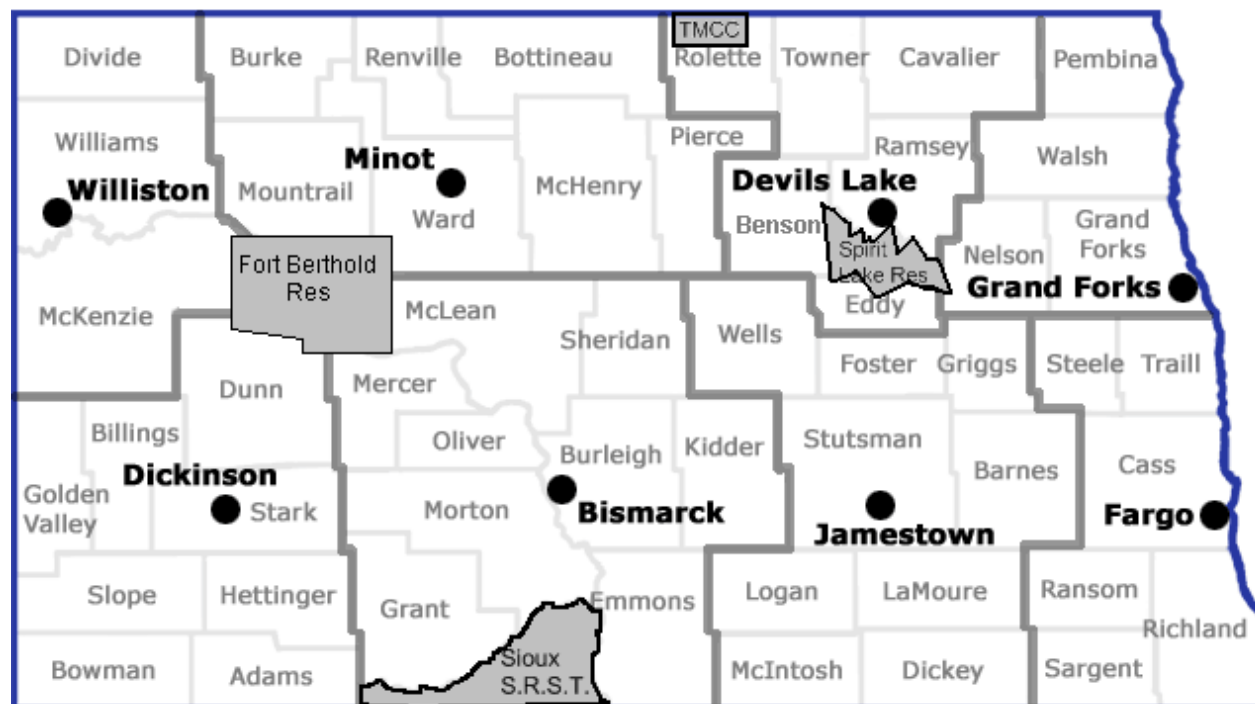
Review Month Region**	Case Sampling Period*	PUR	# FC Cases**	# IH Cases**	Total Cases**	Cases Per Qtr	Resources Needed
January Region 4 Northeast (Grand Forks)	1/1/XX – 6/30/XX	1/1/XX - Date of Review	8	2	10		10 Reviewers for 5 Teams 2 QA Leads
February Region 3 Lake (Devils Lake)	1/1/XX – 6/30/XX	1/1/XX - Date of Review	7	2	9		10 Reviewers for 5 Teams 2 QA Leads
March Make Up Month		1/1/XX - Date of Review				19	
April Region 1 Northwest (Williston)	4/1/XX – 9/30/XX	4/1/XX - Date of Review	4	2	6		6 Reviewers for 3 Teams 1 QA Lead
May Region 7 West Central (Bismarck)	4/1/XX – 9/30/XX	4/1/XX - Date of Review	7	5	12		12 Reviewers for 6 Teams 2 QA Leads
June Make Up Month		4/1/XX - Date of Review				18	
July 2018	----- NO CASE REVIEW -----						
August Region 6 South Central (Jamestown)	7/1/XX – 12/31/XX	7/1/XX – Date of Review	3	2	5		6 Reviewers for 3 Teams 1 QA Lead
September Region 5 Southeast (Fargo) <i>(Largest Metro Area)</i>	7/1/XX – 12/31/XX	7/1/XX – Date of Review	10	3	13	18	14 Reviewers for 7 Teams 3 QA Leads
October Region 8 Badlands (Dickinson)	10/1/XX – 3/31/XX	10/1/XX - Date of Review	3	3	6		6 Reviewers for 3 Teams 1 QA Lead
November Region 2 North Central (Minot)	10/1/XX – 3/31/XX	10/1/XX - Date of Review	5	6	11		12 Reviewers for 6 Teams 2 QA Leads
December Make Up Month		10/1/XX - Date of Review				17	
TOTALS			47	25	72	72	78 Reviewers 15 QA Leads

*Rolling sample period. Add 45 days to end of case draw period for in-home services cases.

** Annual numbers of cases to be reviewed and region will be based on actual caseload statistics. The percentage of metro site cases will be maintained within 5 percentage points between the baseline and subsequent periods.

NORTH DAKOTA
3rd Round Federal CFSR Site Selection
(Submitted to Children's Bureau January 2016)

North Dakota is a state supervised, county administered child welfare system divided into eight regions with 53 counties. North Dakota also has four federally recognized tribes with Tribal Title IV-E agreements with the state. ND DHS has a Memorandum of Understanding with the Division of Juvenile Services for Title IV-E foster care services. In-home services are part of the service array within the county social services agencies.



Due to the rural nature of our state, there are fewer than 10 counties with caseloads large enough to accommodate a CFSR. The ND Children and Family Services Division met with various stakeholder groups to review and decide the recommended three sites for the 3rd Round Federal CFSR. Over the past several months, ND CFS administrators have been meeting with ACF on a monthly basis to discuss site selection. At the 12/2/15 MASC meeting, it was agreed that the following jurisdictions be considered as sites for the 3rd Round Federal CFSR: Cass County, Grand Forks County, Williams County, Northwest Region, Burleigh/Morton Counties, Ward County, and Lake Region. Please see table below for analysis of these sites.

	CASS COUNTY (Fargo)	GRAND FORKS COUNTY (Grand Forks)	WILLIAMS COUNTY (Williston)	NORTHWEST REGION (Divide, Williams, McKenzie Counties, Fort Berthold Reservation)	BURLEIGH/MORTON COUNTIES (Bismarck/Mandan)	WARD COUNTY (Minot)	LAKE REGION (Rolette, Towner, Cavalier, Benson, Ramsey Counties, Spirit Lake & Turtle Mountain Reservations)
Overview	<ul style="list-style-type: none"> • Largest metro area • Pop. 167,005 • Southeastern 	<ul style="list-style-type: none"> • Mid-sized county • Pop. 70,138 • Northeastern 	<ul style="list-style-type: none"> • Small county, rural • Pop. 32,130 • Northwestern • Oil-impact area 	<ul style="list-style-type: none"> • Small counties, rural • Pop. 43,758 • Northwestern • Oil-impact area • Includes one administrative county (FIPS code) for Tribal IV-E (state-tribe IV-E agreement is in place) with Three Affiliated Tribes 	<ul style="list-style-type: none"> • Large county/mid-sized county • Pop. 117,447 • West central 	<ul style="list-style-type: none"> • Mid-size county • Pop. 67,990 • North central • Oil impact area 	<ul style="list-style-type: none"> • Small counties, rural • Pop. 54,698 • Northeastern/North Central • Includes two administrative counties (FIPS code) for Tribal IV-E (state-tribe IV-E agreement is in place) with Spirit Lake & Turtle Mountain accounting for around 50% of the foster care cases in the region
Logistics	<ul style="list-style-type: none"> • 1,768 sq. mi. • Limited conference & meeting room options, will be challenging to accommodate CFSR • 158 mi. to nearest tribe 	<ul style="list-style-type: none"> • 1,440 sq. mi. • Adequate conference & meeting room options, should have the space to accommodate CFSR • 108 mi. to nearest tribe 	<ul style="list-style-type: none"> • 2,077 sq. mi. • Adequate conference & meeting room options, should have the space to accommodate CFSR • 71 mi. to nearest tribe 	<ul style="list-style-type: none"> • 6,098 sq. mi. • CFSR location would be Williston/Williams County • 71 mi. to nearest tribe 	<ul style="list-style-type: none"> • 3,613 sq. mi. • Limited conference & meeting room options, will be challenging to accommodate CFSR • 68 mi. to nearest tribe 	<ul style="list-style-type: none"> • 2,056 sq. mi. • Moved to a new location in November 2015 • Limited conference & meeting room options, will be challenging to accommodate CFSR • 74 mi. to nearest tribe 	<ul style="list-style-type: none"> • 6,682 sq. mi. • Limited conference & meeting room options (at Lake Region Human Service Center in Devils Lake) • 14 mi. to Spirit Lake • 84 mi. to Turtle Mountain
Initiatives/Themes	<ul style="list-style-type: none"> • Decreased foster care population over last 5 years • Implemented Signs of Safety model • Adopted a crisis case management model • In-home services pilot project through Casey Family Services • FTDM pilot site 	<ul style="list-style-type: none"> • Increased foster care population over last 5 years • Site of TPR Pilot Project for last PIP • Strong collaborative relationships with stakeholders • FTDM pilot site • Child welfare workforce turnover 	<ul style="list-style-type: none"> • Managed increasing caseloads, and complex cases • Increased workforce • New county director in last year 	<ul style="list-style-type: none"> • Similar to Williams County • Child welfare workforce turnover in the rural counties • Increased workforce • Three Affiliated Tribes has lost child welfare director recently (November 2015) • Three Affiliated Tribes operates own CPS system 	<ul style="list-style-type: none"> • FTDM pilot site • Cooperative agreement for shared child welfare programs dissolved 1/1/15 • Foster care case sampling will prove very challenging due to how the FIPS code is reported in AFCARS • New county directors since last federal CFSR • Higher population of delinquent and unruly youth in county foster care 	<ul style="list-style-type: none"> • Community remains in recovery from traumatic events surrounding the 2011 flood and oil impact • Child welfare workforce turnover at all levels, including 4 social services directors since 2008 • County supervisors have come together to creatively address challenges related to court hearing delays 	<ul style="list-style-type: none"> • Perpetual natural disaster due to flooding – the lake has been rising for the past 20 years, flooding several thousand acres of farmland & two small towns • Loss of jobs & tax revenues due to flood • County child welfare workforce have experienced turnover • Tribal workforce experience frequent turnover • Turtle Mountain operates own CPS system • Spirit Lake partners with BIA for CPS services

ND State & County/Region-Specific Demographics

Timeframe: 4/1/15-9/30/15 (AFCARS 2015B)

	COUNTY/STATE FOSTER CARE Open 24+ hours (Children)	TRIBAL IV-E FOSTER CARE* (Children)	DJS FOSTER CARE (Children)	TOTAL FOSTER CARE POPULATION (Children)	IN-HOME SERVICES Open 45+ days (Families) 4/1/15-9/30/15	IN-HOME SERVICES With Open CPS Assessment Open 45+ days † 4/1/15-9/30/15
STATEWIDE	1651	178	111	1940	526	33
CASS COUNTY	260	0	20	280	24	1
GRAND FORKS COUNTY	277	0	15	292	54	0
WILLIAMS COUNTY	136	0	8	144	23	0
NORTHWEST REGION	187	8	9	204	35	0
BURLEIGH/MORTON COUNTIES	181	0	15	196	98	4
WARD COUNTY	160	0	6	166	64	4
LAKE REGION	100	132	14	246	37	5

† Unduplicated count

Unique Child Totals by Race in Foster Care STATEWIDE

Timeframe: 4/1/15-9/30/15 (AFCARS 2015B)**

RACE	TOTAL
American Indian or Alaskan Native	693
Asian	11
African American	150
Native Hawaiian or Pacific Islander	18
White	1171
Unable to Determine/Refusal by client	74
Total***	2117

**Children of multiple races will show up in multiple categories

***Includes foster care cases open 24+ hours

Percentage of Native American Children in Foster Care

Timeframe: 4/1/15-9/30/15 (AFCARS 2015B)

SITE	PERCENTAGE
Statewide	36%
Cass County	21%
Grand Forks County	45%
Williams County	20%
Northwest Region	18%
Burleigh/Morton Counties	54%
Ward County	35%
Lake Region	87%

Of this, 26% are Tribal IV-E Youth

*** “Native American” vs. “Tribal Title IV-E”**

Although North Dakota’s child population is primarily identified as White, Non-Hispanic, ND has an average child population with Native American heritage of approximately 8% (2014 *NDKidsCount.org*). Note that this percentage is based on a singular race category. ND DHS recognizes many children are more than one race, while still identifying themselves as Native American, thus this figure can be higher. **In fact, ND DHS data indicates that in the AFCARS 2015B submission, approximately 36% of the youth in the foster care universe were identified as Native American.** This figure is based on at least one racial category being selected as Native American. Youth could be served by a county agency, a DJS agency or a tribal agency and this figure is not an indicator of how many youth may be ICWA-eligible. Children and families served by the ND Child Welfare system are of any racial or ethnic demographic group and thus when the term “Native American” is utilized, the broader demographic population is referenced. Native American youth in the custody of a tribal social service agency are reflected as “Tribal Title IV-E” pursuant to the established Tribal-State Title IV-E Agreements.

Tribal Title IV-E Foster Care Cases

Pursuant to the State Tribal Title IV-E Agreements, the county social service agency associated with the tribal family’s residence is assigned to coordinate with the Tribe and administer the eligibility services on behalf of the youth in foster care. Thus, this administrative county is the entity reported in AFCARS utilizing the county agency FIPS code. Below are the assigned administrative counties (FIPS Code) for the four tribal nations in North Dakota:

Tribal Nation	Administrative Counties in AFCARS (FIPS Code)
Turtle Mountain Band of Chippewa	Rolette
Spirit Lake Nation	Benson, Eddy
Standing Rock Sioux Tribe	Sioux
Three Affiliated Tribes	McKenzie, Mountrail, McLean, Mercer, Dunn

The overall numbers of tribal youth eligible for Title IV-E foster care in care have increased 17% since 2012. Increases were observed in Turtle Mountain (71%) and Standing Rock (35%), and decreases were observed in Spirit Lake (down 16%) and Three Affiliated (down 17%). Please note these figures do not represent the total number of youth in foster care for a particular tribe, rather only those youth served under the Tribal-State Title IV-E Agreements.

Count of Tribal Children* in Foster Care by Administrative County CY 2014	
Administrative County	# of Tribal Children
Rolette (Turtle Mountain)	82
Benson (Spirit Lake)	36
Eddy (Spirit Lake)	0
Sioux (Standing Rock)	27
McKenzie (Three Affiliated Tribes)	10
Mountrail (Three Affiliated Tribes)	12
McLean (Three Affiliated Tribes)	3
Mercer (Three Affiliated Tribes)	0
Dunn (Three Affiliated Tribes)	5
Total	176

**Each child is counted once during a given calendar year based on the administrative county*

Tribal Representation in the Federal Review

Since Tribal Title IV-E youth represented approximately 8% of the foster care population in CY 2014, and the state has four Tribal-State agreements, the state and federal team are considering how to include these cases in the sampling pool. In order to accomplish this, a potential solution is to expand the site selection to a North Dakota region instead of individual counties. The two regions being considered are the Northwest Region and Lake Region. The Northwest Region consists of three counties (Divide, Williams and McKenzie) and one of these three counties, McKenzie, is an administrative county for a tribal child welfare agency (Three Affiliated Tribes-Fort Berthold). According to the AFCARS 2015B submission, around 4% of the foster care cases in Northwest Region/McKenzie County are tribal Title IV-E cases. The Lake Region consists of five counties (Rolette, Towner, Cavalier, Ramsey, and Benson). One county (Rolette) is the administrative county for Turtle Mountain Band of Chippewa and one county (Benson) is one of the administrative counties for Spirit Lake Nation. According to the AFCARS 2015B submission, around 54% of the foster care cases in Lake Region are tribal Title IV-E cases. Either jurisdiction would offer the opportunity to review tribal IV-E foster care cases from a federally recognized tribe (see regional map). Please note that while Eddy County is shown on the map as being included in Lake Region, it is actually included in the South Central Region for all child welfare programming.

ND Foster Care and In-Home Services Caseloads
FRAME Data for the 2017A AFCARS Time Period

AFCARS 2017A Case Counts								
Region	County	Custodian						Total
		County/State	DJS	Tribal	Parents	Other	Missing	
1	Divide	8	0	0	0	0	0	8
	McKenzie	37	1	3	0	0	0	41
	Williams	106	2	0	0	0	0	108
	Region 1 Total	151	3	3	0	0	0	157
2	Bottineau	4	0	0	0	0	0	4
	Burke	2	0	0	0	0	0	2
	McHenry	10	0	0	0	0	0	10
	Mountrail	14	1	3	0	0	1	19
	Pierce	15	0	0	0	0	0	15
	Renville	4	0	0	0	0	0	4
	Ward	145	13	0	0	0	0	158
	Region 2 Total	194	14	3	0	0	1	212
3	Benson	4	3	54	0	0	0	61
	Cavalier	0	0	0	0	0	0	0
	Ramsey	66	4	1	0	0	0	71
	Rolette	27	0	120	0	0	0	147
	Towner	2	0	0	0	0	0	2
	Region 3 Total	99	7	175	0	0	0	281
4	Grand Forks	267	10	0	1	0	0	278
	Nelson	1	0	0	0	0	0	1
	Pembina	10	1	0	0	0	0	11
	Walsh	38	0	0	0	0	0	38
	Region 4 Total	316	11	0	1	0	0	328
5	Cass	298	23	0	0	0	3	324
	Ransom	3	1	0	0	0	0	4
	Richland	26	2	0	0	0	0	28
	Sargent	2	0	0	0	0	0	2
	Steele	2	0	0	0	0	0	2
	Traill	25	0	0	0	0	0	25
	Region 5 Total	356	26	0	0	0	3	385
6	Barnes	32	0	0	0	0	1	33
	Dickey	10	1	0	0	0	0	11
	Eddy	2	0	0	0	0	1	3
	Foster	4	0	0	0	0	0	4
	Griggs	3	0	0	0	0	0	3
	LaMoure	0	0	0	0	0	0	0
	Logan	1	0	0	0	0	0	1
	Stutsman	48	3	0	0	2	0	53
	Wells	8	0	0	0	0	0	8
	Region 6 Total	108	4	0	0	2	2	116
7	Burleigh	182	10	0	0	0	3	195
	Emmons	1	0	0	0	0	0	1
	Grant	10	0	0	0	0	0	10
	Kidder	1	0	0	0	0	0	1
	McIntosh	1	0	0	0	0	0	1
	McLean	34	2	3	0	0	0	39
	Mercer	0	0	0	0	0	0	0
	Morton	7	3	0	0	0	0	10
	Oliver	0	0	0	0	0	0	0
	Sheridan	0	0	0	0	0	0	0
	Sioux	1	0	26	0	0	0	27
	Region 7 Total	237	15	29	0	0	3	284
	8	Adams	9	0	0	0	0	0
Billings		0	0	0	0	0	0	0
Bowman		6	0	0	0	0	0	6
Dunn		4	0	4	0	0	1	9
Golden Valley		2	0	0	0	0	0	2
Hettinger		0	0	0	0	0	0	0
Slope		0	0	0	0	0	0	0
Stark		83	4	0	0	0	0	87
Region 8 Total	104	4	4	0	0	1	113	
Statewide Total		1565	84	214	1	2	10	1876

FRAME In-Home Services Case Counts		
Oct 1, 2016 – Mar 31, 2017		
Region 1	DIVIDE COUNTY SOCIAL SERV	2
	MCKENZIE COUNTY SOC SERV	8
	WILLIAMS CNTY SOCIAL SRVC	43
	Region 1 Total	53
Region 2	BOTTINEAU COUNTY SOC SERV	9
	BURKE COUNTY SOCIAL SERV	1
	MCHENRY COUNTY SOC SERV	1
	MOUNTRAIL COUNTY SOC SERV	5
	PIERCE COUNTY SOCIAL SERV	4
	RENVILLE COUNTY SOC SERV	1
	WARD COUNTY SOCIAL SERV	123
Region 2 Total	144	
Region 3	BENSON COUNTY SOC SERV	0
	CAVALIER COUNTY SOC SERV	4
	RAMSEY COUNTY SOCIAL SERV	22
	ROLETTE COUNTY SOC SERV	0
	TOWNER COUNTY SOC SERV	0
Region 3 Total	26	
Region 4	GRAND FORKS COUNTY SOC SV	42
	NELSON COUNTY SOCIAL SERV	3
	PEMBINA COUNTY SOC SERV	2
	WALSH COUNTY SOCIAL SERV	6
Region 4 Total	53	
Region 5	CASS CNTY SOCIAL SERVICES	26
	RANSOM CNTY SOCIAL SRVCS	1
	RICHLAND CNTY SOCIAL SRVC	7
	SARGENT CNTY SOCIAL SRVCS	4
	STEELE CNTY SOCIAL SRVCS	1
TRAILL CNTY SOCIAL SRVCS	3	
Region 5 Total	42	
Region 6	BARNES COUNTY SOC SERV	9
	DICKEY COUNTY SOC SERV	16
	EDDY COUNTY SOC SERV	0
	FOSTER COUNTY SOCIAL SERV	1
	GRIGGS COUNTY SOCIAL SERV	2
	LAMOURE COUNTY SOCIAL SERV	0
	LOGAN COUNTY SOCIAL SERV	0
	STUTSMAN CNTY SOCIAL SRVC	20
WELLS COUNTY SOCIAL SERV	3	
Region 6 Total	51	
Region 7	BURLEIGH COUNTY SOC SERV	63
	EMMONS COUNTY SOCIAL SERV	0
	GRANT COUNTY SOCIAL SERV	2
	KIDDER CNTY SOCIAL SRVC	4
	MCINTOSH COUNTY SOC SERV	7
	MCLEAN COUNTY SOCIAL SERV	17
	MERCER COUNTY SOCIAL SERV	0
	MORTON COUNTY SOCIAL SRVC	29
	OLIVER COUNTY SOCIAL SERV	0
	SHERIDAN COUNTY SOCIAL SERV	0
SIOUX COUNTY SOCIAL SERVICES	0	
Region 7 Total	122	
Region 8	ADAMS CNTY SOCIAL SERVICE	3
	BILLINGS COUNTY SOC SERV	1
	BOWMAN COUNTY SOCIAL SERV	7
	DUNN COUNTY SOCIAL SERVICES	0
	GOLDEN VALLEY SOC SERV	5
	HETTINGER COUNTY SOC SERV	1
	SLOPE COUNTY SOCIAL SERVICES	0
STARK CNTY SOCIAL SERVICE	55	
Region 8 Total	72	
Statewide Total		563

Child and Family Services Review (CFSR) Round 3
North Dakota: Preliminary Program Improvement Plan (PIP) Measurement Plan Goal Worksheet
Case Review Items Requiring Measurement in the PIP
Prospective Method Used to Establish PIP Baselines and Goals Using Case Reviews Conducted CY 2018

CFSR Items Requiring Measurement	Item Description	Z value for 80% Confidence Level ¹	Number of applicable cases ²	Number of cases rated a Strength	PIP Baseline ³	Baseline Sampling Error ⁴	PIP Goal ⁵	Adjusted PIP Goal ⁶	Number of Applicable Cases for CFSR ⁷	CFSR Performance
Item 1	Timeliness of Initiating Investigations of Reports of Child Maltreatment	1.28	17			#DIV/0!	#DIV/0!	#NAME?	17	82.4%
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	1.28	23			#DIV/0!	#DIV/0!	#NAME?	23	69.6%
Item 3	Risk and Safety Assessment and Management	1.28	65			#DIV/0!	#DIV/0!	#NAME?	65	73.8%
Item 4	Stability of Foster Care Placement	1.28	40			#DIV/0!	#DIV/0!	#NAME?	40	87.5%
Item 5	Permanency Goal for Child	1.28	40			#DIV/0!	#DIV/0!	#NAME?	40	80.0%
Item 6	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	1.28	40			#DIV/0!	#DIV/0!	#NAME?	40	42.5%
Item 12	Needs and Services of Child, Parents, and Foster Parents	1.28	65			#DIV/0!	#DIV/0!	#NAME?	65	47.7%

CFSR Items Requiring Measurement	Item Description	Z value for 80% Confidence Level ¹	Number of applicable cases ²	Number of cases rated a Strength	PIP Baseline ³	Baseline Sampling Error ⁴	PIP Goal ⁵	Adjusted PIP Goal ⁶	Number of Applicable Cases for CFSR ⁷	CFSR Performance
Item 13	Child and Family Involvement in Case Planning	1.28	61			#DIV/0!	#DIV/0!	#NAME?	61	59.0%
Item 14	Caseworker Visits With Child	1.28	65			#DIV/0!	#DIV/0!	#NAME?	65	67.7%
Item 15	Caseworker Visits With Parents	1.28	52			#DIV/0!	#DIV/0!	#NAME?	52	55.8%

Explanatory Data Notes:

¹ Z-values: Represents the standard normal (Z) distribution of a data set and measures the number of standard errors to be added and subtracted in order to achieve our desired confidence level (the percentage of confidence we want in the results). In order to have 80% confidence in the results of the sample data, a Z-value of 1.28 is used to calculate the margin of error.

² Minimum Number of Applicable Cases: Identifies the minimum number of applicable cases used to establish the baseline. Measurement samples must be equal to or greater than the number of applicable cases used to establish the baseline for each Item. A two percent (2%) tolerance is applied to the number of cases reviewed to measure goal achievement compared to the number of cases reviewed to establish the baseline.

³ PIP Baseline: Percentage of applicable cases reviewed rated a strength for the specified CFSR Item.

⁴ Baseline Sampling Error: Represents the margin of error that arises in a data collection process as a result of using a sample rather than the entire universe of cases.

⁵ PIP Goal: Calculated by adding the sampling error to the baseline percentage. If the state has an improvement goal above 90% and is able to sustain performance above the baseline for three quarters, the Children's Bureau will consider the goal met even if the state does not meet the actual goal.

⁶ Adjusted PIP Goal: Identifies the adjusted improvement goal that accounts for the period of overlap between the baseline period and the PIP implementation period. The adjustment is calculated using an adjustment factor that reduces the sampling error up to one half based on the number of months of overlap, up to 12 months. Percentages computed from 12 months of practice findings are used to determine whether the state satisfied its improvement goal. If the state has an improvement goal above 90% and is able to sustain performance above the baseline for three quarters, the Children's Bureau will consider the goal met even if the state does not meet the actual goal.

⁷ Number of Applicable Cases for CFSR: Identifies the number of applicable cases from the state's CFSR onsite review and final report.