





Data Book

as of June 30, 2015



Division of Child and Family Services
Department of Health and Human Services
State of Nevada

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Introduction

The purpose of the Data Book is to provide key data measures that reflect the operations of the Division of Child and Family Services (DCFS) within the Nevada Department of Health and Human Services.

Efforts are made to ensure that the data is accurate and relevant, but errors may still exist. Questions regarding the data contained herein or suggestions for additional data to be included may be directed to coordinator John Aragon at jsaragon@dcfs.nv.gov.

More detailed descriptions of the DCFS performance and programs are posted on the Division's website at http://www.dcfs.state.nv.us.

Danette Kluever, Interim Administrator

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DCFS Overview

The State of Nevada's Division of Child and Family Services (DCFS) provides a wide range of services for the children, youth, and families in Nevada. Program Areas include Child Welfare, Juvenile Justice, Children's Mental/Behavioral Health Services, Administration and Support Services, and direct services as well as oversight for programs administered at the county and local levels.

Child Welfare Services	Juvenile Justice Services	Mental and Behavioral Health Services	Administrative and Support Services		
Child Protective Services	Youth Alternative Placement	Inpatient Treatment Services	Grant Management and Fiscal Administration		
Intensive Family Services	Juvenile Correctional Care	Residential Care Including Family Learning Homes	Federal Reporting on Child Welfare and Services		
Foster Care Licensing Academic/Vocational Training		Acute Residential Treatment Center	Personnel and Payroll		
Foster Care Placements Youth Parole – Supervision and Services		Adolescent Residential Treatment Center	Fiscal Services		
Child Abuse and Neglect Registry	Interstate Compact for Juveniles (ICJ)	Early Childhood Services	Contracts Administration		
Interstate Compact for the Placement of Children	Grant Administration	Outpatient Treatment Services	Eligibility Determination for Federa Programs to Youth		
Indian Child Welfare Act (ICWA) Administration	Juvenile Justice Delinquency Prevention Act Compliance	Intensive Care Coordination Services	Domestic Violence Victims Assistance		
Services to Foster Youth Transitioning to Adulthood		Consortium	Systems Advocate Office		
Adoption Placement		Training	Compliance and Oversight for Various Programs		
			Information Management Systems		

Child Welfare

Child Welfare includes direct child protective services, foster care, adoption and independent living services, foster care licensing in fifteen rural Nevada counties, statewide oversight for child welfare (including the two urban county child welfare agencies), and oversight of the Interstate Compact for the Placement of Children.

Nevada uses a state-supervised and county-administered structure for the management of child welfare services. DCFS, under the umbrella of the Nevada Department of Health and Human Services (DHHS), provides oversight to child welfare and direct child welfare services. The organizational structure of DCFS and program delivery of child welfare services are influenced by the state size and concentration of county population. In counties with a population of 100,000 or more, the county provides all child welfare services.

Clark County Department of Family Services (CCDFS) and Washoe County Department of Social Services (WCDSS) provide child welfare services directly to all children and families located in those counties. DCFS provides child welfare services to the remaining 15 counties in the state through its Rural Region offices as well as oversight of services in Clark and Washoe counties.

Child Protective Services

Child Protective Services (CPS) is the first step to ensure the safety and permanency of children, age birth to eighteen, who have been reported as being abused or neglected. The primary focus of CPS is to ensure that children are protected from harm or risk of harm and to make it safe for the child to live with the parent or caretaker. It is the responsibility of the CPS worker to assess safety, protective capacity, family functioning, and identify strengths and risks in the home.

CPS agencies respond to reports of abuse or neglect of children under the age of eighteen. Abuse or neglect complaints are defined in statute and include mental injury, physical injury, sexual abuse and exploitation, negligent treatment or maltreatment, and excessive corporal punishment.

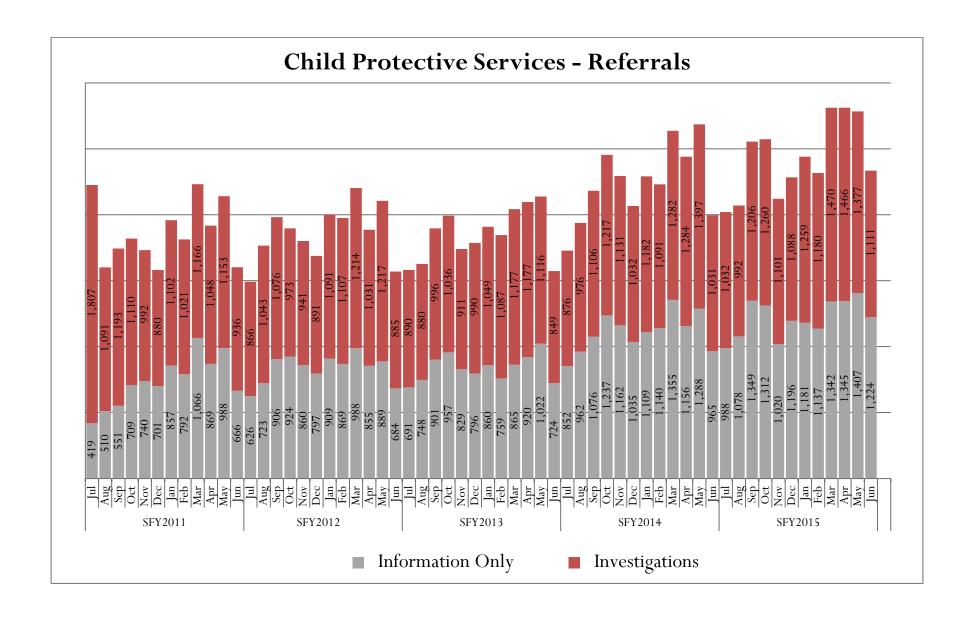
Child Protective Services - Top Maltreatment Allegations

Clark County	Washoe County	Rural Counties
Negligent Treatment	Negligent Treatment	Negligent Treatment
Physical Injury Abuse	Physical Injury Neglect	Physical Injury Neglect
Physical Injury Neglect	Physical Injury Abuse	Physical Injury Abuse

Intake is the first stage of the child protective services (CPS) process and is one of the most important decision-making points in the child protection system. It is the point at which reports of suspected child abuse and neglect are received. Information gathered by caseworkers is used to make decisions regarding safety and the type of CPS response required. The first part of the CPS process is a referral from an outside source and the Child Welfare Agency's response.

New Referrals

State			Clark					Washoe					Rural		
Fiscal Year	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
July	1288	952	997	1083	1444	639	376	403	432	418	342	227	236	279	248
Aug	906	1056	986	1286	1399	482	480	429	472	498	283	290	296	263	255
Sept	1065	1197	1180	1533	1813	503	554	529	519	567	311	343	297	267	298
Oct	1154	1198	1266	1788	1927	480	514	561	469	461	283	294	291	320	314
Nov	1141	1134	1110	1630	1580	423	471	437	499	387	279	296	298	291	265
Dec	1007	1000	1113	1500	1547	416	471	490	409	442	258	308	288	258	392
Jan	1290	1296	1248	1662	1757	457	529	506	437	445	334	313	314	311	397
Feb	1206	1279	1235	1562	1680	407	487	467	464	468	304	324	285	340	319
Mar	1500	1467	1333	1979	2088	514	541	558	481	488	348	347	306	327	375
Apr	1273	1200	1435	1770	2146	432	513	509	480	481	322	299	296	320	336
May	1357	1374	1381	1872	2026	536	512	516	553	537	339	336	363	397	334
Jun	1050	1017	1010	1393	1661	372	394	399	453	480	235	228	214	210	270
TOTAL	14,237	14,170	14,294	19,058	21,068	5,661	5,842	5,804	5,668	5,672	3,638	3,605	3,484	3,583	3,803
% change		- 0.5%	+ 0.9%	+ 33.3%	+ 10.5%		+ 3.2%	- 0.7%	- 2.3%	+ 0.1%		- 0.9%	- 3.4%	+ 2.8%	+ 6.1%

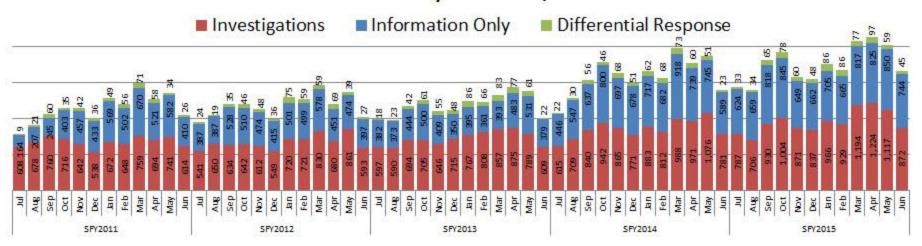


A referral that does not rise to a level of an allegation is considered Information Only. Referrals that constitute an allegation are investigated.

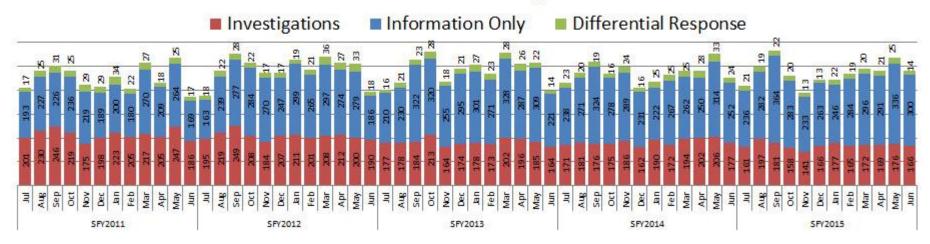
Referrals can be one of the following: (1) Information Only, where there is insufficient information about the family or maltreatment of the child, or there are no allegations of child abuse/neglect; (2) Differential Response, when a report is made and there are no allegations of maltreatment, and/or the allegations do not rise to the level of an investigation, but the family could benefit from community service; or (3) a Report if the agency determines that the information constitutes an allegation according to policy; it is assigned for investigation, and a determination of *Substantiated* or *Unsubstantiated* is made.

	SFY2011		SFY2012	SFY2013			SFY2014			
Clark County		%		%		%		%		%
Total New Referrals	14,237	100%	14,170	100%	14,294	100%	19,058	100%	21,068	100%
Information Only	5,163	36%	5,601	40%	5,000	35%	8,195	43%	8,866	42%
Differential Response	497	3%	536	4%	642	4%	610	3%	768	4%
Investigations	8,577	60%	8,033	57%	8,651	61%	10,251	54%	11,434	54%
Unsubstantiated*	5,352	70%	5,299	67%	5,869	70%	7,578	75%	7,418	78%
Substantiated*	2,306	30%	2,592	33%	2,556	30%	2,522	25%	2,032	22%
Washoe County										
Total New Referrals	5,661	100%	5,842	100%	5,804	100%	5,668	100%	5,672	100%
Information Only	2,582	46%	3,080	53%	3,348	58%	3,200	56%	3,419	60%
Differential Response	299	5%	278	5%	267	5%	276	5%	228	49
Investigations	2,780	49%	2,484	43%	2,188	38%	2,204	39%	2,033	36%
Unsubstantiated*	1,771	76%	1,797	75%	1,315	68%	1,524	69%	997	659
Substantiated*	561	24%	592	25%	607	32%	681	31%	544	359
Rural Counties										
Total New Referrals	3,638	100%	3,605	100%	3,484	100%	3,583	100%	3,803	1009
Information Only	1,123	31%	1,349	37%	1,724	49%	1,942	54%	2,294	609
Differential Response	373	10%	438	12%	441	13%	491	14%	434	119
Investigations	2,142	59%	1,818	50%	1,319	38%	1,150	32%	1,075	289
Unsubstantiated*	1,503	78%	1,245	77%	872	81%	887	83%	529	799
Substantiated*	417	22%	376	23%	208	19%	178	17%	138	219
STATEWIDE										
Total New Referrals	23,536	100%	23,617	100%	23,582	100%	28,309	100%	30,543	1009
Information Only	8,868	38%	10,030	42%	10,072	43%	13,337	47%	14,579	489
Differential Response	1,169	5%	1,252	5%	1,350	6%	1,377	5%	1,430	59
Investigations	13,499	57%	12,335	52%	12,158	52%	13,605	48%	14,542	489
Unsubstantiated*	8,626	72%	8,341	70%	8,056	70%	9,989	75%	8,944	779
Substantiated*	3,284	28%	3,560	30%	3,371	30%	3,381	25%	2,714	23%

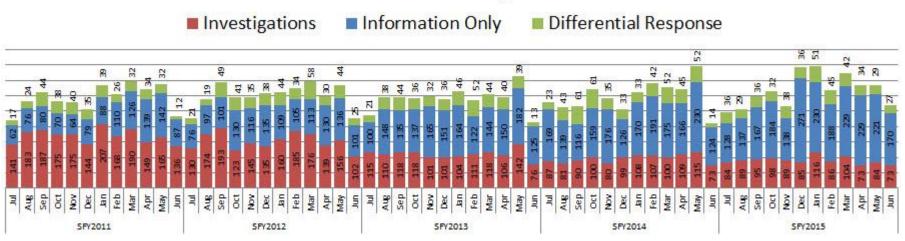
Clark County Screened In/Out



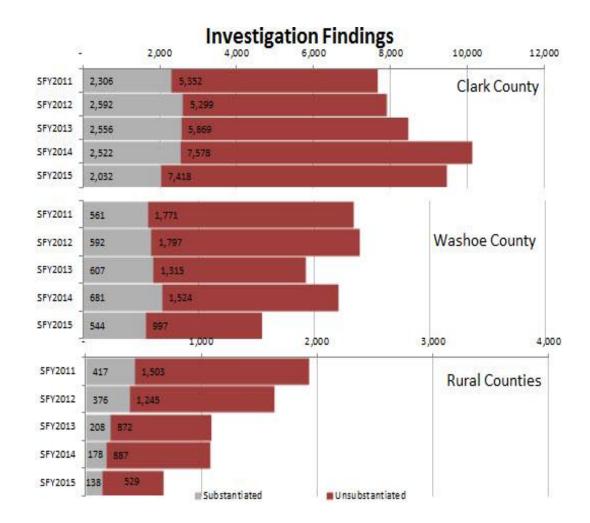
Washoe Screened In/Out

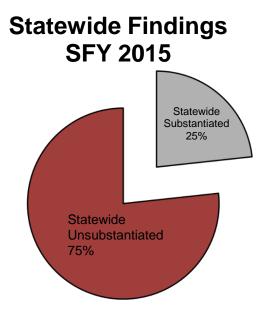


Rural Screened In/Out

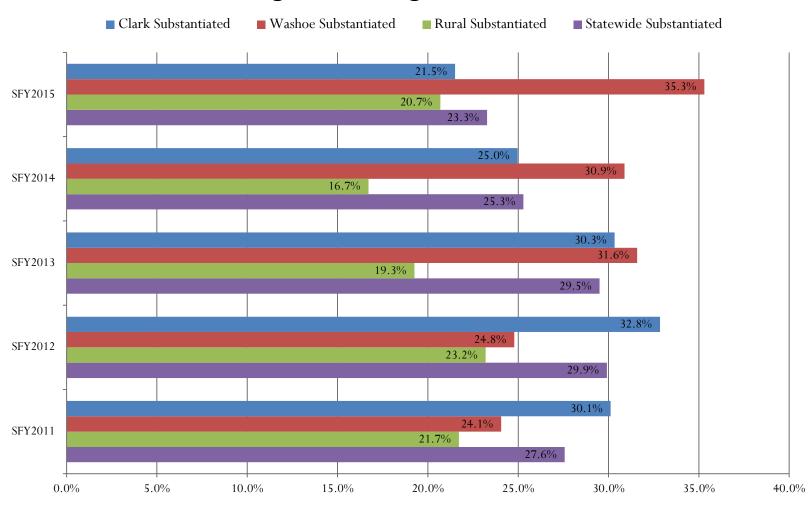


Upon completion of the investigation of a report of abuse or neglect, a determination of the case findings are made based on whether there is reasonable cause to believe that a child is abused or neglected or threatened with abuse or neglect. The findings are classified as *Substantiated*, meaning that a report made pursuant to NRS 432B.220 was investigated and that credible evidence of the abuse or neglect exists. *Unsubstantiated* means that a report made pursuant to NRS 432B.220 was investigated and that no credible evidence of the abuse or neglect exists.



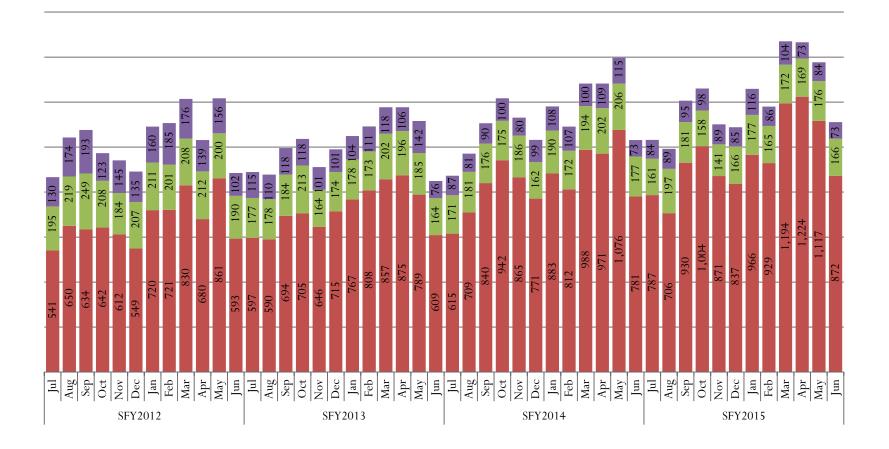


Percentage of Investigations Substantiated



CPS Investigations

■ Clark County ■ Washoe County ■ Rural Counties

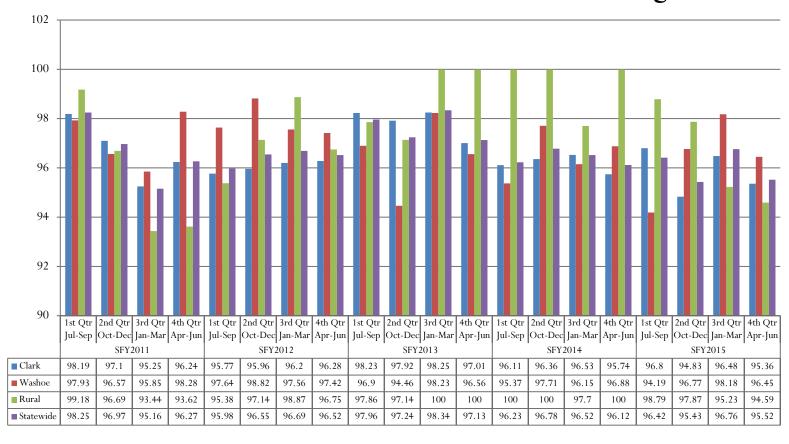


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SFY2012									12000	
Jul	23	20	15	18	13	10	-	5	6	110
Aug	56	22	18	22	9	12	3 , .	10	1	150
Sep	31	39	16	30	11	14	-	9	8	158
Oct	16	32	17	21	5	13		6	4	114
Nov	40	28	9	14	10	14	-	9	5	129
Dec	35	26	13	19	14	12		9	2	130
Jan	42	39	10	14	10	16	6	11	6	154
Feb	47	37	12	20	12	19	3	11	5	166
Mar	40	35	7	25	11	14	5	10	3	150
Apr	35	30	9	17	9	20		16	5	141
May	32	28	8	16	20	14	1	13	3	135
Jun	23	16	7	19	5	10	2	8	1	91
SFY2013	20000				54537	UTD TO THE	11.541	200	150.0	- 5000000
Jul	20	29	6	18	9	16	2	6	2	108
Aug	26	22	3	10	9	21	4	7	4	106
Sep	25	33	4	15	14	9	1	5	6	112
Oct	20	29		20	15	10	1	15	4	114
Nov	26	18	3	12	13	11	3	6	7	99
Dec	28	21	1	15	15	5	3	6	-	94
Jan	31	21	5	9	7	12	4	17	9.5	106
Feb	42	17	7	9	8	3	4	9	1	100
Mar	36	18	8	9	14	7	2	21	-	115
Apr	37	16	6	7	16	9	-	10	100 E	101
May	41	25	7	20	18	13	- E	13	2	139
Jun	24	12	4	8	7	7	-	6	4	72
SFY2014	3575	20200		200222	220	6750		2022	22.5	1391
Jul	18	20	7	13	9	4	-	5	8	84
Aug	19	8	10	10	4	9		4	8	72
Sep	29	13	8	17	6	4	30	7	5	89
Oct	26	18	13	13	9	3	-	9	7	98
Nov	26	13	7	5	4	8	-	8	3	74
Dec	41	15	5	7	1	13	= =	10	8	100
Jan	36	19	5	9	10	5	-	12	7	103
Feb	26	22	11	19	8	7	= 1	3	6	102
Mar	16	23	11	13	9	11		7	5	95
Apr	24	36	5	6	10	14	- 1	7	4	106
May	33	26	9	10	14	13	= 1	6	4	115
Jun	25	15	3	7	4	6	-	4	3	67
SFY2015			36	- 3	- 3			- 3	- 8	
Jul	31	14	9	6	6	4	=	3	3	76
Aug	25	25	2	6	2	12	-	9	6	87
Sep	15	23	8	8	6	16	. 9,	3	7	86
Oct	17	24	12	8	11	11	-	3	3	89
Nov	23	21	8	9	6	9		5	4	85
Dec	32	18	6	9	7	6	-	5	1	84
Jan	42	21	6	7	19	11	-	6	3	115
Feb	18	23	9	9	7	7		3	3	79
Mar	35	22	7	7	9	9		9	2	100
Арг	25	16	3	4	12	4	-	4	1	69
May	26	12	-	9	12	11	-	7	3	80
June	23	13	6	5	6	8		3	4	68

Budget Performance Measure: Percent of children without recurrent abuse or neglect

This measure assesses the effectiveness of child protective services in reducing the risk of harm for children who have been maltreated. For children with a substantiated report of abuse and/or neglect, it shows what percentage did not have a substantiated report in the six months prior to the substantiated report.

Percent of Children Without Recurrent Abuse or Neglect



Removals

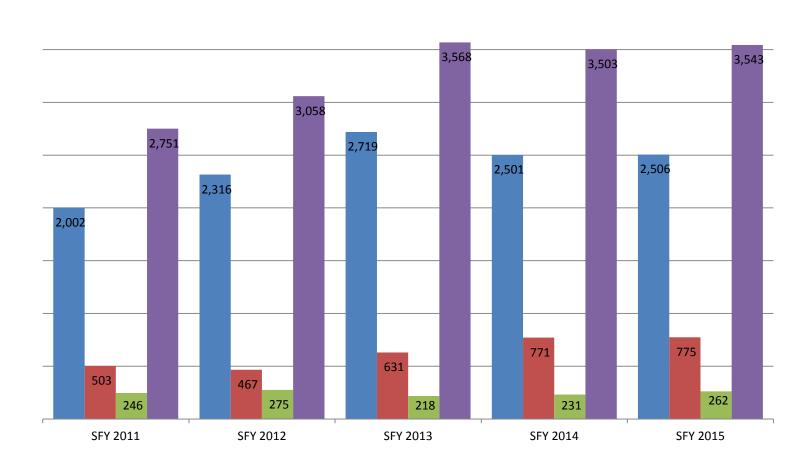
Some investigations result in a finding that the child cannot safely remain in the home and must be removed. The removal of a child from his or her natural environment is a last resort, as part of the overall continuum of services provided by DCFS and the counties providing child welfare services.

Children Removed from Home

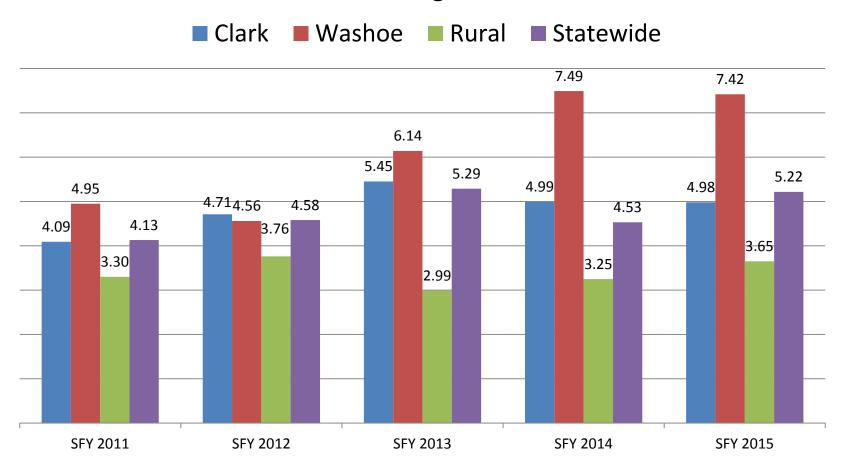
Clark Washoe								Rural			TOTAL									
State Fiscal Year	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
Jul	159	176	185	206	200	25	39	39	80	79	10	12	24	10	26	194	227	248	296	305
Aug	180	212	240	213	211	54	40	35	78	91	41	27	20	12	21	275	279	295	303	323
Sep	206	174	216	215	207	49	38	59	45	61	15	24	16	8	13	270	236	291	268	281
Oct	151	203	213	212	226	31	55	67	57	48	28	19	17	32	11	210	277	297	301	285
Nov	152	152	193	239	183	40	30	42	57	67	20	23	21	19	18	212	205	256	315	268
Dec	182	161	270	145	147	45	43	67	55	47	15	14	15	14	10	242	218	352	214	204
Jan	141	182	229	175	197	40	36	43	50	70	20	34	15	17	16	201	252	287	242	283
Feb	140	221	252	177	196	43	40	47	63	66	23	14	12	24	33	206	275	311	264	295
Mar	153	240	266	190	246	47	20	59	67	60	29	22	16	25	33	229	282	341	282	339
Apr	159	151	231	272	246	36	64	58	85	64	10	34	24	23	38	205	249	313	380	348
May	203	268	266	244	232	55	21	59	61	69	20	33	16	17	24	278	322	341	322	325
Jun	176	176	158	213	215	38	41	56	73	53	15	19	22	30	19	229	236	236	316	287
TOTAL	2,002	2,316	2,719	2,501	2,506	503	467	631	771	775	246	275	218	231	262	2,751	3,058	3,568	3,503	3,543
% change		+ 16%	+ 17%	+8%	+ 0%		- 7%	+ 35%	+ 22%	+ 1%		+ 12%	- 21%	+6%	+ 13%	ģ.	+ 11%	+ 17%	+ 15%	+ 1%

Number of Children Removed from Home





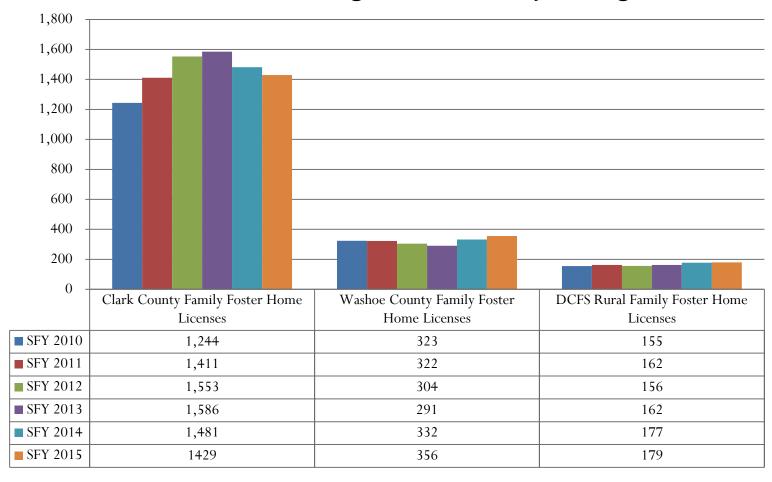
Removal Rate per 1,000 of the Population Under 18 Years of Age



Foster Care Licensing

When children must be removed from their homes, the child welfare agency must utilize traditional foster care. Resource home development is designed to recruit, train, license, and retain the most appropriate families available who can meet the needs of the child.

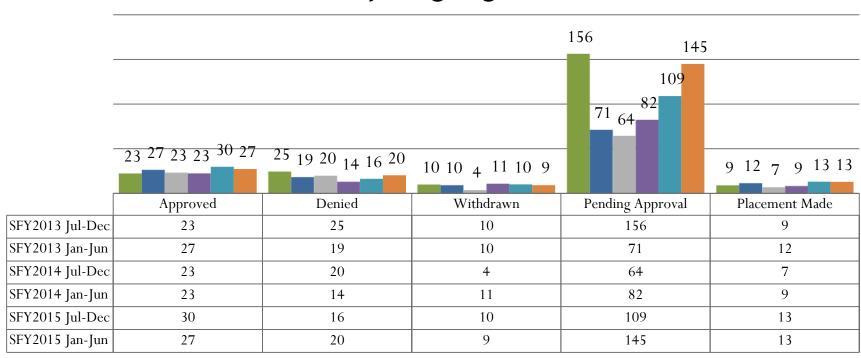
Foster Care Licensing Trends Monthly Average



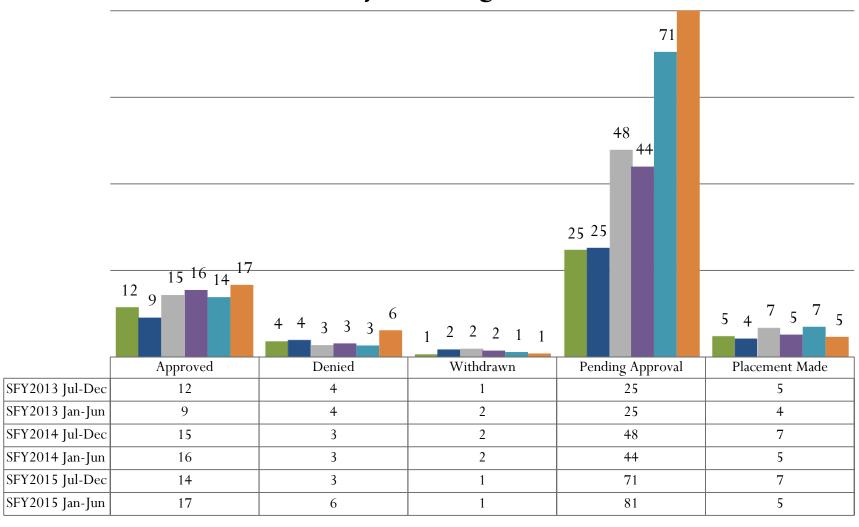
Interstate Compact for the Placement of Children (ICPC)

The Interstate Compact for the Placement of Children (ICPC) is a contract among states to work together to ensure that children, who are placed across state lines for foster care or adoption, receive adequate protection and support services. To this end, a child's safety, permanency, and well-being are assured through the process of a home study, licensing, if requested, and ongoing supervision of the placement. ICPC establishes uniform procedures for placement and establishes responsibility for agencies and individuals involved in placing children depending on their role as either the sending or receiving state.

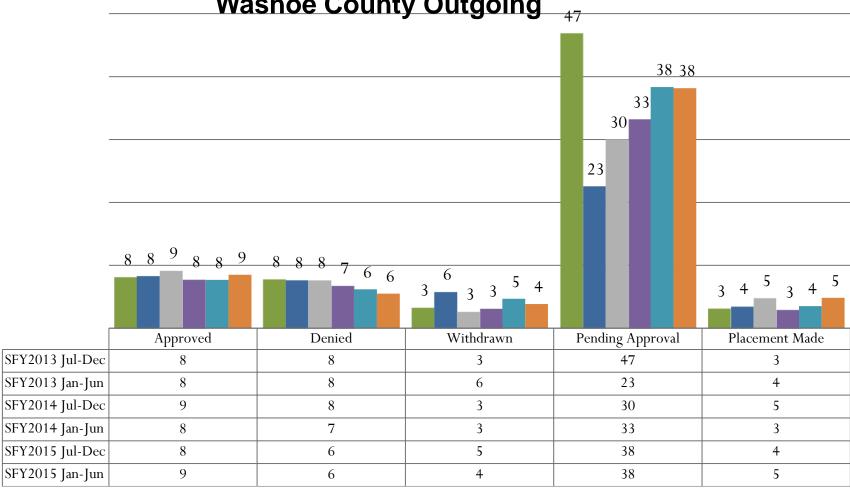
ICPC Home Studies Monthly Average Clark County Outgoing



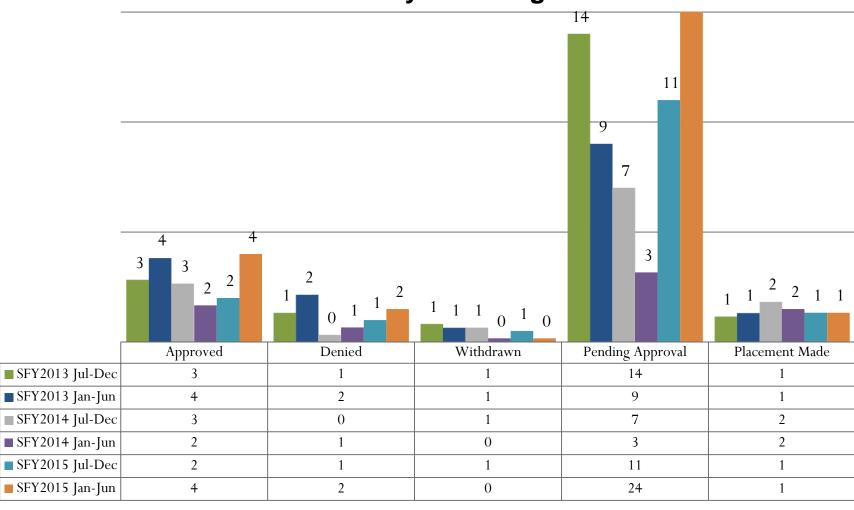
ICPC Home Studies Monthly Average Clark County Incoming



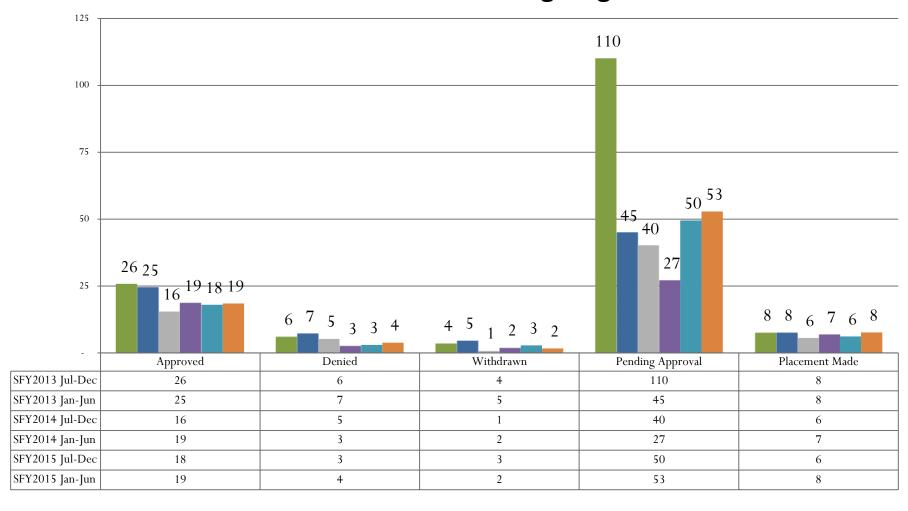
ICPC Home Studies Monthly Average Washoe County Outgoing



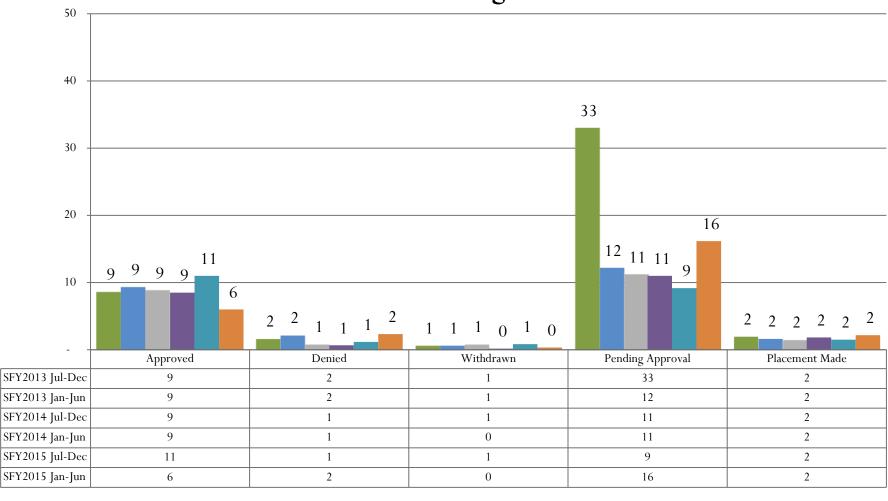
ICPC Home Studies Monthly Average Washoe County Incoming



ICPC Home Studies Monthly Average Rural Counties Outgoing



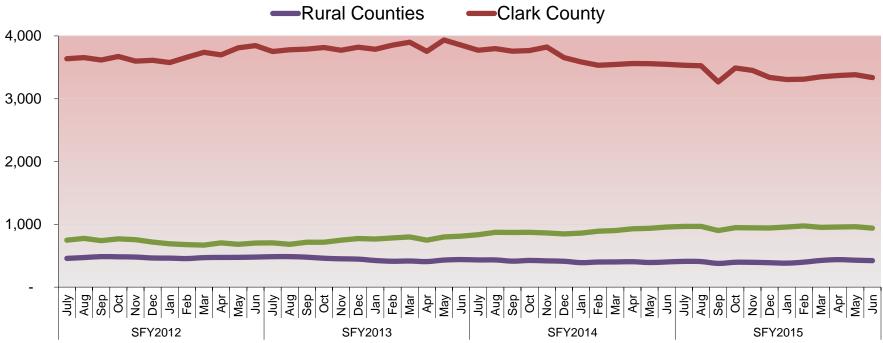
ICPC Home Studies Monthly Average Rural Counties Incoming



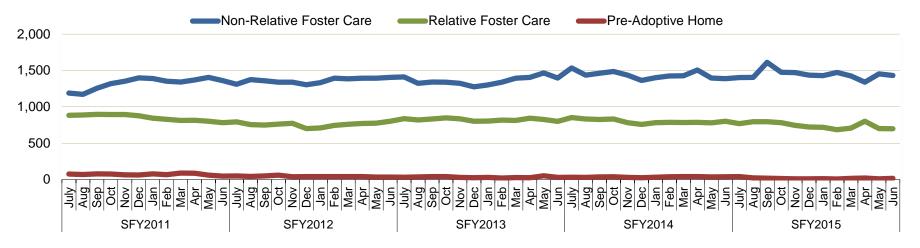
Foster Care Placement and Payments

When the safety and protection of a child cannot be met in the parent's or caregiver's home, substitute care in the form of relative care, foster care, residential therapeutic care, or other planned permanent living arrangements may become necessary. When it becomes necessary, child welfare agencies place children with available resource families. Resource families meet the needs of Nevada's waiting children and may be relatives, fictive (not related) family, foster parents, therapeutic foster care parents, and adoptive parents. With a resource family, a child may begin with an emergency shelter-care placement, emerge into foster care, with a final outcome of an adoption – and never leave the original resource family's home. A resource family is committed to a child, regardless of the child's needs and level of care.

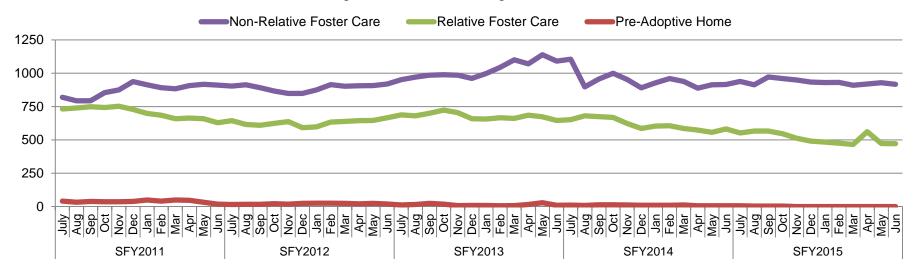
Children in Out-of- Home Placements



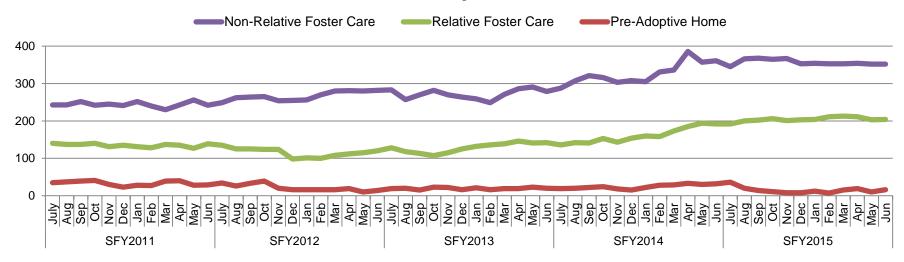
Statewide Paid Family Care Placements



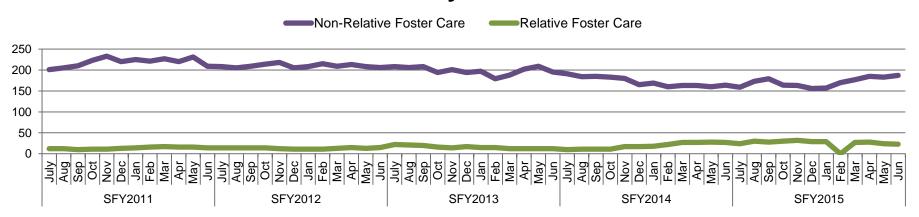
Clark County Paid Family Care Placements



Washoe Paid Family Care Placements



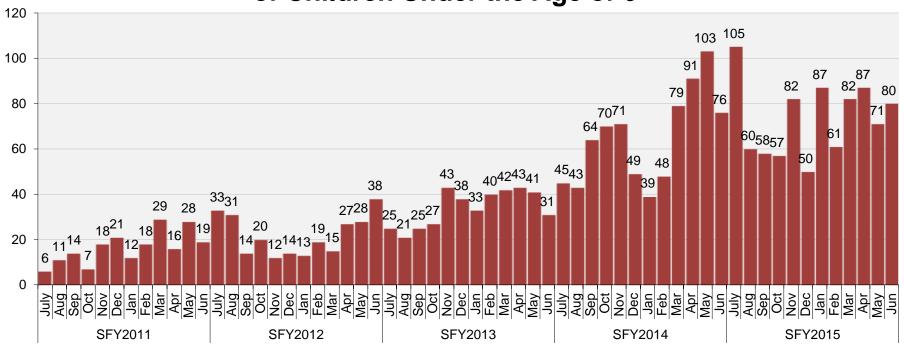
Rural Paid Family Care Placements



Congregate Care

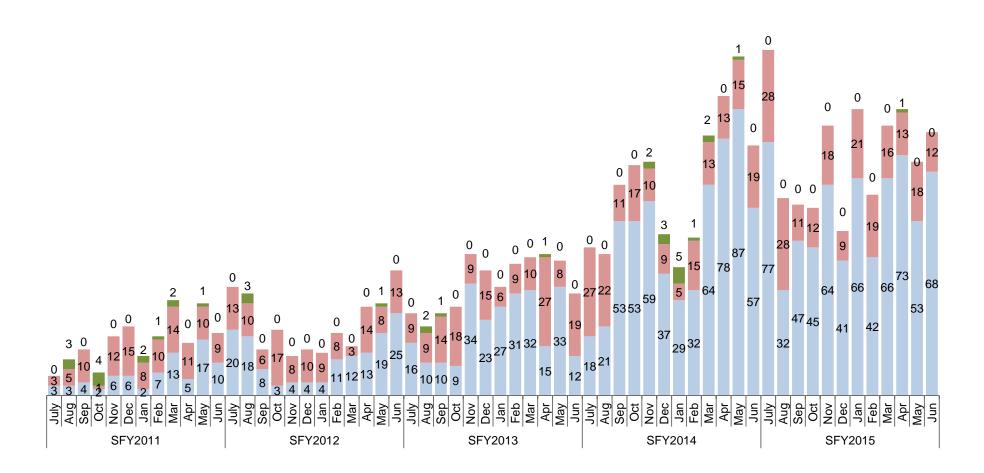
A Congregate Shelter Care is a licensed child care facility that provides emergency placement for abused, neglected, or abandoned children.

Statewide Admissions into Congregate Care of Children Under the Age of 6



Admissions Into Congregate Care of Children Under the Age of 6

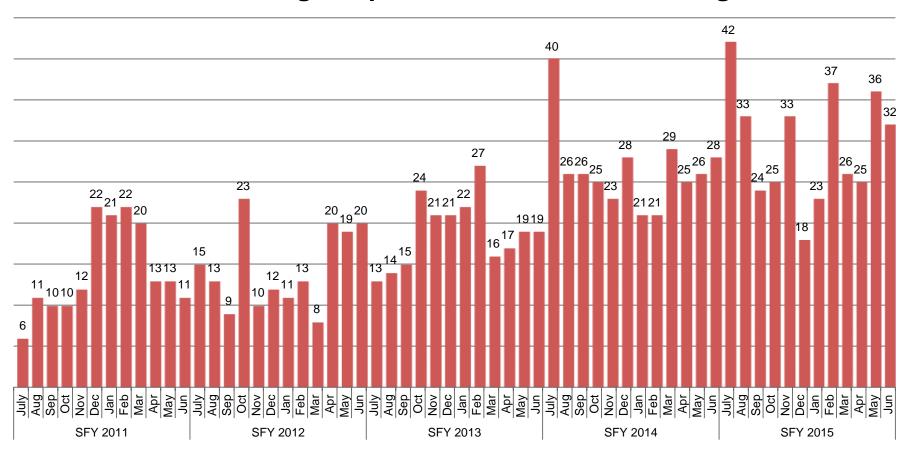
■ Clark County ■ Washoe County ■ DCFS Rural



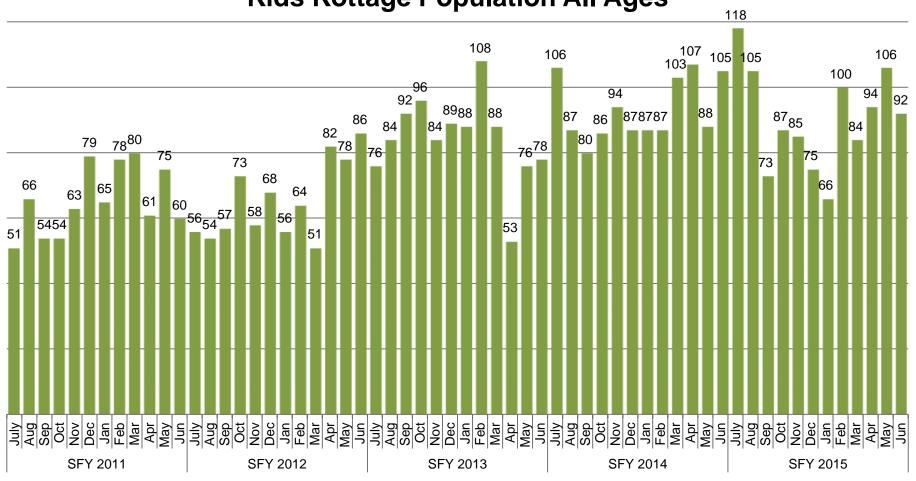
Kids Kottage

The Kids Kottages are protective shelters where police or social workers bring children after they have been removed from their families. They are temporary homes, operated 24 hours a day, under a contract with Washoe County Department of Social Services. Most children are at Kids Kottage because their families are suspected of severe abuse or neglect. However, some children are placed because no one else is available to care for them during parental incarceration or hospitalization.

Kids Kottage Population Under 6 Years of Age







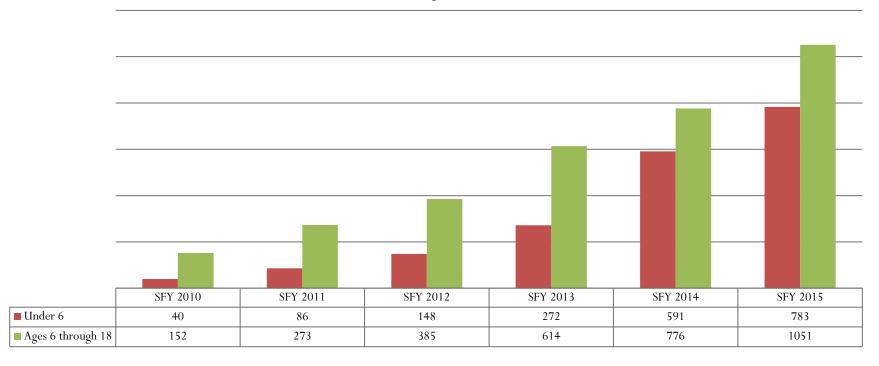
Child Haven

The Child Haven Shelter program was created as a Clark County placement option for abused, neglected, or abandoned children who require a protective environment. Child Haven Shelter is an alternative placement, providing resources and services for abused and neglected children and their families based on local needs. The Child Haven Shelter program provides emergency care for a smaller number of children when no other suitable placement option is available.

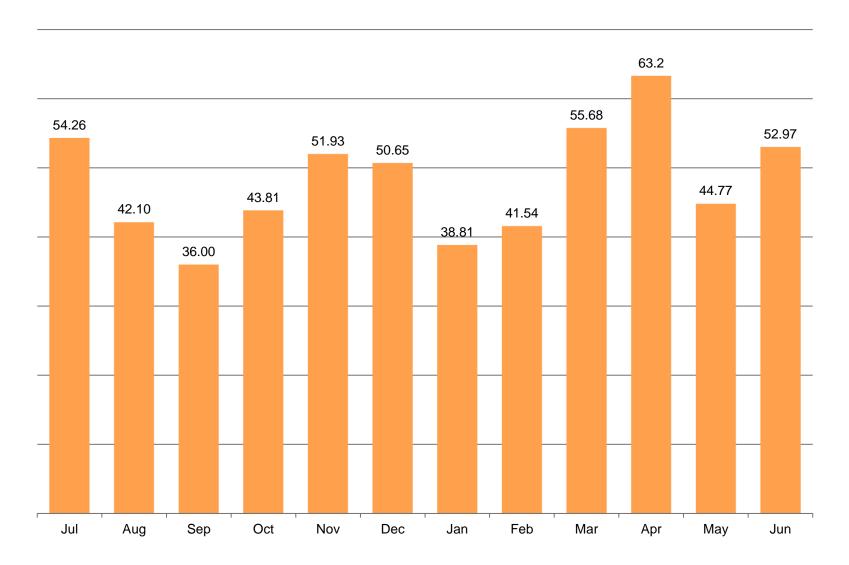
Child Haven Placements

■Under 6 ■ Ages 6 through 18

(Includes Duplicates)



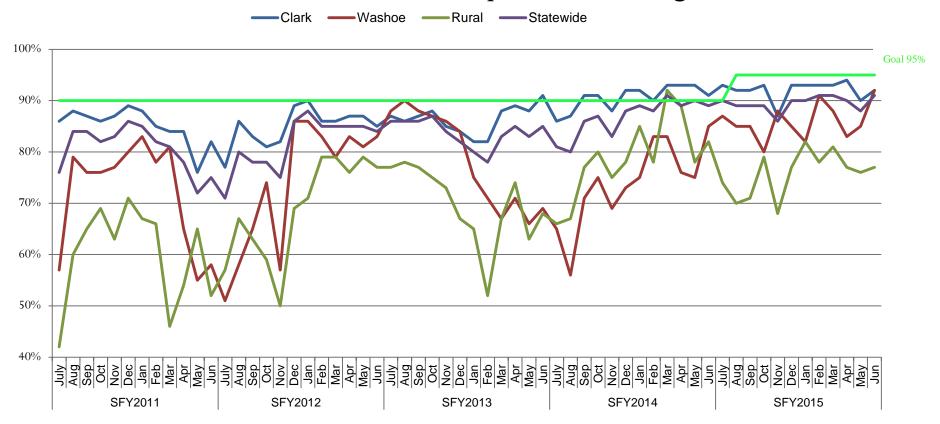
Child Haven SFY 2015 Average Daily Population



Caseworker Contact with Children

In accordance with the state plan requirements of Title IV-E of the Social Security Act, the child welfare agency must ensure that children, who are in foster care and under the responsibility of the agency, are visited on a monthly basis and that the caseworker visits are well-planned and focused on issues pertinent to case planning and service delivery to ensure the safety, permanency, and well-being of the children.

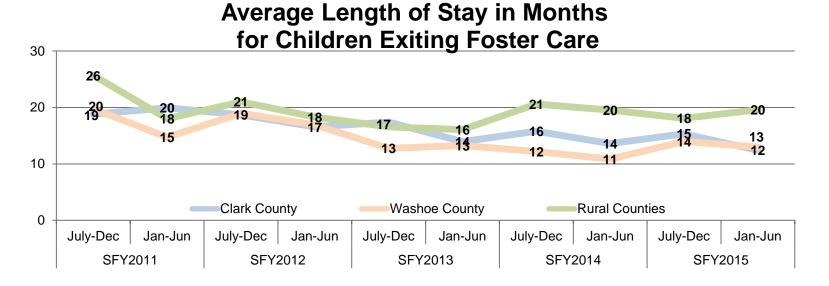
Caseworker Contact Compliance Percentage



Effective July 1, 2014, the Monthly Caseworker Contact Compliance rate goal was raised from 90% to 95%.

Length of Stay in Foster Care

Length of stay in foster care refers to the amount of time between entering and exiting foster care. Being removed from home and placed in foster care is a difficult and stressful experience for any child. The goal for every part of the child welfare system is for children to remain safely with their families or, if in out-of-home care, to return home as soon as safely possible.



Ave	rage Len	gth of S	tay in M	onths fo	r Childre	en Exiti	ng Foste	er Care		
	SFY	SFY2011		2012	SFY	2013	SFY	2014	SFY2015	
8	July- Dec	Jan- Jun								
Clark County	19	20	19	17	17	14	16	14	15	12
Washoe County	20	15	19	17	13	13	12	11	14	13
Rural Counties	26	18	21	18	17	16	21	20	18	20
Statewide	20	19	19	17	17	14	16	14	15	13

Services to Foster Youth Transitioning to Adulthood

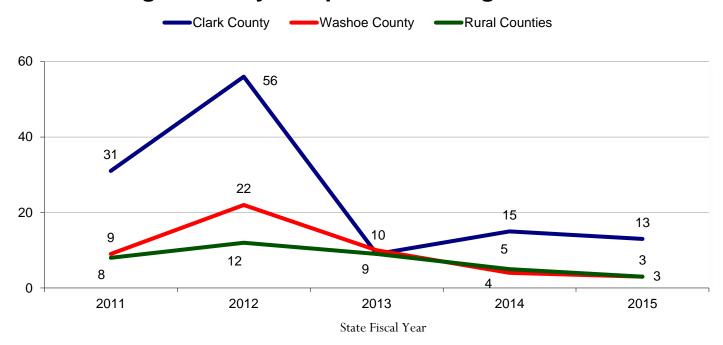
The goal of Nevada's Independent Living Program (IL) is to prepare young adults for the transition to adulthood and to provide opportunities to obtain the skills necessary for self-sufficiency. Independent Living, while commonly seen as a placement option, is not only a placement but also a set of services specifically designed around the needs of each youth in the program. DCFS is responsible for providing IL services in the 15 rural counties of the state and overseeing Clark and Washoe counties.

Youth in Placement, Age	15 and Up
Family Care	152
Pre-Adoptive Home	1
Residential Care	160
Shelter Care	23
Unpaid Placements	176
Independent Living	15
SFY 2015	

Youth in Placement with	
Goal of Emancipation	100
Family Care	48
Pre-Adoptive Home	0
Residential Care	71
Shelter Care	7
Unpaid Placements	32
Independent Living	7
SFY 2015	

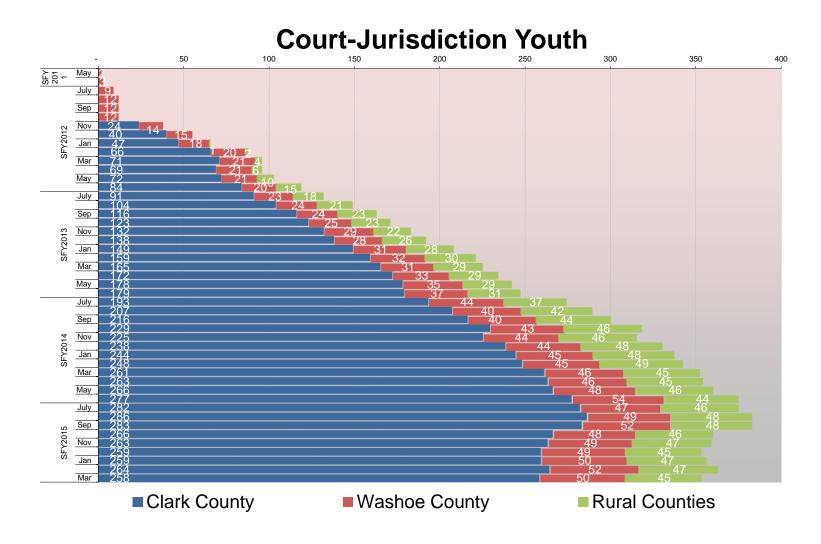
Independent Living		State	e Fiscal	Year	
Average Monthly Placements	2011	2012	2013	2014	2015
Clark County	31	56	9	15	13
Washoe County	9	22	10	4	3
Rural Counties	8	12	9	5	3
Statewide	47	90	28	24	19

Average Monthly Independent Living Placements



Court-Jurisdiction Youth

Assembly Bill 350 (AB 350), enacted in the 76th Session of the Nevada Legislature (2011) and signed into law by Governor Sandoval or May 18, 2011, provides that youth who "age out" of foster care (reach the age of majority while in foster care) continue in the jurisdiction of the court after the age of 18 under certain circumstances. The agency that provides child welfare services continues monetary payments to the youth while they remain in the jurisdiction of the court.



Adoption Placement and Subsidies

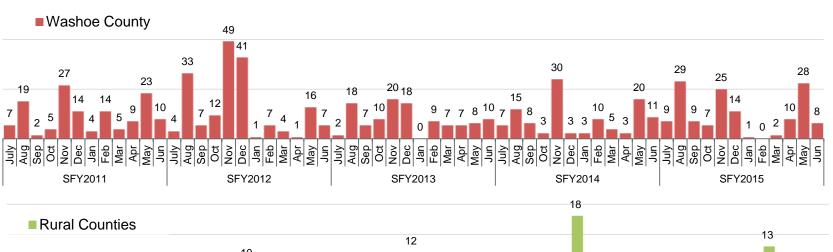
It is the policy of the agencies providing child welfare services to provide financial, medical, and social services assistance to adoptive parents, thereby encouraging and supporting the adoption of special-needs children from foster care. A statewide collaborative policy outlines the special-needs eligibility criteria, application process, types of assistance available, and the necessary elements of a subsidized adoption agreement.

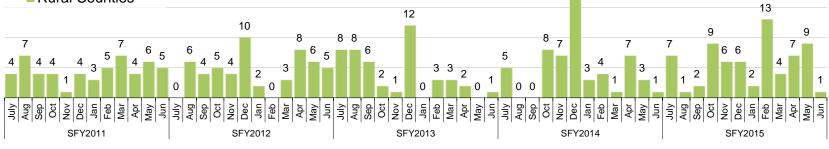
Finalized Adoptions by Month

		Cla	ark Cou	nty			Was	shoe Co	unty			Rur	al Coun	ties			St	atewide	е	
State Fiscal Year	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
Jul	38	35	51	31	51	7	4	2	7	9	4	0	8	5	7	49	39	61	43	67
Aug	48	71	52	65	55	19	33	18	15	29	7	6	8	0	1	74	110	78	80	85
Sep	44	48	36	18	34	2	7	7	8	9	4	4	6	0	2	50	59	49	26	45
Oct	41	64	64	41	72	5	12	10	3	7	4	5	2	8	9	50	81	76	52	88
Nov	53	72	83	110	91	27	49	20	30	25	1	4	1	7	6	81	125	104	147	122
Dec	43	89	124	90	79	14	41	18	3	14	4	10	12	18	6	61	140	154	111	99
Jan	49	7	5	7	16	4	1	0	3	1	3	2	0	3	2	56	10	5	13	19
Feb	71	13	17	21	28	14	7	9	10	0	5	0	3	4	13	90	20	29	35	41
Mar	53	39	18	32	40	5	4	7	5	2	7	3	3	1	4	65	46	28	38	46
Apr	41	25	36	31	0	9	1	7	3	0	4	8	2	7	0	54	34	45	41	0
May	43	65	27	35	0	23	16	8	20	0	6	6	0	3	0	72	87	35	58	0
Jun	83	44	101	25	0	10	7	10	11	0	5	5	1	1	0	98	56	112	37	0
Total	607	572	614	506	466	139	182	116	118	96	54	53	46	57	50	800	807	776	681	612

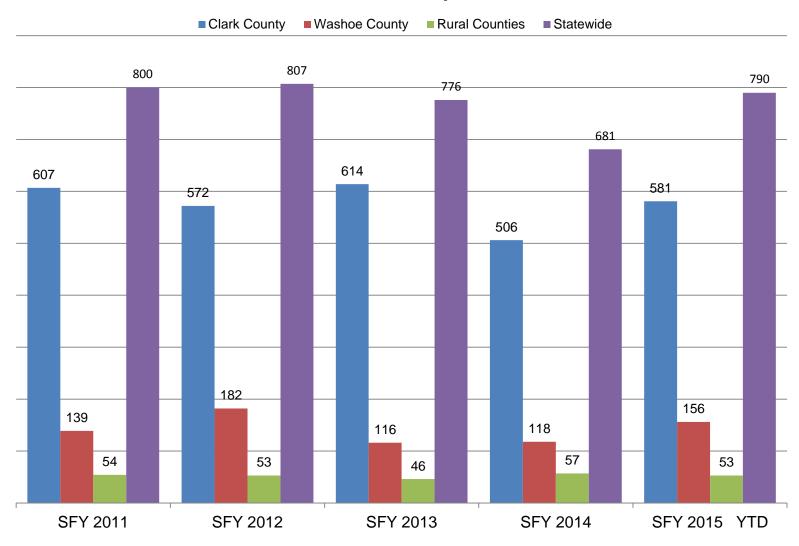
Monthly Finalized Adoptions



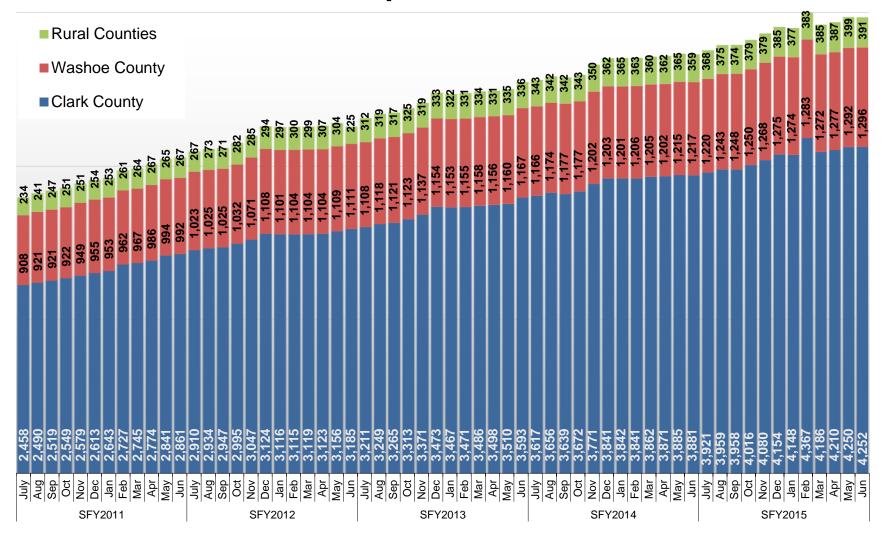




Finalized Adoptions



Active Adoption Subsidies



Finalized Adoptions by Age at Adoption

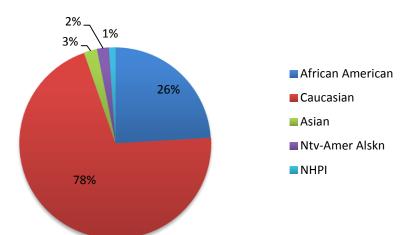
State Fiscal Year		Cla	ark Cour	nty		8 50	Was	hoe Co	unty			Rur	al Coun	ties		,	s	tatevid	e	
Age by Year	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
0	9	13	14	4	3	3	10	6	4	7	0	0	1	0	2	12	23	21	8	12
ា	51	60	72	86	87	16	23	- 5	18	28	2	4	2	2	4	69	87	79	106	119
2	84	81	92	76	98	17	33	16	17	25	1	3	3	6	- 5	102	117	111	99	128
3	69	64	66	48	70	14	19	14	12	15	8	6	2	3	6	91	89	82	63	91
4	62	61	60	39	45	18	19	8	15	14	9	0	0	8	5	89	80	68	62	64
5	51	34	47	41	43	14	11	7	4	. 12	6	4	7	. 5	6	71	49	61	50	61
6	36	44	40	37	40	10	12	11	7	8	6	2	3	4	- 5	52	58	54	48	53
7	47	42	35	34	35	9	11	13	3	7	1	6	4	6	2	57	59	52	43	44
8	30	33	34	18	26	4	15	4	7	7	3	5	4	6	1	37	53	42	31	34
9	30	25	37	26	29	8	2	6	9	10	3	3	3	1	4	41	30	46	36	43
10	29	26	34	24	22	5	10	5	3	4	4	4	6	4	2		40	45	31	28
11	25	21	13	15	30	4	4	5	5	6	2	5	2	2	3	31	30	20	22	39
12	23	15	22	16	16	4	1	4	4	1	2	3	2	3	1	29	19	28	23	18
13	20	15	17	12	12	4	3	2	5	. 7	3	0	4	3	1	27	18	23	20	20
14	16	14	9	14	12	5	4	5	2	3	2	5	1	1	0	23	23	15	17	15
15	11	9	10	7	4	3	3	3	1	0	0	3	0	2	1	14	15	13	10	5
16	11	9	6	4	6	1	1	2	1	2	2	0		0	3	14	10	9	5	11
17	3	6	6	5	3	0	1	0	1	0	0	0		1	2	3	7	7	7	5
other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	607	572	614	506	581	139	182	116	118	156	54	53	46	57	53	800	807	776	681	790

Finalized Adoptions by Age Group

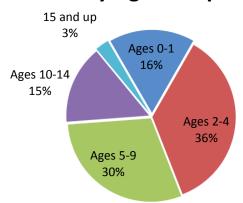
		CI	ark Cou	nty			Was	shoe Co	unty			Ru	ral Coun	ties			;	Statewid	le	
State Fiscal Year	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
Age 0-1	10%	13%	14%	18%	15%	14%	18%	9%	19%	22%	4%	8%	7%	4%	11%	10%	14%	13%	17%	17%
2-4	35%	36%	36%	32%	37%	35%	39%	33%	37%	35%	33%	17%	11%	30%	30%	35%	35%	34%	33%	36%
5-9	32%	31%	31%	31%	30%	32%	28%	35%	25%	28%	35%	38%	46%	39%	34%	32%	31%	33%	31%	30%
10-14	19%	16%	15%	16%	16%	16%	12%	18%	16%	13 %	24%	32%	33%	23%	13%	19%	16%	17%	17%	15%
15 and up	4%	4%	4%	3%	2%	3%	3%	4%	3%	1%	4%	6%	4%	5%	11%	4%	4%	4%	3%	3%

Total may not equal 100% due to rounding

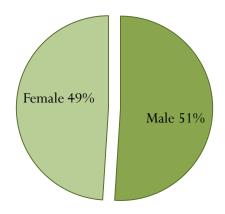
SFY 2015 Adoptions by Race



SFY 2015 Finalized Adoptions by Age Group



SFY 2015 Statewide Finalized Adoption **Percentage by Gender**



Budget Performance Measure: Children adopted within 24 months

This measure shows the percentage of children who exit foster care for a finalized adoption within 24 months of entry into care. Private adoptions are not included in this measure.

1	NO 20	SFY	2011		50.000.000	SFY	2012	041 00004	No. 20	SFY	2013	200700 000	20000000	SFY	2014	Det 00000	NS 20	SFY	2015	7777
	Clark	Washoe	Rural	Statewide	Clark	Washoe	Rural	Statewide	Clark	Washoe	Rural	Statewide	Clark	Washoe	Rural	Statewide	Clark	Washoe	Rural	Statewide
July	8%	14%	0%	8%	29%	0%	0%	26%	26%	0%	17%	25%	26%	33%	17%	26%	35%	89%	29%	42%
Aug	10%	21%	0%	12%	13%	34%	0%	19%	26%	43%	100%	38%	25%	33%	0%	26%	24%	21%	0%	23%
Sep	2%	0%	0%	2%	15%	17%	0%	14%	24%	71%	33%	32%	28%	25%	0%	27%	44%	22%	0%	38%
Oct	17%	20%	0%	16%	18%	0%	0%	14%	21%	0%	0%	17%	49%	33%	25%	44%	32%	71%	0%	32%
Nov	27%	12%	33%	22%	29%	39%	0%	32%	38%	44%	0%	39%	23%	37%	29%	26%	53%	56%	33%	52%
Dec	17%	7%	0%	13%	23%	48%	10%	29%	33%	22%	8%	29%	45%	33%	17%	40%	24%	29%	17%	29%
Jan	14%	50%	0%	16%	29%	100%	50%	40%	0%	0%	0%	0%	0%	0%	67%	15%	19%	50%	100%	26%
Feb	16%	36%	0%	18%	38%	29%	0%	35%	24%	13%	0%	18%	29%	50%	0%	31%	29%	67%	0%	38%
Mar	11%	33%	14%	13%	19%	25%	33%	21%	50%	57%	0%	46%	16%	0%	0%	13%	28%	0%	0%	24%
Apr	28%	22%	0%	25%	21%	0%	22%	21%	34%	40%	50%	36%	32%	0%	57%	34%	34%	50%	43%	38%
May	16%	22%	0%	17%	25%	60%	0%	30%	32%	25%	0%	30%	34%	30%	0%	31%	26%	32%	33%	29%
Jun	26%	10%	20%	24%	9%	43%	20%	15%	33%	0%	0%	30%	24%	55%	100%	37%	30%	25%	0%	27%

Juvenile Justice Services

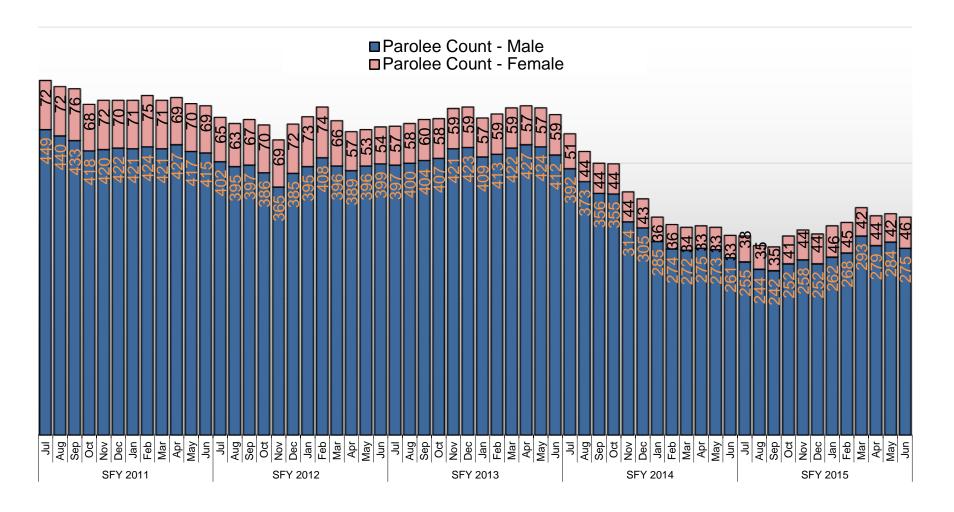
Juvenile Justice Services includes three residential training facilities, statewide supervision of youth on parole, statewide supervision for the Interstate Compact for the Placement of Juveniles, compliance oversight for the Juvenile Justice and Delinquency Prevention Act, and grant programs.

Youth committed for correctional care are generally placed in one of the centers for an average of six to nine months. Upon successful completion of the program in the facility, the youth are released into the community with supervision and case management services provided by Youth Parole. Youth committed for mental health treatment are placed directly on parole and receive treatment and case management services based on their identified needs. Juvenile Justice Services' primary mission is to protect the community while providing a secure and caring environment for youth which encourages them to develop competencies, repay their victims, and reduce or eliminate recidivism.

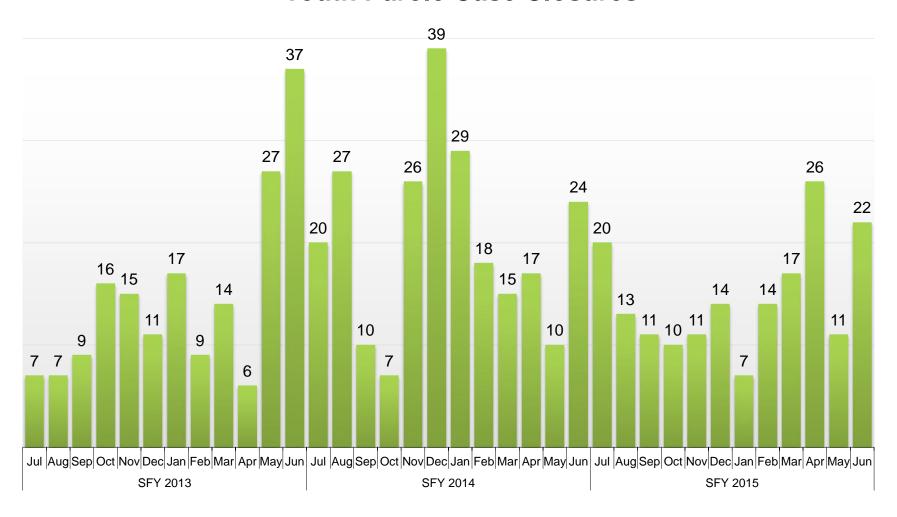
Youth Parole

The Youth Parole Bureau provides supervision and case management services for youth, ages 12 up to 21 years, who are committed to DCFS for correctional and/or mental health care; youth under the age of 12 years, who are committed to DCFS for correctional care but cannot by law be placed in a correctional program; and youth transferred to Nevada through the Interstate Compact on Juveniles. Services include the following: Academic Tutoring, Adoption Foster Care Analysis Reporting System (AFCARS) for Youth Parole, Day Treatment, Drug Court, Employment Development, Family Counseling, Gang Intervention, Gender-Specific Program, Group-Based Outpatient Treatment for Adolescent Substance Abuse, Hospitality International Training, Juvenile Sex Offenders, Location Monitoring, Mentoring, Parent Orientation Program, Psychiatric & Psychological Services, Sexually Exploited Youth, Skills Development, and Substance Abuse Counseling.

Youth Parole Month-End Population



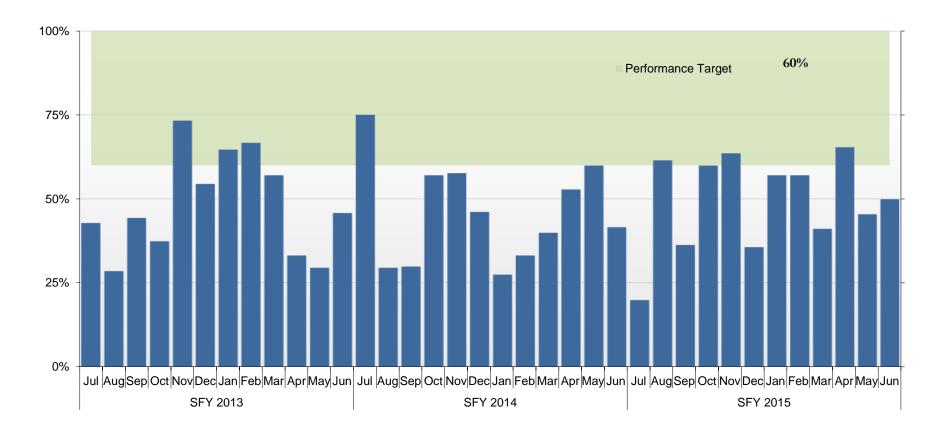
Youth Parole Case Closures



Budget Performance Measure: Youth successfully completing parole program

Youth Parole sets out a detailed parole program for the youth to follow to achieve successful completion, which includes counseling, school or work, and activities. This measure shows the percentage of youth successfully completing the parole program. There are three types of termination from parole: positive, general, and negative. Only youth receiving a positive or general termination from parole are considered to have successfully completed the parole program.

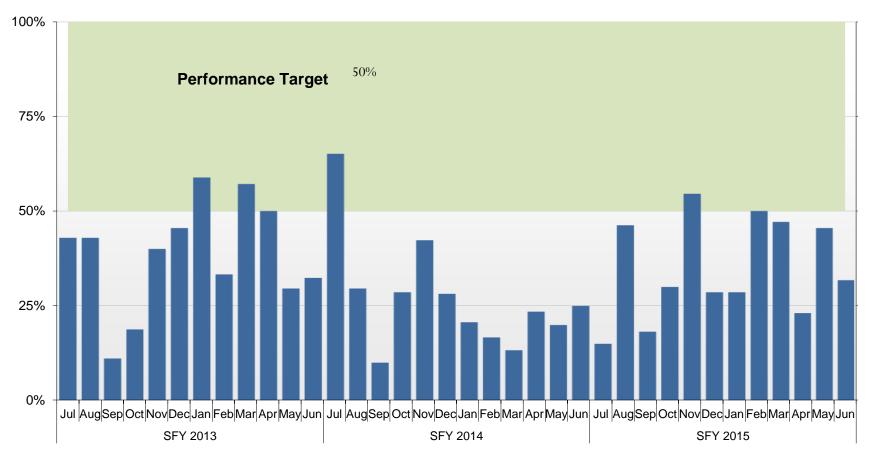
Youth with Successful Completion of Parole Program



Budget Performance Measure: Youth in school, training, or work at release

One factor to provide positive outcomes for juveniles on youth parole is to steer them toward their educational goals. This measure shows the percentage of youth who are involved in either: (1) school, (2) alternative education, (3) vocational training, or (4) employment at time of release from a youth parole program.

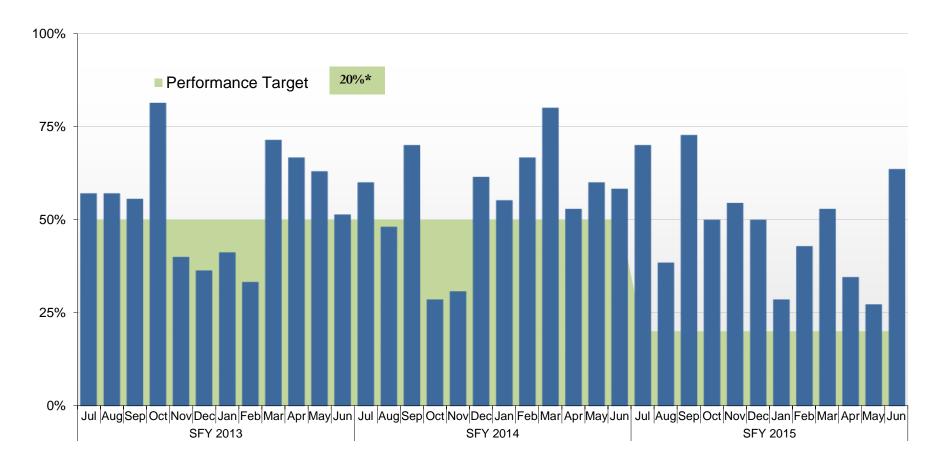
Youth in School, Training, or Work at Parole Release



Budget Performance Measure: Youth re-offending under youth parole supervision

A goal of youth parole is increasing law-abiding behavior and reducing incidence of offenses. This measure represents the percentage of youth under parole supervision adjudicated for technical violation of the terms of the parole release or for a new crime during their period of supervision.

Youth Reoffending While Under Parole Supervision



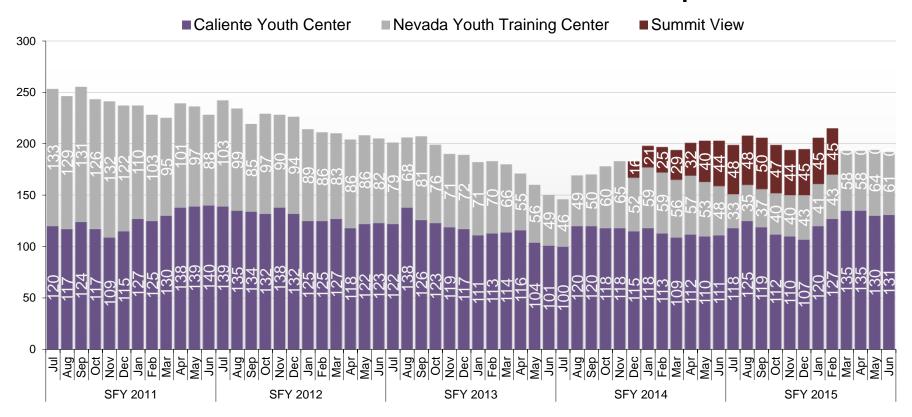
^{*}Effective July 1, 2014, the Performance Target was lowered from 50% to 20%.

Juvenile Correctional Care

The purpose of this activity is to ensure that children committed to the State of Nevada for correctional care receive effective services in a safe, secure, healthy, and therapeutic environment by trained, qualified staff.

Both centers provide educational and vocational programs, counseling in life skills and independent living skills, substance abuse and relapse prevention, anger management, grief counseling, and parenting classes. Additionally, specialized programming is offered based on individualized treatment needs and goals.

State Correctional Care End of Month Youth Population



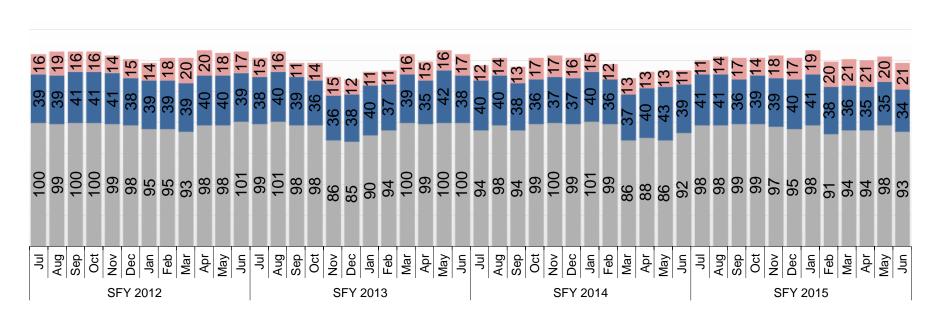
Services with Summit View began December (SFY 2014).

Youth Alternative Placement

Youth Alternative Community Placement provides local jurisdictions with the ability to implement community-based programming for youth at risk of being committed to state correctional care. Community-based programming has long proven more cost-effective and healthier for the youth. Families have more opportunities to participate in the treatment, and youth have more opportunity to integrate effectively back into their own communities. Examples of services include intensive supervision programs, mental health and substance abuse treatment, evening reporting centers, academic programming, and county youth camps. County youth camps consist of three facilities: (1) China Spring Youth Camp, (2) Aurora Pines Girls Facility, and (3) Spring Mountain Youth Camp.

Youth Alternative Placements End of Month Youth Population





Mental/Behavioral Health Services

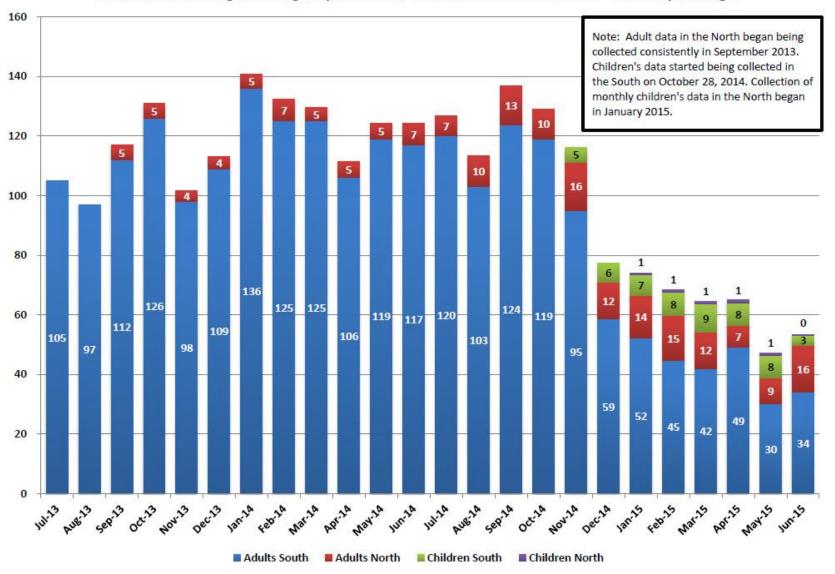
Mental/Behavioral Health Services provides community-based and outpatient services to families in the state, many of whom would enter the child welfare or juvenile justice systems without appropriate treatment and intervention. DCFS' nationally recognized program, Wraparound in Nevada (WIN), provides children, with serious emotional disturbances, intensive targeted case management services. DCFS' mental health programming also includes early childhood services, residential care such as family learning homes, a residential treatment center for adolescents, and an acute residential treatment center.

Outpatient Treatment Services

The purpose of this activity is to provide comprehensive, individualized mental health care to emotionally disturbed children, ages 6 to 18, and their families, and young children, ages birth to six years of age with deficits, and their families and communities. The clientele in the 6–to–18 age group often have multiple and serious life challenges. The goal of these services, focused on the child's strengths and needs, is to reduce challenging behaviors; increase positive behaviors and emotions; treat and manage mental health symptoms; improve functioning at home, in school and in the community; strengthen parent-child relationships; and facilitate the child's resiliency and recovery.

The purpose of Early Childhood Mental Health Services (ECMHS) is to support the social and emotional development of young children with deficits by providing comprehensive mental health services to children ages birth to six years of age, their families, and the communities in which they live. ECMHS works with the whole family to support and train parents how to create relationships with their children that will, in turn, allow them to develop age-appropriate and healthy social and emotional skills.

Individuals Waiting in Emergency Rooms for Behavioral Health Services - Monthly Average



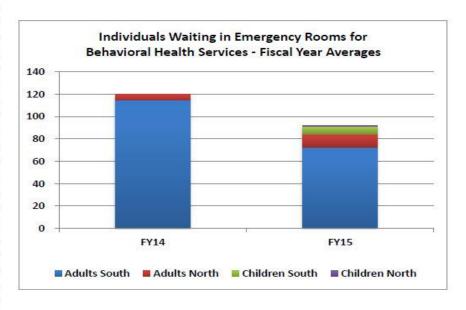
Individuals Waiting in Emergency Rooms for Behavioral Health Services

Monthly Average

	Adults South	Adults North	Children South	Children North	Total
Jul-13	105				105
Aug-13	97				97
Sep-13	112	5			117
Oct-13	126	5			131
Nov-13	98	4			102
Dec-13	109	4			113
Jan-14	136	5			141
Feb-14	125	7			132
Mar-14	125	5			130
Apr-14	106	5			111
May-14	119	5			124
Jun-14	117	7			124
Jul-14	120	7			127
Aug-14	103	10			113
Sep-14	124	13			137
Oct-14	119	10			129
Nov-14	95	16	5		116
Dec-14	59	12	6		77
Jan-15	52	14	7	1	74
Feb-15	45	15	8	1	69
Mar-15	42	12	9	1	64
Apr-15	49	7	8	1	65
May-15	30	9	8	1	47
Jun-15	34	16	3	0	53

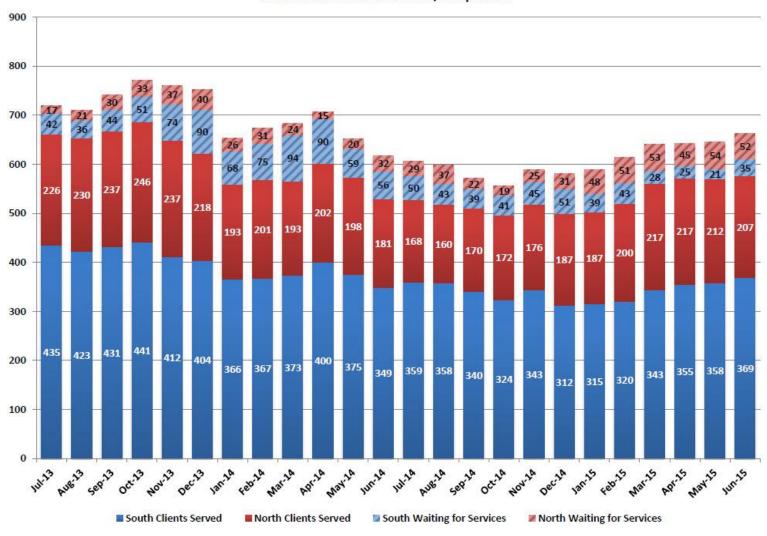
Fiscal Year Averages

Fiscal Year	Adults South	Adults North	Children South	Children North	Total	Percent Change
FY14	115	5			119	
FY15	73	12	7	1	89	-25%



Note: Adult data in the North began being collected consistently in September 2013. Children's data started being collected in the South on October 28, 2014. Collection of monthly children's data in the North began January 2015.

Children's Clinical Services/Outpatient

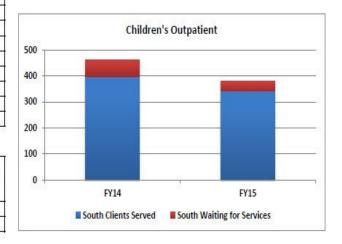


Children's Clinical Services/Outpatient

	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Total Served	Total Waiting for Services
Jul-13	435	42	226	17	661	59
Aug-13	423	36	230	21	653	57
Sep-13	431	44	237	30	668	74
Oct-13	441	51	246	33	687	84
Nov-13	412	74	237	37	649	111
Dec-13	404	90	218	40	622	130
Jan-14	366	68	193	26	559	94
Feb-14	367	75	201	31	568	106
Mar-14	373	94	193	24	566	118
Apr-14	400	90	202	15	602	105
May-14	375	59	198	20	573	79
Jun-14	349	56	181	32	530	88
Jul-14	359	50	168	29	527	79
Aug-14	358	43	160	37	518	80
Sep-14	340	39	170	22	510	61
Oct-14	324	41	172	19	496	60
Nov-14	343	45	176	25	519	70
Dec-14	312	51	187	31	499	82
Jan-15	315	39	187	48	502	87
Feb-15	320	43	200	51	520	94
Mar-15	343	28	217	53	560	81
Apr-15	355	25	217	45	572	70
May-15	358	21	212	54	570	75
Jun-15	369	35	207	52	576	87

Fiscal Year Averages

Fiscal Year	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Total Served	Total Waiting for Services
FY14	398	65	214	27	612	92
FY15	341	38	189	39	531	77



Mobile Crisis Response Team

The Mobile Crisis Response Team is designed to reduce unnecessary psychiatric hospitalizations and placement disruptions of children and youth, and to reduce the need for youth to go to emergency rooms or detention centers to have their mental and behavioral health needs addressed. Mobile crisis response services provide immediate care and treatment from specialized teams, which include qualified mental health professionals and psychiatric case managers to any child or adolescent requiring support and intervention with a psychiatric emergency.



Mobile Crisis

			Children	South	000			77	Children	North		
	Total Calls	Clients Served (Team Responded)	Hospitalization	Hospital Diversion	Stabilization Recommended	Hospital Diversion Rate	Total Calls	(Team Responded)	Hospitalization	Hospital Diversion	Stabilization Recommended	Hospital Diversion Rate
Jul-14	15	12	3	9	9	75%						-
Aug-14	20	17	1	16	9	94%			1 0			
Sep-14	32	16	0	16	9	100%						
Oct-14	37	25	0	25	23	100%						
Nov-14	50	36	3	33	28	92%	18	8	1	7	6	88%
Dec-14	57	37	4	33	27	89%	21	9	2	7	6	78%
Jan-15	60	52	5	47	43	90%	34	17	5	12	11	71%
Feb-15	71	62	12	50	42	81%	48	27	4	23	22	85%
Mar-15	95	71	12	59	51	83%	42	13	5	8	8	62%
Apr-15	104	63	6	57	37	90%	45	22	6	16	14	73%
May-15	90	54	6	48	26	89%	52	24	1	23	17	96%
Jun-15	38	28	3	25	19	89%	23	7	0	7	6	100%

		Adults 9	South	
	Clients Served	Hospitalization	Hospital Diversion	Hospital Diversion Rate
Jul-14	151	50	101	67%
Aug-14	128	58	70	55%
Sep-14	161	79	82	51%
Oct-14	218	113	105	48%
Nov-14	150	85	65	43%
Dec-14	258	169	89	34%
Jan-15	176	116	61	35%
Feb-15	147	100	47	32%
Mar-15	114	73	41	36%
Apr-15	148	106	42	28%
May-15	94	64	30	32%
Jun-15	27	20	7	26%

	i i	Total Clie	nts Served	
	Adults South	Children South	Children North	Total
Jul-14	151	12		163
Aug-14	128	17		145
Sep-14	161	16		177
Oct-14	218	25		243
Nov-14	150	36	8	194
Dec-14	258	37	9	304
Jan-15	176	52	17	245
Feb-15	147	62	27	236
Mar-15	114	71	13	198
Apr-15	148	63	22	233
May-15	94	54	24	172
Jun-15	27	28	7	62

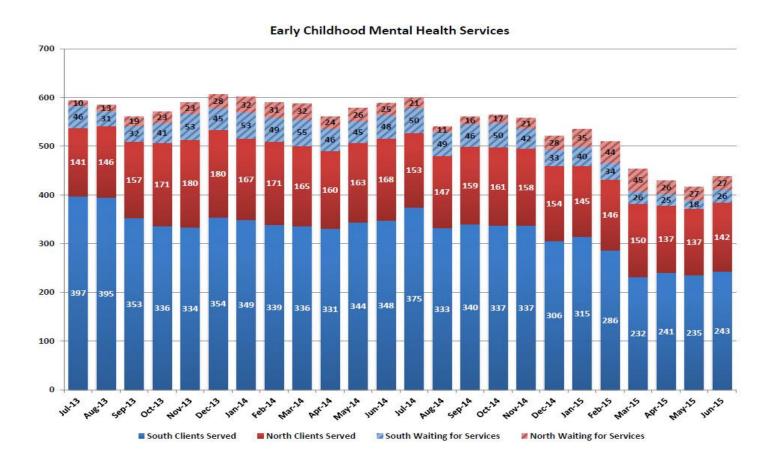
Fiscal Year Totals

	Adults South		Children South		Children North		Total	
Fiscal Year	Clients Served	Hospital Diversion Rate						
FY14			96	90%	i.			
FY15	1,772	42%	473	88%	127	81%	2,372	53%

Note: Adult South data is not available prior to July 2014. Children's Mobile Crisis Response Teams began in January 2014 in the South and November 2014 in the North.

Inpatient Treatment Services

The purpose of inpatient psychiatric services is to provide quality, individualized inpatient mental health treatment in a safe and culturally sensitive environment for children and adolescents with the most severe emotional disturbances. Primary activities include acute psychiatric care to youth at immediate risk of harm to themselves or others, including intense therapeutic services and short-term care until the immediate risk of harm is no longer present; and residential treatment care, including less-intense therapeutic services than acute care; longer-term care for chronic mental health conditions that require longer-term inpatient treatment in order for the youth to transition to community-based treatment; and specialized treatment for males adjudicated on sexual offenses.

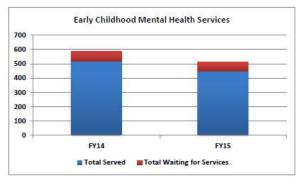


Early Childhood Mental Health Services

	So	uth	No	orth	To	otal
	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Total Served	Total Waiting for Services
Jul-13	397	46	141	10	538	56
Aug-13	395	31	146	13	541	44
Sep-13	353	32	157	19	510	51
Oct-13	336	41	171	23	507	64
Nov-13	334	53	180	23	514	76
Dec-13	354	45	180	28	534	73
Jan-14	349	53	167	32	516	85
Feb-14	339	49	171	31	510	80
Mar-14	336	55	165	32	501	87
Apr-14	331	46	160	24	491	70
May-14	344	45	163	26	507	71
Jun-14	348	48	168	25	516	73
Jul-14	375	50	153	21	528	71
Aug-14	333	49	147	11	480	60
Sep-14	340	46	159	16	499	62
Oct-14	337	50	161	17	498	67
Nov-14	337	42	158	21	495	63
Dec-14	306	33	154	28	460	61
Jan-15	315	40	145	35	460	75
Feb-15	286	34	146	44	432	78
Mar-15	232	26	150	45	382	71
Apr-15	241	25	137	26	378	51
May-15	235	18	137	27	372	45
Jun-15	243	26	142	27	385	53

Fiscal Year Averages

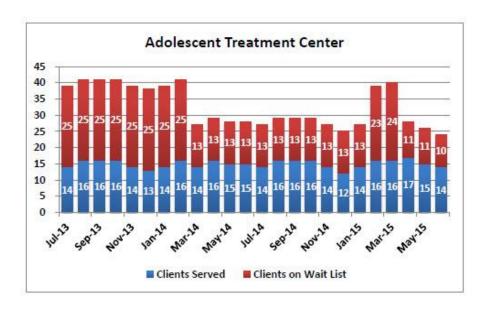
Fiscal Year	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Total Served	Total Waiting for Services
FY14	351	45	164	24	515	69
FY15	298	37	149	27	447	63

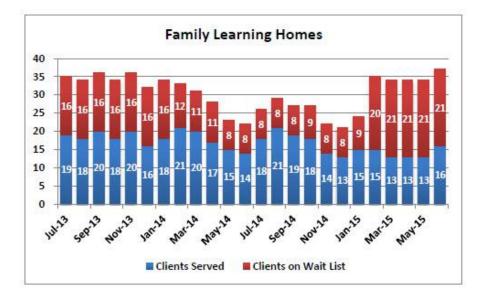


Residential Rehabilitation Services

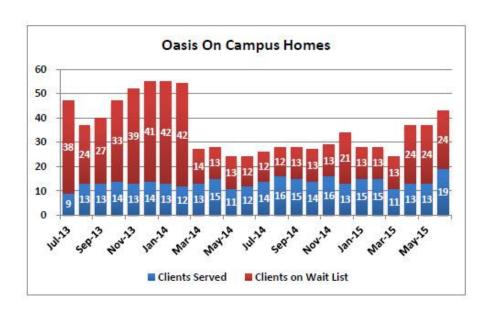
One of DCFS' goals is to ensure that children with the most severe emotional and behavioral problems live in a safe, healthy, and positive treatment environment focused on resiliency and recovery. Treatment homes provide a structured, supervised, and therapeutic living environment for children and adolescents who cannot live safely in a family home or foster home. These children were discharged or denied services from community private providers due to severe emotional and behavioral disturbances, developmental disabilities, specialized needs, and/or severe aggression toward themselves and others.

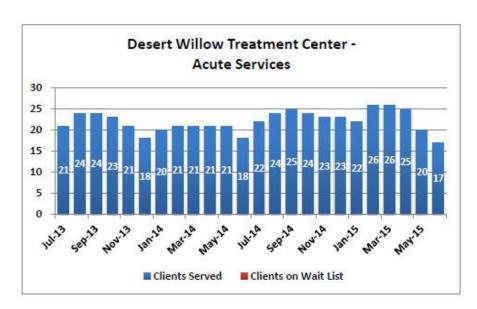
Children's Mental Health - North

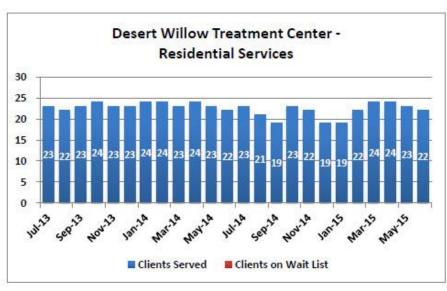




Children's Mental Health - South







Children's Mental Health - South

	Oas	sis On Campus Hor	nes	Desert Willow	Desert Willow Treatment Center - Acute Services			Desert Willow Treatment Center - Residential Services		
	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay	
Jul-13	9	38	160	21	0	76	23	0	94	
Aug-13	13	24	109	24	0	63	22	0	55	
Sep-13	13	27	139	24	0	61	23	0	66	
Oct-13	14	33	160	23	0	60	24	0	82	
Nov-13	13	39	175	21	0	71	23	0	66	
Dec-13	14	41	179	18	0	98	23	0	87	
Jan-14	13	42	135	20	0	59	24	0	82	
Feb-14	12	42	165	21	0	60	24	0	103	
Mar-14	13	14	162	21	0	70	23	0	99	
Apr-14	15	13	169	21	0	70	24	0	91	
May-14	11	13	156	21	0	81	23	0	81	
Jun-14	12	12	161	18	0	82	22	0	68	
Jul-14	14	12	160	22	0	76	23	0	81	
Aug-14	16	12	118	24	0	85	21	0	103	
Sep-14	15	13	83	25	0	66	19	0	91	
Oct-14	14	13	79	24	0	86	23	0	75	
Nov-14	16	13	97	23	0	94	22	0	70	
Dec-14	13	21	99	23	0	98	19	0	87	
Jan-15	15	13	111	22	0	95	19	0	99	
Feb-15	15	13	97	26	0	93	22	0	96	
Mar-15	11	13	114	26	0	112	24	0	103	
Apr-15	13	24	102	25	0	114	24	0	91	
May-15	13	24	130	20	0	146	23	0	92	
Jun-15	19	24	98	17	0	128	22	0	91	

Note: A clean-up of the waitlist occurred in March 2014.

Fiscal Year Averages

Fiscal Year	Oas	sis On Campus Hor	nes	Desert Willow	Treatment Center	- Acute Services	Desert Willow	V Treatment Cente Services	nt Center - Residential ces	
riscai Teal	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay	
FY14	13	28	156	21	0	71	23	0	81	
FY15	15	16	107	23	0	99	22	0	90	

Children's Mental Health - North

	Adole	scent Treatment	Center	Fai	mily Learning Hor	nes
	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay
Jul-13	14	25	67	19	16	85
Aug-13	16	25	62	18	16	68
Sep-13	16	25	88	20	16	88
Oct-13	16	25	86	18	16	97
Nov-13	14	25	91	20	16	99
Dec-13	13	25	98	16	16	86
Jan-14	14	25	82	18	16	68
Feb-14	16	25	98	21	12	82
Mar-14	14	13	100	20	11	107
Apr-14	16	13	83	17	11	123
May-14	15	13	97	15	8	130
Jun-14	15	13	91	14	8	106
Jul-14	14	13	88	18	8	61
Aug-14	16	13	74	21	8	61
Sep-14	16	13	104	19	8	76
Oct-14	16	13	102	18	9	105
Nov-14	14	13	122	14	8	122
Dec-14	12	13	95	13	8	104
Jan-15	14	13	84	15	9	96
Feb-15	16	23	62	15	20	104
Mar-15	16	24	71	13	21	82
Apr-15	17	11	97	13	21	82
May-15	15	11	116	13	21	97
Jun-15	14	10	104	16	21	61

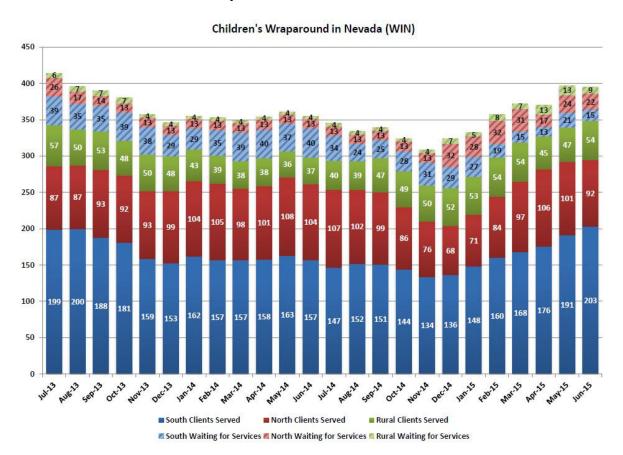
Note: A clean-up of the waitlist occurred in March 2014.

Fiscal Year Averages

Fiscal Year	Adole	scent Treatment	Center	Family Learning Homes			
	Clients Served	Clients on Wait List	Average Length of Stay	Clients Served	Clients on Wait List	Average Length of Stay	
FY14	15	21	87	18	14	95	
FY15	15	14	93	16	14	87	

Intensive Care Coordination Services

DCFS' nationally recognized "Promising Practice" program, Wraparound in Nevada (WIN), provides intensive community-based services to Severely Emotionally Disturbed Children (SED), ages birth to 18 years, who are in the custody of the Child Welfare System. Through WIN, youth and families are provided the opportunity to become equal participants in their case planning and receive support necessary to gain family independence. Services include assessment, case planning, linkage to services, monitoring the success of services, crisis response, immediate and responsive plans, and service adjustments as client needs change. WIN ensures that all community members and professionals work together to streamline services, avoid duplication of services, and communicate clearly with families and children.



Children's Wraparound in Nevada (WIN)

	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Rural Clients Served	Rural Waiting for Services	Total Served	Total Waiting for Services
Jul-13	199	39	87	26	57	6	343	71
Aug-13	200	35	87	17	50	7	337	59
Sep-13	188	35	93	14	53	7	334	56
Oct-13	181	39	92	13	48	7	321	59
Nov-13	159	38	93	13	50	4	302	55
Dec-13	153	29	99	13	48	4	300	46
Jan-14	162	29	104	13	43	4	309	46
Feb-14	157	35	105	13	39	4	301	52
Mar-14	157	39	98	13	38	4	293	56
Apr-14	158	40	101	13	38	4	297	57
May-14	163	37	108	13	36	4	307	54
Jun-14	157	40	104	13	37	4	298	57
Jul-14	147	34	107	13	40	4	294	51
Aug-14	152	24	102	13	39	4	293	41
Sep-14	151	25	99	13	47	4	297	42
Oct-14	144	28	86	13	49	4	279	45
Nov-14	134	31	76	13	50	4	260	48
Dec-14	136	29	68	32	52	7	256	68
Jan-15	148	27	71	28	53	5	272	60
Feb-15	160	19	84	32	54	8	298	59
Mar-15	168	15	97	31	54	7	319	53
Apr-15	176	13	106	17	45	13	327	43
May-15	191	21	101	24	47	13	339	58
Jun-15	203	15	92	22	54	9	349	46

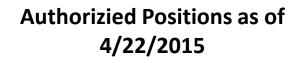
Fiscal Year Averages

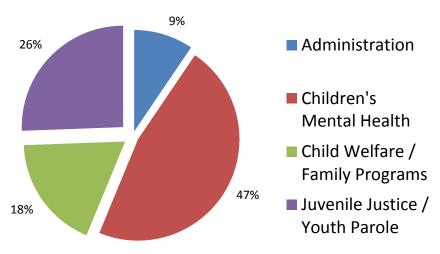
Fiscal Year	South Clients Served	South Waiting for Services	North Clients Served	North Waiting for Services	Rural Clients Served	Rural Waiting for Services	Total Served	Total Waiting for Services
FY14	170	36	98	15	45	5	312	56
FY15	159	25	92	20	48	7	299	52

Administrative and Support Services

Personnel and Payroll

Personnel provides service in all areas of DCFS employment, including, but not limited to: hiring, developing, and retaining qualified employees who model DCFS values and contribute to the attainment of DCFS goals; attaining positive, productive, ethical, and legal employee-employer relationships; ensuring legal compliance with Human Resource requirements; and protecting DCFS employees, property, and finances from avoidable loss. As an integral part of DCFS' strategic planning and policy development, the Personnel unit's responsibilities are grouped into three functional areas of counseling, service, and control.





Staff Positions as of 4/22/2015

	Authorized	Filled	% Filled
Administration	86	81	94%
Children's Mental Health	424	384	91%
Child Welfare / Family Programs	165	133	81%
Juvenile Justice / Youth Parole	232	192	83%
Total	907	790	87%

Systems Advocate Unit

The Systems Advocate Unit was established by the Nevada State Legislature in 2003 to help the Department of Health and Human Services and DCFS resolve concerns and protect children who are receiving services from DCFS. The purpose of the Systems Advocate Unit is to respond to complaints from consumers, service providers, elected officials, stakeholders, and interested citizens to ensure that proper services are provided by DCFS.

Furthermore, the Systems Advocate performs the duties of the agency Hearing Officer and has the responsibility to make available a fair hearing process. The Systems Advocate is the key point of contact between DCFS, the Department of Health and Human Services, and the Nevada State Legislature as well as media.

Inquiries by Subject Matter April 1, 2015 through May 30, 2015 18% 18% 27% 5% 2% 2% ■ Abuse/Neglect ■ Foster Care/Adoption Other Agency Assistance Children's Mental Health ■ Employment/Legislative/Media ■ Juvenile Justice Services Total Inquiries this quarter = 40

CFSR Results and Data Indicators

Outcomes	Items	2010 Baseline	Target	Status Quarter
Safety 1	1. Timelines of investigations	76.19	80.4	81.0(8)
Safety 2	3. Services to protected children in home	70.45	74.9	76.1(4)
	4. Risk of harm	48.39	52.5	54.8(4)
Permanency 1	7. Permanency goal for child	57.14	62	61.9(8)
	10. Other planned living arrangement	50	61.3	62.5(4)
Well-Being 1	17. Needs/services of child, parent and foster parents	41.94	46	46.8(4)
	18. Child/family involvement in case planning	44.07	48.2	54.2(4)
	19. Caseworker visits with child	56.45	60.5	71.0(7)
	20. Caseworker visits with parents	45.28	49.7	50.9(7)

National Standard Indicators	Standard	NSI at 2009 CFSR	Initial AAI	FFY Met
S1-Absence of maltreatment	94.6	93.6	94.2	95.1/2008
S2-Absence of child abuse and neglect in foster care	99.68	99.61	99.64	99.66% 2014
P1-Timeliness and permanency of reunification	122.6	153	N/A	153/2009
P2-Timeliness of Adoptions	106.4	82.8	83.1	84.7/2009
P3-Timeliness for children and youth in foster care for long periods of time	121.7	120.3	123.7	132.3/2008
P4- Placement stability	101.5	83.1	85.6	86.6/2009

MEASURES	National Standard		FY2010	FY2011	FY2012	FY2013
Safety Indicator 1: Absence of Maltreatment Recurrence	94.6%	Λ.	94.5%	93.6%	95.1%	96.2
Safety Indicator 2: Absence of CA/N in foster Care PIP Target is 99.64	99.68%	1	99.40%	99.59%	99.35%	99.53 99.66
Permanency Composite 1: Timeliness and Permanency of Reunification	122.6	Λ.	134.4	134.3	126.9	131.4
Component A: Timeliness of Reunification						
C1.1 Reunification in less than 12 months for children exiting foster care	75.2%	1	69.3%	72.2%	66.4%	71.3%
C1.2 Median stay in foster care to reunification (months)	5.4	Ψ.	6.4	5.9	7.2	6.7
C1.3 Entry cohort of children who reunify in < 12 months	48.4%	Λ.	43.5 %	34.1%	38.6%	36.3%
Component B: Permanency of Reunification						
C1.4 Children who exit and re-enter foster care in less than 12 months	9.9%	Ψ.	6.8%	7.3%	8.3%	7.8%
Permanency Composite 2: Timeliness of Adoptions	106.4	Λ.	108.9	114.5	134.8	145.1
Component A: timeliness of Adoptions of Children Discharged From Foster Care						
C2.1 Adoption in less than 24 months for children exiting to adoption		1	14.6%	18.1%	25.0%	27.8%
C2.2 Median length of stay to adoption (months)		Ψ.	36.3	35.4	30.7	29.0
Component B: Adoption for Children Meeting ASFA Time-In-Care Requirements						
C2.3 Children in foster care for 17 or more months (on day 1 of FY) who were adopted by the end of the FY	22.7%	^	29.5%	37.8%	37.0%	36.7%
C2.4 Children in foster care for 17 or more months (on day 1 of FY) who achieved legal freedom within 6 months of start of FY	10.9%	↑	21.8%	16.0%	18.9%	19.3%
Component C: Adoption of Children Who are Legally Free for Adoption						
C2.5 Legally free children adopted in less than 12 months	53.7%	^	42.6%	45.3%	62.6%	65.7%

MEASURES	National Standard		FY2010	FY2011	FY2012	FY2013
Permanency Composite 3: Achieving Permanency for Children in Foster Care For Long Period of	121.7	1	141.6	144.9	139.7	141.2
Time						
Component A: Achieving permanency for Children in Care for Extended Periods of Time						
C3.1 Children (age 17 during the FY) in foster care 24+ months discharged to permanent home	29.1%	1	39.9%	47.1%	45.4%	43.1%
before the end of FY and age 18						
C3.2 Children (age 17 during the FY) with TPR discharged from foster care to a permanent home	98.0%	1	95.8%	97.2%	95.8%	95.4%
prior to age 18						
Component B: Children Emancipated Who Were in foster Care for Extended Periods of Time						
C3.3 Children emancipated/age 18 who were in foster care for 3 years or longer	37.5%	\downarrow	37.2%	43.4%	41.9%	38.7%
Permanency Composite 4: Placement Stability (no components)		1	93.3	91.4	90.5	91.1
C4.1 Two or fewer placement settings for children in foster care less than 12 months		1	82.8%	80.0%	81.5%	81.3%
C4.2 Two or fewer placement setting for children in foster care for 12 to 24 months		1	62.0%	61.7%	58.0%	61.0%
C4.3 Two or fewer placement settings for children in foster care for 24+ months	41.8%	1	31.4%	32.0%	30.6%	29.5%